

<b>Title of report</b>	Assurance Report as of 31 December 2021
<b>Public/Confidential</b>	Public
<b>Summary/purpose of report</b>	<p>To provide performance, financial and risk information which:</p> <ul style="list-style-type: none"> <li>• assesses delivery of our strategy through the analysis of strategic performance indicators</li> <li>• highlights areas of concern</li> <li>• identifies corrective action required.</li> </ul> <p>The report identifies variance to expected performance and any impact or risk this may have on the strategic objective to which the KPI relates. Actuals are measured against an initial forecast with the KPI owner providing an explanation for variance. If there are negative variances the KPI owner details corrective actions.</p>
<b>Recommendations</b>	<p>The Audit and Assurance Committee is asked to:</p> <ol style="list-style-type: none"> <li>1. endorse the direction of travel for the strategic measures</li> <li>2. approve the risk register position</li> <li>3. approve the revised summary for inclusion in future reports.</li> </ol>
<b>Author</b>	Laura Shepherd, Director of Strategy and Performance
<b>Responsible Officer</b>	Lorraine Gray, Chief Executive

<b>Links to Strategic Plan</b>	<p>The information in this report links to:</p> <p>Outcome 1: People who use services are protected by ensuring the regulated workforce is fit to practise.</p> <p>Outcome 2: The SSSC supports and enhances the development of the registered workforce to deliver high standards of practice and drive improvement.</p> <p>Outcome 3: Our workforce planning activities support employers, commissioners and policy makers to deliver a sustainable, integrated and innovative workforce.</p> <p>Outcome 4: The social work, social care and early years workforce is recognised as professional and regulated and valued for the difference it makes to people's lives.</p>
<b>Link to the Strategic Risk Register</b>	<p>Strategic Risk 5: We fail to provide value to our stakeholders and demonstrate our impact.</p>
<b>Documents attached</b>	<p>Appendix 1: Full 2021/22 Strategic Risk Register.</p>

# ASSURANCE REPORT AS OF 31 DECEMBER 2021

Audit and Assurance Committee Meeting Version  
03 February 2022  
Agenda item: 05, Report no: 01/2022  
Action: For Decision

## PERFORMANCE SUMMARY

Key performance indicator	Current position	Year-end position	Comment
3.1 Reg: Reduce... the time taken to being registered.	Green	Green	
3.2 Reg: Time taken to process a fitness to practise case is... less than organisations we benchmark against.	Green	Green	
3.3 Reg: Increase the percentage workforce who engage... in fitness to practise process.	Amber	Amber	Engagement remains below our financial year-end target of 85%.
3.4 D&I: Increase the percentage of the registered workforce with the correct qualification	Amber	Amber	This current measure is working towards a long-term target of 50%.
3.5 D&I: Increase the percentage of the workforce using learning resources to achieve CPL.	Amber	Green	This amber performance is expected and will improve as more users consume resources throughout the financial year.
3.6 D&I: Percentage of those reporting positively that our development activity is delivering the support required by the workforce	Amber	Amber	This amber performance is expected. We are getting close to our ambitious target and this continues to be an improving position.
3.7 D&I: Percentage of those who report workforce planning resources are effective.	--	--	RAG to be developed once we have enough data.
3.8 D&I: Deliver National Health and Social Care Workforce Plan commitments.	--	--	RAG to be developed once we have enough data.
3.9 Reg: Deliver the restructure of the Register to support the sector.	--	--	
3.10 S&P: The work of the SSSC promotes the value of the social care workforce.	--	--	RAG to be developed once we have enough data.
4.2 S&P: External stakeholder engagement		--	
4.3 S&P: SSSC complaint information		--	
4.4 HR: The overall percentage of staff who are absent from work	Green	--	
4.5 HR: The overall staff turnover percentage	Green	--	
4.6 HR: Percentage of people in post for less than six months and percentage of budgeted posts that are empty	Red	--	There are discussions ongoing about what the target should be for this and therefore what RAG should be used.

4.7 OD: Compliance of mandatory courses	--	--	RAG to be developed once we have enough data.
4.8 L&CG: SAR and FOI requests are dealt with within timescales	Green	--	
4.9 L&CG: Number of data security incidents reported	--	--	

## **1. RISK SUMMARY**

In December 2021 two strategic risk scores were reduced.

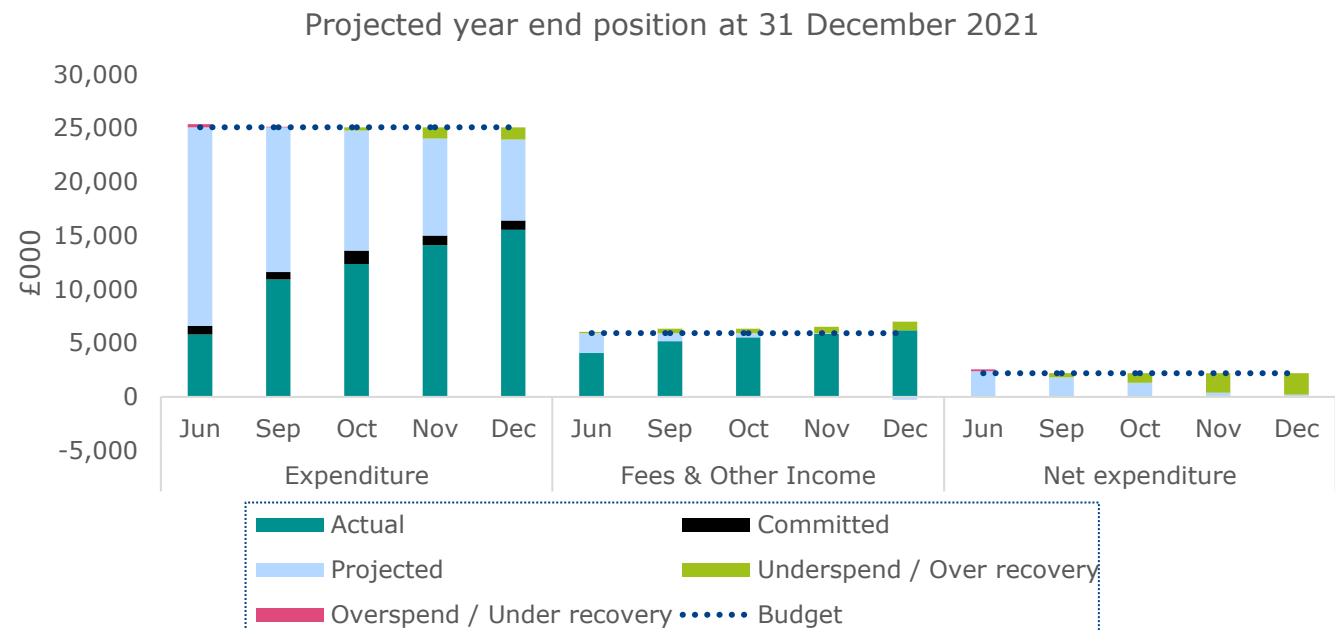
Due to mitigating actions relating to cyber essential accreditation and in-depth cyber security testing, strategic risk 4 'We fail to plan and resource our activities to deliver our digital strategy' was reduced from a score of 4 (green – low) to 1 (green – very low).

Continued stability in our operational recovery phase also led to strategic risk 9 'The SSSC is unable to operate effectively and efficiently due to effects of global pandemic COVID-19' being lowered from a score of 4 (green – low) to 2 (green – very low).

## SSSC – CORPORATE FINANCIAL POSITION

### Financial summary

2021/22 Budget	Revised budget for monitoring purposes £000
Operating budget	18,019
VSDF and disbursements	915
Postgraduate bursaries	2,868
Practice learning	3,270
	<b>25,072</b>
Workforce development and cyber resilience grants	833
<b>Total</b>	<b>25,905</b>
<b>Funded by:</b>	
Grant in aid	16,035
VSDF	900
sub total	<b>16,935</b>
Registration fee income	5,644
Other income	290
<b>sub total</b>	<b>5,934</b>
Workforce development and cyber resilience grants	450
Net deficit - funded from reserves	2,586
<b>Total</b>	<b>25,905</b>



Budget by Strategic Outcome	2021/22 Budget £000	2021/22 percentage %
SO1	13,373	75%
SO2	2,521	14%
SO3	1,413	8%
SO4	620	3%
	<b>17,927</b>	
Disbursements	7,145	
(all inc. o/heads)	<b>25,072</b>	

	Expenditure £000	Fees and other income £000	Grant in aid and disbursement income £000	Net expenditure £000
Budget for monitoring purposes	25,072	(5,934)	(16,935)	2,203
Actual	15,536	6,207	(4,335)	n/a
Committed	863	n/a	n/a	n/a
Year end projection	23,929	(6,710)	(17,117)	102
projected (under)/overspend	(1,143)	(776)	(182)	(2,101)

Net expenditure	Budgeted net expenditure £000	Projected net expenditure £000	Projected (under)/overspend £000
June 2021	2,203	2,384	181
July 2021	2,203	2,404	201
August 2021	2,203	2,063	(140)
September 2021	2,203	1,827	(376)
October 2021	2,203	1,298	(905)
November 2021	2,203	400	(1,803)
December 2021	2,203	102	(2,101)
January 2022	2,203	0	0
February 2022	2,203	0	0
March 2022	2,203	0	0



## Overview

At 31 December 2021 there is a projected corporate underspend of £2,101k (excluding grants). This is an increase of £1,725k since September. The underspend and movements are broken down as follows.

	Overspend/ (underspend/ additional income) at 31 December 2021	Movement: increase/ (decrease) in projection since September 2021
	£'000	£'000
<b>Additional Income</b>		
Registration Fees (NR)	(574)	(309)
Covid-19 exceptional payment (NR)	(182)	(182)
Secondment (P)	(103)	(13)
Modern apprenticeship fees (NR)	(100)	(40)
<b>Underspends</b>		
Panel member allowances (savings - opt in hearings) (NR)	(110)	(39)
Not working in the office (P)	(214)	(158)
Digital (including phone line) (NR)	(126)	(123)
Training – corporate, Member and panel members (NR)	(26)	(11)
Staff costs (P)	(62)	(138)
Other minor	(4)	(18)
<b>Overspends</b>		
Legal fees (NR)	94	-
Consultancy – strategic plan (NR)	42	42
<b>Disbursements – managed on behalf of Scottish Government</b>		
Practice learning (P)	(536)	(536)
Postgraduate bursaries (P)	(200)	(200)

<b>Total</b>	<b>(2,101)</b>	<b>(1,725)</b>
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KEY:

R - Recurring - likely to happen in future years

NR - Non-recurring – unlikely to happen in future years

P - Possible – Could happen in future years

- We have set out risks to the underspend position in the significant variances table below. The main risks for changes to projections until the end of the financial year relate to disbursements and registration income.
- We project that our general reserve position will be £2,443k at 31 March 2022. Discussions are in hand with our Sponsor to agree future use of our reserves.
- As further underspend is possible, our Scottish Government Sponsor has indicated it is likely we can carry this forward to next financial year to make sure we deliver objectives and help ease budget pressures. Provided this is the case, we are not concerned about the financial position.

### Budget changes

- We reported to Council in March 2021 a planned budget deficit for 2021/22 of £1.171m, which would be met from reserves, with the rest of our core budget being funded from grant in aid and fees.
- Since March Scottish Government has allocated funding for the Voluntary Sector Development Fund (VSDF) of £0.900m and £0.450m to the Workforce Development Grant (WDG). In finalising the 2020/21 financial statements we estimate a further £65k underspend will be carried forward in reserves.
- The planned budget deficit increased by £1.415m to £2.586m due to increased carry forward of underspends from 2020/21.
- Our reserves balance at 31 March 2021 increased from £2.750m to £2.813m as there were year-end adjustments in 2020/21, a provision for dilapidations and the underspend increased.

### Income and expenditure

- We are continuing to review our processes and procedures to enable us to better predict patterns of income and expenditure.
- Actual and committed spend, excluding disbursements is (£13.5m – 76%) at this point in the year.
- We have accounted for 105% of our expected fees and other income (£6.207m) as income is more than budgeted.

## Unpaid fees

- £162k of registration fees is unpaid. £13k relates to fitness to practise cases where we don't collect fees until the case ends. The remaining £149k relates to invoices issued between April to December 2021. This will vary at any point in time according to the number of registrants being removed from the register.
- We have written off £206k so far this year (budget and projection is £339k). Some of this relates to people being taken off the register from the period where we were not chasing outstanding fees, but the main reasons for removal from the register are that people have not paid their fees or no longer require to be on the register.

## Specific Grants

- There is a projected underspend of £115k on grants of which £83k relates to workforce development activity and £32k cyber resilience.
- Scottish Government has agreed that the £32k underspend on staff costs in the cyber resilience grant can be carried forward for use in 2022/23.
- Scottish Government has also agreed the carry forward £60k underspend for workforce development activity to 2022/23 and we will request approval for a further £23k carry forward so that we can fully deliver the outcomes.

## Reserves

- Our general reserves target is 2% to 2.5% (£457k to £572k).
- We project that our general reserves will be £2,443k at 31 March 2022. Of this balance, £200k will contribute to our planned digital replacement and £115k relates to specific grants we expect to carry forward. A total of £1,392k remains available in our general reserve which is 6.1% of our target range of 2.0% to 2.5%. We have asked our Sponsor for permission to use balances of £536k from practice learning and £200k from postgraduate bursaries to reduce one-off budget gaps in the 2022/23 financial year.

## Cashflow

- Due to the high level of reserves at the start of this financial year and the current year underspend we did not drawdown any of this year's grant in aid until September 2021. As we are not allowed to draw down funding in advance of need, we project that we will draw down £8m in March 2022 to get our full grant in aid.

### Significant variances from budget & key risk

The key financial risks to the position at the end of March 2022 are shown in the table below with potential sensitivity of a further £339k underspend.

The most significant risks relate to registration fee income (overachievement), practice learning fees and postgraduate bursaries.

Budget area	Current projection £'000	Projection reported to last A&AC £'000	Risk sensitivity	Likelihood (RAG status)	Reason for variance and reason for movement
<b>Staff costs</b> (outcomes 1,2 and 3)	£62k underspend	£76k overspend	Reduction of up to £30k	Low	There is £165k overspend in the FtP staffing projection, including a further £36k for overtime.
<b>Fee income</b> (outcome 1)	£574k projected overachievement of income	£265k projected overachievement of income	Increased income of £50k	High	Current projection is mainly due to the budget adjustment of £100k (prudence) and 11,500 more annual fees raised than budgeted. We set the budget too low as we didn't include in fee income registration projections an amount for people removed from the register after the registration date has passed.
<b>Postgraduate bursaries (disbursement)</b>	£200k underspend	At budget	Reduction of up to further £100k	Med	Stirling, Napier, Open University and late applicants estimated. Underspend could increase as Edinburgh not used 17 bursaries.
<b>Practice learning fees (disbursement)</b>	£536k underspend	At budget	Reduction of up to further £100k	High	Budget £3,270k; £725k expenditure to date (budget includes £918k c/forward). Work is ongoing and we

					expect to refine figures in the coming weeks, once modelling information is available from Universities.
<b>Panel member allowances</b> Outcome 1	£110k underspend	£71k underspend	Further increase/reduction of up to £10k	Low	Budget £592k. Savings due to the introduction of opt-in hearings. Currently 50% lower than before introduced.
<b>Digital</b> Outcomes 1 to 4	£40k underspend on licences and £30k underspend on development £28k underspend on Central Government procurement	At budget	Up to £30k underspend	Med	2% (£6k) work not yet planned but delivery still expected by 31 March 2022. 31% (£77k) workplans in place, procurement underway but no commitment made yet. £30k relates to LMS and the remainder relates to intelligence.

### 3. STRATEGIC PERFORMANCE INDICATORS

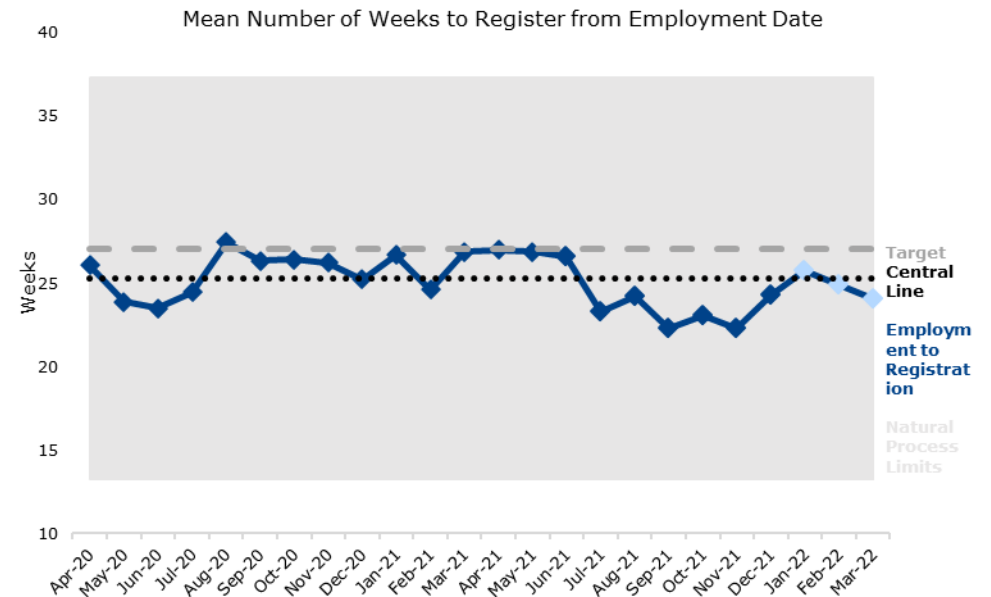
#### 3.1 Regulation: Reduce the average time taken from a person starting their employment to being registered with the SSSC.

This strategic performance indicator (SPI) reflects our work to deliver strategic outcome 1: People who use services are protected by ensuring the regulated workforce is fit to practise. The indicator helps measure how quickly we process applications, that the correct people are registered and ensures new staff are registered in a timely manner.

RAG		
<27	27 to 32	>32
Target: 27 weeks		
Actual and Reforecast		
Apr-21	26.9	-0.2%
May-21	26.9	-0.5%
Jun-21	26.5	-1.7%
Jul-21	23.3	-13.8%
Aug-21	24.2	-10.4%
Sep-21	22.2	-17.7%
Oct-21	23.1	-14.4%
Nov-21	22.3	-17.3%
Dec-21	24.3	-10.1%
Jan-22	25.7	-4.8%
Feb-22	24.9	-7.9%
Mar-22	24.0	-11.1%

Time taken from employment to registration was 24.3 weeks in December 2021. This was below our prediction of 25.4 weeks. Employment to application increased by 1.5 weeks to 20.0 weeks and application to registration increased by 0.3 weeks to 4.2 weeks.

Our aim by March 2023 is to register workers within 12 weeks of employment (8 weeks to submit an application and 4 weeks processing time).



#### Management Action and Risk

This SPI is linked to strategic risk 1, we fail to ensure that our system of regulation meets the needs of people who use services and workers, which is currently scored as 12 (amber) due to the issues around Fitness to Practise case closures (indicator 3.2).

- Both internal processing time and time from employment to application is stable.

- COVID-19 legislation still in place giving workers 12 months to get registered. It is likely that this will be in place until at least March 2022.
- This financial year we have received 3,300 more applications than projected as at 31 December 2021. The numbers on the Register remain static as similar numbers of people have been removed from the register as applications processed. The increase in applications mostly relates to housing support and care at home workers where there appears to be more movement of workers coming off the register and new workers coming on.
- The introduction of the Scottish Government (SG) fee waiver pilot may have an impact on the number of applications we receive and we will need to account accurately for fees waived.
- SG have requested renewed work on the recruitment portal which may divert staff resources from processing applications. Work to mitigate any impact will be concluded before any work on the portal starts.

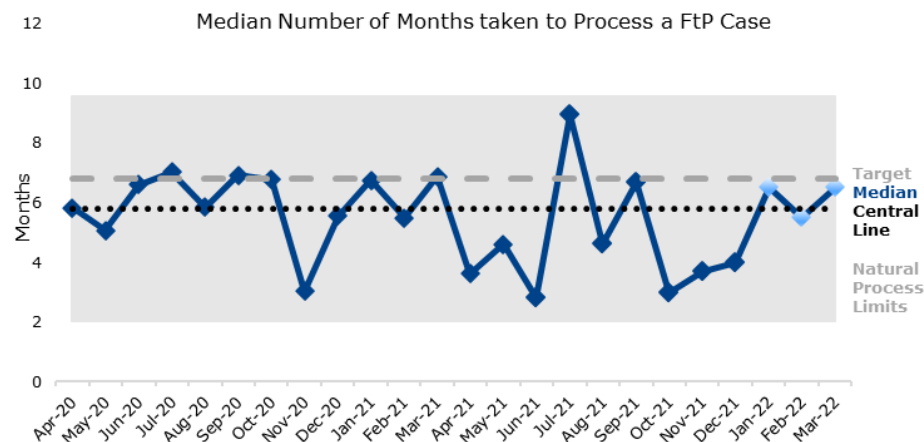
### 3.2 Regulation: The average time taken to process a fitness to practise case is maintained at less time than organisations we benchmark against.

This SPI reflects our work to deliver strategic outcome 1: People who use services are protected by ensuring the regulated workforce is fit to practise. Prompt processing of Fitness to Practise (FtP) cases ensures concerns are addressed and the right people registered. We outperform our external target of 17.4 months comparing ourselves to similar bodies so have set our own internal target of 6.8 months.

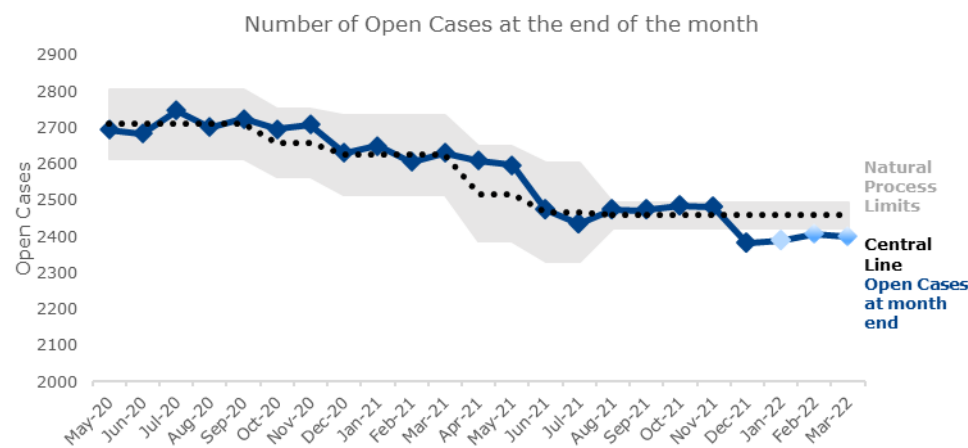
RAG		
<0%	0% to 10%	>10%
Internal Target: 6.8 months		
Actual and Reforecast		
Apr-21	3.6	-47.1%
May-21	4.6	-32.6%
Jun-21	2.8	-59.1%
Jul-21	8.9	31.3%
Aug-21	4.6	-32.5%
Sep-21	6.7	-2.1%
Oct-21	3.0	-56.2%
Nov-21	3.7	-45.6%
Dec-21	4.0	-29.4%
Jan-22	6.5	-4.4%
Feb-22	5.5	-19.1%
Mar-22	6.5	-4.4%

December 2021's performance was 4.0 months to process a Fitness to Practise case. This was below our prediction of 4.8 months. Cases closed at screening stage were 54% in December 2021 (137 of 253 cases) compared to 54% in November 2021 (138 of 257 cases) and 56% in October 2021 (122 of 218 cases).

The steady performance in the screening team and higher throughput in the investigation team has resulted in a slight increase in the median time to conclude a Fitness to Practise case.



At the end of December 2021, the number of open cases was 2,379. This was below our prediction of 2,470. It was a decrease of 102 from the previous month and an overall reduction of 250 from December 2020. The median age of open cases at the end of December 2021 was 302 days, an increase of 22 days from the previous month. Four of our older cases (over 5 years) were closed in December.





## Management Action and Risk

This SPI is linked to strategic risk 1, we fail to ensure that our system of regulation meets the needs of people who use services and workers, which is currently scored as 12 (amber).

- The current position is that of fragile stability.
- Existing staff capacity remains a concern. We have received the first solicitor resignation in 2022.
- New solicitors are taking on live case work and the time taken to train and quality assure key elements of the role has reduced by nine months. We will continue ongoing quality assurance of live cases to make sure decisions remain defensible.
- Opt-in Hearings continues to decrease the number of hearings and a slight reduction in work involved in those cases.
- There has been an increase in throughput in the investigation team which is complimented by steady performance in the Screening Team.
- We are continuing work to highlight challenges in either team in a better way with the introduction of Power BI.
- The age profile of cases remains stable and focus is on older cases alongside high-risk cases.
- We are identifying system and structural improvements that will free up capacity of more experienced people to focus on complex and older cases.
- Updated referral guidance and Employer Advice Telephone support line will be launched before the end of March 2022.

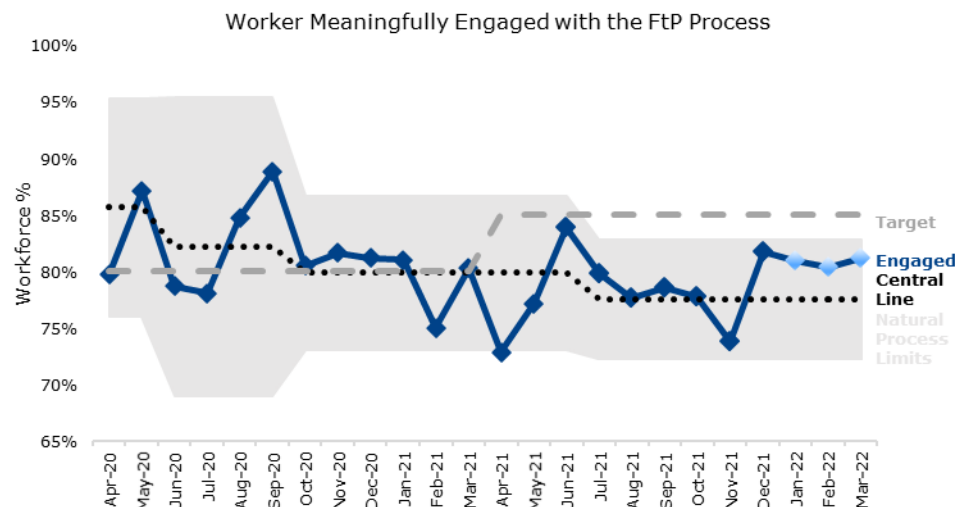
### 3.3 Regulation: Increase the percentage of the workforce who are engaged when they are involved with the fitness to practise process.

This SPI reflects our work to deliver strategic outcome 1, People who use services are protected by ensuring the regulated workforce is fit to practise, by measuring how engaged workers have been with the FtP process.

If the worker has provided a response to the allegations, this is likely to amount to meaningful engagement. The Regulation directorate set themselves a target of 85% engagement by the end of 2021/22 and 90% by the end of 2022/23.

RAG		
>85%	75% to 85%	<75%
Target: 85%		
Actual and Reforecast		
Apr-21	72.9%	-14.2%
May-21	77.2%	-9.2%
Jun-21	83.9%	-1.3%
Jul-21	79.8%	-6.1%
Aug-21	77.7%	-8.6%
Sep-21	78.6%	-7.6%
Oct-21	77.8%	-8.5%
Nov-21	73.8%	-13.2%
Dec-21	81.7%	-8.1%
Jan-22	79.3%	-7.8%
Feb-22	79.5%	-6.9%
Mar-22	80.1%	-6.9%

December 2021's performance was 81.7% engagement (94 of 115 cases). This was above our prediction of 79.0%.



#### Management Action and Risk

This SPI is linked to strategic risk 1, we fail to ensure that our system of regulation meets the needs of people who use services and workers, which is currently scored as 12 (amber) due to the issues around Fitness to Practise case closures (indicator 3.2).

We continue to work to improve access to representation and support services for workers, which helps them to meaningfully engage.

- We have seen an increase in attendance at Fitness to Practise Panel hearings from 30% to 45%.
- We are carrying out work with employers on education of the workforce about the importance of engagement and are reviewing the tone and content of correspondence with registered workers. The Regulatory Improvement team is leading this work, the engagement element will be ongoing but the review of letters will conclude by March 2022.

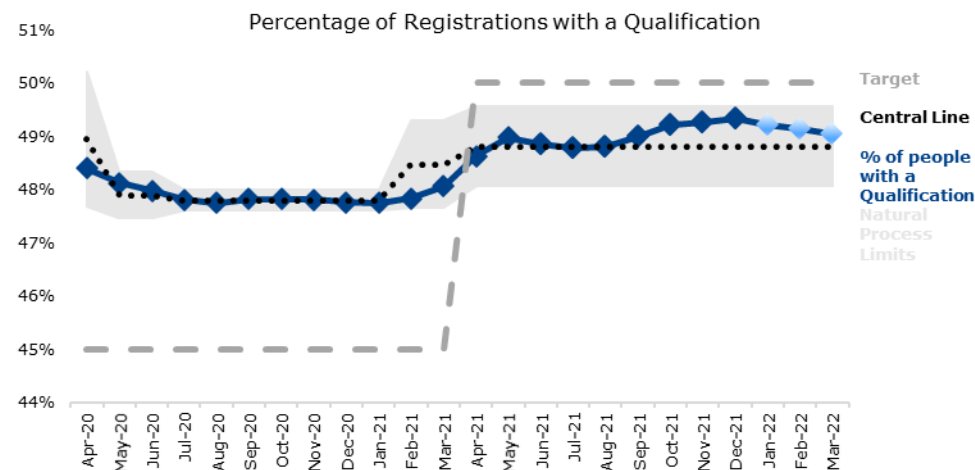
### 3.4 Development and Innovation: increase the percentage of the registered workforce with the correct qualification.

This SPI reflects our work to deliver strategic outcome 2: The SSSC supports and enhances the development of the registered workforce to deliver high standards of practice and drive improvement, by measuring the proportion of the registered workforce who have achieved the correct qualification.

RAG		
>50%	47.5% to 50%	<47.5%
Target: 50%		

Actual and Reforecast		
Apr-21	48.6%	-2.7%
May-21	49.0%	-2.1%
Jun-21	48.8%	-2.3%
Jul-21	48.8%	-2.5%
Aug-21	48.8%	-2.4%
Sep-21	49.0%	-2.0%
Oct-21	49.2%	-1.6%
Nov-21	49.3%	-1.5%
Dec-21	49.3%	-1.6%
Jan-22	49.2%	-1.6%
Feb-22	49.1%	-1.8%
Mar-22	49.0%	-2.0%

December 2021's performance was 49.3%. As current performance and behaviour is different to what was predicted in the long-term five-year forecast, we plan to examine current trends in more depth to understand why the performance is improving slightly rather than downward trend we anticipated.



#### Management Action and Risk

This SPI is linked to strategic risk 2, we fail to ensure that our workforce development function supports the workforce and employers to achieve the right standards and qualifications to gain and maintain registration, which is currently scored as 12 (amber).

As of December 2021, 49% of the registered workforce are qualified. This percentage has remained stable for several months within our target range. The five-year longitudinal analysis of the qualified status of the workforce and projected trends has concluded. The Workforce Skills Report (WSR) was published on 6 October 2021. An action plan to address the findings of the WSR and increase the qualified status of the workforce will be developed and published by the end of the financial year.

### 3.5 Development and Innovation: Increase the percentage of the workforce using our learning resources to achieve Continuous Professional Learning.

This SPI reflects our work to deliver strategic outcome 2: The SSSC supports and enhances the development of the registered workforce to deliver high standards of practice and drive improvement. The indicator reflects the number of learners registered to use our learning resources and the number of SSSC open badges awarded.

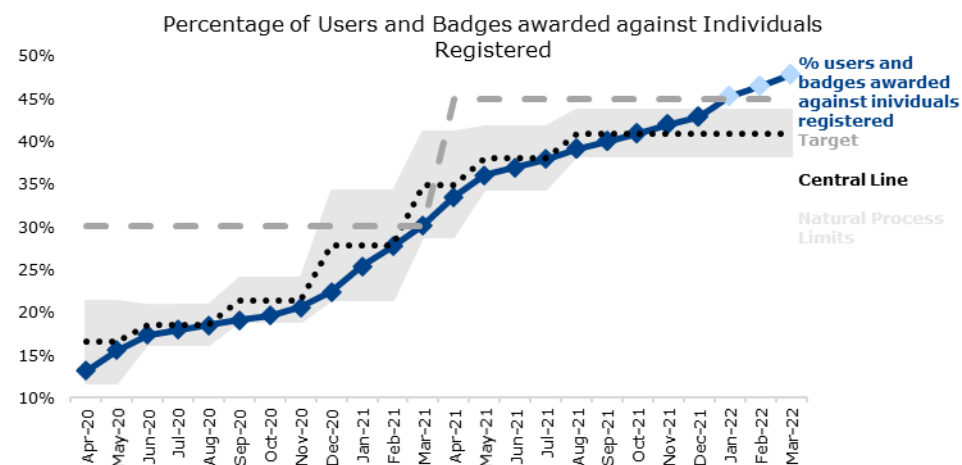
	RAG	
	>45%	<40%
	Target: 45%	
Apr-21	33.5%	-25.6%
May-21	36.0%	-20.0%
Jun-21	37.0%	-17.9%
Jul-21	37.9%	-15.7%
Aug-21	39.0%	-13.3%
Sep-21	40.0%	-11.1%
Oct-21	40.9%	-9.1%
Nov-21	41.9%	-6.8%
Dec-21	42.8%	-4.9%
Jan-22	45.2%	0.4%
Feb-22	46.5%	3.2%
Mar-22	47.8%	6.1%

December 2021 performance was 42.8% and lower than the prediction of 43.5%. The number of monthly new learner accounts was less than anticipated.

We have been tracking how many people have been actively using the MyLearning app in the last 30 days, which was 2,442 in December 2021 compared to 4,129 in November 2021. We also monitor the number of learning logs created in the last 30 days which was 7,574 in December 2021 compared to 13,604 in November 2021.

The number of new learner accounts for December 2021 was 716 compared to 1,184 in November 2021. The number of badges awarded in December 2021 was 307 compared to 377 in November 2021.

The lower figures for December may be reflective of current pressures in the sector because of the new variant. Staffing shortages are significant and time for professional development will be limited. As the impact of the current variant on services begins to ease the performance should improve and we would anticipate returning to previous performance around February 2022.



#### Management Action and Risk

This SPI is linked to strategic risk 2, we fail to ensure that our workforce development function supports the workforce and employers to achieve the right standards and qualifications to gain and maintain registration, which is currently scored as 12 (amber).

- The MyLearning app is helping us identify trends, target resource promotion and gauge promotion success.
- Responses to the currently recent registrant stakeholder survey about use of our learning resources will provide valuable insights and intelligence about how registrants are using our resources to achieve their CPL requirements.
- Planned further development of new open badges to support implementation of national guidance in respect of the Age of Criminal Responsibilities and the Keeping Brothers and Sisters Together siblings guidance and development of 23 things leadership for ELC is anticipated to increase the update of open badges when launched.
- Our open badge resources will also be a feature within the Scottish Government Programme for Government commitment to develop a national induction framework for adult social care by May 2022.

### 3.6 Development and Innovation: Percentage of those reporting positively that our development activity is delivering the support required by the workforce.

This SPI reflects our work to deliver strategic outcome 2: The SSSC supports and enhances the development of the registered workforce to deliver high standards of practice and drive improvement. This indicator reflects people who have been using SSSC learning to support their continuous professional development.

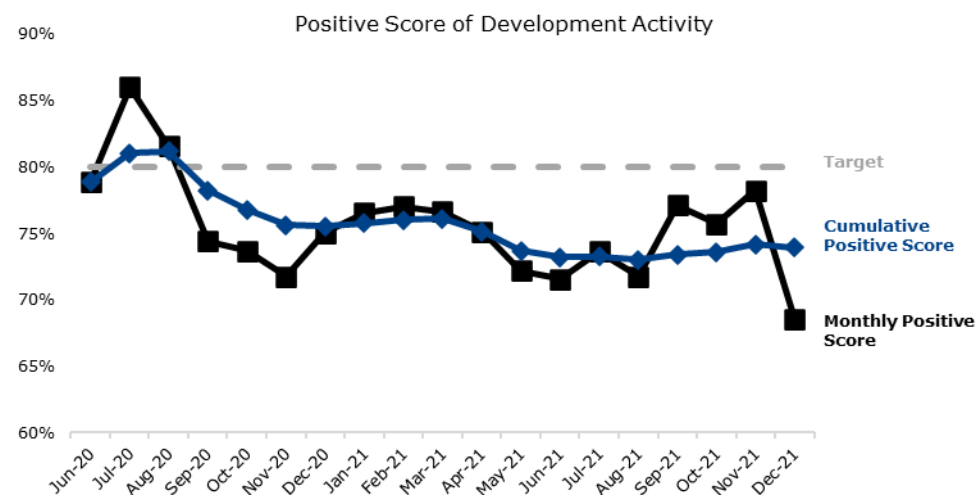
RAG			RAG		
>80%	70% to 80%	<70%	>80%	70% to 80%	<70%
Target: 80%			Target: 80%		
Monthly Performance Actual and Reforecast			Cumulative Performance actual and Reforecast		
Apr-21	75.1%	-6.1%	Apr-21	75.1%	-6.1%
May-21	72.2%	-9.8%	May-21	73.7%	-7.9%
Jun-21	71.5%	-10.6%	Jun-21	73.2%	-8.6%
Jul-21	73.6%	-8.0%	Jul-21	73.2%	-8.5%
Aug-21	71.7%	-10.3%	Aug-21	73.0%	-8.7%
Sep-21	77.1%	-3.6%	Sep-21	73.4%	-8.3%
Oct-21	75.7%	-5.4%	Oct-21	73.5%	-8.1%
Nov-21	78.2%	-2.3%	Nov-21	74.1%	-7.3%
Dec-21	68.5%	-14.4%	Dec-21	73.9%	-7.6%
Jan-22	74.1%	-7.4%	Jan-22	74.8%	-6.5%
Feb-22	76.6%	-4.2%	Feb-22	75.0%	-6.3%
Mar-22	76.2%	-4.8%	Mar-22	75.1%	-6.1%

This calculation uses survey information from:

- the users of learning resources including step into leadership and open badges
- registrants who have recently renewed or completed a qualification
- surveys across our corporate website
- post-event feedback

From the above sources, the number of responses in December 2021 was 200 compared to 555 in November 2021. Although performance in December was red there are no indications or themes, we can derive from the free text comments we received as part of the responses. We will monitor to see if performance improves next month like anticipated. We have received 4,478 responses to date this financial year.

The annual learning resources survey found 74% of respondents agreed the SSSC's learning resources were useful in developing their practice and skills (2,215 out of 2,993 respondents).



#### Management Action and Risk

This SPI is linked to strategic risk 2, we fail to ensure that our workforce development function supports the workforce and employers to achieve the right standards and qualifications to gain and maintain registration, which is currently scored as 12 (amber).

Although currently amber our performance against this measure remains strong and is close to reaching our ambitious target. Performance and Improvement and D&I are undertaking further work to measure stakeholder satisfaction with resources. This includes:

- using the data from the MyLearning app to understand what resources registrants are consuming and how they are applying these to their CPD and registration conditions.
- analysis of registrant usage of our digital learning resources, digital insights and the results of the learning resources registrant survey will inform development of an improvement action plan.

### 3.7 Development and Innovation: Percentage of those reporting positive awareness of workforce planning resources and report that resources are effective.

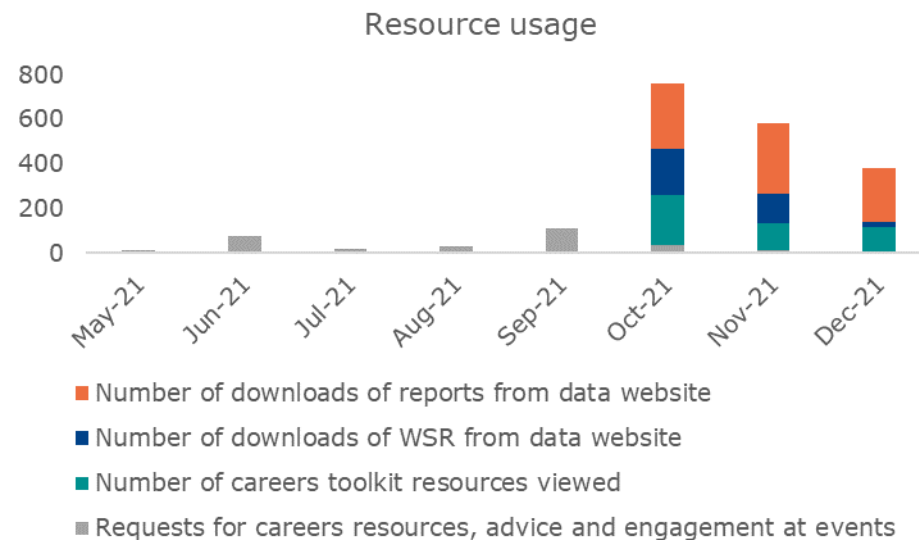
This SPI reflects our work to deliver strategic outcome 3: Our workforce planning activities support employers, commissioners, and policy makers to deliver a sustainable, integrated and innovative workforce. The indicator reflects the number of people using our workforce planning resources and their rating of the content.

The data sources used to measure positive awareness of resources monthly are:

- number of requests for careers resources, advice and engagement at events including use of our dementia ambassadors
- number of careers toolkit resources viewed including use of modern apprenticeship promotional guide
- number of downloads of reports from our data website
- use of pre-employability resources
- number of downloads of planning scenarios (once developed)
- use of workforce planning assumptions (once developed)
- monthly workforce planning / intelligence data requests.

To measure the satisfaction of the resources, we will use the annual stakeholder engagement survey. The survey will include satisfaction questions on workforce planning resources and will create a baseline for the next financial year.

We have post event feedback which currently indicates an 85% satisfaction rating for events conducted by SSSC.



The number of resources used in December decreased slightly. The number of careers toolkit unique views reduced from 121 to 106. The number of downloads of the workforce skills report decreased from 135 to 23 and the numbers of downloads of reports from the data website reduced from 317 to 246. We do not have a complete data set for these measures and will require further data before we carry out any trend analysis.

Several of the resources that inform this SPI continue to be developed throughout the remainder of 2021/22 and our measurement of awareness and effectiveness will commence once they are live and/or promoted.



## Management Action and Risk

This SPI is linked to strategic risk 5, we fail to provide value to our stakeholders and demonstrate our impact, which is currently scored as 9 (yellow).

Resource usage trends will be developed once sufficient data is available.

In order to gain a benchmark measure of stakeholder satisfaction and the positivity score we have launched a workforce planning stakeholder survey which is live until the end of January 2022. This will help us to understand the impact of workforce planning activity and to monitor performance going forward.

Satisfaction will be monitored through:

- A workforce planning and intelligence blog will be published quarterly, with the first blog launched before the end of the financial year, which will have an embedded survey link to provide ongoing satisfaction feedback.
- The employability group (monthly) and career reference group (quarterly) flash report is distributed to all members after each meeting. The report includes an embedded survey link to capture feedback and satisfaction.

A network of workforce planners has been established and we are working in partnership with the network and Scottish Government policy teams to develop a programme of activity based on priority needs including the production of planning scenarios and assumptions to support national and local workforce planning for demand for social workers and MHOs.

### 3.8 Development and Innovation: Deliver the SSSC's commitments under the National Health and Social Care Workforce Plan to schedule and evaluate satisfaction with the outputs.

This SPI reflects our work to deliver strategic outcome 3: Deliver the SSSC's commitments under the National Health and Social Care Workforce Plan to schedule and evaluate satisfaction with the outputs.

Commitments from Part 2 of the National Integrated Health & Social Care Workforce Plan are regularly reported and monitored by the Scottish Government (SG).

Our update for commitment 6 'Career Pathways' and commitment 7 'Training & Education' highlighted some of the key activities we have achieved since June 2020.

These activities include informing and contributing to Social Care recruitment campaign; delivering on developing the Young Workforce strategy, contributing to Fair Work workstreams; the further development of Careers Ambassador model and careers toolkit including resources for Personal Assistants, Podcasts with DWP and Disclosure Scotland and advanced practice key characteristics have informed the development of the now published framework of Self Directed Support standards, in particular the standard on worker autonomy.

The Scottish Government National Workforce Planning Group highlighted the future approach to workforce planning and the intention of the Scottish Government to articulate a Workforce Strategy. This strategy will be the next iteration of the National Health and Social Care Workforce Plan. The NHS Recovery Plan sets out the approach to Scotland's Health and Social Care

recovery from the pandemic. A key requirement to delivering the Recovery Plan is having the right workforce in place at the right time and it was therefore agreed that the workforce planning group would develop a new supporting workforce strategy to enable delivery of the recovery plan. The strategy will articulate a holistic, long-term health and social care workforce vision, alongside our strategic priorities for workforce growth, recruitment, retention, training and development.

This will be predicated on the population health outcomes articulated within the four care programmes and directly aligned to the trajectory set out in the Recovery Plan for the remobilisation of services. This will be the first time the Scottish Government has articulated a Workforce Strategy of this nature and it represents a significant strategic shift from the approach taken hitherto in relation to workforce planning. Our commitments are still to be finalised.

#### Management Action and Risk

This SPI is linked to strategic risk 5, we fail to provide value to our stakeholders and demonstrate our impact, which is currently scored as 9 (yellow). We continue to deliver on our commitments from Part 2 and are working closely with the Scottish Government, OCSWA and COSLA around the development and subsequent actions of the Workforce Strategy.

The Workforce Planning and Workforce Intelligence Teams along with colleagues from Learning and Development have provided information and direction towards the development of this Workforce Strategy and will continue to be involved through our work of the Workforce Planning Group and the Workforce Forum. The Strategy was expected to be published by December 2021 but has been delayed by the pandemic. The strategy will be

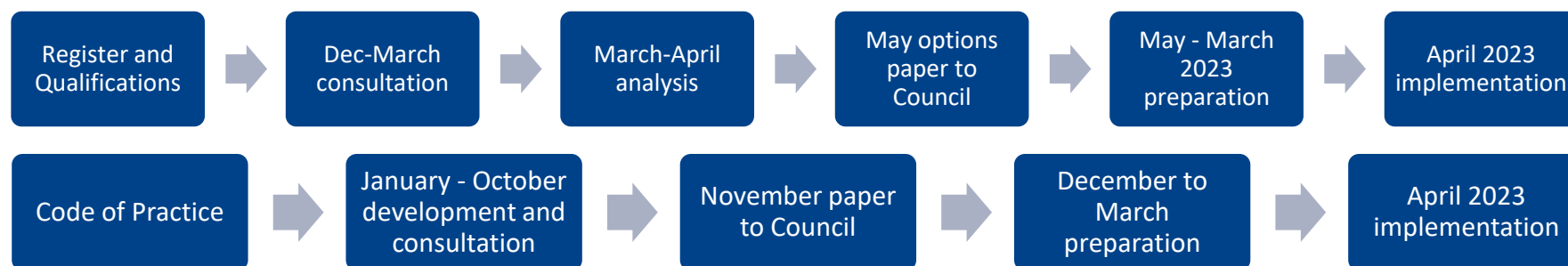
published before the end of this financial year and will set the direction of our workforce planning activity in 2022/23.

### 3.9 Regulation: Deliver the Future Proofing Programme.

This SPI reflects our work to deliver strategic outcome 1: To deliver the restructure of the register to support the sector. The indicator reflects the development of improvements to be made through the SSSC Future Proofing Programme.

Progress against project milestones are in the quarterly update provided to the Audit and Assurance Committee. Project updates will also be included in assurance reports.

Delivery is projected to take up to three years. The high-level timeline is:



#### Management Action and Risk

This SPI is linked to strategic risk 1, we fail to ensure that our system of regulation meets the needs of people who use services and workers which is currently scored as 12 (amber).

This work now forms part of the Future Proofing Programme approved by Council in May 2021.

- The biggest risk to progress remains the potential lack of Scottish Government time to implement legislative change required to change the structure of the register. Sponsor team is working on this with the Scottish Government Legal Department.
- The consultation on the Register and qualifications is live and will close in mid-March. The Project Leads have established a schedule of online and targeted events to reach stakeholders which have high levels of attendance and key stakeholders who are part of the Stakeholder Advisory Group have started requesting individual sessions from the SSSC.
- Whilst Sponsor Group have approved the Programme expanding to include consideration of fees, any progress on fees remains dependant on the approval of Ministers.

- A budget case to support the Programme in the next financial year is included within the SSSC draft budget. The most significant cost is likely to be digital system changes. The budget contains an estimate of this cost which will be more reliable after discovery workshops with the supplier conclude before the end of the financial year.
- We are meeting with Scottish Government's Centre of Excellence to discuss external scrutiny of the Programme.

### 3.10 Strategy and Performance: The work of the SSSC promotes the value of the social care workforce.

This SPI reflects our work to deliver strategic outcome 4: The social work, social care and early years workforce is recognised as professional and regulated and valued for the difference it makes to people's lives.

This measures for this metric will involve surveying registrants across the year as well as some of our key stakeholders.

The measures:

- we receive feedback that our work promotes the value of the social care workforce through engagement activity
- we can demonstrate the impact of this workforce being qualified and registered, professional and regulated.

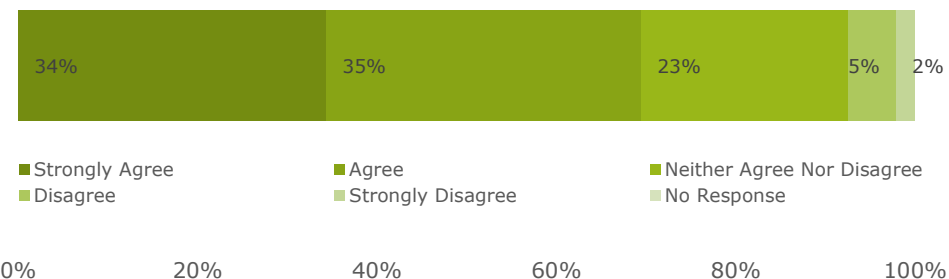
The first of our 2020/21 impact measurement surveys was the main registrant survey which was live over July 2021 for a period of four weeks.

The survey asked several questions to help us understand how Registrants view our promotion of the sector. Registrants were asked 'How well do you think these articles promote the positive value of social work, social care and early years services.'

'Articles' refers to the information that we provide through our SSSC Newsletter, Website and Social Media channels. We received 7,547 responses to this question, of which 5,241 or 69% were positive.

Given the sample response number of 5,241 we can say that we are 99% confident that the overall result for the registrant population would sit between 67.5% and 70.5%.

How well do you think these articles promote the positive value of social work, social care and early years services?



Registrants commented that they would like to see positive media coverage including the role and benefits of the SSSC.

Registrants also commented why they had not read our 'articles'. The most common reasons were work / personal life balance (lack of time), they were not relevant to their individual role and they were not aware of them.

#### Management Action and Risk

This SPI is linked to strategic risk 5, we fail to provide value to our stakeholders and demonstrate our impact, which is currently scored as 9 (yellow).

The stakeholder survey is due to end in January 2022. Once the responses are available the data will be analysed and relevant results reported in the assurance report. Recommendations will also be provided to OMT and EMT on next steps.

## 4. ORGANISATION INFORMATION

### 4.1 Programme Management Office

#### Overall Summary: Programmes

Programme	Project Sponsor	Phase	Budget RAG	Risk/ Issues RAG	Stakeholder Buy In RAG	Overall RAG	Approval and Monitoring	Key Milestone	Comment
Digital Programme	Director of Strategy and Performance	Implement	Green	Amber	Green	Green	All digital projects approved and monitored at by Digital Development Sponsor Group and Digital Development Programme Board. Updates with PMO	<ul style="list-style-type: none"> <li>MFA Phase 1 in D365 rollout completed 2<sup>nd</sup> December.</li> </ul>	Risk and Issues tracking amber: <ul style="list-style-type: none"> <li>Mattersphere portal customisation – due to staff resource supplier unable to provide training dates.</li> <li>LMS System- supplier delays in providing costs.</li> </ul>
Insight and Intelligence Project (part of Digital Programme)	Director of Strategy and Performance	Implement	Amber	Amber	Amber	Amber	Project approved and monitored by Digital Development Sponsor Group and Digital Development Programme Board. Cross functional groups meet on a fortnightly basis to monitor and provide support. Updates with PMO		<ul style="list-style-type: none"> <li>Ongoing data warehouse costs not yet confirmed.</li> <li>Current risk of budget underspend, working with Finance to confirm.</li> <li>Non provision of HR Data.</li> </ul>
Future-Proofing Programme	Director of Registration	Define	Amber	Amber	Amber	Amber	Programme approved and monitored by the Future-Proofing Programme Board. Updates with PMO.	<ul style="list-style-type: none"> <li>Consultation for “a register for the future” launched.</li> <li>Stakeholder advisory group held 6<sup>th</sup> Dec 2021.</li> <li>Draft DPIA and EQIA complete</li> </ul>	<ul style="list-style-type: none"> <li>Impact of Programme Manager leaving resulted in PMO Manager revisiting whole Programme scope. This has impacted the entire Programme.</li> <li>Several key milestones have now been delivered and the Programme is forecast to be</li> </ul>

								<ul style="list-style-type: none"> <li>External stakeholder engagement commenced.</li> <li>Programme passed Gate 3 Review.</li> </ul>	back on track in the next period.
Rewards Review Programme	Interim Director of Finance and Resources	Define	Green	Red	Green	Amber	Programme approved and monitored by the Rewards Review Programme Governance Group monthly. Updates with PMO.	<ul style="list-style-type: none"> <li>Approval to recruit Programme Manager on FTC – advert live.</li> </ul>	<ul style="list-style-type: none"> <li>The external contractor has not updated project documentation in line with the requirements of the PMO. We are now seeking dedicated programme management resource externally.</li> </ul>

### Overall Summary: External Projects

Programme	Project Sponsor	Phase	Cost vs Budget RAG	Risks/ Issues RAG	Stakeholder Buy In RAG	Overall RAG	Approval and Monitoring	Key Milestone	Comment
Newly Qualified Social Worker	OCSWA	Implement	Green	Amber	Green	Amber	Approved by EMT. Implementation group meet on monthly basis	<ul style="list-style-type: none"> <li>Round 1 supervision training delivered.</li> <li>Working group established to develop guidance on evidencing NQSW standards.</li> <li>Transitions work development sessions with social work programme leads delivered.</li> </ul>	Risks and issues level will remain at amber given the activity surrounding policy drivers such as the Review of Adult Social Care and The Promise.



## 4.2 External Stakeholder Engagement

This strategic performance indicator (SPI) reflects our work to deliver strategic characteristic 1: Always focused on needs of our customers as well as strategic characteristic 4: We are a respected and valued organisation.

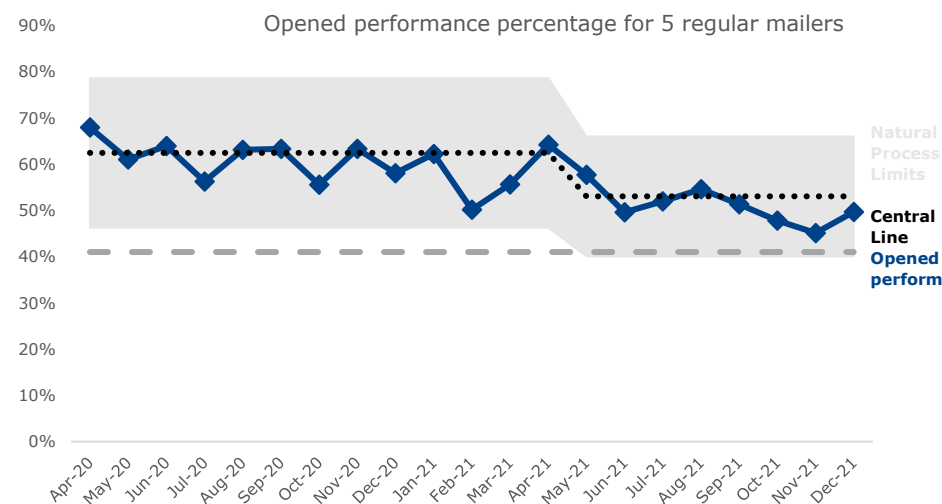
RAG		
>5%	-5% to 5%	<-5%
Target: 41%		
% Opened		
Apr-21	64.2%	16.0%
May-21	57.7%	49.3%
Jun-21	49.6%	71.3%
Jul-21	52.0%	37.5%
Aug-21	54.6%	49.2%
Sep-21	51.3%	56.5%
Oct-21	47.8%	78.7%
Nov-21	45.1%	70.8%
Dec-21	49.7%	75.0%
Jan-22	%	%
Feb-22	%	%
Mar-22	%	%

Our 'opened performance' is based on users opened against delivered. Each month there are five regular mailers that are issued. These mailers are under the categories "All News", "Adults", "Children", "Employers" and "Social workers and students". Most months additional mailers are issued however to measure progress this measure will concentrate on the five regular mailers.

December 2021's performance was 49.7%, an increase of 4.6% from the previous month. Although all categories saw an increase the biggest proportion increases were for the categories "Children" which saw a 6.8% increase and then "Adults" which saw a 4.1% increase.

Less content in November resulted in lower engagement which makes the increase in December stand out however it is bringing engagement back to more usual levels. The December engagement increase results from the content in the mid-month newsletter as there was no particular content that stood out for recipients in the first December newsletter.

The article on the "Staff Vacancies in Care Services Report" was the most popular in both December newsletters and for both the children's and adult's editions followed by "Lorraine Gray's Christmas Message". The "Staff Vacancies in Care Services Report" also had media coverage with nine articles as well as several mentions referring to the report in other contexts.



## Management Action and Risk

This SPI is linked to strategic risk 5, we fail to provide value to our stakeholders and demonstrate our impact, which is currently scored as 9 (yellow).

We have several actions in place to maintain and continue to grow engagement in our direct email content:

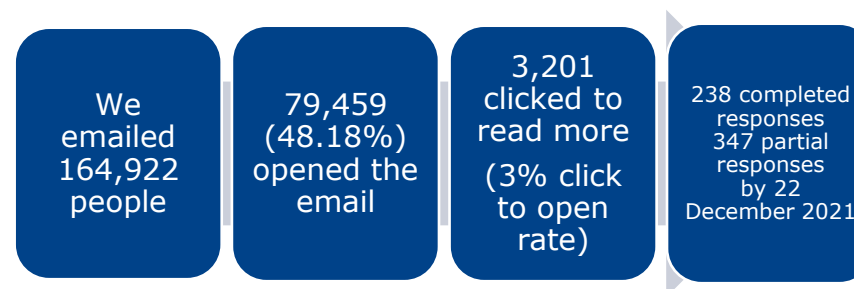
- departments must set expected targets or outcomes from engagement where there is a specific call to action and to provide context for the activities reported here
- departments discuss work with Communications beforehand to set outcomes or targets for content included in SSSC News. SSSC News is not always the best way to reach our audiences and we can advise on appropriate routes and channels
- we are reviewing how we report on engagement to see if we can provide a breakdown of the different versions of the newsletter for each part of the register. This would give a more accurate picture of the engagement for each part of the register.

## December impact

### A register for the future consultation

We launched the consultation with an email to stakeholders. We calculated that we need a sample of size of approximately 384 responses for the consultation. This response rate will allow us to be 95% confident in the result with a 5% margin of error so the

early response rate to date is encouraging with the deadline of March 14 sometime away.



### Article: Can you help us improve our letters and emails?

We sent out a request for volunteers to help us review our fitness to practise communications. Although this is a small number, it covers the various parts of the register and is more than we expected with a target of 15 volunteers.



### 4.3 Strategy and Performance: SSSC complaint information.

This section looks at complaints SSSC have received about our service. This reflects our work to deliver strategic characteristic 1: Always focused on needs of our customers.

This metric will compare performance of complaints at stage one and complaints at stage two using the date when a complaint has been recorded as resolved. The graphic will show the trend in number of complaints received so that we can track any trend changes.

We have 20 days to resolve a stage two complaint and five days to resolve a stage one complaint.

RAG		
>90%	80% to 90%	<80%
Target: 90%		

Percentage of stage one complaints resolved on time

Apr-21	100.0%	11.1%
May-21	100.0%	11.1%
Jun-21	91.7%	1.9%
Jul-21	71.4%	-20.6%
Aug-21	100.0%	11.1%
Sep-21	100.0%	11.1%
Oct-21	100.0%	11.1%
Nov-21	100.0%	11.1%
Dec-21	100.0%	11.1%

Jan-22  
Feb-22  
Mar-22

RAG		
>90%	80% to 90%	<80%
Target: 90%		

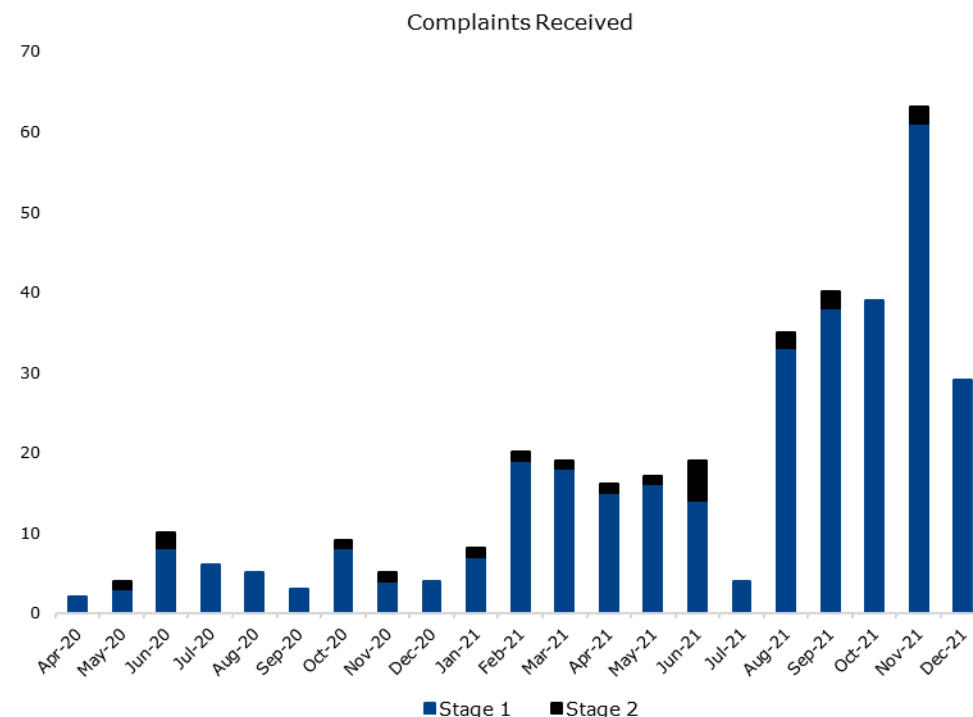
Percentage of stage two complaints resolved on time

Apr-21	0%	-100.0%
May-21	100.0%	11.1%
Jun-21	100.0%	11.1%
Jul-21	100.0%	11.1%
Aug-21	-	-
Sep-21	100.0%	11.1%
Oct-21	100.0%	11.1%
Nov-21	100.0%	11.1%
Dec-21	-	-

Jan-22  
Feb-22  
Mar-22

We resolved 29 stage one complaints in December 2021 all within timescales.

In December 2021 we received 29 complaints a decrease from November 2021 which was 63.



### Management Action and Risk

This SPI is linked to strategic risk 5, We fail to provide value to our stakeholders and demonstrate our impact, which is currently scored as 9 (yellow).

## HUMAN RESOURCES PERFORMANCE

### 4.4 HR: The overall percentage of staff who are absent from work.

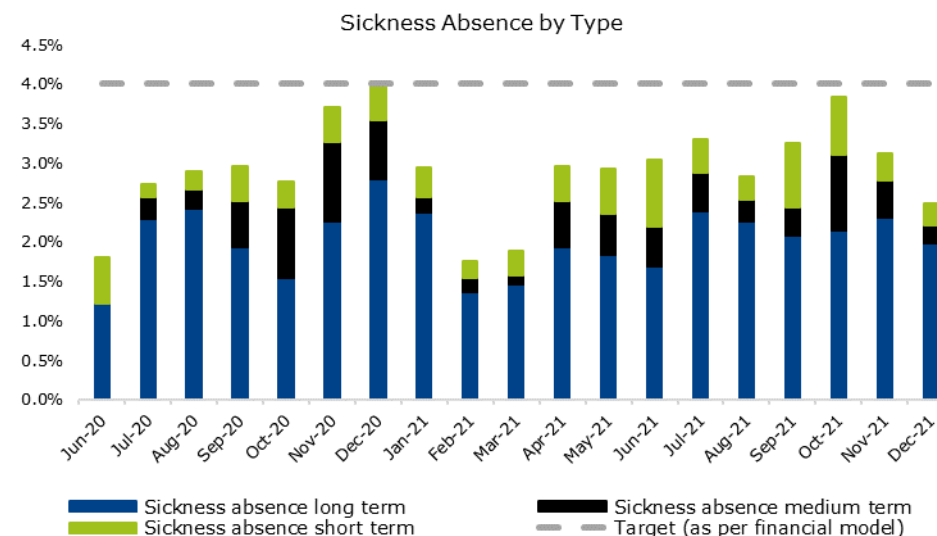
This metric combines all types of absence across the SSSC to give an overall metric. The assessment will focus on any areas of concern or risk by looking at sickness absence by directorate or team. We will identify any emerging reasons that could cause more staff absence in the future.

RAG		
<4%	4% to 5%	>5%
Target: 4%		
Actual and Reforecast		
Apr-21	3.0%	-26.2%
May-21	2.9%	-27.0%
Jun-21	3.0%	-24.0%
Jul-21	3.3%	-17.5%
Aug-21	2.8%	-29.6%
Sep-21	3.2%	-19.0%
Oct-21	3.8%	-4.3%
Nov-21	3.1%	-22.3%
Dec-21	2.5%	-38.0%
Jan-22	%	%
Feb-22	%	%
Mar-22	%	%

Definitions: Short term absence is up to a week. Medium term absence is between 8 and 27 calendar days. Long term absence is a period of four weeks or more.

Ten employees were absent due to long term sickness in December 2021 with seven of these absences related to psychological/mental health or stress. Three of the ten have now returned.

There were 15 Covid related absences in December, ten short term (six due to positive cases and four due to side effects related to vaccinations), four medium and one long term which were all linked to positive Covid cases.



### Management Action and Risk

This SPI is linked to strategic risk 6, we fail to develop and support SSSC staff appropriately to ensure we have a motivated and skilled workforce to achieve our strategic outcomes, which is currently scored as 12 (amber).

As in previous months, the main factor contributing to absence is long term sickness. There are no indications of any trends in certain Directorates and/or groups of employees.

#### 4.5 HR: The overall staff turnover percentage.

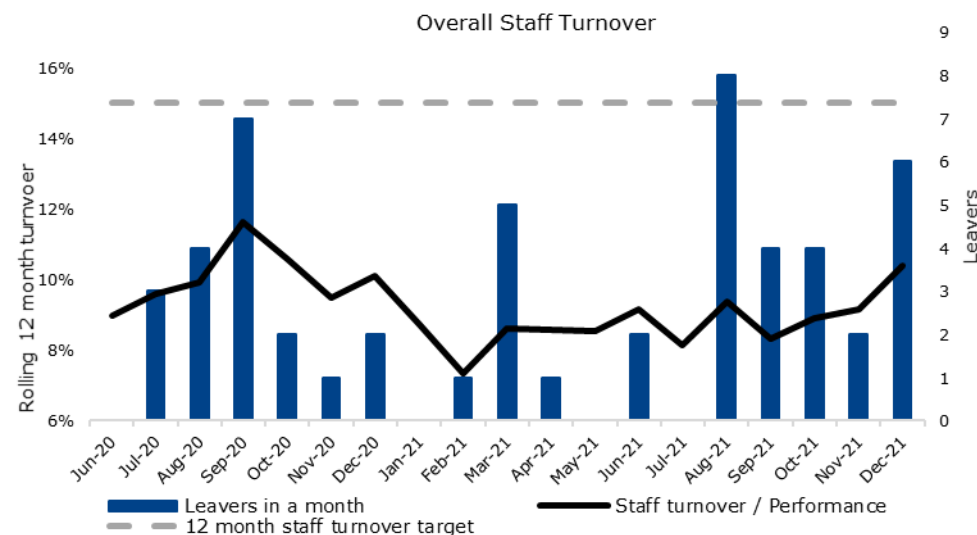
This key performance indicator (KPI) reflects our work to deliver strategic characteristic 5: People want to work at the SSSC

This metric looks at average staff turnover each month for the SSSC and we will compare this with the yearly rolling average. The assessment will focus on any areas of concern or risk by looking at staff turnover in certain directorates or team. We will identify any emerging reasons that could cause more staff turnover within an area.

RAG		
<15%	15% to 16%	>16%
Target: 15%		

Actual and reforecast		
Apr-21	8.6%	-42.8%
May-21	8.5%	-43.1%
Jun-21	9.1%	-39.0%
Jul-21	8.1%	-45.9%
Aug-21	9.4%	-37.6%
Sep-21	8.3%	-44.5%
Oct-21	8.9%	-40.6%
Nov-21	9.2%	-38.9%
Dec-21	10.4%	-30.8%
Jan-22	%	%
Feb-22	%	%
Mar-22	%	%

There were six leavers in December 2021 ie five resignations and one early retirement.



#### Management Action and Risk

This SPI is linked to strategic risk 6, we fail to develop and support SSSC staff appropriately to ensure we have a motivated and skilled workforce to achieve our strategic outcomes, which is currently scored as 12 (amber).

Exit interview are to be examined and reported quarterly. Any themes will be reported, department level information will be made available in due course.

#### 4.6 HR: Percentage of people in post for less than six months and percentage of budgeted posts that are empty.

This KPI reflects our work to deliver strategic characteristic 5: People want to work at the SSSC

RAG		
<4%	4% to 5%	>5%
Target: 4%		

Budget posts that are empty actual and reforecast

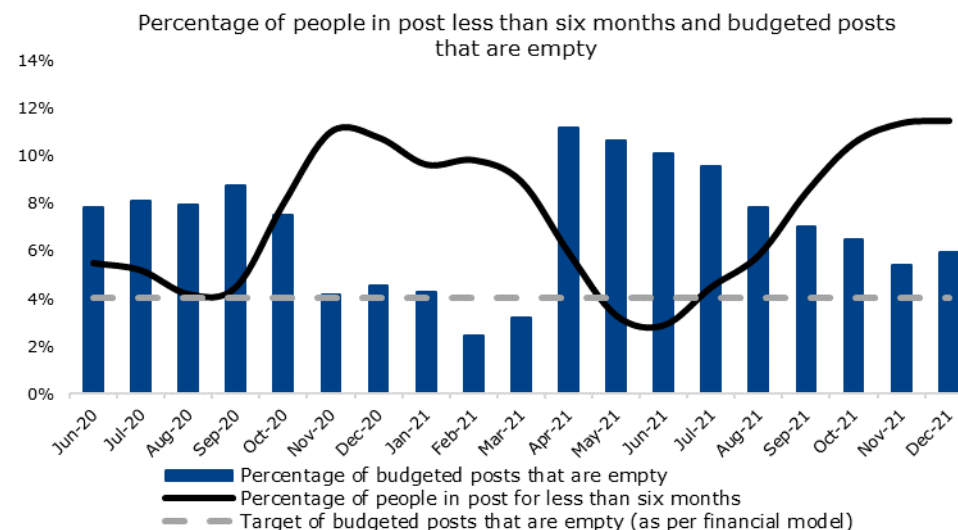
Apr-21	11.1%	178.2%
May-21	10.6%	165.8%
Jun-21	10.1%	151.8%
Jul-21	9.5%	138.6%
Aug-21	7.8%	94.9%
Sep-21	7.0%	75.6%
Oct-21	6.4%	61.2%
Nov-21	5.4%	34.7%
Dec-21	5.9%	48.6%
Jan-22	%	%
Feb-22	%	%
Mar-22	%	%

RAG		
Target: N/A		

People in posts for less than six months actual and reforecast

Apr-21	5.9%	--
May-21	3.3%	--
Jun-21	2.9%	--
Jul-21	4.5%	--
Aug-21	5.8%	--
Sep-21	8.5%	--
Oct-21	10.5%	--
Nov-21	11.4%	--
Dec-21	11.5%	--
Jan-22	%	--
Feb-22	%	--
Mar-22	%	--

Vacant posts versus budgeted posts remains low with only a slight increase in December 2021. Turnover was higher with people resigning and a gap while we wait for new starts to begin in the new year.



#### Management Action and Risk

This SPI is linked to strategic risk 6, we fail to develop and support SSSC staff appropriately to ensure we have a motivated and skilled workforce to achieve our strategic outcomes, which is currently scored as 12 (amber).

Department level information and impact will be introduced before the end of the financial year. Assurance report will highlight any at risk departments or directorates.

## **ORGANISATIONAL DEVELOPMENT**

### **4.7 OD: Compliance of mandatory courses**

This measure will be removed from the assurance report going forward. This measure will form part of the People Strategy update which will be reported to Council on a six-monthly basis.

## LEGAL AND CORPORATE GOVERNANCE

### 4.8 L&CG: SAR and FOI requests are dealt with within timescales.

This strategic performance indicator (SPI) reflects our work to deliver strategic characteristic 1: Always focused on needs of our customers as well as strategic characteristic 4: We are a respected and valued organisation.

RAG		
>90%	80% to 90%	<80%
Target: 100%		

Percentage of SAR completed on time		
Apr-21	86%	-14%
May-21	100%	0%
Jun-21	100%	0%
Jul-21	100%	0%
Aug-21	0%	-100%
Sep-21	100%	0%
Oct-21	100%	0%
Nov-21	75%	-25%
Dec-21	100%	0%

Jan-22  
Feb-22  
Mar-22

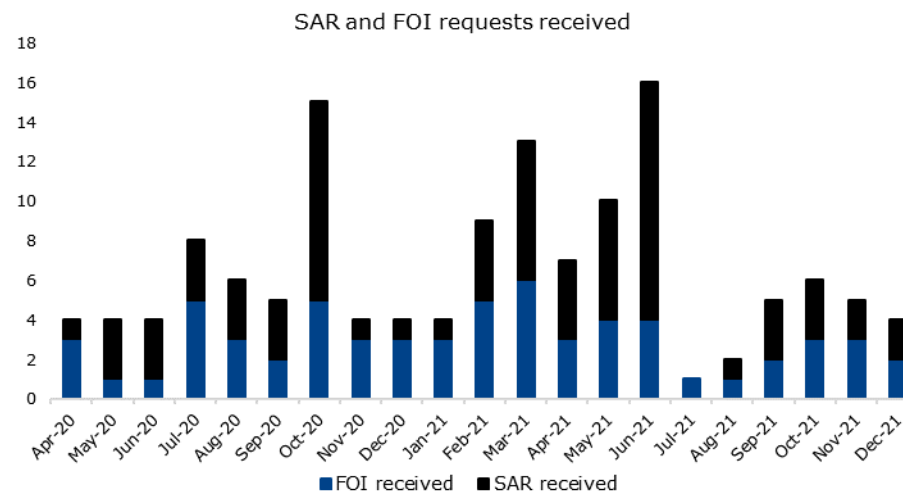
RAG		
>90%	80% to 90%	<80%
Target: 100%		

Percentage of FOI requests completed on time		
Apr-21	100%	0%
May-21	100%	0%
Jun-21	100%	0%
Jul-21	100%	0%
Aug-21	100%	0%
Sep-21	100%	0%
Oct-21	100%	0%
Nov-21	100%	0%
Dec-21	100%	0%

Jan-22  
Feb-22  
Mar-22

We must respond to Freedom of Information (FOI) requests within 20 working days. In December 2021 we responded to three requests and met the statutory timescales.

We must respond to 100% of SAR requests within one calendar month. In December 2021 we responded to three requests and met the statutory timescales.



### Management Action and Risk

This SPI is linked to strategic risk 3, We fail to meet corporate governance, external scrutiny and legal obligations, which is currently scored as 9 (yellow).



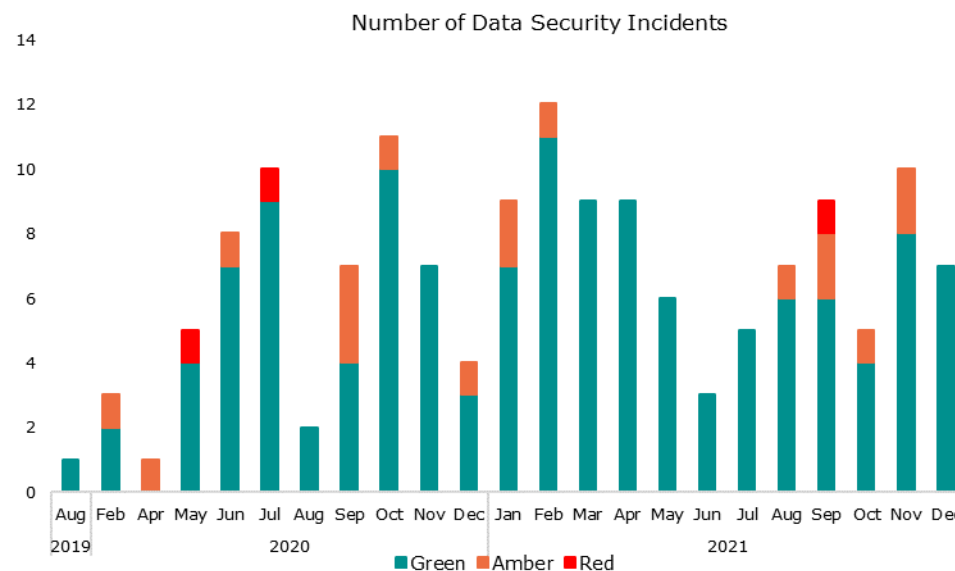
#### 4.9 L&CG: Number of security incidents/data breaches reported.

This strategic performance indicator (SPI) reflects our work to deliver strategic characteristic 1: Always focused on needs of our customers as well as strategic characteristic 4: We are a respected and valued organisation.

We complete a risk assessment and investigation in relation to each data security incident reported to the Information Governance team. We decide if the incident is a data breach. A data breach is a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data. We also note when we must refer a data breach to the ICO.

As part of the risk assessment process, we categorise data security incidents as low/green, medium/amber, or high risk/red, dependent on factors such as the volume of data released, the sensitivity of information released and the risk to affected individuals.

The Information Governance team assessed seven data security incidents in December 2021 and concluded that six were breaches and categorised all six as low/green.



#### Management Action and Risk

This SPI is linked to strategic risk 3, We fail to meet corporate governance, external scrutiny and legal obligations, which is currently scored as 9 (yellow). Each breach is assessed by the Information Governance team who make recommendations to make sure that a repeat of the incident does not happen.

We send the breach investigation report with the recommendations to the Head of Department. The DPO follows up recommendations for an amber or red categorised incident.

The Information Governance team will look at trend analysis of security incidents and improved reporting to departments.

## RISK REGISTER as at 31 December archived copy

Risk No.	Link to Outcome	Risk description	Gross Risk			Residual Risk			Owner	Movement since last review
			Impact	Probability	Score	Impact	Probability	Score		
1	1	We fail to ensure that our system of regulation meets the needs of people who use services and workers.	5	4	20	4	3	12	Director of Regulation	↔
2	2 3	We fail to ensure that our workforce development function supports the workforce and employers to achieve the right standards and qualifications to gain and maintain registration	4	4	16	4	3	12	Director of Development and Innovation	↔
3	1	We fail to meet corporate governance, external scrutiny and legal obligations.	4	4	16	3	3	9	Director of Finance and Resources	↔
4	1 2 3	We fail to plan and resource our activities to deliver our digital strategy.	4	3	12	1	1	1	Director of Strategy and Performance	↓
5	1	We fail to provide value to our stakeholders and demonstrate our impact.	3	4	12	3	3	9	Director of Strategy and Performance	↔
6	1 2 3	We fail to develop and support SSSC staff appropriately to ensure we have a motivated and skilled workforce to achieve our strategic outcomes.	5	4	20	3	4	12	Director of Finance and Resources	↔
7	1	The SSSC fail to secure sufficient budget resources to fulfil the financial plans required to deliver the strategic plan.	4	5	20	4	4	16	Director of Finance and Resources	↔
8		The current Business Continuity Plan (BCP) in place is not up to date for the SSSC.	4	5	20	2	2	4	Chief Executive	↔
9		The SSSC is unable to operate due to effects of global pandemic COVID-19.	5	5	25	2	1	2	Chief Executive	↓

## **CONTROL CHARTS**

This section gives a brief description of some of the terms used within the control charts, this will be expanded on within time.

Central line – this is the average performance and indicates the trend in performance. It is also used to calculate the lower and upper natural processes. If the line is flat then performance is steady, if the central line moves up or down this indicates that the trend in performance has changed over several months and the central line has had to be recalculated.

Natural process limit – This is the region between the lower natural process limit and the upper natural process limit. How performance sits within this limit will determine if we need to calculate the central line. If a performance point sits outside of this natural process limit, then it would be considered an outlier. The upper and lower natural limits are calculated based on the average of the moving range, the moving range being the difference between two performance points.