

Foreword

Cyril Hellier, Co-ordinator

Accountability has become a significant issue for Psychological Services in the recent past as local government has increasingly been subject to the need to justify itself. This has come about as a result of political decisions. Changing the political backdrop has not removed the focus on accountability but has substituted the means by which judgements can be made. Providing effective services and value for money are not new aspirations for psychologists working in a local government setting. However, the increasing trends of self-evaluation and the pursuit of evidence to substantiate conclusions have become the focus of administrators and managers in education and related services. Best Value, a concept from the commercial world, is now the order of the day across all 32 councils. As a result, all practising educational psychologists are likely to have heard of the concept and to be considering, to some extent, its relevance to the delivery of their services. There are likely to be a diverse range of opinions about the subject, ranging from cynicism to qualified acceptance.

Nine colleagues elected to develop their understanding of Best Value with a desire to inform themselves and the wider profession. The overall group included recently trained colleagues, principal grades and all in between. They set out to outline the key concepts of Best Value with particular reference to their application to Psychological Services and to examine the process which might be applied to services in a Best Value review. They also sought to illustrate the process of Best Value through information gained from Psychological Services which had undergone or were about to undergo a Best Value review. In addition they hoped to provide a detailed guide to the performance indicators in the recently published document, 'Quality Assurance in Education Authority Psychological Services' (Mackay, 1999), through listing ways in which services can evidence their practice. Finally they agreed to develop staff development presentation materials encompassing the key elements of the above.

As a result, three subgroups focused upon different aspects.

The first, including **Peta Barber, Laura Ann Currie and Peter Kaye (Highland, North Lanarkshire and Perth and Kinross respectively)**, considered the background to Best Value and provided an overview.

The second subgroup, including **Shona Crawford, Shona Isbister and Gordon Trahar (North Lanarkshire, West Dunbartonshire and North Lanarkshire respectively)**, identified 3 different Psychological Services in order to provide reflections by those actively involved in the process so as to illustrate issues in practice. Three principal psychologists were interviewed and asked to describe how they had approached Best Value. In addition, in a second Local Authority, the same structured interview with a senior and main grade psychologist was conducted to elicit views on the Best Value process from non-management personnel.

A third subgroup included **Fergal Doherty, Roslyn Redpath and Chris Scott (East Renfrewshire, Renfrewshire and Fife respectively)**. It aimed to encourage Psychological Services to articulate service structures and practice within the context of both the performance indicators presented in the recently published quality assurance document *and* of Best Value. The framework derived offers the opportunity for practice and planning within a service to be mapped onto three types of measurement. These give information under the three headings of compliance, quantitative and qualitative.

The overall experience for the group was of shared learning of a topic which from the outset was relatively unfamiliar to all. The conclusions reached could not possibly be prescriptive for individual services. However, they raise issues with regard to the reaction to change, increasing standardisation of Psychological Services and the interface between the service and service users. They suggest that although much of the language used in Best Value is the language of business management and quality assurance, the underlying principles are already familiar to the work and practice of a psychologist. An applied psychologist has to have the ability and skills to think critically; to reflect on alternative options; to use information from other areas; to seek the views of clients; to consult with service users; to challenge existing assumptions; to set goals; to evaluate interventions and to act as an agent for change. Essentially, it seems that Best Value asks psychologists to apply psychological skills to their own services.

Finally it is suggested that challenges raised should not be perceived as threats but as opportunities to be creative and to implement positive change within services.

The attached CD-ROM includes a PC Powerpoint presentation which highlights key points made throughout this document. It is intended that services wishing to conduct staff development in the area of Best Value could use them directly or adapt them for presentation purposes.

A list of contributors with current addresses is included in the Appendix at the end of this document. Please make direct contact with the authors if you would like further information.

Best Value: what is it and what does it mean for a quality assured Psychological Service?

Peta Barber, Shona Crawford, Laura Ann Currie, Fergal Doherty, Shona Isbister, Peter Kaye , Roslyn Redpath, Chris Scott and Gordon Trahar

Overview of Best Value

Introduction

The aim of this document is to:

- outline the key concepts of Best Value with particular reference to their application to Psychological Services
- examine the process which might be applied to Psychological Services in a Best Value review
- illustrate the process of Best Value through information gained from Psychological Services which have undergone a Best Value review or are about to undergo a review.
- provide a detailed guide to the recently published performance indicators in the document, 'Quality Assurance in Education Authority Psychological Services' (Mackay, op cit), through listing ways in which services can evidence their practice.
- develop staff development materials encompassing the key elements of the above (see attached CD-ROM).

Background To Best Value

In July 1997 the joint task force on Best Value set up by the Secretary of State for Scotland and COSLA, set out the principles of a Best Value approach to managing and delivering services in local government. Best Value was the Labour government's response to Compulsory Competitive Tendering (CCT) introduced by the previous Conservative government. CCT was seen by the new government as narrow in its scope, emphasising cost above all other considerations. In practice CCT had tended to be applied to services which had clear cost and performance measures. Best Value, however, was designed to apply to all areas of local government, including those services where clear measures of performance have been traditionally more difficult to obtain, such as education. Psychological Services cannot therefore be seen as exempt from Best Value.

The 4 key principles of Best Value set out by the joint task force are:
Accountability, Transparency, Continuous Improvement and Ownership.

Accountability

Central to Best Value is the idea that a focus on what service users and stakeholders want will lead to improved service delivery. The aim is to increase local accountability so that the public can make informed judgements about the services they use, which in turn will allow authorities to shape their services to achieve maximum impact.

For EP services the principle of accountability raises questions such as:

- who are we accountable to?
- who are our major stakeholders?
- how can we find out what our service users want from us?
- what systems do we have in place to monitor their views?
- how can we adapt our services to suit?

Transparency

Best Value places an obligation on Councils to be open about the decisions they take and the reasons for their decisions. It also seeks to encourage Councils to involve members of the public in the Councils decision making. It expects Councils to inform members of the public what rights they have, what information they can access and how they can complain if things go wrong. Councils are also encouraged to make it easy for the public to gain access to both its services and its decision-making processes.

For EP services this principle raises the issues such as:

- how explicit are we about the services we offer?
- do we involve our service users in the planning and delivery of services?
- what information do we make available to our service users?
- do we explain clearly to our service users what we do and why we do it?

Continuous Improvement

Best Value emphasises the importance of planning for continuous improvement in services on the premise that nothing is ever perfect. In order to continuously improve, services should be asking:

- what are we seeking to achieve?

- are we achieving our goals?
- why are we involved in some areas of work and not others?
- can we achieve the same goals more effectively and efficiently in another way?

Ownership

Best Value requires that everyone with an interest or stake in a service should feel some degree of involvement. For Councils this means ownership both within the Council and within the community that the Council serves. This implies effective communication with Councils employees and beyond in order to create a sense of ownership and corporate responsibility.

For Psychological Services the issues raised are:

- how involved is all the staff in planning and developing the service?
- how effective are communications within the service?
- how is a sense of ownership fostered by senior management within the service?

The 4 Cs

The Scottish Office Circular 12/98 states that a key element that would define a council which is delivering Best Value is a "clear commitment" to the 4 C's. These consist of: Challenge, Consult, Compare and Compete.

Challenge

Challenge means a service questioning its function and purpose - an internal review linked to external consultation. One example of this is illustrated by consideration of service aims whereby all members responsible for service delivery are clear about service aims and rationale. The HMI document, Education Authority Psychological Services in Scotland (1998), provides an overview and guidance on this. In particular, paragraphs 2.4 and 2.5 indicate ways in which services might be communicating their aims and objectives to others. They cite two different examples which, in their opinion, were communicating the aims of services successfully.

Most Psychological Services will have some statement of aims. It might be more pertinent for services to think about how recently they were devised and whether there is a system in place for reconsideration and review. The suggestions proposed in paragraphs 2.6 to 2.8 could be a reasonable starting point for this. HMI felt that Psychological Services were not consistently proactive in explaining and promoting

their role resulting in misunderstanding and confusion about what they could provide and the functions they carried out. Services may need to ask themselves if they are sufficiently clear about the aims and the parameters of the work they carry out and if this is effectively communicated to service users.

This issue is also addressed by the document 'Quality Assurance In Education Authority Psychological Services' (op cit) where the first Performance Indicator on Policy and Procedure states that a quality service will have:

'...written aims which are highly appropriate and relevant.... all staff participate in the development of agreed aims (and) policies..... (that these are) implemented throughout the service (and that they) are subject to continuous review.'

Compare

Performance measurement and monitoring is fundamental to Best Value and should be generated, as far as possible, as part of routine management information. A key tool for comparing the effectiveness of a service is benchmarking.

'Put simply benchmarking involves identifying best practice and copying it. It is a tool for informing continuous improvement. It is not about coming top of the league or maintaining a comfortable mid-table position.'

(Perth & Kinross Council Guide to Service Review Process)

The Scottish Office Circular 12/98 states that Benchmarking is an essential tool in delivering continuous improvement, but it is also a term which is frequently misunderstood, and recommends training to consider the tools and techniques of benchmarking as well as the pitfalls and how to avoid them.

Best practice benchmarking can be divided into four different categories:

Internal, Competitive, Functional and Generic.

Internal benchmarking

This is where a service searches for best practices within its own boundaries. Within a service, each area or location is encouraged to bring its performance up to the level of an internal benchmark, thereby raising the performance of the service as a whole. It has the advantage that data is easy to collect with the main drawback being that the level of excellence is determined only by the area/location within a service. Examples of standards that could be set within services might include:

- quality and type of assessment
- quality of report writing
- service level agreements with schools
- time allocation

Competitive benchmarking

This is where services that consider themselves to be comparable, jointly participate in collaborative analysis studies deciding between themselves on the outcomes or processes they wish to compare. This may include the processes described above as well as:

- resource allocation
- interagency working
- monitoring and review processes

Functional benchmarking

This is where a service identifies another service that they consider to be leaders in best practice and seeks to outperform them. One difficulty for a service industry would be to identify those aspects that make their competitor so successful. Even if they do, the factors involved may be outside their control eg. service culture. Most examples of functional benchmarking tend to focus on an outcome rather than a process such as:

- time taken for Record of Needs procedure
- time taken between referral and initial contact
- cost of service delivery

Generic Benchmarking

This approach takes a broader approach in that a service may look outside its immediate and obvious comparators to other services or industries from which it may learn. The aim is to discover alternative approaches and practices which can be implemented so as to deliver superior performance eg. Comparing Psychological Services as a public service industry to private and professional service industries, such as law and accountancy, or, the hotel and leisure industries, in order to learn from their quality practices.

In summary, benchmarking should aim to:

- develop realistic goals and strategic targets

- establish realistic action objectives for implementation
- encourage a striving for excellence
- create a better understanding of what is happening elsewhere
- emphasise sensitivity to changing stakeholder needs

(Macdonald & Tanner 1988)

The Scottish Borders Council collected the following information to benchmark their service against others:

- pupil/psychologist staffing
- the number of pre-school teachers
- training development budget available
- service equipment budget
- access to clerical/admin support
- average mileage per psychologist
- travel budget available
- subsistence budget available
- number of budgets under the direct control of the Principal Psychologist.

A further example of functional benchmarking suggested by the HMI review of Psychological Services across Scotland was comparison of estimates of time spent by a given percentage of psychologists:

- a) on different activities
- b) with different client groups

A time audit of how much time Psychological Services devote to different areas of work could be a beneficial within house exercise to help with decision making about where time is most effectively spent. This could also be the basis of a costing exercise.

Comparison with other LEA Psychological Services may be appropriate but the exercise should not necessarily be restricted to this. An HMI, lead officer for inspection of Education Authorities and Best Value (Russel Dick 1999), advised making contact with other services within a LEA to learn about their Best Value implementation and not to take refuge within the 'specialism' of educational psychology.

Benchmarking between Psychological Services is in the very early stages and Psychological Services managers should consider becoming proactive in deciding which are relevant and reasonable factors to compare between services. Any benchmarking will need consistency of data collection between services in order to produce reliable comparisons. Even then, when drawing conclusions there may be several reasons for current practices or levels of expenditure within Councils. Initial data comparisons are likely to raise more questions than answers, but the process in itself may yield valuable information.

Consult

Some Psychological Services have surveyed key stakeholders, generally schools and parents, and in some cases, other education department employees. ASPEP (1999) states that necessary, but not sufficient, indicators of performance would include feedback from:

- a) schools - that the psychologist has developed an effective working relationship with them, and,
- b) parents and young people - that the psychologist has been helpful and useful.

COSLA suggests that consultation should involve groups normally excluded from decision making and the democratic process e.g. disabled people, children and young people. They do not see consultation as being limited to merely one stage in the review process nor to current measures and standards judged as important by professionals. They believe that groups should be provided with information about what is achievable with present resources available in order to be able to reflect on the trade-off between quality and cost and options for alternative methods of service delivery.

The Scottish Office (1998) recommended that consultation should not just occur on outcomes but should also involve stakeholders in:

*'...identifying needs and setting objectives, priorities and targets;
considering options for the delivery of services;
reviewing services and past performance and setting out improvements to be made in the future.'*

Consultation need not always be with external service users. Psychological Services managers might also include internal consultation to assess the extent to which psychologists feel involved in the development of a quality service deliver as

indicated by Mackay (op cit). This would include feedback from all psychologists and other personnel within a service, assessing their perceptions of the involvement of parents, schools, children and young people, education management and other agencies in a working partnership.

Compete

Scottish Office Circular 12/98 states that competition, sensibly applied, is a vital element of Best Value and that services should aim to identify meaningful external comparators, including private and voluntary sectors where relevant. In the past this has not been a major issue for Psychological Services but they now may need to show that they have considered it as part of option appraisal. Scottish Borders Council did this through comparative costing of one-off assessments with voluntary societies such as the Down's Syndrome Association and the Dyslexia Institute. A further example would be the costing of private psychologists who offer assessment and other specialists who deliver in-service training to education personnel, voluntary societies and parents. A prerequisite would therefore be to ensure that there has been a within-service costing exercise of different aspects of service delivery and consideration of who or what could be considered the competition.

Aspects of service delivery that could potentially be costed include:

- assessments e.g. Record of Needs assessments
- interagency meetings
- administration e.g. telephone calls
- liaison with agencies/services
- delivery of INSET
- services provided to agencies e.g. Children's Hearings.

Russel Dick (op cit), HMI, further stated that although market place competition may not be applicable to services and cost competition may not be valid, competition, in the sense of striving to improve performance; trying to reach the best practice within the field; ensuring that you are economical and efficient as well as effective, is seen as a key indicator of Best Value implementation. This should, he asserted, be subject to validation by external auditors such as HMI.

Services will also need to consider the other aspects of option appraisal. Given the statutory requirements on Councils to provide a Psychological Service, the option of ceasing the service could be deemed illegal. There are currently no other service

providers beyond local authorities who could feasibly offer a full Psychological Service to a Council. However authorities could decide to externalise parts of the duties currently carried out by Psychological Services. This would require to be based on evidence that the same quality of service could be provided at less cost. It would also be possible for one local authority to take over the delivery of a Psychological Service to another authority. At present there are no such arrangements within Scotland and the political implications of such a decision would be significant. Nevertheless the guidance issued to departments by one Council states:

'The option recommended should reflect that which is most desirable for the Council as a whole (not the service provider) in terms of maximising value for money. It is for elected members to decide on the political implications of adopting the recommendations. No assumption should be made by service managers about the future provision.' (Perth and Kinross 1998).

Summary

The 4 Cs should therefore be seen as inter-linked processes. It should be becoming increasingly obvious that the process of 'best valuing' a Psychological Service depends on data and information that is not immediately available to Psychological Service managers, having never been routinely collected by Education Departments or Psychological Services. However information which is easiest to collect may be of little use in service evaluation, whilst information which is of greatest value is often very difficult to collect. There is currently great variation between services as to what data is routinely collated and what use is made of it. As Best Value develops over time the need to clearly identify what is considered to be relevant data and how this can be collated in order that comparisons about service delivery can be made, within and between services, remain core issues.

The Best Value Review Process

The process of a Best Value review involves examination of what the service is and how it can best be provided. A framework used by one Council includes the following stages:

Stage 1: Selecting the Activity

The boundaries and scope of the activity being reviewed must be clearly defined at the outset. The objectives and timescale for the review should also be defined.

Stage 2: Consultation

The views of service users in terms of quality, standards and costs of service are a vital element. The service must identify and introduce ways of obtaining user feedback.

Stage 3: Selecting Comparators

Services should identify appropriate comparator services. This may be done through choosing services in the 'family' groups that Councils belong to. Consideration should be given to non-local government comparators such as private or voluntary organisations.

Stage 4: Comparing/Benchmarking

Services need to identify the elements of the service that could be benchmarked. This might include cost, performance and process information.

Stage 5: Improvement Period

Services need to determine the current level of performance and establish a target designed to close the gap between performance and best practice. Services will need to devise an improvement plan to show how the target will be achieved.

Stage 6: Assessment

At the conclusion of the improvement period (the maximum being one year), an assessment of practice and performance achieved should be made. This will inform the next stage of the review process.

Stage 7: Option Appraisal

The recommendations forthcoming from the result of the review should reflect one or more of the following options:

- continue to provide the existing service in-house
- continue to provide the service in-house but on a modified basis
- subject the existing service to voluntary competitive tendering
- cease to undertake the service or parts of the service
- externalise the service

Stage 8: Ongoing Monitoring and Review

Whatever the outcome the activity should continue to be monitored and reviewed as part of the Service planning process.

Self-Evaluation of Psychological Services

The recently published performance indicators for EP services (Mackay et al 1999) is now likely to become the standard for self evaluation and inspection of EP services. However, some councils have sought to apply a self-evaluation framework which can be used across all Council services. One EP service, which has recently undergone a Best Value review, was evaluated using the European Foundation for Quality Management model (EFQM). This covered the following areas:

- Leadership
- Policy and Strategy
- People Management
- Resources
- Processes
- Customer Satisfaction
- People Satisfaction
- Impact on Society
- Business Results (see Appendix).

The first five areas listed are input measures (factors which enable the service to function) whilst the last four are output measures (what a service achieves). EFQM offers a way of rating services through placing a 'weighting' on each of the above factors. From these weightings an overall quality score is obtained for the service. EFQM places the greatest weightings on customer satisfaction and business results with significantly smaller weightings on areas such as policy and strategy. This will undoubtedly present a challenge to Psychological Services which have tended to focus on input measures rather than outcomes.

Cherry (1998) outlines a review and evaluation process for EP services which focuses on:

- Outcomes:
- educational outcomes
 - financial issues
 - stakeholder satisfaction
 - equity of service delivery

Processes: service delivery
 resource allocation
 interagency working
 monitoring and review
 partnership working
 strategy formation
 advocacy

Cultural factors: trust
 capacity for self-improvement and reflection
 quality of relationships
 shared values with a LEA, schools, parents and pupils.

Cherry (op cit) concludes by stating that Psychological Services will need to think seriously about regular continuous evaluation and collection of evaluative data which will include quantitative information on what is happening as well as seeking consumer views. The process opens up possibilities for staff involvement and genuinely reflective practice.

Best Value from the Inside

In order to help the working group consider different aspects of Best Value the group invited various consultants and 'experts' in the field to present their perspective on Best Value. Their views of Best Value from the inside are worthy of repeating within this paper since they often helped to capture the key aspects of Best Value.

Nigel Miller, a consultant on the EFQM model, considered the concept of self-assessment to be the best way of evaluating a service - "nobody knows better than the people in the organisation how well it is running." He also warned services "never ever assume what your customers think of you." For services to do well, they need clear specifications and a clear definition of work direction. Above all they need to understand what their customers want.

Hugh McRae, an Educational Development Officer with a specific remit for Best Value within an Education Service, felt that schools do not know the totality of what the support services such as EPS do. We have not been clear enough about what we do and what we cannot do. Our processes need to be transparent and obvious to our customers - *the key is that the customer understands where you are coming*

from'. Best Value should push us into reviewing our service delivery in a much more rigorous way than before. The most useful part of benchmarking was the information it provided about the process rather than the cost, since no two organisations are the same.

Russell Dick, HMI, described Best Value as a philosophy rather than a rigid set of procedures. Services have to define what are the quality characteristics of the service and what outcomes the service is seeking. Self-evaluation alone is not enough - Best Value requires external scrutiny through audit/inspection. Psychological Services should ensure that their existing quality assurance and improvement mechanisms are compatible with Best Value principles. We should ensure that we are well placed for public performance reporting - to councillors, customers, citizens - and show that our specialism has maximum impact. He recommended preparing for service review by using the 4 Cs as a cultural tool rather than a mechanistic process.

Frank Murphy (Principal EP, South Lanarkshire) also emphasised the need for a definition of quality. Information gathering was crucial and services should keep data in such a way that is usable and accessible. It was helpful for services to identify potential new areas for psychological work as well as defining existing areas. Their service found that there was a correlation between visibility and satisfaction in consumer surveys.

Ken Dutton (Principal EP, Scottish Borders) described the framework of the Best Value review which his service had recently undergone. This consisted of: strategic direction; operational efficiency; customer/client focus; performance analysis; benchmarking; competition; options for service and improvement/action planning. Scottish Borders found BVR to be an opportunity not a threat which helped in teambuilding, raising the service profile and created a better understanding of the service amongst managers and councillors. One outcome for the service has been a much needed increase in staffing levels.

Best Value in Practice

Illustrative interviews of psychologists across 3 services

Best Value can be a dynamic means for promoting positive change in a service. This section of aims to provide real life reflections from Psychological Services and to illustrate issues in practice. Three principal psychologists were interviewed and asked to describe how they had approached the Best Value process. In addition, in the second Local Authority, the same structured interview was conducted with a senior and main grade psychologist in order to elicit views on the Best Value process from non-management personnel. Time restraints prohibited this exercise in the other authorities.

Profile of the Local Authorities (L.A.s)

L.A. 1

L.A.1 is a large local authority with a staffing complement of 23 full time equivalent psychologists. This is made up of the principal psychologist, two depute principal psychologists and eight senior psychologists. Seven members of staff are on a job-sharing contract. The service personnel work out of three separate offices and offer a service to schools in the geographical area around the office. The Best Value interview was carried out prior to there being any formal Best Value review of the service. However a formal review was on the horizon. The format of the Best Value review was to be determined by the local authority which had its own authority wide agenda.

L.A. 2

L.A.2 is a small local authority with a Psychological Service staff consisting of the principal educational psychologist, two full time seniors, two job share seniors, two full time main grade educational psychologists, two job share main grade educational psychologists and one trainee. At the time of interview there had not been an externally imposed Best Value review but the service had initiated the Best Value process independently.

L.A. 3

L.A.3 is a relatively small authority but covers a large geographical area. The Psychological Service staffing consists of 8.5 full time equivalent psychologists and one research assistant. The present staffing lies at 6.1 full time equivalent psychologists. There is one centre base, which serves the whole geographical area.

Promoted structure consists of the Principal Psychologist and four senior psychologists. The interview with the Principal Psychologist was carried out just before the Best Value process under the European Foundation Quality Management (E.F.Q.M.) structure took place. The use of E.F.M.Q. was determined by the local authority as was the timing of the exercise.

Responses to the structured questionnaire from three principal psychologists.

1. How has your service implemented the process of Best Value and how have you been involved?

L.A. 1

There was a review programme where all staff members were part of strategy groups that discussed basic issues relating to service delivery. The issues discussed were generated by the service team and thereafter refined by the Senior Management Team. The issues evolved as the demands and development plans of the education department as a whole became clearer. It was part of the remit as a recently appointed Principal Psychologist to consider the issue of how a Psychological Service can develop in a Best Value context. This has involved reviewing all aspects of the work of the Psychological Service in light of:

1. Best Value
2. changes in European Legislation
3. general U.K. legislation and recent changes in philosophy and thinking about SEN.

Given the size of the service it has been difficult to devise a structure of review where all people feel included.

L.A. 2

A format was sought that would fit our situation, which is that of a small authority with a small team, half of whom were new staff. Many of the concepts and the vocabulary initially seemed alien but the Best Value framework provided a means to review the service and improve the Service Development plan. It was a process to take the whole team forward, to develop a shared understanding and produce a development plan to which everyone had contributed and shaped and so had a sense of responsibility and ownership.

It was recognised that time should be set aside for the whole team to meet to work through the Best Value process, using the toolkit (Newham 1999, see Appendix). Time was required for discussion, reflective thinking, agreeing on design and recording. The principal and a senior psychologist drew up a tight agenda based on the Best Value toolkit and the scheduled timescale was adhered to rigorously in order to move the process forward.

As a new team, the timing was right and Best Value was an invaluable process for team building. The team started the process by agreeing the philosophy and strategic purpose of the service and encapsulating it in a sentence. From this, team members went on to agree aims, objectives and outcomes. A SWOT (strengths, weaknesses, opportunities, threats) analysis highlighted priorities for development and related to the S.E.E.D. (Scottish Executive Education Department) Performance Indicators (PIs). Team members' own perceptions as well as feedback from user surveys from schools informed the SWOT analysis. In moving through the process to look at PIs in the four Key Areas, it was recognised that to work through each area as a whole team would be unwieldy, so four task groups were set up, each assigned a Key Area. Each task group was responsible for planning the development of a specific area and bringing it back to the whole team for discussion and approval. In this way the task groups maintained a democratic approach while helping to drive the process forward. The principal played a dual role as team leader and participant in the process and had a role in taking an overview to ensure the service Best Value policy fitted with that of the council and that proposed time scales were realistic.

The principal recognised the emotional impact of the Best Value process as an instrument for planning and implementing change and that bringing about more transparent and accountable work practice could seem threatening at times. It was more difficult for longstanding team members to change procedures that they had become familiar with over time and, in some cases, may have drawn up, themselves.

L.A. 3

The authority decided very early on to engage in the process of Best Value across all departments. Initially the intention was to Best Value the Education Department as a single unit but this proved too complex. The authority was divided up into 51 business units, 9 of these within the education department, one of which was the Psychological Service. Schools were excluded from the Best Value process. The authority employed the E.F.Q.M. structure as the process to be adopted by all the

units. E.F.Q.M. comprises nine criteria, five input (Leadership, Policy and Strategy, People Management, Resources and Processes) and four output (Customer Satisfaction, People Satisfaction, Impact on Society and Business Results) each with a range of 5 elements. Senior managers from each of the departments went on training courses to become assessors in E.F.Q.M. The Principal Psychologist and one other promoted member of staff were trained as assessors in E.F.Q.M. and had been involved in assessing another department. The Principal Psychologist was responsible for preparing the Psychological Service for E.F.Q.M. analysis, data collection, and liaising with the external assessors.

2. What data is collected with a view to the Best Value process?

L.A. 1

- 1) Psychologists were asked to identify from their diaries all instances of unplanned pieces of work which they responded to and how much time these took out of the working week.
- 2) A service wide database is kept – giving biographical details, school, recording status, outcomes, date of referral and date of discharge.
- 3) Time taken to open a Record of Special Educational Needs from first formal letter is noted. We have statistical information on over 900 Records. We need to have systems to know how quickly each part of the Recording process is completed.
- 4) We are establishing a management system through school work files to identify:
 - patterns of work
 - identify trends in work
 - monitor inclusive practices i.e. are young people being supported in mainstream or segregated provision
- 5) We have no user surveys as yet but some form of questionnaire is planned.
- 6) We hope to be able to quote response time to a referral after a referral case conference

L.A. 2

- 1) The introduction of a database is underway as none existed previously.
- 2) Feedback from client groups and stake holders will be further developed to include seeking information on service delivery and effectiveness from:
 - out of authority schools
 - parents (at case closure or change of EP or transition from primary to secondary)

- key users (Social Workers and Medical Officers)
- 3) Feedback from the team of psychologists by means of an individual questionnaire surveying what is important to individuals and how well the service is meeting individual expectations.

L.A. 3

Information and evidence is collected to demonstrate how well the service is meeting the elements within the nine criteria of the E.F.Q.M. model and is presented to the external assessors who then score it according to set guidelines. Feedback information will be gained from client groups and will include:

- an annual audit of schools,
- selective sampling of parents views of service input,
- a sample of the views of young people with whom the service has been involved.

Preparation for and organisation of data for each of the subsections of the E.F.Q.M. process has involved all members of staff. The exercise has been time consuming and has interfered with the routine delivery of the service.

In presenting information and evidence, other local authority departments have used a narrative format in writing their reports, however, the Psychological Service is planning to adopt a concise layout based on the following headings:

- criterion
- evidence
- nature of evidence
- comments

3. *What criteria are used in rating the performance of our service?*

L.A. 1

We expect that link psychologists using the work file will inform schools about what they ought to expect. We emphasise that the outcome is a shared responsibility. The work file will provide a measure of number and frequency of visits to any individual school and will reflect the nature of the work undertaken. From this we will be able to audit the workload and use information to inform change. We will also be able to determine if individual psychologists have fulfilled written objectives as outlined in the workfile.

L.A. 2

Feedback from groups as outlined in question 2. Exemplars provided (see Appendix):

- parent questionnaire
- educational psychologists survey
- Social Work department survey

These surveys provide information on users' perceptions of our service.

L.A. 3

E.F.Q.M sets the criteria (detail of the criteria and elements can be found in the Appendix). Information and evidence for each part of the matrix is presented and is then assessed by the external assessors. The criteria and elements have been found to be relevant to the functioning of the service.

4. How do you select areas of service delivery for improvement?

L.A. 1

We use the local authority's and Psychological Service's strategic development plan to direct the priorities for moving forward. Recent priorities have been:

- 1) **Core Work** - review service delivery to mainstream school and introduce work file.
- 2) **Pre.S.C.A.T./Disability** - review service delivery being undertaken in pre-school area by convening planning meetings of the Chair psychologist of the PreSCAT (pre-school community assessment team).
- 3) **Senior Remits** - to date senior remits have been specialist focused. A need for change has been agreed. A starter paper has been prepared and a small group of psychologists nominated to discuss issues related to change in remit.

The priorities have been determined by the needs of the service and have reflected an operationalisation of the strategic development plans of both the local authority and the Psychological Service.

L.A. 2

A SWOT analysis was applied to identify strengths, weaknesses, opportunities and threats. The team then performed a self-rating exercise using the S.E.E.D. Performance Indicators (PIs) to identify weaknesses/ priority areas for development. Task groups drew up criteria for evaluating improvement on the identified PIs and planned timescales for implementation of a service development plan over a three

year period. The selected PIs were based on priority areas if identified as weaknesses.

L.A. 3

From the E.F.Q.M. analysis the assessment team identifies the areas, which are seen to require improvement and priorities are identified in consultation with the Principal Psychologist and Psychological Service staff. From this an action plan will be drawn up. This will be reviewed after one year, although it may be extended to three years.

5. How do you plan to bring about improvements?

L.A. 1

We have created small working groups of psychologists to take forward ideas for improving our service. Their recommendations are then considered by the senior management team and implemented as appropriate. In addition, all psychologists are involved in Community Cluster Teams. Each team will consult schools within their cluster and offer the appropriate form of service.

L.A. 2

Task groups plan a three year development programme based on the PI analysis. The principal's role is to overview and confirm proposed time scales and priorities. Task groups then have the responsibility to implement the changes, achieve targets and complete tasks within the agreed timescales. Task groups are regarded as a democratic way of bringing about change and improvement as all members of staff participate in the process and have ownership. Two half days a month are allocated for Task Groups to meet to ensure that the process of implementing the Service Development plan is driven forward. Regular times at the beginning and end of terms have been allocated for task group feedback and team development.

L.A. 3

From outcome of the Best Value process discussions involving all staff will take place through regular staff meetings.

6. *What evidence do you have or plan to have to demonstrate improvement in these areas?*

L.A. 1

We will gather evidence from individual psychologists and from a broad range of service users by employing some form of user survey.

L.A. 2

- Feedback surveys from users.
- Written targets with criteria for success.
- A staff review process to identify individual targets.
- Peer support through setting up a discussion forum for difficult cases.
- Projects planned with a view to publication to provide the authority with evidence based practice.

L.A. 3

We will gain information from an annual audit of schools, parents and other user groups.

7. *How do you benchmark the activities of your service?*

L.A. 1

The existence of A.S.P.E.P. (The Association of Scottish Principal Psychologists) provides the Principal Psychologist with the opportunity to compare and discuss service issues with other Principal Psychologists. It is very difficult to compare services as they are all very different with their own demography. Each Psychological Service is very much based on its own council context e.g. range of special provision already in place. Benchmarking against other agencies is also very difficult. However, we have had opportunities of exploring how Network Teams and Psychological Service teams operate by having a 'working together day' where the stage model of intervention was explored. These joint days allow us to share with each other how we work and thereby provide opportunities for benchmarking. It is difficult to speculate how we could benchmark with Social Work because of the disparity in services. No other agency provides the same range of services or does the same job. However, it may be possible to choose specific activities and consider how other Psychological Services of similar size deal with these activities.

L.A 2

The principal has discussions at A.S.P.E.P. to compare procedures and approaches with that of other Psychological Services. Comparisons are also drawn with external providers, such as the Dyslexia Institute and private psychologists, regarding costs. Within authority staffing ratios are compared with other professionals e.g. Social Workers and teachers.

L.A. 3

The main advantage in using the E.F.M.Q. structure is that it should assist organisations identify strengths and weaknesses across a range of factors involved in a Best Value process. Due to its scoring component, it also encourages comparisons to be made between different organisations. The service is addressing the question of how to benchmark but this is proving challenging. Matching like with like is complex when so much of the critical work of the Psychological Service is qualitative rather than quantitative and when Psychological Services in Scotland differ from each other in many respects.

Best Value interview with senior psychologist (SEP) and main grade psychologist (EP) in LA 2.

1. How has your service implemented the process of Best Value and how were you personally involved?

SEP

The Best Value process involved the whole team. We used the toolkit as a starting point. I found the process difficult to know what was coming next as it was complex with not quite enough of an overview but everything was clear within each section as we were doing it. The process has come up with something workable. It stuck to the job/territory and came up with practical tasks related to our needs, so the process has worked. It was a bottom up process that reflects what we want to do in professional terms, so we have a genuine document rather than a cynical one. I have personally been involved in the same way as everyone else in discussion groups and task groups with responsibility for some summarising and presenting to other groups.

EP

We started with an introductory talk on Competitive Contract Tendering so we had an understanding of the background to the Best Value concept and the principles of accountability, transparency, ownership and continuous improvement. This set the

context so that we could see that it was something that all services would look at, at some point. We then participated in a series of meetings where we used the Best Value toolkit and linked the Performance Indicators into this. As a whole service we worked through the Performance Indicators linked to Best Value concepts and used this to draw up the Service Delivery Plan. It involved a lot of work going through the different areas but it gave us a greater degree of focus for our work and how we link with other areas of the authority.

As part of the team I was involved personally at every step of the way. Best Value was a feature of service business meetings to feedback to the team. I was consulted and kept fully informed so I have a sense of ownership for what we have produced – the only bit I was not involved with was in the actual writing up of the policy document.

2. What data is collected with a view to the Best Value process?

SEP

Consultation with user groups such as Social Work and parents through surveys and feedback forms.

EP

We surveyed the main users of our service, including schools, Social Work Department and a Child Development Centre. We also developed feedback forms for customer satisfaction from parents. A Users Group in the service looks at this and how we can make improvements based on feedback from schools surveyed – we have already made changes to the schools form and have also made some changes to our practice, based on feedback from Social Work.

3. What criteria are used in rating the performance of your service?

SEP

The SOEID Performance Indicators. As a team we applied the 4 point rating system and then aggregated the results, selecting the identified weaknesses as priorities for development. We also conducted pilot surveys of users schools, Social Work, parents, child development centres.

EP

Ratings were applied through the Best Value toolkit and the performance indicators. We did a SWOT analysis and identified areas for development and improvement.

How do you select areas of service delivery for improvement?

SEP

We set targets based on the identified priorities for development. We then put together task groups to identify what the key tasks would be and how to carry them forward into practice.

EP

Through the Performance Indicators we identified themes in the key areas. It was recognised that we could not do everything at once and we developed a three year plan.

4. How do you plan to bring about improvements?

SEP

The key areas were too big to be allocated to individual task groups, so themes within each key area were allocated to task groups. Time scales and improvement indicators were identified.

EP

We have organised task groups to tackle the various areas but not everything is starting from scratch as we had already covered a lot of work in the normal course of our practice. Our service had a development plan before (management by objectives) and change was happening before but Best Value made us more focused.

5. What evidence do you have or plan to have to demonstrate improvement?

SEP

The Performance Indicators: how to measure these is part of the responsibility of the task group. The task group designs the measures of tasks, targets, improvement indicators and completion dates and it is up to the Task Group to produce evidence. A major part is establishing the database to provide quality information.

EP

We took an evidence-based approach from the outset. We looked at each area of proposed development and asked 'how would you know' that there was improvement. We tried to get qualitative and quantitative evidence. Some is very straightforward to gather e.g. does everyone have a laptop. More qualitative is the area of consulting with users and consulting with the service members re their

perceptions and job satisfaction. Ultimately the big one will be how we benchmark ourselves.

6. How do you plan to benchmark the activities of your service?

SEP

We compared staffing ratios with that of other authorities. So benchmarking was at the level of collecting that type of data and also looking at staffing ratios of the service against that of other professions within the LA teachers, head teachers and Social Workers.

EP

All Psychological Services will take a look at the Performance Indicators and this gives a degree of commonality to use as a basis for benchmarking. Schools have sister schools and we could have a sister service by having a relationship with another service or services. Particularly as we are small we need to be imaginative and creative. Benchmarking against other agencies and service providers, eg. Social Work and Dyslexia Institute, is difficult as they have such a different structure to us. The process could however be valuable as a number crunching exercise to consider if we are value for money for the authority.

Conclusions from interviews

Best Value is new but the concepts and processes involved are not. Services have undertaken reviews of service delivery in the past and in effect, been committed to continuous improvement. The impact of Best Value on practice is that it provides a structure to ensure a more comprehensive review of service delivery, development planning and implementation of performance improvements.

It is apparent that there is no 'one fit for all'. Information from the psychologists interviewed indicates that the Best Value process will vary in detail depending on the size of the service, its previous experience with review processes and external influences over which there may be no control. The underlying principles, however, are common: accountability, transparency, continuous improvement and ownership.

Two factors common to all three services which appeared to be particularly challenging were:

- the time commitment required from all members of staff

- the difficulty in developing realistic and relevant benchmarking measures.

The Best Value process can be a positive means to encourage team building and enhance communication within a service.

Benchmarking can assist communication and the sharing of best practice among services.

A Best Value toolkit can be valuable at three levels:

- the technical level by providing a clear structure or framework.
- the practical level by making the Best Value process more accessible and encouraging group reflection on professional practice.
- the critical level by considering the social and political implications of policy and practice set in a wider context of change.

Overall conclusions are drawn later from the data derived from the 3 services, as well as the wider information gathering exercise on Best Value conducted by the group reported in the other sections of this document.

Quality Assurance in Education Authority Psychological Services

Self-Evaluation Using Performance Indicators (McKay 1999) Are you Level 1, 2, 3 or 4? A Guide to *How do you know?*

The aim of this section is to encourage Psychological Services to articulate service structures and practice within the context of the performance indicators presented in the quality assurance document and of Best Value. This guidance may also provide ideas, which advises subsequent development planning.

The performance indicators are organised into four key areas as follows:

- Management, Leadership and Quality Assurance
- Resources
- Ethos
- Service delivery

These areas are further sub-divided into features of practice that services may evidence as reliable and measurable markers for quality service delivery. It is likely that specific aspects of service delivery will fulfil the requirements for several of the four key areas. It is expected therefore, that there will be some repetition of themes within this guidance. The suggestions made in this chapter should be seen as complimentary to the ideas presented within the original quality assurance document. Using this framework, practice and planning within the service can be mapped onto three types of measurement giving information under the three headings of: *compliance, quantitative and qualitative.*

With compliance features it is possible to make a YES / NO response - something either exists or it does not; it happens or it does not. It is hoped that a range of quantitative data will provide a more accurate picture of the functioning of a Psychological Service than that suggested by the time taken to open a Record of Needs, currently the only audited measure that relates to the delivery of Psychological Services. Qualitative information provides some reflection of the quality of service being delivered, including perceptions from survey material of service staff and users of the service.

It is the responsibility of all educational psychologists working within local authority Psychological Services to identify elements in their practice that are compatible with

the quality markers encouraged by the performance indicators. It may be useful, therefore, if the ideas presented in this section were used to stimulate discussion within service teams. In particular it would be appropriate for services to review practice which is viewed as valuable but which does not immediately fit the performance indicators illustrated by the four themes.

Key Area 1: Management / Leadership / Quality Assurance

1.1 Philosophy & values

- Service's philosophy & values clearly stated and available and evident throughout all service documentation
- All Educational psychologists (EPs) are provided with their Council and BPS Guidelines
- Probationary and supervision processes promote compatible practice with the above
- Attendance levels at staff meetings and service development days
- Regular review of service documentation and service plan
- Time-scales and targets from development plan are clearly evidenced
- Staff survey directed at issue of ownership of philosophy and values

1.2 Policy and procedures

- Staff survey directed at issue of ownership of policies and procedures
- Service can demonstrate minimum specification for record keeping
- Electronic database from referral through to discharge regularly updated
- Clarity of process for case summary, discharge and transfer

1.3 Leadership

- Survey the views of EPs, administration staff and Education Management (EM) based on the promoted job remits and the listed Performance Indicators (PI) features for service managers
- Survey the views of EPs, administration staff and service manager based on the promoted job remits and the listed PI features for Senior EPs
- Members of the service Management Team participate in a quality Review & Development process
- Demonstrates strategic planning opportunities within the service and the wider council
- Service managers provide regular feedback to staff with regards to local and national developments.

1.4 Service planning

- Survey of staff feelings regarding sense of ownership of service Development plan

1.5 Quality assurance

- Systematic evaluation: service Development plan; service practice level agreements; service user surveys including parents and young people.

Key Area 2: Resources

2.1 Provision of staff

- Survey of EPs' administrative support needs
- Staff levels and structure conform to minimum local and national standards
- Staff appropriately qualified
- Administrative staff are appropriately qualified and adequately represented to meet the service needs
- Monitoring system (database) of individual EP Continuing Professional Development (CPD) opportunities linked to Review and Development

2.2 Staff effectiveness

- User surveys
- EP survey
- Evidence from individual EP CPD profile
- Relevance and variety of joint initiatives
- Staff at all levels invited to contribute to joint initiatives
- Information from staff review process

2.3 Service structure and staff deployment

- Monitoring system (database) of individual EP areas of skill and expertise
- Formula for achieving transparent and equitable system for available for scrutiny in relation to both individual EPs and across service delivery
- All staff remits detailed and freely available

2.4 Material and financial resources

- Adequate facilities for trainee placements
- Meeting rooms
- Confidential interview and assessment rooms
- Individual EP access to telephone in confidential environment

- Adequate tests materials, library resources, books and journals
- Adequate technology
- Identified budget for EP continuing professional development

Key Area 3: Ethos

3.1 General Ethos

- Peer support/buddy system, focus groups eg. eliciting EP views on the service generally and other more specific issues
- Regular staff meetings
- Opportunities to look at professional practice and professional issues
- Number of whole staff ventures eg parent workshops, development days
- Number of whole-staff social events
- EPs make themselves available for informal liaison and support
- Surveys/sociograms of individual EP views
- System of staff review
- System for recognition of achievements both formal and informal eg circle of compliments
- Availability of a service Prospectus and Practice Guidelines
- Staff absence and time-keeping
- Chartered status, including eligibility
- Surveys of service users about how individual EPs present a corporate identity

3.2 Partnership with children and young people

- Surveys
- Focus groups eg eliciting their views on the service generally and other more specific issues
- Leaflets for children and young people about the service
- Children and young people's views sought in relation to their referral and subsequent reports
- Correspondence to and with young people
- Staff knowledge of relevant legislation and policy
- Children's attendance at meetings

3.3 Partnership with parents

- SEN Forum
- Surveys

- Focus groups eg eliciting their views on the service generally and other more specific issues
- Information leaflets
- Parental views elicited of referrals and subsequent reports
- Parent attendance at meetings

3.4 Partnership with educational establishments

- Surveys
- Focus groups eg eliciting their views on the service generally and other more specific issues
- Information leaflets
- Time allocation transparent and equitable
- Service Level and Practice Agreements
- Record of school contact
- Joint INSET with schools
- Content of work includes casework, consultation, INSET and project
- Opportunities for liaison with Senior Management Teams (SMTs)

3.5 Partnerships with other agencies

- Service user surveys
- Service Level and Practice Agreements (Reviews)
- Liaison groups eg Joint Assessment Teams and Support Liaison Groups
- Child strategy steering groups eg Fostering & Adoption and Child Protection
- Resource allocation groups eg Placement Consultative Groups
- Opportunities and requests for joint training and research
- Evidence of joint interagency working through projects/activities

3.6 Partnership with education management

- Regular meetings with Education Management (EM) including evaluation of service practice
- Shared documentation outlining roles, remits, lines of communication etc
- Representation on council policy making working parties
- Access to audit information
- Audit information on the service provided to EM on a regular basis
- Providing appropriate information for elected members

Key Area 4: Service Delivery

4.1 Consultation and advice

- Surveys of service users including families, schools, EM and other professionals
- Requests for INSET
- Representation on council policy making working parties
- Access to relevant publications on theory and practice

4.2 & 4.3 Assessment & intervention

[Assessment & intervention are seen as an inter-connected and on-going process]

- Assessment & Intervention strategies regularly reviewed within the service
- Appropriate Practice Guidelines available
- Service Assessment & Intervention Guidelines embedded in council practice
- Collaborative Assessment & Intervention: evidence of involvement of parents, teachers, pupils in the process possibly from case files
- Evaluation built in to the process of Assessment & Intervention
- Service structure promotes the development of skill and expertise in specialist areas

4.4 Delivery of professional development and training

- Agreed Practice Guidelines covering delivery of INSET
- Professional development and training needs are identified through on going relationships with service users
- Any delivery of training is formally evaluated
- Training offered is valued
- Service structures provide clear support in the planning and delivery of INSET
- Supervised placement of EP trainees and active links with national training centre(s)
- Opportunities to share and develop skills are provided to EPs in training and other professionals
- Service structure promotes the development of skill and expertise in specialist areas

4.5 Research & development

- Research and Development features within the service Development plan
- Opportunities taken for collaborative research within and outwith the service

- Ability to demonstrate that all staff are aware of Research & Development opportunities both locally and nationally including the Annual Conference
- Publication and wider dissemination of research findings apparent within the local authority and beyond
- Service promotes links with the MSc Training Courses

Measures : Compliance, Quantitative, Qualitative

This section provides an example of how measures may be grouped under three headings to provide a framework of Compliance, Quantitative and Qualitative features.

Key Area 1: Management/Leadership/Quality Assurance

1.1 Philosophy & Values

Compliance

Service's philosophy & values clearly stated, available and evident throughout all service documentation

All Educational psychologists (EPs) are provided with their Council and BPS Guidelines

Time-scales and targets from development plan are clearly evidenced

Probationary and supervision processes promote compatible practice with Council and BPS guidelines

Quantitative

Attendance levels at staff meetings and service development days

Regular review takes place of service documentation and service plan

Qualitative

Staff survey directed at issue of ownership of philosophy and values

1.2 Policy and Procedures

Compliance

Service can demonstrate minimum specification for record keeping

An electronic database tracking referrals through to discharge exists

Clearly stated process for (annual) case summary, discharge and transfer are in place

Quantitative

Electronic database from referral through to discharge available and regularly updated

Qualitative

Staff survey directed at issue of ownership of policies and procedures

1.3 Leadership

Compliance

Members of the service Management Team participate in a quality Review & Development (R&D) process

Quantitative

Opportunities taken for strategic planning within the service and the wider council

Qualitative

Survey directed at the views of EPs, administration staff and EM based on the promoted job remits and the listed PI features for service managers

Survey directed at the views of EPs, administration staff and service manager based on the promoted job remits and the listed PI features for Senior EPs

1.4 Service Planning

Qualitative

Survey staff feelings regarding sense of ownership of Service Plan

1.5 Quality assurance

Compliance

Systematic Evaluation of service Development plan, service Practice / Level Agreements and service user (inc. parents & youngster) surveys in place

Key Area 2: Resources

2.1 Provision of staff

Compliance

Survey of EPs administrative support needs carried out

Administrative staff levels and structures conform to minimum local and national standards

Monitoring system (database) of individual EP Continuing Professional Development (CPD) opportunities in place

2.2 Staff effectiveness

Compliance

User surveys in place

EP surveys in place

Quantitative

Number and variety of joint initiatives undertaken

Qualitative

Evidence from individual EP CPD profile

Information from EP and user surveys

2.3 Service structure and staff development

Compliance

Monitoring system (database) of individual EP areas of skill and expertise exists

Formula for achieving transparent and equitable system available for scrutiny in relation to both individual EPs and across service delivery

All staff remits detailed and freely available

2.4 Material and financial resources

Compliance

Meeting rooms available

Confidential interview and assessment rooms available

Individual EP access to telephone in confidential environment

Key Area 3: Ethos

3.1 General ethos

Compliance

Peer support/buddy system, focus groups etc in place

System of staff review in place

System for recognition of achievements both formal and informal eg circle of compliments exists

Availability of a Service Prospectus and Practice Guidelines available

Quantitative

Regular staff meetings

Opportunities to look at professional practice and professional issues eg exclusions, emotional intelligence

Number of whole staff ventures eg parent workshops, development days

Number of whole-staff social events

Staff absence and time-keeping figures

Numbers of staff with chartered status

Qualitative

Surveys/sociograms of individual EP views on ethos

EPs make themselves available for informal liaison and support (assess through above)

Staff views on ownership of service Development plan through survey

Surveys of service users about how individual EPs present a corporate identity

3.2 Partnership with children and young people

Compliance

Surveys to elicit the views of young people exist

Focus groups eg eliciting their views on specific issues exist

Leaflets for children and young people about the service are available

Correspondence directed to, and generated with, young people

Quantitative

Young people invited to attend meetings

Qualitative

Children and young people's views of the service elicited

Children and young people involved in the production of leaflets

Children and young people's views of their referrals and subsequent reports on them elicited

3.3 Partnership with parents

Compliance

Focus Groups eg eliciting their views on the service and specific issues exist

Information leaflets for parents available

Quantitative

Psychologist attendance at joint SEN Forum

Parents invited to attend meetings

Qualitative

Surveys of parents' views of the service regularly carried out

Parental views elicited of referrals and subsequent reports

3.4 Partnership with educational establishments

Compliance

Focus groups eg eliciting educational establishments' views on the service and specific issues

Information leaflets available

Time allocation transparent and equitable

Record of School Contact system in place

Quantitative

Percentage of establishments with Service Level / Practice Agreements

Joint INSET with schools undertaken

Content of work eg percentage casework, consultation, INSET and project

Opportunities for liaison with Senior Management Teams (SMTs) through joint forum or otherwise

Qualitative

Surveys of views of educational establishments

Evaluations of service level agreements

3.5 Partnerships with other agencies

Compliance

Service user surveys in place

Quantitative

Service Level and Practice Agreements in place and reviewed

Involvement in liaison groups eg Joint Assessment Teams and Support Liaison Groups

Involvement in child strategy steering groups eg Fostering & Adoption and Child Protection

Involvement in Resource Allocation groups eg Placement Consultative Groups

Joint training opportunities

Requests for joint research evaluations

Qualitative

Information from service user surveys

3.6 Partnership with education management

Compliance

Regular meetings with Education Management (EM) including evaluation of service practice

Shared documentation outlining roles, remits, lines of communication etc

Access to audit information

Audit information on the service provided to EM on a regular basis

Appropriate information provided for elected members

Quantitative

Frequency of representation on council policy making working parties

Qualitative

Evaluation information through liaison with education management

Key Area 4: Service Delivery

4.1 Consultation and advice

Compliance

Surveys of service users including families, schools, EM and other professionals in place

Access to relevant publications on theory and practice

Quantitative

Requests for INSET

Representation on council policy making working parties

Qualitative

Information from surveys of service users including families, schools, EM and other professionals

4.2 & 4.3 Assessment & intervention

[Assessment & intervention are seen as an inter-connected and on-going process]

Compliance

Appropriate practice guidelines available

Service assessment & intervention guidelines embedded in Council practice

Quantitative

Assessment & intervention strategies regularly reviewed within the service

Qualitative

Collaborative assessment & intervention evident from the accumulated data from surveys of service users

4.4 Delivery of professional development and training

Compliance

Agreed practice guidelines covering delivery of INSET

Professional development and training needs are identified through ongoing relationships with service users

Any delivery of training is formally evaluated

Service structures provide clear support in the planning and delivery of INSET

Opportunities to share and develop skills are provided to EPs in training, and other professionals

Quantitative

Number of INSET sessions delivered

Qualitative

Training offered is valued: information from evaluations

4.5 Research and development

Compliance

Research and development features within the service Development plan

Service promotes links with the MSc Training Course

All staff given the opportunity to attend CPD conference

Quantitative

Opportunities for collaborative research within and out with the service

Qualitative

Assessment of whether all staff is aware of Research & Development opportunities both locally and nationally including the Annual Conference through EP survey

Conclusions

For the majority of practising psychologists in Scotland, Best Value might carry little significance and have little impact on the job they do. It could be viewed as predominantly a financial exercise stimulating cynical thoughts about measurements eg the number of Records of Needs opened or the number of referrals made to the service. These would reflect a purely quantitative approach which seeks not to *'measure what is valued'* but rather to *'value what may be easily measured'* (ASPEP 1999).

However whilst it would be naive to believe that Best Value does not involve a cost benefit element, it is also important to recognise that Best Value seeks to promote quality and value for money in Local Government (Public Performances Reporting). It is this emphasis on quality, within and between services, which makes Best Value significantly different from its predecessor - Compulsory Competitive Tendering.

The work of educational psychologists has been defined as follows:

'Educational psychologists work at three main levels: that of the individual child or family, the level of the school or establishment and the level of the local authority. In relation to each of these levels of work they have five core functions: consultation, assessment, intervention, training and research.'

(Quality Assurance in Psychological Services, 1999)

Clearly educational psychologists fulfil a unique role within education authorities in that they can provide support and advice at all levels and in all sectors of the Education Service. As such the delivery of a quality Psychological Service will be dependent upon the interface at all of these levels. When considering Best Value, it is important that the delivery of quality Psychological Services is viewed in terms of these relationships.

Best Value can be viewed as a discrete activity within a service or it can be embedded within service development planning as part of an ongoing cycle of planning and review. It would also be sensible to locate Best Value and quality assurance within the review mechanisms of overall council strategy and education service management planning. For example, a Psychological Service may need to consider Best Value in the context of an EFQM framework where the local council is using such an assessment structure. Certainly services will want to articulate their

development planning in terms that are compatible with Best Value, as well as the four key areas from the performance indicators elaborated earlier.

The qualitative research in this report, derived from three different services, evidenced the variety and depth of understanding of staff within services and the importance placed by staff, on the process of evaluation and planning. It is essential therefore, that services ensure that any development planning is accessible to all staff, their participation being encouraged at all levels. Targets agreed should be clear, achievable and easily matched to the core service priorities.

Best Value will therefore raise some crucial issues for Psychological Services:

The ability to contemplate change

It will be important for services to be able to look at aspects of service delivery and assess whether or not the service is valued (consult), necessary (challenge), ask if it can be done differently (compete) or if others can offer the same service (compare). Seeing and exploring the possibility of change is what we, as psychologists, ask of our clients, whether they are parents, young people or teachers. Applying this reflexively may be more difficult but is a challenge that cannot be avoided in the current political climate.

The reaction to change

In contemplating change one must also consider the reaction to change. A Best Value review is likely to engender stress and anxiety in individuals and services as a whole, as many externally imposed accountability measures tend to do. Individual styles and responses to coping with change are largely ignored in the literature related to Best Value yet should be integral to the process. Psychologists should be more aware than most of the psychology of change thus they should be more aware of such responses and be willing to act accordingly.

The increasing standardisation of Psychological Services

The increasing use of benchmarking as a tool for comparing services across councils may lead to pressure to ensure that data collected is consistent across all services. Benchmarking does, however, have the potential for the profession to engage in development and interventions across council boundaries and to become a coherent voice in demonstrating clarity of purpose and quality throughout Scotland. Process

benchmarking, where one service compares its procedures with those of another, may lead to greater uniformity of services across Scotland and a national set of standards and targets that apply to all services. Given the diversity of Psychological Services since the creation of 32 unitary authorities, a degree of standardisation might be welcomed. However, any imposed nationally agreed standards may conflict with local decision making about delivery of services, benchmarking will need to be applied carefully in light of the different authority contexts.

The interface between the service and service users

Best Value places significant importance on the *customer / citizen focus*. User feedback is considered vital and should influence service planning. However, the context in which Psychological Services operate is not akin to a business where providing the customer with what they want is the principal motivation. Psychological Services have to operate within a Council's policy framework. There will be areas of operation where service users' wishes will not be in accord with the policy and philosophy of the Council or the Psychological Service. Psychologists operate in an arena where there may be conflicting aims between major users of the service at the same time - schools, parents, education managers, children and young people. Issues involved in the inclusion of children with emotional and behavioural difficulties, or, possible placement in residential settings, can easily lead to conflicting demands being made of the psychologist.

Although much of the language used in Best Value is the language of business management and quality assurance, the underlying principles are already familiar to the work and practice of a psychologist. An applied psychologist has to have the ability and skills to think critically, to reflect on alternative options; to use information from other areas; to seek the views of clients; to consult with service users; to challenge existing assumptions; to set goals; to evaluate interventions and to act as an agent for change. Essentially, Best Value asks psychologists to apply psychological skills to their own services.

In conclusion, Best Value *should* aim to measure that which is valued rather than value that which can be easily measured. In achieving such an aim the process should be enabling for individual psychologists and services as a whole. There are a number of challenges for individuals and services in relation to the Best Value process. This paper has attempted to demonstrate that such challenges should not be perceived as threats but as opportunities to be creative and to implement positive

change within services. Once owned, the process of Best Value should be dynamic and organic, enabling services to change and continuously improve.

References

ASPEP (1999) Best Value in Psychological Services in Scotland, Practice Guidelines, Association of Scottish Principal Psychologists, June

Cherry (1998) Evaluation of an Educational Psychology Service in Context of an LEA inspection. Educational Psychology in Practice. Vol 14 No 2.118-126

COSLA Guidance on Service/Performance Reviews, Accounts Commission for Scotland/, Undated

Dick, R (1999) Best Value and the Education Service; presentation to PDP group in Perth

EFQM (1997) Quality Scotland Foundation. EQFM Model and the Public Sector FACE (Facilitated Assessment for Chief Executives)

Educational Institute for Scotland (1998) Best Value - Briefing for Educational psychologists Educational Institute for Scotland, October

MacDonald, J & Tanner, S (1988) Understanding benchmarking. Institute of Management:

Mackay, T (1999) Quality Assurance In Education Authority Psychological Services Self - evaluation using performance indicators. Scottish Executive Education Department

Scottish Borders Council (1988) Psychological Service Best Value Review November

The Scottish Office (1999) Closing the Circle - Raising Standards ISBN 0748072705

SOEID (1998) Education Authority Psychological Services in Scotland, HMI.

SOEID (1998) Circular 12/98 Best Value. Appendix C.

List of Appendices

1	Newham Tool Kit	51-52
2	Sample of a Psychological Service BV policy in draft form	53-66
3	European Quality Foundation Management	67-70
	List of participants	71

PSYCHOLOGICAL SERVICE

BEST VALUE TOOLKIT

(Newham 1999)

1. PURPOSE OF SERVICE

1.1 Strategy Purpose - (stable features of the service; contribution to Council/Education Dept Strategy; 1 sentence ideally).

Why are we here ?

1.2. Outcome (benefits to clients, not just output; should address needs identified in 1.

1.2 Needs, challenges or improvement in social conditions to be addressed by the service (consistent with objectives; address key issues/challenges.)

What do we do?

2 DESCRIPTION

2.1 Activities undertaken (core activities; key activities and processes contributing to 1.3.

2.2 Target groups (identify clients and other agencies).

2.3 Resources (people; buildings; budget; equipment & ICT.)

3. PERFORMANCE INDICATORS

3.1 Rating (1-4) against SOEID P1s

3.2 SWOT analysis

3.3 Council and Departments context

How well do we do it?

4. CONSULTATION

4.1 Client and community satisfaction, perception data, surveys of schools

5. IMPROVEMENTS

- 5.1 Perception improvements (baseline performance indicator and proposed improvement indicator - benchmarking).**
- 5.2 Process improvement priorities (methods of implementing change, community to staff and users; review and evaluation of changes).**
- 5.3 Quality management priorities.**

4. DELIVERY PLAN (a structured description of how the proposed changes would be delivered).

- 6.1 Summary of findings. (place the options in context).**
- 6.2 Process improvement options. (proposed development of the service; describe possible changes to process, procedures and how activities are performed).**
- 6.3 Impact and supply options on service provision. (outcomes as a result of 6.2; resources required or supplied by other agencies).**
- 6.4 Social/educational impact of options, (relates back to 1.3)**

5. RECOMMENDED WAY FORWARD

^(Summary of implementing change - programme plan; investment needs).

..... COUNCIL

PSYCHOLOGICAL SERVICE

BEST VALUE POLICY
(Draft)

1999-2002

CONTENTS

		PAGE
INTRODUCTION		3
1 PURPOSE OF SERVICE	<i>Why are we here?</i>	5
1.1 Strategic Purpose		5
1.2 Objectives		5
1.3 Outcomes		5
1.4 Needs, challenges, improvements in social conditions to be addressed by the service		6
2 DESCRIPTION	<i>What do we do?</i>	6
2.1 Activities undertaken		6
2.2 Target groups		6
2.3 Resources		6
3 PERFORMANCE INDICATORS	<i>How well do we do it?</i>	7
3.1 SWOT Analysis		7
3.2 Quality Assurance: Self Evaluation using SOEID Performance Indicators Council and Department context		8
4 CONSULTATION	<i>How do we know?</i>	8
4.1 Client and community satisfaction and perception data, surveys of schools, other agencies, parents and pupils.		8
4.2 EP team consultation and individual target setting		9
4.3 Council consultation		9
5 IMPROVEMENTS	<i>What we will deliver</i>	9
5.1 Perception improvements (baseline indicators and benchmarking).		9
5.2 Process improvement priorities		11
5.3 Quality management priorities		11
6 DELIVERY PLAN	<i>How we will deliver</i>	11
6.1 Process improvement options (proposed development of the service)		11
6.2 Social/educational impact of options		11
7 RECOMMENDED WAY FORWARD		12
7.1 Option Appraisal		12
7.2 Investment Needs		13
7.3 Programme Plan		13
Appendices:		
1 Programme Plan 1999-2002		14
2 Service Costs & External Providers		26
3 National Staffing Levels		27

Introduction

Best Value seeks to promote quality and value for money in local government. It is a continuous process of improvement in providing and delivering professional, high quality, effective and efficient services. A central idea is that a focus on what service users and stakeholders want will lead to improved service delivery and local accountability. Performance planning and target setting should support the process of local accountability and local targets should relate to national targets in order to support comparisons. Continuous improvement involves learning about best practice from others and applying it to improve standards and quality (benchmarking).

Best Value is based on four principles:

- 1. Accountability**
- 2. Transparency**
- 3. Continuous Improvement**
- 4. Ownership**

A Best Value analysis of service should attempt to:

Challenge – how do we know we are doing the right things? This requires involving clients in setting priorities, objectives and standards for the service in reviewing performance.

Compare – how do we know we are doing things right? This requires an audit of work undertaken, reviews of service and feedback from those receiving services.

Consult – how do we plan to improve? This requires a clear idea of current performance (user satisfaction) and an action plan about ways to improve and enhance existing services.

Compete – how do we account for our performance? This involves reporting back to those who receive services in a clear and cogent manner, mirroring the Standards and Quality Reports provided by schools and authorities.

In, the Psychological Service approached the Best Value process in a positive and pro-active way. The Service implemented a format, based on a Best Value toolkit (Newham 99) that would fit the local situation of a small authority with a small team, half of whom were staff who had recently joined the authority. Initially some of the concepts and the vocabulary were new to the Service but the Best Value framework provided a means to review the service and improve the Service Development Plan. In this way it became a process to take the whole team forward, to develop shared understandings and to produce a development plan to which everyone had contributed and so had a sense of responsibility and ownership. Although time consuming, it was recognised that it was important for the whole team to meet to work through the Best Value process. Time was required for discussion, reflective thinking, agreeing on design and recording. A tight agenda for this was drawn up based on the Best Value toolkit and the scheduled timescale was adhered to rigorously in order to move the process forward.

It is worth acknowledging the emotional impact of the Best Value process. A challenging and exciting procedure, it reassured the team by clarifying the extent of work the service was doing and doing well. As an instrument for planning and implementing change and bringing about increasingly transparent and accountable work practice it could seem threatening at times.

However, the way the Psychological Service chose to approach Best Value was central to moving the service forward as a team. It provided the opportunity for the Service to examine its strengths and weaknesses as perceived by the Service itself and by others. Ultimately it was a means for the Service to clarify its strategic purpose, set targets and implement strategies for improvement and in so doing, it provided a supportive framework for individual professional and team development. Best Value is the Psychological Services means of ensuring that it is a professional service of high quality for Council.

1. PURPOSE OF SERVICE

1.1 STRATEGIC PURPOSE

To apply psychological knowledge, skills, and expertise to contribute to the council's policy and practice in:
Raising educational standards
and
Meeting the needs of children and young people in relation to their learning, behaviour and development.

1.2 OBJECTIVES

1. To carry out the core functions of consultation, assessment, intervention, training and research across 3 levels of operation: child/family; educational establishment; council.
2. To maintain and further develop a high level of psychological knowledge, skill and expertise.
3. To develop a rigorous process of service development planning which reflects the basic aims and values of the authority.
4. To provide a quality service to users which is based on the principles of continuous improvement, accountability, ownership, and transparency.
5. To communicate key aspects of the service plan to target groups.
6. To evaluate the service taking into account the views of users.
7. To ensure that all aspects of service delivery are informed by a commitment to fairness and equal opportunity.
8. To provide an effective system of staff support and review.

1.3 OUTCOMES

- Improve the level of social and educational inclusion for all pupils.
- Contribute to a higher percentages of pupils achieve locally/nationally agreed targets.
- Enhance the range of quality of provision for children and young people with special educational needs.
- Increase the level of evidence based policy and practice.
- Enhance knowledge skills and expertise among professional staff in order to more successfully identify and meet children's needs.

1.4 NEEDS, CHALLENGES OR IMPROVEMENTS IN SOCIAL CONDITIONS TO BE ADDRESSED BY THE SERVICE

The Service works within the context of Anti Poverty Strategy to promote:

- Social inclusion
- Early Intervention

Target resources to redress the consequences of socio-economic disadvantage:

Promote Equal Opportunities for disadvantaged groups

Promote children's and young people's well being in terms of their social, psychological and learning needs.

DESCRIPTION

2.1 Activities undertaken

(key activities and processes contributing to 1.3 Outcomes).

Activities are undertaken at the three levels of:

- The individual child or family
- The school or establishment
- The local authority

To provide:

- Consultation and advice
- Intervention
- Delivery of professional development and training
- Research and development

2.2 Target groups

Children and young people in the 0-19 age population.

Parents and carers of young people.

Education staff

Education directorate/Council

Staff in other agencies

Voluntary sector staff

2.3 Resources

Staff: professional educational psychologists and clerical support

Buildings and furnishings

Budget

Equipment, Information and Communication Technology and materials.

PERFORMANCE INDICATORS

2.1 SWOT Analysis

Summary of strengths, weaknesses, opportunities and threats.

3.1.1 STRENGTHS:

- The staff maintains high levels of participation in and commitment to service development and quality assurance consistent with the British Psychological Society Code of Conduct.
- Sound working relationships and complementary skills are enhanced through collaboration and mutual support.
- Effective service delivery rests on children and parents being included as active partners, on implementing authority policy reliably, efficiently and promptly and on providing educational management with sound advice.
- Service delivery is enhanced by the application of research skills and involvement in national Professional Development Programmes.

3.1.2 WEAKNESSES:

- The absence of a task focused written **Service Delivery Plan** and up to date **documentation of procedures** for service delivery.
- No **Service Portfolio**.
- **No database**.
- An unfocussed **communication structure**.
- Information on **user needs and views** is not sought in a structured way.
- Only a limited framework exists for **evaluation and development** of Service Delivery (including assessments and interventions), of personal performance and of research opportunities.
- A **shortfall in resources** exists in a number of crucial areas such as the number of professional personnel.
- There is a lack of structure for **professional development** for both clerical and professional staff.
- Lack of **budget** information inhibits financial planning.

3.1.3 OPPORTUNITIES:

- Provide the council with the results of locally conducted research in order to inform evidence based practice and policies.
- Improve ICT provision to enable better analysis and monitoring of service delivery information.
- Transfer to a single operation base to improve internal communications, use of resources and facilitate team development.
- Prioritise time for Service Review and Planning.
- Bid for increased government funding for education and inclusion policy.
- Staffing ratio could benefit from Council and National policy on Pre-5 provision.
- Clarify Service priorities and targets through a service development plan.
- Information on the budget allocation for the Service would enable planned investment and inform implementation of Service development targets.
- Further develop positive links with University courses.
- Clarification of the EP role and unique contribution to the council policies and services.
- Interest in Emotional Literacy or EQ is growing nationally and internationally and is an area which is central to the role of the psychologist. It provides an opportunity for the Service to take a leading role in its development in

3.1.4 THREATS:

The Service is faced with certain problems or threats to effective delivery. These include:

- Difficulty in recruiting qualified staff due to a national shortage of psychologists.
- Economic restraint and uncertainty.
- Lack of resources, particularly in ICT.
- Skills deficits.
- Political/public ignorance re the Service.
- Joint working with diverse agencies and the range of educational developments may lead to duplication and blur both service and professional boundaries eg Area network learning and Behaviour support.
- Specialist lobby groups eg for dyslexia, ADHD, autism.

Quality Assurance: Self Evaluation using SOEID Performance Indicators

2.2 Council and Departments context

The Psychological Service is comprised of a team of highly qualified professional educational psychologists all of whom are Chartered or eligible to be Chartered with the British Psychological Society and abide by its Code of Practice which respects confidentiality and the basic human rights of the individual. The Children (Scotland) Act states that, in all cases, the well-being of a child is paramount. These basic principles are central to all work undertaken by the team of psychologists in

The team ethos is enthusiastic and supportive with members sharing good working practices, skills and professional expertise. Implementation of the Best Value process involved the team as a whole in working through a process of self-evaluation using the Performance Indicators for Psychological Services (MacKay, 99).

This provided baseline performance indicators on a number of themes within the 4 key areas of

- Management, Leadership and Quality Assurance
- Resources
- Ethos
- Service Delivery
-

The themes identified as priorities for improvement were:

- **Policy and Procedures**
- **Quality Assurance**
- **Quality of administrative support**
- **Quality of staff support**
- **Organisation of continuing professional development**
- **Quality and use of accommodation**
- **Range and use of facilities and resources**
- **Management of financial resources**
- **Delivery of professional development and training**
- **Research and development.**

(see Appendix 1 for a detailed plan)

CONSULTATION

2.3 Client and community satisfaction.

Promoting partnership and positive relationships is a major aim of’s Education Service Plan and a central focus for Best Value. The Psychological Service gathers and is planning to gather information on user satisfaction as well as providing users with information and feedback.

Perception of users is obtained from a number of agencies/users:

- Parent Feedback Form. At closure of a case and transfer points.
- Professional Users. Health Service, Social Work, Reporter. This was piloted in November 99 and will be gathered annually in June.
- Out of authority schools. Gathered annually in June, piloted in November 99.
- School Survey. All schools in were surveyed in May 99 and received feedback in August. This process would be repeated annually.

Written information is provided to users:

- Information Leaflets. Parent’s leaflet/Young person’s leaflet – given by the school at the point of referral.
- Young person’s worksheet – Worked through by the psychologist and young person at the start of casework.
- General Information Leaflet on the Psychological Service (in preparation)
- Parent’s Guide to the Record of Needs (in preparation for March 2000).

2.4 EP team consultation, individual perceptions and target settings.

2.4.1 The team meets regularly on a bi-monthly basis to discuss business matters and team development. The management style is democratic with individual members participating in discussions and plans to clarify procedures, good working practice and ways to take the service forward. However, there is no structured survey of individual perceptions of what is important and how the service is meeting individual expectations.

2.4.2 There is no clear structure operating for individual development and target setting. The first step in establishing a clearer process would be to complete a written service development policy to clarify priorities for the team. Individual team members’ perception should be consulted via a survey and individual targets agreed through interview with the PEP as part of a performance management programme within the Service Delivery Plan.

2.5 Council Consultation

4.3.1 The Psychological Service acknowledges and supports the council aims to

- Promote partnership and positive relationships
- Provide appropriate courses and services
- Ensure effective learning and teaching
- Raise educational standards
- Support learners
- Manage personnel finances and resources effectively
- Monitor, evaluate and review services.

4.3.2 The council aims inform the way that the Psychological Service carries forward its policies and procedures. However, the interface with council takes place mostly via the PEP and Education & Cultural Services Manager. A more comprehensive interaction could arise from providing the council with the Psychological Service Best Value Policy and seeking feedback from the council.

IMPROVEMENTS

2.6 Perception Improvements (baseline performance indicator and proposed improvement indicator- benchmarking).

5.1.1 Baseline Performance Indicators & Proposed improvements

This section follows on from 3.2 which identified baseline performance indicators on a number of themes within the 4 key areas of

- Management, Leadership and Quality Assurance
- Resources
- Ethos
- Service Delivery

This baseline evaluation indicated the areas of strength and weakness for the service.

A development plan was drawn up for identified weaknesses within each Key Area. The priority was to address the areas of weaknesses by identifying the theme to address; specify the target; specify the task(s) to achieve the target; describe the improvement indicator to measure success in achieving the target; list the personnel involved; and the proposed completion date. The plan for various themes within each key area is detailed in Appendix 1 and forms the Service Development Plan. SMART (specific, measurable, achievable, realistic and time limited) targets were used for the Service Development Plan. DIM (demanding, imaginative and movable) targets were used for the Investment Needs (p13).

5.1.2 Benchmarking

Benchmarking is a tool for comparing the effectiveness of a service against other services, other councils, and the private sector. Psychological Service has approached benchmarking by comparing:

- similar services provided by non-authority agencies
- staffing levels with other council psychological services and with Social Work department
- costs against another local authority psychological service. (Appendix 2).

5.1.3 Non-authority agencies used as comparators were the Dyslexia Association, SENSE for Deaf-Blind, and the Down Syndrome Association. It is important to recognise that each of these agencies focuses on one specific target group and none can offer the breadth of service of a local authority psychological service. The local authority psychological service is unique with its knowledge of the local context, its relationship with schools and local authority agencies, its relationship building and follow up service, and its statutory functions such as the Recording process. In addition to providing a more comprehensive and locally contextualised service, the local authority psychological service is provided at substantially less cost. For example, the cost per hour of local authority psychologist is £29 compared to a private psychologist fees of £90 +vat, Dyslexia Association of £43 and non-authority contracting out of £50 (refer to Appendix 2 for more details).

5.1.4 Staffing ratios. National staffing levels comparisons show that psychological service's staffing ratio is one EP to 3,457.3 children that compares badly with the average national staffing level of 1: 3,316.5. Nationally, 18 authorities have a better staffing ratio and 13 worse, with a range of 2,236.7 in Western Isles to 4,101.3 in Perth (Appendix 3). However Glasgow which, it may be argued, is the only local authority with more severe deprivation than , has a comparatively much enhanced staffing level of one EP to 2,745.6.

5.1.5 Intra-authority comparisons of Social Work and teaching staff in schools to young people age 0-19 (N=24,709) show that there is

- 1 SW for 727 yp,
- 1 teacher for 27 yp,
- 1 Head Teacher for 54 yp,
- 1 EP for 3530 yp.

An alternative way of considering this is as 5 Social Workers for each EP, 132 teachers for 1 EP and 8 Head Teachers for 1 EP.

5.1.6 Costs were compared with that of another local authority (.....) and were found to be almost equivalent eg £25 per hour per EP (..... 98), £26 per hour per EP (..... 99).

2.7 Process improvement priorities (methods of implementing change; review and evaluation of changes)

This section follows from section 5.1.1. Once the development plan was completed it was taken forward by task groups. On completion of each section the task group would present the work to the team for peer consideration, discussion and evaluation.

2.8 Quality management priorities.

The PEP took an overview and made adjustments to the draft Service Delivery Plan in order to ensure that priorities were in line with council and national priorities and that completion dates were realistic and attainable.

DELIVERY PLAN

2.9 Process improvement options (proposed development of the service; description of possible changes to processes, procedures and how activities are performed).

Written job descriptions and procedures drawn up.

Induction Pack created.

Explicit routes set up for accessing support for individual EPs within the service.

Written professional development programme to plan for service needs.

Written professional development programme for each individual in the Service.

A review structure for the programmes to be up-dated annually.

Efficient organisation of Dumbarton Centre for all staff.

Maintenance of a small base in Clydebank.

Audit of disabled access.

Up to date documentation accessible to internal and external users.

All staff have access to a PC.

An operational database providing quick and easy access to accurate information.

Structures in place to speedy and clear communication channels within the team and with the PEP.

Increased level of information on user views.

Improved responsiveness as measured in User returns.

The service has clearly identified the way forward for the service and the uniqueness of the service provided to users.

Issue and distribute a service portfolio to all schools in WD, to council and to other agencies.

EPs have access to a system of peer support with casework.

An increase in the number of sessions of training/development work in schools.

A list of schools and council development priorities to identify areas in which the Psychological Service can provide assistance.

2.10 Social/educational impact of options (relates back to 1.3).

2.10.1 To Improve the level of social and educational inclusion for all pupils by

- Promoting early intervention
- Conducting research on the effectiveness of inclusion

2.10.2 To assist in increasing percentages of pupils achieve locally/nationally agreed targets by

- conducting training/development work in schools
- developing pre5 services

2.10.3 To enhance the range of quality of provision for children and young people with special educational needs by:

- Conducting research to provide evidence based policy and procedure
- Working closely with schools and other agencies
- Conducting training/development work in schools

- 2.10.4 To increase the level of evidence based policy and practice by
 - Planning and implementing research projects related to practice.
- 2.10.5 Enhance knowledge skills and expertise among professional staff in order to more successfully identify and meet children's needs by
 - Provide schools and other agencies with consultancy, advice and assessment results.
 - Participate in multi-agency meetings.
 - Maintain an up to date database of children with special educational needs.

RECOMMENDED WAY FORWARD

(Summary of implementing change – programme plan; investment needs).

7.1 Option Appraisal

CoSLA guidelines require 5 options to be considered:

- Cease the service
- Continue the existing service
- External market test the service
- Externalise the service
- Continue the service with improvements

7.1.1 Ceasing the service is not an option as it is a statutory requirement on local authorities at present.

7.1.2 The Best Value process has identified areas for development to improve the service and laid out a plan to implement change it would therefore not be appropriate to continue the service unchanged.

7.1.3 External market testing of the service is not possible as no alternative service providers exist who could provide a full service market testable option. Comparison of costs per EP with another local authority (Borders) indicates that costs are comparable and when compared to a local authority with similar levels of deprivation (Glasgow), WD would appear to be under-resourced with regard to staffing levels.

7.1.4 Externalising the service e.g. to non authority agencies as outlined in 5.1 would not be cost effective nor would it provide a quality contextualised service. It would both increase cost and reduce the scope and range of services provided.

7.1.5 The option of continuing the service with the improvements identified by the Best Value process and ensuring that targets are met is the preferred option.

7.2 Investment Needs

7.2.1 If the service development plan is to be implemented and if is to benefit from the proposals recommended from the Best Value process, it is crucial that the service is adequately staffed to the level whereby it can implement changes and continue to meet generic work loads.

7.2.3 Consultation with user groups indicates that while users value the service many voice dissatisfaction over the amount of time available to them from the service and request an increase in support.

7.2.4 At present the service does not have adequate time to engage in locally conducted research to help inform policy and practice and provide advice on this to council.

7.2.5 An increase in staffing requires consideration by Education Management.

7.2.6 Given that there is a national shortage of fully qualified educational psychologists and that most local authorities are actively seeking staff it may be difficult to fill additional posts nevertheless recruitment should be pursued. In addition to this it would be possible to create a new post of Assistant Psychologist.

This post would require applicants to possess a first degree in psychology but not post graduate qualification and training. Such posts have a precedent in England where some local authorities have employed assistants and have a favourable view of the help they provide in easing the workload of fully qualified EPs (Educational Psychology in Practice, Jan 99). The concept of assistant to educational professionals exists in Scotland in the post of classroom assistants in schools and in the field of professional psychology with Assistant Clinical Psychologists.

7.2.7 Investment in a database is a priority.

7.2.8 The central role that the Psychological Service can and should play in Emotional Literacy, EQ development and Skills for Learning needs clarification and development. Recent research evidence indicates that this is an important area that plays a part in inclusion, raising achievement in exam results, and also in equipping young people with skills for life and success in the workplace.

7.2.9 Dedicated time is required to keep the Plan alive, to take it forward and to turn proposals into actions. One way to do this is to change team meetings from bi-monthly to once monthly, use the freed up half day for Task Group meetings and allocate one further half day a month to Task Group business. This would dedicated one half day a fortnight to Service Development and Best Value.

7.3 Programme Plan.

The Programme Plan for Service Development is laid out in Appendix 1.....

Appendix 2

..... Psychological Services Budget FY 1999/2000		
1	Based on 52 week availability	Cost
	Total service cost	£371,480*
	Per fte (8 Psych Service Staff)	£46,435
	Per calendar week (52)	£893
	Per day (÷5)	£179
	Per hour (÷7)	£26
2	Based on 225 working days per annum per fte	
	Total Service Cost	£371,480*
	Per fte (8 Psych Service Staff)	£46,435
	Per working day (÷5)	£206
	Per hour (÷7)	£29
	* Note: these costs relate only to the budget for Psychological Services and do not include charges for Central Administration Allocations etc.	

External Agency providers of psychological services.

Note: no other service provider makes a full-service range of inputs. These referred to here are only one off individual assessments/services. There is no provision of a consultation service for schools and authority, interagency liaison, routine follow up or involvement in statutory functions (Record of Needs).

Organisation/Provider	Service	Cost
Down Syndrome Association	Consultation & advice Assessment & report (estimated 3.5 hours) from current association literature	£50.98 per hour (+VAT) £178.43 (+VAT)
Dyslexia Association	Assessment & report Estimated 3.5 hours) from advert in the BPS Appointments Jan 2000.	£150 (+VAT) £43 per hour (+VAT)
Private Clinical Psychology Service	Hourly rate including overheads (from SBC report)	£90 per hour (+VAT)
..... Psychological Service for non-authority work.	Contracting out rate for non-authority work eg solicitor requests (from PEP Fife).	£350 per day £50 per hour
ASPEP agreed cross –authority cost	Consultancy work, INSET etc	£250 per day
SENSE organisation	Specialist advice/assessment re multiple sensory impairments.	£250 per day (+VAT)

National Staffing Level Comparisons (ASPEP survey 31/8/99)

Authority	Max Poss Staffing	Establish Staffing	Establish Ration	PEPs	Seniors	%Promoted	Vacancies
Aberdeenshire	17.9	17.5*	3,267.1	4	3	40	2.4
Aberdeen, City	11.9	11.75	3,961.3	1	2	25.2	0.1
Angus	7.4	7.00	3,687.9	1	2	40.5	-
Argyll & Bute	6.0	6.00	3,332.5	1	1	33.3	-
Clackmannan	5.1	4.60	2,602.4	1	2.1	60.8	-
Dum & Galloway++	10.0	10.0	3,777.1	4	-	40.0	2.0
Dundee City	10.5	8.80	3,814.9	1	1.8	26.7	0.5
East Ayrshire	8.5	8.50	3,464.7	1	4	62.7	2.4
E. Dunbarton	8.0	8.00	3,187.2	1	3	50.0	1.0
East Lothian	7.15	7.15	2,943.9	1	1	28.0	1.1
E. Renfrewsh.	8.0	7.00*	3,057.7	1	3	50.0	1.0
Edinburgh	26.0	26.00*	3,545.7	4	4	30.8	-
Falkirk	10.3	10.30	3,278.4	1	3.4	42.7	3.4
Fife	26.5	26.50*	3,163.7	3	6	34.0	2.5
Glasgow city	52.5	52.50*	2,745.6	4	17	40.0	3.1
Highland	16.2	15.70*	3,254.3	1	7	49.4	2.0
Inverclyde	6.4	6.00	3,488.8	1	2	46.9	-
Midlothian	6.0	5.90	3,274.7	1	1	33.3	-
Moray	7.9	6.90	3,125.7	1	1	25.3	0.6
North Ayrsh	10.8	10.50*	3,310.7	1	4	49.0	1.1
N. Lanarksh	23.0	23.00	3,567.2	3	8	47.8	-
Orkney	2.0	2.00	2,422.0	1	-	50.0	-
Perth & Kinross	8.0	7.50	4,101.3	1	2.5	43.8	-
Renfrewshire	12.5	12.00	3,583.9	1	5	40.0	-
Scot Borders	5.6	5.60	4,243.9	1	1	35.7	-
Shetland	2.0	2.00	3,085.0	1	-	50.0	-
South Ayrsh	8.0	8.00	3,245.1	1	3	50.0	0.5
S. Lanarksh	21.0	21.00	3,577.6	2	6	38.1	2.9
Stirling	5.5	5.50	3,529.6	1	0.5	27.3	-
W. Dunbarton	7.2	7.00	3,457.3	1	3	55.6	1.5
W. Lothian	12.8	12.40*	3,153.4	2	2	31.3	-
W. Isles	3	3.00	2,236.7	1	-	33.3	-

Total vacancies 27.6 of which all but 3.9 are for main grade posts.

++ PEP not counted for purposes of staffing ratio.

*Services with increase of more than 0.15 in establishment.

Ratio of professionals to young people (0-19) in

0-19 population = 24,709

Number in WD (fte)	Profession	Ratio 1: to 0-19 population*
34	Social Workers	1:727
923	No of Teachers (21 Nursery, 425 Primary, 477 Secondary)	1: 27
54	Head Teachers	1: 458
7	Educational Psychologists	1: 3530

* rounded up to nearest whole number.



Organisational Self-Analysis Model

This Self-Analysis Model (see overleaf) will enable you to obtain an initial assessment of your organisation's performance in the field of Quality Management.

We have selected nine key 'business enabling' mechanisms ranging from 'Leadership' to 'Business Results'. For each, there are five statements which may indicate the performance of your organisation in this particular area; these will earn scores of 1, 3, 5, 7 or 9. (You may, of course, feel that the truth lies somewhere in between, in which case you can score yourself 2, 4, 6, 8 or 10).

Multiply your score in each line by the weighting factor shown, and then add up your nine weighted totals to give the grand total which you should enter into the box on the right. On the back page of this Self-Analysis document, we will show you how to interpret the total score you have achieved.

Some points to help you complete and use the Self-Analysis Model

- 1. Use the Model to identify areas of strength within your organisation and areas for improvement. Keep notes of good points and areas that you feel could be - or should be - improved.*
- 2. Our statements are intended mainly to be 'memory-joggers' and may not necessarily cover every relevant issue. Jot down any that you think are appropriate for your organisation and use them as a check-list for future action.*
- 3. It's sometimes a good idea to ask members of your organisation to complete the Model independently, and then compare notes of your findings. People in different roles at different levels may well have perceptions which differ from your own. It will enable you to identify areas for improvement in a non-threatening way.*
- 4. The Model provides an overview of how your organisation recognises the importance and measures the efficiency of 'business enabling' mechanisms such as Leadership, the deployment of Policy and Strategy, and People Management; it also highlights how you use your Resources and operate your Processes. The Model can also help you to see how your organisation uses Results - for example, how you collect and use data from sources such as Customer/Employee surveys and management/financial information. Look for trends, ideally over three years, and consider how effectively the data is used and where there is room for improvement.*
- 5. When you have completed the scoring, you will have enough data to produce your first-draft Improvement Plan identifying areas in which you may wish initially to concentrate your efforts. Remember that there may also be other relevant activities going on elsewhere in your organisation - 'Investors in People', ISO 9000, and so on. Combined with your Improvement Plan, they could be a powerful way to initiate Improvement activity at all levels in your organisation.*

Although the Improvement Plan is yours, you will only achieve success by ensuring that your organisation focuses on its Stakeholders: customers, employees, suppliers, shareholders and the society in which you operate

Organisational self-analysis model

Leadership

Management act as individuals in taking and communicating decisions. They promote the need to develop and improve the organisation and to set targets.

Management act as a team, ensure two-way open communication and become involved in improvement groups. They agree plans and set priorities.

Managers develop and support improvement teams and make time available for them to work. They check progress and recognise involvement; they say thank you.

Score 1 2 3 4 5 6

Policy and Strategy

Partial Business Plans exist – only concentrating on financial targets. Plans are not widely communicated or visibly championed by the top team.

Business plans encompass competition data e.g. customer satisfaction measures. Key points are communicated; individuals understand and accept responsibility.

Strategic direction – Vision, Mission, Objectives etc. are communicated to all stakeholders. A new culture is being developed. Resource made available for continuous improvement.

Score 1 2 3 4 5 6

People Management

Training is seen as a cost and people are employed to do a job.

The management team recognises that success comes from employees. Skills training is encouraged and training plans are agreed and aligned to company goals.

Delegation of responsibility to people at appropriate levels takes place. Appraisal schemes match the aspirations of the people and the organisation.

Score 1 2 3 4 5 6

Partnerships & Resources

Resource management tends to be directed solely at financial areas. Decisions on stock and materials are taken using hunches and gut feelings. Information is kept in people's heads.

Information available – often talked about or over-analysed but rarely used to improve. Cash and working capital are seen by all to be important. Stock controls in place.

Decisions are made on the basis of info. Stock is related to customer needs. Process improvement and evaluation of new technology takes place. Planning systems are in use.

Score 1 2 3 4 5 6

Processes

Few procedures exist apart from financial controls. Everyone does their best and firefighting is the norm. Changes are made to fix problems as and when appropriate.

Procedures have been written and imposed. Bureaucratic systems exist with little chance for improvement. Non conformances are seen as 'bad'. Systems purpose not clear to users.

Crucial processes are owned and there is support to monitor and improve them. Ownership is assigned to management who review corrective action etc.

Score 1 2 3 4 5 6

Customer Results

Customer satisfaction is only considered in terms of external complaints. Complaints are dealt with when they arise with little attempt to find or correct the cause.

Customer satisfaction measures are available from surveys. This data is used to set performance standards and staff have been trained in customer service.

The need to meet agreed customer needs is reflected within the core strategic plans. A customer care policy exists and is widely published.

Score 1 2 3 4 5 6

People Results

Disputes and grievances are resolved as and when they arise. Absenteeism and/or staff turnover is high. Morale at times is poor and management tend to concentrate on themselves.

People's views are sought through surveys. Staff are consulted on improvement but grievances are dealt with by 'personnel'. Health and Safety are treated seriously.

Two way internal discussions take place and some form of appraisal process is used for joint improvement targets. Feedback on a broad range of issues happens – morale is good.

Score 1 2 3 4 5 6

Society Results

Environment and social obligations seen as costly and a threat to competitiveness. Damage limitation exercises are used to counter 'problems'. Community work limited to individuals.

Environment and social requirements are dealt with to conform fully with legal requirements. Policy documents and internal standards have been written.

Strategic quality planning incorporates environmental and social obligations. Responsibility is allocated to senior managers. Environmental audits take place. Keen practitioners encouraged.

Score 1 2 3 4 5 6

Key Performance Results

The financial results are available and some non-financial indicators published. They are seen as management data by the majority of staff.

Systems exist to monitor and display financial and non-financial indicators. They are communicated to staff and improvement targets indicated.

Indicators used to measure process & outputs and are available to improvement teams. Trends monitored and used to set targets. Supplier quality is measured and shared.

Score 1 2 3 4 5 6

Starting with Leadership. Read all the statements across the page and choose the number you feel best reflects the situation within your organisation. Multiply the number you have chosen by the factor shown and enter your score in the box on the right. Repeat the exercise for the other eight criteria and total your scores to produce a Grand Total. Overleaf, we interpret the result.

		FACTOR	TOTAL
Managers are willing to let go and empower people to become involved in improvement teams between departments and with customers and suppliers.	All managers are active inside and outside the organisation in promoting improvement activity. Continuous improvement is the culture and business philosophy.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 10 =	
Strategic direction understood by all stakeholders. Visibility championed by top team. Key success indicators (e.g. meeting customers needs) are reviewed at all levels in the organisation.	Strategic direction visibly achieved. People's success recognised by leaders at all levels. Innovation and continuous improvement is the culture throughout the organisation.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 8 =	
Employees are allowed to implement improvement activity without reference to management. A climate conducive to personal development and continuous improvement exists.	Staff morale is high and exceeds the competitive benchmark. The full potential of all people is being realised to achieve the strategic direction.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 9 =	
All areas of waste measured and form part of improvement plans. Data gathered to form accurate view of competitors and used in business planning. Financial plans meet stakeholder needs.	All the companies' resources are deployed to meet agreed policies and strategies. Benchmarking against the 'best in class' is a key resource improvement driver.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 9 =	
Meeting customers' needs is seen as the purpose of the system. Procedures and operating standards are owned by the operators, managers and suppliers. Processes are being controlled.	System ensures all stakeholder's needs met by existing and new products/services. Customers find it easy to deal with us. Continuous feedback causes improvement and innovation.	Are you REALLY this good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 14 =	
Continuous research exists to identify and meet individual customer needs. This research is fully integrated into business planning, improvement and innovation processes.	Customer commitment is being delivered by all processes & relationships. Improvement and innovation exceed customers' expectations and the competitive edge is increasing.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 20 =	
Business changes that can adversely affect staff are jointly worked on. Data available to show that all employees feel responsible for both their jobs and improving the organisation's capability.	Benchmarking against other organisations show employee satisfaction is high and has an improving trend. Two way appraisal is taken as the 'norm'.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 9 =	
Data shows the organisation 'betters' legal requirements. Encouragement is given for employees to become involved in supporting local community activities. Public aware of environmental strategy.	Data is gathered and views sought from local society and employees and is used in business planning. Good environmental performance has been recognised externally.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 6 =	
Benchmarking is used to compare results with industry and 'best in class' trends. Difference between targets and results are always published and available to stakeholders on request.	The organisation's performance exceeds external benchmarks. Stakeholders are proud to be associated. A commitment by all to improve our business continually is our culture.	Are you REALLY This good!	
7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>		X 15 =	

GRAND TOTAL

How did you fare?

Is your organisation making progress in its quest towards Excellence? The chart below will measure your progress so far and also give you some idea of how you could boost your performance by implementing a Total Quality approach to your business.

Your Score	Improvement opportunity*		So what next?
	Manufacturing (% of turnover)	Service (% reduction in costs)	
800 or more	Up to 10%	Up to 16%	Congratulations on your excellent score!
600 - 799	5 to 15%	8 to 24%	You are well on the way, but don't relax - there's still more to do! How would your customers assess you?
400 - 599	10 - 20%	16 to 32%	You are ahead of many. What areas cause concern? Have you and your Management Team agreed improvement plans?
200 - 399	15 to 25%	24 to 40%	You are amongst many! Do you and your Management Team share the same views and concerns?
Below 200	More than 25%	More than 40%	No need to panic! You're surviving - but what a tremendous opportunity to improve your performance!

* The 'improvement opportunity' represents the likely cost savings available to your organisation, based on the experiences of a wide range of businesses. It is sometimes called 'the cost of quality'.

Your next step

You now need to develop a detailed improvement and action plan. To help you in this task Quality Scotland recommends the use of FACE (Facilitated Assessment for Chief Executives). Details of courses and assisted facilitation can be obtained by contacting Quality Scotland, Membership Services - 0131 556 2333.

© Excellence North West 1996

Excellence North West acknowledges with gratitude the assistance of R/JL Mitchell in the development of this Model.

Quality Scotland is indebted to Excellence North West for permission to reproduce and utilise this material as part of its workshop material. All other rights reserved to Excellence North West.

List of Participants

Best Value Group

Peta Barber	Psychological Service Education Offices Johnstone Place BRORA Sutherland KW9 6PG 01408 621382
Shona Crawford	Psychological Service St Brendan's Primary School 45 Barons Road, MOTHERWELL ML1 2NB 01698 262840
Laura Ann Currie	Psychological Service St Aloysius' PS Main St Chapelhall AIRDRIE M6 8SF 01236 764135
Fergal Doherty	Psychological Service St Mark's Primary School Rockbank Dr BARRHEAD G78 2JA 0141 577 4520
Shona Isbister	Psychological Service Dumbarton Centre Aitkenbar P S Whiteford Avenue DUMBARTON G82 3JL 01389 763279
Peter Kaye	Psychological Service Education and Children's Services Blackfriars PERTH PH1 5LU 01738 476279
Roslyn Redpath	Psychological Service St Mark's Primary School Rockbank Dr BARRHEAD G78 2JA 0141 577 4520
Chris Scott	Psychological Service Matthew Street KIRKCALDY KY2 5AT Fife 01592 412500
Gordon Trahar	Psychological Service St Brendan's P S 45 Barons Road MOTHERWELL ML1 2NB 01698 262840
Co-ordinator Cyril Hellier	Psychological Service Education and Children's Services Blackfriars, PERTH. PH1 5LU 01738 476326