Ref. Assigned to Documents Required

Comments 31/03/2023 31/01/2022 30/01/2022 30/09/2022 30/06/2022 30/06/2022 30/06/2022 30/06/2022 30/04/2022 30/04/2022 30/04/2022 31/102/2022 30/04/2021 31/08/2021 31/05/2021 30/04/2021 30/04/2021

| Staff and resources | | |
|---------------------|--|------------------------|
| S1 | We will aim to ensure that we have the staff required with the relevant skills, knowledg | |
| | experience and values to acquit our functions; we will review our current structure and staffing arrangements and identify those areas that require to be revised in order for us | |
| | to work most effectively | 5 |
| i | Fill all vacancies currently being carried as a matter of priority. Include increased | _ |
| 1 | capacity to support SMT and rise in investigatory work for MSP and councillor | |
| | complaints. | |
| ii AO | Draft business case for SPCB to cover: Additional IO post, Additional CSO post, Full | Completed |
| | time hours for PAO post | |
| | Case drafted | |
| | Case agreed | |
| iii AESC/SIO | Recruit to IO posts | Completed |
| | Two IO vacancies filled | |
| | An additional IO appointed | _ |
| iv AESC | Cover for PAM role as currently fulfiling role of AESC as well as MSP complaint | Completed |
| | handling | |
| | PAO temporary promotion to PAM role for one year | A = = 1 = = = 1 |
| v AESC/PAM | Backfill PAO role thorugh recruitment, secondment or agency | Assigned |
| | PAO appointed for one year | |
| | | |
| | | |
| vi AESC/AO | Recruit to additional CSO post to provide support for AESC and SMT | Completed |
| | CSO appointed | |
| vii AO/SIO/PAM | Induct all new staff into their roles | Completed |
| | Induction successfully completed | |
| viii AESC/SMT | Complete draft action plans for all activity for next two years based on biennial busines | s Completed |
| | plan – map staff/resources/available skillsets to all activities | |
| | Staff members and teams mapped to individual actions – ensure resilience/double | |
| | cover as failsafe for staff departures and/or incapacity | |
| | Action plans drafted for two years completed | |
| | Actions mapped to avaliable staff, building in resilience and cross-office working | |
| | | |
| | | |
| | Assess operational efficiency of new staff complement against office needs at time and | d Assigned |
| | for future | soiginou |
| | Assessment conducted | - |
| | Reassess office needs to produce a final workforce plan | Assigned |
| | Final workforce plan produced | 5 |
| | • | |
| | | |
| | | |
| | | |
| ix AESC/SMT | Performance reviews conducted for all staff and actions for year ahead agreed | Completed |
| | All staff introduced to linkages between strategic business and action plans as well as financial implications of activities | |
| | | |

Performance reviews conducted and individual action plans agreed

| S2 | | We will aim to ensure that all staff are trained and developed to fulfil their roles | | |
|----|--------------|---|------------|--|
| 32 | | effectively, including on the revised Codes of Conduct for Councillors and Members of | | |
| | | Public Bodies, good practice in complaint handling and equality diversity and inclusion | | |
| | | in all of our practices | | |
| i | AESC/SMT | Formal training and development plans to be agreed with all staff in order for them to | Assigned | Thus far, all relevant staff have receive |
| | | meet their individual objectives (see S1). Highlighted training includes presentation at | | training in presentation at hearings, |
| | | hearings, management and governance, MSP complaint-handling, health, safety and | | management and governance, MSP ar |
| | | wellbeing risk assessments, investigating complaints of harassment, Plain English and | | other complaint-handling (investigatory |
| | | attention to detail. Incorporates C4i. | | supporting people party to harassment |
| | | | | complaints, handling complaints about |
| | | | | Plain English and attention to detail. |
| | | | | |
| | | Plans agreed for current staff | | |
| | | Plans agreed for new staff following probationary period | | |
| | AESC/AO/SMT | Training secured from relevant sources | Completed | Training was assumed and was in Manah |
| | | Appropriate training researched, costed and obtained | | Training was secured and run in March April on sexual harassment investigatio |
| | | | | EDI with a focus on trans issues. |
| i | AESC/SMT | Training rolled out | Completed | |
| | | Staff training rolled out | | See S2 |
| 33 | | We will regularly survey staff and act on the results of such surveys with a view to | | Flexible working preferences survey |
| | PAM | Surveys designed to cover: flexible working preferences, views on the organisation, | Assigned | rioxibio working protoronood ourvoy |
| | | wellbeing levels | assigned | |
| | | Surveys designed - flexible working | | |
| | | Surveys designed | | |
| | | SMT agree content - flexible working | | |
| | | SMT agree content | | |
| | | Surveys finalised - flexible working | | |
| | | Surveys finalised | | |
| | AESC/SMT | Survey results reviewed at SMT meetings | Assigned | |
| | | Conclusions drawn - flexible working | | |
| | | Conclusions drawn | | |
| | | Practices revised - flexible working | | |
| | | Practices revised | | |
| 4 | | We will introduce a suite of new and revised policies that have staff wellbeing at their | Completed | |
| | | heart. We will ensure that staff are trained to fulfil their role in a way that is respectful of all indivduals who contact us, regardless of their backgrounds | | |
| | | All staff introduced to and consulted on our values as an office to ensure understanding | Completed | |
| | | of and adhereance to these in all of our work | Jonipiered | |
| | | Staff introduced to values | | |
| | | Staff asked to provide views in formal and informal settings | | |
| | | Staff demonstrate understanding of and adherence to our values | | |
| | PAO/AESC/SMT | All HR related policies revised or updated to take account of our revised operational | Completed | |
| | | context (including pandemic) and to secure staff wellbeing | | |
| | | Suite of draft policies produced alongside reasons for introduction of new policies or | Completed | |
| | | amended existing ones | | |
| | PAO | Staff consulted on all policies | Completed | |
| | | Policies issued for views | | |
| | PAM | Revised policies in place | Completed | |
| | | Results of consultation fed back to staff | | |
| | | Policies introduced | | |
| | | Policies published | | |
| | | Secure confidential counselling services for staff who wish to use them | Completed | |
| | AO/SIO | · · · · · · · · · · · · · · · · · · · | | |
| / | AU/SIO | Confidential counseling service in place Staff provided with means to access service | | |

| C1 | | We will consult all relevant stakeholders on our current complaint handling procedures | Assigned |
|--------|----------------|---|----------------|
| | | and revise them and publish them in the form of an investigations manual which takes | |
| | | account of the views received. Parts of the manual will be produced in Easy Read, BSL | |
| | | and other languages to ensure accessibility | |
| C2 | | We will adapt our procedures to take account of stakeholder views and engender trust in the way that we work | |
| i | AESC/SIO | Upgrading and updating of procedural documentation (templates, factsheets, | Assigned |
| | | flowcharts, checklists etc) for MSP, councillor and board member complaint handling | Ŭ |
| | | Interim changes to admissibility forms to be agreed with Standards Commission as a | |
| | | starting point (urgent) | |
| | | Template letters revised to align with organisation's values (urgent) | |
| | | All documentation updated, adopted and published, in the form of a draft investigations | |
| | | manual for consultation | |
| ii | SIO/IOs | Adopt new procedures for interim period | Completed |
| | | Procedures adopted and staff trained on use | - |
| iii | SIO | Issue manual to key stakeholders for comment | Assigned |
| | | Draft manual published on website | |
| | | | |
| | | Stakeholder views invited | |
| | | | |
| | | Responses incorporated | |
| | | | |
| iv | AESC/SIO | Develop an action plan documenting an appropriate suite of arrangements in | Completed |
| | | anticipation of amending legislation (sexual misconduct plus removal of the time bar) | |
| | | coming into force | |
| | | Initial liaison with relevant parties | |
| | | Development of outline proposal | |
| | | SPCB interaction as necessary | |
| | | | |
| | | | |
| | | | |
| | | | |
| i | AESC | Map key stakeholders | Completed |
| | | Full list of stakholders established | |
| ii | AESC | Make initial informal contact | Completed |
| | | Initial discussions conducted by way of remote meetings | A A A A |
| iii | AESC | Contact formally by way of introduction ot AESC and plans for office | Completed |
| | | Email to all stakeholders with copy of strategic plan | |
| iv | AESC/SIO | Consultation with key stakeholders on prospective changes | Completed |
| | | Stakeholder views collated and analysed | |
| v | AESC | Stakeholder view lead to adaptation and adoption of final revised strategic plan | Completed |
| | | Views on broad proposals incorporated into revised strategic plan | |
| | | Reasons for adoption or rejection of suggested changes recorded | |
| C3 | | We will pubish our procedures as revised so that everyone knows what to expect | |
| i | SIO | Publish revised investigations manual | Assigned |
| | | | |
| | | | |
| | | | |
| | | | |
| ii | HCS/CST | Have parts of manual that are of interest and relevance to the public translated into | |
| | | BSL, Easy Read and other languages | |
| Public | c Appointments | | |
| A1 | | We will publish for consultation a draft revised Code of Practice for appointments with a | Completed |
| | | greater focus on outcomes, accountability and transparency and an emphasis on | |
| | | learning lessons | |
| | | | |

| i | AESC/PAM | Publish analysis of consultation responses on prospective Code of Practice revisions alongside a draft of the revised Code for consulation | Completed | |
|-----|--------------------|--|-----------|--|
| | | Lay draft and consult Scottish Ministers, Scottish Parliament and key stakeholders on proposals from July 21-Sept 21 | | |
| | | Analyse responses by November 2021 | | Deadline extended for further consultation with SG. Analysis completed in February 2022. |
| A2 | | We will take account of all stakeholder views in order to finalise the Code | | |
| i | AESC | Publish results of analysis | Completed | |
| | | Results published and provided to all stakeholders | | Deadline extended for further consultation with SG. Analysis completed in February 2022. Publication delayed until March 2022. |
| ii | AESC | Introduce revised Code | Assigned | |
| | | Publish and provide to Scottish Parliament | | Deadline extended for further consultation with SG. Analysis completed in February 2022. Publication delayed until March 2022. |
| iii | HCS/CST | Have parts of Code that are of interest and relevance to the public translated into BSL, Easy Read and other languages | | |
| A3 | | We will provide guidance and support to everyone engaged in the appointments process with a view to their implementing the new Code's provisions effectively | | |
| i | AESC/PAM | Draft statutory guidance | Assigned | |
| | | Publish | | Deadline for Code extended for further consultation with SG. Guidance publication delayed until March 2022 |
| ii | AESC/PAM | Run training for PAAs, PAT and panels on new Code's application | Assigned | Now scheduled for spring and summer of 2022 - C/F |
| iii | AESC | New Code comes into effect | Assigned | Now scheduled for autumn 2022 - c/f in |
| | | Continual training and guidance developed to support revised Code Committee engagement on transparency and reporting | | consultation with SG |
| iv | APAM | Continue to feed into lessons learned for the Scottish Government by running applicant surveys on a round by round basis and providing reports of feedback, whenever a request to run a survey is made | Completed | |
| | | Reports produced after appointment rounds | | Ongoing |
| A4 | | We will seek support to revise and republish Diversity Delivers to include new recommendations for the achievement of greater board diversity | Completed | |
| i | AESC | Consult informally from September 2021 | | |
| ii | AESC | Issue formal request October 2021 | | |
| | AESC/PAM | Commence research into good practice and what the content of the revised strategy should include | | |
| | vernance and Accou | | | |
| G1 | | We will put new and more effective governance measures in place, inclusive of independent elements, to ensure for ourselves and to assure others, by way of public reporting, that we are achieving our objectives in line with our purpose and our values | | |
| | | and in line with the resources made available to us | | |
| i | AESC/SMT | Full review of governance arrangements | Assigned | Anne sinterest de la se de se de stien 00 E |
| | | Appointment of internal auditor | | Appointment delayed as Section 22 Report not published until Dec 2021 |
| | | Review of Advisory Audit Board remit and membership | | AAO provided paper to AAB on governance considerations in May 2021. Discussions on this, including how and the extent to which the |

considerations in May 2021. Discussions on this, including how and the extent to which the SPCB may be involved, are ongoing as at March 2022.

| | | Review of whistle-blowing policy | | | | Policy was updated following staf consultation in June 2021. Furthe depends on establishment of rep when concerns about ESC |
|-----------|--------|--|-------------|---|---|---|
| ii AES | | Assess external arrangements following publication of wider scope review report and recommendations | Assigned | | | |
| | | Engage with SPCB and parliamentary commitees | - | | | SPCB infomal engagement bega date. Formal engagement comm 2022 due to delayed s 22 report. at March 2022. AESC gave evide SPPA Committee in Feb 2022 an Govt, Housing and Planning Ctter 2022 |
| | | adopt reciprocal measures | | | | See entry immediately above. O/s end - C/F |
| iii AES | SC/SMT | Re-establish SMT meetings | Completed | | | |
| | | Re-establish meetings and standard agenda items | | | | |
| | | Agree adendas for year ahead to cover off additional items in policies etc. Publish minutes | _ | | | Delayed to Nov 2021 |
| | | Consider meeting publicly on quarterly basis | _ | | | Delayed to Jan 2022 |
| iv AES | | Revert to prior arrangements for risk assessment - updated to reflect the fact that | Completed | | | |
| | | substantive risks to ESC's operation were not identified and addressed | · · | _ | | |
| | | Adopt risk management policy | | | | |
| | | Populate risk register | | | | |
| | | Include risk as item for SMT quarterly meetings Consult AAB and internal auditors on arrangements on an ongoing basis | | | | |
| v AES | | Commission an external independent review of all decisions made on complaints from | Assigned | | | |
| | | August 2020. Report on findings | , looig.iou | | | |
| | | Seek approval for contingency funding for review Commission review | | | | Discussions with SPCB on issue formally in February 2022 and are O/S at year end - C/F Discussions with SPCB on issue formally in February 2022 and are |
| | | Report on findings | | | | O/S at year end - C/F Discussions with SPCB on issue formally in February 2022 and are O/S at year end - C/F |
| vi AES | | Review current schemes of delegation and revise to address contingencies such as avaliability of ESC/AESC to make decisions | Assigned | | - | 0/3 at year end - 0/F |
| | | Review scheme of delegation and identify areas where ESC/AESC authority required | | | | |
| | | Put alternatives in place to deal with contingency of no ESC/AESC availability to make | | | | |
| | | decisions Consider whether standing orders can be revised to ensure collaborative decision | Assigned | | | |
| | | making between ESC/SMT and wider organisation and preclude management override of controls | | | | |
| | | Revise standing orders to give SMT a clear governance role set out in terms of reference for ESC and SMT members | | | | See above at G1 v. re discussion SPCB. O/S at year end - C/F |
| | | Ensure ESC bound by SMT decisions in legislation and/or by some other contractual | | | | See above at G1 v. re discussion |
| viii AO/A | | Review and formalise the budget process to ensure formal approval obtained from SMT as a whole on an annual rolling basis including recommending the budget for submission to the SPCB | Completed | | | |
| | | Review and revise current budget process Agree revised process with SMT Schedule consideration of budget against agreed business plan annually | | | | |

| ix | AESC/AO | Prepare a medium-term financial plan to include alternative scenarios of expected income and expenditure in future years, associated assumptions for each scenario and quantifying the funding gaps. Take account of the impact of leaving the EU, the Covid-19 pandemic and other expected changes | Assigned |
|-----|---------|--|-----------|
| | | Scan horison for range of scenarios and their potential impact on ESC operation Quantify potential impact of each on avaliable resources Draft financial plan showing variances by senario(s) and their potential impact on the office's ability to fulfil its functions | |
| G2 | | We wil adopt quality assurance monitoring of key performance indicators, such as timescales for investigation stages, including surveys of the views of those with whom we come into contact, and report publicly on the results. We will use those results to | |
| i | SIO | Draft performance management framework. Reintroduce previous KPIs and consult on these and other new ones to track progress of investigatory work. | Assigned |
| | | Reintroduce prior KPIs by reference to annual reports | |
| | | Design new KPIs related to stakeholder views on our performance | |
| | | Consult stakeholders on appropriateness and relevance | |
| | | Analyse responses and adapt KPIs as appropriate | |
| ii | PAM/SIO | Include a survey that both complainers and respondents can complete on an anonymous basis to give views on how we investigate complaints | Assigned |
| | | Design and roll out survey Set baseline based on initial results | |
| iii | SIO/SMT | Previous KPIs and new ones adopted and published | Assigned |
| | | Adopt KPIs | |
| | | Put tracking measures in place and assess for eficacy/accuracy Report on progress internally against KPIs quarterly and externally annually | |
| iv | AO/SIO | Ensure statistics for previous two years are accurate and comparable with those | Completed |
| | | produced under previous ESC | · |
| | | Statistics verified internally and produced for inclusion in annual report and accounts for 2021/22 $\ensuremath{2021/22}$ | |
| G3 | | We will report publicly on the difference that the new Code of Practice is making to the appointments process, for good or bad, with a view to improving on practices. We will do so by publicising instances of good practice or innovative practice and learning as well as areas for improvement | |
| i | AESC | Engage with the Scottish Parliament's subject committee about appointments practices with a view to making improvements and increasing transparency | Assigned |
| | | Agree suitable reporting arrangements | |
| | | | |
| | | | |
| | | Submmit periodic reports | |
| | | | |

ii. APAM G4 Publish good practice case studies on website We will work in partnership with the Scoittish Government, the Scottish Parliament, the Standards Commission for Scotland and other stakeholders to promote good practice and to ensure that lessons are learned from the outcomes of our investigations. Our ongoing engagement with our stakeholders will be regular and meaningful.

Assigned

O/S at year end pending consultation on the investigations manual - C/F O/S at year end pending consultation on the investigations manual - C/F O/S at year end pending consultation on the investigations manual - C/F O/S at year end pending consultation on the investigations manual - C/F

Discussions commenced with SPPAC clerks from May onwards and the Cttee's views were also sought in relation to Code revisions. These will continue, including on reporting - C/F

See above as well as Code consultation analysis and revised Code. O/S at year end -C/F

| i. | AESC/SMT | Meaningful re-engagement the Scottish Ministers, MSPs, public body board members, local authority councillors, monitoring officers and representative organisations such as COSLA, SOLAR and SOLACE to inform and shape our work and our performance | | Talks initiated in April and have been ongoing (refer to SMT minutes for detail). |
|------|-----------------------|--|-----------|---|
| | er Corporate activity | | | |
| 01 | | We recognise that public sector resources are limited and understand that we must review, scrutinise and report publicly on our work to ensure best value and continous | | |
| i | AESC/SMT | Draft strategic plan for 2021-24 | Completed | |
| | | Draft plan Seek formal/informal feedback from staff and stakeholders Redraft based on feedback Incorporate wider scope review Publish for formal consultation | | |
| ii | AESC/AO | Draft biennial business plan for 2021-23 | Completed | |
| | | Draft plan Revise plan to take account of responses to strategic plan Schedule annual consideration of biennial plan on an ongoing basis | | Delayed until March 2022 |
| iii | HCS | Annual Report and Accounts design formatting and online presentation project Finalise online ARA template | Completed | |
| iv | AESC/SMT | Decision on office accomodation needs | Completed | |
| | | Finalise extension of MoTO | | |
| v | AESC/HCS | Review contractual arrangements for CMS | Completed | |
| vi | AESC/SMT | Finalise contract extension Develop plan for exit of Covid-19 lockdown restrictions and implement lockdown exit | Assigned | |
| VI | AESC/SIVIT | plan | Assigned | |
| | | Plan developed | | All planning has been done in the course of |
| | | Plan implemented | | SMT meetings and has followed SG guidance and in consultation with staff (see SMT minutes and all staff meeting minutes for detail). All planning has been done in the course of SMT meetings and has followed SG guidance and in consultation with staff (see SMT minutes and all staff meeting minutes for detail). |
| vii | AO | Risk assessment of EU exit on current and future activities | Completed | |
| | | Update previous risk assessment | | Not done at year end in that previous PESTL analysis not updated - C/F |
| | ЦСС | Feed potential impacts into budget projections | Assigned | Based on previous projections |
| VIII | HCS | Review of records management arrangements in prepartion for resubmission of our RMP to NRS | Assigned | |
| ix | AO/PAM | See RMP Review Project Plan Review and revise all outstanding policies that are currently beyond their published | Assigned | |
| IX | AU/FAIVI | review date | Assigned | |
| | | Review policies Update as appropriate | | |
| | | Publish as updated | | |
| х | AO | Review entire website to ensure up to date | Assigned | |
| | | Assess all pages Address broken links | | Review underway at March 2022. Not completed at year end Review underway at March 2022. Not completed at year end |
| | | Remove or update outdated items | | Review underway at March 2022. Not |
| | | Assess material published against publication scheme | | completed at year end Review underway at March 2022. Not completed at year end |

| xi | AESC/SMT | Prepare for publication of wider scope review report |
|----|----------|--|
| | | Respond formally to findings |
| | | Prepare lines for media and stakeholder enquiries |
| | | Prepare for prospective committee appearance |

Implement agreed recommendations

Assigned



AESC gave evidence to SPPA Committee in Feb 2022. C/F other sessions into 2022/23 See above for progress against all recommendations. Some to C/F at year end.