

# Performance and Quality Framework 2023-24

---

Scottish Information Commissioner

---



Scottish Information  
Commissioner

# Contents

Introduction.....	1
Quality aims .....	1
Performance and Quality Framework 2023-24.....	1
Targets, KPIs, indicators and measures .....	3
Document control sheet.....	11

# Commissioner's performance and quality framework

## Introduction

---

1. The Scottish Information Commissioner (Commissioner) considers it important 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. The annual performance and quality framework provides a mechanism against which performance and quality can be assessed and reported, 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 Commissioner is:
  - Professional, courteous, and understandable communication that provides accurate and helpful advice and information to a range of stakeholders. Providing information about the Commissioner, 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.
  - 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.
  - Demonstrating that our monitoring, promotion, assessment of practice and interventions are improving the FOI experience for requesters and authorities.
  - Operating as efficiently as we can, ensuring we are accountable for how we plan, manage and utilise our resources.

## Performance and Quality Framework 2023-24

---

6. The Performance and Quality Framework 2023-24 (P&QF) is set out below and covers a detailed list of targets and Key Performance Indicators (KPIs), the frequency with which each will be reported upon and where to find the relevant information on our website.
7. Our Annual Report for the reporting year will also provide commentary on our performance against a number of the targets and KPIs.

8. The functional areas denoted in the P&QF are:

IAP	Improving Authority Practice	QA	Quality Assurance
IRM	Information and Records Management	RegEnf	Regulation and Enforcement
PlanRep	Planning and Reporting	ResMgt	Resource Management
CEP	Communications, Engagement and Policy (External)		

## Targets, KPIs, indicators and measures

<b>Communication, proactive dissemination, openness and service standards</b>		(day = working day) (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		
Public Services Reform (Scotland) Act 2010 reporting (section 31)	Annually	Report published on website	PlanRep BAU 10	<a href="#">Statutory Reporting</a>
Public Services Reform (Scotland) Act 2010 reporting (section 32)	Annually	Report published on website	PlanRep BAU 10	<a href="#">Statutory Reporting</a>
Satisfaction with our service	Quarterly	<p>Indicator 1 – number of complaints received</p> <ul style="list-style-type: none"> <li>• Stage 1 – frontline response</li> <li>• Stage 2 <ul style="list-style-type: none"> <li>○ directly at investigation</li> <li>○ escalation<sup>1</sup> from frontline response</li> </ul> </li> </ul> <p>Indicator 2 – percentage of complaints at each stage that were closed in full within the set timescales<sup>2</sup></p> <ul style="list-style-type: none"> <li>• Stage 1 - 5 working days <ul style="list-style-type: none"> <li>○ Target - 100%</li> </ul> </li> <li>• Stage 2 – 20 working days</li> </ul>	QA BAU 1	<a href="#">Managing the organisation – SMT minutes</a>

<sup>1</sup> Escalated complaints are those that have been considered at Stage 1 and then have either moved to Stage 2 at the complainant's request (because the complainant was unhappy with the response at Stage 1) or because they have exceeded the maximum of 5 working days at Stage 1 and, therefore, have automatically been moved to Stage 2

<sup>2</sup> Extensions to these timescales can be authorised in exceptional circumstances. However, if an extension is authorised, the complaint is considered as "late", that is, closed outside the set timescales

Communication, proactive dissemination, openness and service standards		(day = working day) (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		
		<ul style="list-style-type: none"> <li>○ Target – 100%</li> <li>● Escalation – 20 working days after escalation</li> <li>○ Target 100%</li> </ul> <p>Indicator 3<sup>3</sup> – average time in working days for a full response to complaints at each stage</p> <ul style="list-style-type: none"> <li>● Stage 1 - 3 working days – 85%</li> <li>● Stage 2 – 15 working days – 85%</li> <li>● Escalation – 15 working days – 85%</li> </ul> <p>Indicator 4<sup>4</sup> – outcome of complaints at each stage</p> <p>Stage 1<sup>5</sup></p> <ul style="list-style-type: none"> <li>● Upheld – less than 15%</li> <li>● Partially upheld – less than 15%</li> <li>● Not upheld – 60%</li> <li>● Resolved<sup>6</sup> - 10%</li> </ul> <p>Stage 2<sup>7</sup></p> <ul style="list-style-type: none"> <li>● Upheld – less than 15%</li> <li>● Partially upheld – less than 15%</li> </ul>	QA BAU 1	

<sup>3</sup> Indicators 1-3 to be reported quarterly

<sup>4</sup> Indicator 4 to be reported annually

<sup>5</sup> Indicator is a % of all complaints closed at Stage 1

<sup>6</sup> A complaint is resolved when both the organisation and the customer agree what action (if any) will be taken to provide full and final resolution for the customer, without a decision about whether the complaint is upheld or not upheld. With the introduction of a resolved category there are now four outcome categories to be reported against under the relevant indicators: upheld, partially upheld, not upheld, resolved

<sup>7</sup> Indicator is a % of all complaints closed at Stage 2

<b>Communication, proactive dissemination, openness and service standards</b>			(day = working day) (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	<ul style="list-style-type: none"> <li>Not upheld – 65%%</li> <li>Resolved – 5%</li> </ul> <p>Report on performance included in Annual Report and Accounts, comprising review of compliments and complaints received</p>	<p>QA BAU 1</p> <p>PlanRep BAU 3</p>	<a href="#">Annual Reports and Accounts</a>	
Awareness and understanding of FOI rights	At least 2-yearly	<p>90% of the public definitely or think they have heard of FOISA</p> <p>75% of the public have an understanding of what is meant by FOI</p>	CEP BAU 4	<a href="#">Research and publications</a>	
Research, consultation responses and reports	Ad hoc	As set out in the operational plan	<p>CEP BAU 16,18;</p> <p>CAP Proj 1,2</p> <p>IAP Proj 2</p>	<a href="#">Research and publications</a>	
Communication and Engagement Framework: progress and achievement	Annually	As set out in the Communication and Engagement Framework 2021-24	<p>IAP BAU 1,2,3,4,6,7;</p> <p>IAP Proj 1,2</p> <p>CEP BAU 1–15,17;</p> <p>CEP Proj 1-8</p>	<p><a href="#">Managing the organisation – SMT minutes</a></p> <p><a href="#">Annual Reports and Accounts</a></p>	

Deciding applications		(day = working day) (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 or less	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Time taken to validate applications</i> 70% in 1 month or less 90% in 2 months or less 97% in 3 months or less	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>‘Failure to respond’ applications</i> 60% in 1.5 months or less 100% in 4 months or less	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Valid (substantive) applications</i> 50% in 4 months or less 75% in 6 months or less 95% in 12 months or less	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Applications received</i> Table in dashboard Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Cases under investigation</i> Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Cases awaiting validation</i> Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Invalid applications</i> Chart by month: current and previous 2 yrs Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>
		<i>Caseload age profile</i> Chart by month quarter and YTD Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">‘Dashboard’ Reports</a>



Deciding applications		(day = working day) ( (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	RegEnf BAU 2,3,4	<a href="#">'Dashboard' Reports</a>
		<i>Average age of open valid cases</i> By month and YTD by month Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">'Dashboard' Reports</a>
		<i>Number of Cases Closed</i> As per current table Report as appropriate in the annual report	RegEnf BAU 2,3,4	<a href="#">'Dashboard' Reports</a>
	Quarterly	<i>Trends and commentary</i> Posted on website with dashboard and reported in Annual Report Report to QSMTM	RegEnf BAU 2,3,4	<a href="#">'Dashboard' Reports</a>
Robust, current and proportionate investigations	Periodic & ad hoc	Clear procedures that are monitored and reviewed/updated in line with Register of Key Documents	IRM BAU 4	<a href="#">Guide to Information (Class 2)</a>
Clear Enforcement Policy	Periodic & ad hoc	Clear procedures that are monitored and reviewed/updated in line with Register of Key Documents	IRM BAU 4	<a href="#">Guide to Information (Class 2)</a>

<b>Monitoring, promoting, assessing FOI performance</b>			(day = working day) (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	Monthly	Decisions and learning round-up within email newsletter views	IAP BAU 3 CEP BAU 4	<a href="#">Decisions learning and email newsletter</a>	
	Monthly	Up-to-date published information on learning from decisions	IAP BAU 3 CEP BAU 4	<a href="#">Decisions learning and email newsletter</a>	
	Ad hoc	Special and periodic reporting and communication	As set out in the operational plan	Published as appropriate	
Collect, collate and publish national FOI statistics	Quarterly	Published quarterly data	IAP BAU 5	<a href="#">FOI and EIR statistics database</a>	
Publication Schemes	Annually	Publication Scheme notifications for new bodies completed: <ul style="list-style-type: none"> <li>80% within one month of due date</li> <li>100% notified or enforcement commenced within 3 months of due date</li> </ul>	RegEnf BAU 9	<a href="#">Managing the organisation – SMT minutes</a>	
Feedback reports from events and training	Report following each event	80% or more of participants in training, events or presentations given across year who respond, report main learning goal set for the session achieved (such as increased confidence in dealing with FOI requests)	IAP BAU 2 CEP BAU 6,7	<a href="#">Managing the organisation – SMT minutes</a>	
Publish and maintain guidance, briefings etc	As needed and periodically	Review in line with Register of Key Documents	IAP BAU 7 RegEnf BAU 10	<a href="#">Briefings and Guidance</a>	
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 BAU 7	<a href="#">Managing the organisation – SMT minutes</a>	
Conduct appropriate interventions to improve authority FOI practice and publish summaries of intervention activity	Quarterly	Clear procedures that are monitored and reviewed/ updated in line with Register of Key Documents Publish quarterly reports on intervention activity	RegEnf BAU 7,8	<a href="#">Guide to Information (Class 2)</a>  <a href="#">Managing the organisation – SMT minutes</a>	

<b>Operational performance</b>			(day = working day) (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			
Annual Report and Accounts (ARA)	Annually – in accordance with statutory timescales	<ul style="list-style-type: none"> <li>Satisfactory independent audit and report received</li> <li>Independent Auditor's report included in the ARA</li> <li>Clearance to lay ARA obtained from Audit Scotland</li> <li>ARA laid in Scottish Parliament by 31 October</li> </ul>	PlanRep BAU 1,2,3, PlanRep 1,2,3,4,5	<a href="#">Annual Reports and Accounts</a>	
Maintain a compliant publication scheme and guide to information	Annually	Assurance Report to SMT	IRM BAU 6,7	<a href="#">Managing the organisation – SMT minutes</a>	
Up-to-date and effective governance framework	Annually	Assurance Report to SMT	PlanRep BAU 14 PlanRep BAU15	<a href="#">Managing the organisation – SMT minutes</a>	
Prompt payment of invoices	Annually	95% of undisputed invoices in 10 days or fewer 100% of undisputed invoices in 30 days or fewer	ResMgt BAU 3	<a href="#">Managing the organisation – SMT minutes</a>	
Information and Records Management	Annually	Assurance Report to SMT Manage Key Documents as per agreed review programme	IRM BAU 2 IRM BAU 4	<a href="#">Managing the organisation – SMT minutes</a>	
Time taken to respond to enquiries	Six-monthly	<i>Respond to enquiries</i> 90% in 5 days 95% in 20 days	PlanRep BAU 9	<a href="#">Managing the organisation – SMT minutes</a>	
Compliance with FOISA/ EIRs statutory timescales	Quarterly	100% of request responses in 20 days 100% of review responses in 20 days	IRM BAU 8	<a href="#">Managing the organisation – SMT minutes</a>	

<b>Operational performance</b>			(day = working day) (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			
Compliance with SAR timescales	Quarterly	100% within one month <sup>8</sup> of receiving a request or of receiving: <ul style="list-style-type: none"> <li>any information requested to confirm the requester's identity or</li> <li>any fee (if one has been charged)</li> </ul>	IRM BAU 9	<a href="#">Managing the organisation – SMT minutes</a>	
Compliance with RPSI statutory timescales	Six-monthly	100% of re-use request responses in 20 days 90% of re-use complaints in 20 days	IRM BAU 10	<a href="#">Managing the organisation – SMT minutes</a>	

---

<sup>8</sup> See C5 Data Protection Policy and Handbook - the time limit is calculated from the day the request is received (whether or not it is a working day) until the corresponding calendar date in the next month and the exact number of days for complying will vary depending on the month in which the request is made

## Document control sheet

Document Information	
Full name of current version: Class, Title, Version No and Status. <i>E.g. C1 MOU Between the SIC and the IC v01</i>	C7 Performance and Quality Framework 2023-24 CURRENT VERSION
VC File Id	192304
Type	Plan
Approver	SMT
Responsible Manager	Commissioner
Date of next planned review	March/April 2024
Approval & Publication	
Approval Date of current major version	10/08/2023
For publication (Y/N)	Y
Date published	11/08/2023
Name of document in website file library	PerformanceandQualityFramework202324
Technical Changes / Unplanned or Ad hoc reviews (see Summary of changes below for details)	
Date of last update	

Summary of changes to document				
Date	Action by <i>(initials)</i>	Version updated <i>(e.g. v01.25-36)</i>	New version number <i>(e.g. v01.27, or 02.03)</i>	Brief description <i>(e.g. updated paras 1-8, updated HOPI to HOCS, reviewed whole section on PI test, whole document updated, corrected typos, reformatted to new branding)</i>
10/08/23	BOW	01.00	01.01	New document created following approval of draft
10/08/23	BOW	01.01	01.02	DCS updated, published on website

**Scottish Information Commissioner**

Kinburn Castle  
Doubledykes Road  
St Andrews, Fife  
KY16 9DS

t 01334 464610  
f 01334 464611  
enquiries@itspublicknowledge.info

[www.itspublicknowledge.info](http://www.itspublicknowledge.info)

© Scottish Information Commissioner 2023

You may use and re-use this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence v3.0. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence/version/3/>