

Performance and Quality Framework 2019-20

Scottish Information Commissioner



Scottish Information
Commissioner

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Performance and Quality Framework 2019-20

Introduction

1. It is important to the Scottish Information Commissioner that his office performs its statutory functions and duties to a high standard, meeting the needs and, where practicable, the expectations of people in Scotland exercising their FOI rights.
2. Quality assurance is the system by which we measure, report on, and achieve continuous improvement in the quality of our work. Performance management is the system by which we monitor and report on organisational outcomes.
3. This framework is the mechanism by which we report internally and publicly. It is supported by internal systems which ensure that we can identify and monitor how individual performance contributes to organisational outputs.
4. In developing and defining our quality measures and the performance framework, the Commissioner recognises that a holistic approach is needed. To achieve our ultimate aims for the delivery of a quality service, the organisation will need to take into account the inter-dependencies of a range of stakeholders and a range of activities.

Quality aims

5. Good quality for the SIC is:
 - (i) Professional, courteous, communication that imparts accurate and helpful advice and information to a range of stakeholders. Providing information about the SIC, access to information legislation and good practice and signposting to other relevant organisations. Demonstrating that we are actively informing and pursuing activity that contributes to openness and the proactive dissemination of information in Scotland.
 - (ii) Robust decisions on applications that are the result of fair and proportionate investigations. Decisions must be delivered in good time, accessible to the requester and authority, and contribute to the positive development of good FOI practice in Scotland.
 - (iii) Demonstrating that our monitoring, promotion, assessment of practice and interventions are improving the FOI experience for requesters and authorities.
 - (iv) Operating as efficiently as we can, ensuring we are accountable for how we both plan and manage resources.

SIC performance and quality framework

6. The framework is summarised on the following page. Appendix 1 contains a detailed list of targets and KPIs, the frequency with which they will be reported upon, and where to find the relevant information on our website.
7. Our Annual Report will also provide commentary on our performance against a number of the targets and KPIs.

Appendix 1: Targets, KPIs, indicators and measures

Communication, proactive dissemination and openness		(day = working day) (week = calendar week) (month = calendar month)	Related Operational Plan activities (see key)	Where reported or published on our website (in addition to any reporting in the Annual Report)
Name	Frequency/ date	Measure/ indicator		
Time taken to respond to enquiries	Six-monthly	<i>Respond to enquiries</i> 95% in 5 days 100% in 20 days	PlanRep6	Managing the organisation – SMT minutes
Compliance with FOISA/ EIRs statutory timescales	Quarterly	(i) 60% of request responses in 5 days (ii) 100% of request responses in 20 days (iii) 100% of review responses in 20 days	IRM6 & 9	Managing the organisation – SMT minutes
Compliance with SAR timescales	Quarterly	(i) 100% within calendar month		Managing the organisation – SMT minutes
Compliance with RPSI statutory timescales	Six-monthly	(i) 100% of re-use request responses in 20 days (ii) 90% of re-use complaints in 20 days	IRM9	Managing the organisation – SMT minutes
Public Services Reform (Scotland) Act 2010 reporting (section 31)	Six-monthly	Report published on website	PlanRep 7	Statutory Reporting
Public Services Reform (Scotland) Act 2010 reporting (section 32)	Annually	Report published on website	PlanRep 7	Statutory Reporting
Satisfaction with our service	Six-monthly	(i) Frontline resolution of complaints 95% in 5 days 100% in 10 days (ii) Investigation of complaints 95% within 30 days 100% within 40 days	QA1 QA1	Managing the organisation – SMT minutes

Communication, proactive dissemination and openness			(day = working day) (week = calendar week) (month = calendar month)	Related Operational Plan activities (see key)	Where reported or published on our website (in addition to any reporting in the Annual Report)
Name	Frequency/ date	Measure/ indicator			
	Annually	(iii) Fewer than 20% of complaints upheld in part or full (iv) Report on performance included in Annual Report and Accounts, comprising review of compliments and complaints received, and response from user satisfaction survey (held triennially)	QA1 PlanRep 2 & 3	Annual Reports and Accounts	
Awareness of FOI rights	At least 2-yearly	80% of the public definitely or think they have heard of FOISA (through survey)	PromCom4		
Research and reports	Ad hoc	As set out in the operational plan	PromCom 4	Published as appropriate	
Communication Strategy: progress and achievement	Annually	By 31 March 2020, to achieve and maintain: (i) A minimum of 40% of all applications received annually to be made via the online application portal. (ii) Continued reduction in failures to respond to 15% of valid applications. (iii) 20% increase in the number of absolute unique website visits annually (from 54,000 to 64,800) (iv) increase in the total number of subscribers to content via our website (v) Increase in read receipts for Commissioner emails to public authorities to 75%.	PromCom1 QA Project 1 IAP6, RE3 PromCom5 PromCom5 PromCom1	Managing the organisation – SMT minutes Annual Reports and Accounts	

Deciding applications		(day = working day) (week = calendar week) (month = calendar month)	Related Operational Plan activities (see key)	Where reported or published on our website (in addition to the Annual Report)
Name	Frequency/ date	Measure/ indicator		
Dashboard: statistics and KPIs	Quarterly	<i>Overall valid case closure times</i> 70% in 4 months or less 85% in 6 months or less 97% in 12 months or less Average closure time 4 months (17.8 weeks) or less	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Time taken to validate applications</i> 80% in 1 month or less 90% in 2 months or less 97% in 3 months or less	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>‘Failure to respond’ applications</i> 65% in 1.5 months or less 100% in 4 months or less	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Valid (substantive) applications</i> 50% in 4 months or less 75% in 6 months or less 95% in 12 months or less	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Applications received</i> Table in dashboard Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Cases under investigation</i> Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Cases awaiting validation</i> Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Invalid applications</i> Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Caseload age profile</i> Chart by month quarter and YTD Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports

Deciding applications		(day = working day) (week = calendar week) (month = calendar month)	Related Operational Plan activities (see key)	Where reported or published on our website (in addition to the Annual Report)
Name	Frequency/ date	Measure/ indicator		
		<i>Average age of closed valid cases</i> By month and YTD by month Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Average age of open valid cases</i> By month and YTD by month Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Number of Cases Closed</i> As per current table Report as appropriate in the annual report	RegEnf2, 3 & 4	‘Dashboard’ Reports
		<i>Trends and commentary</i> Posted on website with dashboard and reported in Annual Report	RegEnf2, 3 & 4	‘Dashboard’ Reports
Robust, current and proportionate investigations	Periodic & ad hoc	Clear procedures that are monitored and reviewed/ updated in line with Register of Key Documents	IRM5	Guide to Information (Class 2)
Clear Enforcement Policy	Periodic & ad hoc	Review in line with Register of Key Documents	IRM5	Guide to Information (Class 2)

Monitoring, promoting, assessing FOI performance		(day = working day) (week = calendar week) (month = calendar month)	Related Operational Plan activities (see key)	Where reported or published on our website (in addition to the Annual Report)
Name	Frequency/ date	Measure/ indicator		
Capturing and disseminating good practice and lessons learned	At least fortnightly	Decisions round-up	IAP 4	Decisions Round-up
	At least fortnightly	Up-to-date published information on learning from decisions	PromCom7	Decisions Round-up
	Ad hoc	Special and periodic reporting	As set out in the operational plan	Published as appropriate
Collect, collate and publish national FOI statistics	Quarterly	Published quarterly data	IAP6	FOI and EIR statistics database
Publication Schemes	Annually	Publication Scheme notifications for new bodies completed: (i) 80% within one month of due date (ii) 100% notified or enforcement commenced within 3 months of due date (Due date is set at point of creation of publication scheme file)	RegEnf9 Reg&Enf project 1	Managing the organisation – SMT minutes
Feedback reports from events	Report following each event	80% good or excellent rating for the day overall	IAP 2	Managing the organisation – SMT minutes
Proportion of valid applications relating to public authority non-compliance with statutory timescales	Quarterly	No more than 15% of valid applications received to be related to authorities' failure to respond	RegEnf 2, 3 & 4	'Dashboard' Reports
Proportion of applications that are invalid	Quarterly	No more than 20% of all applications in 2018/19	RegEnf2	'Dashboard' Reports
Publish and maintain guidance, briefings etc	As needed and periodically	Review in line with Register of Key Documents	IRM5	Briefings and Guidance
Publish, maintain and report on use of self-assessment tools for authorities	Annual	Assessment of the use and effectiveness of the self-assessment tools	IAP project 1	Managing the organisation – SMT minutes

Operational efficiency			(day = working day) (week = calendar week) (month = calendar month)	Related Operational Plan activities (see key)	Where reported or published on our website (in addition to the Annual Report)
Name	Frequency/ date	Measure/ indicator			
Lay Annual Report and Accounts	By 31 st October following end of reporting year	Independent Auditor's report on the Annual Report and the Audit Report laid	PlanRep1, 2 & 3, RM11	Annual Reports and Accounts	
Variance in spend against budget	Annual accounts	Achieve no more than 5% variance	ResMgt2	Budgets and Expenditure	
Maintain a compliant publication scheme and guide to information	Annually	Assurance Report to SMT	IRM7 IRM8	Managing the organisation – SMT minutes	
Up-to-date and effective governance framework	Annually	Assurance Report to SMT	PlanRep15 PlanRep16	Managing the organisation – SMT minutes	
Prompt payment of invoices	Annually	95% of undisputed invoices in 10 days or fewer 100% of undisputed invoices in 30 days or fewer	ResMgt3	Managing the organisation – SMT minutes	
Information and Records Management	Annually	Assurance Report to SMT Manage Key Documents as per agreed review programme	IRM2 IRM5	Managing the organisation – SMT minutes	

Key:

IAP	Improving Authority Practice	QA	Quality Assurance
IRM	Information and records management	RegEnf	Regulation and Enforcement
PlanRep	Planning & Reporting	ResMgt	Resource Management
PromCom	Promotion & Communications		

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