

Self-assessment toolkit

Capture, Assess, Improve

Guide: How to carry out an FOI self-assessment



Scottish Information
Commissioner

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Glossary and abbreviations

Term used	Explanation
The Commissioner	The Scottish Information Commissioner
EIRS	Environmental Information (Scotland) Regulations 2004
FOI	FOISA and the EIRs
FOISA	The Freedom of Information (Scotland) Act 2002
SIC	The Scottish Information Commissioner, staff of SIC (depends on context)
Section 60 Code / S60 Code /the Code	Scottish Ministers' Code of Practice on the Discharge of Functions by Scottish Public Authorities under the Freedom of Information (Scotland) Act 2002 and the Environmental Information (Scotland) Regulations 2004

Cross-referenced VC documents (for internal use)

VC No	VC name
59696	Intervention Procedures
36119	Enforcement Policy
76462	TOOLKIT Guide: Getting started
76466	TOOLKIT Introduction to the FOI self-assessment toolkit
76482	TOOLKIT TEMPLATE Summary of Findings
76486	TOOLKIT TEMPLATE Improvement Action Plan
76493	TOOLKIT Module 01: Responding on time, Standards and Criteria
76497	TOOLKIT Module 01: Assessment Questions and Evidence Grid
76503	TOOLKIT Module 02: FOI searches, Standards and Criteria
76506	TOOLKIT Module 02: Assessment Questions and Evidence grid
76510	TOOLKIT Module 03: Advice and Assistance, Standards and Criteria
76513	TOOLKIT Module 03: Assessment Questions and Evidence grid

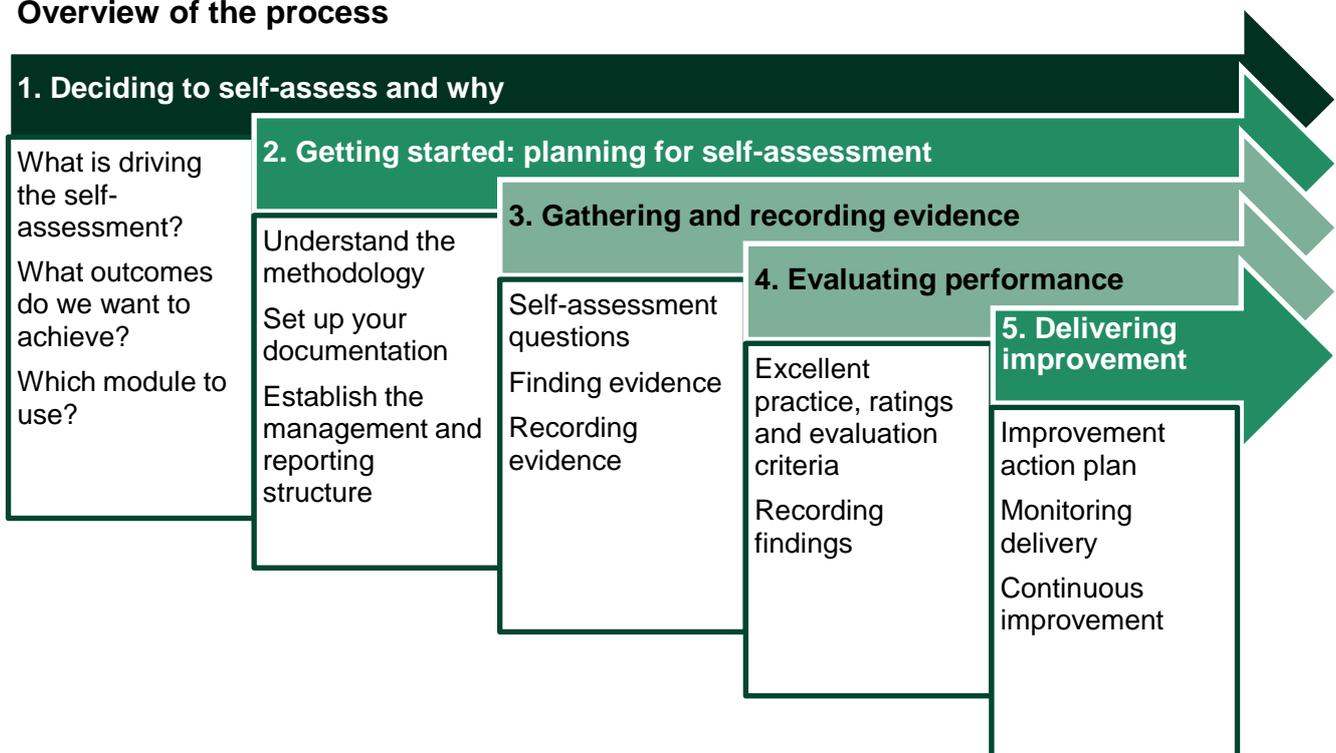
Introduction

1. This document is one part of the set of resources which form our self-assessment toolkit. It gives guidance on the FOI self-assessment process and how to approach each step. The guidance applies to **all** of the modules.
2. We recommend you read our guides: **Introduction to the FOI self-assessment toolkit**, and **Getting started**.
3. All our Toolkit guides and resources are available to download from the [Self-assessment toolkit web page](#)

Steps in self-assessment

4. There are five distinct steps to work through. Each of these forms a section of this guidance.
 - (i) Deciding which area of FOI practice to self-assess and why
 - (ii) Getting started: planning for self-assessment
 - (iii) Gathering and recording evidence
 - (iv) Assessing performance
 - (v) Action planning, delivery and monitoring of improvement

Overview of the process



Step 1: Deciding which area of FOI practice to self-assess

What is driving the self-assessment?

5. A successful self-assessment depends on your authority having a clear view about the outcomes it wants to achieve. FOI self-assessment works best when it is part of an authority's wider approach to continuous improvement and where the authority decides to take action because it wants to achieve identified outcomes.
6. As an authority, ask yourselves, why are we doing the self-assessment? Below are some of the reasons we think you might come up with. As you will see, not all are directly about FOI, but they recognise that FOI practice underpins or contributes to other areas of business. This FOI self-assessment may itself be part of a wider review.

Internal drivers

7. Internal drivers are those that have their roots in the authority itself, for example:
 - (i) As part of a management-driven continuous improvement programme
 - (ii) To address FOI practice issues identified by reviews
 - (iii) At the *suggestion* of the Scottish Information Commissioner
 - (iv) To address an issue identified by an internal or external audit. For example, a weakness in meeting statutory timescales for responding to requests
 - (v) To evaluate whether recent changes to procedures are working effectively
 - (vi) To provide assurance to senior managers or to external stakeholders that FOI practice is efficient and effective
 - (vii) As part of a strategic aim to improve communication, openness and transparency.

External drivers

8. External drivers have their roots outside the authority, either because the authority is required to take action or because it is reacting to something outside the authority. For example:
 - (i) The Scottish Information Commissioner has *recommended* the authority carry out a self-assessment and is expecting a response
 - (ii) The Scottish Information Commissioner has *directed* the authority to carry out a self-assessment and is prepared to enforce it

We anticipate both (i) and (ii) will be rare. For more information, see our [Enforcement Policy](#) and [Intervention Procedures](#), or contact us.
 - (iii) Another (possibly a regulatory) body has identified practice issues of which FOI is one element: e.g. communications, statutory reporting requirements, data protection, open data and records management, accountability.
 - (iv) Media coverage of a particular issue or the authority's approach to FOI.

What is your authority aiming to achieve?

9. As well as being clear about why you are doing the self-assessment, you need to capture, in tangible terms, what you hope to achieve.
10. Outcomes may be:
 - (i) very specific, for example: “We want to improve our performance in the time it takes to respond to requests, and to establish a realistic performance target/ KPI for the authority”.
 - (ii) or less specific, for example: “We want to improve our relationship with the media and see more positive reporting of our FOI practice”.
11. Articulating the outcomes in this way gives you a basis for improvement planning and will enable you to set aims when improvement action planning. It will also help you focus on a specific area of practice, rather than FOI practice as a whole.

Which module to use?

12. Articulating outcomes will also give you a steer on which module (or modules) to apply. For example, if the desired outcome is to improve responding on time, there is a module specifically aimed at that area of practice. For something more general, you may have to do some scoping work to identify which areas of FOI practice have the greatest impact on the outcomes you are seeking. For example, in relation to media relationships, you may find the module on giving advice and assistance helpful.
13. If you are unsure, get in touch with us for advice.

Step 2: Getting started: planning for self-assessment

Understanding the methodology

14. We recommend you read **What is FOI self-assessment?** and **Getting Started** (if you haven't already) as they give you an overview of the FOI **self-assessment** approach and the methodology.
15. Before starting your self-assessment, you **must** familiarise yourself with two documents:
 - (i) **The toolkit guide: How to carry out a self-assessment (this document)**. This guide explains the principles underpinning self-assessment of good FOI practice, and how to carry out an assessment. This guide applies to **all** the modules and explains what you will need to do to complete the five steps and the resources you will use along the way.
 - (ii) **The relevant module: Standards and Assessment Criteria**. This sets out the standards and criteria against which you will carry out the assessment and evaluate achievement. This document is **specific** to the practice area being assessed. It contains:
 - An introduction to the module
 - Expected outcomes and legal context
 - The characteristics of excellent practice against which to compare your own authority's practice
 - Ratings and evaluation criteria

16. If there is anything you don't understand or that is not clear, please get in touch with us. If we can't help, we might be able to put you in contact with another authority to share ideas and experience.

Module documentation

17. We recommend you set up your module documentation at the outset. You will need to set up the following documents in which to record your findings and actions. You can find all these documents in the relevant module section of our website, accessible from the [Self-assessment toolkit web page](#).
- (i) The relevant module's **Assessment Questions and Evidence Grid**. This grid contains the assessment questions. Record your findings and sources of evidence and evaluation in the grid. The questions are grouped by characteristic: you must answer them all. This document is **specific** to the practice area being assessed. As it is a working document you may wish to customise it to your authority's style and add your own logo.
 - (ii) **Summary of Findings**. This template gives you a format in which to summarise the main findings of the assessment and your assessment: both against each of the characteristics of good practice, and overall. The template can be used for **all** the modules. Again, as it is a working document you may wish to customise it to your authority's style and add your own logo.
 - (iii) **Improvement Action Plan**. This contains a template action plan which can be used for **all** the modules.

Management and reporting structure

18. It will be of little benefit to your authority to carry out a self-assessment if you don't intend doing anything with it. It is vital that, irrespective of who carries out the assessment, it has management backing and also that the route for reporting progress, outcomes and approval of recommendations is agreed and understood.
19. It can be helpful to adopt a project management approach setting out lines of communication, responsibility and accountability from the outset. What that looks like in detail will depend on your authority's internal management arrangements but these are the principles we consider important:
- (i) Does everyone involved know what is expected of them and when?
 - (ii) Have you allowed enough time for evidence-gathering and evaluation?
 - (iii) Who will receive the final report, when and what approval is required of them?

Step 3: Gathering and recording evidence

Self-assessment Questions and Evidence Grid

20. The self-assessment questions are specific to the area of practice you are examining. These questions are grouped by practice "characteristic". You answer the questions by finding evidence that demonstrates whether and how your authority is meeting each practice characteristic.

21. You “answer” the questions by completing the grid: listing the sources of evidence, then recording your views on areas of strength and where more work may be needed. You:
- (i) **Must** answer all of the questions
 - (ii) **Must not** delete any questions
 - (iii) **May** amend questions to make them appropriate for your own authority. For example, if a question asks about the function of senior managers, but that function is carried out in your authority by a board, you can substitute “board” for “senior managers”
 - (iv) **May** add questions to take into account your authority’s unique characteristics, or to examine particular areas in more detail. If you do, make sure the new questions are directly applicable to the practice characteristic for which you are finding evidence.
22. If you are thinking of adding or amending questions, you might find it helpful to talk it through with us. Not only would we support you, but your suggestions and questions could help us add to or improve the questions for all authorities.

Finding evidence

23. Robust evidence is vital: your findings must be capable of being examined and analysed by others, and must enable you to form a view about the extent to which your authority’s practices contribute to a practice characteristic.
24. The approach and specific sources of evidence depend on your authority’s structures and systems. One approach we have found helpful is to list both all the possible sources and types of evidence, and the colleagues who may be able to help, and then to devise a plan to collect the evidence.
25. You might want to consider working through the questions with colleagues rather than on your own. You can also consider inviting a “critical friend” to help with discussions: someone who will approach the questions from a different perspective and add value to the discussion. For example, you might invite a colleague from a different business area, a colleague from another authority, a service user, or someone who makes requests to your authority.
26. Whatever your approach to finding evidence, set yourself a target date for completion of this stage as you want to leave yourself time to assess it thoroughly.
27. If you cannot find evidence, or the evidence available is contradictory, consider very carefully whether the weakness lies in the way you report and manage FOI, rather than the way you deliver your service, as that in itself may be an area for improvement.
28. The type of evidence you find and use will depend on the module-specific questions and your authority’s internal arrangements. Often there will be more than one piece of evidence in response to a question. If there is more than one, consider whether the evidence is complementary, provide corroboration, or contradictory, making it unclear what the true picture is. If you can find both qualitative and quantitative evidence for the same characteristic, which enable you to link measurable outcomes with views and opinions, it will add weight to your conclusions.

Quantitative evidence

29. Quantitative evidence is:
- expressed with numbers, e.g. figures, percentages, ratios

- data which can be measured and written down

A useful rule of thumb is **quantitative** is about **quantity**.

Qualitative evidence

30. Qualitative evidence:

- is descriptive
- can be observed but not measured
- deals with views and opinions
- is information about the quality of service, behaviours or systems

A useful rule of thumb is: **qualitative** is about **quality**.

31. Examples of qualitative evidence include:

- comments or feedback
- opinions or views expressed in reports, minutes, notes of phone calls
- outcomes of other assessments such as internal audits where an assessment of quality is made

Sources of evidence

32. As specific sources of evidence will be particular to your authority's structures and systems, identifying and locating evidence requires knowledge of your authority. To get started, ask yourself the following:

(i) What does the authority write down (or record in some other way) and where is this kept?

- | | |
|--------------------------------------|---|
| • policies | • quality and service standards |
| • procedures / handbooks | • information leaflets |
| • performance reports | • web-site content |
| • training materials | • contracts |
| • guidance | • finance information such as invoices |
| • governance & management frameworks | • correspondence / enquiries / FOI requests |

(ii) What meetings does your authority hold/ attend and what notes are kept (and/ or published)?

- | | |
|-------------------------------|--|
| • Board / Committee meetings | • public meetings |
| • management meetings | • focus / groups and other service user engagement |
| • governance / audit meetings | • external stakeholder meetings |
| • staff meetings | • supplier meetings |
| • trades union meetings | |

(iii) What feedback does your authority receive or collect?

- | | |
|-----------------------------------|--------------------------------|
| • surveys (staff & service users) | • compliments |
| • questionnaires | • mystery shopping |
| • complaints | • quality assurance procedures |

(iv) What IT systems does your authority have and what reports and data can be extracted from them?

- | | |
|---------------------------|--|
| • case management systems | • FOI requests tracking and monitoring |
|---------------------------|--|

- EDRM / Records management systems
- finance systems
- calendars / diaries and other works management systems
- databases
- email
- desktop and mobile communications and records management
- contact databases / marketing systems

(v) What can you observe directly e.g., through work-shadowing, observing meetings, or focus groups with colleagues, service users or other stakeholders?

Recording evidence

33. If the evidence is available electronically, you might choose to simply record a file location reference, a hyperlink or a web-link. If it is a specific document, not accessible easily electronically, we recommend you obtain a hard copy. Resist the temptation to put large chunks of text in the grid. If you have a lot to say, record a brief summary and put the detail in a supporting document.
34. It is for you to decide whether you have a file of hard copy documents as part of your working papers, but if you do, make sure they are indexed in such a way that your evidence can be referred to easily.
35. An example of the sort of detail you might record is:

Question	Evidence gathered	Strengths identified	Areas for improvement
How are staff kept up-to-date with changes that affect how the authority provides FOI advice and assistance to requesters?	<ul style="list-style-type: none"> • FOI Procedures available here) • Monthly newsletter with and FOI section (hyperlink to example) • Training for FOI Champions when revised Section 60 Code released • Circulate SIC DRU to FOI champions 	<ul style="list-style-type: none"> • FOI procedure states that staff must be kept up to date with changes that affect them • Communications reach majority of staff – tailored to all levels of knowledge • Positive feedback received from staff re FOI updates 	<ul style="list-style-type: none"> • Staff working remotely don't always get the newsletter • No way to check that communications have been received • Additional FOI champions required to provide support to "remote" areas of the business • Set up process to ensure that lessons are learned from Commissioner's decisions

Step 4: Assessing performance

36. By this stage you should have:
- Answered the module questions
 - Completed the evidence grid and noted areas of strength and areas for improvement.
37. For this part of the process you need to refer specifically to:
- Your **Summary of Findings** document
 - The module's **Standards and Assessment Criteria**

38. The steps to follow are:
- (i) Rate how well your authority is performing in each characteristic of practice against the standards
 - (ii) Produce an overall rating
 - (iii) Record your findings

The standards

Characteristics of excellent practice

39. These set out what an excellent authority “looks like” for the specific practice area being assessed.
40. Remember, you should take a proportionate approach and focus on the outcomes achieved by your authority. Detailed and sophisticated systems and procedures are not always an indicator of good practice.
41. The questions are grouped by “characteristic” and your aim is to rate each characteristic by reflecting on the extent to which the evidence for that set of questions demonstrates how well your authority is doing.

Effectiveness performance matrix

42. The *Effectiveness performance matrix* contains the detail that explains what constitutes excellent, good, adequate and unsatisfactory for each of the good practice characteristics.

Ratings

43. There are four ratings:
- (i) Excellent
 - (ii) Good
 - (iii) Adequate
 - (iv) Unsatisfactory
44. You should rate **each** practice characteristic. You do this by referring to the *effectiveness performance matrix* and your *evidence grid*.
45. Record your rating in the **summary of findings** document as you go along.
46. You give an overall rating by referring to the *assessment table* in the **standards and assessment criteria**. The overall rating is based on combinations of excellent, good, adequate and unsatisfactory. The overall rating is defined in this way so that authorities are not disadvantaged in terms of achievement if they are weak in only one or two areas but generally strong.
47. Your authority **must** achieve an **adequate** rating overall, to be **compliant** with FOI law.

Recording findings

48. Your findings are recorded in two ways:
- (i) The rating for each characteristic and an overall rating

- (ii) Narrative summary of important points and findings, and any conclusions and recommendations
- 49. It is envisaged that the **Summary of Findings** would be written in such a way that you can use it as your report on the outcomes, conclusions and recommendations from the self-assessment. There is nothing to stop you using it as your working document and from it producing a report in line with the arrangements your authority agreed at the outset, for example if you are required to submit reports in a particular style or format.
- 50. The **Summary of Findings** report (and the supporting detail in other documents) should form the basis of your Improvement action plan.
- 51. The summarising process is an important element of achieving a balanced assessment. It is very likely that you will have identified variable performance under each characteristic.
- 52. **Appendix 1- Example Summary of Findings** gives an example of how the summary of findings might look for *Module 3: Advice and Assistance*, in relation to the *Open and transparent culture* characteristic. The rating for a characteristic is a matter of balance and judgement. You will see from the example that the findings include a mixture of good and adequate practice, but the author decided it was adequate overall because although there was commitment at senior level, it was not consistent and not made explicit to external stakeholders.
- 53. Set your overall rating, following the guidance in the module's **Standards and Criteria** document.

Step 5: Planning, delivery and monitoring of improvement

Improvement Action Plan

- 54. By now you should be in a position to turn your **Summary of Findings** into an **Improvement Action Plan**. Drawing on your analysis and assessment and also reflect on the original aim of the assessment, and what needs to change as a result of your findings. For example, if your aim was to provide assurance that FOI practice was meeting the desired standard, your actions may well be focused on maintaining current standards and ensuring they remain fit for purpose. If your aim was to address a known issue, your action plan may be focused on changing or reviewing aspects of your practice, policy or procedures.
- 55. We recommend that you make action planning a group activity. You need to involve the people who will implement the changes and the people who can release resources to deliver them. You should, at least, involve the senior manager who is responsible for FOI for your authority. Whether you involve other senior managers in the group or simply keep them informed, it is important they know what is going on (the results of the self-assessment explain why you are action planning).
- 56. The actions in your plan should be SMART:
 - (i) **Specific:** it will focus on the areas already identified for improvement and actions will improve your authority's future performance.
 - (ii) **Measurable:** you will be able to evidence the improvement when it is achieved.
 - (iii) **Achievable:** the plan involves the right people and they are prepared to commit to it; they understand what they have to do and can deliver it.

- (iv) **Realistic:** actions within the plan can be delivered within resources and they're proportionate to the problem you identified.
 - (v) **Timescales:** no matter how willing we are to achieve something, we are human and need deadlines.
57. It is critical that your action plan is agreed at senior level and that an officer with appropriate seniority and strategic responsibility is accountable for its delivery and outcomes.

Monitoring delivery

58. The **Improvement Action Plan** enables you to record and track:
- (i) the area identified for improvement
 - (ii) the actions to be taken
 - (iii) the date action is to be completed by
 - (iv) who is responsible for ensuring the action is completed.
59. There needs to be regular progress reporting throughout the implementation period. Don't forget to keep colleagues informed of progress or of any changes to the plan or the timetable for delivery – especially if they are involved in it. It is good practice to carry a review at the end of the implementation. The review should ideally identify any need for further action to improve performance as part of a continuous cycle of review and improvement.

What next?

60. The outcome of self-assessment should be shared with relevant colleagues, including senior managers. The self-assessment is a governance tool and it is therefore important to ensure that learning and achievement are disseminated.
61. You might also want to think about sharing the outcomes more widely. For example:
- (i) publishing the report and delivery of the action plan
 - (ii) sharing and comparing with other authorities; you may wish to know how your practices and performance compare
 - (iii) sharing both the outcome and the experience of the self-assessment with the Commissioner.

Continuous improvement

62. The final challenge is to embed the performance improvement permanently into the way your authority works by:
- (i) ensuring everything you've achieved and put in place so far will continue, and
 - (ii) setting longer term goals to monitor and further improve performance, creating incremental steps to achieve excellence.

Help us to help you

63. Your feedback is vital to helping us make our resources user-friendly and support you in meeting your FOI duties. We would appreciate your feedback via a [short survey](#). It should take between 5 and 10 minutes to complete.
64. We would also appreciate you sharing the outcome of your self-assessment, or at least let us know about it and whether you would be prepared to share your experience with someone from another authority.
65. If you would rather just pick up the phone or email us, our contact details are on the back cover.

Appendix 1- Example Summary of Findings

An authority gathered the following evidence in relation Module 3: Advice and Assistance, to the group of questions under the characteristic *open and transparent culture*.

Evidence gathered	Strengths identified	Areas for improvement
<ul style="list-style-type: none"> • CEO launch of new policies and procedures • FOI procedures issues log • Departmental statistics • Minutes of monthly EMG meetings showing FOI performance discussed • Interviews/ workshop with FOI champions and front line staff • Community engagement strategy • Corporate strategy 	<ul style="list-style-type: none"> • Leadership commitment to FOI • FOI performance recognised as important and monitored • Policy and procedures make reference to the Section 60 Code of Practice 	<ul style="list-style-type: none"> • Access to information not mentioned in either Corporate or Community Engagement Strategy, so no overt links to transparency • Performance is inconsistent across Departments • Inadequate front-line resources to provide desired level of service

This is how the **Summary of Findings** might look in relation to this characteristic.

	Characteristic	Rating
1.	Open and transparent culture	Adequate
2.	Governance and management	
3.	Arrangements for advice and assistance	
4.	Training and guidance	
5.	Monitoring, reporting and reviewing	

	Overall rating	
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Comments

Open and transparent culture

1. There is evidence of commitment to FOI at leadership level. The recent review and update of the FOI procedures was positively and publicly supported by the CEO and Executive Management Group. There is a planned annual review of the procedures and a system in place for all staff to make improvement suggestions.
2. The EMG has set targets for FOI responses and monitors performance at its monthly meeting; this is then reported in the Annual Report and Accounts. Individual department heads are held accountable for their department's performance. Procedures and targets focus on timescales but do not make the link between effective FOI advice and assistance, proactive publication and public engagement. There is a disparity between departments' performance: two consistently issue late responses. It is notable that the departments with the worst performance are those that do not delegate FOI decision making.
3. The Communication Engagement Strategy does not mention access to information or how the powers to proactively publish might support successful delivery.

4. Generally, front-line staff give advice and assistance in line with the Section 60 Code. Staff in some departments want to spend more time giving advice and assistance, but feel under-resourced to do so.

Actions

(You may find it helpful to have just one set of actions as often the same actions can address a number of issues)

5. Policy and Procedure is reviewed to ensure more consistency in approach to delegation.
6. The authority needs to achieve greater consistency at EMG level, enabled by public senior support for FOI, especially in relation to proactive publication.
7. Links between access to information and openness should be made more explicit, particularly in relation to Community Engagement and Corporate Aims.
8. EMG should review frontline resources to give advice and assistance which could reduce the cost of FOI overall.

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