

**Guidance for  
External Reviewers of Career  
Information Advice and Guidance  
services delivered by Skills  
Development Scotland**

**A handbook for members of Education Scotland  
External review teams**

**May 2015**

<b>Contents</b>	<b>Page</b>
<b>1 Introduction</b>	<b>1</b>
<b>2 PRAISE framework</b>	<b>2</b>
<b>3 Pre-review team meeting</b>	<b>3</b>
<b>4 The external review week</b>	<b>4</b>
<b>5 Reviewer remits</b>	<b>5</b>
<b>6 Reviewing group or one-to-one activities</b>	<b>7</b>
<b>7 Effective delivery of group or one-to-one sessions</b>	<b>8</b>
<b>8 Meeting with customers</b>	<b>10</b>
<b>9 Engaging with staff</b>	<b>12</b>
<b>10 Identifying, exploring and recording excellent practice</b>	<b>14</b>
<b>11 Agreeing team evaluations</b>	<b>15</b>
<b>12 Meeting schedule : information for review coordinator</b>	<b>16</b>
 <b>APPENDICES</b>	
<b>Appendix 1 The evidence form</b>	<b>19</b>
<b>Appendix 2 Indicative sources of data and information for <i>Pre-visit analysis</i></b>	<b>20</b>
<b>Appendix 3 Grades used in reporting</b>	<b>21</b>
<b>Appendix 4 Summary of Significant Evidence form</b>	<b>24</b>
<b>Appendix 5 Record of External Review Findings</b>	<b>25</b>
<b>Appendix 6 Group Observation Record</b>	<b>33</b>
<b>Appendix 7 Guidance of reviewing equality and diversity</b>	<b>35</b>
<b>Appendix 8 Guidance for reviewing safeguarding</b>	<b>39</b>
<b>Appendix 9 Curriculum for Excellence</b>	<b>42</b>

## 1. Introduction

The purpose of this guidance is to assist you in carrying out the external review of Skills Development Scotland (SDS), Career, Information, Advice and Guidance (CIAG) services. It describes the external review process as well as reviewer activities. It provides advice on carrying out your remit. It is essential that you are familiar with the publication:

- *External quality arrangements for Career Information Advice and Guidance services delivered by Skills Development Scotland January 2014*

This provides more information about the context for external reviews. In particular, Annex 1 of the publication sets out the Quality Indicators to which you should refer.

You should bear in mind some key features underpinning the development of the 2014-18 external quality arrangements for external review:

- three high level principles of Outcomes and Impact, Service Delivery and Leadership and Quality Culture;
- integrated, intelligence-led approaches to evaluation, involving:
  - external review
  - aspect reports;
- approaches to proportionality in external review;
- involvement of a nominee within external review;
- continued professional engagement between reviewers and staff; and
- continued focus on customers.

Review activities include:

- starting with self-assessment reports and action plans;
- focusing on outcomes and impact on customers (including those from protected characteristic equality groups: see Appendix 6) and other stakeholders;
- reduced focus on scrutiny of documents, processes and procedures;
- listening to customers and staff explaining and discussing their practices and experiences, rather than questioning them to a prepared agenda; and
- agreeing evaluations.

Reviewers should apply good practice in relation to equality and diversity in all aspects of the external review. This includes seeking information and views from a diverse range of customers, key stakeholders and staff, as well as exploring how the service responds to the spirit and requirements of equalities legislation.

## 2. PRAISE framework

The *PRAISE* framework has been developed as a best practice guide to inspection and review approaches, particularly in relation to professional dialogue with staff and dialogue with customers. The principles are set out below:

### Best Practice PRAISE Framework for inspections and reviews

**Purpose** – being clear about the overall purpose of the inspection/review and retaining this throughout. Creating a shared agenda with staff in the organisation and amongst members of the inspection/review team.

**Relationships** – building and maintaining constructive relationships throughout the process as the basis of a high quality inspection/review.

**Awareness** – maintaining a high level of awareness of the context in which staff are operating, of their feelings and reactions to the process and of the inspector's own approach and its impact.

**Information gathering** – careful inquiry to gather and analyse evidence. Retaining an objective stance, testing assumptions and assimilating data before evaluating.

**Sharing information** – communicating thoroughly throughout the process to prepare and inform staff. Encouraging staff to be open in providing their perspective and sharing findings as the inspection/review progresses.

**Enabling** – treating people with respect, engaging them in professional dialogue, recognising their efforts and sharing findings in a constructive way to encourage ownership and learning to take place.

### **3. Pre-review team meeting**

It is mandatory that you attend a pre-review team meeting with the Managing Inspector (MI) approximately two weeks in advance of the external review week. The agenda includes:

- analysis of the pre-review commentary - information about the local authority area gathered from visits and other sources;
- role of the nominee;
- the scope of the external review;
- analysis of performance data and trends, including for customers from protected characteristic groups (see Appendix 6);
- allocation of reviewer remits including lead writer roles;
- allocation of meetings based on the draft schedule of discussions;
- planning observations of group or one-to-one activity, based on sampling requirements;
- discussion about how to approach the generic review of observations for group or one-to-one activities;
- how to use documentation to record evidence; and
- how to harvest information from Record of External Review Findings (RERF) for lead-writing.

Equipment such as laptops and data sticks which you require on loan from Education Scotland will be provided.

## 4. The external review week

The normal pattern of scheduled activities is set out below. This may be adapted to accommodate particular circumstances.

Monday	1030 hrs	Review team meets Area Manager and local management team
	1100 hrs onwards	Observations of group or one-to-one activities; professional dialogue and meetings with customers, staff and managers
	1645–1730 hrs (approximately)	Review team meeting – share initial findings; discussion with nominee; consideration of excellent practice
Tuesday	0900 hrs onwards	Observations of group or one-to-one activities; professional dialogue and meetings with customers, staff and managers
	1645–1730 hrs (approximately)	Review team meeting – share initial findings; discussion with nominee; consideration of excellent practice
Wednesday	0900 hrs onwards	Observations of group or one-to-one activities; professional dialogue and meetings with customers, staff and managers
	1645–1730 hrs (approximately)	Review team meeting – share initial findings; discussion with nominee; consideration of excellent practice. Arrangements for Thursday and Friday
Thursday	0900–1730 hrs	Review team evaluation, writing, moderation – in Education Scotland office space or hotel space (nominee and excellent practice reviewer not present)
Friday	1100 hrs	MI, one colleague (normally TM1) share and discuss review findings with area manager and management team. Share provisional grades with Area Manager

Discussions and meetings are normally scheduled for 45-60 minutes although they may in practice take less time.

Note that external review activities finish by 16.45 hrs on Wednesday. It is therefore imperative that you are confident in your evidence base by that time. The Thursday meeting is held elsewhere and normally it is only the MI and one colleague who attend on the Friday.

## 5. Reviewer remits

The scope of the external review is shared with the area manager by the MI. This determines the remit and programme planned by the MI for each reviewer.

In a typical external review your remit involves a number of meetings (about eight) and a number of group or one-to-one sessions. You also have some telephone discussions with key external contacts. You have professional dialogue with staff and with customers and partners. You may request and study documentation to confirm aspects of your discussions, but only where you feel this is necessary. You meet customers in group or one-to-ones and also in the context of group activities. You may be a **lead writer**, either on your own or with another colleague, taking responsibility for coordinating evaluations and writing up findings on specific elements. You complete records of group sessions using Group Observation Records (GOR) and of other evidence using Evidence Forms (EFs) and share your findings with the team. Where previous intelligence indicates potential risk or excellence, or where there are specific themes in relation to the local authority context, you may be asked to use additional quality indicators, and one or more reviewers may be given a more focused remit, for example on a particular type of activity.

External reviews also serve purposes additional to the main evaluative activity, and in this context reviewers may:

- gather and record evidence where the contributes to other types of scrutiny activities, for example Community Learning and Development provision; and
- explore the effectiveness of the safeguarding procedures.

### The team

The team size varies in proportion to the size of the service provider being reviewed. The Managing Inspector (MI) is always an HMI, and the team comprises a number of HMI, Assistant Inspectors (AI) and Associate Assessors (AA) as appropriate.

There may be, on rare occasions, an 'excellence reviewer' who focuses solely on evaluating examples of excellent practice, identified through the review process. Further details about this role can be found in this document.

Reviewers are expected to gather evidence for all core quality indicators during the first three days of the review. From the start of the review, some reviewers will also be allocated lead writer roles, either for one of the five overarching questions or for clusters of QIs. They will have oversight responsibility for ensuring that sufficient evidence is being gathered for their area of lead writer responsibility. From the third day of the review, lead writers concentrate on completing the evidence base for their particular areas of responsibility. Lead writers also have responsibility for completing the relevant sections of the RERF.

The SDS nominee will be a senior member of staff, who will attend evening meetings on the Monday, Tuesday and Wednesday. A primary aspect of this

person's role is to ensure that the review team have access to all available evidence.

## 6. Reviewing group or one-to-one activities

The MI will agree with you which group and one-to-one sessions to observe and the arrangements for conversations with customers and for meeting staff. Observations may take place at the beginning, middle or end of a group or one-to-one session. Visits to these sessions are unannounced, though you should always introduce yourself to the member of staff when you arrive.

You evaluate the effectiveness of group and one-to-one sessions in accordance with the themes in Element 5. It is not necessary to observe a full session. Observe activities and identify strengths and areas for development. Where appropriate, invite some of the customers to tell you about their learning experiences as they work or, in approximately 60% of observations, without the member of staff present. Record your evaluations on the GOR form. If your observations and discussions include significant points relevant to other QIs, note these also on the form or complete a separate EF as part of the evidence trail. Notebooks or loose paper **should not be used** during this process.

You should endeavour to hold a brief professional dialogue with the staff member immediately after the observation, or intimate to them when you will do this. In the professional dialogue that follows the observation, you exchange views on the session's activities observed and together identify and explore reasons for areas of strength and areas for development. Your discussions will draw on the professional practice described in the next section. Specific themes to explore may emerge during the review week. Questions posed should be open ended such as:

- how did you feel the session went?
- can you tell me where this fits with overall development of career management skills?
- how do you assess progress in this area?
- I noticed that...any thoughts about that?
- how do you ensure all customers participate and engage in activities?
- how do you maintain your own skills and knowledge for example about labour market information?
- how do you ensure all customers take responsibility for their own career development, including more vulnerable customers or individuals from any of the protected characteristic groups?

You can also explore some wider issues such as professional updating, industry links and the availability, currency and use of specific resources. Additional evidence should be recorded using an EF, or within the GOR, if there is sufficient space.

You will probably only have essential documentation in advance, but in the course of professional dialogue it may be appropriate to ask to see particular items, for example to consolidate evidence of potential strengths or areas for development, or to demonstrate excellent practice.

## **7. Evaluating the effectiveness of the delivery of group or one-to-one activities**

Many activities and sessions may be one-off briefings or very short activities, and do not provide the range of opportunities to build relationships, or link as well with previous experiences. In one-off sessions or shorter engagements, the range of good practices listed here may not be evident. However, some activities involving a series of sessions should allow for a more planned and thoughtful approach.

An effective approach to delivery of group or one-to-one activities is central to creating an active and engaging experience that supports customer success. An active and engaging experience is one that motivates participants, enables them to develop their learning, acquire and apply new knowledge and skills and to participate in planning and reflecting on their own individual goals.

An effective approach to delivery of group or one-to-one sessions involves positive collaboration between and among staff and participants.

The following principles and practices apply to group or one-to-one activities in any context.

### **Planning the group or one-to-one activity**

Well-planned group or one-to-one sessions reflect the needs and interests of customers. They have clear and appropriate objectives that are understood by customers, and meet the needs of all customers. They are flexible in reacting to opportunities arising. They use opportunities well to promote positively equality of opportunity and diversity within the group, in preparation for the workplace. They create opportunities for customers to develop wider essential skills, including communication and working with others.

They:

- ensure sufficient time for activities and use appropriate resources.
- take account of customers' prior knowledge, skills, experience and individual differences.
- have appropriate pace and challenge.
- involve activities that support different abilities and facilitate engagement with activities.
- build upon previous experiences and link to other topics where appropriate.
- ensure customers are, as far as practical, actively engaged in negotiating approaches to undertaking group or one-to-one sessions.

### **Facilitating group or one-to-one sessions**

Effective group or one-to-one sessions enable all customers to achieve their potential. In effective group or one-to-one sessions:

- staff have expertise and use it well to motivate and engage participants;

- staff and participants have shared expectations of what is to be done achieved within the activity;
- relationships between and among staff and participants are positive and respectful;
- staff and participants work together to identify the need for and provide targeted support;
- participants are involved in activities which enable them to acquire and develop actively knowledge and understanding and skills for life, learning and work;
- participants apply (or consider how they would apply) their knowledge and skills in different contexts;
- participants take responsibility for their own activities and support each other; and
- participants and staff work together to plan, create and reflect on group or one-to-one activities.

Effective sessions begin with a clear introduction linking to previous sessions or prior learning. Learning intentions are made clear. They provide a sufficient variety of activities to support different abilities and learning preferences and the different speeds at which progress. They encourage participants to work independently. They encourage the development of collaborative approaches to develop learning where appropriate. Group or one-to-one activities enable staff and customers to check understanding and progress frequently through, for example, reflection on the work or targeted questioning.

Effective learning sessions make use of good quality resources and materials or ensure access to them. Resources and materials promote positive messages in terms of equality and diversity and staff use current technology well to support and promote learning.

Effective group or one-to-one sessions conclude by reflecting on what has been gained, where further work is required and what will follow.

### **Managing the learning environment**

Effective management of the group or one-to-one activity environment ensures that a positive and engaging environment is maintained, where participants feel safe, respected and included. All staff promote positive behaviour in all participants, including those with and without protected characteristics and share the responsibility for creating a positive ethos and climate of respect and trust.

Effective management of the environment ensures that equipment and facilities are fit for purpose and that accommodation and the physical environment ensures a stimulating environment for group or one-to-one activities.

## 8. Meeting with customers

You are likely to meet customers in both observations of group or one-to-one sessions and in small groups for discussion. Again use GORs and EFs in order to record the views of the customers.

As you put customers at their ease in preparation for discussion, check that they have been briefed and know who you are and why you are there. Be prepared to answer any questions they have, for example about what happens to the feedback they give to you. Customers should be clear that information, unless their express permission is given, will be anonymised.

Convey that the information and opinions they give you are valued and of key importance to the external review process. Customers are the experts on 'how it is for them', and this is what you want to know. Many aspects of the guidance on professional dialogue with staff are applicable to discussions with customers.

**Meetings with customers from an observed group or one-to-one session** will be quite brief, so should focus on the experience of customers in that group or one-to-one session. Customers will have views on:

- how well they are developing career management skills;
- the extent to which they are encouraged to reach personal goals and targets;
- how well their needs, goals and aspirations are being addressed;
- how well do customers take responsibility for their own development
- how well do customers influence group or one-to-one session approaches where appropriate;
- how well do customers learn from and with each other;
- the impact of their experience on their self-esteem and confidence in their wider lives; and
- how well do customers contribute to improving the quality of services.

Allow customers to lead the discussion as far as is practicable, prompting and stimulating their thoughts as necessary. Avoid closed questions, and allow individual experiences to be offered. Though you should avoid giving the impression that there are particular answers you are looking for, themes for discussion with customers may emerge as the review week progresses.

**Meetings with groups of customers** will generally be allotted a maximum of 45 minutes and may focus on particular QIs, following the MI's guidance. Set the scene by outlining the agenda you want to explore, and invite the group to add to the agenda if they wish. Allow the customers to lead the discussion as far as is practicable, prompting and stimulating their thoughts as necessary. Try to make sure that everyone puts forward their views, managing any dominant speakers tactfully.

## 9. Engaging with staff

Reviewers engage with staff in several different ways: after an observation of group or one-to-one sessions, in small groups and in individual meetings.

In the meetings not related to observations, the focus will be indicated by the MI. Apart from the local authority self-assessment reports and action plans you will not read extensive documentation in advance, so the discussion will be informed by the three key principles, the issues raised by the staff participant(s), and themes relating to the QIs with which you are working.

**In all cases the agenda should be mutually agreed with the staff.** You may wish to ask staff to show you documentary evidence in the course of your discussions, where this will help to provide evidence towards an evaluation. However, it may not be necessary to do so, and in any case you should not request large amounts of documentation.

All discussions with staff should take the form of **professional dialogue**. This is characterised by open and honest exchange, mutual respect and equity of status across different roles, and focuses on the best interests of customers. Follow the principles outlined in the PRAISE framework.

Record your discussion and summary evaluations on the EF.

### **Professional dialogue assumes that:**

- all parties are familiar with the language and concepts of the profession;
- no single participant will have all the answers but together we have a better chance of finding them; and
- all participants have the best interests of customers as the primary focus of their professional exchange.

### **Professional dialogue is facilitated by:**

- starting with a clear, shared agenda (with nothing hidden);
- starting with items that all parties will probably agree on; and
- starting where other participants are at and then gently leading them to consider wider, deeper or more complex issues.

### **Professional dialogue is characterised by:**

- mutual respect;
- equity of status in spite of different roles;
- working as equal partners towards common goals (especially quality improvement and enhancement);
- empathy;
- humility (no one knows everything or has the 'right' answer to everything);
- giving each speaker undivided attention;
- analytical and critical thinking;

- absence of any sense of threat or blame;
- reviewers sharing non-prescriptive examples of excellent practice;
- reviewers setting out options for improving or enhancing quality; and
- reviewers challenging preconceptions and any complacency with evidence or evaluations.

**Professional dialogue is about:**

- mutual learning and building the capacity of all participants (including the reviewer);
- the open exchange of information, ideas, perceptions, evaluations and views;
- responding to the input of others;
- supporting any assertions from either party with appropriate evidence and/or examples (including reference to documents and data where appropriate);
- developing a well-informed and shared understanding of the extent and causes of any strengths and weaknesses;
- developing a well-informed and shared understanding of effective strategies to address any issues;
- floating hypotheses and getting reactions;
- discussing plans to address any issues;
- challenging the thinking of others and having one's own thinking challenged; and
- reflecting back to others your understanding of what they have been telling you.

**Professional dialogue is intended to:**

- produce shared understandings and agreed conclusions (even if occasionally the conclusion is that parties need to agree to disagree).

## **10. Identifying, exploring and recording excellent practice**

Prior to external reviews, local authority areas will be asked to identify up to six examples.

On rare occasions an additional team member (normally an AA) may be added to each external review team to deal exclusively with examples of excellent practice. In these instances, this team member will be in the local authority area for as long as it takes to explore and fully triangulate the evidence for each example (between 1 and 3 days). This will normally include evaluating three different sources of evidence for each example submitted. All evidence should be recorded on EFs and left with the MI, together with a data stick containing the fully written up publishable text. The MI will work closely with the excellent practice reviewer in order to agree a suitable meeting schedule. Discussions of progress being made will be held on a daily basis during the normal team meeting schedule.

There is no need for this team member to attend the pre-review briefing day in advance of the review. Also, this reviewer will not participate in the writing day on the Thursday of the review week.

In almost all reviews, examples of excellent practice will be evaluated by the team members. They will carry out professional dialogue, triangulate evidence and write up one or two examples as part of their review duties.

## 11. Agreeing team evaluations

Sharing evidence and reaching agreed evaluations are crucial parts of the work of the review team. You contribute to a team meeting of about 45 minutes at the end of the day on Monday, Tuesday and Wednesday. This meeting is also attended by the nominee. At this meeting, evidence is exchanged about findings which relate to another lead writer's area of responsibility. An adapted evidence form is used for this. It is critically important that this evidence is clear, relevant and robust.

The review team spends Thursday together. You share evidence across the team and contribute to consensus on team evaluations. Lead writers finalise evaluations in given areas. The evaluations are normally moderated by an Assistant Director/Lead Officer. Finally, the team agrees provisional grades for the five high level questions and the global judgement for capacity for improvement

If possible, a short discussion is scheduled at the end of Thursday so that the whole team can reflect on and evaluate their experience. AAs receive feedback from the MI on their performance, and are subsequently invited to provide Education Scotland with feedback on their experience of the external review.

Activity on the Thursday is managed by the MI supported by another team member. It will typically be planned as follows:

- 0900 to 1030: finalising relevant lead writer area of RERF
- 1030 to 1100: collation of a single, composite RERF for use by the whole team
- 1100 to 1500: team discussion and confirmation of provisional grades
- 1500 to 1700: editing as per moderation discussion
- 1700 to 1715: evaluation of the external review team activity

Timings are approximate and there will be circumstances under which it may not be possible to adhere strictly to the above schedule. In such cases, the MI will clarify alternative timings.

Before leaving the review all evidence notes, data sticks and any other papers relating to the review need to be handed over in their entirety to the MI for safe and secure storage within Education Scotland. Any electronic files that are required should be provided on the Education Scotland data stick, and all other electronic files will require to be deleted from laptops. Education Scotland laptops should be returned.

## 12. Meeting Schedule

### Review activities and the three key principles

The local authority manager and nominee arrange the following review activities in conjunction with the Managing Inspector. You should make sure that the composition of your discussion groups reflects equality and diversity.

### Information

All members of the external review team will be present at the opening meeting on Monday at 1030 hrs.

### Proposed discussions:

Discussions with customers, staff and managers may be scheduled to take place between **Monday at approximately 1100 hrs and Wednesday at 1645 hrs**. All should be allocated one hour although, in reality, some may be shorter. The external review team will have a daily meeting at 1645 hrs, attended by the nominee. Group or one-to-one sessions observations will be carried out by reviewers over the three days, in addition to the discussions with managers, staff and customers.

### Nature of discussions:

In each of the discussions, **it is important to note that all 19 core quality indicators and any additional ones may be considered**, but the details below give an idea of the priority in each session.

### Customer profile:

Services are delivered to a range of individuals and these should be identified on the GOR, EF, or RERF.

### Agreeing evaluations:

On Thursday of the review week, team members will be writing, discussing, agreeing evaluations and provisional statements of effectiveness. The MI and a colleague will return to the service provider on Friday at approximately 1100 hrs to share and discuss the findings from the external review.

Key principle	Colour code
OUTCOME AND IMPACT	OAI
SERVICE DELIVERY	SD
LEADERSHIP & QUALITY CULTURE	LQC
CAPACITY FOR IMPROVEMENT	CFI

The following table indicates the linkages between each of the prescribed meetings to the 3 key principles which inform the global judgement in relation to Capacity for improvement. Although this is not prescriptive or exhaustive, it shows where particular meetings refer predominantly to the key principles. This can then be used to allocate a lead writer responsibility to each team.

#### Link of meetings to three key principles

	Theme of meeting	Format	OAI	SD	LQC
1.	<b>Briefing from SDS staff on arrangements relevant to the geographical area.</b>	Team briefing chaired by ES on area arrangements.	X	X	X
2.	<b>Effectiveness of strategic arrangements to coordinate and provide services across the geographical area.</b>	Meeting with Lead SDS manager/s.		X	X
3.	<b>Effectiveness of strategic arrangements on supporting and contributing to CPP priorities.</b>	Meeting with Lead SDS manager/s.		X	X
4.	<b>Effectiveness of strategic arrangements on coordinating the work of partner agencies.</b>	Meeting with Lead SDS manager/s.		X	X
5.	<b>Effectiveness of strategic arrangements to support people who have been made redundant, or who are at risk of redundancy. (PACE)</b>	Meeting with Lead SDS manager/s.		X	X
6.	<b>Effectiveness of strategic arrangements to meet needs of young people and provide opportunities for all</b>	Meeting with relevant SDS staff.		X	X
7.	<b>Effectiveness of strategic arrangements to enable access to services including outreach, equality and diversity, rural services.</b>	Meeting with relevant SDS staff.		X	X
8.	<b>Effectiveness of quality assurance and quality improvement arrangements on strategic planning and coordination of activities.</b>	Meeting with relevant SDS staff.			X
9.	<b>Effectiveness of strategic arrangements on supporting and contributing to CPP priorities.</b>	Meeting with CPP leaders	X	X	
10.	<b>Effectiveness of local arrangements on supporting and coordinating the work of partner agencies.</b>	Meeting with area partners from local agencies		X	
11.	<b>Effectiveness of delivery arrangements to meet the needs of school age customers (school staff). * No. of meetings profile dependent</b>	Site visit - Meeting with secondary school staff.	X	X	
12.	<b>Effectiveness of delivery arrangements to meet the needs of school age customers (school pupils). * No. of meetings profile dependent</b>	Site visit - Meeting with 2 focus groups of school pupils who are recipients of SDS delivered activities. 1 x S3,S4 and 1x S5,6	X		
13.	<b>Effectiveness of delivery arrangements to support job seeking activities. * No. of meetings profile dependent</b>	Site visit - Meeting with JobcentrePlus staff and/or other appropriate agency.	X	X	
14.	<b>Effectiveness of arrangements to support job seeking activities. * No. of focus groups profile dependent</b>	Site visit - Focus group with recipients of SDS	X		

		activities via JobcentrePlus or other appropriate agency.			
15.	<b>Effectiveness of CIAG delivered activities to support transition to further learning.</b>	Site visit - Meeting with service provider staff responsible for liaison with SDS.	<b>X</b>	<b>X</b>	
16.	<b>Effectiveness of CIAG delivered activities to support transition to further learning.</b>	Site visit - Focus groups with service provider customers who are/were recipients of SDS CIAG in schools and/or service provider: 2 groups with recent school leavers. 1 x FE and 1 x HE	<b>X</b>	<b>X</b>	
17.	<b>Effectiveness of CIAG delivered activities to assist young people (16 – 19 years old) who require more choices and more chances. *No. of focus groups profile dependent</b>	Focus group with young people who are/were receiving employability support	<b>X</b>		
18.	<b>Effectiveness of CIAG delivered activities and resources for adults (20 years +) within SDS Careers centres/outreach facilities. * No. of visits profile dependent</b>	Focus group with adults who are/were recipients of SDS delivered activities.	<b>X</b>		<b>X</b>

# Appendix 1

## Evidence form (EF)

<b>Area:</b>		<b>Reviewer:</b>	
<b>Date:</b>		<b>Reference no:</b>	

<b>Participants:</b>

<b>Activity: discussion, visit, documentation:</b>	
----------------------------------------------------	--

<b>Record of Findings</b>	<b>Core QI/s</b>

Record of Findings	Core QI/s

## **Appendix 2 Indicative sources of data and information for *Pre-visit analysis***

- Self assessment report (includes area context)
- Improvement Plan
- Local Authority results profile
- CPP Report (current and previous year)
- Risk Matrix Summary by school
- Risk Matrix Summary by post school and by centre
- School partnership agreements
- Links to SDS and My WoW websites
- Links to more recent evaluation & research i.e. PACE, My WoW
- Standard Operating procedures (SOPs) for School Service Offer, In Transition Service Offer; and 20+ Service Offer

## **Appendix 3 Grades used in reporting**

### **Grades used in reporting**

A common grading scale will be used in making judgements for organisational inspections:

- Grade 1 EXCELLENT – *Outstanding and sector leading*
- Grade 2 VERY GOOD – *Major Strengths*
- Grade 3 GOOD – *Important strengths with some areas for improvement*
- Grade 4 SATISFACTORY - *Strengths just outweigh weaknesses*
- Grade 5 WEAK – *Important weaknesses*
- Grade 6 UNSATISFACTORY – *Major weaknesses*

### **Global Judgements for capacity for improvement**

Grades will be awarded in the following 6 areas:

- Outcome and Impact
    1. How well are customers progressing and achieving relevant high quality?
    2. How well do we meet the needs of our stakeholders?
  - Service Delivery
    3. How good is our delivery of key services?
    4. How good is our management of service delivery?
  - Leadership and quality culture
    5. How good is our strategic leadership?
6. Global judgement based on evidence of all key areas, in particular Outcomes, Impact and Leadership.

## Grades are inter-related

The judgement of the overall capacity to improve will be influenced by the average gradings from the 5 high level questions, the outcomes and impact, context, leadership and a professional judgement on the organisation's capacity to continue to improve. Where any judgements are weak or unsatisfactory the global judgement for capacity for improvement is unlikely to be any better than good.

### Summary

<b>Excellent</b>	<i>Outstanding and sector leading</i>
<b>Very Good</b>	<i>Major strengths</i>
<b>Good</b>	<i>Important strengths with some areas for improvement</i>
<b>Satisfactory</b>	<i>Strengths just outweigh weaknesses</i>
<b>Weak</b>	<i>Important weaknesses</i>
<b>Unsatisfactory</b>	<i>Major weaknesses</i>

- An evaluation of **excellent** applies to provision which is sector-leading. Participants' experiences and achievements are of a very high quality. An evaluation of *excellent* represents an outstanding standard of provision which exemplifies very best practice and is worth disseminating beyond the current provision. It implies that very high levels of performance are sustainable and will be maintained.
- An evaluation of **very good** applies to provision characterised by major strengths. There are very few areas for improvement and any that do exist do not significantly diminish participants' experiences. While an evaluation of *very good* represents a high standard of provision, it is a standard that should be achievable by all. It implies that it is fully appropriate to continue to make provision without significant adjustment. However, there is an expectation that the provider will take opportunities to improve and strive to raise performance to excellent.
- An evaluation of **good** applies to provision characterised by important strengths which, taken together, clearly outweigh any areas for improvement. An evaluation of *good* represents a standard of provision in which the strengths have a significant positive impact. However, the quality of participants' experiences is diminished in some way by aspects in which improvement is required. It implies that the provider should seek to improve further the areas of important strength, but take action to address the areas for improvement.
- An evaluation of **satisfactory** applies to provision characterised by strengths which just outweigh weaknesses. An evaluation of *satisfactory* indicates that participants have access to a basic level of provision. It represents a standard where the strengths have a positive impact on participants' experiences. However, while the weaknesses will not be important enough to have a substantially adverse impact, they do constrain the overall quality of participants' experiences. It implies that the provider should take action to address areas of weakness while building on its strengths.

- An evaluation of **weak** applies to provision which has 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 participants' experiences in substantial ways. It implies the need for prompt, structured and planned action on the part of the provider. Where a grading of weak is given, it will lead to a follow up review in this area typically one year later.
- An evaluation of **unsatisfactory** applies when there are major weaknesses in provision requiring immediate remedial action. Participants' experience are at risk in significant respects. In almost all cases, staff responsible for provision 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 other staff or agencies in or beyond the immediate support given by the provider. Where a grading of weak is given, it will lead to a follow up review in this area typically one year later.

**Appendix 4 Summary of Significant Evidence Form (SEFF)**

**SUMMARY OF SIGNIFICANT EVIDENCE FORM**

<b>Area:</b>		<b>Reviewer:</b>	
<b>Date:</b>		<b>Reference no:</b>	

<b>FAO (LW initials)</b>	<b>QIs/themes</b>	<b>Record of Findings</b>

## Appendix 5 Record of Review Findings (RERF)

QIs are colour coded to indicate reference to Key Principles in the quality framework.

Outcomes & Impact	
Service Delivery	
Leadership & Quality Culture	
Capacity to Improve	

Element 1: Key Performance Outcomes	
1.1	<p><b>Improvements in performance - <i>How effective are the area team at achieving and maintaining high levels of service delivery?</i></b></p> <ul style="list-style-type: none"> <li>• Achievement of aims, objectives, targets and key performance indicators</li> <li>• Progress on key aims and objectives</li> <li>• Performance data and measures showing improvement against agreed targets over a three-year period</li> </ul>
1.2	<p><b>Adherence to statutory principles and fulfillment of statutory duties - <i>How well do area teams adhere to statutory principles and guidance?</i></b></p> <ul style="list-style-type: none"> <li>• Relevant legislation</li> <li>• Relevant directives and regulations</li> <li>• Requirements of statutory bodies</li> <li>• Meeting expectations regarding access, equality and diversity</li> </ul>

Element 2: Impact on Customers	
2.1	<p><b>Impact on Customers - <i>How well do customers make progress and achieve individual outcomes?</i></b></p> <ul style="list-style-type: none"> <li>• Accessibility and flexibility of services</li> <li>• Relevance and range of service to needs</li> <li>• Customer progress on working towards achieving individual goals</li> <li>• Preparation for employment and/or further learning</li> <li>• Customer participation and satisfaction</li> </ul>

### **Element 3: Impact on Staff**

#### **3.1 Impact on staff - *How motivated, supported and enabled are staff?***

- Staff motivation and engagement to achieve service aims and objectives
- Communication and direction of priorities for staff
- Staff involvement with planning
- Impact of CPD on professional practice
- Adoption of best practice
- Team working and collaborative working

### **Element 4: Impact on the community**

#### **4.1 Impact on the community - *How well do services meet the needs of relevant communities and other local and national stakeholders?***

- Responsiveness to priorities at local and national level
- Links and partnerships with appropriate community and voluntary organisations, and other providers
- Stakeholder satisfaction with services
- Stakeholder participation in the design and evaluation of services

### **Element 5: Delivery of key processes**

#### **5.1 Meeting customer needs - *How well do services meet the needs of all customers?***

- Range of services and resources
- Arrangements to meet the needs of specific groups
- Delivery approaches
- Customer feedback

5.2	<p><b>Relationships with customers - <i>How effective are relationships with customers?</i></b></p> <ul style="list-style-type: none"> <li>• Quality of relationships between staff and customers</li> <li>• Customers and stakeholder feedback</li> <li>• Use of resources and services by customers</li> </ul>
5.3	<p><b>Accessibility, flexibility and inclusion - <i>How accessible, flexible and inclusive are services?</i></b></p> <ul style="list-style-type: none"> <li>• Identifying and responding to needs</li> <li>• Range and flexibility of delivery approaches</li> <li>• Use of resources to increase accessibility</li> <li>• Promoting and targeting of services</li> <li>• Customer and stakeholder feedback</li> </ul>
5.4	<p><b>Delivery of services - <i>How well are services delivered?</i></b></p> <ul style="list-style-type: none"> <li>• Planning of services</li> <li>• Application of professional knowledge and use of resources, including the use of labour market intelligence</li> <li>• Appropriateness and range of delivery approaches and resources</li> <li>• Promotion of independence and confidence in developing career management skills</li> <li>• Delivery environment</li> <li>• Customer and stakeholder feedback</li> </ul>
5.5	<p><b>Reflection and professional discussion - <i>How well do staff reflect on service delivery to improve services?</i></b></p> <ul style="list-style-type: none"> <li>• Arrangements for quality assurance and improvement</li> <li>• Use of feedback from customers and stakeholders</li> <li>• Reflective practice leading to improvement and enhancement of services</li> <li>• Sharing and adoption of effective practice</li> <li>• Effectiveness of action taken</li> </ul>

**Element 6: Operational Management**

**6.1 Policy review and development - *How effective is policy review and development?***

- Operational planning and links to organisational strategies
- Range and appropriateness of policies
- Coherence with national policy
- Links to vision, values and aims`
- Managing, evaluating and updating policies

**6.2 Stakeholder involvement in planning and development - *How well do stakeholders and customers participate in the development and planning of services?***

- Communication of plans and service objectives to key stakeholders
- Involvement of staff, customers and other stakeholder in planning
- Impact of actions taken as a result of customer and other stakeholder feedback

**6.3 Planning for improvement - *How effective is planning of key processes?***

- Clarity of key processes, responsibilities and targets
- Managing risk and effective use of resources
- Monitoring and reviewing progress and effectiveness of new developments

## **Element 7: Management and support of staff**

### **7.1 Management and deployment of staff - *How well does the organisation manage and deploy staff?***

- Clarity of staff roles and responsibilities
- Recruitment, selection, induction, deployment and retention of staff
- Qualification and experience of staff
- Individual performance management

### **7.2 Career-long professional development - *How well do staff participate in effective professional learning?***

- Identification of staff development and training needs
- Professional development
- Support for training and development
- Staff and partners participation in CPD activity
- Effectiveness and impact of training and development

## **Element 8: Partnerships and Resources**

### **8.1 Partnership working - *How well does the organisation work with partners to improve outcomes for customers?***

- Strategic links and collaborative arrangements with partners
- Collaboration and arrangements to support customers
- Responsiveness to government priorities and requirements of other agencies
- Involvement of partners and stakeholders in planning provision and transitions

**8.2 Financial management - *How effective is the organisation's financial management?***

- Financial management overview and risk management
- Cost-effective delivery linked to strategic aims and objectives
- Collaborative and joint commissioning arrangements
- Financial reporting arrangements
- Providing best value

**8.3 Resource management - *How effective is the organisation's resource management?***

- Alignment with strategic aims and objectives
- Planning, deployment and monitoring of resources
- Sufficiency, accessibility and adequacy of resources
- Sustainable use of resources

**8.4 Knowledge and information management - *How effective is the organisation's knowledge and information management in supporting service delivery?***

- Use of management information
- Organisational records management policies, supporting procedures and guidance
- Compliance with statutory requirements
- Sharing of appropriate data with partners
- Linkages between functional areas and sharing of information
- Processes for analysing, evaluating and using information

**Element 9: Strategic Leadership****9.1 Vision, values and aims - *How appropriate and influential are the organisation's visions, values and aims?***

- Clarity, comprehensives and responsiveness of the organisation's vision, values and aims
- Responsiveness to local, national and international policy directives
- Staff understanding, commitment and engagement
- Promotion of positive attitudes to social and cultural diversity
- Promotion of positive attitudes towards sustainability

**9.2 Leadership and direction - *How effective is leadership for partnership working and service delivery?***

- Vision and direction of the organisation's services
- Strategies for improvement
- Team leadership
- Involvement and motivation of staff
- Strategic links with partners/stakeholders
- Leadership of collaborative arrangements

**9.3 Leading and developing people - *How well do leaders develop and lead people***

- Leadership of teams and individuals
- Development of leadership capacity

9.4	<p><b>Leadership of innovation, change and improvement - <i>How effective is leadership for innovation and change?</i></b></p> <ul style="list-style-type: none"> <li>• Vision and direction</li> <li>• Staff commitment to a culture of innovation and change</li> <li>• Action planning for innovation and change</li> </ul>
9.5	<p><b>Securing improvement of quality and impact of services - <i>How well do leaders secure improvement of quality and impact of services?</i></b></p> <ul style="list-style-type: none"> <li>• Involvement of customers' and staff in enhancing customers' experiences and outcomes</li> <li>• Impact of self-evaluation and action planning for improvement</li> <li>• Improvement and enhancement trends</li> </ul>
<b>Element 10: Capacity for improvement</b>	
10.1	<p><b>Capacity for improvement (Global statement based on evidence of all key areas, in particular outcomes, impact and leadership.) – <i>What is the capacity for improvement?</i></b></p> <ul style="list-style-type: none"> <li>• Overall judgement of evaluations of all mandatory quality indicators</li> <li>• The organisation's internal or external context</li> <li>• Confidence in the organisation's capacity to continue to improve</li> </ul>

## Appendix 6 Group Observation Record (GOR)

### CIAG Group Observation Record (GOR)

Local authority area		Date & Time	
Group title		HMI / AA	
Topic		Reference	GOR/
No. participants		Location	

Strengths	Areas for Development	QIs

### Additional information from other relevant quality indicators

How well are participants progressing and achieving relevant, high quality outcomes?	
Strengths	Areas for Development

How well are services managed and delivered ?	
Strengths	Areas for Development

How well is the area team led and how well is it enhancing the quality of its services for customers and stakeholders?	
Strengths	Areas for Development

Summary of professional discussion

## Appendix 7 Guidance on Reviewing Equality & Diversity

### 1. General guidance

Reviewers should continue to consider equality and diversity issues within three areas.

- ***A culture of equality and diversity:*** reviewers should evaluate the extent to which equality and diversity is promoted and embedded in all operations and activities.
- ***Group or one-to-one activity:*** reviewers should evaluate how well staff plan for equality and diversity and promote it in their delivery and assessment with individual groups. Reviewers should also consider how well the provision meets the needs of learners, communities and stakeholders in terms of equality and diversity.
- ***Legislation:*** reviewers should not judge whether or not a service provider is compliant, for this is the remit of Equality and Human Rights Commission (EHRC). However, reviewers may comment on extent to which service providers have taken steps to meet the requirements of the Equality Act and associated general and specific duties.

Reviewers should apply good practice in relation to equalities in all aspects of the external review. This includes seeking information and views from a diverse range of staff and customers, as well as exploring how the service provider responds to the spirit and requirements of equalities legislation.

### 2. Relevant legislation

Reviewers should familiarise themselves with current equalities legislation, in summary below.

The Equality Act came into force on 1 October 2010. The new Act introduces a **single public sector equality duty** which applies to all *protected characteristics*, which are:

- age;
- disability;
- gender reassignment;
- marriage and civil partnership;
- pregnancy and maternity;
- race;
- religion or belief;
- sex; and
- sexual orientation.

### **General duty or public sector duty (PSED)**

The general duty has three needs. It requires service providers in the exercise of their functions, to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010.
- advance equality of opportunity between people from different groups, considering the need to:
- remove or minimise disadvantages suffered by people due to their protected characteristics;
- meet the needs of people with protected characteristics;
- encourage people with protected characteristics to participate in public life or in other activities where their participation is low; and
- foster good relations between people from different groups, tackling prejudice and promoting understanding between people from different groups.

In order to demonstrate due regard, institutions must consider the three needs of the general duty when making decisions, for example, when:

- developing, evaluating and reviewing policies;
- designing, delivering and evaluating services, including education provision; and,
- commissioning and procuring services from others.

To comply with the general duty, institutions may treat some people more favourably than others, as far as this is allowed by UK and European anti-discrimination law. The general duty also recognises that disabled people's requirements may be different from those of non-disabled people. Service providers and HEIs are required

to take account of disabled people's impairments and must make reasonable adjustments to accommodate these.

## **Scottish Specific Duties**

In Scotland, the general PSED duty is underpinned by specific duties set by the Scottish parliament. These specific duties commenced on 27 May 2012. The specific duties aim to help service providers to better meet the general duty. They are designed to help develop evidence-based policies and practices, improve transparency and accountability, and deliver better outcomes for everyone in Scotland. It is important to note that institutions must meet both the general duty and the specific duties – it is not enough to meet the specific duties alone.

To meet the specific duties, Scottish service providers will need to:

- report on progress on mainstreaming the general duty into all functions;
- develop and publish a set of equality outcomes that cover all protected characteristics (or explain why not all protected characteristics are covered);
- assess the impact of policies and practices against the needs of the general duty;
- gather and use information on employees;
- publish gender pay gap information;
- publish statements on equal pay for gender, race and disability;
- have due regard to the general duty in specified procurement practices; and
- publish information in a manner that is accessible.

## **Appendix 8 Safeguarding**

### **Safeguarding: Education Scotland's code of good practice**

A code of good practice for Education Scotland staff to protect children, young people, protected adults and to safeguard Education Scotland staff, including Assistant Inspectors, Associate Assessors, Lay Members and Development Officers working for Education Scotland. It applies to all work carried out on behalf of Education Scotland, including inspections and reviews. This code underpins Education Scotland's Safeguarding policy.

In carrying out their duties, each member of staff must take account of their responsibilities in ensuring children, young people are safe and get the help they need.

#### **Things you must do**

- Treat all children, young people and protected adults with respect.
- Ensure that your own conduct is always an example of good practice.
- Ensure that you are not alone with a child, young person or protected adult during your inspection/review activities and that you are at least within sight or hearing of others.
- Respect the rights of individuals to have their privacy and dignity assured.
- Remember that someone else might misinterpret your actions, no matter how well-intended.
- Recognise that caution is required if you are discussing sensitive issues with children, young people and protected adults or their parents/carers.

Be aware other Education Scotland staff, be vigilant and act to help them keep themselves and children, young people and protected adults safe. Be prepared to challenge their actions.

- Operate within Education Scotland's Code of Practice and Safeguarding Policy as well as the procedures of the establishment, service, Council or organisation being visited.
- Record a report of any incident/disclosure, detailing, where possible, exactly what was said and recording times and individuals involved.

## **Things You Must Not Do**

- Have inappropriate physical contact with children, young people and protected adults, including 'caring' physical contact (eg a hug).
- Encourage inappropriate attention-seeking behaviour.
- Speak to a child, young person or protected adult in an inappropriate way or make suggestive/ derogatory remarks or gestures in their presence.
- Draw conclusions or make judgements about others without checking facts.
- Exaggerate or trivialise abuse issues.
- Discuss personal issues about a child, young people and protected adults or their family casually with others.
- Rely on your good name or that of Education Scotland to protect you from scrutiny of your conduct.
- Think it would never happen to you.
- Take a chance when informed common sense, policy and practice suggest another more prudent approach.

## **In all cases**

- Keep up to date notes, record the facts as soon as possible and in the same working day: report the facts as per the guidance in this good practice guide.
- You must pass on the information, you must not investigate and you cannot ignore.

## **What To Do**

If a child, young person or protected adult talks to you about abuse by someone else:

- Advise the individual that you must pass the information on.
- Avoid asking leading questions or investigating.

**If you suspect a child, young person or protected adult is being abused, emotionally, physically or sexually, then, in line with Education Scotland's Safeguarding policy, the information must be passed on.**

For safeguarding concerns arising during inspection, the Managing Inspector should ensure that the concern is brought to the attention of the head of establishment/service/the EA/governing body as appropriate. The establishment's /service's/organisation's own safeguarding/child protection policy will then operate. (Where the head of the establishment /service is the subject of the allegation, then the EA/governing body should be informed.) Part B of the safeguarding form should be completed.

For safeguarding concerns arising from all other Education Scotland activity, staff should alert their line manager and/or Education Scotland designated Lead Officer.

**If you receive an allegation about any adult or about yourself:**

- Alert your Managing Inspector (for AAs) or line manager (for HMI) immediately.

**If you receive an anonymous allegation:**

- Record in writing the words used, as far as possible, where the allegation is received by telephone, or retain the paper where this is received in written form;
- Report the matters immediately to your line manager/the Managing Inspector who will follow the desktop instructions available in each office; and
- In the case of an anonymous allegation made within an inspection, the Managing Inspector should be informed and should arrange to pass the information to the head of establishment/service/the EA/governing body as appropriate. Part B of the safeguarding form should be completed.

## **Appendix 9 Curriculum for Excellence**

All staff involved in supporting and educating young people should be aware of the general principles of Curriculum for Excellence. Where practical, work with schools or colleges should be planned in such a way as to align with the principles. The planned activities and resources should take account of and build on other learning. Any significant progress or achievements should be recorded and shared with school or college staff. As far as practical, all staff supporting young learners should coordinate their work around the needs of individuals. They should share appropriate information to help young people make good progress in developing their career management skills and preparing for the next steps in learning or work.