*Notes (to be deleted as required):*

1. *See* [*How to carry out an FOI self-assessment*](http://www.itspublicknowledge.info/ScottishPublicAuthorities/Self-AssessmentToolkit/Self-AssessmentToolkitIntroduction.aspx) *for more information about gathering and recording evidence*
2. *Boxes will expand as you type*
3. *You are welcome to customise the table to your authority’s document style: colours, font and add a logo to the header*
4. ***NB this document is A3 but it should print as A4 if you send it to an A4 printer***

**Authority** [authority name]

**Lead Officer** [name]

**Date completed** [date evidence gathering completed]

|  | **Questions** | **Evidence gathered** | **Strengths identified** | **Weaknesses identified / Areas for improvement** |
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|  | **Effective governance of the FOI function** |  |  |  |
|  | How does the authority demonstrate a commitment to openness and accountability? Is it clear where the strategic responsibility for achieving those aims lies within the organisation? |  |  |  |
|  | What actions are taken – and when – to ensure all staff understand their role and responsibilities in relation to FOI compliance? |  |  |  |
|  | How well are the risks associated with non-compliance documented and managed? Is there an understanding of the relationship between FOI and other functions, and the impact of non-compliance on the authority’s overall reputation? |  |  |  |
|  | What mechanisms are in place for reporting and responding to issues and risks arising in relation to FOI performance, such as staff absence? Is there the capacity and readiness to reallocate resources to ensure compliance? |  |  |  |
|  | **Robust performance management** |  |  |  |
|  | What targets are set for ensuring timely responses to requests for information and requests for review? Does the authority only measure against statutory timescales for the final response, or are other stages also recorded? |  |  |  |
|  | How is performance against targets measured and recorded? How often, and by whom? Are all missed targets reported, or are thresholds or other mitigating factors considered?  |  |  |  |
|  | How often is performance reported to senior management? What level of detail is provided, and are significant trends and issues highlighted? Are the reports intended for information only, or do they recommend actions to be taken? |  |  |  |
|  | Where actions are required to resolve identified issues, how are these put into place and how is progress monitored? Who is responsible for ensuring these actions are completed? |  |  |  |
|  | Does the authority submit statistics to the Commissioner on time every quarter? Are there any formal (e.g. written) procedures in place for collating, checking and submitting the statistics? |  |  |  |
|  | To what extent do senior managers understand why it is important for the authority to comply with the statutory requirements of FOI and how failure to do so affects the authority overall? What steps do senior managers take to communicate that message to all staff in the authority? |  |  |  |
|  | **Communication and collective responsibility** |  |  |  |
|  | Is there a consistent high level of understanding across the authority of the public’s right to access information? Do all staff understand their collective responsibility to ensure it is upheld? |  |  |  |
|  | Are there named individuals and/or teams within the authority with specific responsibilities in relation to responding to FOI requests? Are these roles well-known across the organisation? What procedures are in place for other members of staff to follow if they receive a request or have a query? |  |  |  |
|  | What reporting lines exist within and between departments through which FOI-related issues can be raised? What communication methods are available for staff to share information and knowledge to assist in responding to requests? |  |  |  |
|  | Are responses to previous requests or outcomes of reviews shared within the authority? How do staff know what has been asked for and what has been provided? What steps are taken to ensure consistent answers to similar requests, improving requesters’ experiences and avoiding duplication?  |  |  |  |
|  | Are procedures, roles and responsibilities relating to FOI documented, kept up-to-date and made accessible to all staff? Is FOI included in business continuity plans? Would compliance be sustained in the event of disaster or key staff absence? |  |  |  |
|  | **Investment in resources and training** |  |  |  |
|  | What training is provided to staff in relation to FOI? What guidance is available to them on an ongoing basis? Is training and guidance tailored to different roles or the same for all staff? |  |  |  |
|  | Are those with most responsibility for complying with FOI able to attend external events and training? How is this financed and documented? |  |  |  |
|  | Are the FOI training needs of individuals and the authority as a whole reviewed on a regular basis? What measures are in place to ensure that staff are aware of any changes to procedures? |  |  |  |
|  | Is knowledge about FOI distributed across several individuals/teams or concentrated in 1 or 2 key people? Are procedures accessible and understandable by a wide range of staff?  |  |  |  |
|  | How effective are the systems that are used to manage and record requests, responses and reviews? Are they accessible to all relevant staff members? What steps are taken, when possible, to make any required updates and changes? Are the systems compatible with the requirements for statistics to be submitted to the Commissioner? |  |  |  |
|  | Are FOI performance and staff training needs incorporated within personal development / annual appraisal processes? What other mechanisms are in place for identifying gaps in individual and organisational FOI capability? |  |  |  |

**Document control sheet**

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| **Document Information** |  |
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| **Summary of changes to document** |  |
| **Date** | **Action by**  | **Version updated**  | **New version number**  | **Brief description**  |
|  | *(initials)* | *(e.g. v01.25-36****)*** | *(e.g. v01.27, or 02.03)* | (*e.g. updated paras 1-8, updated HOPI to HOOM, reviewed whole section on PI test, whole document updated, corrected typos, reformatted to new branding*) |
| 23/09/20 | BOW | 01.00 | 01.01 | New document created following approval of draft |
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