APPENDIX 1
Social Work and Health Public Service Improvement Framework (PSIF) Improvement Areas

Criterion 1: Leadership

PSIF Ref No.	Improvement Initiative	Desired Outcome	Measure of Success
1a1	Consult and involve staff in setting the vision, values and aims. d into service planning sessions and via staff survey to ensure aximum coverage of all staff	Staff understand their role in the delivery of the vision	Staff surveys confirm that staff understand the vision and values
1a2	Improve officer/member working across the department Sustain and develop personal visits by elected members and senior staff to units	Improved understanding of the role of elected members and more effective decision making	Elected members and officers work together to get the best outcomes for service users
1a2	Finalise departmental re-structure Take steps to reduce detriment arising from job evaluation Encourage development of shared resources	Resolve temporary arrangements Reduce staff anxiety Maximise resource utilisation	Reduction in temp/acting posts Improve levels of job satisfaction, measure via staff survey
1a3	Develop a programme for roll out of the Public Service Improvement Framework (PSIF) for all services	Departmental services continuously improving and delivering best value	External scrutiny becomes less resource intensive Participation rates in PSIF programme
1a4	Systematically review the performance of senior staff via the Personal Development Planning (PDP) process and by prompting involvement in the WDC Management Development Programme	Senior staff regularly review and improve performance produces better services	Level of participation in PDP from learning and development opportunities
1a5	Increase awareness of Sustainable Development Agenda by promoting Departmental policies via system of team briefing	Higher levels of awareness of relevant policies and initiatives	More effective support for sustainable development
1b1	Improve internal communication through Senior Management Network Implement new Communication Policy and Team Briefing Develop open forums between senior management and staff Review how we communicate with all staff whether or not office	Staff are knowledgeable about service and Council decisions	Staff surveys show improving trends of awareness

	based		
1b2	Develop a learning and development strategy for the Department and provide sufficient resources to implement	Better trained staff deliver better quality services	Customer satisfaction levels
1b3	Develop systematic approach to identifying, providing and recording training	There is equal access to available training resources	Confirmed through staff surveys
			Staff surveys
	Review induction training to make sure that the Scottish Social Services Council (SSSC) codes of conduct are re-enforced to all staff regardless of whether they are registered	Ensure equal opportunities	Staff behaviour reflects the principles of the codes of conduct
		All staff are aware of the codes of conduct	
1c1	Develop programme for roll out of Departmental consultation policy and review if all key stakeholder groups are covered incl.hard to reach groups	All stakeholders involved and consulted to improve service delivery	Levels of customer satisfaction with the service
1c3	Develop system to systematically review performance against Customer First Strategy standards	Improved customer service	Service standards compliance rates
1c4	Review the effectiveness and efficiency of Strategy groups	Managers support the strategy groups	Strategy groups are an effective forum for consultation
1c4	Improve opportunities for stakeholders to be involved in formal reviews of services by augmenting current consultation policy	Staff ownership of improvements	Implementation of Improvement Plans to meet target

Criterion 2: Service Planning

2a1	Design consultation process to involve stakeholders, partners and the community in the service planning process	Stakeholder ownership of plans	Consultation results
	Involve key stakeholders in setting priorities prior to finalisation		
2a2	Produce a programme to systematically apply impact assessment to cover all strategies and plans: including	Nom detrimental impact as a result of plans	Impact assessment results and programme of review
	Equality Impact Assessment		

	Strategic Environmental Assessment		
2a3	Develop a systematic approach to customer focused surveys to show trends and link to improved outcomes.	Improved customer service	Survey results and analysis
2a5	Develop operational/business planning at team level utilising where possible further integration with health or other partners Review possibility of closer integration which will enable us to further develop shared resources and skill mix. Clarify accountabilities and HR responsibilities for joint and integrated services.	Seamless services between SW and Health for the public	Shared objectives and resources
2a6	Develop community engagement through implementation of the Public Information Strategy.	Better informed public about services	The new strategy
2a7	Develop feedback system to use the evidence provided by surveys to give feed back and to improve services.	Services that meet stakeholder needs	Link between consultation results and actions in plans
2a7	Develop a toolkit for option appraisal to challenge and review strategies and plans (Corporate toolkit planned)	Service delivery and configuration that represents best value	New Strategy and programme of appraisal
2a8	Complete the implementation of the systematic review of the risk register that is currently under way Identify strategic risks and link to Service Plan and any opportunities from risk that arise	Reduced risk of litigation and the collapse of the service	Level of litigation and success of business continuity
2a9	Develop a systematic programme and approach to review policy development including identifying and prioritising gaps. Review and assessment of policies should include ensuring a customer focus All policies have an outcomes	Consistent implementation of policy	Policy review programme and new polices Improved focus on outcomes

	Review and assessment of policies to comply with legislation and best practice.	focused approach	
2b1, 2,3, 4,5, 6	Develop Departmental service standards and a Charter which outlines standards to be expected Complete customer journey mapping for main services Develop standards for the quality of customer care Report performance against service standards Measure performance against corporate standards for timeliness, quality, reliability, response times and courteousness and helpfulness of staff Implement the National Standards for Community Engagement	Better customer service	Performance against service standards
2b4	Develop a range of ways to involve service users and inform them about what is available and how to access services Review how service users are informed about service provision, including changes and delays and how we will keep them informed.	Better informed service users	Service user surveys show information on services easily accessible
2b6	Review system and quality assurance used to monitor case records, care planning and review standards. Develop case file audit programme for Departmental services Develop audit checklist to ensure compliance against case recording standards Ensure lessons learned from case file audits are communicated at team sub team and individual level Review if Care Plans are up to date and show a SMART action plan, frequency of reviews, take up of further information on carers support plans and direct payments	Improve levels of customer support Meet quality service standards	Meeting standards in Care Plans and in agreed procedures

	Provide evidence of clearly stated outcomes for service users and carers contained within assessment and review paperwork		
	Provide evidence of worker supervision		
	Design method for statistical sampling of files and surveys		
2b6, 7,8, 9	Review methods of communicating with stakeholders about service standards	Better informed stakeholders about performance	Public Performance Report
	Review how information is presented and disseminated		
	Review the balance of positive and negative information provided		
2c1	Develop a more systematic approach to consultation.	Stakeholders perceptions built into service design and delivery	Consultation results
	Build specific types of appropriate consultation communication for different user groups into the strategies		
	Develop a Participation Strategy		
	Develop system to review effectiveness of consultation and the Participation Strategy		
2c2	Develop an approach to systematically measure effectiveness of consultation	Services designed to meet desired need	Consultation response rates
2c3	Ensure annual consultation methodologies measure levels of customer satisfaction	Improved services, satisfied customers	Levels of customer satisfaction
2c4	Review charging policy and framework for non-residential care services	Value for money services better informed customers	Framework
2c6, 7	Review customer contact and the channels used to communicate with them (calls, webhits,leaflets and literature)	Easier access	Increased customer contact
	Include feedback question in each communication channel to check it is understandable, clear and comprehensive		
2c8	Review new ways to engage with stakeholders with the one-stop approach for customers.	Ease of access, one point of contact	Calls via contact centre
2d1-	Develop performance indicators in service plan in line with national	Improved performance across	Performance against planning

2d5	policy	the Department	targets	
	Develop indicators and targets to measure outcomes and impact			
	Roll out performance management system Covalent to first line managers and other staff			
	Embed SMART targets in all performance areas throughout the Department			
	Compare performance with others using QPR system, new benchmarking toolkit and 2010 programme of benchmarking reviews			

Criterion 3: People Resources

3a1	Complete and implement the workforce plan and evaluate the impact Link to PDP process and service priorities for all services	A systematic way of evaluating and calculating the people, skills and jobs required to match the services priorities and goals	Having the right people in the right place at the right time
3a2, 3c3	Continue with annual review of training and development at departmental and service level	Any new and existing training requirements are kept up to date	Improved customer feedback
	Develop training opportunities in customer care, complaint handling managing challenging customers, equal opps cost/benefit analysis and risk management	Use of training resources represents best value	Training matches skills gaps
	Develop systems to support registration with SSSC including a registration and training database		
	Report on analysis of training evaluations annually to ensure essential training needs are being adequately met. Evaluate and report on training event feedback across all services.		
	Promote and develop e'learning capacity including best use of Care Knowledge and PRTL toolkit	To maximise training opportunities for all staff	

			including non-office based	
	There is need to source and resource wider training opportunities for staff who are not required to register with SSSC Review opportunities for career development in line with staff survey action plan and linked to competencies and the continuous learning framework. Review equal access to buildings used for learning and development			
3a2	Review recruitment policies/procedures to ensure a customer focus in job descriptions and recruitment procedures Introduction of service users involvement, where appropriate, in the recruitment process	Good customer care is an expectation for all services	Improved customer feed back	
3a4	Develop guidance and application for the access to work scheme	Increased access	Access rates	
3a6	Implement improvement actions arising from employee surveys	Staff perceptions improve via staff survey	Staff survey results	
3a7	Evaluate resources in terms of money and time spent on learning and development activates and relate impact to service delivery	Better service delivery	Evaluation	
3a8	Develop SW&H Human Resource Strategy and review performance against targets annually	Human resources match service objectives to deliver high quality services	Performance against HRM targets	
3b1, 2,3	Develop a programme to ensure people are continuing to receive PDP annually Develop 6 monthly reviews of PDP Carry out a departmental survey of the PDP system to ensure learning and development opportunities are available for everyone	All staff have regular PDP's	Performance improves and all staff know what their development needs are and how these can be met	
3b4	Develop programme for service teams to have regular team meetings and the opportunity for team development days to encourage shared aims and a reflective approach	Team work supports common objectives and a sense of purpose	Improved service delivery	
3b5	Complete annual review of induction pack	Staff have greater awareness of WDC	Staff survey results	

	Implement system to ensure checklist are returned as evidence of the induction process Develop specific induction for existing staff moving to new posts		
3b6	Develop standard Departmental evaluation to rate learning and development opportunities and build results into PDP process	Well trained staff	Staff survey
3c1	Implement PSIF in all service areas to enable staff to contribute to open and transparent self evaluation and improvement	Staff ownership of improvements	Staff survey
3c2	Provide training to frontline staff in customer care	Better customer care, satisfied customers	Levels of customer satisfaction via annual consultation
3c4, 3d4	Review processes for sharing and improving performance with regard to staff opinion and effectiveness	Good practice is recognised and used to make improvements	Good practice is identified and shared
3d2	Review if staff understand their role via the annual PDP process	Clear staff understanding and ownership	Staff survey
3d5	Review effectiveness of WDC Communications strategy and system of team briefing	Well informed staff	Staff survey
3e2	Engage with corporate HR about the impact of corporate policies	Policies reflect SWH requirements	Staff survey results
3e3	Review and influence effectiveness of Occupational Health service	Improved support for employees	Reduce the impact of health and well being issues on service delivery
3e4	Influence star awards scheme and review our level of nominations for staff, review what we regard as meriting an award Review recognition of staff who are retiring	Staff winning awards and being motivated	Staff survey
3e5	Develop approach to annually monitor the performance of employees	Awareness of staff effectiveness	Process for employee appraisal

Criterion 4: Partners and Resources

4a1, 2,3, 4,5, 6	Develop systematic approach to review effectiveness and appropriateness of existing and potential partnerships and joint working arrangements	Partnership working can prove its effective via systematic review	Develop outcomes to measure success of partnership working

	Review governance arrangements for partnership working Develop set of outcome measures to evaluate effectiveness and efficiency of partnership working on an annual basis		
4a2	Compare performance annually with both public and private sector providers	Staff awareness of performance compared to others and improvements identified to get better	Improvement in position against comparators
4a4	Review information provision, the standard of information and how it is provided and its effectiveness Review methodology for information audit Review the quality of information both qualitative and quantitative Devise a method to ensure utilization of information that already exists Seek views and feedback on the accuracy of the information Review the safety of data across the Council include Management Information System	Increased awareness about services	Review quality of information via consultation results
4a4	Co-ordinate Customer Relationship Management to evidence numbers of contacts Review possibility of further access to WDC Customer Relationship Management System	Good quality customer contact	Review customer contact experience via consultation results
4a5	Develop a systematic approach to review service delivery option Carry out an Option Appraisal Of all service areas Review effectiveness of Shared Services arrangements	Service configuration that represents best value	Review if service configuration meets consultation results
4a5	Develop Outcome focused Commissioning Strategy for SWH Complete the full range of commissioning strategies and ensure ongoing review and update	Packages of care Develop procedures and	Better quality services

	Develop programme for commissioning processes and plans for all service areas. Review levels of unmet need Develop a Service Level Agreement for all commissioned or purchased services Review standing orders to ensure fit for purpose for social care procurement Review procurement processes for high cost	protocols for high coos care packages Develop training programme for staff Develop programme to involve stakeholders in commissioning care packages	
4b2	Develop better joined-up approach to identification of and application for external funding Carry out Integrated Impact Assessments on development and investment decisions	Better choice and levels of service	Increase in level of external funding
4b3	Develop 3 year efficiency targets and improvement plan for the Department	Efficiency savings	Level of Efficiency savings
4b6	Carry out Feasibility studies and Business cases for future business decisions	Business decisions represent best value	Feasibility studies for future business decisions
4b7	Implement Procurement policy across the Department Check that environmental factors are considered procurement policy to Review use of printers and increase use of network printers	Better value for money	Purchasing cost decrease
4b1, 4b8, 4b7	Review approach to financial management Process map financial processes Carry out financial awareness training and development for budget holders	Better use of financial resources	Costs consistently within budget
4c1	Interface with Care First to maximise the benefits and usage of the system	Knowledge sharing roll out of best practice	System for sharing

	Identify appropriate resources		
4c4	Review effectiveness of Customer First Strategy Develop further the on-line services, including improved web site Explore options to widen areas for Electronic Service Delivery including self assessment Improve hot-desking (computer accessibility) in other	Easier access to information and services via electronic means	Web hits and bookings via internet site
4c3	Develop a wider Reader's panel for publications Review effectiveness of leaflet and directory information and opportunities for joined-up approach with NHS and other partners Develop a shared training agenda across the local authority, voluntary and independent sectors through the local practitioners group and the local learning network inclosing further development of Care knowledge as a way of sharing best practice Aim to implement care and Integrated Assessment Framework as part of partnership approach to sharing information	Seamless information for the public	Survey results improved
4c5	Improve accessibility of offices and meeting places to protect customers privacy	Reduced travel time To maximise accessibility of offices and other establishments to allow access for all	Reduced travel expenses Percentage of SW&H buildings that are accessible
4c6	Develop a systematic means ensuring knowledge is distributed and accessed appropriately and develop a knowledge store via Care Knowledge and review effectiveness of system annually	Increased knowledge levels of staff and partners	Care first fully utilized, increased site hits
4d1	Develop Asset management Plan in line with corporate and departmental priorities and changing service delivery models and demands - should be related to service plans and commissioning strategies Contribute effectively to the corporate asset strategy	Efficient use of assets	Reduced asset costs

4d2, 4	Complete review of energy efficiency and develop good housekeeping guidance	Efficient use of energy through staff awareness	Reduced energy costs
4d3	Continuously review procedures for security of resources	Staff aware of security procedures	Less security breaches
4d5, 6	Review existing Departmental technology for efficiency and effectiveness and implement SMART technology where appropriate Review roll out of television conferencing Extend use of telecare to more client groups Develop range of uses for mobile technology	Increased levels of efficiency and easier contact	Costs for meetings and one to ones decreased

Criterion 5: Service Processes

5a2	Develop approach and guidance for risk management of people Improve risk assessment guidance with clearly identified guidance as to which tools should be used and when Review tools for appropriateness and effectiveness Train appropriate staff, evaluate level of understanding and ensure staff are clear about appropriate tools, evidenced via case file audits Review effectiveness of interagency procedures for risk and shared information and protocols	Identification of early risk will alleviate potential failure	Risk identification and contingency actions
5a2	Develop Carers policy	Improved uptake of carers support plans	Improved support for carers
5a3	Review our approach to ensure that feedback is gathered in a systematic way and used to inform future policy and service development.	Implement regular surveys and develop ways of providing feed back through strategy and other groups	Citizens Panel and service level survey results
5a4	Review communication methods for hard to reach groups	Consultations show that a variety of ways have been used to gain feedback	There are examples confirming successful consultations across a wide range of services

5a6	Develop the links between complaints management and quality assurance processes to interpret trends, learn from mistakes, monitor timescales and improve outcomes for service users. Develop a more systematic approach to the handling of all complaints which includes integrating lessons learned into improved practice.	Clear linkages between areas integrated areas for improvement	Complaints data and analysis.
5a6	Produce briefings on the revised complaints procedure are carried out and complaints handling training is included for all staff	Staff know how to deal with complaints and are aware of timescales	Complaints reporting shows that complaints are being dealt with according to best practice
5b1	Seek customer feedback on ease of service accessibility and use this to develop better channels of communication.	Consultation and survey results show improving trends	Explore range of options available including electronic methods of communication
5b1	Review effectiveness of public information strategy.	There is a consistent approach to information sharing	Consultation and survey results show improving trends
5b1	Review the quality of information on the internet and leaflets	Better informed service users	Service user surveys
5b2	Review the effectiveness of the consultation policy and plan.	Services can show what improvements to the service have been made	Outcomes of consultation are recorded and reported
5b2	Review performance information relating to consultation to identify areas of weakness and inform further service development.	Include in quarterly performance reporting to SMT	Consultation plans and progress is kept under review
5b3	Review effectiveness of existing system for first point of contacts.	Prompt access to services/advice	Improved trends reported form surveys about service user experience
5b3	Analysis of initial customer contact with the service, got correct info		
5b4	Make sure the Corporate strategies regarding customer care are implemented and that all staff comply with SSSC codes of conduct	Include in service standards	Develop a more systematic approach to gathering customer feedback.
5b5	Review Service level agreements and incorporate penalty clauses for cleaning	Include in service standards	Seek customer feedback
5b8	Review existing processes and develop pro-active system for customer information re services.	Include in service standards and publicise	Service users are clear about timescales/delays in service delivery and the reasons for this
5b8	Information on waiting times for customers and system to notify of delays	Include in service standards	Compliance against service standards results
5c1	Seek customer feedback on ease of accessibility and use this to	Easily accessible services	Compliance against service

			standards results
5c1	Embed the review and improvement of service delivery in the SMT quarterly reporting system.	Led from the top	Managers are accountable to the SMT/director for the quality of service
5c1	Process map core services Identify process owners Develop performance indicators and targets for core processes	Efficient processes	Meet process targets
5c3	Review call and visitor management systems annually	Improved contact	Service user consultation results
5c4	Publish and report Departmental customer satisfaction levels annually via Public Performance Reporting system	Well informed customers	Customer consultation
5c5	Improve analysis of all information received from complaints including customer feedback and use to review and make changes to services.	Ensure that lessons are learned from complaints received and used to improve practice.	Corporate and Departmental reporting of complaints and action taken as a result is part of regular performance review
5c7	Analyse customer experience via customer journey mapping and surveys and use feedback to make improvements	Better customer services	Customer consultation
5b6, 5c5	Extend complaints procedure to gather data related to informal complaints. Introduce follow up procedure to check customer satisfaction following completion of a complaint and use to review and improve services	Improve analysis of information received from informal customer complaints and use to review practice.	Information gained is used to change practice
5c7	Review process for development of improvement plans to incorporate a demonstration of the pathway to improvement.	Strengthen the links between improvements and direct experience of SU's	Implemnataion of improvement plans

Criterion 6: Customer Results

6a1	Develop internal performance indicators to measure customer perceptions and set targets, incl, ease of access, information provided by services, customer satisfaction, cost of service, range and choice of service	Improved customer service	Results from comments cards used for comparison quarterly

6b1	Develop internal performance indicators to measure customer results and set targets incl. number and type of complaints and compliments, time taken to deal with customer enquiries, waiting times, response rates, customer awards and accolades, press coverage and performance against service standards	Improved customer service	Performance against targets

Criterion 7: People Results

7a1	Develop internal performance indicators to measure people perceptions and set targets, incl, motivation, learning and development, recognition, equal opportunities, communication, career development, terms and conditions, facilities and health and safety at work	Improved performance	Against new targets
7b1	Develop internal performance indicators to measure people results and set targets incl. evaluation of learning and development, induction, recognition of teams, response rates to surveys, recruitment trends, retention and turnover, and grievance	Improved service	Performance against targets
7b1	Review staff turnover levels and develop indicator and target	Staff views in surveys shapes service	Recruitment cost decrease as do turnover levels
7b1	Compare people performance with others	Better performance	Performance results improved compared to others

Criterion 8: Community Results

8a1	Develop internal performance indicators to measure community perceptions and set targets, incl, response to the community, effect of service on the community and the environment and community involvement	Improved community service	Performance against targets
8b1	Develop internal performance indicators to measure community results and set targets incl., publicity, awards and achievements, service involvement in the community recognition from professional bodies	Improved community service	Performance against targets

8a1	Develop the opportunities offered by citizens panel surveys to check on the impact of our services.	Citizens have opportunities to have their views heard	Response rates and improvements made via citizens panel

Criterion 9: Key Performance Results

9a1	Develop approach to benchmark financial modeling against other councils.	Improved performance	Comparison results
9a1	Develop indicators to measure efficiency and competitiveness	Delivery of best value services	Comparison results
9b1	Develop indicators to measure effectiveness and efficiency of financial management Conduct trend analysis in three year cyclical periods	Services delivered within budget	%of budget within budget