HOW TO DEVELOP MEASUREABLE STANDARDS AND USE THEM FOR DELIVERING QUALITY FRONTLINE SERVICES:

A GUIDE BASED ON THE EXPERIENCES OF THE FSDM PROGRAMME OF THE DPME   *February 2016*

Department of Planning, Monitoring and Evaluation

ACKNOWLEDGEMENTS

LIST OF ACRONYMS

DPME	**Department of Planning Monitoring and Evaluation**
FSDM	**Frontline Service Delivery Monitoring**
KPA	**Key Performance Area**
PA	**Performance Area**
PH	**Presidential Hotline**
SASSA	**South Africa Social Security Agency**

GLOSSARY OF TERMS

Citizens	These are the citizens or users of facilities who receive services at service delivery facilities and include all members of the public who have access to these service delivery facilities.	**Quality standards**	Quality standards are statements of the expected level of service that the citizen should receive when they enter a service delivery facility. These includes that the services should be citizen centric i.e. considering the citizens needs at all points in the service design and providing services in an efficient and effective manner.
Facility	Facilities refer to the service points where frontline services are delivered directly to citizens. These include schools, clinics, police stations, SASSA offices, Home Affairs offices, Magistrate courts, Drivers' License Testing centres and Municipal Customer Care Centres and information or multi-purpose community centres (e.g. Thusong centres).	**Measures**	Measures are a set of questions that collect evidence on whether the critical aspects of frontline services (that are written in the standard) are present or are provided as they should be.
Improvement plan	Improvement or corrective plans developed jointly by the management and staff of the service delivery facility and in association with other oversight bodies such as the DPME, Offices of the Premier or Sector Departments. The plans address problems identified during a self assessment and outline the actions to be taken to address gaps or non compliances.	**Scoring**	This refers to the approach to scoring or rating a measure. Scoring is done on a progressive basis through the use of a four point scale where (1) is the lowest score and (4) is the best score achievable by the facility.
Key performance areas	The Key Performance Areas identify those important critical parts in the citizen's journey where the public service is able to add value to citizens and where performance in that department should be standardised or improved.	**Scale descriptors or ratings**	Scale descriptors or ratings are descriptions of what each score means in objective terms to allow managers to understand what good and poor compliance looks like.
Performance area	Performance Areas are headings or sub sections within the Key Performance Areas that help identify the specific service delivery focus areas.	**Standards**	Standards are statements that define the expected level of performance in terms of service delivery and quality for a service delivery facility. They are the standard against which the facility will be assessed.
Quality	Quality in relation to frontline services means that services are delivered efficiently and effectively to meet the citizen's expectations.		

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C. PURPOSE OF THE GUIDE

The purpose of the guide is to assist frontline managers, supervisors and department officials to develop quality standards and use them to measure the quality of service delivery in their facilities for the purpose of improvement. The guide will assist in understanding how standards can be developed that will help frontline service staff to meet the expectations of the citizens. It's a practical, simple guide based on the tool used by the Frontline Service Delivery Monitoring (FSDM) programme of the Department of Planning, Monitoring and Evaluation (DPME) that has an impact on quality.

D. WHAT ARE FRONTLINE SERVICES AND WHY THIS GUIDE TO DEVELOPING MEASUREABLE STANDARDS FOR THEM?

1. FRONTLINE SERVICES

In general, frontline services are the 'citizen-facing' part of delivering public services. Frontline services are only a small part of what the citizen sees of the department that is responsible for the services. They are the end point of a whole chain of people in various positions in organisations and government offices working towards making sure that the processes and systems which allow the frontline staff to provide the service to citizens are in place.

Frontline services are usually delivered at a service delivery facility where government staff can interact directly with citizens such as schools, clinics, hospitals, police stations, SASSA offices, Home Affairs offices, Magistrate courts, Drivers' License Testing centres, Municipal Customer Care Centres and information or multi-purpose community centres (e.g. Thusong centres). Increasingly, however, they may also be delivered electronically or online.

When viewed broadly, frontline services can cover all contacts between citizens and government that happen during the course of service delivery. It is generally a process that ends with the citizen receiving a public service that improves their social or economic wellbeing - for example allowing them to send their children to school, to get treatment when ill, to report a break-in or to licence a car. They are a critical component of the "efficient, effective and development oriented public service" reflected in the National Development Plan and when successfully implemented can also make an important contribution to "an empowered, fair and inclusive citizenship"

The DPME - FSDM programme assesses the quality of services delivered at frontline facilities throughout the country. It does this through a set of unannounced monitoring visits assessing services across eight Key Performance Areas (KPAs). These KPAs represent critical aspects of frontline services that impact on the experience of citizens of public facilities. The choice of these facilities reflects their daily importance in the life of citizens and residents. The DPME - FSDM programme's focus is on bringing about improvements by assessing the extent to which actual frontline services differ from government wide service standards. Where gaps exist, the DPME - FSDM programme facilitates the development of improvement plans that identify what must be done by the facility to meet the set standard.

2. SERVICE CHARTERS AND STANDARDS FOR FRONTLINE SERVICES.

In order to monitor the service being delivered at the service delivery facility level, all the staff employed to do this need to know exactly what is expected of them, to understand what the gaps and shortcomings are in what they are currently doing, and to make sure that these are corrected. Citizens and civil society also require the standards of service if they want to hold government accountable, therefore they are needed not only for internal accountability but also for external accountability.

> **To make this possible, a defined set of measurable standards of service delivery must be developed, set and communicated to all frontline staff and citizens.**

Our Constitution envisages a public service that is efficient, professional, effective, accountable, transparent and development oriented. It stipulates that public services should adhere to a set of principles including that:

- a high standard of professional ethics be promoted and maintained;
- services be provided impartially, fairly, equitably and without bias;
- resources be utilised efficiently, economically and effectively;
- the citizen's needs be responded to; and
- services should be accountable, transparent and continuously improved.

The government's Batho Pele policy framework developed in 1997 was an initial attempt to translate the imperatives set out in the Constitution into basic standards that would guide the interactions between government and citizens during service delivery processes. These eight standards are still important today.

The Batho Pele principles were intended to be the foundation on which service charters and measurable standards would be developed. The expectation was that all national and provincial departments must develop a mission statement for service delivery, together with service guarantees and service standards, defined outputs and targets, and performance indicators, benchmarked against comparable international standards.

A review conducted in 2014 by the DPME of the eight government sectors for their frontline services standards highlights that whilst there are standards or service charters for the eight sectors, they are confined mainly to statements of principles rather than measureable standards, which therefore make it challenging to formulate measures that can be used in the FSDM tool during onsite monitoring visits or for daily monitoring by the facilities. See findings from audit conducted in text box.

The Batho Pele Principles

1. Consultation

- Citizens should be consulted about the level and quality of the public services they receive and, wherever possible, should be given a choice about the services that are offered.

2. Service Standards

- Citizens should be told what level and quality of public service they will receive so that they are aware of what to expect.

3. Access

- All citizens should have equal access to the services to which they are entitled.

4. Courtesy

- Citizens should be treated with courtesy and consideration.

5. Information

- Citizens should be given full, accurate information about the public services they are entitled to receive.

6. Openness and Transparency

- Citizens should be told how national and provincial departments are run, how much they cost and who is in charge.

7. Redress

- If the promised standard of service is not delivered, citizens should be offered an apology, a full explanation and a speedy and effective remedy; and when complaints are made, citizens should receive a sympathetic, positive response.

8. Value for Money

- Public services should be provided economically and efficiently in order to give citizens the best possible value for money.

Example of findings from the sector review of standards conducted by the DPME

Each sector has its own strengths and weaknesses for example:

- SASSA Offices have a Service Delivery Charter that focuses mainly on the dignified and customer centred treatment of citizens together with the Norms and Standards that focus on the process and back office operations of the facility that will allow it to meet service standards. There are also detailed timeframes in which application processes, services and waiting times must be targeted within and management of calls to SASSA officials;

- There are draft standards for Drivers License Testing Centres. Much emphasis is placed on queue management, equipment and resources needed. They include recognition that a large part of the citizens' experience in these centres is filling-in forms and therefore they make provision for a dedicated area where quality forms need to be provided;

- There is an absence of standards in Schools, however the Charter of Children's Basic Education spells out what learners and parents should expect in South Africa and provides a framework upon which the Basic Education Department could develop its own service and quality standards and norms. The Charters standards relate mainly to physical or external aspects of school and does not specifically address service delivery;

- Hospitals and Clinics have robust and comprehensive service and quality standards called the National Core Standards for Health Establishments, which are aligned with the Patients' Rights Charter. They are clearly articulated and measurable. It is the only sector with regulated standards for citizen rights and experience;

- The Magistrate Courts have a Service Delivery Charter which focus on internal operational elements although they do contain service delivery turnaround times and waiting times relating to courts and citizen expectations. Courts also make provision for Citizens to receive good services during telephonic contact with court officials. They also follow the principles of Citizens rights within the Victims Charter;

- Police Stations have a Victims Charter that focuses on service, access, courtesy, information to citizens and redress principles. The principles within the Charter are however non-specific. They do have extensive requirements for victims to receive information about what is occurring with their case and the right of victims to provide information to assist with criminal proceedings;

- Home Affairs have a draft Service Delivery Charter with a very detailed section on the timeframes for a service to be completed, whether it is a birth certificate, death registration, identity documents or passport. These timeframes set the norm against which the operational processes of the Home Affairs Office can be monitored and measured and provide very clear guidance for citizens as to what timeframes they can expect.

Posters and charters are often seen in service delivery facilities that describe how public servants are expected to behave towards Citizens. However, although they may inspire staff to improve their attitudes and behaviours towards Citizens, they are insufficient as standards.

The absence of service delivery standards in some sectors is a major risk for the public service. Performance can only be measured

and monitored against an agreed standard. Without norms that are communicated clearly to Citizens, Citizens do not know what they must expect from government – so when Citizens experience frontline service delivery, it is against their own individual expectations, as opposed to what government has committed to deliver.

Strategic frameworks such as the National Development Plan (NDP) and the Medium Term Strategic Framework provide important guidance to managers of the standards they need to set and then meet within their sector in order to align with the greater goals of the National Government system.

The NDP also specifically addresses the strengthening of participatory democracy in terms of guiding government departments to improve their accountability mechanisms for routine day-to-day interactions with citizens particularly at the service delivery facility level. It states that frontline public servants and their managers should be given adequate authority to address issues in their ability to deliver services as and when they arise, making these services more responsive and efficient. In addition, it states that more emphasis needs to be put on engaging citizens in their own spaces rather than only expecting them to use forums and other feedback structures established by government.

> **The aim is therefore to move from service charters and general principles into more concrete standards and make sure the standards can be used to measure the quality of service delivery and maintain accountability of the public service and also guide improvements.**

The recently developed FSDM Assessment Framework (2015) uses a progression model to assess the extent to which a facility adheres to quality and service efficiency standards and this approach of setting progressive measurable standards will also be illustrated in this guide. This approach has a number of benefits:

- It enables a programme to assess how far a facility is from complying with minimum quality standards;
- It creates a common understanding of what actions are needed to progressively improve the performance of the facility. This is a powerful lever for change within frontline service delivery, and contributes to more effective improvement planning and monitoring; and
- The progression model highlights and encourages good practices, by recognising a facility's effort to move beyond compliance.

> **The DPME - FSDM programme has developed a set of general standards used to monitor delivery in a sample of frontline services and to follow up on whether improvements can be seen. This is an important and critical oversight role; however what is seen as the next step is for all frontline service delivery departments or services to make sure they have their own specific standards that they are measuring and using to make improvements.**

3. WHAT ARE THE COMMON CHALLENGES CITIZENS EXPERIENCE WITH FRONTLINE SERVICE

To understand why frontline service standards need to be developed, we need to understand that the quality of services provided is not what is expected or required, and this is beginning to be shown in a number of complaints made about the services, either by individuals or at times in the form of community protests. One source of information on what citizens find especially unacceptable is the complaints lodged with the Presidential Hotline from which it is possible to draw some conclusions regarding what citizens expect in relation to frontline service delivery.

The Presidential Hotline complaints contain concerns regarding delays in service delivery, lost documents, re-submissions or mistakes, lack of communication by staff or lack of respect, amongst others. Most of these are issues that reflect serious problems with the back office and management processes within the facilities that are essential to ensure that citizens receive services that meet their expectations. However, a number of these complaints reflect that staff members are not following the Public Service Commission Code of Conduct by speaking politely, being helpful and reasonably accessible to citizens and providing services in a timely fashion without prejudicing the interests of any one person.

Figure 1 - Examples of complaints raised by the Presidential Hotline

Frontline service delivery	Issues raised by Presidential Hotline analysis
SASSA offices	The long waiting times at service delivery points.
	The conduct of officials during the grant administrative process.
	Lack of communication, especially regarding the rejection of grants and non-payment of grants
	Long waiting periods for the approval of grants
Police stations	General rudeness of police officers, especially pertaining to the treatment of victims
	Failure to act on a case or report, no follow up.
	Bribery attempts by police officers
Magistrates' Courts	Maintenance money not transferred to final beneficiary.
	Delays in transfer of estate or other processes
Home Affairs offices	The loss of applications requiring the applicant to re-submit.
	Security breaches or fraud through the duplication of identification documents.
	Mistakes made on ID documents and birth certificates
	Prolonged waiting times for the issuance of documents
Primary schools and High Schools	Safety of learners from teachers and environment
	Teachers' criminal activity
	Mismanagement of school finances, poor infrastructure, poor access
	Complaints handling mechanisms and procedures
Hospitals, Community Health Centres and clinics	Long waiting times to receive treatment
	Lack of communication by hospital or clinic staff
	Uncaring attitudes and misconduct from hospital or clinic staff
	Unavailability of medicines

The Presidential Hotline data raises an important management question - what monitoring mechanisms are in place to ensure that the services that the facility is responsible to deliver are delivered timeously, efficiently and effectively in order to meet the user expectations and meet the standards set out by the government department? What follows next is a guide on how to set measurable standards.

E. THE ELEMENTS OF A MEASUREABLE STANDARDS FRAMEWORK FOR IMPROVING THE QUALITY OF SERVICE DELIVERY

1. WHAT IS A QUALITY SERVICE DELIVERY STANDARD?

Quality service delivery standards are statements of the expected level of service that citizens should receive when they enter a service delivery facility. They clearly describe the services that citizens may expect at a service delivery facility and are the standards against which the facility should be assessed and held accountable to deliver.

The following are principles guiding good quality standards:

- **A citizen centred focus:** means the citizen's experience should be taken into account in the design and monitoring of the standard.
- **Clear and specific** meaning that the standards are easily understood by citizens and staff and they are not subject to wide interpretation that may lead to inconsistent assessments of the level of service quality and efficiency.
- **Targeted and aligned:** requires that the standard actually measure the right problem, and the manner in which it impacts on the experience of the citizen within a frontline facility. They should be aligned to the policies and strategy of the public service department and must meet the National Development Plan parameters in order to work towards achieving these ideals.
- **Universally applicable but context appropriate:** means the measures are applicable across all similar types of facilities and services, but also specific to the facility.
- **Efficient** means the standard can be easily administered and streamlined.
- **Reliable** and **comparable** meaning the extent of improvement can be measured reliably and the results can be compared over time or between different facilities.

Let us now take a look at what some of these principles mean in practice. The first principle is that standards should be **citizen centric,** which means they should consider the citizen's needs at every stage of the service design and delivery process. Although the detail will vary according to the type of service that is being delivered, citizens needs would include:

- Obtaining information about the services they are seeking and how to go about applying for or accessing this service, whether at a facility or other means, such as over a customer care line or website;
- Receiving services promptly without unnecessary delays or queues in the facility and being informed of what to expect in terms of waiting times if they need to wait;
- Being assisted promptly, courteously and with the necessary respect shown by staff who are polite, friendly and take account of the language and culture of the citizen and provide the service in a place that is clean and secure;
- Receiving a service that meets their needs in an effective way: meaning that the service is correctly completed, documents received are accurate and the service outcome is what is needed (an illness treated, a child educated, a criminal apprehended);

Standards must also be clearly stated and target the specific problem that is being addressed so that the duties of the department and frontline service delivery facilities are clear and not ambiguous or understood in different ways. And finally standards should be measureable in order to allow the extent of compliance to be measured easily. Measurability is the ability to clearly state what evidence will be collected to show whether the standard is met.

> **The benefits of good service and quality standards are**
>
> - They signal the minimum level of service expected from service facilities to citizens and therefore serve as the basis for recourse by citizens if these standards are not met.
> - They serve to direct effort and resources from the frontline facilities towards achieving minimum service standards and therefore will drive improvements in key service delivery processes.
>
> **The process of monitoring these standards can help to raise the quality of public services across all government departments.**

F. DESIGNING FRONTLINE SERVICE DELIVERY STANDARDS FOR YOUR DEPARTMENT OR SERVICE

Designing frontline service delivery standards should follow a simple and logical process. These are the main steps grouped according to 3 broad stages as shown in the figure below, within which there are a number of different tasks to be done:

1. Design standards:
- **Scope and structure**: (i) Determine what the citizen's journey through the services of the facility looks like, where and when do they interact either directly or indirectly with the services and for what purpose. (ii) Determine the structure of the standards to reflect the scope– what structural elements or headings are important for the standards. .
- **Formulate the standards** –(i) Determining what services need to be delivered, how they should be delivered taking into account the citizen's expectations and the department's objectives, the Citizens complaints and why the service is being delivered to the citizen.
- **Develop and score measures**: (i) Determine how the department is going to measure and score the standard and report on them – this means developing a set of questions including how they should be answered that will measure whether the standard is met and how the department is going to score and report on the measures through a simple scoring and rating system to check the extent to which the facility is adhering to the standards and to show where the gaps are.

2. Measure standards
- **Self Assessment or Service monitoring**: Once the standards are in place and measureable, the next thing to do would be to use them to ascertain, through assessment or monitoring, how the facility does in terms of meeting these standards. This can occur through a process of self-assessment or a more formal external or internal monitoring assessment conducted at the facility.

Set a progressive target or goal for the achievement of the standard: Determine what the progressive target or goal for each standard will be in order to create a system of continuous improvement towards best practice which the facility will strive to achieve over time. The facility will then use quality improvement methods to make changes to the processes and systems in order to achieve these progressive targets.

3. Improve service delivery
- **Identify and close gaps**: Analyse how the facility has done and set about improving the quality of services – this means identifying the gaps in service delivery in the facility and then putting in place actions to address these gaps so that services improve and eventually they reach best practice standards.
- **Work to strengthen the system**: identify which gaps require action further up the value chain and use the set support systems, planning and budgeting processes, and advocacy and customer relations mechanisms to help achieve the goals set out.

Figure 2 - Stages of standard design
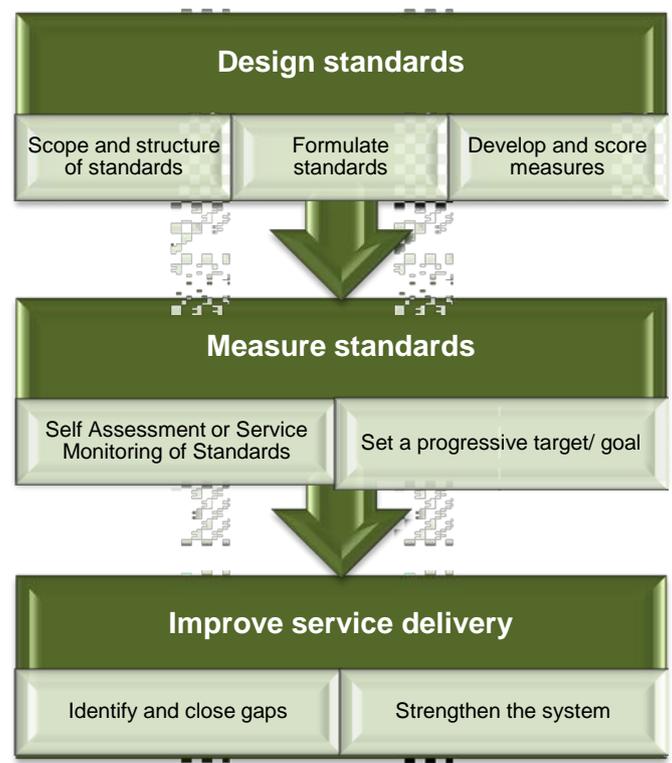
1. DESIGN STANDARDS

1.1 Scope and structure of standards

The scope of the standards

For frontline service delivery to be effective in bringing about meaningful improvements to the quality, it must define and measure the critical aspects of the service that affect the citizen's experience within the context of the plans of government and the resources available. In order to set standards that address the critical aspect of service delivery, it is important to map out the citizen's journey through a service delivery facility and understand the "touch" points (the places where the services interacts directly or indirectly) with the citizen.

The citizen's journey through the frontline service delivery is a complex one and may differ according to the type of service, but can be thought of as a process that culminates with receipt of a public service that improves their social or economic wellbeing, as figure 3 illustrates.

Figure 3: Citizen journey through the frontline service delivery (Source: Adapted from Deloitte & Touché LLP by Kim Faure)
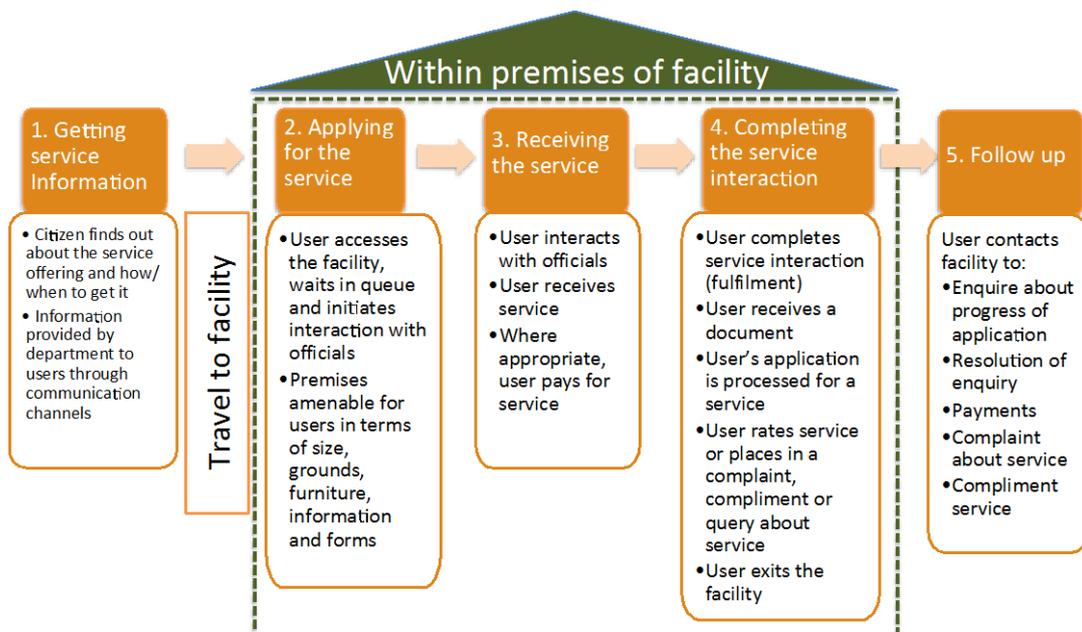
It is made up of a number of processes:

- **Getting service information:** The citizen's journey through frontline service delivery usually begins with finding information on the public service they require. This step generally happens outside the facility. Communicating information on the services that are available, and on where and when to access them, is usually the responsibility of corporate or central office and it reflects the plans of this office, which also determines how and when this information is communicated to the public;

- **Applying for the service:** The second step in the citizen's journey is the process of applying or registering for the service. This may require the payment of a fee in some cases, either before or after the service is delivered. This is usually done inside the facility where the citizen needs to go through

all the steps needed to apply for or request the service and complete or receive any forms or files provided by the frontline staff;

- **Receiving the service:** The third step involves receiving the actual service that may be a single process or a number of different processes or different episodes, or reflect a long term agreement;

- **Completing the service interaction:** After doing all that is necessary the citizen finishes the process in the fourth step and exits the facility or service unit; and

- **Follow up:** For some public services, a further fifth step, the citizen follows up to ask about the progress with their application, collect their documents or even to lay a complaint or a compliment with the institution.

Example of citizen journey through the home affairs frontline service delivery

Process 1: Thulani is a 17 year student who wants to apply for an identity document. His first step is to access the Department of Home Affairs website to find information on how to apply for his identify book. He understands that he will need to complete form B1-9 in black ink, bring along a certified copy of his birth certificate and two passport-size colour photographs. He uses the website to locate his nearest home affairs office.

Travel to facility: Thulani takes the taxi to the nearest facility. He follows the signage through to the office, and enters the premises

Process 2: He goes to the information desk where he receives the B1-9 form, completes it with the black pen he bought from a vendor just outside the facility, and moves to the application queue where he waits until called to a service desk.

Process 3: At the desk, the frontline official explains the process, checks his completed documentation, and informs him when his ID book will be ready for collection.

Process 4: Thulani is given his reference number and exits the perimeter of facility.

Process 5: Three weeks later, Thulani texts his ID number to the department's automated short message service and receives a reply that his application is still in progress. A week later, he receives a text that his ID is ready for collection.

Source: Adapted from the Department of Home Affairs. Available online.

The structure of the standards

When designing the tool for the department consideration should be given to a structure that suits the needs of citizens accessing the services. A simple structure might include the following key elements:

- **Key Performance Areas (KPAs)** - The KPAs should identify those important critical parts in the citizen's journey where the service delivery facility is able to add value to them and where the department would want performance to be standardised or improved.

- **Standards** - The standard is the statement of the expected service delivery within the different KPAs / PAs which includes the what, how and why.

- **Measures** - Measures set out the measureable elements for each Standard. They are a set of questions that collect evidence on whether the critical aspects of frontline services are present or are provided as they should be.

Figure 4 Structure proposed for standards
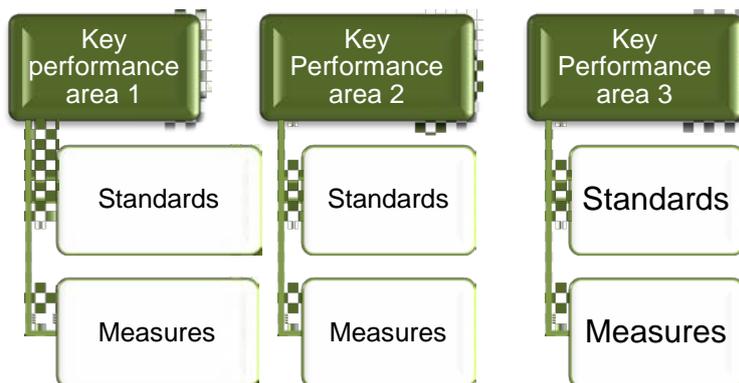
The DPME has developed a structure that might be of use, although depending on the scope of the services themselves, it would need to be adapted. See box below.

The DPME- FSDM Structure

The DPME has eight KPAs that are specific areas within the service delivery facility that the citizen experiences on their journey to access services:

  i.   Location & accessibility
  ii.   Visibility & signage
  iii. Queue management & waiting times
  iv.   Dignified treatment
  v.   Cleanliness & comfort
  vi.   Safety
  vii. Opening & closing times/ service efficiency
  viii. Complaints and compliments management

Other services may want to include aspects such as **access to information** for citizens wanting to find out about the facility and **follow-up/customer care services.**

Each Key Performance Areas (KPA's) has Performance Areas (PA) which are sub sections to the KPA's and articulate the level of service and quality expected from the facility. Then a PA statement is designed to achieve two objectives. First, it is intended to provide guidance to the facility on what is expected of it.

Take for instance the following PA statement:
Citizens are able to navigate their way throughout the facility, by following internal signage to the correct service points and waiting areas.

To comply with this statement, (i) the facility will have to identify the areas where signage is needed, what internal signage is needed and where these should be placed. (ii) the PA statement is intended to guide monitors in their assessment of the facility. Therefore, to measure this PA, the monitor will need to observe the layout of the facility, look for signage and ask citizens if they were able to find their way to the facility.

Measures are then the aspects through which the PA statement is measured. In order to come to a valid and reliable measurement, monitors must ensure that sufficient information and evidence is collected to respond to the measure. These measures are structured into a questionnaire that the monitors use when conducting their onsite monitoring visits.

1.2 Formulate the standards

Standards should express the scope of the specific services delivered, which was already determined in Step, 1 and includes what service the department needs to deliver, how it should be delivered taking into account the citizen's expectations and the department's objectives and why is the service being delivered to the citizen. Some examples are described below:

> **A standard is therefore formulated by defining <u>what</u> service is to be delivered, <u>how</u> it should be delivered to optimise the experience of the citizen and <u>why</u> it is to be delivered.**

The facility has in place a queue management system to direct, manage and control the flow of citizens quickly and efficiently through the service process.	
What service is to be delivered	A queue management system
How it should be delivered	It should be directing, managing and controlling the flow of citizens
Why it is to be delivered	So that citizens may quickly and efficiently move through the service facility and process

The facility provides citizens with information on how to apply for the services including the types of documents needed, the fees payable, and the process for following up on their service request or application so citizens may get the service they require at the first visits.	
What service is to be delivered	Inform on how to apply for services
How it should be delivered	The information should include the types of documents needed, fees payable and the process to follow up on service requests or applications
Why it is to be delivered	So the citizen doesn't have to come back to the facility multiple times because of insufficient documentation

The facility is clean and maintained in a manner that enhances the citizen's experience and ensures a safe environment for the delivery of frontline services.	
What service is to be delivered	The service delivery facility
How it should be delivered	The facility should be clean and maintained
Why it is to be delivered	To enhance the citizens experience and ensure a safe environment for the citizen

1.3 Develop and score measures

Develop measures

Measures are a set of questions that collect evidence on whether the critical aspects of frontline services (that are written in the standard) are present or are provided as they should be. As with the standards themselves, similar principles apply in the development of the measures, specifically in relation to their measurability and feasibility.

- **Measurable** – Can extent of compliance be assessed objectively through observations or subjectively through interviews with staff and/or citizens to gather their opinions on aspects of service delivery?

- **Feasible** – Is it feasible within the given resources for the facility to implement what is required in the measure

- **Proximate** – Does the measure closely relate to a part of or whole of the KPA. So measures need to measure what the KPA is addressing in the critical pathway of the citizens journey through the facility;

Measures, if they are clearly defined will allow the facility to determine exactly what they have to do in order to comply with each standard. It will also ensure that budgets for resources are allocated appropriately in order to achieve the standards and measures for example:

Standard: There is visible signage on the roads or paths leading to he facility to enable citizens to find and access the facility	
How is it measured?	**How do you comply with the standard?**
There is **sufficient** signage that is: - **clear** (if it contains a universally accepted icon or legible text) - **visible** (if it is sufficiently large and easily read by pedestrians, public and private transport citizens) - **useful** if it provides directional and distance information on both sides of the road.	To comply with the standard, the facility must agree with the local municipality on: ☐ type of signage needed ☐ location of signage ☐ wording of the signs and the languages used Before agreeing on the signage, the facility must ascertain whether there are any guidelines set by the national department governing the use of external signage On a quarterly basis, the facility must check whether the signage is still clear and visible to citizens. The facility must report any broken and/or unclear signs to the municipality promptly.

The measures should be directly linked to the standard they are measuring and break down all the parts of that standard, for example:

Standard	The facility provides citizens with information on how to apply for the services including the types of documents needed, the fees payable, and the process for following up on their service request or application so citizens may get the service they require the first visits

Measure should include	• Is there information
	• Does it cover everything listed in the standard (it could cover more):
	    ○ How to apply for the service
	    ○ What supporting documents to bring along
	    ○ What to pay
	• How do citizens get this information before their first visit

Different methods can be used for collecting the information (evidence) in each measure. Depending on the type of service, these could include asking (interviewing) relevant staff or citizens, observing the building and its surrounds or how citizens are treated while they wait or are attended to, and examining documents and registers including things like staff records, minutes of meetings and reports.

It is always important to check what is found by asking questions to more than one person and in more than one place, or looking at more than one document, and then asking whether the information is enough to decide if the standard is in fact met ("validation") or whether the answers are the same if they come from different people or methods ("triangulation"). Where the measures only look at items that can be observed a single source of evidence is sufficient to make an assessment, provided that multiple observations points are used i.e. observing 10 citizens in a row receiving service.

It is often necessary to choose or sample which staff or which document or which citizen to get the information from; this is best done in the simplest way possible (e.g. every 10th citizen or every 5th staff member), as long as the process doesn't "select the best" (and introduce bias)

The following example from the DPME - FSDM programme may help illustrate this process:

Figure 5 – Example of diffrernt methods for collecting evidence from DPME FSDM programme

Description	Method
Example 1	
KPA 2: Visibility and signage	
PA: Signage to the facility. PA Standard: Citizens are able to locate the facility quickly and easily by following external signage	
Monitor questionnaire: External signage: Is the signage visible from the roads or paths leading to this facility? Staff questionnaire: External signage: Is the signage visible from the roads or paths leading to this facility?	Two sources of evidence are used to validate the measure. Evidence is collected from both the monitor and the staff to determine the extent to which the signage is visible.
Citizen questionnaire: Please rate how easy it was for you to find the facility on a scale of 1 to 4 where 1 is very difficult and 4 is very easy.	All three sources of evidence are used to establish whether the PA, which seeks to ensure that *"citizens are able to locate the facility quickly and easily by following external signage", is* achieved.

Description	Method
Example 2	
KPA 4: Dignified treatment	
PA: Courteous, dignified and respectful service. PA Statement: The facility's staff treats citizens with courtesy, dignity and respect and provide services in a friendly manner.	
Monitor questionnaire: Observe if the staff treat citizens with courtesy, friendliness, dignity & respect?	It makes little sense to ask this questions to staff as they are inherently biased. Therefore, this question needs to be validated 'within method'. This can be done by conducting multiple observations of different frontline staff members at different points in the facility.
Citizen questionnaire: On a scale of 1 to 4 where 1 is strongly disagree and 4 is strongly agree how much do you agree with the following statement: Staff treated me well (with courteously, dignity and respect)"?	By combining the evidence from multiple observations and interviews with citizens, the FSDM tool assesses whether *'The facility's staff treats citizens with courtesy, dignity and respect and provide services in a friendly manner.'*

Source: DNA Economics

Score the measures

To assess compliance to the standards, a score should be applied to each measure on the basis of evidence that the facility is complying with the standards. These scores must be determined reliably, thoroughly and consistently and therefore the scoring system must be simple and clear.

There are various scoring methods possible; however, it is wise to look at a system which has a progressive model to assess the extent to which a facility adheres to quality and service efficiency standards. An example of a progression scoring model is contained in the DPME FSDM tool which is similar to that of MPAT with four levels of compliance. The FSDM tool uses a four point scale as shown in figure 6.

Figure 6: Scoring and compliance levels		
Score	**FSDM program rating scale system**	**MPAT rating scale system**
1	Compliance has not been achieved	Non-compliance with legal/regulatory requirements
2	Compliance is partially achieved	Partial compliance with legal/regulatory requirements
3	Compliance is fully achieved	Full compliance with legal/regulatory requirements
4	Achieved beyond compliance	Full compliance and doing things smartly

This progressive scoring approach has a number of benefits; (i) it enables the frontline staff to assess how far a facility is from complying with minimum quality standards, i.e. a score of 3, (ii) it creates a common understanding of what actions are needed to progressively improve the performance of the facility, i.e. move from 1 to 2 to 3 to 4. This is a powerful lever for change within frontline service delivery, and contributes to more effective improvement planning and monitoring. (iii), the progression model highlights and encourages good practices, by recognising a facility's effort to move beyond compliance towards a score of 4. Good practices identified should be replicated in other facilities to improve the overall performance of frontline services across the country.

Each scoring level contains a description which provides guidance to the facility on what the expected level of performance looks like in real terms. For instance, in the example shown in figure 7, for each level, we have described what should be in place on the grounds of the facility in terms of cleanliness. Therefore, in a facility that is not compliant with the standards (a score of 1 or 2), you are likely to see heavy littering with bins that are overflowing and unkempt grounds.

Figure 7 – Example of score descriptors

Questions	1 = Not achieved	2 = Partially Achieved	3 = Fully Achieved	4 = Achieved beyond compliance
Key performance area	Cleanliness & Comfort			
PA Statement	The facility's grounds are clean and maintained in a manner that enhances the citizen's experience and ensures a safe environment for the delivery of frontline services.			
Are the facility's grounds and outside areas kept clean and maintained?	The facility's grounds and outside areas are heavily littered with significant accumulations in bins or on the grounds, the plants and shrub beds are overgrown and the grass is not mowed.	There is littering with minor accumulations in bins or on the grounds, the grass and plants have been cut but demonstrate signs of regrowth.	The facility's ground are clean and maintained	The facility external areas are well kept i.e. grass is cut on the pavement and area at the entrance to the facility is paved

A score of 4 should only be given when facilities can show good practices or exceptional performance that goes beyond what is generally found even in good facilities.

As the point of this process is to make sure that service delivery improves, and not to simply achieve higher scores, it is important that everyone has the same understanding of the difference between the score levels so that a situation where everyone always scores at least a 2 (rather like the average on a performance assessment situation) because they have started the process of complying is avoided. The principle is that the assessor must choose the one that fits best or err on the side of a lower score if they are not sure the facility is meeting the description with the score. For example if the facility is clean and maintained in general but there are bins slightly overflowing on the grounds the score should be a 2 not a 3.

The same scoring system can be used to ascertain from citizens their opinions on the quality of services in the facility. An example of how the scoring is simplified for citizens is given below. In order to help citizens provide their opinions the scores are based in a Likert Scale or sliding scale from 1 – 4 where 1 is very dirty and 4 is very clean.

Figure 8: Example of the use of a simple progression scale within the FSDM programme

Questions	Applicability to sectors	1 = Poor	2 = Fair	3 = Good	4 = Excellent
KPA 5		**Cleanliness & Comfort**			
PA Statement		**The facility's grounds are clean and maintained in a manner that enhances the citizen's experience and ensures a safe environment for the delivery of frontline services.**			
On a scale of 1 – 4 where 1 is not clean at all and 4 is very clean, how clean would you rate the facility grounds and outside areas	All	Very dirty	Dirty	Clean	Very clean
On a scale of 1 – 4 where 1 is not clean at all and 4 is very clean, how clean would you rate the cleanliness inside the facility?		Very dirty	Dirty	Clean	Very clean

Using the basic scoring system proposed above, a simple heat map can be designed based on the outcomes of assessments. Each score is colour coded for example: 1 = red, 2 = orange, 3 = yellow, 4 = green. Part of a heat map is shown below as an example.

These heat maps will help identify, at a glance, the areas of poor compliance (the red and orange) for targeted actions and also the areas of good practice (the green) for case studies to support continuous quality improvement in the future for other facilities.

Figure 9 - Example of a heat map with colour coding of score outcomes

Description		Rating Scale - Monitor			
PA heading	Questions	1 = Not achieved	2 = Partially Achieved	3 = Fully Achieved	4 = Achieved beyond compliance
	KPA 3	**Queue Management and Waiting times**			
3,1	PA Statement	**The facility has in place a queue management system to direct, manage and control the flow of citizens quickly and efficiently through the service process.**			
Queue management systems	Is there an effective queue management system in place? (A system may include: a person or signs directing citizens where to wait, an electronic system or a numbering system).	There is **no** queue management system in place within the facility.	There **is** a queue management system (i.e. queue marshal, help desk), **but is not** effective in directing, managing and controlling the flow of citizens throughout the facility.	There **is** a queue management system which works well **and** directs citizens quickly to the right place. (i.e. a person or signs directing citizens where to wait , pole and rope barriers, an electronic system or a numbering system)	There **is** an electronic queue management system which works well and directs citizens quickly to the right place, **and** there is a dedicated floor walker.

	Is there a reception or help desk, manned and situated in a prominent position in the facility (where applicable)?	There is **no** reception or help desk.	There **is** an identified reception or helpdesk **but** no official manning it.	There **is** an identified, and manned reception or helpdesk, **with** an assigned official present, **and** situated in a prominent position within the facility.	There is a reception and a separate help desk which is identified and manned with an assigned official present, and situated in a prominent position within the facility.
PA Score					
3,2	**PA Statement**	The facility keeps citizens informed of their target waiting times and how long they can be expected to wait before being attended to.			
Waiting times	Does the facility display the target waiting times for citizens?	There are **no** target waiting times displayed.	The target waiting times **are** displayed **but not** visible to the citizen or are not displayed at all relevant service points.	The targeted waiting times **are** visibly displayed in various waiting areas.	There **are** targeted waiting times displayed at all waiting area **and** delays are communicated to citizens.
PA Score					
3,3	**PA Statement**	The facility's queue management system identifies citizens with special needs, and makes provision to fast-track service delivery and reduces waiting times.			
Special provisions for citizens	Are there queues or provisions made for citizens with special needs (i.e. the disabled, elderly, frail, pregnant women) to reduce waiting times?	There is **no** designated queue(s) or provision(s) made for citizens with special needs.	There is **no** designated queue(s) or provision(s) made for citizens with special needs, but preference is given to them if they are identified.	Citizens with special needs **are** identified promptly and directed towards clearly marked queues **and/or** given preferential treatment.	To be determined during implementation

It also allows the facility to implement a simple overall scoring system for the entire facility. For example if all measures with the same colour coding are added up it is possible to determine what the majority colour of the facility is. In Facility X in the example below, the majority of measures are red or orange therefore the facility is in need of much improvement. However in Facility Y the facility is doing well in most aspects (5 yellows) and has even got some best practices (5 greens). Therefore Facility Y should be focussing on improving the 2 measures which are orange and maintaining its good scores on the others.

Figure 10 – Heat map scoring results for Facility X and Y

Score	Facility X	Facility Y
1	5 measures	0 measures
2	4 measures	2 measures
3	3 measures	5 measures
4	0 measures	5 measures

It must be borne in mind that the purpose of the monitoring being proposed in this document is to guide improvements and it is more important to be able to identify where there are gaps (for instance through a simple heat map) than to introduce something that is a challenge for staff to understand. Departments intending to introduce a more complex system of scoring and reporting are referred to the DPME - FSDM manual.

2. MEASURE STANDARDS

2.1 Self Assessment or service monitoring: Evaluate how you have done against the standards

The DPME has had an active programme of external monitoring through FSDM programme of a sample of frontline facilities from each of the specific departments on an annual basis. It has however become clear that if the purpose of improving the quality of services is to be realised, then the departments themselves and all of their facilities, not just a sample, have to become active players in this process.

A public service department that is providing frontline services should set up a way to measure for themselves the gap between the standard and the current situation on the ground. This is what is normally called "service monitoring" or "self-assessment", where the management of the service unit does this as part of its oversight activities and responsibilities on at least a quarterly basis, however monitoring should be a daily routine.

It is a very useful exercise because it shows staff where they are going wrong and helps them to understand and learn what should be in place but isn't. Managers of frontline services may even say "At last I understand what my job is and now I can provide guidance to my staff" and therein strengthen their ability to address issues of poor services as they arise.

The scoring system referred to above will show the extent to which the facility is adhering to the standards, after completing the assessment of the measures. The measures can be used for self-assessments or for formal external or internal monitoring assessments.

It is not always easy to assess oneself, due to the inherent bias involved in self-assessment. It may therefore be useful to have a "peer review" process of assessment, where colleagues from similar facilities swop with each other to assess each other's' facilities, or if possible colleagues from different facility types form a team that then assesses other facility. This has an extra

benefit in that the people involved always say they learn a lot from other types of facilities i.e., clinics can learn from home affairs office on how to manage queues better or provide information to citizens. There is a cost to doing this, however, so it is not always possible, or if it is done it cannot be done all the time. This requires effort, budget and planning and must however be encouraged.

It is important to make sure that the reports that come out of this exercise are properly used, which means they are used to improve the quality of the services and sort out problems. This is easier to do if the reports are very clear as to exactly what needs to be corrected. Hence the simple heat map types of reports are easy to read by all staff and paint a colourful picture that most individuals, including citizens can understand. It is also important that the most important or critical things are clearly highlighted so that staff in the facility knows where to start. In doing this, two additional things are often helpful – how does this particular facility compare to others, and how has it been doing over time or since the last assessment.

2.2 Set a progressive target

The initial self-assessment will generate a "baseline" score using the simple scoring system proposed above. This "baseline" serves two purposes; it will allow the facility to compare how it does over time with subsequent self-assessments, and it will allow the facility to compare itself against its peers or other similar types of facilities in the district or province or even nationally. The facility can either benchmark itself towards a facility that it thinks is achieving well or which it would like to emulate, or strive towards achieving a progressively higher and higher score in a step wise fashion.

Next the facility must set an aim – a statement of what the facility wants to

achieve or strive towards. So for example, in figure 11, the baseline score in quarter 1 2015 was 5 yellows out of 12 measures using the heat map scoring system. The facility sets the following aim " We, facility (*add facility name*), want to achieve 10 yellow measures out of 12 within 2 years by improving what we do to deliver better quality service to our citizens" The facility sets themselves a target - 10 yellows, to be achieved within a specific timeframe - 2 years. From quarter 2 in 2016 they also have achieved some green measures that show that they didn't stop at yellow but kept improving until they achieved some greens (best practices) too.

The setting of these aims and progressive targets is a process that the staff in the facility should be actively involved in and should align with the Performance Management Process of the staff and facility.

Such assessment can be plotted on a simple chart (also called a run chart in improvement methodology) to monitor their progress over time towards achieving their targets of 10 yellow measures.

Figure 11 Run chart of improvement in scores over time
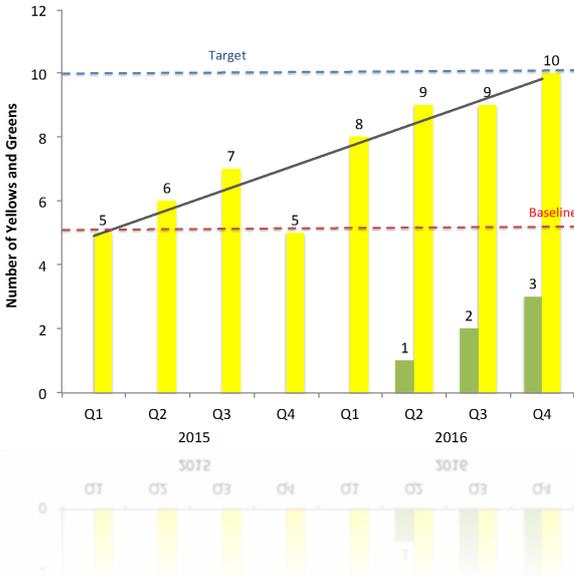
3. IMPROVE THE SERVICE

3.1 Closing gaps / ensuring corrective action

The Public Service regulations of 2001 direct that an executing authority shall establish and sustain a service delivery improvement programme for their department. Improving quality is a management approach designed to make sure that standards are met and that Citizens are getting the best possible services that meet their expectations, within available resources. Quality improvement is not a destination but rather a continuous process or a journey in which progressive improvements are made over time, through determining where one wishes to be (the standard) and assessing where one actually is in relation to this (self assessment).

However, improvement will only happen if there is a concerted effort to identify gaps needing attention, taking action to close those gaps, and monitoring whether the gaps have indeed been closed and the desired standards have been met. The process then starts over again, as for each success achieved in closing some gaps, further gaps will become apparent or the expected standard itself may be progressively raised. This on-going cycle is shown in the diagram below.

Figure 12 - Quality improvement cycle
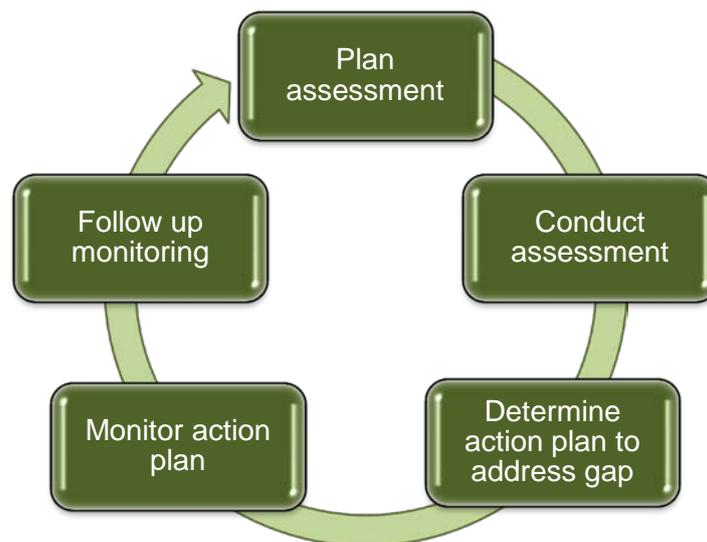
Self-assessments and the reports on what is found will help to show facility managers where they can make changes for the better - some things might be easy to fix such as cleaning the bins more frequently whilst others are systemic problems that might take more time to solve i.e., computer systems that keeps crashing or power failure issues. However sometimes the situation is a bit more difficult than just fixing things. There are some recognised ways of improving the way management improves quality using modern scientific methods which can help to make local managers a lot more effective in providing quality care.

Quality improvement methods have become a recognised part of how good managers do their work and make sure that the actions they take to close the identified gaps are

actually effective. Managers can be helped in this by people who are specialised in using these methods. The different methods all use some form of a cycle of planning, doing, measuring and checking what works and then implementing those things that do work (and scaling them up). They use ways of collecting and analysing data locally in order to improve the processes or ways that work is done, step-by-step, in order to reach a goal. They include such approaches as Lean, root cause analysis, or Plan-Do-Study-Act (PDSA) cycles and have a number of tools that managers can apply in their own situations to their own problems.

3.2 Improvement within a system

A system is a set of processes that are linked together in order to achieve a final output. We are talking here about government services and the use of public funds, within a very large system of public service delivery. The setting and measuring of standards of quality as well as the improvement work that is done therefore happens within this overall system. One very important example is that of the National Development Plan of 2030, which is one of the most important guides to managers as to what is expected of them and what standards they need to set and then meet in order to align with the greater goals of the National Government system. How individual managers and staff within the system are responsible for making it work and are held accountable within the system is critical in being able to provide quality services.

Some key decisions are often not taken by the facility managers themselves but fit within an overall system and process of policies, planning and implementation. The Medium Term Strategic Framework as developed and approved by Government is an example of a

critically important planning framework that concretises the actions to be taken and goals to be achieved by each department and the services that fall under them. It is therefore very important, if improvement is to succeed, that it links to established processes such as medium-term and annual plans and budgets, standard operating procedures, performance management KPAs, training, advocacy and communication for example:

- Frontline services all operate within a set of policies and procedures. These are basically the rules that inform staff how to do things. One of the first things that are often found to make it difficult to change is that these rules have been wrongly understood by operational managers and staff and are actually making things hard to do. So it is very important to look carefully at how things are done, work out where the barriers are, and understand which things can be done better within the actual set of rules.
- Planning and budgeting cycles of government happen at certain times of the year and managers need to make sure that critical improvement initiatives that are found to be needed are covered by the budget as a clear indication of ensuring money is used to enhance service delivery, including though shifting funds if possible. It is very important that any institution with a role in this makes sure findings are formally noted, responses are implemented, and decisions are tracked.

At times it may be necessary to escalate the need for change. Writing a report to senior or executive leadership or management may help, or setting up a special task team or priority initiative. Government has its own ways of making sure people know what matters, for instance through getting a political principal (the Minister, Premier, or Mayor) to include this in a speech and

highlight the serious problem or to acknowledge success.

Using external reports to make change easier

Generally, it is a fact that people change their behaviour when they perceive there to be a consequence (either good for them or bad for them) of what they do or don't do. This applies as much at local service units as it does at senior management levels.

External or independent assessments are sometimes feared by local managers who feel they are going to be blamed for things over which they have no control. However, smart managers use such reports to assist and bring about change. This can be simply because of the public nature or the wider audience of such reports making it more important for those at different levels of the system to show how good and effective they are, rather than the contrary. In some cases, such external reports may even carry legal or regulatory implications, whereby managers can be sanctioned for things that are just not acceptable.

A smart manager will therefore make sure that they have done all that is within their power to improve things at the local level – and there is a lot that can be done. However, they will also make sure that when they cannot sort things out themselves, they make sure they formally ask the person whose job it is to do this to resolve it, using the poor results of their self-assessments or the reports of external assessments to make their case. They will also make sure that they follow up on these requests, and that all of this is written down. This will make clear where problems need to be solved and what actions they have taken within their powers to resolve.

Involving Citizens - listening to them

Although we are talking here about frontline services, meaning those services that are delivered directly to the public, the feelings and opinions of citizens themselves are not often listened to regarding what they feel about the services they receive. When citizens do complain, staff far too often see this as a threat and respond defensively or sometimes even aggressively. However, it is a recognised fact that in work that is delivering services, complaints and criticisms from those receiving the service are the most useful pointers to how to improve. If citizens using services have ways of voicing what is wrong and feel someone listens to them, they will be less critical and angry about things that aren't right. It is also true that often citizens are actually pleased about the service they have received, and being able to say this makes both them and staff feel very good and positive.

It is of course true that some citizens of services are in turn rude and aggressive, and may even be unreasonable in expecting a type of service that is really not possible to provide because it is not within the rules. However, if the standards for quality are known to the citizens, it is a lot easier for staff to point to these in responding to such demands.

Engaging with citizens whilst they are in the service delivery facility rather than waiting for them to lodge a complaint will also give effect to the NDP placing more emphasis on the involvement at frontline level of citizens in improvements to service delivery.

Processes such as complaints and compliments boxes or other ways for the public to interact with the facility management are still very important. Staff and managers

must however then take these comments seriously and prioritize putting corrective actions in place.

G. ROLES AND RESPONSIBILITIES AT DIFFERENT LEVELS

Something as fundamental as standards and measurement tools should clearly reflect the policy position and ownership of the Department that is responsible and accountable overall for the quality and scope of a specific frontline service. Although the design of standards is more of a National/Provincial department responsibility, staff members in districts and service delivery facilities need to provide their inputs in order to ensure that standards reflect the situation on the ground and are reasonable and achievable.

The following table reflects the concept outlined at the start of the levels of government that must ensure that services are delivered as planned and expected. The exact structures might differ between departments and provinces. Similarly, self assessments are the primary responsibility of the service delivery facility with the support of other service delivery facilities or the district; however, some gaps in service delivery can only be resolved at a higher level i.e., provincial or national and therefore require that level of support and input.

Figure 13 – Roles and responsibilities

Process	Step	Level of responsibility	Assisted by	Input from
Design standards	Define scope and structure	National / provincial	Region District	Service delivery facility
Design standards	Formulate standards	National / provincial	Region / District	District/ service delivery facility
Design standards	Develop measures and scoring	National / provincial	Region / District	Service delivery facility
Measure standards	Assess or monitor	Service delivery facility	Region / District	Province
Measure standards	Set progressive targets	Region / district	Province	National
Improve services	Identify and close gaps	Service delivery facility	Region / District	Province
Improve services	Strengthen the system	Service delivery facility	Provincial / region / district	National

H. CONCLUSION

The guide provided here for frontline managers, supervisors and department officials how to develop quality standards and use them to measure the quality of service delivery in their facilities. It is focussed on the overriding objective which is to improve services through understanding how citizens experience the frontline services, what matters most to them and how standards can be developed that will help frontline service staff to meet the expectations of the citizens. It's a practical simple guide to frontline service delivery monitoring that has an impact on quality.

Over time, through the credible and consistent measurement of service quality by departments and services themselves, the gaps in service delivery will narrow and more accessible and better quality frontline services will be delivered to those who need and deserve them.

It is important to note that this guide is meant as a possible way of developing quality service standards for frontline services, it is by no means an instruction by the department however, we strongly encourage that departments develop measurable standards to assist the overall quality of service delivery for the citizens.