



**THE PRESIDENCY
REPUBLIC OF SOUTH AFRICA**

DEPARTMENT: PLANNING, MONITORING AND EVALUATION

FRONTLINE SERVICE DELIVERY MONITORING OPERATIONAL FRAMEWORK 2015-2016



TABLE OF CONTENTS

LIST OF ABBREVIATIONS AND ACRONYMS	2
GLOSSARY OF TERMS	3
LIST OF FIGURES	5
1. BACKGROUND	7
2. STRATEGIC REFERENCE FRAMEWORK	10
3. PURPOSE	13
4. FRONTLINE SERVICE DELIVERY MONITORING PROGRAMME OPERATION COMPONENTS	13
4.1 Component 1: Planning and Review	13
4.2 Component 2: Implementation Visits	15
4.2.1 <i>Baseline Visits</i>	16
4.2.2 <i>Feedback Meeting</i>	18
4.2.3 <i>Improvement Meeting</i>	20
4.2.4 <i>Unannounced Rescoring Visits</i>	25
4.3 Component 3: Data Analysis and Reporting	27
4.3.1 <i>Data Analysis</i>	27
4.3.2 <i>Reporting</i>	28
4.4 Component 4: Knowledge Management	30
5. TOOLS AND GUIDELINES	32
5.1 Tools and Guidelines for Review	32
5.2 Tools and Guidelines for Planning	32
5.3 Tools and Guidelines for Data Collection	32
5.4 Tools and Guidelines for Reporting	32
5.5 Tools and Guidelines for Knowledge Management	32
6. CONDCUT OF MONITORS	33
7. REFEENCES	35



LIST OF ABBREVIATIONS AND ACRONYMS

COGTA	Department of Cooperative Governance and Traditional Affairs
DPME	Department of Planning, Monitoring and Evaluation in the Presidency
DPSA	Department of Public Service and Administration
FMPPI	Framework for Management of Programme Performance Information
FSDM	Frontline Service Delivery Monitoring
GWMES	Government-Wide Monitoring and Evaluation System
JAP	Joint Annual Plan
MCCC	Municipal Customer Care Centre
M&E	Monitoring and evaluation
NDP	National Development Plan
NEPF	National Evaluation Policy Framework
NT	National Treasury
OoP	Office of the Premier
PFPM&E	Policy Framework for Performance Monitoring and Evaluation
PIS	Performance information systems
PME	Performance monitoring and evaluation
SASQAF	South African Statistical Quality Assessment Framework
SASSA	South African Social Security Agency



GLOSSARY OF TERMS

Baseline visit:	The initial visit to the targeted service delivery facilities. At this visit baseline data is collected and used to monitor the quality of service at that service point. Baseline visits are conducted by the Department of Performance Monitoring and Evaluation's Frontline Service Delivery Monitoring unit in partnership with the Offices of the Premiers. The baseline data that is compiled describes the situation prior to the development or implementation of improvement plans.
Facility scorecard:	This shows briefly how each service facility performed in each of the key assessment areas. These are shown in various colours and scores can vary between very good and poor. The scorecard also includes the findings and recommendations for the facility monitored.
Feedback meeting:	At the feedback meeting the findings generated by the monitoring visit or assessment process are communicated to the relevant stakeholders and monitored department. The feedback process aims to verify the findings of the baseline visit and agree on the final improvement plans with the monitored department. Feedback visits are conducted for all monitored service delivery facilities.
Improvement plans:	Corrective plans developed by the Department of Planning, Monitoring and Evaluation, the Office of the Premier and the management of the affected service delivery facility. The plans address problems identified during a monitoring visit and are developed for all facilities monitored.
Improvements monitoring:	A process in which Frontline Service Delivery Monitoring undertakes two monitoring activities at service delivery facilities where a baseline and feedback visit have taken place and improvement plans have been developed. The monitoring activities include a meeting in which improvements are discussed with facility management, and an unannounced visit aimed at tracking improvements in performance and scores in the key performance areas that were identified as weak in the baseline visit.
Improvements monitoring findings:	Findings that focus on the improvements monitoring and show trends between the baseline visits and subsequent visits.
Joint annual plan:	A plan in which all monitoring visits, their length, potential team and costs are detailed.
Key performance areas:	The standards on which the monitoring is based. There are eight areas which the Frontline Service Delivery Monitoring Programme monitors in each service facility.
Monitor:	An official from the Department of Planning, Monitoring and Evaluation or the Office of the Premier, who collects data by interviewing citizens, staff and conducting observations in a service facility to monitor its performance.



Monitoring visit findings:	Results compiled following a monitoring visit reflecting the actual situation at the time of the monitoring visit.
Photographic evidence:	Photographs of the monitoring visit findings of each performance area and each service point monitored. Used for reporting this demonstrates the current state of a service point and can indicate improvements from the baseline.
Questionnaire:	Used to gather baseline data at service delivery facilities. At the facility, a paper questionnaire is administered to staff and citizens by the monitors. After each visit, the questionnaires are captured electronically.
Sector-specific standards:	Standards that supplement the key performance areas being monitored, and address key and relevant issues within a particular sector.
Visit summary report:	Consolidated information about a service facility, sourced from the monitor, staff and citizens' questionnaires. It indicates the performance and scores of each service delivery facility in the eight key performance areas monitored, with photographs and an action plan.



LIST OF FIGURES

1.	Key performance areas monitored	7
2.	Baseline Visit	17
3.	Rating System	18
4.	Feedback Visit	19
5.	Improvements Facilitation	21
6.	Selection criteria for improvements monitoring sites in 2015/16	23
7.	Improvements Monitoring Visit	28
8.	Improvements rating table	26
9.	Reporting	29
10.	FSDM Reporting Flow	30
11.	Qualities of a Professional	33



1. BACKGROUND

Government’s 2009 Policy Paper on Performance Monitoring and Evaluation focuses on an outcomes approach. Since April 2009 government has established outcomes-focussed delivery agreements, which are now in place. Increasingly the emphasis has shifted to reporting, monitoring and evaluation.

The Department of Planning, Monitoring and Evaluation in the Presidency has the following key mandates:

- Facilitate the development of delivery agreements for the cross cutting priorities (outcomes) of government and monitor and evaluate the implementation of these plans;
- Monitor the performance of individual national and provincial government departments and municipalities;
- Carry out evaluations;
- Promote good monitoring and evaluation practices in government; and
- Monitor the quality of frontline service delivery.

The Frontline Service Delivery Monitoring Programme enables the Department of Planning, Monitoring and Evaluation to visibly monitor and evaluate service delivery on the ground in order to verify service delivery outputs and outcomes in the delivery agreements. It was established in 2011 and commenced its activities in June of that year. The programme, through unannounced site monitoring visits, monitors the quality of service delivery at selected service sites. Interviews are conducted with citizens and staff and the findings are produced in the form of a score card for each facility monitored. The findings are presented to the relevant sector departments and Cabinet at least once a year. The Department of Planning, Monitoring and Evaluation and Offices of the Premiers work with the relevant departments to ensure that corrective actions are taken where the results are found to be poor

The focus is on monitoring the following generic key performance areas for quality of service delivery in line with the policies and regulations of the Department of Public Service and Administration and the responsible national sector departments:

Figure 1: Key performance areas monitored

Key assessment area	Performance standards
Location and accessibility	Accessibility <ul style="list-style-type: none"> ✓ Provision of access to persons with disabilities ✓ Distance of the facility to surrounding areas ✓ Travel time to the facility ✓ Mode of transport utilized by public
Visibility and signage	Road signage <ul style="list-style-type: none"> ✓ Availability of road signage leading to the facility External and Internal signage <ul style="list-style-type: none"> ✓ Availability of signboards with facility name, services, and costs (where applicable), ✓ Directional signage inside the facility ✓ Signs accommodating the illiterate Visibility <ul style="list-style-type: none"> ✓ Wearing of name tags by staff ✓ Contact details of management
Queue management and waiting times	Queue management <ul style="list-style-type: none"> ✓ Queue management systems in place ✓ Effectiveness of the queuing system ✓ Provision for people with special needs Waiting times <ul style="list-style-type: none"> ✓ Availability of standards for waiting time ✓ Waiting times (Actual and preferred)



Dignified treatment	<ul style="list-style-type: none"> ✓ Address of citizens (language) ✓ Compliance with Batho Pele principles ✓ Staff knowledge of their work
Cleanliness and comfort	<p>Cleanliness</p> <ul style="list-style-type: none"> ✓ Cleanliness of facility ✓ Maintenance of facility ✓ Cleanliness and availability of necessities in ablution facilities <p>Comfort</p> <ul style="list-style-type: none"> ✓ Availability and capacity of waiting areas ✓ Conduciveness of working environment ✓ Effectiveness of working equipment
Safety	<p>Safety</p> <ul style="list-style-type: none"> ✓ Availability of security guards *(Not for SAPS) ✓ Availability of security measures ✓ Sense of safety within the facility ✓ Adherence to health and safety procedures
Opening and closing times	<ul style="list-style-type: none"> ✓ Display of operational hours (Not for SAPS) ✓ Adherence to operational hours ✓ Service disruptions
Complaints and compliments management system	<ul style="list-style-type: none"> ✓ Availability of complaints and compliments procedures ✓ Availability of complaints/ compliments box ✓ Availability of necessary stationery Is the suggestion box resourced? ✓ Records of monthly and complaints statistics

The sites monitored are Home Affairs offices, health facilities, schools, police stations, South African Social Security Agency (SASSA) offices, Drivers licence testing centres, courts, and municipal customer care centres (MCCC). These sites are specifically targeted because of the importance of the services they provide to citizens and the need for all users to receive a quality service when they use these facilities.

The focus of the programme for 2011 to 2015 is on the five key government priorities namely education, health, crime, job creation, rural development and agrarian reform. Within the various sectors, particular attention is paid to monitoring the following sector-specific standards:

- Education:** Timeous textbook and workbook availability, cleanliness and safety of schools, teachers in schools teaching for seven hours per day.
- Health:** Waiting times in queues in hospitals and clinics, availability of medicines and other basic supplies, cleanliness and the safety of health facilities.
- Home Affairs:** Turnaround times for issuing identity documents.
- Justice:** Turnaround times: feedback to public regarding progress with their case.
- Police:** Reducing average turnaround times to calls for assistance and provision of feedback regarding progress with cases to members of the public by the police.
- SASSA:** Turnaround times for applications for social grants
- Transport:** Service delivery in drivers' licence and testing centres with respect to the turnaround times for issuing licences.
- COGTA:** Service delivery in municipal customer care centres (sector-specific standards are under development).



This Frontline Service Delivery Monitoring Programme is **NOT**:

- A complaints management service – this is sufficiently addressed by the various hotlines and call centres already provided by the Presidency, Premiers' Offices, and line departments; or
- Intended to be a comprehensive and representative sample; or
- Intended to replace the responsibility of line departments for frontline service delivery improvements and for their monitoring of these improvements.

The Frontline Service Delivery Monitoring Programme's objectives are to:

- Strengthening the role of the Department of Planning, Monitoring and Evaluation and the Offices of the Premiers in the verification of monitoring results in order to improve the quality of service delivery at frontline facilities;
- Identify developmental areas in delivery and facilitate improvement;
- Highlight best practices and encourage the sharing of information;
- Expose the Offices of the Premiers and line departments to the importance of doing on-site verification of monitoring results, especially for priority projects, and responsible stakeholders to a problem-solving and action-oriented approach to monitoring.
- Demonstrate the value of user views in a monitoring system;
- Demonstrate how to use monitoring information for quick improvement; and
- Provide the responsible top management of these facilities with facts about the conditions in the frontline.



2. STRATEGIC REFERENCE FRAMEWORK

The Constitution

The Constitution of the Republic of South Africa is the highest or supreme law of the country. It sets out how our government is formed, how it is elected, and how it should be run. It contains the rules that a government must follow as well as the principles that inform those rules. It sets out the power of government and indicates the limits to that power. It also contains the rights of citizens and the duties of government. The Bill of Rights in the Constitution specifies the rights of all people in our country.

The Constitution, in chapter 10, includes the following key principles for service delivery by government institutions:

- A high standard of professional ethics must be promoted and maintained;
- Efficient, economic and effective use of resources must be promoted;
- Services must be provided impartially, fairly, equitably and without bias;
- People's needs must be responded to, and the public must be encouraged to participate in policy-making;
- Public administration must be accountable; and
- Transparency must be fostered by providing the public with timely, accessible and accurate information.

The mandate of the Department of Performance Monitoring and Evaluation is derived from section 85(2)(c) of the Constitution which states that the President exercises executive authority, together with the other members of the Cabinet, by coordinating the functions of state departments and administrations.

This mandate has been further elaborated by President Zuma in his annual State of the Nation addresses as well as various Cabinet decisions. It has also been elaborated by the Minister for Performance Monitoring and Evaluation through the "Policy Framework on Performance Monitoring and Evaluation - Our Approach" document.

Based on these sources, the Department of Performance Monitoring and Evaluation has the following key mandates:

- Facilitate the development of plans or delivery agreements for the cross cutting priorities or outcomes of government and monitor and evaluate the implementation of these plans;
- Monitor the performance of national and provincial government departments and municipalities;
- Monitor frontline service delivery;
- Carry out evaluations; and
- Promote good monitoring and evaluation practices in government.



The National Development Plan (NDP) points out that the creation of a developmental and capable state is a prerequisite for addressing South Africa's development challenges. The NDP says that the State must be "capable in that it has the capacity to formulate and implement policies that serve the national interest; developmental in that those policies focus on overcoming the root causes of poverty and inequality," and build "the State's capacity to fulfil this role."

The National Development Plan on page 474 also emphasises the need for an active citizenry and strong leadership. All spheres of government "can enhance citizen's participation through a variety of two-way information gathering and sharing forums and platforms between citizens and government. While these platforms can enable government to inform, they also enable citizens to give feedback to government and monitor performance... Active citizenship requires inspirational leadership at all levels of society."

Since 1994, monitoring and evaluation has been introduced to government as part of a series of reforms to strengthen its systems and operations, backed by a range of statutes and other prescripts. For example:

- The Department of Public Service and Administration introduced an employee Performance Management and Development System.
- Through regulations, National Treasury introduced the use of output targets and performance reporting against output targets in departmental strategic plans, annual performance plans, and annual reports. The regulations are supported by various National Treasury guidelines on the formulation of performance targets and reporting against these, such as the Framework for Managing Programme Performance Information (FMPPI). These guidelines are results-based and require departments to identify activities leading to outputs, outcomes, and finally impacts on citizens. The National Treasury guidelines emphasise the need for strong logical links (or theories of change) between the activities and the intended outcomes and impacts.
- The Auditor General followed by auditing reported performance against the pre-determined objectives in the annual performance plans, as part of the annual audit of departments which is included in the annual report of departments.
- In 2005 Cabinet adopted the Government-Wide Monitoring and Evaluation System (GWMES) and in 2007 the Presidency released the Policy Framework on the GWMES. The GWMES framework is supported by National Treasury's Framework for Managing Programme Performance Information; Statistics South Africa's South African Statistical Quality Assessment Framework (SASQAF); and the 2011 National Evaluation Policy Framework (NEPF) produced by DPME.



Link of FSDM to the National Development Plan

The National Development Plan (NDP) points out that the creation of a developmental and capable state is a prerequisite for addressing South Africa's development challenges. The capability of government institutions remains weak in terms of management practices, quality of frontline service delivery, effective complaints management and community/citizen involvement in monitoring. This results in service delivery failures and drives citizen dissatisfaction and poor staff morale.

Link of FSDM to the Outcomes Approach

Outcome 12 of the MTSF stresses the importance of improving management practices and the quality of services provided to citizens. In addition a number of other outcomes (such as outcomes 1, 2 and 3, focusing on basic education, health and crime) contain targets for the improvement of the quality of services provided to citizens. The work FSDM Programme contributes towards the achievement of these targets.

Batho Pele Principles

Eight Batho Pele principles were developed to guide delivery in the public service. These principles are aligned with the Constitutional values of:

- Promoting and maintaining high standards of professional ethics;
- Providing service impartially, fairly, equitably and without bias;
- Utilising resources efficiently and effectively;
- Responding to people's needs;
- Encouraging citizens to participate in policy-making; and
- Rendering an accountable, transparent, and development-oriented public administration.

The Batho Pele Principles are:

- Consultation
- Service standards
- Redress
- Courtesy
- Information
- Openness and transparency
- Value for money



3. PURPOSE

This framework sets / stipulates the processes and procedures of the FSDM Programme. It clarifies the various roles and responsibilities as well as the tools and mechanisms utilized in the implementation of the Programme.

To date, tools and guidelines have been developed to guide planning, implementation and reporting for the programme. Given the profile of the programme, it is critical that it is exemplary in the manner it conducts its business, so that its approaches and findings are credible and ensures the sustainability and relevance of the programme.

4. FRONTLINE SERVICE DELIVERY MONITORING PROGRAMME OPERATION COMPONENTS

The FSDM programme is centred on four (4) main components that circumscribe all of its activities. The following section details each component. The four components are:

- Component 1: Planning and review;
- Component 2: Implementation Visits (Baseline monitoring visit);
- Component 3: Data Analysis and Reporting;
- Component 4: Knowledge Management

4.1 Component 1: Planning and Review

The first step in the process is for the Offices of the Premiers and DPME to review the processes and progress of the year under review to take decisions on the overall management of the programme. Provinces are required to review the implementation of the programme to assess progress and challenges in the implementation of the programme. This is usually done in a minimum of two (2) review sessions, which is attended by DPME, per province. These reviews are followed by the Annual Review Workshop where all provinces and DPME come together to discuss an plan for the next financial year.

The Joint Annual Plan, which flows out of the review sessions, is the detailed technical planning for the new financial year. It assists monitoring teams to pull different perspectives into a common understanding and allocates resources accordingly for each province, and the FSDM programme as a whole.



The planning starts in January of every year to ensure that resources are in place and implementation can start in April. The Offices of the Premiers will produce a draft schedule for their province and this will form the basis for provincial and national-level discussions and approval.

The JAP consists of:

- The implementation visits (baseline, feedback, improvements monitoring and rescoring);
- All review meetings, including the Annual Workshop; and
- Proposed timelines for reporting.

The Joint Annual Plan for 2015-2016 is as follows:

FSDM Activity	Timelines	Outputs
1. Programme planning and review		
a. Finalise the Operational Guide Framework	Jan 2015 – Mar 2015	2015/16 Operational Guide framework
b. Development of Joint annual plans – DPME & Provinces	Jan 2015 – Mar 2015	Draft 2015/16 joint annual joint plans
c. Approval of Joint Annual Plans	Jan 2015 – Mar 2015	Approved 2015/16 DPME-OTP (National) Joint Annual Plan
d. DPME & Offices of the Premier 1 st Quarterly Review Meetings	Jul-2015 – Sept-2015	Programme Review Report
e. DPME & OoP 2 nd Quarterly Review Meeting	Oct-2015 – Dec-2015	Programme Review Report
f. Annual Planning Workshop	Oct-2015 – Dec-2015	Workshop report
g. Training of Monitors	Feb-2015 – Mar 2015	List of trained monitors
2. Implementation		
a. Monitoring visits (baseline & feedback)	Apr 2015 – Dec 2015 Q1: 20 new visits and feedbacks Q2: 40 new visits and feedbacks Q3: 30 new visits and feedbacks	Summary reports and Improvement plans
b. Improvement Monitoring (meetings & re-scoring)	Apr 2015 – Feb 2016 Q1: 20 improvement meetings and rescoring	Progress update on improvement plans



	visits. Q2: 20 improvement meetings and rescored visits. Q3: 60 new visits and feedbacks Q4: 20 improvement meetings and rescored visits.	
3. Analysis and reporting		
Monthly reports: Statistics of the number of visits conducted, gender disaggregation and brief summaries of findings from facilities visited.	Apr 2015 – Feb 2016	Quality assured reports
Facility reports: Summary reports, Improvement plans and Improvement reports	Apr 2015 – Feb 2016	Quality assured reports
Programme reports: Quarterly, Mid-year and annual reports for sectors and provinces	July 2015 – May 2016	Quality assured reports signed off by programme manager (quarterly and Mid-year) Quality assured reports signed off by DG (annual Reports)
Analysis per request: Facility based analysis, sector analysis, provincial analysis, gender analysis, urban vs rural analysis, KPA analysis, info source etc.	July 2015 – May 2016	Story telling data
4. Knowledge Management		
Mini stories:	monthly	Mini stories from interesting findings during monitoring
Updates/newsletter	quarterly	Published Updates/newsletter
Case studies at least 4 per year	quarterly	Case studies

4.2 Component 2: Implementation Visits

The core of FSDM is the collection and processing of data on service delivery at frontline facilities.

As mentioned earlier, the sites to be visited are identified during the planning and review of the Programme. A certain number of new facilities to be visited are selected jointly by the Offices of the Premiers and DPME (in line with certain guidelines and targets), and several facilities will be re-monitored (considering several guidelines and processes)



In preparation for the monitoring visits, a travel motivation indicating the planned visit logistics and monitoring teams is to be sent to the programme manager for approval, a month before the visits. A visit briefing session is to be held a week before the visit and all new monitors are to be trained and the visit briefing notes to be circulated to the monitoring team two days before the visit. The visit travel motivation, visit guidelines and daily itinerary are attached as annexures to the plan.

For on-site verification of key government service delivery improvement programmes, officials of the DPME and the Offices of the Premiers carry out hands-on monitoring, through unannounced visits to service delivery institutions which interact directly with the public. The objectives of these monitoring visits are to:

- Assess the status quo of services delivery in terms of the 8 Key Performance Areas in these facilities
- Demonstrate to sector departments the value of on-site monitoring as a tool to verify the impact of service delivery improvement programmes;
- Demonstrate the value of obtaining the views of citizens during monitoring;
- Highlight successes and failures at service facility level and support departments to use the findings for performance improvements; and
- Catalyse improvements in the management of service delivery.

4.2.1 Baseline Visits

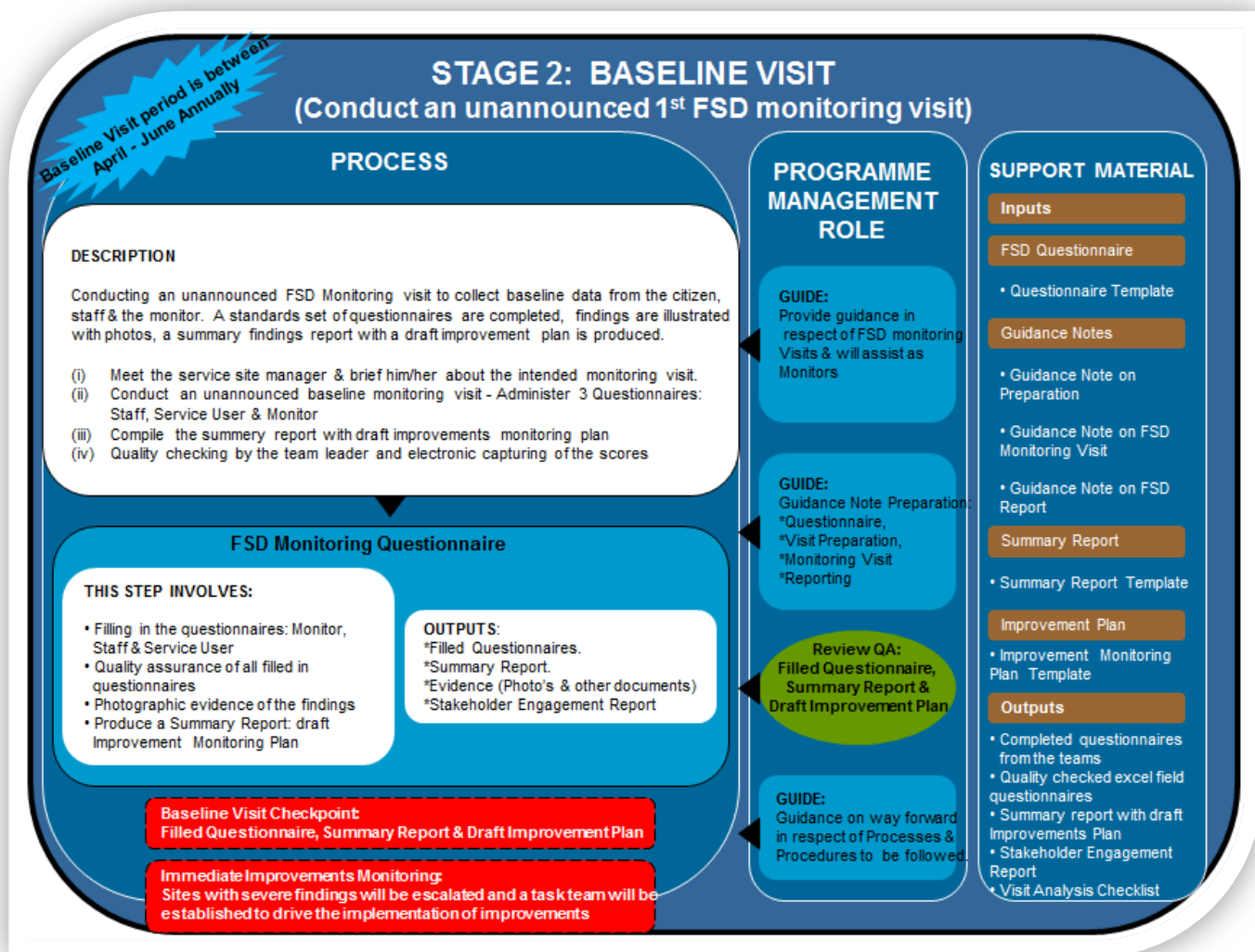
Baseline visits (also known as first visits) are the first unannounced visit to a chosen site, based on an approved annual schedule of visits. The output is a scorecard against eight key areas monitored and a draft improvement plan.

The DPME, in consultation with provinces, has developed targeting strategies to guide the selection of sites. The JAP for each province is finalized before the beginning of the financial year.. The content of the JAP should remain confidential - to protect the unannounced nature of some of the visits.

The monitoring visits are conducted jointly by DPME and Offices of the Premiers, led by an official from one of these offices. A sector department cannot be a member of the monitoring team, but can only participate in the baseline monitoring team as observers of the monitoring process.



Figure 2: Baseline Visit



Baseline visit is the initial unannounced monitoring stage to the targeted service delivery sites aimed at collecting baseline data to monitor the quality of frontline service. Baseline data collected and compiled describes the situation with proposed recommendations prior to the development /implementation of the improvement plan i.e. **summary report**.

On the day of the visit, the monitoring team arrives and meets with site management to brief them on the purpose of the visit. At the same time, the supervisor of the office or service delivery point is interviewed. The monitoring team then collects information from three sources using questionnaires. These are standard questionnaires to record the observations of the monitor, the views of staff members and the views of selected users who are present in the facility.

- Monitoring protocol: As part of the monitoring activities, each monitor interviews a minimum of three staff members and three citizens, and completes the monitor questionnaire. It is crucial that at least one member

of management or a supervisor is interviewed. When the monitoring visit is complete the monitoring team leaves their contact details with site management and communicates the next steps.

- Scoring format: Each monitor is responsible for capturing scores in full, reflecting the performance of each site in each of the eight categories in the questionnaire. The four score rating system is used to allocate scores in both the questionnaires and the summary report.
- Scores for section A of the questionnaire are informed by the following rating system:

Figure 3: Rating System

Score	Rating	Coding
1	Poor	1
2	Fair	2
3	Good	3
4	Very good	4

- Photographs are taken for each of the performance areas during the visit as evidence to illustrate some of the findings.
- When the monitoring team has concluded the citizen, staff and monitor’s observations questionnaires, future monitoring processes are discussed with the site management.
- After the monitoring visit, the team must have a de-briefing session at which they consolidate their scores and views before compiling the visit summary report. During the de-briefing, the scores consolidation template is to be used to automatically average the scores, for the three sources (staff, citizens and monitors). This consolidation of scores is to average the responses for section A of the questionnaire into a single score. The consolidation of scores is done with a minimum of three questionnaires, for each of the respondent groups. This means that at the end of each visit, at least nine questionnaires should have been administered.
- All three response areas (staff, citizens and monitors) are important and are weighted equally on the visit’s summary report.

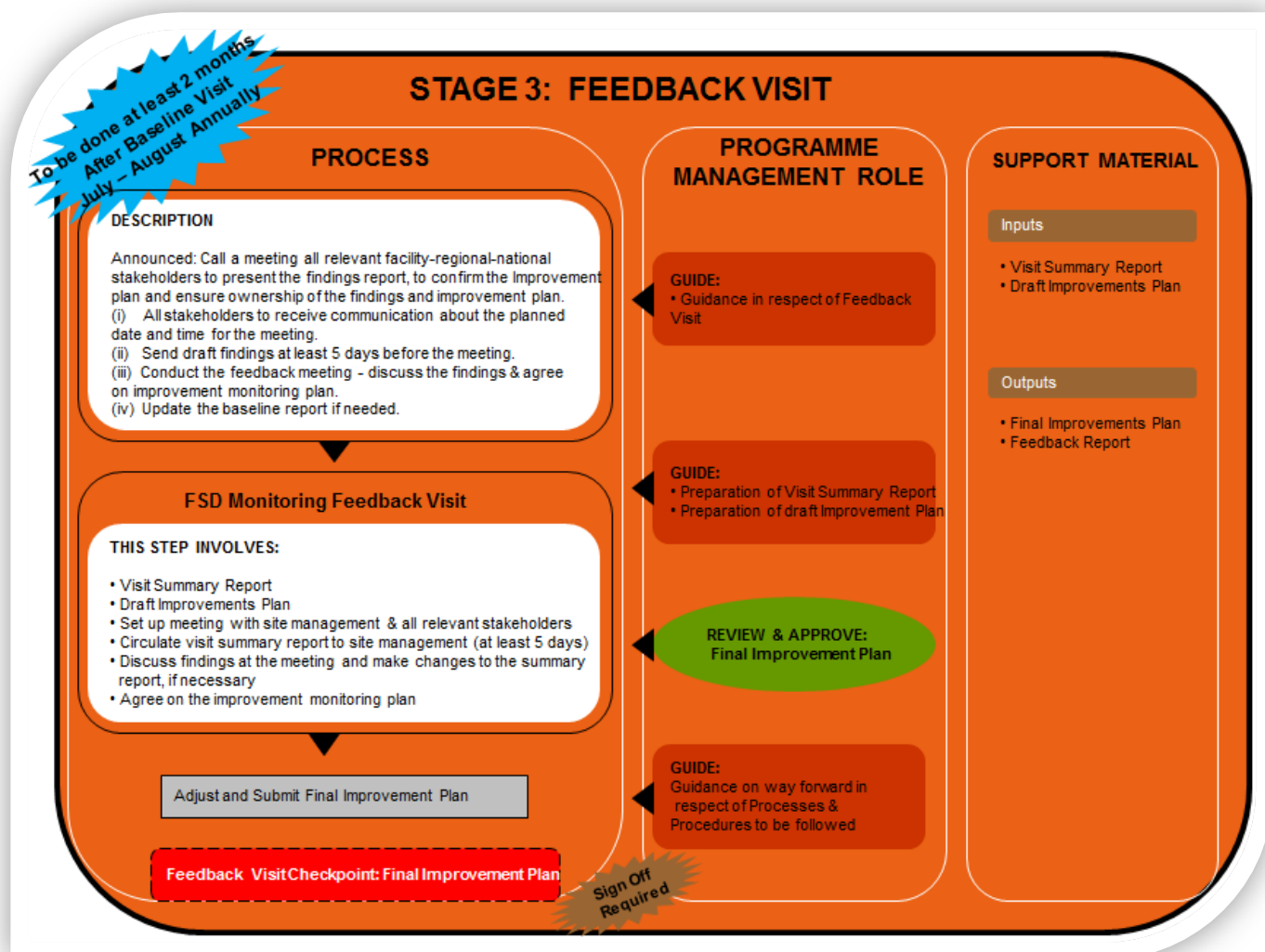
4.2.2 Feedback Meeting

Feedback visit or Feedback meeting refers to the communication of findings generated through the baseline monitoring visit to the relevant stakeholders and departments. The feedback process is aimed at verifying and presenting the findings of the baseline, agreeing on the recommendations with activities, budget allocation and timelines i.e. **improvement plan** aligned to other sector/ departmental initiatives.



After every baseline visit a feedback meeting is held within two months.

Figure 4: Feedback Visit



The purpose of this is to conduct a feedback meeting with site management to discuss the findings and recommendations of the baseline visit and agree on an improvement monitoring plan to address the identified weaknesses.

Feedback meetings are a critical part of the implementation process as they reflect on the findings of the baseline and unannounced visits undertaken already and create a platform to work together with facility management on improving the quality of frontline service delivery.

Planning for a feedback meeting will include:

- A well-developed and accurate summary findings report with a detailed improvement action plan that has been quality assured;



- Liaison with the facility contact person where the actual meeting will be held. The monitor should enquire about a suitable venue for the meeting so that it is included on the invitation.
- Invitations to all relevant stakeholders (including sector departments, provincial and regional representation at a senior level) to be circulated 14 days before the meeting;
- The draft summary findings report and draft agenda to be forwarded to all invited stakeholders five days before the meeting;
- Role-players, including a facilitator and minute taker to be identified before the agenda is circulated. The agenda should highlight the main participants of the meeting.
- In-depth research on the particular sector to be visited, including familiarity with strategic documents of the sector such as annual performance plans, sector service delivery charters and standards and sector annual reports.

The feedback meeting is normally held between the facility management and relevant sector stakeholders like provincial and regional offices; however, different approaches to maximise the benefits of this meetings (sector approach, for instance) can be accommodated as long as the planning process set out above is adhered to.

The site visit planning schedule stipulates that every baseline visit should have a planned feedback meeting and reports should be compiled per facility since some of the findings differ from one facility to the other.

Once the findings have been discussed in the feedback meeting, an agreed improvement plan to address identified weaknesses is developed as the basis for ensuring improved service delivery across all government facilities. A feedback report is compiled to summarise discussions of the feedback meeting and contain agreed action items in the form of a final improvement plan.

Given different approaches in conducting feedback meetings, it is critical that the application of any method is aligned to the programme framework and related tools which specify that feedback meetings are held within two months of the initial baseline visit.

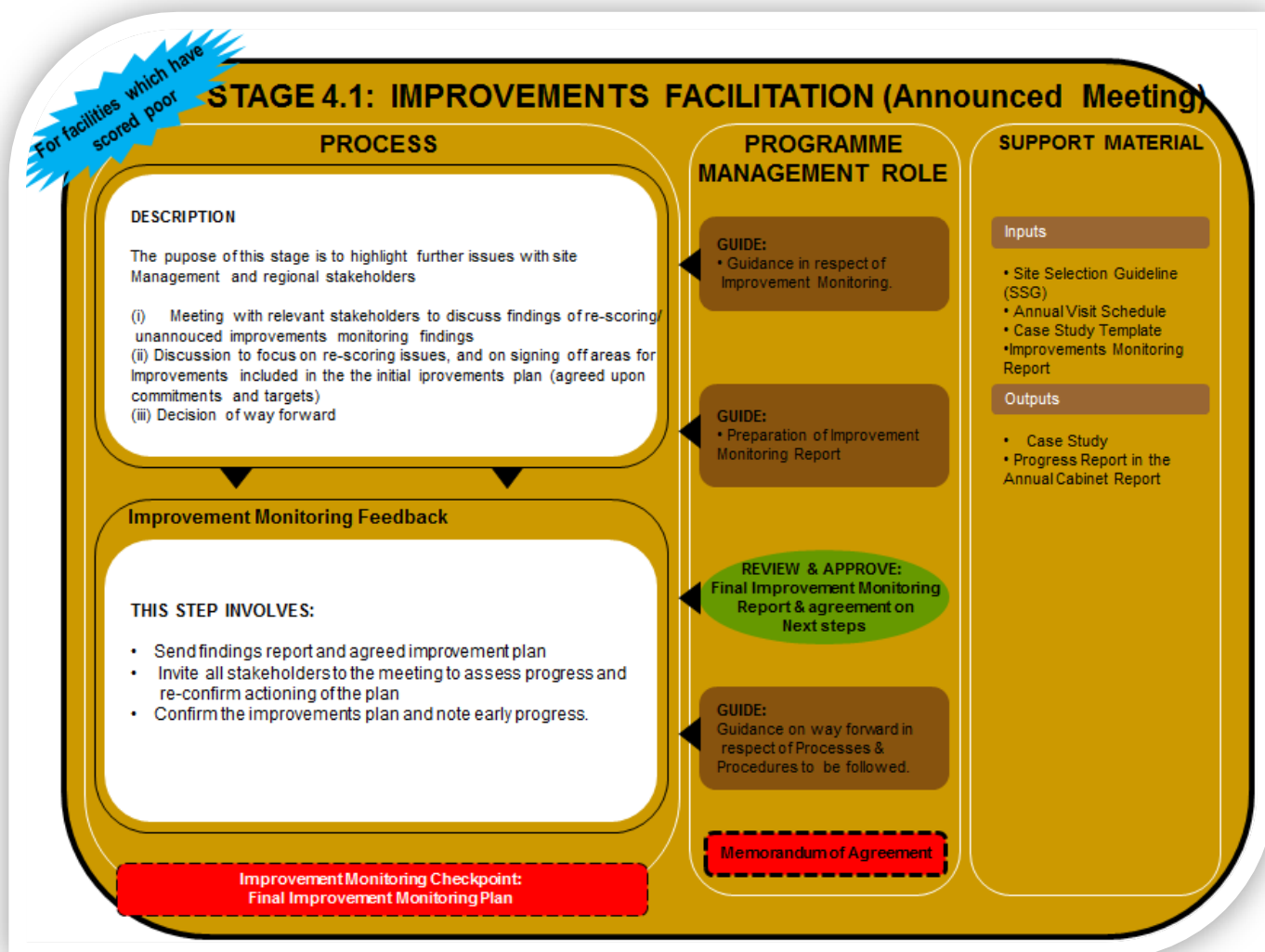
4.2.3 Improvement Meeting

This stage is aimed at providing a set of standard operating procedures for improvements monitoring. It sets out the rationale for improvements monitoring, as well as the intended outcome for improvements monitoring. It also details the approach and methodology for both conducting improvements monitoring and reporting and accounting for the outcome.



The objective of FSDM in improvements monitoring is to facilitate improvements in the performance of targeted frontline service delivery sites and to drive the implementation of improvements at those facilities targeted for improvements monitoring due to poor findings. The focus is on facilitating a culture of change in government towards increasing use of evidence in policy making, planning and monitoring to inform improvements to plans and policies. Through improvement monitoring, a culture of change is created in which line departments realise shortcomings in service delivery facilities and develop plans to improve. This entails behavioural change on the part of all stakeholders. When applied appropriately, improvements monitoring seeks to uncover systemic issues while also acknowledging good management behaviour. Despite developing these plans with the assistance of the DPME, the responsibility for implementing the corrective measures remains that of the line departments, with the Offices of the Premiers providing oversight.

Figure 5: Improvements Facilitation



Improvements monitoring focuses on identifying areas of weakness and developing improvement plans with the line department. Line departments are, however, responsible for implementing the corrective measures. Specific objectives are:

- Instituting improvements urgently in severe cases identified through the monitoring visits, as a means of strengthening service delivery;
- Monitoring the implementation of improvement plans as developed jointly; and

Monitoring the improvements in scores from the initial baseline visit with the scores after the implementation of improvement plans. The severity of the findings will however determine the level of improvements monitoring oversight required over the implementation of improvement plans.

Monitoring of improvements is an integral part of monitoring and evaluation, and every facility should be doing this. Due to the resource-intensive nature of monitoring, a targeted approach is used in selecting facilities that should be monitored, as it is impossible to do improvements monitoring for all the facilities – although it is encouraged. Therefore, the methodology is not fixed and Offices of the Premiers can choose to select more facilities rather than use a targeted approach.

Currently, the criterion for selecting facilities for improvements monitoring is updated and reviewed yearly in line with the baseline findings and trends from the previous year. In this regard, the 2015/16 approach was influenced by the outcomes of the 2014/15 monitoring findings.

Facilities that have fully implemented their improvement plans and have shown consistent improvement on the assessments will be handed over to Offices of the Premier and responsible departments for further monitoring to sustain the improvements.

For 2015/16 new improvements monitoring facilities, only those facilities that meet the following criteria will be monitored for improvements:

- (i) If three (3) or more poor average (of citizen and monitor's ratings) KPA ratings are achieved in one facility, then that facility will be re-monitored for improvements.
This is illustrated in the example below using visibility and signage, queue management and complaints management as average KPA ratings for facility X:
- (ii) An average KPA rating of between 1-1.4 (Poor) as rated by both citizens and monitors counts as 1 poor KPA rating as illustrated below:
- (iii) Staff scores will not be considered in selecting facilities that should be monitored for improvements as it is assumed that staff scoring creates room for biasness.



- (iv) Facility findings that requires close monitoring based on the qualitative information on the summary report but do not meet the selection criteria based on scores.

Figure 6: Selection criteria for improvements monitoring sites in 2015/16

Citizen							Monitor								
Location & accessibility	Visibility & Signage	Queue Management & Waiting Times	Dignified Treatment	Cleanliness & Comfort	Safety	Opening & closing times	Complaint Management System	Location & accessibility	Visibility & Signage	Queue Management & Waiting Times	Dignified Treatment	Cleanliness & Comfort	Safety	Opening & closing times	Complaint Management System
3.0	1.3	1.3	3.7	2.0	2.0	2.7	1.3	3.0	1.3	1.3	3.7	2.0	2.0	2.7	1.3

As per above the illustration above:

Location and Accessibility average KPA rating =1.3 (Poor)

Visibility and signage average KPA rating = 1.3 (Poor)

Complaints and compliments system average KPA rating = 1.3 (Poor)

For 2011/12 29 facilities were identified for improvements monitoring from the 135 facilities reported on.

For 2012/13 51 facilities were identified for improvements monitoring from 215 facilities monitored. These facilities have also been re-monitored in 2013/14 together with the 29 from 2011/12.

In 2013/14, 80 facilities were re-monitored as part of the improvements monitoring facilities. In

For 2014/15, 43 facilities were identified for improvements monitoring.

To date, 123 facilities have been re-monitored for improvements. This included facilities identified from 2011 to 2014. A number of facilities that have shown consistent improvement throughout the monitoring periods will be removed from the list, and newly identified facilities will be added from the 2014/2015 list of facilities. These facilities will therefore form part of the 2015/2016 Joint Annual Plan.

The improvements monitoring approach consists of the following two independent but related steps and processes.

- Improvements meeting: This is a pre-arranged engagement with all stakeholders focusing on problem solving, uncovering of systemic challenges, confirming of short, medium, long-term improvement actions,



collecting reports and initial progress checking. A walk about also forms part of the improvements meeting. An improvements monitoring template must be used in the meeting to track progress and for walk about activities.

- Improvements re-scoring: This includes unannounced interviews of users and staff and scoring by monitors using Improvements Monitoring Template.

For the two interdependent stages, an improvement plan has to be used as the main reference document to track progress in terms improvements. Improvements monitoring is therefore undertaken in the year following that of the baseline visits, and it is recommended that a minimum of six months should pass before monitoring the facilities identified for improvements monitoring. Each facility identified for improvements will be visited twice, as part of the continuous improvements monitoring processes described in the next section.

The announced improvements monitoring meetings should take place at least six months after the baseline monitoring visits. This is to ensure that enough time is allocated for the line departments to institute corrective measures as detailed in the improvement plans.

The announced improvements monitoring meeting should focus on tracking the progress of the improvement plans that were developed as part of the feedback meetings and unearthing systemic challenges that may be hampering progress. The following stakeholders should be invited to be part of this meeting using the letter of invitation in Annexure 1:

- Facility management;
- Department of Planning, Monitoring and Evaluation / Office of the Premier;
- District or regional management;
- Provincial management or a representative of provincial management; and
- Officials responsible for action items on the improvement plan (unless they are part of the facility management).

In the improvements monitoring meeting, progress reports should be given by officials responsible for the action items. In instances where items have not been actioned, motivation and reasons for this will be documented. Items that have been implemented should be signed off at this meeting.

After the improvements monitoring meeting, in addition to tracking the actions on the improvement plan, the monitors should conduct a walkabout at the facility and verify if the items as discussed in the improvements meeting were implemented.



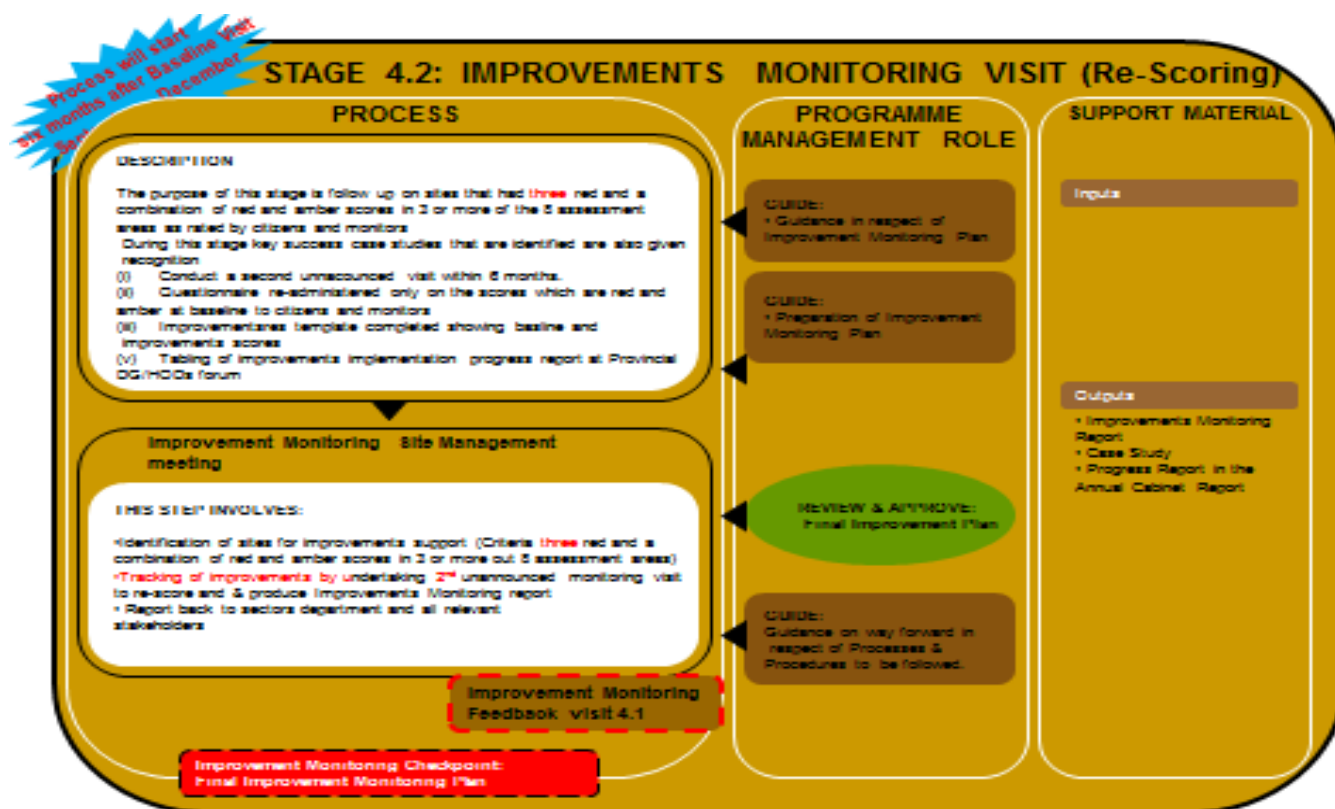
The findings based on observations from the walkabout must be recorded on the improvements monitoring comments section as these comments must be referred to when the monitor returns for the unannounced improvements re-scoring visit.

Announced improvements monitoring meetings for 2015/16 are scheduled to take place from the entire financial year of 2015/2016, commencing in Q1.

4.2.4 Unannounced Rescoring Visits

Unannounced improvements monitoring visits will be undertaken to improvements facilities after the announced improvements monitoring meeting. The purpose of this visit is to monitor the facility by re-scoring the eight key performance areas in the questionnaire. In re-administering the questionnaire the focus is on getting a second score or rating for the facility, after the implementation of improvements.

Figure 7: Improvements Monitoring Visit



All key performance of red areas are re-monitored and re-scored, and the following rating guidelines are followed in re-scoring each performance area:



Figure 8: Improvements rating table

Rating	Baseline score	2nd Improvements score	Description	Change in scores
Poor	1	1	No change	→ 0
		2	Improvement	↑ 1
		3	Improvement	↑ 2
		4	Improvement	↑ 3
Fair	2	1	Regression	↓ -1
		2	No change	→ 0
		3	Improvement	↑ 1
		4	Improvement	↑ 2
Good	3	1	Regression	↓ -2
		2	Regression	↓ -1
		3	No change	→ 0
		4	Improvement	↑ 1
Very Good	4	1	Regression	↓ -3
		2	Regression	↓ -2
		3	Regression	↓ -1
		4	No change	→ 0

In re-scoring the facility the outcomes of the improvements meeting, that is what the monitor observed regarding progress on the implementation of corrective measures during the improvement meetings, will influence the rating that the monitor allocates to each performance area in the unannounced re-scoring visit.

This means that the monitor’s re-scoring ratings have more weight than the staff and citizen views and are considered more credible than staff and citizen scores at this stage.

As the improvements monitoring visits for re-scoring are unannounced, only the DPME and the Office of the Premier are part of this visit. Facility, district and provincial management will be forwarded the re-scoring findings within seven days of the unannounced improvements monitoring visit.

Improvements monitoring facilities with severely negative findings following a baseline visit will be immediately (within a month) followed up for the development of corrective measures and for setting up a task team to drive the development of the improvement plans. Facilities with severe findings will consist of:

- Facility findings which indicate total operational system collapse and findings that are not the norm for the sector;¹
- Facilities with severe findings with scores of only poor and fair in all eight key performance areas; and
- Facility findings, including the state of buildings and the internal and external environment, warrants immediate action as it poses a health and safety risk to the lives of citizens and staff.²

Improvements monitoring processes for facilities with severe findings are outside the normal Frontline Service Delivery Monitoring exercises and will be driven by a task team consisting of the DPME and the Office of the Premier, facility management and regional stakeholders. These stakeholders are required to meet regularly, at least once a month, until the completion of the process to ensure the planning and implementation of the improvements plans. The line department is responsible for the implementation of improvements while the DPME and the Office of the Premier will provide leadership to drive the planning process and oversight over the implementation process. The implementation of service delivery improvements will also depend on the availability of budgets in the implementing department.

4.3 Component 3: Data Analysis and Reporting

4.3.1 Data Analysis

Data Analysis is done at various levels, ranging from facility level to national level.

The scores of each visit are captured, and the averages for citizen, staff and monitors are automatically calculated by the summary report template.

These scores are consolidated into a database where a facility's performance is tracked over several reporting periods. This enables the comparison of scores to indicate whether a facility has regress, improved or stayed the same across the reporting cycles.

The data is utilized to develop a comprehensive picture of a particular facility. The combined data of facilities are also utilized to analyse and describe the performance within a specific province, across a specific sector, as well as in a national overview that is presented to Cabinet.

¹ The site operates totally differently from the expected norm, for example a SASSA office that has no grants application processes in place or pay-out system administration.

² For example, black water leaking into the service site, collapsed and leaking ceilings and piles of solid waste littering facilities.



The data is also utilized to identify and monitor trends across several reporting periods, to reflect on the impact of the programme, and to steer its strategic decision making. In keeping with the themes of Outcome 12, the data is used to actively encourage an improvement in the quality of service delivery at facility level.

4.3.2 Reporting

DPME has a communication protocol indicating lines of reporting for all programmes. However the Frontline Service Delivery Monitoring chief directorate has, in terms of the strategic plan for 2012/13 to 2015/16 committed to:

- Prepare an annual report highlighting the state of service delivery at service facilities monitored. This will be tabled with the Government and Administration Cluster and Cabinet in January.
- Prepare a quarterly report on the monitoring visit findings for tabling at the provincial monitoring and evaluation forums. The Offices of the Premiers will also table reports containing provincial findings at their relevant provincial structures.

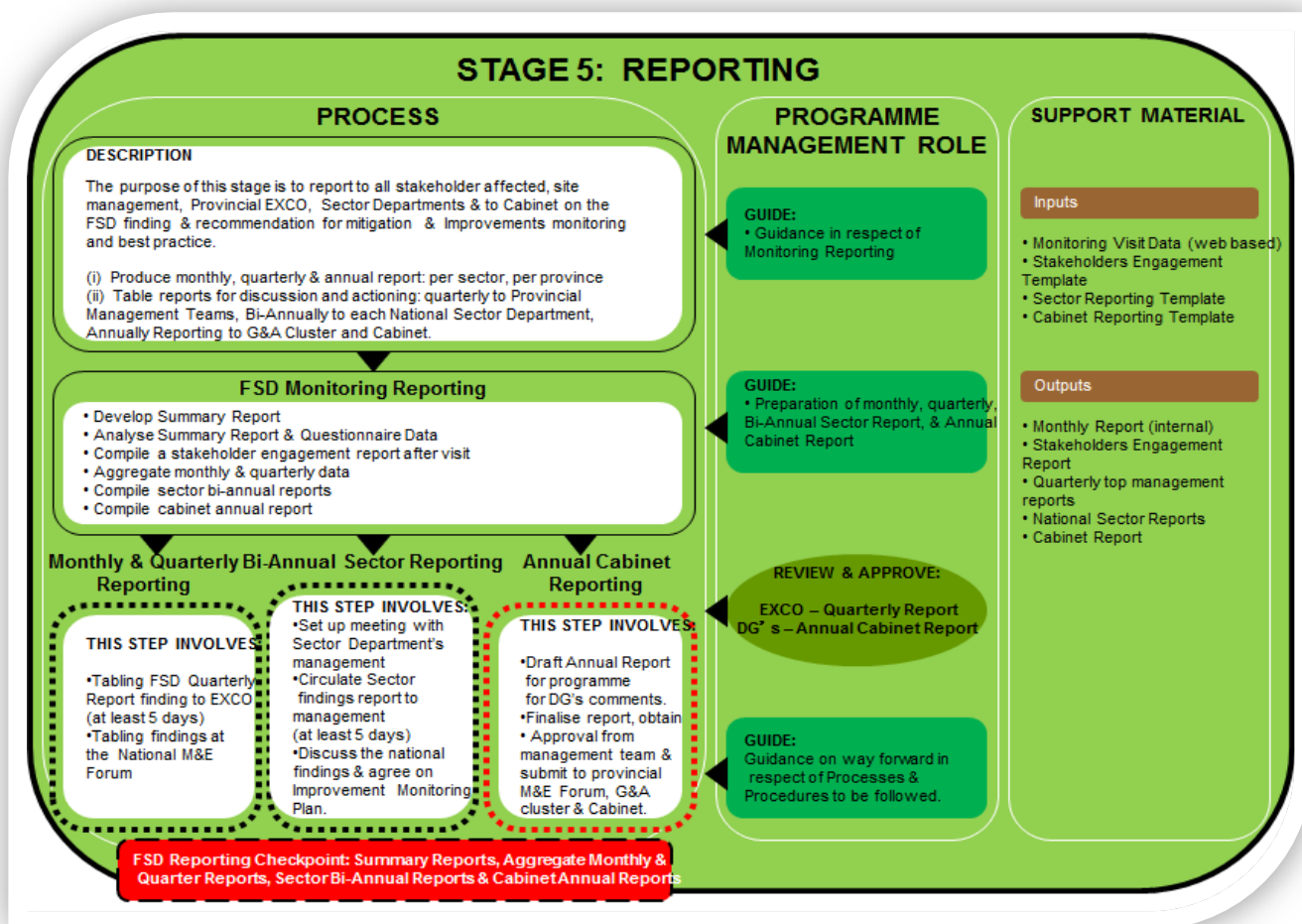
DPME and Offices of the Premier are jointly responsible for drafting the summary reports, feedback reports and improvements monitoring reports, which must be submitted to the facility management.

The facility management is responsible for submitting the report to its stakeholders, especially the principals. It should be standard practice for such reports to reach the provincial management, as key decision makers within a Department/sector.

Programme reports will be completed by DPME: this will include findings of joint visits as well as visits that were not done jointly (only when they meet the quality assurance standard). The reports will be submitted to office of the Premier/ Department of the premier for comments and inputs by DPME prior to submission and presentations to respective National Sector departments, G & A Cluster, , Cabinet, Presidential Coordinating Committee and M&E forums.



Figure 9: Reporting

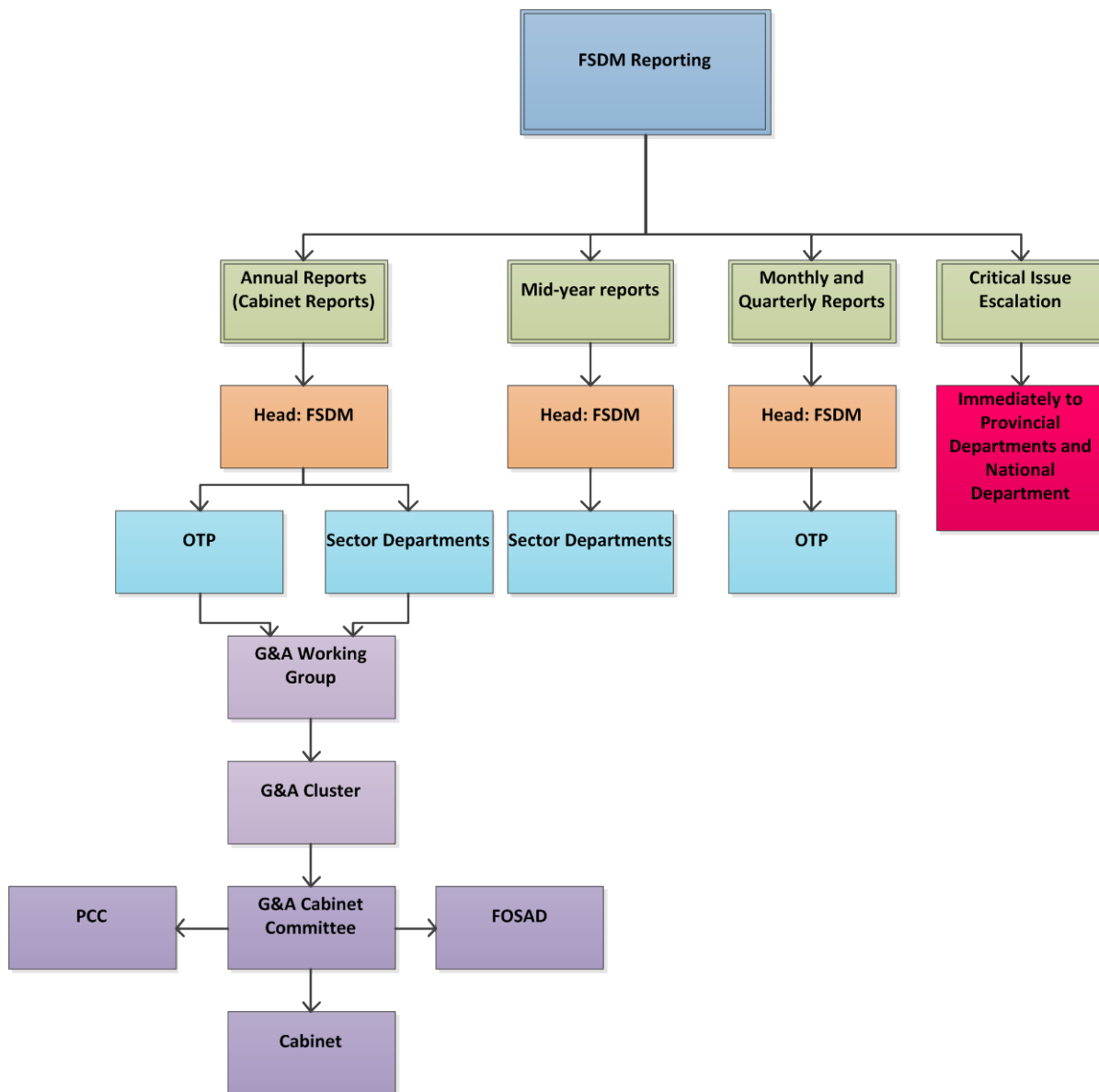


In addition to the site visit reports, the following programme reports are produced:

- Monthly consolidation of scores: monthly scores are to be aggregated for analysis and at the end of each month all questionnaire scores are to be consolidated on the programme scoring sheet (this is included in the internal reporting templates).
- Quarterly reports: these are produced quarterly for management and the provincial monitoring and evaluation forums highlighting the findings per province during the past quarter.
- Bi-annual sector reports: These are produced bi-annually and presented to national sector departments highlighting the state of frontline service delivery across the sector and documenting trends. These reports also highlight progress on the implementation of improvement plans by provincial and local offices and strategic issues that require action. These reports are produced in September and March each year.
- An annual Cabinet report is produced every year for tabling at Cabinet's Governance and Administration cluster and Cabinet during the reporting months of January and February.

FSDM Reports are aimed at several target audiences

Figure 10: FSDM Reporting Flow



4.4 Component 4: Knowledge Management

Best practice notes and case studies: Good practices are observed by the monitoring teams throughout the monitoring visits and documented as improvements case studies. These include the use of innovative systems and tools, good working partnerships, collaboration between service sites and the private sector and users and inspiring managers and staff. These can be documented, using the short stories template and case studies.



5. TOOLS AND GUIDELINES

The FSDM Programme utilizes several tools and guidelines that circumscribe the processes and procedures of the Programme. These tools and guidelines are grouped as per function, and the various templates are available on the DPME Website. Below is a table for referencing each document.

5.1 Tools and Guidelines for Review

Document	Reference
Joint DPME OTP Programme Review Guideline	FSDM DPME and OTP Programme Management Review Meeting 2015-2016
Issue Log	FSDM Issue Log Template 2015-2016

5.2 Tools and Guidelines for Planning

Document	Reference
Joint Annual Plan Guideline	FSDM Joint Annual Planning Guideline 2015-2016
Improvement Monitoring Guideline	FSDM Improvements Monitoring Guideline 2015-2016

5.3 Tools and Guidelines for Data Collection

Document	Reference
FSDM Data Collection Tools (Questionnaires)	2015-2016 FSDM Questionnaire

5.4 Tools and Guidelines for Reporting

Document	Reference
Summary Reporting Template	2015-2016 FSDM Summary Report Template
Questionnaire Review Report	FSDM Questionnaire Review Report 2015-2016
Reporting and Report Production Guidelines	FSDM Reporting and Report Production Guidelines 2015-2016

5.5 Tools and Guidelines for Knowledge Management

Document	Reference
Case Study Guideline	FSDM Case Study Guideline 2015-2016
Case Study Template	FSDM Case Study Template 2015-2016



6. CODE OF CONDUCT FOR MONITORS

The Code of Conduct for Monitors guides monitors on their conduct. It guides both the individual conduct of monitors and their relationships with others during frontline service delivery visits. Compliance with the Code of Conduct enhances professionalism and helps to ensure confidence in the Frontline Service Delivery Monitoring Programme and the public service.

Client focus

As monitors we will listen to our clients (citizens and staff) and partners and treat them with dignity and respect, putting them first. As monitors we will at all times:

- Serve the public in an unbiased and impartial manner to create confidence in the public service;
- Be polite, helpful and reasonably accessible in dealings with the public at all times treating members of the public as customers who are entitled to receive high standards of service;
- Not unfairly discriminate against any person on the basis of race, gender, ethnic or social origin, colour, sexual orientation, age, disability, religion, political persuasion, conscience, belief, culture, or language; and
- Never abuse our position to promote or prejudice the interests of any individual or group.

Professionalism

Monitors must pay attention to the basics which include:

- Being punctual for monitoring visits and meetings;
- Running meetings efficiently;
- Checking spelling and grammar in all reports and documents;
- Responding timeously to e-mails, phone messages and all requests;
- Promoting a learning culture. This implies not doing the same things over again when they are clearly not working;
- Pursuing quality management practices including ensuring value for money, fairness and being efficient and effective.
- Being accountable, responsive, transparent, and courteous.



Figure 11: Qualities of a Professional

P	Punctual, Proactive, Patriotic, Polite, Productive, Presentable, Prompt
R	Reliable, Responsible, Respectful, Ready, Responsive
O	Organised, Optimistic, Objective
F	Friendly, Focused, Faithful, Firm, Flexible
E	Effective, Efficient, Energetic
S	Serve, Sensitive, Supportive, Stress, Skilled,
S	
I	Innovative, Inspirational, Informed
O	Organised, Optimistic, Objective
N	Neutral, Negotiator, Noble
A	Accessible, Accountable, Articulate
L	Loyal, Leader, Liberated, Liberator

An ethos of teamwork for monitors entails:

- Providing support to one another and treating each other with dignity and respect;
- Building trusting relationships internally and externally; and
- Using the appropriate channels to air grievances and direct representations; and
- Not disagreeing in front of our clients.

As monitors we will, at all times:

- Work effectively and efficiently to meet the legitimate expectations of our clients;
- Be creative, seek innovative ways to solve problems and enhance effectiveness and efficiency within the context of the law;
- Be punctual and reliable in the execution of our duties;
- Execute our duties in a professional and competent manner;
- Avoid any action that is in conflict with the execution of our official duties;
- Be honest and accountable in dealing with state funds;
- Use government property and other resources effectively, efficiently and only for authorised purposes;
- Promote sound, efficient, effective, transparent and accountable administration;
- Report all instances of fraud, corruption, nepotism, mal-administration and any other act which constitutes an offence or which is prejudicial to the interests of government;
- Give honest and impartial advice, based on all available relevant information and evidence;
- Honour the confidentiality of matters, documents and discussions classified or implied as being classified;
- Set an example to all and maintain high levels of professionalism and integrity.

As monitors, we shall:

- Dress and behave in a manner that enhances the reputation of the Department of Planning, Monitoring and Evaluation and the Offices of the Premiers and shall not do anything that brings these offices into disrepute;
- Wear name tags at all times;
- Not be under the influence of alcohol or any other substance with an intoxicating effect whilst at work;
- Not use or disclose any official information unless specifically authorised to do so; and
- Not release to or discuss any official matter or information with any member of the media unless specifically authorised to do so.



7. REFERENCES

Constitutions of the Republic of South Africa (1996). <http://www.info.gov.za/documents/constitution/index.htm>

DPME (2011): “National Evaluation Policy Framework”, Pretoria, Department of Performance Monitoring and Evaluation

DPME (2011): Strategic Plan 2011/12 – 2013/14

DPME (2011): Frontline Service Delivery Monitoring Framework (June 2011)

DPME (2012): Frontline Service Delivery Monitoring Plan (2013/14)

The FSDM Site Selection guideline document, 2013/14

DPME (2013): The FSDM Improvements Monitoring Strategy, 2013/14

- FSDM Frequently Asked Questions
- FSDM Programme Updates 2013
- The FSDM’s Baseline, Feedback and Improvements Monitoring Process Control Manuals (PCM’s)

DPSA (2010): Department of Public Service and Administration: Batho Pele Handbook (2010) <http://www.dpsa.gov.za/batho-pele/Principles.asp> (Accessed 22 April 2010)

