



Quality Management in Local Authority Educational Psychology Services



Self-evaluation for quality improvement

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Foreword

In 2001 the Scottish Executive commissioned a national review of educational psychology services in Scotland. The subsequent report, *Review of Provision of Educational Psychology Services in Scotland (2002)*¹ made a number of recommendations including recommendation 20: *Educational psychology services should have a more formal framework of evaluation which incorporates self-evaluation, peer evaluation and, inspection by HM Inspectorate of Education and which, in particular, takes full account of the views of children, young people and parents.*

In response to the above Her Majesty's Inspectorate of Education (HMIE), in consultation with the profession have developed a self-evaluation framework which meets the requirements of recommendation 20, is consistent with the legislative framework pertaining to educational psychology in Scotland,² and matches similar quality frameworks used to evaluate and inspect local authority services, and services for children.

The emphasis within the publication, *Quality Management in Local Authority Educational Psychology Services (QMILAEPS)* is on the importance of the self-evaluation process and the role it plays in driving continuous improvement. The focus is on impact and outcomes for children and young people in the pursuit of excellence. The self-evaluation framework applies a set of **six high-level questions** to evaluate the performance and quality of the work undertaken by educational psychology services. They are:

- **What key outcomes have we achieved?**
- **How well do we meet the needs of our stakeholders?**
- **How good is our delivery of key processes?**
- **How good is our management?**
- **How good is our leadership?**
- **What is our capacity for improvement?**

The questions allow a common framework to be used for self-evaluation *and* inspection of provision and services for children and young people, thereby achieving an integrated and consistent approach across services. The self-evaluation framework complements the *Quality Management in Education 2*³ (QMIE2) model. This recognises the statutory basis for an educational psychology service,⁴ and the integral relationship which exists between the educational psychology service and local authority. This relationship is further extended as the external inspection of educational psychology services by HMIE is undertaken within the context of the inspection of the education functions of local authorities (INEA).

¹ *Review of Provision of Educational Psychology Services in Scotland (2002)* published by SEED

² Section 4 *Education (Scotland) Act 1980*; *Children Scotland Act (1995)*; *Standards in Scotland's School etc Act (2000)*

³ *Quality Management in Education 2 (HM Inspectorate of Education 2006)* is a framework of self-evaluation for *Local Authority Education Services*

⁴ Section 4 *Education (Scotland) Act 1980*

To further support the profession in applying the self-evaluation framework, HMIE have been working closely with the Association of Scottish Principal Educational Psychologists and the British Psychological Society, Scottish Division of Educational Psychology, to develop a self-evaluation toolkit. The companion publications Part I and Part II of QMILAEPS will provide a sound basis for educational psychologists to engage in the process of self-evaluation alongside other services, and to improve the impact and outcomes for children, young people and families.

I would like to acknowledge the invaluable contributions of a wide range of individuals and organisations to the development of this framework. It is important that the framework is owned by those who seek to use it for self-evaluation leading to quality improvement.

GRAHAM DONALDSON
HM Senior Chief Inspector

Acknowledgements

This document has been produced in consultation and partnership with the Scottish Division of Educational Psychology and the Association of Scottish Principal Educational Psychologists.

The development of the document was undertaken through consultation with a professional reference group which included staff from Aberdeenshire, East Lothian, Fife, South Lanarkshire, and West Lothian Councils. Production of the document was assisted further by feedback from a number of services, the course directors of the professional training courses for educational psychology at the Universities of Dundee, and Strathclyde and through consultation with the profession at the annual national conference for educational psychology.

Thanks are due to colleagues who gave their time in reading and responding to successive drafts of this document.

The compilation of material for this document involved the identification of good practice within existing systems of monitoring and evaluation. In this context, the work of the European Foundation for Quality Management (EFQM), Charter Mark, Investors in People (IIP) and the *Review of Provision of Educational Psychology Services in Scotland*, published in 2002, is acknowledged.

Introduction

The aim of this two-part framework is to assist staff working in educational psychology services to develop and implement a systematic approach to self-evaluation. Part 1 sets out the quality assurance model and provides illustrative examples of very good and weak aspects of provision. Part 2 is a toolkit and provides detailed practical assistance and advice on the process of self-evaluation at service and individual practitioner level. Both documents focus on the role of self-evaluation in developing a service's capacity to drive continuous improvement and, most importantly, to demonstrate measurable improvement in the quality of stakeholder experience. The clear focus is on impact and outcomes.

The framework materials are also provided as an online resource. This will assist educational psychology services in amending or augmenting the materials to suit local needs, priorities and circumstances. Services' approaches to self-evaluation will build on existing good practice.

The framework also includes the performance and quality indicators, measures and themes which will provide an external basis for the inspection of educational psychology services as part of the INEA. Each educational psychology service will be able, through its own self-evaluation arrangements, to gather management information and evidence that enable it to judge the effectiveness of its performance against **six high-level questions**, which will also form the basis for inspection by HMIE. These are:

- **What key outcomes have we achieved?**
- **How well do we meet the needs of our stakeholders?**
- **How good is our delivery of key processes?**
- **How good is our management?**
- **How good is our leadership?**
- **What is our capacity for improvement?**

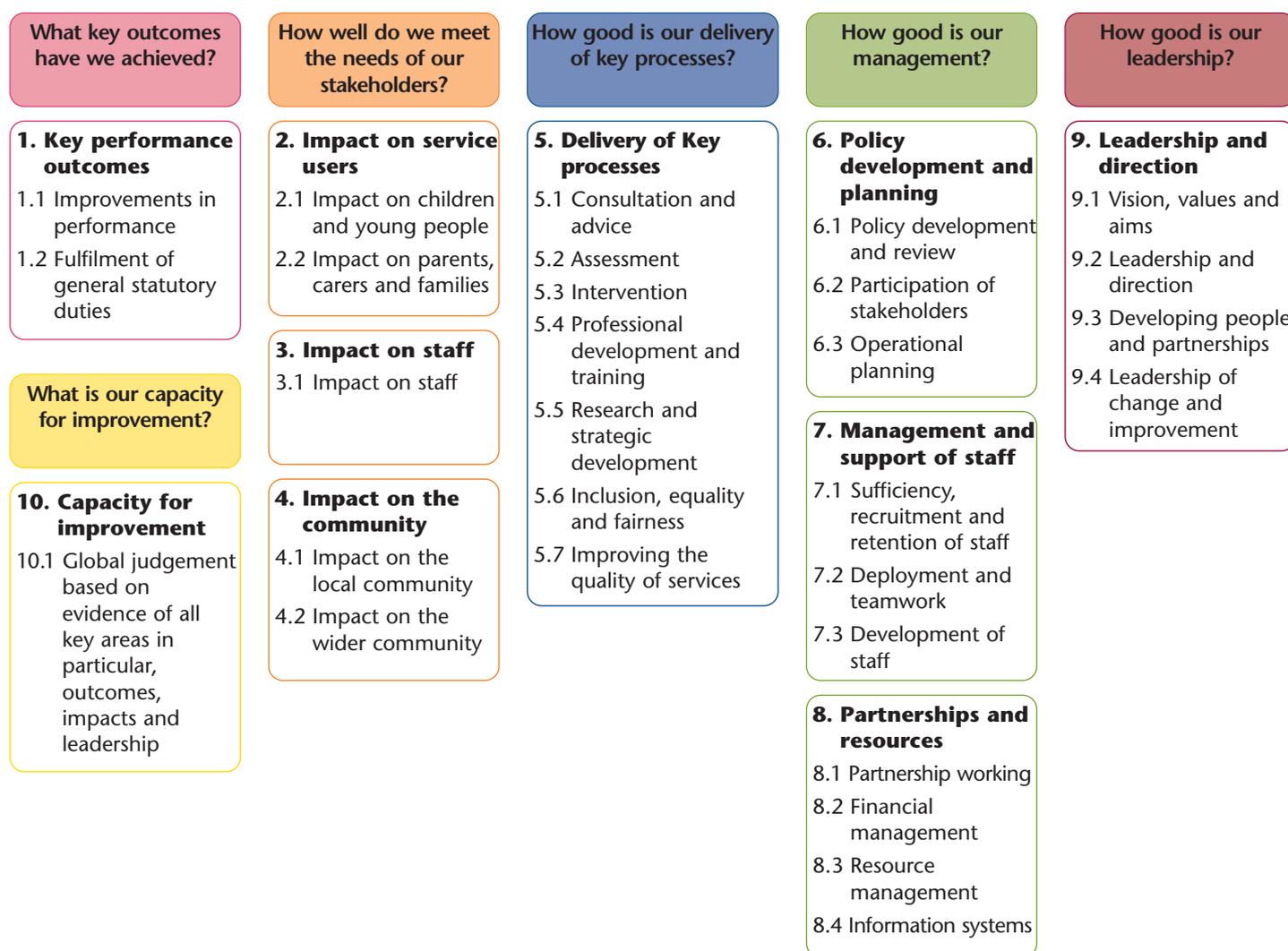
Each of these high-level questions can be answered by evaluating the quality of the service across ten Key Areas. At the centre of this framework are key performance outcomes and the impact provision is having on service users, the community and staff. Inputs, such as leadership and management, support the effectiveness of the key processes and together help us to arrive at an overall evaluation of the council's capacity for improvement. The framework is summarised in figure 1 on the next page.

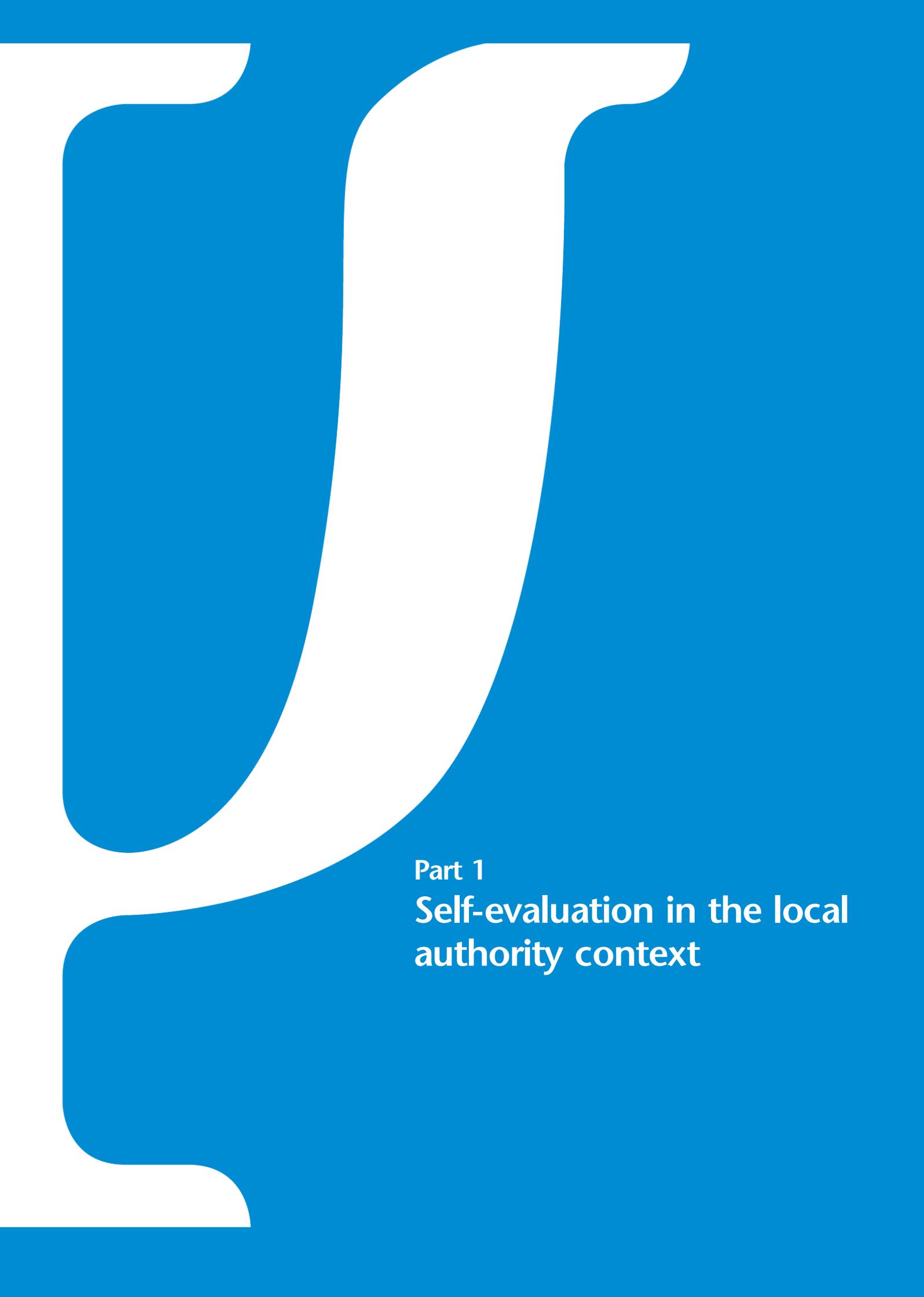
This framework aims to provide support for educational psychology services in carrying out the process of self-evaluation through which they can:

- achieve the best outcomes for all stakeholders;
- take action to sustain quality, improve services and achieve excellence;
- meet the responsibilities set out in the relevant legislation; and
- meet the requirements of Best Value and Efficient Government.

The use of performance and quality indicators, for both self-evaluation and external inspection, promotes consistency. Although these two processes may differ in terms of purpose and audience, their language and basis should be the same, enabling open and honest dialogue and consistency across different evaluations.

Figure 1: Over-arching framework





Part 1
**Self-evaluation in the local
authority context**

Part 1 Self-evaluation in the local authority context

The *Standards in Scotland's Schools etc. Act 2000* provides a framework for improvement planning that requires education authorities to set out and report on improvement objectives related to national priorities and associated measures of performance. Continuous improvement in education services is central to the work of education authorities. There is a clear expectation by Scottish Ministers that national priorities will be addressed through agreed local educational improvement objectives and related targets. To achieve these goals, it is essential for authorities, educational psychology services, community services and establishments to work together to achieve these objectives and to raise standards of attainment and achievement within an innovative culture of support and challenge.

The process of self-evaluation should, as a matter of course, generate key management information which results in an evaluation of overall quality and improvement. This evaluation can then be used to create a set of agreed, targeted action points which, in turn, drive further improvement.

The process of self-evaluation is central to the maintenance of quality and the pursuit of excellence. It has become firmly established as the basis on which improvement planning and public reporting on standards and quality are founded. Self-evaluation is complementary to external inspection. Indeed the latter now builds on the results and evidence of self-evaluation across the organisation. Self-evaluation, to be fully effective, is not designed to be a single or periodic event, but rather is an ongoing process which permeates the culture of the council as it strives to maintain and enhance the quality of provision. It is a well-focused means to an end rather than an end in itself.

The concept of self-evaluation is now well embedded across the Scottish educational landscape. In the best examples, it leads to the identification of main strengths and areas in which performance needs to be improved in the pursuit of excellence. The evaluations derived through the self-evaluation process should enable the educational psychology service to establish how it is performing against its improvement objectives, and to plan the next steps in development, in order to maintain quality, secure continuous improvement and aspire to excellence.

There are four main sources of evidence, from which evaluations can be made. These are:

- performance data;
- relevant documentation;
- stakeholders' views and feedback; and
- direct observation of practice.

These sources of evidence are complementary. No single source can meaningfully provide sufficient evidence on its own to enable a reliable or robust evaluation to be made.

The process also involves key stakeholders in full and meaningful discussion of the issues.

Each educational psychology service aims to develop a clear picture of its main stakeholders and a protocol for engaging them in ongoing, focused discussion regarding its performance in Key Areas.

Evidence shows that there is a strong link between effective leadership and management, robust self-evaluation, and development of the capacity for further improvement. To be effective, self-evaluation will:

- be embedded in the culture of the organisation;
- be rigorous, comprehensive, systematic and transparent;
- be focused on identifying strengths and weaknesses or areas for improvement;
- be based on a wide range of evidence;
- involve a wide range of stakeholders;
- lead to targeted action and improvement;
- be recorded and reported; and
- be a continuous, systematic process as opposed to an event.

The framework has been developed in accordance with the principles of the EFQM and can be used in conjunction with other quality models, for example, liP, Charter Mark and ISO 9000. The approach is also consistent with the principles of Best Value, the statutory framework, which is provided in the *Local Government in Scotland Act 2003*.

1

Part 2
The framework for
self-evaluation explained



Part 2 The framework for self-evaluation explained

Structure

The framework described in this section provides a systematic approach for educational psychology services to use for self-evaluation. The framework does not assume a particular organisational structure.

The framework has been developed in accordance with the principles of the Excellence Model of the EFQM (see Appendix 1) and evidence produced through the use of other models can contribute to overall evaluations.

The framework is based on six high-level questions which can be answered by evaluating the quality of educational systematically across ten Key Areas.

What key outcomes have we achieved?

Key Area 1. Key performance outcomes

How well do we meet the needs of our stakeholders?

Key Area 2. Impact on service users

Key Area 3. Impact on staff

Key Area 4. Impact on the community

How good is our delivery of key processes?

Key Area 5. Delivery of key processes

How good is our management?

Key Area 6. Policy development and planning

Key Area 7. Management and support of staff

Key Area 8. Partnerships and resources

How good is our leadership?

Key Area 9. Leadership

What is our capacity for improvement?

Key Area 10. Capacity for improvement

The inputs and processes outlined in Key Areas 5-9 contribute to the outcomes and impact identification in Key Areas 1-4.

Key Areas 1-9 contain indicators and measures, each with themes which focus on specific aspects of the service being evaluated.

Key Area 10 provides guidance which can be used to evaluate the degree of confidence reached by those carrying out the evaluation that the service has the capacity to continue to improve. This evaluation will take into account the evaluations of other Key Areas, its track record in improvements to date and significant aspects of its internal and external contexts.

Using the framework in self-evaluation

Educational psychology services can use the framework to provide a systematic structure for self-evaluation.

They can also use the framework as a diagnostic tool. By looking first at the outcomes and impact of the service they provide (Key Areas 1-4), they can identify key issues for further exploration, observation and analysis using the tools provided within Key Areas 5-9.

Finally, educational psychology services are encouraged to arrive at an evaluation of their overall capacity for improvement, using the guidance in Key Area 10.

Using the framework in inspection

When engaging in inspection and reporting activities, HMIE will focus on specific Key Areas and indicators selected from the overall framework. Some of these Key Areas and indicators may be used across all or most services, while others may be used only in particular contexts and will depend on the scope of the inspection. The inspection team will always seek to answer the questions:

- What key outcomes has the service achieved?
- How well does it meet the needs of its stakeholders?
- How good is the leadership of the service?
- What is its capacity for improvement?

Indicators drawn from the Key Areas relating to these questions will normally form the core of the set of indicators used during inspection. Beyond this, inspection activities might focus on specific Key Areas and indicators selected from the rest of the framework. The selection will depend on decisions taken during scoping activities and may be determined following evaluation using the core set of indicators.

HMIE will use the guidance in Key Area 10 to arrive at an evaluation of an individual service's overall capacity for improvement.

Answering the high-level questions

What key outcomes have we achieved?

Key Area 1 focuses on the overall performance of a service in relation to its key functions. It provides a structure for services to use when evaluating their success as *organisations* in delivering **demonstrable** outcomes as outlined in legislation and programmes for development. For example, these could include outcomes in delivering national priorities for education, improvements in achievement for children and young people with additional support needs, reducing exclusion and promoting more effective transitions for children and young people entering school education or moving into the post-school sector. Also important are the improvements made in relation to the service's strategic priorities and distinctive vision, values, aims and targets. These targets may include locally determined targets for social, education, wellbeing and care objectives in the context of Children's Services and other plans.

Key Area 1 also focuses on the extent to which services fulfil their statutory duties, meet legislative requirements, follow appropriate codes of practice and are financially secure. The educational psychological service is a statutory service with a wide range of functions which are set down in *Section 4 of the Education (Scotland) Act 1980* and in subsequent amendments including the *Education (Additional support for Learning) (Scotland) Act 2004*. *The Children Scotland Act (1995)* extended children's rights in a number of areas and the *Standards in Scotland's School etc Act (2000)* places additional duties on local authorities which have implications for the educational psychological service. The Scottish Executive report *Review of Provision of Educational Psychology Services in Scotland* published in 2002, makes specific recommendations about the way that educational psychological services are expected to perform in order to fulfil their statutory duties. Fulfilling these duties and following relevant codes of practice are key aspects of overall performance.

How well do we meet the needs of our stakeholders?

Key Areas 2, 3 and 4 focus on the impact on key groups of stakeholders of the service's delivery of key processes. In other words, these areas look at the benefits which stakeholders derive from the educational psychology service. Stakeholders include children, young people, families, schools, social workers and health professionals who are in direct receipt of the service together with those who support them and who also have a significant interest in the delivery of high-quality services, for example, parents and families.

Stakeholders also include the staff within the service who receive care, support, training and opportunities for involvement in decision-making and career development. Their motivation and satisfaction is of considerable importance if the service is to operate effectively. Evaluations would draw upon the views of staff together with other information, such as rates of absence or retention. The quality of the care and support given to staff can be evaluated by considering evidence of teamworking, rates of involvement in professional development and achievement of qualification and accreditation of the service as a whole by national schemes like LIP and Scotland's Health at Work (SHAW).

Finally, stakeholders include members of the community. These stakeholders include those from the immediate local community on whose lives and experiences the service has a demonstrable impact. They also include the wider national and international community. The service may make a significant contribution to thinking and practice within a particular area of work. For example, staff may be actively involved in working groups, lead national initiatives and share innovative practice with others. Evidence of the service's impact beyond its immediate context may come from colleagues and peers, from published reports or from other media sources.

When evaluating the impact of the service on the range of stakeholders, consideration should be given to the overall balance of strengths and weaknesses. Those carrying out the evaluation need to be alert to the possibility that in order to bring about improvements in one area of impact, the quality of service delivery in another area could diminish, with an overall detrimental effect on service to stakeholders.

Evaluations of the quality of impact in these Key Areas will take into account direct observation and quantitative data together with evidence of stakeholders' views, in order to arrive at overall judgements of the impact of the service on its key stakeholders. Where evidence from these sources is conflicting or indicates significant weaknesses, evaluators should follow audit trails to identify and address the possible causes, using indicators from other Key Areas in the quality framework. The focus of Key Areas 2, 3 and 4 will be on evaluating the impact on *specific* groups of stakeholders including children, young people and families, and arriving at holistic evaluations of the overall impact on their experiences.

There may be apparent discrepancies between the evaluations given within Key Area 1 and those given within Key Areas 2, 3 and 4. An improving service may provide considerable evidence of impact on its stakeholders. Significant changes in measurable outcomes such as those included in Key Area 1, however, may take longer to become apparent. For example, young people may indicate through their views and behaviour, that they are learning more effectively. They may show increased motivation and less evidence of disaffection. It may take time, however, for improvements such as these to translate into increases in attainment levels or reductions in offending. In other words, there may be a time lag between improvements in terms of benefits for stakeholders and the overall measurable outcomes of the service. Evaluations of impact may therefore be noticeable more positive than evaluations of outcomes. The opposite may also be true. An organisation such as a high-performing school might deliver and maintain very good examination results. However, the experiences of young people may be evaluated less highly. They may not receive sufficient stimulation or challenge or have poor relationships with their peers or with staff. They may have few opportunities for, or little commitment to independent learning. In such circumstances, overall outcomes may be very positive but evaluations of impact on learners less so.

How good is our delivery of education processes?

Key Area 5 focuses on the work of the service in relation to its key functions. This relates to the quality of the delivery of the key educational psychological services. The Scottish Executive report *Review of Provision of Educational Psychology Services in Scotland* published in 2002, makes specific recommendations about the way that educational psychological services are expected to perform in order to fulfil their statutory duties.

The *Review of Provision of Educational Psychology Services in Scotland* identifies a number of key services which underpin the delivery of the statutory duties of an educational psychology service. These are looked at in turn in Key Area 5. The way in which these services are delivered will impact on performance (Key Area 1) and stakeholders (Key Area 2)

- **Consultation and Advice** is grounded in applied psychology. This is used to assist young people and other stakeholders to articulate issues which are of concern to them and to generate appropriate plans of action in response to these.
- **Assessment** should be least intrusive and carried out in relevant contexts using a wide variety of techniques and resources to gather information and generate hypotheses.
- **Intervention** is planned which is least intrusive and based on evidence of effectiveness.

- **Professional Development and Training** is offered at individual, provision and authority level to assist in meeting the National Priorities. Training may also be offered as part of the planned response to an identified need.
- **Research and Strategic Development** opportunities are available to provision and to the educational service to inform policy and decision-making.

Key Area 5 also looks at the quality of the service's processes for improving its work and how well it works with its key stakeholders and partners to achieve this. Quality improvement should be built into the core work of the organisation, it should not be a bolt on. Evidence of the effectiveness of the service's key processes will be seen in the impact they have on stakeholders and in its overall performance.

How good is our management?

Key Areas 6, 7 and 8 focus on the operational management activities necessary to ensure effective service delivery and to deliver Best Value. These activities include the service's arrangements for developing and updating policies, for involving its stakeholders, for operational planning, for managing staff, finance, information and resources and for developing productive partnerships. Strengths and weaknesses in these areas will normally affect the quality of the key processes delivered (Key Area 5), their impact on stakeholders (Key Areas 2, 3 and 4) and the performances of the service as a whole in relation to its key functions (Key Area 1).

How good is our leadership?

Key Area 9 focuses on the strategic direction of the service in relation to its key functions. It looks at its corporate purpose and the expression and delivery of its aspirations by means of strategic planning with partner agencies and the community.

This Key Area 9 considers the quality of leadership and direction at strategic level, and within teams and across the service as a whole. It looks at the quality of interactions with people within the organisation and with partners in other agencies. It also focuses on the role of leaders in bringing about change and improvement, including innovation and, where necessary, step-change.

Strengths and weaknesses in leadership will reflect the extent to which leaders make a difference to the quality of outcomes achieved by the service, and the authority as a whole and to the benefits derived by stakeholders. Evaluation will take account of the impact of leadership on the experiences of children, young people and families, and other key stakeholders and the extent and quality of the outcomes demonstrated.

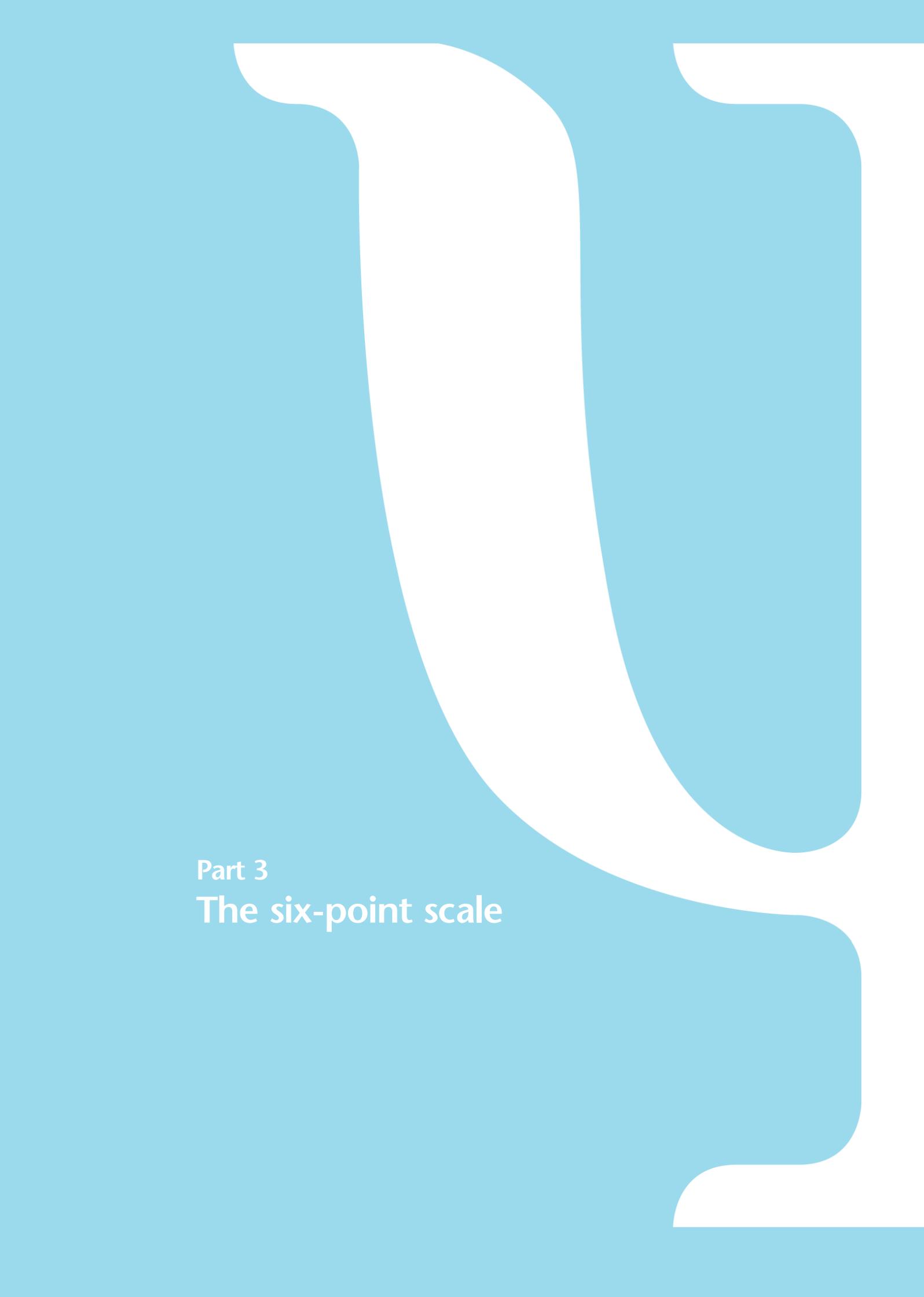
The indicators in Key Area 9 should be capable of being applied at more than one level within the organisation. They could, for example, be applied to the work of the principal educational psychologist and senior officers with responsibility for the service but also to the work of those who lead specific, teams, including project teams and working groups.

What is our capacity for improvement?

Judgement of an organisation's capacity for improvement takes into account the evaluations arrived at in Key Areas 1-9, with particular reference to the quality of the leadership and management of the service and overall impact and outcomes. The service's focus on improvement and its track record in bringing about improvement are particularly important, as is the accuracy of its self-evaluation, which is used as the basis for planned improvements. The judgement also takes into account any significant aspects of the service's internal or external context, for example, impending retirements of senior staff, plans to restructure or significant changes in funding. The judgement reviews the past, and looks forward to the future.

Judgements of a service's capacity for improvement could be expressed in terms of a **degree of confidence** that it has the capacity to continue to improve. The judgement may be that the evaluators are **confident that the service has the capacity to continue to improve**. This judgement would be made when highly effective leadership and management have sustained high levels of quality and brought about major improvements to outcomes and impact on children, young people, families and other stakeholders. Evidence at the time would indicate that these improvements were sustainable and that improvement would continue. No significant changes in the internal or external context of the organisation would be apparent or predicted at the time the judgement was made.

When there are reservations about one or more of these aspects, the use of other terminology would be more appropriate. For example, those carrying out the evaluation might have only 'limited confidence', or indeed, 'no confidence' that the service has the capacity to improve. It would be important for evaluators to note the nature of their reservations, for example, by pointing to specific aspects of the service's work or its current or future context.

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Part 3
The six-point scale

Part 3 The six-point scale

Self-evaluation for quality improvement can be used to evaluate quality against six levels of performance.

In the complex operational context of educational psychology services, there are a number of ways in which performance can merit a particular evaluation. It should be kept in mind, however, that service evaluation is not a technical process and awarding levels of performance should be based on professional judgement. The following general guidelines should be consistently applied.

- An evaluation of **excellent** applies to performance which is a model of its type. The experiences of children, young people and their families are of a very high quality. An evaluation of *excellent* represents an outstanding standard of performance which exemplifies best practice and is worth disseminating beyond the service. It also implies these very high levels of performance are sustainable and will be maintained.
- An evaluation of **very good** applies to performance characterised by major strengths. There are very few areas for improvement and any that do exist do not significantly diminish the impact and outcomes for children, young people and other stakeholders. While an evaluation of *very good* represents a high standard of performance, it is a standard that should be achievable by all. It implies that it is fully appropriate to continue to deliver services without significant adjustment. However, there is an expectation that the service will continue to take opportunities to improve and strive to raise performance to *excellent*.
- An evaluation of **good** applies to performance characterised by important strengths which, taken together, clearly outweigh any areas for improvement. An evaluation of *good* represents a standard of performance in which the strengths have a significant positive impact. However, the impact and outcome for children, young people and other stakeholders is diminished in some way by aspects in which improvement is required. It implies that the service should seek to improve further the areas of important strength, but also take action to address the areas for improvement.
- An evaluation of **adequate** applies to performance characterised by strengths which just outweigh weaknesses. An evaluation of *adequate* indicates that children, young people and other stakeholders have access to a basic level of service which may not fully meet their needs. It represents a standard where the strengths have a positive impact on the outcomes for service users. However, while the weaknesses will not be important enough to have a substantially adverse impact, they will constrain the overall outcomes for children, young people and other stakeholders. It implies that the service should take action to address areas of weakness while building on its strengths.
- An evaluation of **weak** applies to performance characterised by some strengths, but where there are important weaknesses. In general, an evaluation of *weak* may be arrived at in a number of circumstances. While there may be some strengths, the important weaknesses will, either individually or collectively, be sufficient to diminish the impact and outcomes for children, young people in substantial ways. It implies the need for structured and planned action on the part of the service.

- An evaluation of **unsatisfactory** applies to performance characterised by major weaknesses in performance requiring immediate remedial action. The impact and outcomes for children, young people and other stakeholders is at risk in significant respects. In almost all cases, staff responsible for a service evaluated as *unsatisfactory* will require support from senior managers in planning and carrying out the necessary actions to effect improvement. This may involve working alongside staff from other departments or agencies in or beyond the authority.

Using the six-point scale in evaluation

The indicators in QMILAEPS are designed to be used in conjunction with the six-point scale described above.

The following pages provide examples of the kinds of evidence you should take into account when identifying strengths and weaknesses and assessing the impact of these on children, young people, families and other stakeholders. For Key Areas 2-9, that use quality indicators (QIs) we have also provided illustrations at Level 5 and Level 2. Key Area 1 uses performance indicators (PIs) and similar measures that can provide evidence to inform evaluations against the QIs.

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Part 4

Indicators, themes and illustrations

Part 4 Indicators, themes and illustrations

Key Area 1. Key performance outcomes

No.	Performance Indicator	Measures
WHAT KEY OUTCOMES HAVE WE ACHIEVED?		
1.1	Improvements in performance	<ul style="list-style-type: none"> • Performance data and measures showing trends over time • Performance against national, local authority and educational psychology service aims, objectives and targets
1.2	Fulfilment of general statutory duties	<ul style="list-style-type: none"> • Financial performance • Compliance with legislation, and responsiveness to guidance and codes of practice

Key Area 2. Impact on service users

No.	Quality Indicator	Themes
HOW WELL DO WE MEET THE NEEDS OF OUR STAKEHOLDERS?		
2.1	Impact on children and young people	<ul style="list-style-type: none"> • Qualitative and quantitative data that demonstrates the extent to which children and young people are: <ul style="list-style-type: none"> – included and participating – attaining and achieving – progressing. • Extent to which children and young people report that they are: <ul style="list-style-type: none"> – successful learners, confident individuals, responsible citizens and effective contributors – safe, nurtured, healthy, achieving, active, respected, responsible and included.
2.2	Impact on parents, carers and families	<ul style="list-style-type: none"> • Quantitative and qualitative data that demonstrate the extent to which parents/carers and families are: <ul style="list-style-type: none"> – treated equally and fairly – satisfied with the quality of service – included and engaged in planning and decision-making. • Extent to which parents, carers and families report that they are: <ul style="list-style-type: none"> – treated equally and fairly – satisfied with the quality of service – included and engaged in planning and decision-making.

Key Area 3. Impact on staff

No.	Quality Indicator	Themes
HOW WELL DO WE MEET THE NEEDS OF OUR STAKEHOLDERS?		
3.1	Impact on staff	<ul style="list-style-type: none"> • Quantitative and qualitative data that demonstrate the extent to which staff: <ul style="list-style-type: none"> – are motivated, confident and valued – improve their practice through training and development activities – have positive experiences of the quality of central services and external/partner agencies – work effectively in teams. • Extent to which staff report that they: <ul style="list-style-type: none"> – are motivated, confident and valued – improve their practice through training and development activities – have positive experiences of the quality of central services and external/partner agencies – work effectively in teams.

Key Area 4. Impact on the community

No.	Quality Indicator	Themes
HOW WELL DO WE MEET THE NEEDS OF OUR STAKEHOLDERS?		
4.1	Impact on the local community	<ul style="list-style-type: none"> • Quantitative and qualitative data that demonstrate the extent to which support services, educational provisions and community stakeholders are: <ul style="list-style-type: none"> – supported by the service – involved in joint planning regarding service priorities – satisfied with the quality of the service – included and engaged with the service in wider developments. • Extent to which support services, educational provisions and community stakeholders report that they are: <ul style="list-style-type: none"> – supported by the service – involved in joint planning regarding service priorities – satisfied with the quality of the service – included and engaged with the service in wider developments.
4.2	Impact on the wider community	<ul style="list-style-type: none"> • Quantitative and qualitative data that demonstrate the extent to which the service: <ul style="list-style-type: none"> – encourages and supports creativity and innovation – learns from and adopts leading-edge practice – influences wider policy or practice – anticipates and responds rapidly and flexibly to change.

Key Area 5. Delivery of key processes

No.	Quality Indicator	Themes
HOW GOOD IS OUR DELIVERY OF KEY PROCESSES?		
5.1	Consultation and advice	<ul style="list-style-type: none"> • Range and appropriateness of consultation and advice services to meet the needs of all stakeholders • Staff skill, knowledge and expertise in consulting with and providing advice to stakeholders
5.2	Assessment	<ul style="list-style-type: none"> • Arrangements and range of assessment services to meet the needs of all stakeholders • Staff skill, knowledge and expertise in delivering appropriate psychological assessment
5.3	Intervention	<ul style="list-style-type: none"> • Arrangements for advising, planning, delivering and evaluating strategies to meet the needs of all stakeholders • Staff skill, knowledge and expertise in planning and delivering effective psychological intervention
5.4	Professional development and training	<ul style="list-style-type: none"> • Range and appropriateness of professional development and training to meet the needs of all stakeholders • Staff skill, knowledge and expertise in planning and delivering effective professional development and training to stakeholders
5.5	Research and strategic development	<ul style="list-style-type: none"> • Range and appropriateness of the research and strategic development programme to meet service and authority priorities • Skill, knowledge and expertise of staff in the participation and undertaking of research and strategic development activity
5.6	Inclusion, equality and fairness	<ul style="list-style-type: none"> • Promotion of inclusive practices • Evidence of equal opportunities and fairness embedded in all aspects of practice
5.7	Improving the quality of services	<ul style="list-style-type: none"> • Arrangements for quality assurance and improvement • Support and challenge • Evaluating outcomes, and feedback from stakeholders • Planning for improvement and monitoring progress • Reporting progress to stakeholders

Key Area 6. Policy development and planning

No.	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
6.1	Policy development and review	<ul style="list-style-type: none"> • Range and appropriateness of policies • Coherence with council-wide policy • Links with vision, values and aims • Managing, evaluating and updating policies
6.2	Participation of stakeholders	<ul style="list-style-type: none"> • Involvement in policy development • Communication and consultation • Active participation in the work of the service
6.3	Operational planning	<ul style="list-style-type: none"> • Developing, implementing and evaluating plans • Structure and content of plans • Use of management information • Joint planning with partner organisations and services • Planning for sustainability

Key Area 7. Management and support of staff

No.	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
7.1	Sufficiency, recruitment and retention of staff	<ul style="list-style-type: none"> • Identifying and meeting human resource needs • Recruitment, appointment and induction procedures • Care and welfare • Equality and fairness in recruitment and promotion • Recognition
7.2	Deployment and teamwork	<ul style="list-style-type: none"> • Appropriateness and clarity of remits • Deployment to achieve planned priorities • Teamworking • Communication and involvement in decision-making
7.3	Development of staff	<ul style="list-style-type: none"> • Processes for staff review and support • Training and development • Joint staff training with staff from partner agencies

Key Area 8. Partnerships and resources

No.	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
8.1	Partnership working	<ul style="list-style-type: none"> • Clarity of purposes and aims • Service level agreements, roles and remits • Working across agencies and disciplines • Staff role in partnerships
8.2	Financial management	<ul style="list-style-type: none"> • Budget management and enterprise in securing funding • Range and implementation of financial procedures and controls • Processes for collecting, analysing and evaluating financial information • Providing Best Value
8.3	Resource management	<ul style="list-style-type: none"> • Accommodation • Resources and equipment • Efficiency and effectiveness in the use of resources • Health and safety
8.4	Information systems	<ul style="list-style-type: none"> • Data collection storage and retrieval • Linkages between, and sharing of information • Process for analysing, evaluating and using information

Key Area 9. Leadership and direction

No.	Quality Indicator	Themes
HOW GOOD IS OUR LEADERSHIP?		
9.1	Vision, values and aims	<ul style="list-style-type: none"> • Appropriateness and coherence with corporate and community vision, values and aims • Sharing and sustaining the vision • Promotion of positive attitudes to social and cultural diversity
9.2	Leadership and direction	<ul style="list-style-type: none"> • Strategic planning and communication • Strategic deployment of resources • Evaluation of risk
9.3	Developing people and partnerships	<ul style="list-style-type: none"> • Developing leadership capacity • Building and sustaining relationships • Teamwork and partnerships
9.4	Leadership of change and improvement	<ul style="list-style-type: none"> • Support and challenge • Creativity, innovation and step change • Continuous improvement

WHAT IS OUR CAPACITY FOR IMPROVEMENT?

The last of the high-level questions requires a global judgment based on evidence and evaluations of all Key Areas. In answering this question services should also take into account contextual issues such as plans to restructure and retirements of senior staff. They should also consider their ability to respond quickly to change and to be creative and innovative in the pursuit of excellence.

The service should be able to make a statement with the following components:

“The service is confident/not confident that the evidence and evaluation to date indicates that:

- overall improvements have been made to key outcomes and to impacts on stakeholders;
- leadership and management are effective; and
- quality improvement arrangements are effective and that the service has capacity to continue improving.”

The levels of confidence expressed for each component may be different and may include some reservations or caveats, but should lead to an overall statement of confidence in the educational psychology service’s capacity to improve in relation to its functions.

For example, the statement could say, “The service is confident that the evidence and evaluation to date indicates that:

- improvements have been made to achieving almost all key outcomes and, overall, improvements have been made to meet the needs of children and young people but the communication and involvement with parents, carers and families requires further improvement;
- leadership and management are currently effective but key posts will become vacant in the near future; and
- quality improvement arrangements are effective in all areas except in relation to the wider community and the service has demonstrated the capacity to continue improving.”

What key outcomes have we achieved?

(KEY AREA 1: KEY PERFORMANCE OUTCOMES)

PI 1.1 Improvement in performance

Themes:

- Performance data and measures showing trends over time
- Performance against national, local authority and educational psychology service aims, objectives and targets

This indicator evaluates continuous and sustainable improvement against local and national objectives such as those contained in the authority's Children's Services Plan. Examples of performance data and measures might include measurable outcomes from the authority's strategic and operational plans.

Performance will also be measured against objectives within the service improvement plan or equivalent. It will include the contribution of the educational psychology service in meeting local targets for education and care in the Children's Services Plan and other plans. Examples could include:

- achievement of targets for children and young people;
- improvements following service reviews relating to Best Value, and
- outcomes of research and development initiatives which have had an impact on the learning and wellbeing of children and young people.

Illustration PI Level 5

Performance information clearly demonstrates high levels of success against both local objectives and, where appropriate, national objectives, for example in social justice and inclusion. Positive trends and standards of performance measured against appropriate benchmarks and comparative data indicate a high level of continuous improvement. The service makes a significant and comprehensive contribution to meeting the aims, objectives and targets of the authority. The service makes a very effective contribution to the provision relating to the statutory procedures for children and young people with additional support needs.

Illustration PI Level 2

Performance data and measures demonstrates limited improvement based on trends linked to local and, where appropriate, national objectives for example in social justice and inclusion. Trends and benchmark information indicate that performance is weak in a number of key areas. The service makes a limited contribution to meeting the aims, objectives and targets of the authority. There is little evidence of the service's contribution to provision relating to the statutory procedures for children and young people with additional support needs.

What key outcomes have we achieved?

(KEY AREA 1: KEY PERFORMANCE OUTCOMES)

PI 1.2 Fulfilment of general statutory duties

Themes:

- Financial performance
- Compliance with legislation, and responsiveness to guidance and codes of practice

Evaluation of financial performance will be based on financial data and measures derived from local Best Value reviews, and from the authority budget construction and management systems.

Compliance with statutory requirements relates to legislation and codes of practice such as the *Education (Additional Support for Learning) (Scotland) Act 2004* and the *Standards in Scotland's Schools etc Act 2000*.

Illustration PI Level 5

The service has in place robust financial procedures for monitoring and regulating their budget which takes effective account of service and authority priorities.

The service effectively complies with all appropriate guidance and legislation. Statutory requirements are well embedded in individual practice and service documentation. The service builds on best practice and ensures that the rights and needs of stakeholders are well met.

Illustration PI Level 2

The service has in place a number of financial procedures to monitor expenditure. However, expenditure is not always appropriately linked to meeting service and authority priorities. Service staff comply with appropriate guidance and legislation. Practice guidance and service documentation does not sufficiently take account of statutory requirements. The service does not take appropriate account of best practice and the rights and needs of stakeholders are not always well met.

How well do we meet the needs of our stakeholders?

(KEY AREA 2: IMPACT ON STAKEHOLDERS)

QI 2.1 Impact on children and young people

Themes:

- Quantitative and qualitative data that demonstrate the extent to which children and young people are:
 - included and participating
 - achieving and attaining
 - progressing.
- The extent to which children and young people report that the support they had received from the service contributed positively to their educational experiences and enabled them to become:
 - successful learners, confident individuals, responsible citizens and effective contributors
 - safe, nurtured, healthy, achieving, active, respected and responsible and included.

This indicator relates to the impact of the service on children and young people, focusing in particular on their current and recent experiences. Some examples of appropriate sources of evidence are given below, however they are not considered to be comprehensive or prescriptive.

The first theme draws on quantitative and qualitative data and evidence gathered from direct observation, documentation and discussions with stakeholders. Examples may include:

- levels of exclusion from school;
- the extent to which the needs of children and young people are met. These children and young people include those from the lowest-performing 20%, those who are looked after⁵ and those children and young people from minority ethnic and gypsy/traveller families. Performance will be indicated by the achievement of individual targets for learning and the acquisition of social skills particularly at the time of transition;
- achievement of customer service awards such as Charter Mark;
- correspondence and contact with the service, including complaints and compliments and the way these have been managed;
- access to the service, including innovative approaches to encouraging involvement; and
- evidence from HMIE inspection reports relating to specific aspects such as the quality of support for learning and achievement.

⁵ The term 'looked after' in this report includes all children looked after or looked after and accommodated by the council

The second theme deals with the views as reported in responses to questionnaires, surveys, focus groups and in unsolicited comments. These responses provide evidence of the extent of stakeholder satisfaction with the service and may cover aspects such as:

- attitudes to involvement with the service;
- engagement in informal and formal contact with the service which enables children and young people to achieve their full potential, keep themselves safe and healthy and keep others safe;
- the extent to which they feel valued and supported by service staff; and
- opportunities to express their views in terms of shaping services, setting personal objectives and influencing planning for their future.

Evaluation should take both themes into account to produce a considered view of the overall impact on children and young people.

Illustration QI Level 5

Children and young people have very good access to a wide range of educational psychology services. The information and literature produced for children and young people about the service is clear, informative and accessible to all. They are included and actively participate in the development of services to meet their needs. Almost all children and young people make very good progress from their prior levels of attainment. This applies particularly to children and young people in the lowest performing 20%, those who are looked after and children and young people from minority ethnic and gypsy/traveller families. Performance will be indicated by the achievement of individual targets for learning and the acquisition of social skills set against national educational priorities. Children and young people, particularly those with additional support needs, are appropriately supported by the service at times of transition.

Children and young people express high levels of satisfaction with the service. They are positive about the help provided through formal and informal contact with the service which helps them to achieve their full potential and to help keep themselves safe and healthy. Children and young people consistently feel that they are valued and have appropriate opportunities to express their views, and that these views influence planning for their future. The service is appropriately responsive to complaints and consistently achieves a satisfactory resolution.

Illustration QI Level 2

Some groups of children and young people are unable to access a comprehensive psychology service. Service information and literature is outdated, and there is no effective distribution process to ensure that all children and young people have access to the materials. They are not appropriately included in the development of services to meet their needs. Overall, children and young people do not make sufficient progress from prior levels of their attainment. Particular groups of children and young people such as those in the lowest-performing 20%, those who are looked after and children and young people from ethnic minority and gypsy/traveller families do not achieve the attainment targets set against national education priorities. A significant number of children and young people, particularly those with additional support needs, experience difficulties when moving on to the next stage in their education, such as from pre-school to primary or from school to further education, higher education or employment.

In some areas, children and young people express low levels of satisfaction with the service. They are not always positive about the support provided to help them achieve their full potential in some important areas. Children and young people generally feel valued by service staff, but do not feel that sufficient account is taken of their views on decisions affecting their future. The service is responsive to complaints but is inconsistent in its attempts to achieve a satisfactory resolution.

How well do we meet the needs of our stakeholders?

(KEY AREA 2: IMPACT ON STAKEHOLDERS)

QI 2.2 Impact on parents/carers and families

Themes:

- Quantitative and qualitative data that demonstrate the extent to which parents/carers and families are:
 - treated equally and fairly
 - satisfied with the quality of service
 - included and engaged in planning and decision-making.
- Extent to which parents/carers and families report that they are:
 - treated equally and fairly
 - satisfied with the quality of the service
 - included and engaged in planning and decision-making.

This indicator relates to the impact of the service on parents and carers and seeks to obtain their views of the quality of service received by their children, with a particular focus on their current and recent experiences. Some examples of appropriate sources of evidence are given below however they are not considered to be comprehensive or prescriptive.

The first theme draws on quantitative and qualitative data and evidence from direct observation, documentation and discussions with other stakeholders. Examples may include:

- evidence of involvement in planning in relation to their children;
- evidence of involvement in decision-making in relation to their children;
- attendance at family-group conferences and joint assessment team meetings;
- the extent to which the needs of parents, carers and families are met;
- correspondence and contact with the service, including enquiries, complaints and compliments and the way these are managed;
- access to services, including innovative approaches to encouraging involvement; and
- evidence from HMIE inspection reports which relate to parents and carers.

The second theme deals with the views of parents and carers as reported in responses to questionnaires, surveys, focus groups and in unsolicited comments. These responses provide evidence of the extent of their satisfaction with the service and may cover aspects such as:

- access to and contact with service staff;
- involvement in planning and decision-making on behalf of their children in both informal and formal contexts;
- the quality and range of services provided;
- the extent to which they feel valued and supported, and are treated fairly, equally and with respect; and
- opportunities to express their views, shape services, and influence outcomes for their children.

Evaluation should take into account both themes and result in a considered view of the overall impact on children and young people.

Illustration QI Level 5

Almost all parents and carers are fully satisfied with the quality and range of services provided. They are positive about their inclusion and involvement in planning for their children. They are respected, treated equally and fairly, and involved in decision-making regarding their children. The service information and literature produced for parents and carers is clear, informative and accessible to all. Parents and carers of vulnerable children and of those with additional support needs are very well supported by the service.

Parents and carers actively participate in the planning and reviewing of their children's education through attendance at appropriate meetings and forums. Parents and carers engage confidently with the service in both informal and formal surroundings through, for example, in-school meetings, parent workshops and support groups. They respond positively to planned opportunities for multi-agency support such as attendance at family group conferences and joint assessment team meetings. Parents and carers are kept informed with up-to-date information about their children. The service is responsive to complaints and consistently achieves a satisfactory resolution.

Illustration QI Level 2

There are important weaknesses in the level of satisfaction with the quality and range of services provided. Parents and carers are actively involved in some aspects of planning in relation to their children. Parents and carers are respected, treated equally and fairly, but are not sufficiently involved in the decision-making regarding their children. The service information and literature is outdated, and there is no effective distribution process to ensure that all parents and carers have access to the materials. Parents and carers of vulnerable children and of those with additional support needs were not well enough supported by the service.

The participation of parents and carers in the planning and reviewing of their children's education through attendance at appropriate meetings and forums is low. They do not engage consistently in informal and formal surroundings through, for example, in-school meetings, parental workshops and support groups. Parents and carers are not kept well enough informed with up-to-date information on their children. The service is responsive to complaints but is inconsistent in achieving a satisfactory resolution.

How well do we meet the needs of our stakeholders?

(KEY AREA 3: IMPACT ON STAFF)

QI 3.1 Impact on staff

Themes:

- Quantitative and qualitative data that demonstrate the extent to which staff:
 - are motivated, confident and valued
 - improve their practice through training and development activities
 - have positive experiences of the quality of central services and partner agencies
 - work effectively in teams
- Extent to which staff report that they:
 - are motivated, confident and valued
 - improve their practice through training and development activities
 - have positive experiences of the quality of central services and partner agencies
 - work effectively in teams.

This indicator relates to the impact of the service on staff, as well as their views of the quality of educational psychology within the authority. Some examples of appropriate sources of evidence are given below however they are not considered to be comprehensive or prescriptive.

The first theme draws on quantitative and qualitative data and evidence from direct observation, documentation and discussions with other stakeholders. Examples may include:

- rates of attendance at meetings and forums;
- rates of participation in career review;
- rates of participation in training and development and qualifications gained;
- rates of response to consultation;
- evidence of involvement and empowerment;
- the extent to which the individual support needs of staff are met;
- achievement of awards such as SHAW and IIP;
- access to services, including innovative approaches to encouraging involvement;
- levels of absence, turnover and recruitment;
- recognition schemes; and
- benchmarking data.

The second theme deals with the views of staff as reported in responses to questionnaires, surveys, focus groups and in unsolicited comments. These responses provide evidence of the extent of their satisfaction and may cover aspects such as:

- the quality and range of services provided by the authority
- career review
- career development
- training and development, including leadership training, shadowing and secondments
- peer and line management relationships, including team working
- the extent to which staff feel valued and supported, and are treated fairly, equally and with respect
- conditions of work, facilities and services
- communication and opportunities to express their views and to shape and improve education services.

Evaluation should take into account both themes to produce a considered view of the overall impact on staff.

Illustration QI Level 5

Staff are highly motivated, meaningfully involved in the development of the service and enjoy a high level of professional satisfaction. Staff are well prepared for future leadership responsibilities through their involvement in secondments, projects and programmes. They have good opportunities for career development and access to a clearly understood continuing professional development (CPD) programme. They consider that the opportunities for development support their performance effectively and contribute to developing their professional competence. Staff report positively about the quality of support provided by central services and external agencies. Staff are confident in their ability to carry out their duties and engage in effective teamwork at all levels. They are deployed appropriately and feel engaged and valued within the authority.

Staff have a good understanding of the vision for the service and respect and share its aims and values. They are involved in an appropriate range of service, authority and agency working groups and are regularly consulted by management which engenders a sense of corporate ownership. Staff retention is high with low absence levels, they are willing to work flexibly to meet agreed targets and feel enabled to deliver services of high quality. The professional interaction of staff with children, young people and families is very good and appropriate to needs. They are involved effectively in partnership working and decision-making through the application of Best Value principles.

Illustration QI Level 2

There are important weaknesses in levels of staff satisfaction with the service. Staff are motivated but are not always meaningfully engaged in service development. Although they feel that there are good opportunities for CPD provision for leadership development is insufficient. Although staff have a positive view of the quality of support provided by central services and external agencies overall there are concerns about its consistency and timing. Staff work well within their service teams but do not identify with the wider service team. They do not feel that authority and agency services are making a consistent contribution delivering services of high quality to children, young people and their families. Overall staff deployment does not reflect service and authority needs.

Staff have only a general awareness of the vision, values and aims of the service. They are aware of, and are involved in, supporting the development and implementation of only a narrow range of projects. Although staff are consulted by service managers, such consultations are considered to be irregular and ad hoc. As a result there is a lack of corporate ownership. Staff are willing to work flexibly but such arrangements are not consistently focused at meeting agreed targets. Although in the main staff try hard to provide services of high quality they are not always supported or challenged by service managers to improve their performance. Staff are not sufficiently involved in partnership working and joint decision-making.

How well do we meet the needs of our stakeholders?

(KEY AREA 4: IMPACT ON THE LOCAL COMMUNITY)

QI 4.1 Impact on the local community

Themes:

- Quantitative and qualitative data that demonstrate the extent to which support services, educational provisions and the local community are:
 - involved in joint planning regarding service priorities
 - satisfied with the quality of the service provided
 - included and engaged with the service in wider developments.
- Extent to which support services, educational provisions and the local community report that they are:
 - supported by the service
 - satisfied with the quality of service provided
 - included and engaged with the service in wider developments.

This indicator relates to the impact of the educational psychology service on support services, educational provision and the local community. It also relates to the views of staff regarding the quality of service received by children and young people, focusing in particular on their recent and current experiences. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

The first theme draws on quantitative and qualitative data, and evidence from direct observation, documentation and discussions with other stakeholders. Examples may include:

- involvement in joint planning and quality assurance activities in relation to the priorities of the service;
- involvement in joint decision-making in relation to children and young people;
- attendance at conferences and joint assessment team meetings;
- correspondence and contact with the service, including enquiries, complaints and compliments and the way these are managed;
- access to a wide and comprehensive range of services, which is regularly monitored and reviewed; and
- evidence from HMIE inspection reports which relate to educational provision, child protection, and community learning and development.

The second theme deals with the views of representatives from the local community, heads of services and educational provision and their staff as reported in responses to questionnaires, surveys, focus groups and in unsolicited comments. These responses provide evidence of the extent of their satisfaction with the service and may cover aspects such as:

- the quality and range of services provided;
- examples of partnership working, planning and joint decision-making on behalf of children and young people in both informal and formal contexts;
- the extent to which service and provision staff feel valued and supported, and are treated fairly, equally and with respect; and
- formal opportunities to express their views, shape services, and influence outcomes for children and young people.

Evaluation should take into account both themes to produce a considered view of the overall impact on children and young people.

Illustration QI Level 5

Almost all community representatives, support service and educational provisions staff are fully satisfied with the quality of service provided. Heads of community services, educational provisions and support services and their staff have very good access to a fully comprehensive range of services which effectively meets the needs of children and young people. The service information and literature produced for community representatives, support service and educational provision staff is clear, informative and accessible to all. There is clear guidance in place to guide joint working with community, support service and educational provision staff. They are very positive about the processes and procedures in place to plan, monitor and review service effectiveness. Community, support service and provision staff are fully included and involved in planning for children and young people. They are respected and involved in decision making regarding children and young people in the provision. Almost all service communication and written information is up to date, clear, and informative.

Community representatives, support service and provision staff engage effectively with the service in informal and formal surroundings through, for example, case reviews and joint training events. Staff and community representatives actively participate in planning and reviewing children's and young people's education in partnership with educational psychology service staff. They respond positively to planned opportunities for multi-agency working such as attendance at family-group conferences and joint assessment team meetings. Community support and provision staff are kept well informed with up-to-date information in relation to developments regarding children and young people. Community representatives, support, and provision staff are routinely involved in the evaluation of the service through internal focus groups, and the completion of questionnaires. The service is responsive to complaints and consistently achieves a satisfactory resolution.

Illustration QI Level 2

There are important weaknesses in the level of satisfaction with the quality of services provided. Heads of community services, educational provisions and support services, and their staff have access to only a narrow range of services which meet the needs of some children and young people. The service information and literature is outdated, and there is no effective distribution process to ensure that community representatives and support and provision staff have access to the materials. There are only limited procedures and processes in place to plan, monitor and review service effectiveness. Heads of community services, educational provisions and support services and their staff are not systematically involved in joint planning and decision-making with the service for children and young people. Although they are treated equally and fairly, they are not sufficiently involved in the decision-making regarding children and young people. Service communication and information does not effectively support provision staff in their work with children and young people.

The participation of community, support service and provision staff with the service in the planning and reviewing of children's and young people's education is limited. They are not routinely involved in planned multi-agency working with the service, for example, parent workshops and support groups. Community, support and provision staff are kept well informed with up-to-date information in relation to only some developments regarding children and young people in their service or placed in their provision. This is often undertaken on an informal basis only. Community representatives, support, and provision staff are not systematically involved in evaluating the service. The service is responsive to complaints but is inconsistent in its attempts at achieving a satisfactory resolution.

How well do we meet the needs of our stakeholders?

(KEY AREA 4: IMPACT ON THE COMMUNITY)

QI 4.2 Impact on the wider community

Themes:

- Evaluations of quantitative and qualitative data that demonstrate the extent to which the service:
 - encourages and supports creativity and innovation
 - learns from and adopts leading-edge practice
 - influences wider policy or practice
 - anticipates and responds rapidly and flexibly to change.

This indicator focuses on the impact the service has on the wider community. It deals with the culture of the service in encouraging and supporting creativity and innovation, being proactive and open to new ideas. It is about being a service that deals positively with change. It also relates to the influence and impact of the service on wider developments.

The theme draws on quantitative and qualitative data from direct observation, documentation and discussions with stakeholders. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

- A range of innovative strategies and programmes that have an impact beyond the services delivered by the service.
- Programmes where their origins lie in national or international best practice.
- Staff who have made major influential contributions to national developments.
- Anticipation of demographic or social changes resulting in the re-allocation of resources and services.

Illustration QI Level 5

The service has initiated a range of innovative programmes, many in partnership with other partner agencies and organisations. These are leading to major improvements in services for stakeholders. Staff are actively encouraged to be innovative with any associated risks being managed well. There are many examples of leading-edge practice provided by other educational psychology services being adopted and adapted within the service. Service staff at all levels serve on a range of national advisory groups and committees. Some of these are having a major impact on national policy and practice. The service places great emphasis on forecasting change, assessing probable impacts and responding swiftly to provide appropriate services to meet changing needs. This ability to respond rapidly and creatively is keeping the service close to the leading-edge of national and international developments, and thereby ensures that children, young people, families and other stakeholders receive services of a consistently high standard.

Illustration QI Level 2

The service broadly meets the needs of a number of stakeholder groups but is seldom innovative and rarely adopts and adapts leading-edge practice from other services or from national and international research. Creativity is not encouraged and change tends to be reactive. There is little service representation on national committees or advisory groups and, as a result, the service makes little impact beyond its own locality and responds slowly to change. Service staff make no attempt to predict major changes nor do they respond proactively to the changing needs or aspirations of children, young people, families and other key stakeholders.

How good is our delivery of key processes?

(KEY AREA 5: DELIVERY OF KEY PROCESSES)

QI 5.1 Consultation and advice

Themes:

- Range and appropriateness of consultation and advisory services to meet the needs of all stakeholders
- Staff skill, knowledge and expertise in consulting with and providing advice to stakeholders

This indicator draws on quantitative and qualitative data from direct observations, discussions and documentation including individual case files. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

- Observing practice directly in the field.
- Attendance at case reviews, and working groups.
- Discussions with service staff and stakeholders.
- Review of individual case files and other service documentation.
- The use of case studies to determine service impact.

The second theme looks at the skills, knowledge base and expertise of service staff in consulting with and providing advice to stakeholders across the authority. It will consider the range and frequency of guidance and training for staff in delivering highly effective consultation and advisory services.

Illustration QI Level 5

The service is successful in sustaining the quality of its consultation and advisory services at a high level and can demonstrate that it has a clear strategy which is based on its vision, values and aims, and planned approaches for improvement. The structure for the delivery of consultation and advisory services within individual teams and at practitioner level is very well planned and includes aspects of innovative practice. The service provides effective consultation and advisory services to children and young people, families, and other key stakeholders and regularly seeks feedback from service users in terms of the impact of the service and outcome measures.

The service provides regular and appropriate training with clear guidance on all aspects of its work regarding the provision of consultation and advisory services. The training and guidance is reviewed and revised using a systematic analysis of stakeholder views, best practice, service impact and outcome measures. The service delivers highly effective consultation and advisory services. The service follows guidance provided by the British Psychological Society.

Illustration QI Level 2

The quality of the provision of consultation and advisory services is inconsistent across the service. Although there is evidence of good-quality and innovative practice within individual teams and practitioners there is no overall service strategy for the delivery of these services. Individual improvements and innovations may be effective, but they are not always delivered as part of a planned approach across the service. The service provides appropriate consultation and advisory services to a limited number of stakeholders but does not systematically seek feedback from service users in terms of impact and outcome measures. Examples of good practice are evident in only discrete areas of the service with few examples of the regular use of monitoring procedures to measure the effectiveness of its consultation and advisory services at stakeholder level.

Although there are a few examples of effective training and guidance on appropriate approaches to providing consultation and advisory services these are not developed as part of a coherent and comprehensive service approach. Some of the training and guidance is out of date or has been developed without reference to stakeholder views, best practice and outcome and impact measures. While there are some effective arrangements for the flexible delivery of consultation and advisory services they do not form part of a coherent and well-planned approach to service delivery. The service follows guidance provided by the British Psychological Society.

How good is our delivery of key processes?

(KEY AREA 5: DELIVERY OF KEY PROCESSES)

QI 5.2 Assessment

Themes:

- Arrangements and range of assessment services to meet the needs of all stakeholders
- Staff skill, knowledge and expertise in delivering appropriate psychological assessment

This indicator draws on quantitative and qualitative data from direct observations, discussions and documentation including individual case files. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

- Observing practice directly in the field.
- Discussions with service staff and stakeholders including partner agencies.
- Attendance at case reviews, multidisciplinary meetings, working groups and training events.
- Review of individual case files and other service documentation.
- The use of case studies to determine service impact.

The second theme looks at the skills, knowledge base and expertise of staff undertaking assessment across the authority. It will consider the range and frequency of guidance and training for staff in delivering a highly effective psychological assessment.

Illustration QI Level 5

The service has in place a comprehensive range of highly appropriate assessment approaches and tools. The service can demonstrate that it has a clear assessment strategy, based on its vision, values and aims and planned approaches for development. The delivery of assessment in individual teams and at practitioner level is very well planned and includes aspects of innovative practice. Assessment, across the service is designed to impact at the least intrusive level of intervention. Service staff take full account of the cultural and situational context of the child and young person in their choice of assessment tools or approaches. The service works effectively in partnership with others to provide an integrated assessment of the needs of children, young people, and families. The service makes a significant contribution to the development of the authority's policies and practice on assessment.

The service provides regular and appropriate training and clear guidance on all aspects of its work regarding assessment. The training and guidance is reviewed and revised using a systematic analysis of stakeholder views, best practice, and service impact and outcome measures. The service is actively involved in joint training and development with stakeholders and partner agencies to improve the quality of integrated assessment within the authority. The service follows guidance provided by the British Psychological Society.

Illustration QI Level 2

The service has in place only a limited range of assessment approaches and tools. While some good quality and innovative practice exists, it is developed by individual teams and practitioners rather than by means of a strategic approach. The delivery of assessment in individual teams and at practitioner level may be effective, but it is not always delivered as part of a coordinated approach across the service. Assessment, across the service is designed to impact at the least intrusive level of intervention. Service practitioners do not always adjust their approaches in response to the situational context of the child or young person in their choice of assessment tools. Individual practitioners work in isolation and do not engage in effective integrated assessment to meet the needs of children, young people, and families. The service is not effectively involved in the development of authority policies and practice on assessment.

While there are a few examples of effective training and guidance on appropriate approaches to assessment, these are not developed as part of a coherent and comprehensive approach. Some of the training and guidance is out of date or developed without reference to stakeholder views, best practice, service impact and measurable outcomes. There are only a few examples of joint working or training with stakeholders and partner agencies. While there are some effective arrangements for flexible delivery of the assessment they do not form part of a coherent and well-planned approach to service delivery. The service follows guidance provided by the British Psychological Society.

How good is our delivery of key processes?

(KEY AREA 5: DELIVERY OF KEY PROCESSES)

QI 5.3 Intervention

Themes:

- Arrangements for advising, planning, delivering and evaluating intervention strategies to meet the needs of all stakeholders
- Staff skill, knowledge and expertise in planning and delivering effective psychological interventions

This indicator draws on quantitative and qualitative data from direct observations, discussions and documentation including individual case files. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

- Observing practice directly in the field.
- Discussions with service staff and stakeholders including partner agencies.
- Attendance at case reviews, multidisciplinary meetings, working groups and training events.
- Review of individual case files and service documentation.
- The use of case studies to determine service impact.

The second theme looks at the skills, knowledge base and expertise of staff advising, planning and delivering interventions across the authority. It will consider the range and frequency of guidance and training for staff in delivering and supporting the delivery of highly effective psychological interventions.

Illustration QI Level 5

The service supports and delivers a wide range of evidenced-based interventions which effectively meet the needs of stakeholders. The service can demonstrate that it has a clear intervention strategy, based on its vision and values and planned approaches for development. The support, planning, delivery and evaluation of interventions is very good and includes aspects of innovative practice. All psychological interventions are systematically planned, implemented and evaluated in partnership with key stakeholders importantly children, young people and families. Service practitioners ensure that interventions are fully coordinated with the work of other stakeholders and partner agencies, and delivered at the least intrusive level for the child, young person and the family. The service makes a significant contribution to the development and evaluation of intervention strategies delivered to children, young people and families through other professionals and partner agencies across the authority.

The service provides regular and appropriate training and clear guidance on all aspects of its work regarding advising, planning, delivering and evaluating psychological and other interventions. The training and guidance is reviewed and revised using a systematic analysis of stakeholder views, best practice, and service impact and outcome measures. The service is actively involved in joint training and development with stakeholders and partner agencies to improve the effectiveness of multidisciplinary interventions within the authority. The service follows guidance provided by the British Psychological Society.

Illustration QI Level 2

The service supports and delivers a limited range of evidenced-based interventions which do not effectively meet the needs of all stakeholders. There is no strategic approach to psychological intervention; however, there is evidence of some good and innovative practice at the level of individual practitioner. The support, planning, delivery and evaluation of interventions is at an early stage and not systematically developed across the service. There is evidence of some psychological intervention being planned, implemented and evaluated in partnership with key stakeholders, however, this is not consistent across the service. While interventions are delivered at the least intrusive level for the child, young person and the family; they are not fully coordinated with the work of other stakeholders and partner agencies. The service has contributed to the development of only a few intervention strategies delivered to children, young people and families through other professionals and partner agencies across the authority.

The service provides few opportunities for training regarding aspects of the support and development of interventions; however, these are not developed as part of a coherent and comprehensive approach. Some of the training and guidance is out of date or developed without reference to stakeholders' views, best practice, service impact and outcome measures. There are few examples of collaborative working or training with stakeholders and partner agencies. The service follows guidance provided by the British Psychological Society.

How good is our delivery of key processes?

(KEY AREA 5: DELIVERY OF KEY PROCESSES)

QI 5.4 Professional development and training

Themes:

- Range and appropriateness of professional development and training to meet the needs of all stakeholders
- Staff skill, knowledge and expertise in planning and delivering effective professional development and training to stakeholders

This indicator draws on quantitative and qualitative data from direct observations, discussions and documentation including individual case files. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

- Observing, practice directly in the field.
- Discussions with service staff and stakeholders including partner agencies.
- Attendance at case reviews, multidisciplinary meetings, working groups and training events.
- Review of individual case files and other service documentation.
- The use of case studies to determine service impact.

The second theme looks at the skills, knowledge base and expertise of staff advising, planning and delivering professional development and training across the service and the authority. It will consider the range and frequency of guidance and training for staff in delivering and supporting the delivery of highly effective professional development and training.

Illustration QI Level 5

The service has an extensive portfolio of effective professional training and development activities which very effectively meets the needs of stakeholders. The service can demonstrate that it has a clear professional development and training strategy, based on service and authority priorities. The support, planning, delivery and evaluation of professional training and development activities are very good and include aspects of innovative practice. Service practitioners ensure that professional development and training activities complement the work of other stakeholders and partner agencies, and are delivered in a planned and coordinated manner. The service makes a significant contribution to the professional development and training undertaken across the authority.

The service provides regular and appropriate support, and clear guidance on all aspects of its work regarding the planning, delivering and evaluating of professional development and training activities. The training and guidance is reviewed and revised using a systematic analysis of stakeholder views, best practice, and service impact and outcome measures. The service is actively involved in the joint delivery of professional development and training activities with stakeholders and partner agencies to improve outcomes for children, young people and families. The service follows guidance provided by the British Psychological Society.

Illustration QI Level 2

The service delivers a limited portfolio of professional development and training which does not effectively meet the needs of all its stakeholders. There is no strategic approach to professional development and training within the service, and links with authority wide priorities are weak. The support, planning, delivery and evaluation of professional development and training are at an early stage and not developed systematically across the service. Professional training and development activities are not fully coordinated with the work of other stakeholders and partner agencies resulting in duplication or stakeholder needs not being met. The service has contributed to some aspects of the professional development and training across the authority.

The service provides informal support and guidance to service staff regarding their professional development and training. Some of the guidance provided by the service on professional development and training is out of date or has been developed without reference to stakeholder views, best practice, service impact and outcome measures. There are few examples of collaborative working or development with stakeholders and partner agencies. The service follows guidance provided by the British Psychological Society.

How good is our delivery of key processes?

(KEY AREA 5: DELIVERY OF KEY PROCESSES)

QI 5.5 Research and Strategic development

Themes:

- Range and appropriateness of the research and strategic development programme to meet service and authority priorities
- Skill, knowledge and expertise of staff in the participation and undertaking of research and strategic development activity

This indicator draws on quantitative and qualitative data from direct observations, discussions and documentation including individual case files. Some examples of appropriate sources of evidence are given below. They are neither comprehensive or prescriptive.

- Observing practice directly in the field.
- Discussions with service staff and stakeholders including partner agencies.
- Attendance at case reviews, multidisciplinary meetings, working groups and training events.
- Review of individual case files and service documentation.
- The use of case studies to determine service impact.

The second theme looks at the skills, knowledge base and expertise of staff delivering the research and strategic development programme across the service and the authority. It will consider the range and frequency of support, guidance and training for staff in delivering a high quality research and strategic development programme.

Illustration QI Level 5

The service has an appropriate and well-planned programme of research and strategic development which effectively takes account of the needs of stakeholders. The service can demonstrate that it has a clear research and strategic development strategy which is based on both service and authority priorities. The support, planning, delivery and evaluation of the research and strategic development programme is very good and include aspects of innovative practice. The service regularly participates in the national professional development programme for educational psychologists. The service publishes its research findings in professional journals, and presents regularly at conferences. Service staff ensure that the research and strategic development programme complements the work of other stakeholders and partner agencies, and is delivered in a planned and coordinated manner. The service's research and strategic development programme makes a significant contribution to the policy development and objectives of the authority.

The service provides regular and appropriate support and clear guidance on all aspects of its work regarding research methodology and strategic development activities. It reviews and revises this support and guidance through a systematic analysis of stakeholder views, best practice, and service impact and outcome measures. The service reviews its research programme with stakeholders and partner agencies on a regular basis to improve the outcomes for children, young people and families. The service follows guidance provided by the British Psychological Society.

Illustration QI Level 2

The service has only a limited programme of research and strategic development to meet the needs of a number of stakeholders. There is no strategic approach to research and strategic development within the service, and links with authority wide priorities are weak. The support, planning, delivery and evaluation of the research and strategic development programme is not effectively developed at service level, although there are examples of innovative practice at practitioner level. The service does not regularly participate in the national professional development programme for educational psychologists, and only rarely contributes to professional journals and conferences. Service staff develop the research and strategic development programme in isolation from the work of other stakeholders and partner agencies. The service research and strategic development programme does not effectively contribute to the policy development and objectives of the authority.

The service provides only informal support and guidance to staff regarding research methodology and the research and strategic development programme. Some of the guidance is out of date or has been developed without reference to stakeholder views, best practice, service impact and outcome measures. There are few examples of collaborative working or development with stakeholders and partner agencies. The service follows guidance provided by the British Psychological Society.

How good is our delivery of key processes?

KEY AREA 5: DELIVERY OF EDUCATION PROCESSES

QI 5.6 Inclusion, equality and fairness

Themes:

- Promotion of inclusive practices
- Evidence of equal opportunities and fairness embedded in all aspects of practice

Illustration QI Level 5

A strong ethos and practice of inclusion permeates the work of the service at all levels. A range of clear and appropriate written guidance on equality and fairness is readily available to all staff. The service provides effective services for vulnerable stakeholder groups, including arrangements for early intervention and targeted additional support where required. Service managers use outcome and impact information to identify under-represented and under-performing groups, and to work with colleagues across the authority and partner agencies to take appropriate action. Service managers also consult regularly with members of, and those that represent, minority groups. Staff demonstrate good practice consistently in promoting equality and addressing areas of concern.

Illustration QI Level 2

Staff are aware of the existence of policy statements in these areas, but are less clear about how to translate them into practice. The service does not place a sufficiently high priority on these areas and the key principles and values underpinning them have been subjected to limited consultation with only a narrow range of key stakeholders. Stakeholders are generally positive about their relationship with service staff but some groups feel that their views are not fully recognised. Systems for tracking potentially vulnerable stakeholder groups are not fully effective in ensuring that their needs are being addressed.

How good is our delivery of education processes?

KEY AREA 5: DELIVERY OF EDUCATION PROCESSES

QI 5.7 Improving the quality of services

Themes:

- Arrangements for quality assurance and improvement
- Support and challenge
- Evaluating outcomes and feedback from stakeholders
- Planning for improvement and monitoring progress
- Reporting progress to stakeholders

QI Illustration Level 5

The service has well established and rigorous processes and procedures for self-evaluation, quality improvement, development planning, standards and quality reporting, and professional review and development. The roles and responsibilities of service managers in ensuring quality improvement and monitoring and evaluating the work of the service are clearly understood.

There is a well-developed culture of support and challenge across all aspects of the service. Robust discussions on performance lead to the identification of strengths and areas of underperformance. Identified strengths are celebrated and built upon by the service. Equally, the identification of areas of underperformance result in the development of detailed action plans that impact positively on the quality of provision. Service managers provide strong support through direct input and the targeting of resources.

Effective procedures are in place for carrying out rigorous audits to inform the planning, design and delivery of the service. These procedures are based on a range of appropriate measurement and monitoring techniques. The service has developed systematic approaches to gathering and analysing stakeholders' views and the results are used to identify issues for further investigation and action. Service managers are confident and accurate in the use and interpretation of a wide range of performance data.

Quality indicators and accreditation schemes are used as a sound basis for self-evaluation and planning for improvement. The information from performance data and stakeholder views are used to set priorities and targets for improvement. These targets are included in service and improvement plans and result in effective action. The service rigorously evaluates the effectiveness of its improvement strategies in relation to their impact on children, young people and families.

QI Illustration Level 5 – continued

There is an over-arching strategy to record and report publicly on performance standards. The information is provided to key stakeholders in a form that is accessible, evaluative and well presented. The timing of reports informs decision-making and leads to improvements in planning and provision. Reports are appropriately linked to agreed priorities and strengths, and areas for further improvement are clearly identified. There are many examples of significant improvements to outcomes for children, young people and families resulting from the service's arrangements for self-evaluation and quality improvement.

QI Illustration Level 2

The service's practice on self-evaluation and quality improvement is insufficiently developed. As a result, the roles and responsibilities of service managers in monitoring and evaluating the work of the service are unclear. Development planning, standards and quality reporting and professional review and development lack rigour and do not impact sufficiently on service performance.

The service has a range of systems for monitoring performance and seeking views from stakeholders but the information gathered does not sufficiently inform future planning. Staff do not make sufficient use of some sources of evidence, such as stakeholder feedback, when planning for improvement. Service managers have not fully involved stakeholders in contributing to a systematic approach to evaluating the quality of service.

A few service managers have a good understanding of the information available and how it contributes to planning however the majority have little awareness. The service has not clearly identified what should be measured or set well-defined targets for improvement. Its effectiveness in identifying and planning for future improvements is limited. In evaluating its effectiveness the service does not focus sufficiently on the outcomes for children, young people and families.

Procedures for recording and reporting on performance standards are inconsistent and lack rigour. Reports are not fully linked to agreed improvement priorities. Information provided is insufficiently evaluative and not always presented in a suitable form for the range of stakeholders. Only a few improvements have been made to outcomes for children, young people and families as a result of quality assurance activities.

How good is our management?

(KEY AREA 6: POLICY DEVELOPMENT AND PLANNING)

QI 6.1 Policy development and review

Themes:

- Range and appropriateness of policies
- Coherence with council-wide policy
- Links to vision, values and aims
- Managing, evaluating and updating policies

A successful, modern organisation will have a systematic and well-documented approach to management. This will be supported by a range of effective policies and advice that inform and impact on practice throughout the service, which in turn are linked to the wider policies of the authority. These policies provide clear strategic direction and help to ensure consistency in practice across the service and improved outcomes for children, young people and families.

Illustration QI Level 5

The service's work is directed by a straightforward policy framework which covers all its main areas of activity and responsibility. This policy framework sets clear expectations for effective service delivery. Policies reflect national and local priorities and related improvement objectives. Policy advice is wide-ranging and very well balanced in its coverage of strategic and operational matters. Individual policies are supported by specific information about roles, responsibilities, procedures, expectations of quality, outcomes and evaluation processes. The range of policies provides clear guidance to staff and helps to ensure consistency in practice across the service and achieve continuous improvement.

The service's policy framework is coherent with the community, corporate and integrated children's services' planning aspirations and outcomes. The links among cross-cutting policy initiatives, and the service's contribution to these, are indicated clearly and are reflected in policy and practice at all levels.

Key service objectives and key policies are based on the service's vision, values and aims. These provide a very sound basis for policy making and service delivery and relate well to national priorities. They have a significant impact on the development of integrated services for children across the authority. The vision, values and aims serve as useful criteria against which structures, policies and practices are regularly reviewed and evaluated.

There is a clear procedure in place for the coherent development and review of individual policies. Policies are regularly reviewed and updated taking into account the views of stakeholders.

Illustration QI Level 2

The service has policies in most but not all of its main areas of activity and responsibility. Areas of the service plan have been developed independently from these policies and the links are not always explicit. Individual policies do not give a clear enough indication of their practical application and are uneven in terms of specific elements such as roles, responsibilities, procedures, expectations of quality and the evaluation process. Operational practice occasionally develops separately from the policy itself, largely in response to individual situations which results in inconsistency.

Service policies do not sufficiently reflect corporate policy. The policy framework does not systematically inform the structure and content of the service's and Children's Services Plan and has little influence on outcomes and impacts. The links among cross-cutting policy initiatives, and the service's contribution to these, are unclear and have insufficient impact on policy and practice at all levels.

The vision, values and aims of the service do not systematically inform the construction and development of policies. The links between aims and policies are not always clearly perceived. The service and the authority develop their policies independently which results in a lack of coherence. The service is not fully committed to the corporate vision, values or aims and does not use these consistently as criteria against which policies and practices can be regularly reviewed and evaluated.

Policies are not implemented consistently across the service. The service does not review and amend policies on a sufficiently regular basis. Many policies are not updated to take account of changing circumstances and national and local priorities. The service takes steps to monitor the implementation of its policies, but often the mechanisms are too informal. The engagement of stakeholders in the process of reviewing and updating is limited.

How good is our management?

(KEY AREA 6: POLICY DEVELOPMENT AND PLANNING)

QI 6.2 Participation of stakeholders

Themes:

- Involvement in policy development
- Communication and consultation
- Active participation in the work of the service

To fulfil the requirements of Best Value, and to conform to accepted good practice in local government, mechanisms need to be in place to link service management decisions to the needs of the community. There is an expectation that key stakeholders are actively involved in the development of the service and this will require a range of approaches and mechanisms to be applied across the service's areas of activity. To complement consultative mechanisms there needs to be an effective approach to communication. This will recognise that there are a number of different audiences which need to be kept informed about service activities. There should be a framework which facilitates effective communication with stakeholders. This will require a variety of approaches suited to the audiences concerned and will therefore involve a range of communication media.

Level 5 QI Illustration

The service has a well-planned and systematic programme in place to seek the views of stakeholders. A broad range of consultation processes, involving wide representation of stakeholders, to ensure effective development of policy and practice within the service. The service provides an accurate and comprehensive view of the services it offers through regular communication and consultation.

The service has a planned framework for communication and consultation which provides clear strategic and operational advice and identifies key stakeholder groups. The service is committed to effective communication and full consultation with all stakeholders. There is a clear overall policy framework for communication and for reporting.

Service managers encourage and enable the active participation of stakeholders in the work of the service. Effective structures and systems are in place to support and encourage participation. Staff at all levels engage with stakeholders. The service has effective procedures and processes to enable the sharing of information within and across inter-agency teams.

Level 2 QI Illustration

Identification of stakeholders omits some important groups. The views of some of the service stakeholders are sought but not on the full range of services. The process of involvement is not sustained beyond the early stages of a development or conversely is at too late a stage to have a significant impact. It draws too heavily on the input of staff and does not sufficiently involve other stakeholders.

Information given to stakeholders about service outcomes is generally sound but not consistently systematic or comprehensive. There is no clear overall policy framework for communication and reporting. While a number of consultation mechanisms are used, some of them are not well matched to the context or differentiated sufficiently to the needs of stakeholders. Those being consulted have only a partial understanding of the rationale, intended outcomes or processes of the exercise.

Stakeholders do not always feel involved and consulted about the nature of the activity in which they are participating. There are insufficient structures and systems in place to support and encourage participation. Although a majority of the staff are committed to engaging with stakeholders, attitudes towards some stakeholders are not consistently positive. There are insufficient procedures in place to enable effective communication and sharing of information within and across inter-agency teams.

How good is our management?

(KEY AREA 6: POLICY DEVELOPMENT AND PLANNING)

QI 6.3 Operational planning

Themes:

- Developing, implementing and evaluating plans
- Structure and content of plans
- Use of management information
- Joint planning with partner organisations and services
- Planning for sustainability

The service plan, or its equivalent, will be central to performance management and planning. Documents in themselves can only be a partial reflection of effective management and planning, since the processes that surround both the development of the plan and its implementation are of critical importance. Operational planning should lead to service improvement and guide its focus, methodologies and mechanisms for reporting and future action. Service planning will be embedded within the Council's approach to planning and clear links should exist between the Children's Services and other authority plans.

Illustration QI Level 5

The service has a clear policy framework including, standards and quality reporting, and professional review and development. Performance planning and service planning are integral to the work of the service. A very well managed planning cycle matches authority work cycles and meets national requirements.

The service plan fully reflects local and national priorities and covers the wide range of work of the service. The presentation and structure of the plan are clear and precise and immediately accessible to the various users. The plan is informed by national and local priorities, and analysis of Best Value reviews and quality audits. The service plan is taken forward very effectively through a series of action plans, drawn up by specific teams or individuals responsible for each major development. These action plans identify resources and indicate the links between planning and, where appropriate, budget setting procedures.

The service demonstrates a commitment to joint planning with the community, partner organisations and services. Service planning is structured in a way that supports integrated working. Operational planning for integrated services is well articulated and coordinated to ensure the involvement of all partners. Partners are appropriately involved in planning and, where appropriate, implementation. The approach to service planning is clearly understood. The service uses a clear and succinct format to report on progress in addressing priorities and achieving outcomes. The service plan sets out clear objectives in precise terms, linked to criteria for success, and identifies the person who has lead responsibility for performance measures. Staff clearly understand their roles in the monitoring and evaluation process. Service managers make systematic use of the service-planning process to monitor and manage the work of the service as a whole through a regular cycle of evaluation and reporting. Annual reports are produced which identify success in meeting service improvement objectives as laid out in the plan.

Illustration QI Level 2

The service has a process of performance management and planning but it has limited coherence. The planning cycle is not closely linked with authority-wide processes. Performance management and service planning are not integral to the work of the service nor are they seen as key mechanisms to bring about continuous improvement. Delivery options have not been fully considered in service planning.

The presentation and structure of the service plan are not clear or sufficiently detailed. The plan includes too many or too few improvement objectives and is not central to quality improvement. Planning is only partially linked to national and local priorities. It is not sufficiently informed by appropriate and clear aims, priorities and statements of planned action.

Partner organisations have limited input into decision-making processes and areas of joint actions are not always fully effective. Where service objectives involve working with other departments or agencies, partners are not always fully aware of their respective roles in implementation. Service planning does not have a significant influence on joint or integrated service delivery at a community or neighbourhood level. It has a limited focus on multi-disciplinary and partnership approaches to service provision. Operational planning is only partially successful in coordinating services with partner organisations and agencies, including working with key partners from the community and the voluntary sector. Partners are not consistently involved in identifying and addressing needs.

How good is our management?

(KEY AREA 7: MANAGEMENT AND SUPPORT OF STAFF)

QI 7.1 Sufficiency, recruitment and retention

Themes:

- Identifying and meeting human resource needs
- Recruitment, appointment and induction procedures
- Care and welfare
- Equality and fairness in recruitment and promotion
- Recognition

This indicator relates to the service's effectiveness in managing the recruitment, appointment, induction and care and welfare of its staff. To provide a high quality service to its stakeholders, the service needs a clear understanding of its human resource requirements and effective procedures in place to recruit, retain, support and develop its staff to a high level. This will require proactive and imaginative recruitment procedures. The principles of equality and fairness, together with a commitment to recognise and celebrate achievement, will underpin the service's philosophy and practice in its management and support of staff.

Illustration QI Level 5

The service has an overall human resource management framework, supported by a comprehensive range of clear policies covering all key areas. The service has established clear staffing standards for all areas including staff in all other services under its management.

The service has established effective recruitment procedures. All appointment procedures have been developed in partnership with the relevant trade unions and professional associations and are clearly stated and publicly available. Appointments pay due regard to the skills, aptitudes and experience of all applicants and of the relationship of these to the stated selection criteria, job outlines and person specifications for each post. The service has an effective induction policy and procedures for all new staff. The service effectively complies with the British Psychological Society's quality standards in terms of staff induction and service accreditation.

The service has clearly established a positive culture in which staff are aware of their rights and responsibilities. Every service manager is aware of the duty of care to employees and an appreciation of what that entails. Within its human resources policy framework, the service has a range of policies and procedures which set out clearly the standards of conduct, care and welfare which all staff can expect and which are expected of them.

Illustration QI Level 5 – continued

The service has a well-established equal opportunities policy relevant to the needs of those who work in and use the service. There is a clearly defined set of principles and procedures which underpin the service's approach to recruitment and support of its staff. Issues of equality and fairness including race, religion, ethnicity, disability and gender are fully addressed and effectively monitored and recorded statistically.

The service has established an ethos of positive recognition and celebration of achievement within which all staff are encouraged and supported to do their best. Service managers communicate regularly with staff to identify successes, examples of best practice and innovative practice. Staff achievement and success are appropriately recognised.

Illustration QI Level 2

The service has produced a number of personnel policies but there are important gaps in key policy areas. While staffing standards have been produced for the service, it has not yet developed such standards for all areas of service provision or for all groups of staff. Confusion, misinterpretation or challenge sometimes materialise.

The service's recruitment procedures generally operate satisfactorily but tend to be reactive rather than planned and proactive. Appointment procedures are inconsistent, open to interpretation or fail to recognise or align the skills, aptitudes and experience of applicants to clearly defined selection criteria. Staff induction courses are available but service managers have not systematically customised these to support the induction and development needs of different groups of staff.

Staff are not always fully aware of their rights and responsibilities. Managers are sometimes uncertain about the parameters of the service's duty of care to its employees. Personnel policies do not adequately specify the standards of conduct, care and welfare which staff can expect or which are expected of them.

The service has produced a written policy on equality and fairness but this has not adequately influenced or been built into staff recruitment and appointment procedures nor has it been customised to meet the needs of those who work for or make use of authority services. The service's job advertisement, recruitment and appointment procedures contain clear statements about its commitment to equality and fairness but these procedures do not always meet the needs or expectations of minority groups, nor are recorded statistics routinely monitored.

Staff sometimes feel that managers are remote and that their own achievements frequently go unnoticed or feel that there is a blame culture within the service rather than an ethos of reward for success. Managers do not formally and systematically recognise examples of best or innovative practice or are, in the main, not well enough aware of the achievements of individual staff.

How good is our management?

(KEY AREA 7: MANAGEMENT AND SUPPORT OF STAFF)

QI 7.2 Deployment and teamwork

Themes:

- Appropriateness and clarity of remits
- Deployment to achieve planned priorities
- Teamworking
- Communication and involvement in decision-making

This indicator is concerned with the effectiveness of individual and team contributions. The main asset of any service is its people. In order to achieve its objectives and to implement the service plan, staff need to be deployed effectively to respond to the needs of stakeholders and to develop effective teamwork and communication. Their work should focus on the achievement of the service's planned priorities and improvement objectives whilst also responding to key stakeholders' needs.

Illustration QI Level 5

All service staff have clearly stated job descriptions and remits. Job remits relate clearly to the improvement objectives of the service. There are clear lines of communication and accountability for staff, in line with the service's scheme of delegation. Staff are appropriately empowered, challenged and supported.

The job remits and activities of all staff articulate clearly with the authority's statement of improvement objectives. Staff are well aware of the service plan or equivalent and have a good understanding of the role they play in the wider organisation.

An ethos of team working has been established within the service. Each team has a clear structure, composition and task-focused approach. Clear staff deployment, lines of communication and accountability define the service's approach to team working. Service managers regularly monitor team and individual deployment and performance against achievement of agreed priorities, outcomes or targets. Service managers meet regularly with teams to monitor and evaluate performance.

Staff are very positive about the frequency, sufficiency and quality of information they receive. In general, they feel well consulted on major issues which affect their working practices. Staff feel that they have good opportunities to raise concerns or offer constructive suggestions with management which are taken seriously. Staff generally consider managers to be visible and accessible. The educational psychology service has established a systematic network of working groups to take forward a range of developments, initiatives and innovations.

Illustration QI Level 2

Most staff have detailed job descriptions and remits but there are important gaps or they do not always relate clearly to the improvement objectives of the service. As a consequence, some staff do not always carry out their duties in an appropriately focused fashion. While the service has established clear lines of communication and accountability for most staff, some feel isolated or uncertain about their roles and responsibilities. Managers lack confidence or demonstrate a reluctance to empower their staff to take decisions, and generally take such decisions themselves.

Staff deployment and job activities do not always align with the service's improvement objectives. Staff do not always understand the main improvement objectives of the education service, the context of its work and the importance of their contribution to achieving priorities, outcomes and targets.

While staff are, in the main, deployed in teams, some individuals do not relate to a specific team, or teamworking is generally not well developed across the service. Deployment of teams and of individual team members is not always linked to agreed priorities. Performance monitoring within some teams, and of teams by managers, lack focus, consistency and rigour.

Ineffective communication, or inadequate consultation on major issues, sometimes gives rise to complaints from staff. Managers can seem to be distant or remote. There are few opportunities to raise concerns or put forward constructive suggestions for service improvement. The service has established a good range of working groups (or equivalent), however, staff sometimes feel that there are few opportunities to become involved in the work of these groups. Selection criteria for an appointment to join a working group are sometimes unclear.

How good is our management?

(KEY AREA 7: MANAGEMENT AND SUPPORT OF STAFF)

QI 7.3 Development and support

Themes:

- Processes for staff review and support
- Training and development
- Joint training with staff from partner agencies

This indicator relates to the service's management of its review processes and to the provision of training and development opportunities for its staff. It evaluates the service's effectiveness in monitoring and reviewing the performance of its staff against agreed criteria, and facilitating their personal and professional development. All staff must be able to develop their skills to maximum effect in order to achieve continuous improvement in their professional skills. Staff have an entitlement to receive a formal programme and record of professional review and development (PRD) or CPD.

Illustration QI Level 5

The service has developed a formal PRD/CPD framework for all staff. The service fully complies with the British Psychological Society guidance on CPD. Service managers have translated the framework into clear and user-friendly procedures and processes, all of which are well supported by relevant documentation and initial training for staff at all levels. The review process leads to the identification of staff strengths, skills and development needs.

The service demonstrates a clear commitment to developing its entire staff. Training and development programmes arise from formal identification of staff development needs through the PRD/CPD processes, and from authority-driven developments aimed at achieving national or local priorities. The service has produced a comprehensive catalogue of staff development opportunities, based on an audit of development needs arising from the staff review process and the service's key priorities.

Service managers and relevant partner agencies have established a joint forum which meets on a regular basis to discuss the provision of joint/inter-agency training. Service managers and their partner agency colleagues create opportunities to bring their respective staff together, on a regular and planned basis, to provide joint training and development on shared priorities and inter-agency practices. Evidence is available to demonstrate that joint training and development for service and partner agency staff has led to quantifiable improvements in identified, stated and measurable aspects of services for children.

Illustration QI Level 2

Most staff participate in a PRD/CPD programme, but an overall framework does not exist across the service, as a result a significant number of staff are not reviewed on a regular basis. The service complies with the British Psychological Society guidance on CPD. The PRD/CPD process can sometimes be open to misinterpretation and its application varies in quality and rigour across the service. Associated documentation is not always clear or user-friendly and some staff may not have received initial PRD training. The review process does not clearly identify staff strengths, skills and development needs.

The service provides a good range of in-service courses and development opportunities for staff, but they do not always derive from or relate clearly to identified staff development needs or education service priorities. Provision is patchy and groups of staff have needs which are sometimes omitted. Service managers have produced an in-service programme but it does not systematically take account of identified staff development needs or service priorities and, as such, is limited in its use or usefulness.

Meetings take place between managers of the service and its partner agencies, but these are neither programmed regularly nor characterised by shared agendas. Joint training is seldom discussed or viewed as a priority. The service and its partner agencies have created few opportunities to bring their respective staff together for training and development purposes. There is no discernible evidence available to demonstrate that inter-agency training and development have led to quantifiable improvements in the quality of services for children.

How good is our management?

(KEY AREA 8: PARTNERSHIPS AND RESOURCES)

QI 8.1 Partnership working

Themes:

- Clarity of purposes and aims
- Service level agreements, roles and remits
- Working across agencies and disciplines
- Staff roles in partnerships

This indicator refers to the role of the educational psychology service in promoting and encouraging effective partnership working with stakeholders and partner agencies. A central role of the service is to secure and sustain cohesive and meaningful partnerships. To encourage and support this process the service will participate in bringing key partners together at strategic decision-making level. To fulfil the requirements of Best Value and to conform to accepted good practice, there must be mechanisms in place to link leadership and management decisions to the needs of all stakeholders. There is, therefore, an expectation that all stakeholders including, as appropriate, other partners should be actively involved in service development. This will require a range of approaches to consultation and communication that can be applied across the service's areas of activity. There should also be in place a public performance reporting (PPR) framework to communicate clearly with the full range of stakeholders and partners.

Illustration QI Level 5

The service engages appropriately with partner agencies and community organisations, including the voluntary sector, in seeking to improve services. It has established a strategic framework with all key partners within which joint working can be established and flourish. To achieve sustainability and measurable impact, meaningful partnership working is built into strategic planning at the highest levels. It is monitored rigorously for accountability through the service's structures. A culture is established which encourages all staff, stakeholders and partner agencies and community organisations to be involved. Service level agreements are established at strategic level and are monitored and evaluated at operational levels to ensure that each has a positive impact.

Almost all partner agencies and community organisations have a consistently high level of satisfaction with the service. The service works effectively in a range of multi-disciplinary partnerships. The service works collaboratively with community organisations, social and health care professionals to ensure that needs are appropriately prioritised and met, particularly those of groups considered to be at risk of social exclusion. This includes, where appropriate, providing services directly to children, young people and their families. The service encourages, develops and secures the commitment of key partners to multi-disciplinary working. It engages partner agencies and community organisations in the planning, delivery, monitoring and evaluation of joint projects and multi-disciplinary working. Multi-disciplinary working contributes effectively to the achievement of the vision, values and aims of the service and to meeting the needs and aspirations of all stakeholders.

Service staff are very effective in a wide range of partnership working. They demonstrate or support leadership within the context of partnership working. They consistently seek opportunities for improvement and development in all partnerships. Managers plan their engagement with partners to ensure the active participation of all relevant people and agencies. Staff are clear about their roles and responsibilities, what matters most and how their time will be best spent.

Communication and consultation between the service, partner agencies and community organisations is regular, structured, supportive and efficient. All those involved in partnerships are kept fully informed about the progress and aspects which require further consideration and improvement. There is an effective reporting framework to communicate with the full range of stakeholder groups and partner agencies.

Illustration QI Level 2

The service does not engage regularly with partner agencies and community organisations, including the voluntary sector, to systematically improve services. The service has made little progress in establishing a strategic framework with all key partners within which joint working can be established and flourish. Partnership projects are frequently built into operational rather than strategic planning and often lack the necessary focus. Although a range of monitoring and evaluation techniques is used, methods are not applied rigorously nor are they part of the service's structures for accountability. Insufficient effort is made to encourage partner agencies, community organisations and other stakeholders to be involved in meaningful joint working. Service level agreements tend to be established at operational level and are not part of strategic planning. There is little evidence of a systematic approach to monitoring and evaluation of the impact and outcomes.

There are important weaknesses in the levels of satisfaction with the service provided to partner agencies, community organisations, including the voluntary sector. While the service works collaboratively with a limited range of community organisations, social and health care professionals, they do not always ensure that needs are prioritised and met, particularly for groups considered to be at risk of social exclusion. Where it does engage with them it may not do so appropriately. The service is insufficiently proactive in seeking opportunities for involvement and development in partnership working. Partnerships with agencies and community organisations produce limited results. The service has not yet secured the commitment of key partners to multi-disciplinary working. It is inconsistent in its approach to the engagement of partner agencies in the planning, delivery, monitoring and evaluation of joint projects and multi-disciplinary working. Multi-disciplinary working has an insufficient impact on the achievement of the vision, values and aims of the service and does not have a clear focus on meeting the needs and aspirations of all stakeholders.

Managers undertake limited planning for engaging with partners to ensure the active participation of relevant people and agencies. Within partnership working service managers are unfocused in their day-to-day practice and management of time. There is little evidence of a commitment to continuous improvement through partnership working. There is a lack of clarity about roles and responsibilities, what matters most and how to make the best use of available time.

Communication and consultation with partner agencies and community organisations is not always efficient or supportive in nature. Those involved in partnerships are not kept fully informed about progress and or about aspects which require further consideration and improvement. The reporting framework is not sufficiently effective in communicating clearly to stakeholders and partner agencies.

How good is our management?

(KEY AREA 8: PARTNERSHIPS AND RESOURCES)

QI 8.2 Financial management

Themes:

- Budget management and enterprise in securing funding
- Range and implementation of financial procedures and controls
- Processes for collecting, analysing and evaluating financial information
- Providing Best Value

This indicator relates to the capacity of the service to help to deliver planned national and local priorities. This will require the service to have developed a rigorous, thorough and imaginative approach to financial management. Such an approach will require high level managerial planning and control coupled with rigorous operational management, monitoring and review of a wide range of financial systems and procedures. The working relationship between the service and the authority's finance department will be critically important. The indicator also relates to the service's capacity to deliver Best Value through its approach to financial management.

Illustration QI Level 5

The service's budgeting process is clearly related to that of the authority and demonstrates clear links to the service planning process. Budgets and financial matters are discussed regularly and rigorously at all management levels. There are clear procedures in place to deal effectively with budgetary variances. The authority is kept well informed of budgetary matters and routinely receives both financial reports and reports with financial implications, in line with the scheme of delegation.

The authority regularly receives high quality financial reports concerning the financing of the service. Service managers actively monitor budgetary performance and make well-informed decisions as appropriate. There is a systematic and well-organised approach to budgetary administration which provides service managers with easily interpreted, accurate and reliable data to allow well-informed decisions to be taken. This process is routinely supported by the production of regular budget reports which are designed to monitor committed expenditure. Arrangements for financial planning and expenditure are transparent, dynamic in nature and fully utilise a wide range of management and performance information. Financial procedures are well known to budget holders and all other staff with financial responsibilities, all of whom are supported by clear and comprehensive procedures.

Service managers have established fully effective working practices with officers in the authority's finance department. This results in a two-way flow of reliable, accurate financial information to enable key decisions to be taken as appropriate. Fully effective financial and administrative procedures have been developed to plan and manage budgets. These procedures allow both planned and committed expenditure to be tracked.

The service has established a clear policy on Best Value which informs all staff of its expectations. The service's financial planning and management regime is characterised by efficiency, effectiveness, elimination of duplication and the provision of high quality services and value for money. All aspects are governed by the principles of Best Value. Likewise, all service budgets, systems and procedures are formally reviewed on a regular basis, with the aim of securing continuous improvement and Best Value. Financial planning and decision-making are characterised by the principles of option appraisal and Best Value.

Illustration QI Level 2

The service budget process is almost exclusively driven by the current financial year's budget and makes only marginal provision for the delivery of national and local priorities. Links to the service planning process are tenuous. There is regular discussion of financial matters by service management but such discussions lack a clear focus and do not necessarily form a basis for well-informed financial decisions to be taken. The authority does receive reports containing financial information but these are often general in nature and frequently lack reliable, issue-specific information on which to base decisions. Reports are not always presented in a user-friendly format which can be easily interpreted and understood by those outwith the service.

The authority receives reports of a financial nature, but these are limited in frequency, detail, specificity or reliability. As a result the authority is not always well enough briefed to make informed decisions. The service has established financial procedures which, although sound in themselves, have not been fully integrated with the authority's financial systems or well supported by user-friendly, clear and accurate documentation, staff development and training. There is no formal system in place to rigorously and systematically monitor, review and improve financial management and performance within the service.

Although liaison takes place between the service and the authority on financial matters no clear and consistent working practices have been agreed. The transfer of information is reactive and issue-specific rather than planned and proactive or it lacks reliability, accuracy and rigour. The service's financial and administrative procedures do not make sufficient provision for the planning and management of budgets with the result that expenditure in this area is reactive, creating potential for underspends or overspends.

The service has established a Best Value policy but this has only minimal relevance to the core functions. Financial planning and management within the service is well organised in itself but lacks any means routinely to assess its efficiency and effectiveness, as a result inefficiencies, including over/under provision and over/under spends sometimes occur. There are no formal systems in place to routinely review service budgets and financial procedures. The service does not routinely employ the principles of option appraisal and Best Value in its financial planning and management.

How good is our management?

(KEY AREA 8: PARTNERSHIPS AND RESOURCES)

QI 8.3 Resource management

Themes:

- Accommodation
- Resources and equipment
- Efficiency and effectiveness in use of resources
- Health and safety

The management of finances is closely linked to the wider management of resources. This indicator sets out to evaluate the effectiveness of the service's approach to the management of its resources in the widest sense. The service will need to demonstrate that it is fully aware of the range of resources at its disposal, from both internal and external sources, and that it has developed a planned, proactive approach to resource management. This provides a firm base from which to promote service development and continuous improvement.

Illustration QI Level 5

The service has sufficient, good quality accommodation to meet the needs of the broad range of educational psychological service staff and stakeholders, including people with disabilities. Senior managers and staff are aware of the requirements of relevant legislation and take the necessary actions to ensure legal compliance.

The service has developed a clear rationale for the allocation of resources. There are clear links at service level between resource management/development and both the service planning and budget processes. The service has developed a comprehensive management plan which makes provision for the management and development of its resources. Resource planning, development and management clearly operate on the principles of option appraisal and Best Value. Clear evidence exists to demonstrate that this approach has yielded significant service improvements.

The service's approach to resource management ensures that resources are allocated to meet national and local improvement objectives and priorities. The service's performance is routinely reported to the authority. The principles of Best Value underpin the service's approach to resource management. Service managers regularly review resource management information, performance and proposals for performance improvement.

All staff involved in delivering services to stakeholders clearly demonstrates a commitment to the health, safety and wellbeing of stakeholders. The service has in place a comprehensive health and safety manual providing staff with clear guidelines governing the use of premises, the deployment of resources and all relevant aspects of operations. Appointed staff in each service centre have received appropriate health and safety training, including generic aspects arising from legislation and established best practice.

Illustration QI Level 2

The service has insufficient, good quality accommodation to meet the needs of the broad range of educational psychological service staff and stakeholders, including people with disabilities. Senior managers and staff are insufficiently aware of the requirements of relevant legislation to ensure the necessary actions to ensure legal compliance.

There is no clear corporate rationale for allocation of resources to the service. Senior officers and service managers have a generalised view, lacking in detail and specificity, of the resources which are at the disposal of the education service. This partial view may derive from incomplete or unreliable information or from informal systems and sources. The service has developed a management strategy/plan but it is neither comprehensive in its coverage of the service's resources nor sufficiently detailed. Links between resource allocation and the service planning and budget processes are tenuous at best. Service managers have only made provision for resource allocation in the short term. The service's management of resources provides only limited evidence of adherence to the principles of option appraisal and Best Value. As a result enhanced efficiency and effectiveness cannot be delivered consistently. There is limited evidence of the service's approach to resource management yielding discernible service improvements.

Resource management and allocation are not linked closely enough to national and local improvement objectives. Management information on resources is incomplete or variable in quality, accuracy and reliability. The service has been involved in Best Value reviews, or similar, but its approach is one of reacting to prevailing circumstances rather than being planned and comprehensive. The range of management techniques and tools used in such reviews is limited. The education service's approach to monitoring and evaluating the effectiveness of its resource management is inconsistent and unplanned.

Some key staff involved in delivering services to stakeholders are unclear about certain procedures relating to health, safety and the wellbeing of stakeholders. Procedures across the service do not support or guide the work of staff. Appointed staff in each service centre have not received appropriate health and safety training, including generic aspects arising from legislation and established best practice.

How good is our management?

(KEY AREA 8: PARTNERSHIPS AND RESOURCES)

QI 8.4 Information systems

Themes:

- Data collection, storage and retrieval
- Linkages between, and sharing of, information
- Processes for analysing, evaluating and using information

A management information system (MIS) is a system used to enter, store, manipulate and retrieve information. A well-run, computerised management and administration system supports the key business processes of a modern service and provides the means of monitoring provision and improving effectiveness. An MIS should be seen in the context of helping a service to deliver its core functions and achieve its improvement objectives. Analyses of the data can give managers, staff and stakeholders a more informed view of current practice in the service. Because data sharing is a central aspect of the MIS, security is clearly important. Different levels of security are appropriate for different user groups.

Illustration QI Level 5

A structured and rigorously observed system, which is in line with the British Psychological Society Code of Ethics and Conduct, is in place for central and coordinated collection, analysis and evaluation of data. The MIS provides the service with access to robust information to inform planning for improvement and to target support and resources more effectively. The service promotes the effective use of the MIS through agreeing and defining core sets of data and providing training in the use of the system as a management tool. The use of the MIS is a major contributor to the effective delivery of services and the achievement of improvement objectives.

The service has an effective information and communication technology (ICT) strategy in place. The MIS allows the service to communicate electronically with its staff and partnership agencies. The system gives managers a comprehensive overview of the work of the service and its achievements. The service provides very effective support to its staff with regard to the systematic collection, collation and analysis of relevant data.

The system of access controls is tailored to the needs of the users, allowing quick access to address needs. The service uses information generated for administration, planning and monitoring. The storage, filing and retrieval of information comply with the Data Protection and Freedom of Information Acts, and the British Psychological Society's code of Ethics and Conduct. There are clear agreements and protocols shared with staff, partner agencies and stakeholders regarding the confidentiality of data and the requirements of legislation. Protocols have been agreed with establishments, partner agencies and other services for data exchanges.

Illustration QI Level 5 – continued

Record-keeping procedures are very well organised. Records are well maintained and up to date. Case files provide clear information, are of a high standard and procedures to ensure confidentiality, access and security are well in place and meet British Psychological Society standards.

The service provides effective central coordination and interpretation of data. It collates and analyses a range of data to monitor and demonstrate improvements in performance. The MIS is used to identify trends, and provide benchmark and comparative information in planning for improvement. Effective systems are in place to track developing requirements such as the attainment of vulnerable children and young people. The system enables high performance to be recognised and under performance to be quickly identified and addressed.

Illustration QI Level 2

The MIS is in place for central collection of data but it is not coordinated and as yet provides limited data for analysis. It provides the service with access to information but this has limited impact on planning for improvement or in assisting in targeting support and resources more effectively. The service has not yet reached agreement on the core sets of data nor has there been sufficient training of key staff. The range of data which is maintained is limited and this prevents the use of the MIS from impacting positively on the achievement of improvement objectives.

The service has in place an ICT strategy. However, the links among staff and partnership agencies are ineffective. This leads in some cases to frustrations and delays in the electronic communication of information, such as the impact of fieldwork. The system is not yet sufficiently developed to give managers a comprehensive overview of the work of the service and its achievements. The service's support to its staff in the collection, collation and analysis of data is not sufficiently focused to engender confidence in working practices.

The system of access controls is cumbersome and does not always meet the needs of the users. The service makes limited use of the information generated for administration, planning and monitoring. The data held does not meet the full range of information requested nor is this information always readily available in an appropriate form. Written protocols on the exchange and confidentiality of data and the requirements of legislation are not generally well understood by staff, stakeholders or partner agencies.

Record-keeping procedures are poorly organised and many records are out of date. While the service upholds British Psychological Society standards information in case files is unclear and procedures for confidentiality, access and security lack rigour.

There is limited evidence of the service providing the necessary central coordination and interpretation of data. The service collates and analyses a range of data but this is insufficient for staff to monitor and demonstrate improvements in performance. Some important information is not included in the collation and analysis. The MIS does not play a major role in identifying trends, and providing benchmark and comparative information in planning for improvement. Systems are in place to track pupils' attainment, but these tend to be paper based or depend on software packages developed in establishments in isolation from the education authority. The system does not provide reliable enough evidence to identify high or under performance. Analysis and evaluation of statistical data held within the MIS does not play a significant role in self-evaluation and continuous improvement.

How good is our leadership?

(KEY AREA 9: LEADERSHIP)

QI 9.1 Vision, values and aims

Themes:

- Appropriateness and coherence with corporate and community vision, values and aims
- Sharing and sustaining the vision
- Promotion of positive attitudes to social and cultural diversity

This indicator relates to the collegiate leadership of the service and to the way in which it exercises its functions through unity of purpose. This will be expressed through the service's effectiveness in establishing direction through its vision. To demonstrate good practice, the service will have to ensure that this vision actively influences practice at the point of delivery. This indicator focuses on the extent to which vision, values and aims guide planning for, and impact on, maintaining and improving the quality of services for children, young people, families and other stakeholders.

Illustration QI Level 5

The aims convey a distinctive picture of the aspirations for, and expectations of the service. There are clear links between the vision, values and aims contained within the authority's strategic, improvement and operational plans. Clear and comprehensive statements of this vision, along with values and expectations, direct the work of the service and the way in which it relates to its partner agencies. These statements encompass the purposes of the service, as well as national priorities and national expectations for children, young people, families and other stakeholders.

Senior managers at all levels have established a shared vision for the service. The vision, values and aims for the service provide a widely recognised and shared set of aspirations and expectations for all stakeholders. All staff have a very good awareness of the service's vision, values and aims and of their own specific roles in their delivery. The aims have been developed through involving a wide range of stakeholders and clearly set out the service's commitment to a culture of empowerment, improvement, innovation and service excellence. The vision, values and aims are continually revisited and reinforced in events and activities which result in a strong sense of common purpose.

The aims and vision set out clear expectations for equality and social justice. Senior managers at all levels demonstrate commitment to and provide a clear lead in emphasising equality issues and are strongly committed to the aims and vision for equality and promote social and cultural diversity. The service plan addresses the promotion of equality, diversity and inclusion.

Illustration QI Level 2

Senior managers have established a vision which directs the work of the service but does not significantly impact on processes or outcomes of the service and its stakeholders. The respective aims within service, corporate and departmental plans are insufficiently linked. Service managers do not always demonstrate the same level of commitment to corporate priorities. The purposes of education and national expectations and aspirations are insufficiently emphasised or explained. The vision, values and aims of the service have only limited relevance to the main activities of the authority.

Senior managers have established a vision which directs the work of the service but it has not been communicated sufficiently well to stakeholders. The service's aims convey only a partial picture of the aspirations of the education authority. In developing the service's aims, the involvement of stakeholders has been insufficient and, consequently, understanding and ownership of the aims is limited. The aims are not sufficiently embedded in the work of the service and do not emphasise a commitment to a culture of improvement, service excellence and innovation.

The aims and vision set out expectations for equality and social justice. These are not yet fully embedded in an appropriate range of operational policies and procedures. Service managers are committed to promoting social and cultural diversity but this commitment is not always translated into action.

How good is our leadership?

(KEY AREA 9: LEADERSHIP)

QI 9.2 Leadership and direction

Themes:

- Strategic planning and communication
- Strategic deployment of resources
- Evaluation of risk

This indicator is fundamentally about strategic planning for future sustainable development. It focuses on the mapping out of future developments which are challenging, realisable and sustainable. This indicator also relates to the success of senior managers at all levels in linking the authority's vision to strategic deployment of resources to deliver services, secure Best Value and manage sustainable development. Significant current and planned service activities will take place within a culture which supports and enables effective risk management.

Illustration QI Level 5

Service managers and senior officers provide strong direction and demonstrate a commitment to continuous improvement. Together, they communicate and demonstrate a very clear view of what the service is aiming to achieve. Service managers develop effective and strategic business plans and identify key actions, intended outcomes and major targets. Planning documents are accessible, succinct and set out key priorities within a well-managed planning cycle. Planning leads to sustainable change. Channels of communication are effective. There is strong leadership and direction at all levels on corporate priorities. All staff take full account of the need for succession planning, accountability, making appropriate use of data for informed decision-making and evaluating impact and outcomes. Strong leadership helps to steer individuals and teams successfully through the difficulties and challenges associated with strategic planning.

Service managers provide strong leadership in targeting resources at key agreed objectives and achieving Best Value. They have developed a clear Best Value approach to deliver continuous improvement. The service has in place a very clear planning framework which takes account of wider authority planning in relation to finances, asset management and human resources.

The culture of the service is one that is risk-aware. Risks are balanced against the benefits that may arise from taking these risks. Systems are in place to consult relevant partners and stakeholders in relation to risk management.

Illustration QI Level 2

Service managers and senior officers of the education service do not have a consistently clear view of the strategic role of the service in planning for improvement. As a result the work of the service is taken forward mainly at an operational level and change is often unsustainable. Service managers and senior officers do not always demonstrate a clear or mutual understanding of the national context or local priorities. The principal educational psychologist does not systematically inform the department's senior management team of identified community and corporate priorities. The service operates in isolation from the corporate team. Insufficient account is taken of the need for careful succession planning, securing accountability, making appropriate use of data for informed decision-making and evaluating impact and outcomes.

Resource allocation is not closely enough linked to key agreed objectives. The service has initiated a Best Value review but its approach is one of reacting to prevailing circumstances rather than being planned and comprehensive. While the service is aware of the authority strategic planning framework, it does not take full account of finances, asset management and human resources and it only articulates to a limited extent with the strategic planning cycle. Financial decision-making pays insufficient attention to sustainability.

The service secures improvement through effective project management and resource management but does not consistently manage financial risk effectively and efficiently.

How good is our leadership?

(KEY AREA 9: LEADERSHIP)

QI 9.3 Developing people and partnerships.

Themes:

- Development of leadership capacity
- Building and sustaining relationships
- Teamwork and partnerships

This indicator relates to the effectiveness of the service in building capacity for leadership at all levels and securing positive working relationships and successful outcomes with stakeholders and partner agencies. The indicator relates to the ethos and culture of the service and beyond, through its operations corporately within the authority and in joint working with its partner agencies. The effectiveness of the service management team at all levels, their deployment, responsibilities and co-working in relation to organisational requirements and key strengths are relevant. Delegation to and empowerment of staff and partners are important features, alongside the development and support of effective teamwork.

Illustration QI Level 5

Senior managers at all levels model a wide range of effective leadership skills and motivate others to give of their best. The range and balance of skills, personal qualities and experience make for a very effective senior management team. The principal educational psychologist and the senior management team exemplify the authority's approach to quality improvement through active leadership and personal involvement in improvement strategies and activities. There is an empowering culture of improvement and an understanding that all staff, at whatever level, have a key role to play in taking forward the work of the service. Staff feel able and confident to exercise initiative, share responsibility and adopt lead roles in their own areas. They understand their own leadership roles and those of others. The structures in place draw upon the collective knowledge, experience and personal interests of a wide range of staff and create opportunities for staff to lead projects and developments. Effective systems are in place to promote and evaluate the impact of leadership programmes, sustainable developments and succession planning.

Senior managers at all levels have developed a supportive work environment in which people share a sense of responsibility to improve the quality of service. Talents are identified and promoted. Working relationships are built on trust and reflect a genuine concern for staff and relevant partners. Systems are in place to help people tackle challenging problems, share information and deal with difficulties. Staff and stakeholders have regular opportunities to share ideas, review their work and learn from each other. There are regular opportunities to give and receive constructive feedback. Staff are encouraged and supported to do their personal best and their achievements are recognised.

Illustration QI Level 5 – continued

There is a high level of commitment to partnership working and team development. Senior managers at all levels are proactive in establishing strong links with partner agencies and other stakeholders and lead joint improvement activities. They are successful in mobilising and focusing the commitment and enthusiasm of service staff and of key partners and stakeholders to secure continuous improvement. There is effective multi-disciplinary working and a positive impact on partner agencies and other stakeholders. An ethos of teamwork and collegiality is evident at all levels of the service. There is a high level of participation and engagement by partner agencies. Team performance is regularly evaluated against agreed objectives and targets. Staff at all levels participate in teams throughout the service each team having a clearly focused role and remit.

Illustration QI Level 2

Individual members of the wider service management team demonstrate leadership skills in a few areas but there are important weaknesses in others which are key to the effective leadership of the service. There are some important gaps or weaknesses in the range and balance of the skills, abilities and experience within the wider service management team, impacting on the overall effectiveness of the team. The culture of the service, although positive, does not convey a full sense of challenge, change or progress. Senior managers at all levels do not have a consistently clear view of their own leadership roles and those of others in the education authority. The principal educational psychologist and the senior management team are not always successful in gaining the commitment of key staff in establishments, and services or partner agencies and other stakeholders. As a result there is confusion about who is leading what, and a lack of ownership of key initiatives. There is a dependency culture where staff feel inhibited about taking the initiative and are overly-dependent upon others. Insufficient account is taken of the need for leadership training and development and succession planning.

The quality of relationships and the culture of the work environment are too variable across the service. Staff are not always fully supported in their work and their contributions go unrecognised. Relationships with service managers at all levels are inconsistent and interactions with other staff and/or partners inhibit the delivery of quality services. Staff have opportunities to meet and discuss programmes of work but these are insufficiently frequent. Systems are in place for giving and receiving feedback but the atmosphere is not conducive to open and honest dialogue. As a result, the outcomes of such meetings are not well focused and have little impact. The achievements of staff and partner agencies are not regularly recognised or celebrated.

Senior managers have built and sustain effective working relationships with only a narrow range of partner agencies with other relevant potential partnerships being under developed. There are some examples of effective partnership working but the overall picture is inconsistent. Senior staff do not systematically demonstrate a commitment to partnership working nor focus strongly enough on collaborative working and shared responsibility. They do not sufficiently evaluate their own performance individually or as a team. They maintain effective communication with a narrow range of interested partner agencies and other stakeholders. They undertake insufficient planning with partners to ensure effective multi-agency working. Relationships and interaction with colleagues, partner agencies and other stakeholders can be inconsistent and punctuated by misunderstandings, lack of clarity and tensions. Although service teams work well as individual units, in general, teamwork is not well established and, where teams are in operation, objectives and targets lack specificity or team performance is not routinely evaluated against agreed criteria.

How good is our leadership?

(KEY AREA 9: LEADERSHIP)

QI 9.4 Leadership of change and improvement

Themes:

- Support and challenge
- Creativity, innovation and step change
- Continuous improvement

This indicator is concerned with the effectiveness of the leadership at service and authority level to maintain high levels of quality, deliver continuous improvement, and work towards achieving excellence in the quality of applied psychological services for children, young people, families and other stakeholders. A critically important component of the leadership function is the need for service managers at all levels to challenge staff continuously to improve the quality of service, by setting demanding but realistic performance targets and by providing high-level support to assist them to achieve these. The indicator also relates to the ability and success of the service management team systematically to encourage and support innovative and effective practices which bring about positive step changes in learners' experiences.

Illustration QI Level 5

Managers at service and authority levels actively and systematically take leading roles in ensuring appropriate support and challenge. They set demanding performance targets for the service. They challenge staff and teams to improve their performance, including the service management team, monitor performance and outcomes and support continuous improvement and the pursuit of excellence. They align people, structures and systems to secure improvement.

Service managers encourage creativity and have a clear view of what constitutes best practice. They regularly examine, research, and adopt innovative practice being taken forward in other services. They routinely use the results of self-evaluation exercises, Best Value and other service reviews to consider new methods of service delivery and innovative approaches aimed at enhancing the quality of the service. Service managers welcome and support innovation. They lead and challenge staff at all levels in the service. They encourage staff to contribute suggestions to enhance the quality of service delivery. Service managers apply the principles and practices of risk management to proposed changes and innovations. Examples of excellence and innovative practice are celebrated widely. Innovative practice has led to qualitative improvements in service delivery. Service managers lead and manage change effectively and strategically by prioritising and focusing on a manageable number of high priority initiatives and communicate them to staff at all levels.

Illustration QI Level 5 – continued

The principal educational psychologist plays a very strong and focused role in leading the service's commitment to continuously improving performance, service quality, impact and outcomes. He or she is well supported by the service management team, all of whom have clearly focused quality improvement roles and responsibilities. The service constantly explores ways to create more capacity for improvement. It builds capacity through developing talents and skills providing opportunities for shared and distributed leadership and nurturing expertise in its staff.

Illustration QI Level 2

Managers at service and authority levels do not consistently support and challenge the quality of service delivery. Roles and responsibilities for all service managers do not focus sufficiently on setting performance targets and challenging staff to improve their performance. Service managers at all levels do not place sufficient emphasis on monitoring performance and outcomes and supporting continuous improvement. There is no emphasis on achieving excellence.

Service managers are aware of a range of examples of good practice within the profession but have not yet established a strategic overview. They seldom look externally to identify or consider new approaches. The service has conducted a number of self evaluation exercises and service reviews but these lead to improvements in only a few instances. Innovative practice is not systematically identified, supported, evaluated or disseminated across the service. Service managers do not consistently celebrate examples of excellence or innovative practice. Service managers do not consistently manage change effectively and strategically and, as a result, the focus tends to be on often unrelated initiatives which are of varying degrees of importance and priority. Communication about change to staff is often insufficient to enable them to understand the reasons for or the anticipated benefits from implementing change.

Managers at service and authority levels discuss quality and continuous improvement on a fairly regular basis, but they do not consistently drive these forward. In the implementation of their remits they tend to focus on systems, functions and processes rather than on quality development or improved outcomes and impact. While the service has a plan for improvement and supports its implementation, it does not have a strategic approach to develop capacity for improvement. Staff generally work hard, but their talents and skills are not recognised and developed. Service managers meet regularly with staff teams as a group but this has little impact on cooperative working.

What is our capacity for improvement?

Global judgement based on evidence of all key areas, in particular, outcomes, impact, and leadership

This last of the high-level questions requires a global judgement based on evidence and evaluations of all key areas. In answering this question services should also take into account contextual issues such as impending retirements of senior staff and plans to restructure. They should also consider their ability to respond quickly to change and to be creative and innovative in the pursuit of excellence.

The service should be able to make a statement with the following components:

“The service is confident/not confident that the evidence and evaluation to date indicates that:

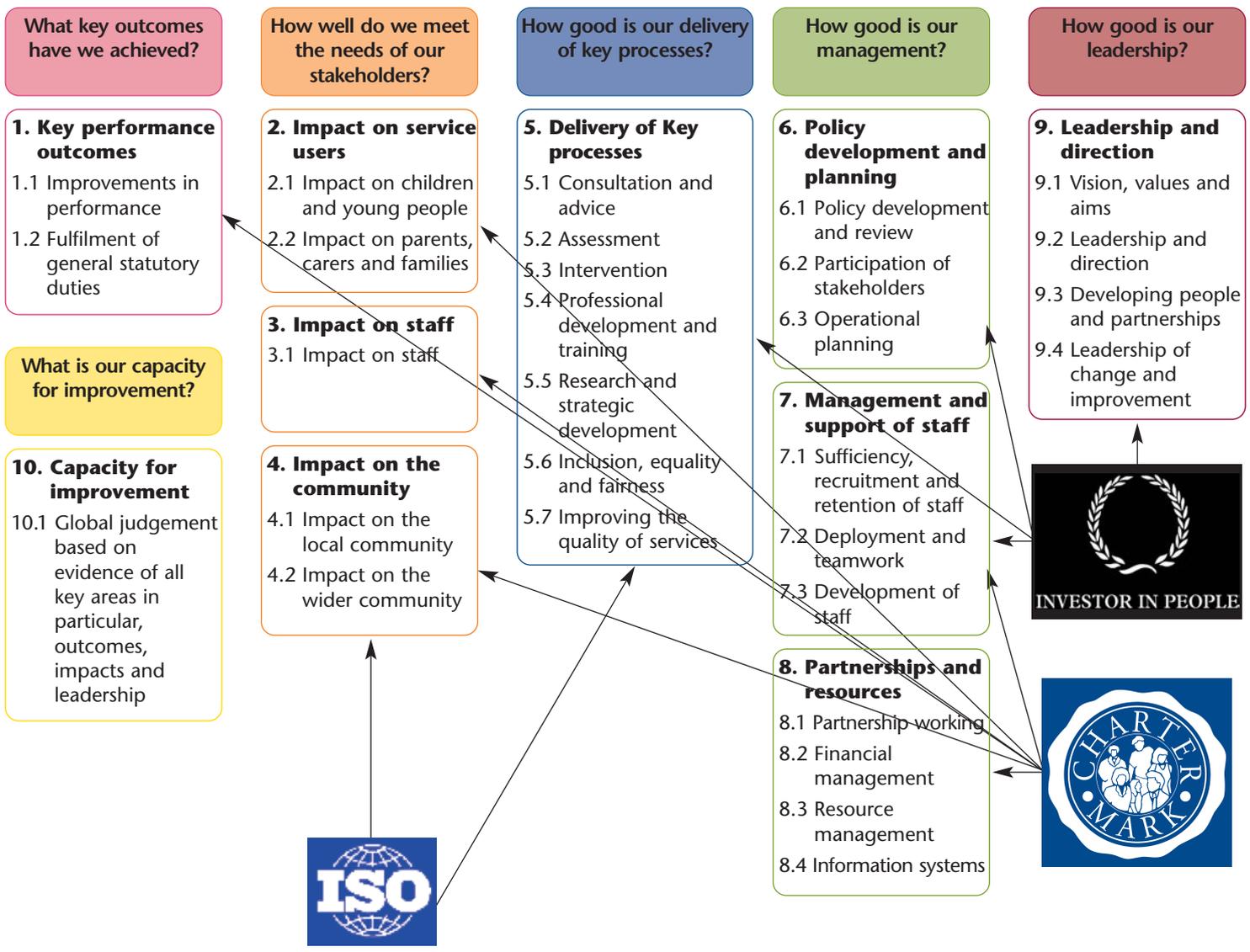
- overall improvements have been made to key outcomes and to impacts on stakeholders
- leadership and management are effective
- quality improvement arrangements are effective and the service has the capacity to continue improving.”

The level of confidence expressed for each component may be different and may contain some reservations or caveats, but should lead to an overall statement of confidence in the educational psychology service’s capacity to improve in relation to its functions.

For example, the statement could say, “The service is confident that the evidence and evaluation to date indicates that:

- improvements have been made to achieving almost all key outcomes, and, overall, improvements have been made to meet the needs of children and young people but the communication and involvement with parents, carers and families requires further improvement;
- leadership and management are currently effective but key posts will become vacant in the near future; and
- quality improvement arrangements are effective in all areas except in relation to wider community. The service has demonstrated the capacity to continue improving.”

Appendix 1 Relationship between Quality Management in Local Authority Educational Psychology Services and other quality frameworks



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