

Mr William Wragg MP
Chair, Public Administration and Constitutional Affairs Committee
By Email only



25 January 2022

Dear Chair,

I am grateful for your response to my letter of 5 January 2022. Thank you for your further points of clarification regarding your position on the MP filter. I look forward to engaging with you on this matter in greater detail at our next bilateral.

I have provided some information below in answer to the questions raised in your letter of 11 January 2022.

- **In your written evidence submission to the Committee, you committed to commission another value for money review. What progress has been made on this and can you set out the timetable for this review?**

At our last bilateral in 2021, I explained that the pandemic had delayed the next peer review because of limits on international travel. We are committed to carrying out the next Peer Review of PHSO's service in the next financial year. In line with good peer review practice, the review will include a focus on value for money but not be confined to that subject. Members of the review panel will be validated by the International Ombudsman Institute, and I will return to you with membership, terms of reference and timeline.

PHSO is taking a leadership role, inside the International Ombudsman Institute, in developing Peer Review of Ombuds schemes by using the Venice Principles as review process benchmarks. Following the success of the Manchester Memorandum Conference in November 2021, I will be hosting a further roundtable next month to develop the model. These developments will be presented at the International Ombudsman Institute European Congress in Athens in May 2022.

- **In your written evidence submission to the Committee, you outlined that, in light of the delay to the Comprehensive Spending Review, the year 2021-2022 is a so-called 'bridging year' between longer term organisational strategies. What are your strategic and business objectives for that year and what criteria are you using to judge whether or not you have been successful in achieving those objectives?**



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Alongside this letter, I attach PHSO's Business Plan for 2021-2022 which includes our business objectives for this financial year, as well as the criteria we are using to measure the success of our performance.

- P11 of this document sets out that our three key objectives for 2021-22 are:
 - Objective 1:** Managing the Impact of COVID-19 and Embedding Strategic Change
 - Objective 2:** Priority Corporate Projects
 - Objective 3:** Future Strategy Development
- P20 to P22 in this document sets out the range of key performance indicators (KPIs) and targets that we are using to track our success. These relate specifically to casework, experience of our service, our people and finance and governance.

I look forward to discussing the Committee's forthcoming report when it is available. In the meantime, please do get in touch with my Office should you need any further information.

Yours sincerely,

Rob Behrens

Rob Behrens CBE
Ombudsman and Chair
Parliamentary and Health Service Ombudsman



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PHSO

Business Plan 2021/22

independence | fairness | excellence | transparency

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Welcome from the Ombudsman and Chief Executive

2020/21 was a year without precedent. Like many organisations from across the world, PHSO was significantly affected by the COVID-19 pandemic, both in terms of the delivery of our service and how our people were able to operate. We adapted rapidly to new ways of working, with the majority of staff working from home for the whole of the year, rather than from our offices.

At the beginning of the pandemic we paused health-related complaints to protect the NHS. Work on health complaints restarted in July, but we continued to respond sensitively and dynamically throughout the year to all those organisations affected by COVID-19.

The impact of the pandemic has led to a significant increase in the number of people waiting for their complaints to be considered. At the end of the 2020/21 financial year, this queue stood at over 2,800, with people waiting much longer than we would want for us to consider their complaint. Our focus in 2021/22 will be to reduce the queue and return to a prompt and efficient service. We have therefore decided to delay the start of our new corporate strategy to the 2022/23 business year, to enable us to focus on the recovery from COVID-19. Whilst this will be our primary focus, we will also continue to embed the strategic change we have made over the three years of our 2018/21 strategy and delivering further improvements where we can do so. The 2021/22 business plan sets out our ambitions, how we will use our resources, how we will measure success, and the risks we must manage to achieve what we have set out. It bridges the period between the end of our 2018/21 strategy, and the start of the new strategy in 2022/23.

We have achieved much over the three years of the 2018/21 strategy including accreditation of senior caseworkers, moving to 'right decision, right time' decision making, introducing new mediation processes and making changes to how we use, and engage, clinical advice.

We have successfully re-engaged with the Ombuds community both nationally and internationally and increased our transparency through open meetings and regular Radio Ombudsman podcasts. From April 2021, in a huge step toward even greater transparency, we will begin publishing casework decisions online.

Following extensive engagement with the public, patient representatives and NHS bodies, we have recently launched a Complaints Standards Framework for front line NHS complaints handling services, with plans in place to revolutionise front-line complaints handling in the public sector over the next two years.

There are still many unknowns in the year ahead. Now, more than ever, we must balance our ambition with achievability. To do this, our plan for the next year is flexible, to enable us to respond to further impacts of the ongoing pandemic and to reduce unallocated case levels, while laying the groundwork for the successful launch of the new 2022/25 strategy.



Rob Behrens CBE
Ombudsman and Chair



Amanda Amroliwala CBE
Chief Executive

Part 1
who we are

Who we are

We were set up by Parliament to provide an independent complaint handling service for complaints that have not been resolved by the NHS in England and UK government departments.

We share findings from casework to help Parliament scrutinise public service providers. We also share our findings more widely to help drive improvements in public services and complaint handling.

Role

We combine the two statutory roles of Parliamentary Commissioner for Administration (the Parliamentary Ombudsman) and Health Service Commissioner for England (Health Service Ombudsman). The powers are set out in the Parliamentary Commissioner Act 1967 and the Health Service Commissioners Act 1993.

We are independent of government and the NHS in England. We are neither a regulator nor a consumer champion.

We are accountable to Parliament and our work is scrutinised by the Public Administration and Constitutional Affairs Committee.

Vision

To be an exemplary public services ombudsman by providing an independent, impartial and fair complaints resolution service, while using our casework to help raise standards and improve public services.

Values

PHSO's values were developed in close consultation with our staff so we all have a shared understanding about the type of ombudsman service we want to be.

The values are:

- **Independence** - we are independent from organisations we investigate, holding them to account for service failure or injustice
- **Fairness** - we listen carefully to complainants and the organisations we investigate and we make impartial and fair decisions based on relevant evidence
- **Excellence** - we learn from engagement with complainants and organisations we investigate to improve our accessibility, efficiency, effectiveness and the quality of our decisions
- **Transparency** - we communicate with those using our service and then publish information about our findings, how we are performing and how organisations we investigate have implemented our recommendations.

The Board

We are governed by a unitary, decision-making board of executives and non-executives. Their purpose is to lead, provide stewardship and to preserve and build our reputation.

The Board is led by its Chair, Rob Behrens, CBE, who was appointed Parliamentary and Health Service Ombudsman on 6 April 2017. The Chief Executive Officer, Amanda Amroliwala CBE, and her senior management team are also members of the Board.

The non-executive Board members bring an external perspective to our corporate governance. They come from diverse professional backgrounds and bring a wide range of experiences.

Expert Advisory Panel

The Expert Advisory Panel offers challenge and support to different areas of the organisation's work, including change project and high complexity casework. All input is at the invitation of the Ombudsman.

Part 2

a review of the
2018/21 strategy

Progress of the 2018/21 Strategy

The 2018/21 strategy set out our vision to become an exemplary ombudsman service through the achievement of three strategic objectives:

1. To improve the quality of our service, while remaining independent, impartial and fair;
2. To increase the transparency and impact of our casework; and
3. To work in partnership to improve public services, especially frontline complaint handling.

In 2018/19...

In the first year of the strategy, we invested significantly in **improving the quality of our service**. We created new casework training and an accreditation framework, researched and piloted approaches to resolving cases earlier and completed a review on how we commission, use and communicate clinical advice.

We started to consider approaches to **transparency and impact**. We published financial remedy principles and explored approaches to publishing more casework decision information. We also took steps to share more information through the annual open meeting, an annual lecture, Radio Ombudsman broadcasts and a number of podcasts conducted by the Ombudsman. We commissioned the first independent peer review of our service, which concluded we provide an important service that goes beyond investigating complaints and offers good value for money for taxpayers.

In 2019/20...

In the second year, we prioritised **improving the quality of our service**. We launched the Quality Strategy, completed internal accreditation of senior caseworkers, introduced approaches to resolving cases earlier and piloted a mediation approach. We also started to implement recommendations from the Clinical Advice Review and established an Expert Advisory Panel to advise on key areas of our work.

In terms of **transparency and impact**, we published: *'Missed Opportunities'* examining the deaths of two people under NHS care which led to a NHS Improvement review of leadership at the Trust; the eating disorder report, *'Ignoring the Alarms'*, which led to a PACAC inquiry and informed Government prioritisation of the issue; and *'The Ombudsman's Casework Report 2019'* which outlined 30 cases across our parliamentary and health remits.

We **worked in partnership**, running complainant focus groups to understand how to become an exemplary ombudsman. We co-developed an approach to ombudsman peer reviews with the International Ombudsman Institute and we led on, with the Belgian Ombudsman, a peer review of the Catalan Ombudsman. In December 2019, the Ombudsman was elected to the European and world boards of the International Ombudsman Institute.

In 2020/21...

In the final year of our strategy, our focus had to shift to respond to the COVID-19 pandemic equipping all staff to work from home safely and securely. We developed new casework policies and guidance for COVID-19 and streamlined our decision making.

To **improve the quality of our** service, we transitioned case mediation to business as usual. We progressed the Quality Strategy through launching performance and quality targets for our staff, introducing Parliamentary specialist teams, progressing work to improve compliance and developing e-learning modules to support improved decision-making.

To increase **transparency and impact**, we developed the platform we will use to publish casework decisions and we are on track to begin publishing casework decisions online from the end of April 2021.

We **worked in partnership** to develop the Complaints Standards Framework to improve frontline complaints handling and launched the framework at the end of March 2021. Training for frontline complaint handlers will be taken forward as part of a Standards, Training and Accreditation Programme in 2021/22. The Ombudsman also continued to raise our national and international profile, conceiving and publishing findings of research into the international Ombudsman responses to COVID-19 - *The Art of the Ombudsman: leadership through international crisis*.

Part 3

business plan

key activities

What we will deliver in 2021/22

The following pages set out the specific activities we will undertake in 2021/22.

In December 2020, the Board agreed to delay the launch of the new strategy until 2022/23, allowing for a period of recovery and stabilisation from the impact of COVID-19. Our three key objectives for 2021/22 are:

Objective 1: Managing the Impact of COVID-19 and Embedding Strategic Change

Objective 2: Priority Corporate Projects

Objective 3: Future Strategy Development

The activities are grouped against each objective and have a relevant owner. Although the plan is for the 2021/22 business year, we have indicated where some activity will continue into 2022/23.

Recognising the uncertainty and the impact of the pandemic has had, and will continue to have, on our operating environment, the business plan has a delivery confidence Red, Amber, Green (RAG) rating for each activity.

Objective 1: Managing the Impact of COVID-19 and Embedding Strategic Change

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of Delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	1.1 Additional resources to manage both the casework queue and increasing demand Ensure the right additional resources are in place to manage casework and to respond to a potential increase in demand across the organisation, including casework, systemic casework, legal, mediation and liaison activity	Chief Executive	No	2,544.5	-	2020/21 Commence Q3 2021/22 Complete	Medium Impact	High Benefit	Yes Required to address the increase in demand pressures across the organisation
	1.2 COVID-19 Policy Project Ongoing development of the policy approach to COVID-19 cases, via COVID-19 teams/forum. Embed and monitor the effectiveness of revised assessment decision process (both quality and efficiency)	AD Operational Performance	Yes	-	-	2020/21 Commence Q3 2021/22 Complete	Low Impact	Medium Benefit	Yes Required to streamline casework process
	1.3 Systemic Team Development Develop a Systemic Casework Team, trained in human factors investigations	AD Senior Casework	No	Dependent on investment in 1.1	-	2020/21 Commence Q4 2021/22 Complete	Medium Impact	Medium Benefit	No
	1.4 Casework Demand Management Project Develop and implement options to reduce/streamline the approach to less serious cases in order to prevent unrecoverable increase in queue of unallocated cases	AD Operational Performance	No	66.7	-	2020/21 Commence Q2 2021/22 Complete	High Impact	High Benefit	Yes Required to support the casework process
	1.5 Baseline the Casework Process Baseline the casework process to produce a more detailed view of casework activity. This will allow us to better assess impact of any future change proposals and their impact on productivity.	Director of Operations	Yes	-	-	Q1 2021/22 Commence Q1 2021/22 Complete	Low Impact	High Benefit	Yes Will improve time it takes to decide complaints

Objective 1: Managing the Impact of COVID-19 and Embedding Strategic Change

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of Delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	1.6 Quality Programme - End-to-End Review Review the end-to-end casework process, identify opportunities to reduce waste and increase efficiency and deliver agreed process changes. In 2021/22 the activity will focus on changes that try to limit the impact on casework delivery where possible	AD Q&I	No	43.0	-	Q2 2021/22 Commence Q4 2022/23 Complete	High Impact	High Benefit	No
	1.7 Quality Programme - Clinical Advice Outstanding Activities (Medium Casework Impact) We have completed or are on track to complete a large number of outstanding Clinical Advice Project activities in 2020/21 (including clinical advice shared on request and multi-disciplinary meetings in high risk cases). We anticipate completing the following in 2021/22: <ul style="list-style-type: none"> • Sighting Clinical Advisers on provisional views in SCW cases • Communicating qualifications of a clinician and piloting naming clinicians • Embedding surveys of clinicians and caseworkers • Continue to involve clinicians more at assessment stage • Review if sharing qualifications and improving communication improves perception of service • Assess current policy and capability in systems-based approaches and root cause analysis 	AD Q&I	No	119.0	-	2020/21 Commence Q4 2021/22 Complete	Medium Impact	Disbenefit	Yes Current Strategic Priority
	1.8 Quality Programme - Clinical Advice Outstanding Activities (High Casework Impact) The following activities, while likely to be complete and ready for roll out, may need to be paused due to the high impact on casework: <ul style="list-style-type: none"> • Sighting Clinical Advisers on all provisional views 	AD Q&I	No	Dependent on investment in 1.7	-	2020/21 Commence TBC Complete	High Impact	Disbenefit	Yes Current Strategic Priority

Objective 1: Managing the Impact of COVID-19 and Embedding Strategic Change

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of Delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	<ul style="list-style-type: none"> Review risk profiling to ensure that it captures 'severity of potential harm'. Risk profiling review to inform engagement with the NHS wide 'emerging concerns' protocol Identify any changes needed to guidance, caseworker accreditation, quality assurance, training & recruitment 								
	<p>1.9 Quality Programme - Balancing Evidence Deliver training for casework staff in:</p> <ul style="list-style-type: none"> ALR and time limit e-learning Balancing evidence and probability <p>A phased and targeted approach may be employed to lower the impact on casework</p>	AD Q&I	No	Dependent on investment in 1.7	-	Q2 2021/22 Commence Q4 2021/22 Complete	Medium Impact	Low Benefit	No
	<p>1.10 Quality Programme - Digital Publishing Platform (DPP) Casework Publication Continue the process of publishing the majority of casework online</p>	AD Q&I	No	Dependent on investment in 1.7	-	Q1 2021/22 Commence Q4 2021/22 Complete	High Impact	Disbenefit	Yes Current Strategic Priority

Objective 2: Priority Corporate Projects

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of Delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	2.1 HR Transformation Continue the HR Transformation Project, which includes updating HR policies and implementing a new HR system	COO	No	69.0	368.0	2020/21 Commence Q4 2021/22 Complete	Medium Impact	Low Benefit	No
	2.2 Cyber Security and Privacy Commission and implement new managed services to strengthen our cyber security and privacy arrangements	AD Info Assurance	No	192.0	-	Q2 2021/22 Commence Q4 2021/22 Complete	Low Impact	No Benefit	Yes To reduce risk of malware attack and improve data recovery capability
	2.3 Corporate Intelligence Continue to implement the Corporate Intelligence Project, including the development of the data strategy, the data warehouse and new data analytical techniques	AD Business Mgt	No	30.0	206.9	2020/21 Commence Q4 2021/22 Complete	Medium Impact	Low Benefit	Yes To improve data reporting and analysis
	2.4 Millbank Office Extend the Millbank Office lease	AD ICT & Accom	No	10.0	-	Q1 2021/22 Commence Q4 2021/22 Complete	No Impact	No Benefit	Yes Lease at Millbank is at renewal point
	2.5 Ombudsnet Design and implement a new intranet system adopting approaches which minimise the impact on casework but maintain quality	AD Comms	No	59.5	148.0	Q1 2021/22 Commence Q4 2021/22 Complete	High Impact	High Benefit	Yes Current system out of support in 2021
	2.6 Assurance Review Complete the review of assurance arrangements, particularly the assurance table	Chief of Staff	Yes	-	-	2020/21 Commence Q2 2021/22 Complete	No Impact	No Benefit	Yes Audit Committee requirement

Objective 3: Future Strategy Development

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	3.1 Demonstrating the Impact of our Service Increase the information that we publish and highlighting significant cases to the media, Parliament and public to help demonstrate our impact	AD Comms	No	74.0	-	Ongoing	Low Impact	Disbenefit	No
	3.2 Standards, Training and Accreditation Programme Embed the Complaint Standard Framework in the NHS, develop new standards for Parliamentary organisations, and introduce a new Online Training Platform	AD Strategy & Partnerships	No	107.0	110.5	2020/21 Commence Q4 2021/22 Complete	Low Impact	Medium Benefit	No
<u>DEVELOPING OUR SKILLS</u>									
	3.3 Development of <i>Dispute Resolution Skills</i> Training Learning and Development resource to develop general caseworker training on EDR skills	AD Strategy & Partnerships	No	52.0	-	Q1 2021/22 Commence Q4 2021/22 Complete	Low Impact	Medium Benefit	Yes To support current Strategic Priority
	3.4 Development of <i>Human Factors Approach to Investigation</i> Training Learning and Development resource to develop a human factors approach to investigation training module for Senior Systemic Caseworkers	AD Strategy & Partnerships	No	Dependent on investment in 3.3	-	Q1 2021/22 Commence Q4 2021/22 Complete	Low Impact	Medium Benefit	Yes Clinical Advice review commitment
<u>DEVELOPING OUR ORGANISATION</u>									
	3.5 Smarter Working Programme - Future Working Practices Policy Approach Review our working practices approach following the research and consultation looking at new ways of working. Outcomes of this policy approach will feed into 3.6	Chief of Staff	Yes	-	-	2020/21 Commence Q1 2021/22 Complete	Medium Impact	Medium Benefit	Yes Potential for working at home for longer requires embracing new ways of working

Objective 3: Future Strategy Development

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	3.6 Smarter Working Programme - Scoping the Programme Building upon the Future Working Practices project by defining the long-term vision for Smarter Working. This will include embracing technology and facilities that increases remote working capabilities and reduces office space, travel and consumption of resources, such as paper. Improving the skills, capabilities and understanding of our staff to ensure improvements are well received and embedded in future practices	Director of Resources	No	199.0	-	Q1 2021/22 Commence Q2 2021/22 Complete	Low Impact	No Benefit	Yes Potential for working at home for longer requires embracing new ways of working
	3.7 Smarter Working Programme - Implementing Recommendations of Scoping Implement immediate Smarter Working priorities, such as enhanced Microsoft 365 functionality. From Q2, begin to implement the recommendations from the scoping exercise in 3.6 (into 2022/23)	Director of Resources	No	50.0	300.0	Q1 2021/22 Commence Q4 2022/23 Complete	Medium Impact	High Benefit	Yes Potential for working at home for longer requires embracing new ways of working
	3.8 Smarter Working - ICT Infrastructure (VDI) Improving the ICT infrastructure for remote working, through moving away from the Virtual Desktop Infrastructure (VDI) to a secure alternative solution	AD ICT & Accom	No	33.0	350.0	Q2 2021/22 Commence Q4 2022/23 Complete	Low Impact	High Benefit	No
	3.9 Recruitment and Benchmarking Diversity Refine our approach to recruitment to ensure that we attract a diverse, skilled range of candidates, reflecting the diversity of the regions from which our members of staff are drawn. <ul style="list-style-type: none"> • Full review of our recruitment approach • New recruitment system • All recruitment fully anonymised • Application-based recruitment rather than CV based • Integrating EDI strongly through all L&D activity 	AD HR	No	Dependent on investment in 2.1	Dependent on investment in 2.1	2020/21 Commence Q4 2021/22 Complete	Low Impact	No Benefit	No

Objective 3: Future Strategy Development

Delivery Confidence Level	Activity	Accountable Officer	RESOURCES REQUIRED			Timing of delivery	Impact on Casework Timeliness		Strategic Commitment / Business Critical
			Within Existing Budget	Investment Requirement			Immediate Impact	Longer Term Benefit	
				Resource 21/22 £000	Capital 21/22 £000				
	3.10 Develop the Strategy Continue to refine the draft Corporate Strategy for 2022/25	Director of External Affairs, Strategy & Comms	Yes	-	-	2020/21 Commence Q4 2021/22 Complete	No Impact	No Benefit	Yes In line with Board commitment
	3.11 ICT Roadmap Develop an ICT Roadmap for 2021/22 to support delivery of the Corporate Strategy 2022/25. Full ICT Strategy to follow in 2022/23.	AD ICT & Accom	Yes	-	-	Q1 2021/22 Commence Q1 2021/22 Complete	No Impact	No Benefit	No
	3.12 Develop CSR Submission Continue to develop the CSR submission in line with the development of the Corporate Strategy for 2022/25	Director of Resources	Yes	-	-	In line with HMT timescale	No Impact	No Benefit	Yes In line with HM Treasury timelines
	3.13 Communications Strategy Develop a communications strategy to be delivered alongside the Corporate Strategy 2022/25 (linked to 3.10)	AD Comms	No	Dependent on investment in 3.1	-	Q2 2021/22 Commence Q4 2021/22 Complete	No Impact	No Benefit	No
	3.14 Stakeholder Engagement Strategy Develop a stakeholder strategy aligned to our Communications Strategy (linked to 3.10 and 3.13)	AD PA & Insight	Yes	-	-	Q2 2021/22 Commence Q4 2021/22 Complete	No Impact	No Benefit	No

Part 4
measuring
performance

Key Performance Indicators

We will track success of the business plan through progress updates to the Board on the key activities we have set out in **Part 3 Business plan key activities**. Success will also be tracked through the set of key performance indicators (KPIs). The KPIs we will measure against in 2021/22 are set out below.

Key Performance Indicators and Targets							
Metric		Baseline to enter into 2021/22 and most recent benchmarks	Proposed 2021/22 Target	2021/22 RAG thresholds			
				Red	Amber	Green	
OPERATIONAL PERFORMANCE	Casework	Unallocated complaints before initial enquiries (#)	164 (P10 2020/21)	Monitoring only	n/a	n/a	n/a
		Unallocated complaints at primary investigation (#)	2593 (P10 2020/21)	Monitoring only	n/a	n/a	n/a
		Unallocated complaint reviews (#)	242 (P10 2020/21)	Monitoring only	n/a	n/a	n/a
		Complaints over 52 weeks (#)	568 (P10 2020/21)	Monitoring only	n/a	n/a	n/a
		Complaint reviews undertaken within 50 days (#)	60.5% (P10 YTD 2020/21)	Monitoring only	n/a	n/a	n/a
		Complaints decided following initial checks (within 7 days) (%)	98.8% (P10 YTD 2020/21)	Monitoring only	n/a	n/a	n/a
		Complaints decided following further investigation (within 13 weeks) (%)	27.0% (P10 YTD 2020/21)	Monitoring only	n/a	n/a	n/a
		Complaints decided following further investigation (within 26 weeks) (%)	56.1% (P10 YTD 2020/21)	Monitoring only	n/a	n/a	n/a
		Complaints decided following further investigation (within 52 weeks) (%)	91.5% (P10 YTD 2020/21)	Monitoring only	n/a	n/a	n/a
		Accuracy of demand forecast (latest quarterly formal forecast) (%)	-31.9% (P10 YTD 2020/21)	No target but RAG rated	>±10.0%	>±7.5%	≤±7.5%
	Accuracy of unallocated complaints forecast (latest quarterly formal forecast) (%) *NEW*	N/A	No target but RAG rated	>15.0%	>10.0%	≤10.0%	

Key Performance Indicators and Targets

Metric		Baseline to enter into 2021/22 and most recent benchmarks	Proposed 2021/22 Target	2021/22 RAG thresholds			
				Red	Amber	Green	
Experience of service	'Giving you the information you need' <i>Complainant Feedback (%)</i>	84% (Q3 2020/21)	84%	<74%	<84%	≥84%	
	'Following an open and fair process' <i>Complainant Feedback (%)</i>	71% (Q3 2020/21)	70%	<61%	<70%	≥70%	
	'Giving you a good service' <i>Complainant Feedback (%)</i>	68% (Q3 2020/21)	70%	<60%	<70%	≥70%	
CORPORATE HEALTH	Our People	Staff turnover (permanent staff only) (%)	5.8% (P10 YTD 2020/21) No equivalent benchmark	Monitoring only	n/a	n/a	n/a
		Staff turnover (headcount - permanent and fixed-term staff, excluding agency) (%)	10.2% (P10 YTD 2020/21) 9% (2017/18 Civil Service) 16% (2020 CIPD all sectors)	9.0%	>15.0%	>9.0%	≤9.0%
		Average number of working days lost due to sickness absence per FTE (12 month rolling average)	9.9 (P10 2020/21YTD) 7.4 average working days lost (AWDL) per staff year (2019/20 Civil Service) 8.0 days per employee (2020 CIPD Public Sector)	8.4	>10.0	>8.4	≤8.4
		Staff who are Black, Asian, mixed ethnicity and other ethnic group (%)	14.0% (P10) 14.0% (2011 Census) 13.2% (2019/20 Civil Service)	14.0%	<12.0%	<14.0%	≥14.0%
		Black, Asian, mixed ethnicity and other ethnic group candidates at application stage of the recruitment process (%)	30.4% (P9 YTD 2020/21)	30%	<20%	<30%	≥30%
		Black, Asian, mixed ethnicity and other ethnic group candidates appointed (%)	27.7% (P9 YTD 2020/21)	30%	<20%	<30%	≥30%

Key Performance Indicators and Targets

Metric		Baseline to enter into 2021/22 and most recent benchmarks	Proposed 2021/22 Target	2021/22 RAG thresholds		
				Red	Amber	Green
Finance & Governance	Staff who have a disability (%)	11.7% (P10 2020/21) 12.8% (2019/20 Civil Service)	12.8%	<10.8%	<12.8%	≥12.8%
	Staff who are female* (%) <i>*NEW*</i>	59.5% (P10 2020/21) 53.8% (2019/20 Civil Service)	Monitoring only	n/a	n/a	n/a
	Staff who are LGB or recorded sexual orientation as 'other'* (%) <i>*NEW*</i>	8.5% (P10 2020/21) 5% (2019/20 Civil Service)	8.5%	<5.0%	<8.5%	≥8.5%
	Engagement index (%)	66% (2020/21) 66% (2020/21 Civil Service)	66%	<56%	<66%	≥66%
	Operating within control totals	YES (P10 2020/21)	YES	NO	-	YES
	Percentage of FOI requests reported on time (%)	90% (P9 YTD 2020/21) 90% (ICO target)	90%	<80%	<90%	≥90%
	Percentage of Subject Access Requests completed on time (%)	41% (P9 YTD 2020/21) 90% (ICO target)	90%	<80%	<90%	≥90%

* We currently do not ask if staff identify with a gender different than the one assigned to them at birth. This question has been incorporated into the specification for the new HR system

Part 5
resources

Budget allocation

The tables below provide details of total resource and capital budget allocations for 2021/22.

Table 1: Resource budget position	2020/21 £m	2021/22 £m
Resource funding available	28.4	31.7
Baseline budget (exc depreciation)	28.4	28.2
2021/22 proposed investments in business plan (plus additional priorities outside of the plan)		3.8
2021/22 savings		(0.3)
Total Resource Budget Requirement	28.4	31.7
(Surplus) / Shortfall in year	0	0
Cumulative (Surplus) / Shortfall	0	0



Table 2: Capital programme	2021/22 £000
Capital funding available	2,000
Year 2 of HR Transformation project	368
Year 2 of Corporate Intelligence project	207
Ombudsnet- Design and implement new intranet system	148
Standards, Training & Accreditation Programme	111
Smarter Working Programme - Implementing recommendations of scoping	300
Smarter Working ICT infrastructure (VDI)	350
Capital Programme (Allocated)	1,484
(Surplus) / Shortfall	(516)

Part 6

risks to delivery

Business Plan delivery risks

These are the principal delivery risks to delivery as we enter the business plan year. We have included what we are doing to mitigate these business plan delivery risks.

Risk Description	Risk Rating	Response
<p>1 <u>Long term impact of COVID-19 on the service and staff</u> There is a risk that we do not accurately anticipate the long-term impact of COVID-19 on demand for our service or the wellbeing and capacity of our staff, all of which pose a significant risk to delivery capacity.</p>		<p>The way we monitor the implementation of activities in this plan is our main response to this risk. We will continue to monitor and forecast unallocated casework levels, staff wellbeing and capacity using the best available information. We will closely track performance against the business plan and continually assess its deliverability, making in-year prioritisation decisions as required based on the assessment of impact, benefit and business-criticality.</p>
<p>2 <u>Capacity to deliver</u> There is a risk that activities in the business plan may need to be re-phased into the following year due to fluctuating and unpredictable capacity at all levels of the organisation due to impact of COVID-19.</p>		<p>We have assessed the feasibility of the plan through impact assessment on PHSO teams and services. We have also presented the plan with a delivery confidence RAG rating indicating where we are more confident on our ability to deliver activities in full. We will continue to focus on the critical activities to deliver the business plan objectives, making in-year decisions about prioritisation based on the assessments of impact, benefit and criticality.</p>

Part 7

equality, diversity
and inclusion

Improving our approach to equality, diversity and inclusion

Equality, diversity and inclusion are key factors underpinning all aspects of activity at PHSO. This action plan is aligned to the key activities of our Equality and Diversity Strategy.

Priority	Deliverable	Timing of Delivery
1. There will be a focus on improvement through coaching and learning from others. Tailored support will enable individuals to be open about their abilities, experiences and ambitions for the future.	a) Enhance coaching skills for managers to support management of difference through the exemplary manager programme;	Q1 21/22 commence Q4 21/22 complete
	b) Embed staff participating in one full day of EDI activities per year and recording their participation in My Learning.	Q1 21/22 commence Q4 21/22 complete
	c) Embed monitoring of staff participation in EDI activities biannually.	Q2 21/22 commence Q4 21/22 complete
	d) Development of EDI learning mechanisms	Q1 21/22 commence Q4 21/22 complete
	e) Benchmark our EDI performance against peer organisations and other relevant sectors to identify best practice for future development.	Q3 21/22 commence Q4 21/22 complete
	f) Following pilot, deliver bi-monthly manager circles to participants of the exemplary manager programme.	Q4 21/22 commence Ongoing
2. We will improve diversity in management and leadership roles through changes to the way we recruit and to how we encourage diverse progression.	a) Embed reporting of data biannually to DSG to understand workforce demographics.	Q2 21/22 commence Q4 21/22 complete
	b) Using the bi-annual data report evaluate the outcome of changes to recruitment and where future development may be required	Q3 21/22 commence Q3 22/23 complete
	c) Conduct a rolling programme of cultural audits to understand the experience of culture in the organisation as a whole and to drive change where needed.	Q2 21/22 commence Q4 23/24 complete

Priority	Deliverable	Timing of Delivery
	d) Review of process for taking extended leave (parental leave, sabbaticals) to provide structured support for individuals.	Q1 21/22 commence Q4 21/22 complete
	e) Embed reporting of data biannually to DSG of application and participation in development programmes and project teams.	Q2 21/22 commence Q4 21/22 complete
	f) Ensure that the external presentation of the organisation represents diversity using opportunities through the website, social media, insight reports, podcasts, All Staff Event and Open Meeting.	Q1 21/22 commence Ongoing
3. We will better understand the requirements of complainants from diverse communities. Our service will identify those with specific requirements at the outset, so that can be properly accommodated. The data we collect will give us deeper insight into who bring complaints to us, so we can understand and respond to any barriers to using our service.	a) Consider how we can develop further capabilities to collect information in our CMS to understand who brings complaints	Q4 20/21 commence Q4 21/22 complete
	b) Understand barriers to our service through engagement with external audiences in the end to end service review to identify service improvements.	Q1 21/22 commence Q3 22/23 complete
	c) Embed reporting biannually of data to the DSG on disabilities and reasonable adjustments recorded in CMS.	Q2 21/22 commence Q4 21/22 complete
	d) Embed sharing insight through casework communications and website to keep complainants update on how we have adjusted our service to remove barriers.	Q1 21/22 commence Ongoing