



# CAF

and Education

## Foreword

At the end of the 1990s, the EU Ministers responsible for public administration invited the European Public Administration Network (EUPAN) to promote exchange and cooperation between the EU Member States and to develop common instruments in the field of quality management. In May 2000, a first product of the cooperation among EU national experts was presented: the Common Assessment Framework (CAF) – a real, common, European quality management instrument for the public sector, developed by the public sector.

CAF has become a great success. Over the past 10 years since its launch, nearly 2000 public sector organisations all over Europe have used the model, and the number of CAF Users is still growing. In the early years, the model was mostly used to introduce the principles of Total Quality Management into public sector organisations by making a diagnosis of the organisation in the light of this blueprint of an excellent organisation. As CAF had to be a generic tool, applicable to all types of public sector organisations at all institutional levels (European, federal or national, regional and local), the content of the model had to be formulated at a highly theoretical and sometimes even abstract level. Despite this context, from the outset CAF wanted to be a tool that was simple, accessible and easy to implement: in comparison with other quality models, this is certainly true of CAF.

But many countries wanted to help their users by translating the English “mother” version of CAF into their own language, whilst also taking the opportunity to adapt the wording and the examples to their own administrative environment. In some countries, experts on total quality management and experts in specific sectors started developing CAF versions for their sectors, such as the local administrations (Belgium) or Justice (Italy) and many more. In most cases this was done on a national basis.

At a certain point, the CAF Resource Centre was informed that in a number of countries people had developed a CAF version specific to the education sector.

First of all, the Belgian French-Speaking Community informed us about their CAF version on Education and Training Institutes. They had created a working group of five experts in the field of education and training, which reflected during several meetings on the adaptation of the CAF for their sector: Gérard Alard, Christine Defoin, Gérard Reynders, Pascale Schellens and Annette Verbeke. The group was chaired by the Belgian National Correspondent Jean-Marc Dochot. Their work contributed greatly towards the European CAF version for training and education institutions. In Norway, Even Fossum Svendsen developed examples and documentation tailored to the educational sector at county level. In Portugal, work on the development of CAF for the sector of education was done at university level by Hugo Caldeira, Rodrigo Queiroz e Melo and Sofia Reis. In Italy, an Education steering group, set up and promoted by the Ministry for Public Administration in collaboration with the Ministry of Education, was entrusted to customise the CAF Model on the education sector starting from those previous CAF experiences that had been spontaneously carried out in Italy by the regional school offices in Veneto and in Lombardia, and by all those schools where independent reflections had led to the use of the model.

The Steering Group was composed of: the ministry for public administration, Foromez, the Ministry of Education, the INVALSI (National Centre for the evaluation of educational achievement) and regional school officers (from Veneto and Lombardia), the most well-known Italian TQM experts and, most recently, all those internally involved in the process, i.e. school managers from Northern, Central and Southern Italy, who were selected because of their significant experience in implementing the CAF model, thus guaranteeing the proper development of the adaptation work. On the basis of this experience, the national Correspondent, Sabina Bellotti and the Foromez experts, Rino Bertorelli and Clara Alemanni, took their contribution to the European version of CAF and Education.

When it was decided to bring all their expertise together into a European CAF and Education expert group, the objective was very clear: to develop an overall European CAF version for the Education and Training sector, intended for all teaching and training institutions, regardless of their level, from pre-school level to higher education and lifelong learning in Europe. All the Member States were invited to join the group, which was eventually composed of the following countries: Luxembourg – Jutta Wirtz and Frédéric Joly from the CRP Henri Tudor; Greece – Poppy Oikonomou from the Interbalkan Institute of Public Administration in Thessaloniki; Poland – Andrzej Kurkiewicz from the Ministry of Science and Higher Education; and Slovakia – Miroslav HRNCIAR from the Slovak Society for Quality. The meetings were prepared and chaired by the CAF Resource Centre: Lena Heidler, Ann Stoffels and Patrick Staes. They were held on the premises of the Belgian Federal Public Service P&O and the Ministry of the French-Speaking Community in Brussels. We would like to thank them for their hospitality.

On behalf of all Member States, the CAF Resource Centre wishes to thank the participants of this working group for all their efforts. Intensive discussions took place to create this new European tool, but we can finally be proud of it. The CAF National Correspondents discussed this document during their meeting in Maastricht on 18 February and it was approved by the IPSG – the EUPAN working group responsible for all CAF activities – at their meeting in Madrid on 19 and 20 April, 2010.

This document was approved by the *Directors-General at the 54<sup>th</sup> DG meeting during the Spanish Presidency. Madrid, June 2010*

# General Introduction

## Origin and growth

The Common Assessment Framework (CAF) is a **total quality management tool** inspired by the Excellence Model of the European Foundation for Quality Management (EFQM) and the model of the German University of Administrative Sciences in Speyer. It is based on the premise that excellent results in organisational performance, citizens/customers, people and society are achieved through leadership driving strategy and planning, people, partnerships, resources and processes. It looks at the organisation from different angles at the same time: a **holistic approach** to organisation performance analysis.

A pilot version was presented in May 2000 and a first revised version was launched in 2002. A **CAF Resource Centre (CAF RC)** was created at the **European Institute of Public Administration (EIPA)** in Maastricht following the decision of the DGs in charge of public service.

Together with the **network of national CAF correspondents**, assisted by the European Foundation for Quality Management (EFQM) and the University of Speyer, the CAF RC provided training on implementation of the model in a variety of ways and evaluated its use. Between 2000 and 2009, approximately 1800 European public administrations used the CAF to improve their organisations. Countries from outside of Europe are also expressing a lot of interest in using the tool, e.g. China, the Middle East, the Dominican Republic and Brazil. More than 300 CAF users met at the first, second and third European CAF Users Events in Rome in 2003, in Luxembourg in 2005 and in Lisbon in 2007. Two studies by EIPA, established within the context of the first two events, collected and analysed detailed information on the use of CAF in Europe and inspired the **CAF 2006 revision** that is now used as the standard. A database of CAF users can be consulted on the website of the CAF Resource Centre at EIPA [www.eipa.eu/caf](http://www.eipa.eu/caf) and where a CAF e-tool is also available for the CAF community. The CAF website provides all the available information at European level. The model has now been translated into 19 languages. At national level too, many countries have developed CAF support structures, which include training, e-tools, brochures, CAF user events and CAF databases. All these activities assure all CAF Actors involved that the target of **2000 registered CAF users by 2010** – set in 2005 by the Directors-General responsible for Public Administration – will be met.

## Main purpose

The CAF is available in the public domain, is free of charge and is offered as an **easy to use tool** to assist public sector organisations across Europe in using **quality management techniques to improve performance**. The CAF has been designed for use in **all parts of the public sector**, and is applicable to public organisations at the national/federal, regional and local levels. It may also be used under a wide variety of circumstances, e.g. as part of a systematic programme of reform or as a basis for targeting improvement efforts in specific public service organisations.

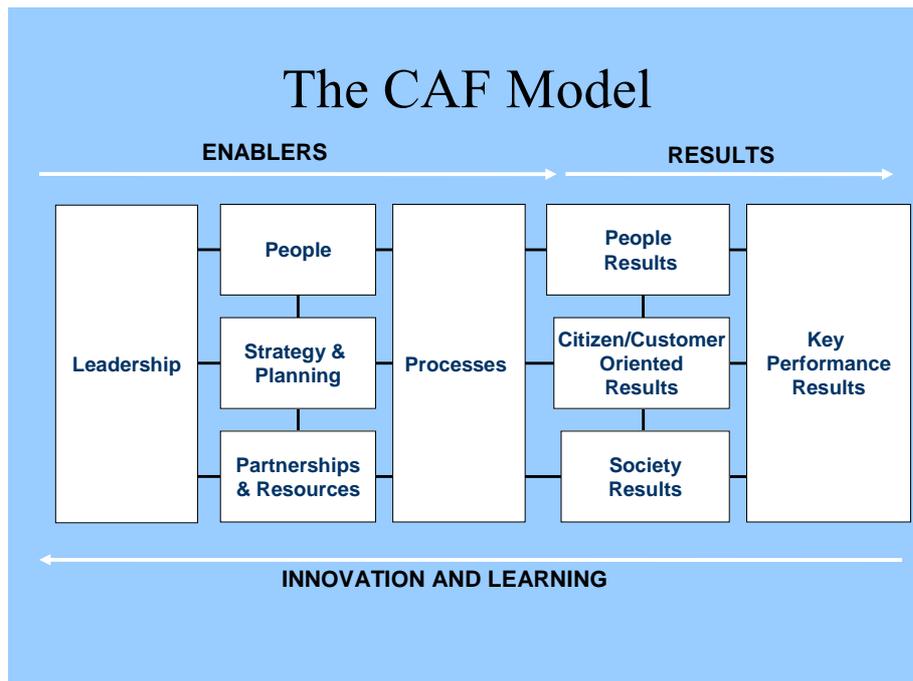
The CAF provides a **self-assessment framework** that is conceptually similar to the major TQM models, EFQM in particular, but which has been specially conceived for public sector organisations, taking into account their differences. The CAF has four main **purposes**:

1. To **introduce** public administrations to the principles of TQM and progressively guide them, through the use and understanding of self-assessment, from the current “Plan-Do” sequence of activities to a fully-fledged “Plan-Do-Check-Act” cycle;
2. To facilitate the **self-assessment** of a public organisation in order to obtain a diagnosis and a definition of improvement actions;

3. To act as a **bridge** across the various models used in quality management, both in public and private sectors;
4. To facilitate **bench learning** between public sector organisations.

A number of components have been worked out in support of these purposes: a structure with nine criteria, 28 sub-criteria with examples, assessment panels for the enablers and results, guidelines for self-assessment, improvement actions and bench learning projects and a glossary.

## Structure



The nine-box structure identifies the main aspects requiring consideration in any organisational analysis. Criteria 1-5 deal with the **Enabler** features of an organisation. These determine what the organisation does and how it approaches its tasks to achieve the desired results. In criteria 6-9, **results** achieved in the fields of citizens/customers, people, society and key performance are measured by perception measurements and internal indicators are evaluated. Each criterion is further broken down into a list of sub-criteria. The **28 sub-criteria** identify the main issues that need to be considered when assessing an organisation. They are illustrated by examples that explain the content of the sub-criteria in more detail and suggest possible areas to address, in order to explore how the administration answers the requirements expressed in the sub-criterion.

### Cross functions inside the model

The holistic approach of TQM and CAF does not simply mean that all aspects of the functioning of an organisation are carefully assessed, but also that all the composing elements have a reciprocal impact on each other. A distinction should be made between

- cause-effect relationship between the left part of the model (the enablers - causes) and the right part (the results - effects), and
- the holistic relationship between the causes (enablers).

Only to the latter can the holistic character be applied.

*Cross connection between the left and right parts of the model:* consists of the cause-effect relationship between the enablers (causes) and the results (effects), as well as the feedback from the latter to the former. Verification of cause-effect links is of fundamental importance in self-assessment, where the assessor should always check for consistency between a given result (or set of homogeneous results) and the “evidence” collected on the relevant criteria and sub-criteria on the enabler side. Such consistency is sometimes difficult to verify, since due to the holistic character of the organisation, the different causes (enablers) interact with each other when producing results. In any case, the existence of appropriate feedback, from results appearing on the right side to the appropriate criteria on the left side, should be checked in the assessment.

*Cross connection between criteria and sub-criteria on the enabler side:* since quality of results is to a large extent determined by the type and intensity of relationships between enablers, this type of relationship *must* be explored in self-assessment. In fact their intensity is very different between different organisations and their nature determines to a large extent the quality of the organisation. Excellent organisations are, for example, characterised by strong interactions between criterion 1 and criteria 2/3/4, and between 3 and 4/5. Relationships are obviously not limited to the criteria level. Quite often substantial interaction/relationships materialise at sub-criterion level.

### **Importance of evidence and measurements**

Self-assessment and improvement of public organisations is very difficult without reliable information across the different functions of the organisation. CAF stimulates public sector organisations to gather and use information, but very often this information is not available at a first self-assessment. This is why CAF is often considered to be a zero base measurement. It indicates the areas in which it is essential to start measuring. The more an administration progresses towards continuous improvement, the more it will systematically and progressively collect and manage information, both internally and externally.

### **Role of the scoring system**

One of the compulsory elements of the CAF is the scoring system. Although the discovery of strengths and areas for improvement and the linked improvement actions are the most important outputs of the self-assessment, organisations sometimes focus too much on scores. Allocating a score to each sub-criterion and criterion of the CAF model has four main aims:

1. to give an indication on the direction to follow for improvement activities;
2. to measure your own progress;
3. to identify Good Practices as indicated by high scoring for Enablers and Results;
4. to help to find valid partners to learn from.

The CAF 2006 provides two ways of scoring. The “classical CAF scoring” and the “fine-tuned CAF scoring”. More information is given in the chapter on scoring.

### **Managerial language and the glossary**

Many public sector organisations using CAF for the first time are confronted with a terminology that can be difficult to access. A background in public management of course helps to overcome this, but some people participating in a CAF self-assessment may not have this background. The glossary at the end of this brochure is there to assist them by providing a more precise definition of the main words and concepts.

Given the nature of “clients” in the public sector however, we wish to define from the start what we understand by citizen/customer. This term is used to emphasise the dual relationship between public administration and

- the users of public services, and
- all the members of the public, who as citizens and taxpayers have a stake in the services provided and their outputs.

## **Adapting CAF to education and training institutions: why?**

CAF was initially conceived to be used in all fields of the public sector in EU. Therefore, it seemed only logical that it would be an interesting tool for the Education sector in general.

The year 2010 was the deadline imposed by the European Education Ministers to finalise the Bologna Process based on the eponym Declaration that triggered the harmonisation of European education in 1999. The Bologna Declaration committed to “promoting European cooperation in quality assurance with a view to developing comparable criteria and methodologies”. The Bergen Declaration (2005) for its part pushed European education forward by wishing “to establish a European Higher Education Area (EHEA) based on the principles of quality and transparency”. The London (2007) and Leuven (2009) declarations (see Annex II) confirm these principles.

In 2008, in different countries, a number of CAF national correspondents and/or Education experts – based on the large (extended) use of the model in the educational sector in a number of Member States and on the subsequent adaptation at the national level by Belgium, Italy and Norway – decided to join forces with a double objective. On the one hand, CAF experts wished to raise the number of CAF users and on the other hand, Education institutions wanted to implement European flavoured quality management that would be learner oriented (see the London Declaration 2007, Annex II). They favour a common European public sector approach that is easily accessible and free of cost.

At European level, the IPSG – EUPAN gave the mandate to a working group<sup>1</sup> to elaborate a tailor-made CAF for the educational sector based on the experiences in Member States. The CAF and Education is intended for all teaching and training institutions, no matter what their level. It ranges from pre-school level to higher education and lifelong learning in Europe.

CAF can be used under a wide range of circumstances (to initiate a quality approach, to improve existing processes, and so on). The fact that it is “citizen customer” oriented corresponds to the wishes of the Education and Training sector.

## **What remains unchanged compared to CAF 2006**

As CAF is a generic tool, the customisation of its use is recommended, but respecting its basic elements is compulsory: the 9 criteria, 28 sub-criteria and the scoring system. Only the examples and the process of self-assessment as described in the guidelines are flexible and it is recommended to take into account the key elements of the guidelines.

This is to maintain the important role of the model to promote a **common culture** among public organisations in the EU, acting as a bridge among different TQM models and tools and enabling bench learning.

## **What’s new:**

- ✓ **Adaptation of the language:** i.e. we use “learners” instead of “citizen customer” and “education and training institutions” instead of public organisations.
- ✓ **Adaptation of the examples:** all the examples are borrowed from the world of education.
- ✓ **Adaptation of terminology:** the glossary has been reviewed.
- ✓ **Integration of two additional documents:** an introduction on the use of TQM models and CAF, as well as on the European policy on Education

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<sup>1</sup> Members of the group were: Belgium, Italy, Luxembourg, Portugal, Norway, Slovakia, Poland, Greece and EIPA

The initiative to start a quality approach using CAF must be based on a clear decision from Leadership consulting all people in the institution. Indeed, both leadership and people may find it unfamiliar and difficult to see the management and the working of their institution going through analysis. It will result in a raised awareness, which can be upsetting, but in the end will turn out to be a positive risk.

In short, self-assessment according to the CAF model provides the education and training institution with a great opportunity of getting to know itself better in terms of building up quality management.

Almost 2000 public organisations have already used the CAF: we know that “CAF works”!

## **Enablers**

Criteria 1 to 5 deal with the Enabler features of an education and training institution. These determine what the institution does and how it approaches its tasks to achieve the desired results. The assessment of actions relating to the Enablers should be based on the Enablers Panel (see CAF scoring and Assessment panels).

## **Criterion 1: Leadership**

### **Definition**

The behaviour of an institution's leaders can help to create clarity and unity of purpose, as well as an environment in which the institution and its people excel. The term « people » denotes all those working in administration, teaching, and in the psycho-medical-social, scientific and technical fields.

Leaders provide direction for the institution. They develop the mission, vision and values required for the institution's long-term success. They motivate and support people in the institution by acting as role models and adopting appropriate behaviours consistent with the values of the institution.

Leaders develop, implement and monitor the institution's management system and review performances and results. They are responsible for improving performance and preparing the future by organising the changes needed for the institution to fulfil its mission.

In the field of education and training, leaders are the main interface between the institution and the political sphere, and it is their role to ensure responsibility-sharing by maintaining a certain degree of synergy. They are also responsible for managing relations with other stakeholders and ensuring that their needs are met.

### **Key implications**

In a representative democracy, it is for elected politicians to make strategic decisions and define objectives to be achieved in various policy areas. The leadership of education and training institutions assist them in policy-making through its input in terms of analysis, horizon-scanning or strategic planning, and is also responsible for policy implementation.

A distinction therefore has to be made within the education and training sector between the role of the political leadership and that of an education and training institution. The CAF focuses on the assessment of the management of the education and training institution, rather than on the « quality » of educational policies.

Besides their own specific values, European education and training institutions share a number of common values such as social and human development through knowledge, consolidation and enhancement of European citizenship, providing access for learners to the skills and capabilities needed to take up the challenges of the new millennium, as well as strengthening the sense of shared values and sense of belonging to a common social and cultural area. Leaders disseminate these values throughout the institution, incorporating them as necessary into codes of conduct to guide people's professional behaviour.

Leaders of an education and training institution create optimal conditions for the institution to adapt itself to the ongoing changes in the society they serve. They do this by seeking out opportunities to innovate and modernise, and by actively integrating electronic administration solutions (*e-Gov*).

Leaders of education and teaching institutions are required to work within allocated resources to achieve their goals and targets. This sometimes calls for balancing the needs of learners, political authorities and other stakeholders. These leaders therefore need to have a clear understanding of the variety of needs to be met and strive to respond to them taking political imperatives into account, thus clearly affirming their commitment to learners as well as other stakeholders.

## **Assessment:**

Consider the evidence of what the institution's leadership is doing to:

1.1. Provide direction for the institution by developing its mission, vision and values.

Examples:

- a. Formulating and developing the mission(s) (what are we aiming to contribute to society?), the vision (who are the learners we are aiming to educate and train?), with the involvement of the stakeholders and people concerned.
- b. Establishing, together with stakeholders, a framework of values incorporating transparency, ethics and the sense of service to society, and translating it in code of conduct.
- c. Strengthening mutual respect and trust between leaders and people (e.g. by ensuring continuity of missions, visions and values).
- d. Communicating mission, vision, values, and strategic and operational objectives to all of the institution's employees, as well as stakeholders.
- e. Reviewing periodically the institution's mission, vision and values to reflect external STEPE (social, technical, economic, political and environmental) changes
- f. Managing conflicts of interest by identifying their potential sources and providing people with guidelines.
- g. Creating conditions for effective communication.

*Award a score using the Enablers Panel*

1.2. Develop and implement a system for the management of the education and teaching institution, and for performance and change

Examples:

- a. Developing, through the use of modern technologies, a system for the management of processes and institutional structures tailored to the institution's strategy and planning, as well as to the needs and expectations of stakeholders.
- b. Defining leadership/managerial responsibilities (organisation flow chart), tasks and areas of expertise.
- c. Setting measurable goals and objectives, in a concerted manner for the whole organisation related to the different missions it has to fulfil.
- d. Setting goals in terms of output (e.g. the number of learners achieving qualifications or graduation) and of outcome targets (e.g. their socio-professional integration), by striking a balance between the needs and expectations of the various stakeholders.
- e. Defining the electronic administration (e-Gov) strategy and aligning it with the strategic and operational objectives of the education and training institution.
- f. Establishing a management information system, including internal monitoring and audits (measurement of goals achieved).
- g. Establishing appropriate frameworks for project management and teamwork.
- h. Adopting and adhering to a base reference standard for total quality management, such as the CAF or EFQM Excellence Model.
- i. Developing a system of measurable strategic and operational objectives throughout the education and training institution (e.g. Balanced Scorecard).
- j. Establishing systems of quality management, e.g. accreditation system, or a certification system, such as ISO 9001-2000 or similar; or a system specific to the education and training institution.
- k. Formalising inter-departmental commitments and cooperation, e.g. service level agreements between administrative and financial services.

- l. Identifying and prioritising changes to be implemented with regard to the methods of management of the institution and its activities.
- m. Communicating change initiatives and the reasons for such changes to employees and stakeholders.

*Award a score using the Enablers Panel.*

### 1.3. Motivate and support people within the institution and act as a role model

Examples:

- a. Setting an example and thus providing leadership that reflects established objectives and values.
- b. Demonstrating personal willingness (by leaders/managers) to embrace change by acting on constructive feedback from others.
- c. Informing the institution's personnel on a regular basis of all matters of interest or concerning the education and teaching institution.
- d. Supporting employees by helping them to carry out their duties and plans in support of the achievement of overall institutional objectives.
- e. Stimulating, encouraging and creating conditions for the delegation of authority, responsibilities and expertise, including accountability (overall and individual empowerment).
- f. Promoting a culture of innovation and improvement by encouraging and helping employees working within the education and training institution to come forward with suggestions and be proactive in their daily tasks.
- g. Recognising and rewarding the efforts of teams and individuals.
- h. Respecting and duly addressing the individual needs and personal circumstances of the institution's employees.
- i. Debating individual performance with people.

*Award a score using the Enablers Panel.*

### 1.4. Manage the relations with politicians and other stakeholders in order to ensure shared responsibility

Examples:

- a. Identifying political decisions impacting on the institution.
- b. Ensuring that goals and objectives are in line with political decisions.
- c. Maintaining proactive and regular contacts with political authorities; reporting to appropriate legislative and executive hierarchies.
- d. Developing and maintaining partnerships and networking with other education and teaching institutions and 'first line' stakeholders (learners, citizens, associations of parents/former students/employees, contacts in the socio-economic, medical and cultural fields, NGOs, interest groups, as well as other corporate, public and official bodies).
- e. Involving political authorities and other stakeholders in defining outputs and the outcomes to be achieved, as well as developing the institution's management system.
- f. Seeking to establish the good reputation, positive image and public recognition and awareness of the education and training institution and the services it provides.
- g. Developing a promotional and communication strategy for products/services geared to stakeholders.
- h. Taking part in the activities of professional associations, representative organisations and interest groups.

*Award a score using the Enablers Panel*

## **Criterion 2: Strategy and planning**

### **Definition**

By effectively combining its interrelated activities, an education and training institution contributes to its overall performance. The institution implements its mission and vision via a clear stakeholder-oriented strategy, aligning public education and teaching policies and objectives on the one hand, and the needs of other stakeholders on the other hand. This strategy is supported by continuously improving management of resources and processes and translated into plans, objectives and measurable targets. Planning and strategy reflects the institution's approach to implementing modernisation and innovation.

### **Key implications**

Strategy and planning is part of the PDCA (Plan, Do, Check, Act), starting by gathering information on the present and future needs of stakeholders and also from outcomes and results, in order to inform the planning process. This includes the use of reliable information, including perception from all stakeholders to inform operational policies, planning and strategic direction. Feedback from an internal review process is also fundamental to producing planned improvements in institutional performance.

Identifying critical success factors - conditions that must be fulfilled to achieve strategic goals - and setting goals plays a crucial part to ensure an effective follow-up and measurement of the results. Goals need to be formulated in such a way that a distinction is made between outputs and outcomes.

Institutions should consistently and critically monitor the implementation of their strategy and planning, and update and adapt them whenever necessary.

### **Assessment:**

Consider evidence of what the institution is doing to:

#### 2.1. Gather information relating to the present and future needs of stakeholders

Examples:

- a. Identifying all stakeholders.
- b. Systematically gathering and analysing information relating to stakeholders, their needs and expectations.
- c. Regularly gathering and analysing information, its source, accuracy and quality. This may include information about important variables such as social, ecological, economic, legal and demographic trends and developments (information concerning the labour market, employment opportunities for graduates relating to type of training, as well as unemployment and under-employment rates where possible).
- d. Systematically analysing risks and opportunities (e.g. SWOT Analysis) and identifying critical success factors through regular assessment of the institution's environment (including political changes).

*Award a score using the Enablers Panel*

## 2.2. Develop, review and update strategy and planning, taking into account the needs of stakeholders and available resources

Examples:

- a. Setting (long- and medium-term) strategic goals and (concrete short-term) operational objectives based on the institution's mission, vision and values, and incorporating them into operational processes and planning.
- b. Involving stakeholders in the process of deploying strategy and planning, review and updating. Prioritising their expectations and needs.
- c. Developing and applying methods to measure, assess and monitor performance at all institutional levels (services, task allocation, organisation chart) to ensure the monitoring of the strategy's implementation.
- d. Evaluating existing tasks in terms of products/services and results, as well as the quality of strategic and operational plans. Ascertaining the degree to which objectives are achieved at all levels and adapting strategy and planning accordingly.
- e. Systematically analysing risks and opportunities (e.g. SWOT Analysis) and identifying critical success factors through regular assessment of the institution's environment (including political changes).
- f. Balancing tasks and resources, and the long- and short-term pressures and needs of stakeholders.
- g. Assessing the need for reorganisation and improvement of strategies and planning methods.
- h. Defining a policy with regard to the relation between education and employment, teaching and research aspects, and their impact on society.
- i. Developing a policy on the impact on society beyond the core business of the education and training mission.

*Award a score using the Enablers Panel*

## 2.3. Implement strategy and planning in the whole institution

Examples:

- a. Translating the institution's strategic and operational objectives into plans and activities and interconnect them with the core processes.
- b. Involving stakeholders in the implementation of strategy and planning.
- c. Translating the organisation's strategic and operational objectives into action plans and tasks for the organisation, its units and individuals.
- d. Developing internal channels for the communication of objectives, plans and tasks throughout the institution (school projects, educational, teaching, social and cultural plans, Quality Charter, etc.).
- e. Developing and applying methods to measure the institution's performance at all levels, i.e. establishing the ratio between resources and outputs (efficiency) and between outputs and outcomes (effectiveness).
- f. Setting up and ensuring monitoring and follow-up by management bodies (Councils, Boards, local consultation bodies, etc.).

*Award a score using the Enablers Panel*

## 2.4. Plan, implement and review modernisation and innovation

Examples:

- a. Creating and instilling a new culture for innovation through training, bench learning and the establishment of conditions for learning experience e.g. learning laboratories, focusing on strategic thinking and planning.

- b. Ensuring systematic monitoring of significant internal drivers for change and external calls for modernisation and innovation. Internal drivers can, for example, include the rate of absenteeism of learners and/or teaching or administrative staff, drop-out rates, actions of complaint from parents and learners. An external driver can be complaints from partners.
- c. Planning of changes to promote modernisation and innovation (e.g. introduction of Internet services) following discussions with stakeholders.
- d. Guaranteeing the deployment of an efficient system of ‘change management’ allowing for progress in innovation to be monitored.
- e. Ensuring and optimising the resources needed to implement programmed changes.
- f. Consulting all partners, including representative associations, about planned changes and their implementation.
- g. Balancing top-down and bottom-up approaches when addressing changes within the institution.
- h. Steering the change process effectively by means of, for example, benchmarking projects and performance comparisons, steering groups, follow-up reports, etc.
- i. Updating the training curricula by keeping up with professional, societal, scientific, academic and other innovations.

*Award a score using the Enablers Panel*

## **Criterion 3: People**

### **Definition**

People are the institution! The way in which people interact with each other and manage the available resources ultimately determines institutional success. Respect, dialogue, empowerment and also providing a safe and healthy environment are fundamental to ensure the commitment and participation of people on the institutional route to excellence. The education and training institution manages, develops and releases the competences and full potentials of its people at individual and institution-wide levels in order to support its strategy and planning and the effective operation of its processes.

### **Key implications**

Criterion 3 assesses whether the institution aligns its strategic objectives with its human resources, so that they are identified, developed, deployed and are taken into account to achieve optimum use and success. Consideration should be given to widening the scope of people management to the advantage of both the institution and its people. People should be assisted to achieve their full potential. Taking care of people's well-being is an important aspect of management.

When education and training institutions create frameworks to allow employees to continually develop their competencies, to assume greater responsibility and to take more initiative, employees contribute to the development of the workplace. This can be achieved by making sure they associate their own performance goals with the strategic objectives of the institution and also by involving them in the establishment of policies related to the recruitment, training, and reward of people.

Finally criterion 3 spotlights the ability of leaders and staff to actively cooperate on developing the institution, breaking down institutional silos, by creating dialogue, making room for creativity, innovation and suggestions for improving performance. This also helps to improve employee satisfaction.

The proper execution of people policies depends upon all leaders and department heads throughout the institution, demonstrating that they care about people issues and they actively promote a culture of open communication and transparency.

Institutions may, in assessing their performance, take account of restrictions on their freedom of action resulting from education and training employment and salary policies, and indicate how they work within these restrictions to optimise the potential of their people.

### **Assessment:**

Consider evidence on what the institution is doing to

3.1. Plan, manage and improve human resources transparently with regard to strategy and planning

#### **Examples**

- a. Regularly analysing current and future human resource needs, taking into account the needs and expectations of stakeholders.
- b. Developing and communicating the human resources management policy based on the strategy and planning of the institution, for example by taking future competencies into account.
- c. Ensuring human resources' capability (recruitment, allocation, development) is available to achieve tasks and balancing them and responsibilities.

- d. Supporting people involved in developing and/or using new technology applications and implementing eGov (for example, providing those employees with the necessary training opportunities, dialogue, support, etc.).
- e. Using job descriptions with regard to recruitment and development plans.
- f. Developing and agreeing on a clear policy containing objective criteria with regard to recruitment, promotion, remuneration, rewards and the assignment of managerial functions.
- g. Ensuring clarity and understanding regarding the recruitment as well as the distribution of tasks and responsibilities e.g. through job descriptions.
- h. Defining managerial and leader skills required in order to establish recruiting profiles.
- i. Managing recruitment and career development with regard to fairness of employment, equal opportunities and diversity aspects (e.g. gender, sexual orientation, disability, age, race and religion), while respecting the educational plan and education and training safety requirements.
- j. Ensuring that conditions are driven towards achieving a reasonable work-life balance for personnel.
- k. Ensuring good environmental working conditions throughout the institution including taking care of health and safety requirements.
- l. Paying particular attention to the needs of disadvantaged employees and people with disabilities.

*Award a score using the Enablers Panel*

### 3.2. Identify, develop and use competencies of staff, aligning individual and institutional goals

Examples

- a. Identifying current competencies at the individual and institutional levels.
- b. Discussing, establishing and communicating a strategy for developing competencies. This includes an overall agreed training plan based on current and future institutional and individual needs (with for example distinctions between mandatory and optional training programmes).
- c. Developing personal training and development plans for all employees in consultation (concerted way).
- d. Developing managerial and leadership skills as well as relational competences of management regarding the people of the organisation, the learners and the partners.
- e. Developing and promoting modern training methods (e.g. multimedia approach, on the job training, e-learning, blended learning, action research ....).
- f. Promoting external and internal mobility of employees.
- g. Planning of training activities and developing communication techniques in the areas of risk, conflict of interest management and codes of conduct.
- h. Assessing the impacts of training and development programmes in relation to the costs of the activities through monitoring, the provision of cost-benefit analyses, the effective communication of training contents to all the institution's people, and measuring the impact on educational practices.

*Award a score using the Enablers Panel*

### 3.3. Involve staff by developing open dialogue and empowerment

Examples

- a. Seeking agreement/consensus between staff and managers on goals and on ways of measuring goal achievement.
- b. Promoting a culture of open communication and dialogue and the encouragement of team working.
- c. Proactively creating an environment for collecting ideas and suggestions from staff and developing appropriate mechanisms (e.g. suggestion schemes, work groups, brainstorming, etc.).

- d. Involving staff and their representatives in the development of plans, strategies, goals, the design of processes and in the identification and implementation of improvement activities.
- e. Regularly conducting staff surveys including publishing results/summaries/interpretations.
- f. Ensuring the staff has an opportunity to give feedback on leadership.
- g. Consulting with the representatives of staff (e.g. Trade Unions).

*Award a score using the Enablers Panel*

## **Criterion 4: Partnerships and resources**

### **Definition**

How the education and training institution plans and manages its key partnerships (especially with learners) in order to support its strategy and planning and the effective operation of its processes. In this way, partnerships are important resources for the proper functioning of the education and training institution.

Next to partnerships, institutions need the more traditional resources – such as finances, technologies and facilities - to ensure their effective functioning. These are used and developed to support the institution's strategy and its most important processes in order to achieve the institution's goals in the most efficient way. Presented in a transparent way, the institution can ensure accountability towards stakeholders concerning the legitimate use of available resources.

### **Key implications**

In a constantly changing society with growing complexity, institutions are required to manage relations with other organisations in both the public and private sector in order to realise their strategic objectives.

Another consequence of this complexity is the need for an increasing active role of citizens/customers as key partners. In the world of education and training, citizens/customers are the learners, or their legal representatives; parents, guardians, etc. The terms « citizens/customers » refer to the citizens' varying role between stakeholder and service-user. In this criterion, CAF focuses on the involvement of citizens in public matters and the development of public policies and on the openness to their needs and expectations.

Public organisations are often subject to constraints and pressures, when managing their resources, over and above those normally encountered in the private sector. The ability of public organisations to generate additional financial resources may be limited as may be its freedom to allocate, or reallocate, its funds to the services it wishes to deliver. It is therefore critical that they measure the efficiency and effectiveness of the services they are expected to deliver. Full financial management, internal control and accountancy systems are the basis for sound cost accounting. Although public organisations often have little say in resource allocation, demonstrating the organisations' ability to deliver more and improved services for less cost creates the opportunity for more innovative services or products to be introduced more quickly.

It is important to identify the institution's knowledge and information requirements and these should feed on the strategy and planning process review. The institution should make sure that appropriate knowledge and information is made available promptly and in easily accessible formats to enable employees to do their jobs effectively.

The institution should also ensure that it shares critical information and knowledge with key partners and other stakeholders according to their needs.

## **Assessment:**

Consider evidence on what the institution is doing to:

### 4.1. Develop and implement key partnership relations

Examples:

- a. Identifying major potential strategic partners and the nature of their relationship with the institution, e.g. purchaser/supplier, co-production (partnerships between institutions and companies, between institutions and public administrations, between institutions, twinning between European or other institutions, mobility programmes, regional, national and European exchanges, etc.).
- b. Establishing appropriate partnership agreements, taking into account the nature of the cooperation and its content.
- c. Defining the management tasks and responsibilities of partnerships, including control and assessment functions.
- d. Regularly monitoring and assessing processes, results and general partnership involvement therein.
- e. Encouraging and organising partnerships to undertake specific tasks, as well as developing projects together with other public sector institutions and organisations.
- f. Organising personnel exchanges with partners.
- g. Stimulating activities in the area of corporate social responsibility.
- h. Implementing and stimulating the creation of partnerships between faculties/sections/departments/levels/cycles/categories/streams.
- i. Developing multi-faceted partnerships by using current corporate and societal resources contributing to educational processes of learners and trainers in an overall learning perspective. This includes social, psychological and medical assistance services, general public welfare, associations fighting drop-outs, police services, prevention and safety departments, citizens' advice bureaus, cultural and sports associations, etc.

*Award a score using the Enablers Panel*

### 4.2. Develop and implement partnerships with learners

Examples:

- a. Ensuring a proactive information policy (concerning how the institution is run, the powers and jurisdiction of the various internal and external authorities, general organisation of the institution, the processes - proceedings and deliberations, appeals procedures, meetings of class representatives, etc.).
- b. Actively encouraging learners to organise themselves, express their needs and requirements, and to support their association representatives.
- c. Encouraging the involvement of learners or their legal representatives in plans of action relating to the institution's management and in decision-making processes.
- d. Being open to ideas, suggestions and complaints of learners. Developing and using appropriate mechanisms to collect them (e.g. by means of survey, consultation groups, questionnaires, complaint boxes, opinion polls, etc). Processing this information and disseminating the results.
- e. Ensuring transparency of the institution, as well as its decisions and development (e.g. by publishing annual reports, holding press conferences and posting information on the Internet).

*Award a score using the Enablers Panel*

### 4.3 Manage finances

Examples:

- a. Ensure that the financial resources are used in the best possible way according to strategy and planning.
- b. Ensuring financial and budgetary transparency.
- c. Ensuring the cost efficient management of financial resources and making investment and financial control decisions based on cost-benefit analyses.
- d. Introducing innovative systems of budgetary planning (e.g. multi-annual budgets, budgets by programmes, budgets incorporating gender and men/women equality dimension).
- e. Analysing the risks and potential outcomes of financial decisions.
- f. Regularly monitoring the costs of the training courses and services provided by the institution, including staff costs, involving all the people responsible for the service delivery.
- g. Delegating and decentralising financial responsibilities and balancing them with the central controlling.
- h. Developing and introducing modern and efficient financial control systems (e.g. internal audits, etc.) and promoting book-keeping and accounting transparency for all personnel.
- i. Strategically using the information from an analytical, financial and cost accounting system; pursuing transparency in the financial management.
- j. Breaking down of cost allocation.
- k. Introducing comparative analyses (e.g. benchmarking) of the costs in relation to other institutions and/or organisations.
- l. Including non-financial performance data (efficiency and effectiveness) in budget documents.
- m. Extent to which financial management tries to adapt budget cycles to calendar year/academic year.

*Award a score using the Enablers Panel*

### 4.4 Manage information and knowledge

Examples:

- a. Developing a system of processes for the management, storage and assessment of information and knowledge within the institution in accordance with strategic and operational objectives.
- b. Ensuring that externally available relevant information is collected, processed and used effectively.
- c. Capitalising, in as far as possible, on the information and knowledge of personnel leaving the institution.
- d. At all times monitoring the institution's information and knowledge by ensuring the relevance, accuracy and reliability thereof, while cross-referencing with strategic planning requirements and the current and future needs of stakeholders.
- e. Giving all the people in the institution access to necessary information and knowledge (educational materials, ongoing training-related aids and data, etc.), including those concerning internal changes and process improvements, according to their tasks/work assignment by developing internal channels such as intranet, newsletters, bulletins, digital campus, virtual school, etc., to all people in the institution.
- f. Ensuring access to and exchange of reliable and relevant information with all stakeholders, presenting information and data in a user-friendly way.

*Award a score using the Enablers Panel*

### 4.5 Manage technology

Examples:

- a. Run a technology management policy in accordance with the strategic and operational objectives.

- b. Use technology efficiently for:
  - i. task management
  - ii. knowledge management
  - iii. learning and improvement activities
  - iv. interaction with stakeholders and partners
  - v. development and maintenance of internal and external networks
  - vi. financial management
- c. Being considerate of general technological progress and implementing relevant innovations.

*Award a score using the Enablers Panel*

#### 4.6 Manage facilities

Examples:

- a. Balancing the efficiency and appropriateness of the infrastructure with the needs and expectations of learners (e.g. centralisation versus decentralisation of buildings, allocation of premises, reorganisation of courses, accessibility by public transport, etc.).
- b. Ensuring safe, cost-efficient and ergonomic use of premises (e.g. open-plan or individual offices, mobile offices, laboratories, workshops, etc.), as well as technical equipment and facilities (e.g. number of personal computers, photocopiers, overhead projectors, etc. by department), with due consideration to strategic and operational objectives, individual needs of personnel, local culture, physical constraints and so on.
- c. Guaranteeing the efficient and effective utilisation of the building, equipment, in particular technological equipment and supplies, taking the strategic and operational objectives, the individual needs of learners, parents, personnel and other users as well as local culture and prevailing physical restrictions consideration into account.
- d. Ensuring effective, efficient and sustainable use of transport and energy resources.
- e. Guaranteeing accessibility of premises to meet the (specific) needs and expectations of personnel, learners and other users (e.g. toilet facilities, car parking or public transport amenities for disabled persons).
- f. Guaranteeing and monitoring the effective maintenance of buildings, equipment and facilities with respect for environmental norms and greater cost efficiency and effectiveness.
- g. Developing an integrated policy for managing physical assets, including their safe recycling/disposal, e.g. by direct management or subcontracting.

*Award a score using the Enablers Panel*

## Criterion 5: Processes

### Definition

How the institution identifies, manages, improves and develops its key processes in order to support strategy and planning. Innovation and the need to generate increasing value for its learners and other stakeholders are two of the main drivers in process development.

### Key implications

Each institution that performs well is run by many processes, each process being a set of consecutive activities that transform resources or inputs into results or outputs and outcomes, thereby adding value. These processes can be of a different nature:

- **The core processes** are those relating to the mission and purpose of the institution and are critical to the delivery of products and services.
- **Management processes** steer the institution
- **Support processes** deliver the necessary resources.

Only the most important of these processes, the *key processes*, are the object of the assessment in the CAF. A key to the identification, evaluation and improvement of key processes is how effectively they contribute to achieving the mission of the education and training institution.

Involving learners and other stakeholders in the different stages of process management and taking into account their expectations contributes to the overall quality and reliability of its processes.

In the field of education and training, examples of products and services include: qualifications, such as certificates and diplomas, national and international conferences, ongoing training programmes, libraries and infrastructures open to the general public. The main result for an education and training institution is an individual who has acquired competences and skills – possibly certified ones - and who is able to find employment and integrate into society – as well as to go on training through *lifelong learning* and self-development. In order to fulfil this mission (strategic plan), education and training institutions need to implement a number of *key processes*, including:

#### a) ‘Core’ processes:

- The **education and training** process (structures, programmes, methods, contents, on-the-job training and apprenticeships, assessments, individual projects, etc.).
- The **civic** process (attitudes, values, citizenship, participation, etc.).
- The **research and development** and **applied research** processes (extension of study work, use of the institution’s quality assessments, basic research, etc.).

#### b) ‘Support’ processes:

- The **external communication** process (advertising, shows and exhibitions, open day events, websites, information media, etc.)
- The **staff recruitment process** (selection, retention and skills development, etc.)
- The **administrative management** process (registration, enrolment, file and records management, organisation of courses etc.)
- The **career guidance and support** process;
- The budgeting process

**c) ‘Management’ processes:**

- The institution **steering** processes
- The **measurement** or **assessment** processes for the various stages of the core and support processes
- The **decision-making** processes.

Monitoring how cross-functions of these various processes are important in order to maintain an overall and integrated vision of the institution’s functioning and operation.

Some management and support processes are not always key processes, except in times of crisis or emergency (e.g. violence control and prevention measures, budget preparation, restructuring, etc.). In the case of support services (resources management), identifying key processes will depend on how they contribute to the achievement of the institution’s core processes and its strategy.

In all cases, an institution needs to be able to identify the key processes, which it performs in order to deliver its expected outputs and outcomes, considering the expectations of learners and other stakeholders.

The role of learners could operate at three levels:

1. The involvement of representative learners, associations or ad hoc panels of citizens (e.g. students’ councils, associations of former students, etc.), in the design of the institution’s products and services;
2. Collaboration with learners concerning the implementation of services and products (sponsorship, tutoring, mentoring, etc.);
3. Empowerment of learners in order to realise or access services and products themselves, once they have achieved the necessary degree of autonomy (e.g. outsourcing of certain services to other institutions and organisations, private or public corporations, presentations, seminars led by experts, etc.).

Taking learners’ personal needs into account, calls for the implementation of complex cross-functional training processes at local, national, European and international level (crossovers, equivalence, ECTS, Erasmus...). It is vital to successfully integrate the management of such processes, since integration the effectiveness and efficiency of processes greatly depend on that. To that aim, well experimented forms of institutional integration should be pursued, such as the creation of cross functional process management teams with the appointment of team leaders.

In the light of ever-changing learner profiles, teaching and training methods, innovation and new technologies, it is essential that processes are reviewed on a regular basis. In order to take advantage of potential improvements, education and training institutions need to ensure that they have mechanisms in place to enable them to receive feedback from all stakeholders on product and service enhancement.

**Assessment:**

Consider evidence on what the institution is doing to:

5.1. Identify, design, manage and improve processes on an ongoing basis:

Examples:

- a. Identifying, mapping and documenting key processes of the institution on an ongoing basis, ensuring key processes support strategic objectives/aims.
- b. Identifying process owners and assigning responsibilities to them.
- c. Involving employees and other external stakeholders in the design and development of key processes

- d. Allocating resources to processes based on the relative importance of their relevance to the strategic goals of the institution.
- e. Gathering, recording and applying legal requirements and other regulations relevant to the institution's processes, analysing them and making proposals to the authorities to simplify them.
- f. Implementing process indicators and setting learner-oriented performance goals.
- g. Co-ordinating and governing the interaction of processes.
- h. Monitoring and evaluating impacts of net services / e.gov on the institutions' processes (e.g. efficiency, quality, and effectiveness).
- i. Continuously improving and adapting processes together with relevant stakeholders on the basis of their measured efficiency, effectiveness and results (outputs and outcomes).
- j. Analysing and evaluating key processes, risks and critical success factors taking the objectives of the institution and its changing environment into consideration.
- k. Identifying, designing and implementing process improvements of services for learners, e.g. leading to one-stop-principle services (contact person, talking partner or 'one-stop shop' contacts) and communicating these to stakeholders.
- l. Measuring and assessing the effectiveness of changes made to processes and conducting a bench learning exercise with a view to optimisation.

*Award a score using the Enablers Panel*

## 5.2. Develop and deliver learner/stakeholder-oriented services and products

Examples:

- a. Involving learners and other stakeholders in the design and improvement of services and products (e.g. by means of surveys, feedback, focus groups, inquiries concerning the suitability of services or products and whether they are effective taking into account gender and diversity aspects).
- b. Involving learners and other stakeholders in the development of quality standards for services, products and information.
- c. Developing clear guidelines and regulations to inform the learners and stakeholders in a plain and easily understandable language.
- d. Involving learners and other relevant stakeholders in the design and development of information sources and channels.
- e. Ensuring the availability of appropriate and reliable information with an aim to assist and support learners and other relevant stakeholders.
- f. Promoting accessibility of the institution (e.g. flexible opening hours, documents available in a variety of formats e.g. appropriate languages, Internet, posters, brochures, Braille).
- g. Promoting electronic communication and interaction with learners and other stakeholders.
- h. Introducing functional systems for complaint management and enquiry processing.
- i. Providing learners with career and lifelong learning guidance and discussing options with them.
- j. Being proactive in integrating and enhancing all skills and competences acquired (personal and professional).
- k. Assessing and improving the suitability of the services to the learners and other relevant stakeholders through systematic surveys.

*Award a score using the Enablers Panel*

## 5.3. Innovate processes involving citizens/customers

Examples:

- a. Observing practices and methods of other local, national and international institutions that are likely to inspire the introduction of innovative changes.

- b. Involving stakeholders in innovation (e.g. by piloting new electronic administration services and solutions such as virtual schooling, e-campus, e-learning, etc.).
- c. Providing the resources needed for innovation.
- d. Identifying, understanding and overcoming the obstacles for modernisation and renewal.

*Award a score using the Enablers Panel*

## **Results**

From criterion 6 onwards, the focus of the assessment shifts from Enablers to Results. In the results criteria we measure perceptions: what our people, citizens/customers (learners) and society think of the institution. We also have internal performance indicators which show how well we are doing against the targets we may have set for ourselves – the outcomes. The assessment of results requires a different set of responses, so the responses from this point onwards are based on the Results Assessment Panel (see CAF scoring and assessment panels).

## **Criterion 6: Citizen/customer-oriented results**

### **Definition**

The results the institution is achieving in relation to the satisfaction of its citizens/customers - learners and other stakeholders for an education and training institution - with the institution and the products/services it provides.

### **Key implications**

Education and training institutions can have a complex relationship with the public. In some cases, it can be characterised as a customer relationship whereby learners are the beneficiaries of education and training services, which must satisfy them. In other cases, it is characterised by a citizen relationship, since the education and training institution defines a framework within which learning is transmitted to members of society (with compulsory schooling up to the age of 18, ideally and ultimately leading to socio-professional integration, transmission of values, etc.). Since the two cases are not always clearly separable, this complex relationship will be described as a citizens/customers relationship. In the field of education and training, we use the term « learner » bearing in mind the duality of this relationship. In the case of education and training institutions, the concept of « citizen/customer » embraces learners as well as the other stakeholders (parents, employers, different cycles, higher levels).

Education and training institutions deliver services according to local and/or central government policy (sometimes inside different networks and under different organising authorities), and are accountable for their performance to political stakeholders. Performance against statutory requirements is key performances results (criterion 9). Learners' and other stakeholders' satisfaction measurements are normally based on areas that have been identified as important by learner groups and are based on what the institution is able to improve within its specific area of service.

It is important for all education and training institutions to directly measure the satisfaction of their learners and other stakeholders with regard for example to:

- the overall image of the institution,
- the level of academic qualifications and attainments,
- the matching of qualification profiles to the requirements of educational and socio-economic environments,
- the quality of education and training processes,
- the institution's transparency,
- the involvement of learners and other stakeholders,
- etc.

The institutions typically use questionnaires or survey to record levels of satisfaction, but they may also use other complementary tools such as focus groups or user panels.

Assessment: Consider which results the institution has achieved to meet the needs and expectations of learners and other stakeholders, through:

#### 6.1. Results of citizen/customer satisfaction measurements

Examples:

- a. Results regarding the overall image of the education and training institution (e.g. its reputation, levels of requirements, clarity of information, conviviality, attitude of teaching staff, openness, willingness to listen and offer guidance, etc.).
- b. Results regarding the involvement and participation of learners and other stakeholders in the running and decision-making of the institution.

- c. Results regarding accessibility (e.g. ease of access to various departments, opening and waiting times for administrative services, accessibility and amenities for disabled persons, access to information, and cost of services).
- d. Results regarding the transparency of regulations and assessment processes (transparency of deliberations and decision-making processes, formal educational partnership between teachers and learners, internal communication, etc.).
- e. Results regarding levels of qualifications and attainments (acquired competences), matching of profiles to current requirements and quality of teaching/training processes (e.g. educational innovations, teaching approach, differentiating instruction, coherence of information, transparency of didactic objectives and assessment criteria, professional guidance towards learners (re-orientation); quality of preparation for the future career, extra lessons for weak students, personalised teaching for students with special needs and for socially disadvantaged learners.
- f. Results regarding the quality of supporting services such as libraries or restaurants, facilities, buildings and equipment, ICT equipment, etc.
- g. Results regarding whether learners indeed receive the information they need.
- h. The institution's ability of innovating and improving itself.

*Award a score using the Results Panel*

## 6.2. Indicators of citizen/customer-oriented measurements

Examples:

Indicators regarding the overall image of the institution

- a. Number and processing time of complaints.
- b. Extent of public trust towards the institution (e.g. learner loyalty, population growth, number of learners taken on by employers, etc.).
- c. Waiting times at the secretariat and in other departments.
- d. Document management and processing times (certificates, files and records, student cards, etc.).
- e. Importance given to training of staff to improve professional competences and convivial communication with learners and other stakeholders (number of days, budget, planning etc).
- f. Indicators of complying with diversity and gender aspect (e.g. certain male/female-oriented courses, diversity in international mobility, organisation of timetables, involvement in panels and councils, etc.) and with cultural and social diversity of both teaching/training staff and learners.
- g. Number of ombudsman interventions - in case this service exists.
- h. Opportunities to pass to higher levels, to obtain social advancement, integration of the process of upgrading benefits.

Indicators regarding involvement

- i. Extent of involvement of learners and other stakeholders in the design and content of training courses and/or design of decision-making processes.
- j. Number of suggestions received and adopted.
- k. Implementation and extent of use of new and innovative ways in dealing with learners and other stakeholders.

Indicators regarding accessibility of the institution

- l. Opening and waiting times in various departments, cost of services, quantity and quality of accessible information, website, and importance given to access and amenities, etc.

Indicators regarding transparency of processes

- m. Number of complaints and successful appeals,
- n. Number and efficiency of information channels.

Indicators regarding levels of qualifications and attainments

- o. Number of learners reaching higher education levels,
- p. Success rates for on-the-job training/work experience placements,
- q. Rates of employment after training,
- r. Number of learners that continue their life-long-learning process.

Indicators regarding teaching/training activities and other services

- s. Compliance with published service standards (e.g. social and cultural projects, educational projects, quality charter, ICT use charter, etc.).

*Award a score using the Results Panel*

## Criterion 7: People results

### Definition

The results the education and training institution is achieving in relation to the competence, motivation, satisfaction and performance of its people. The terms "people", "staff" or "employees" denote all administrative employees, teaching/training staff and workers in the psycho-social-medical, scientific and technical fields.

### Key implications

This criterion addresses the satisfaction of all the people in the institution. Institutions typically use people surveys to record satisfaction, but they may also use other complementary tools such as focus groups, appraisals or exit interviews. They may also examine the performance of people and the level of skills development.

Sometimes external constraints may limit the institution's freedom in this area. The constraints and how the institution overcomes or influences constraints should therefore be clearly presented.

It is important for all kinds of education and training institutions to directly record people results concerning the employees' image of the institution and its mission, the working environment, the institution's leadership and management systems, career development, the development of personal skills and the products and services the institution provides.

Education and training institutions should have a range of internal people-related performance indicators through which they can measure the results they achieve in relation to targets and expectations in the areas of people overall satisfaction, their performance, the development of skills, their motivation and their level of involvement in the institution.

**Assessment:** Consider what results the institution has achieved to meet the needs and expectations of learners and other stakeholders, through:

7.1 Results regarding the people's overall satisfaction with:

Examples:

- a. The overall performance of the institution.
- b. The image of the institution (self-perception).
- c. The image of the institution as seen by society, learners and other stakeholders.
- d. The level of personnel's awareness of potential conflicts of interest (e.g. attitude of a member of staff teaching a member of his/her own family) and ethical considerations (regard for intellectual property).
- e. The level of people involvement in the institution and its mission.

Results regarding satisfaction with leadership and management systems:

- f. The leadership's ability to steer the institution (e.g. setting goals, allocating resources) and communication.
- g. Rewarding individual and teamwork efforts.
- h. The institution's approach to innovation.

Results regarding satisfaction with working conditions:

- i. The working atmosphere (e.g. how to deal with conflicts, grievances or personal problems) and general culture of the institution (e.g. how to deal with and encourage exchange between various departments, categories, faculties, etc.).

- j. The approach to social issues (e.g. work time flexibility, work/ life balance, health, working place comfort).
- k. The handling of equal opportunities and fairness of treatment and behaviour in the institution.

Results regarding motivation and satisfaction with career and skills development:

- l. The leadership's ability to promote a human resources management strategy, to encourage systematic development of skills and aptitudes, and to promote personnel awareness and understanding of the institution's goals and objectives.
- m. Results regarding people's willingness to accept changes.
- n. Extent of employees' involvement in the institution's extra-curricular activities.

*Award a score using the Results Panel*

## 7.2. Indicators of people results

Examples:

- a. Indicators regarding satisfaction (e.g. levels of absenteeism or sickness, rates of staff turnover, number of complaints, time to deal with the complaints).
- b. Indicators regarding performance (e.g. employees' appraisal results, assessment of training activities, etc).
- c. Degree of use of ICT technologies by people.
- d. Skills development-related indicators (e.g. training activities participation and success rates, efficient use of training budgets).
- e. Evidence on the ability to deal with learners and other stakeholders and to respond to their needs (e.g. number of meetings and polls or surveys each year, etc.).
- f. Degree of employee rotation inside the institution (internal mobility).
- g. Indicators regarding motivation and involvement (e.g. response rates to staff surveys, number of proposals for innovation, participation in internal discussion groups).
- h. Frequency of recognition of individual and teamwork efforts.
- i. Number of reported possible conflict of interest cases and/or unethical behaviour.
- j. Measurement of appropriate information comprehension by employees (e.g. frequency of consultation of personal records and pigeon-holes, bulletin boards, e-mail inbox/outbox, number of acknowledgments of receipt of emails when relevant, etc.).

*Award a score using the Results Panel*

## **Criterion 8: Society results**

### **Definition**

The results education and training are achieving in satisfying the needs and the expectations of the local, national and international community. This may include the perception of the institution's approach and contribution to quality of life, the environment and preservation of global resources, and the institutions' own internal measures of its effectiveness in contributing to society.

### **Key implications**

Education and training institutions have an impact on society by the very nature of their primary business or statutory mandate, and the outputs of these core activities will affect direct and indirect beneficiaries. The analysis of the immediate effects on beneficiaries should be presented under criterion 6 (learners and other stakeholders satisfaction) and criterion 9 (key performance results).

Criterion 8 will measure the intended or unintended impacts on society, i.e. the global effects of the institution's policies beyond its primary missions/ statutory mandate or core activities. In this direction, the analysis will consider the impacts derived from planned objectives, as well as unintended consequences, i.e. side effects which may have positive and/or negative effects on society.

The measures cover both qualitative measures of perceptions and quantitative indicators.

They can be related to:

- economic impact
- social dimension, e.g. disabled people
- quality of life
- impact on the environment
- quality of democracy
- etc.

### **Assessment:**

Consider what the institution has achieved in respect of impact on society, with reference to:

#### 8.1. Results of societal measurements perceived by the stakeholders

Examples:

- a. Public awareness of how the education and training institution's achievements impact on the quality of life of citizens/customers: e.g. health education, support of sports and cultural events, participation in humanitarian aid actions, providing meals in the restaurant for the needy, supply of products and services to vulnerable social categories such as senior citizens, cultural events open to the public). Other examples of impact on the quality of life include mobility, road traffic, public transport, cyclist and pedestrian accessibility.
- b. The general reputation of the institution (e.g. as an employer or contributor to society locally or more generally).
- c. Economic spins-offs for society at local, regional, national and international level (e.g. creation of neighbourhood businesses such as snack bars, copy shops, book stores, newsagents and stationers, etc.).
- d. The approach to environmental issues (e.g. carbon footprint perception, energy savings, protection against noise and air pollution, etc.).
- e. The environmental impact on society at local, regional, national and international level (waste and toxic waste management, selective sorting, recycling, etc.).

- f. The impact on society in terms of sustainable development at local, regional, national and international level (purchasing of fair trade goods, recycled or recyclable products, use and/or production of renewable energy, etc.).
- g. The impact on society taking account of the quality of citizens' participation in local, regional, national and international democratic life (organisation of open conferences on complex political issues, visits to former concentration camps, etc.).
- h. Public opinion as to the openness and transparency of the institution.
- i. The ethical behaviour of the institution (guaranteeing access to training for all with due regard for social, economic, ethnical or cultural differences and individual circumstances).
- j. Involvement in the institution's local community (e.g. financial or other support for cultural and social events and activities, etc.).
- k. The tone of media coverage received.
- l. Level of adaptation of the school to changes in the social/technological/economical/political environment e.g. changes in waste collection, increasing number of migrants.

*Award a score using the Results Panel*

## 8.2. Indicators of societal performance established by the organisation

Examples:

- a. Number of relations with local authorities, community groups and representatives.
- b. The amount of media coverage received (frequency, scope and content).
- c. Dedicated support to socially disadvantaged citizens (estimated cost of aid, number of beneficiaries).
- d. Number/types of actions/campaigns to promote the integration and acceptance of ethnic minorities (organisation of specific ethnic events, etc.).
- e. Support for international development projects.
- f. Support for the civic commitment of learners, other stakeholders and personnel (number of voluntary charitable or commemorative projects, etc.).
- g. Productive exchange of knowledge and information with others (number of open conferences organised, number of interventions in national or international seminars, appraisal or consultancy services to businesses and companies, participation in selection boards or panels within administrations).
- h. Programmes to prevent learners, citizens/customers and employees from health risks and accidents (number/types of screening and nutritional education programmes, as well as number of beneficiaries and quality/cost ratio).
- i. Institution activities to preserve and sustain the resources (e.g. degree of compliance with environmental standards, use of recycled materials, use of environmentally-friendly modes of transport, reduction nuisance, harms and noise, reduction in use of utilities e.g. water, electricity, gas).

*Award a score using the Results Panel*

## Criterion 9: Key performance results

### Definition

The results the education and teaching institution is achieving with regard to its strategy and planning related to the needs and demands of the different stakeholders (external results); and the results the institution has achieved in relation to its management and improvement (internal results).

### Key implications

Key performance results relate to whatever the institution has determined as essential, measurable achievements for the success of the institution in the short and long term.

They represent the capacity of policies and processes to reach goals and objectives as defined in the institution's strategic plan.

Key performance results can be divided into:

1. External results: the measures of the effectiveness of policies and services/products in terms of capacity to improve condition of direct beneficiaries: the achievement of key activities' goals (see criterion 5) in terms of outputs (services and products) and outcomes (results). The « product/output » of an education and training institution can be the learner graduating, and the « result/outcome » his/her socio-professional integration (effectiveness);
2. Internal results: the measures of the internal functioning of the institution: its management, improvement and financial performance (efficiency and economy).

These measures are likely to be closely linked to policy and strategy (criterion 2), partnerships and resources (criterion 4) and processes (criterion 5).

### Assessment:

Consider the evidence (i.e. via indicators) of defined goals achieved by the education and teaching institution in relation to:

#### 9.1. External results: outputs and outcomes to goals

Examples:

- a. Effectiveness: the extent to which goals are achieved in terms of output (delivery of products or services (in education and training, it would be the relation between the number of students initially enrolled and the number of students finally graduating).
- b. Improved quality of service or product delivery with respect to measurement results. Examples refer to: rate of students who are not allowed to the final exam; rate of admission/failure to the following class; number of personalised teaching activities; inclusion of disadvantaged students; activities to give full value to excellence; results of international comparisons.
- c. Results of assessments of learners' levels of competence (from European Credit Transfer System to European Credit Transfer in Vocational Education and Training, PISA<sup>2</sup>)
- d. The results of inspections and audits.
- e. The results of participation in competitions, quality awards and quality management system certification (excellence awards, ISO, SeQuALs, Proza, EQUIS, etc).
- f. The results of comparative analyses – benchmarking, i.e. positioning of the institution compared with others.

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<sup>2</sup> PISA: OECD Programme for International Student Assessment [www.pisa.oecd.org](http://www.pisa.oecd.org)

- g. The results of comparative analyses - bench learning, i.e. degree of impact of the integration of good practices on the external results.
- h. Cost effectiveness: the external results (outcomes) achieved at the lowest possible cost (overall cost for the number of graduates employed into the socio-professional world in their chosen field, as compared with the number of graduates seeking employment or are employed in a professional sector other than the chosen field).
- i. The institution's effectiveness in integrating learners into the next educational level or the socio-economic world.

*Award a score using the Results Panel*

## 9.2. Internal results

Results in the field of management and innovation

Examples:

- a. Efficiency in achieving the institution's objectives with the resources available (the cost per learner graduating).
- b. Evidence of all stakeholders' involvement in the institution (levels of participation in the institution's activities).
- c. The results achieved in terms of building partnerships and joint activities (number of partnerships with external organisations, number of innovative solutions derived from partnerships; number of improvement activities performed with partners; improvement regarding supplier performances; savings derived from partnerships and shared activities).
- d. Evidence of the ability to meet and balance the needs of all stakeholders (social harmony: number of disputes between stakeholders, number of mediator interventions).
- e. Evidence of success in improving and innovating institutional strategies, structures and/or processes (positive trend in the number of appeals, reduced number of complaints, increased efficiency).
- f. Evidence of improved use of ITC in managing internal knowledge and/or in internal and external communication and networking (ratio of number of PCs/number of users to number of hours of use per PC, trend in satisfaction levels according to polls and surveys, etc.).
- g. The results of inspections and audits (intermediate checks per training year, internal quality commission, external expert appraisals, etc.).
- h. Training offered about process-related performance i.e. intermediate success rates at each step of a training curriculum.

*Award a score using the Results Panel*

Financial results

- i. The extent to which budgets and financial targets are met.
- j. The extent to which the institution relies on its own resources and income from fees, as well as proceeds of the sale of services/products (hairdressing, woodwork, bakery, etc.).
- k. Evidence of the ability to satisfy and balance the financial interests of all stakeholders.
- l. Ensuring sound financial risk management (presence of a legal adviser, ensuring availability of resources for the required teaching/training hours, etc.).
- m. The results of financial inspections and audits.
- n. The results of comparative analyses - bench learning or internal benchmarking i.e. degree of impact of the integration of good practices on the internal results.

*Award a score using the Results Panel*

## CAF Scoring and Assessment panels

### Why score?

Allocating a score to each sub-criterion of the CAF model has 4 main aims:

1. to provide information and give an indication on the direction to follow for improvement activities.
2. to measure your own progress, if you carry out CAF assessments regularly, each year or every two years, considered to be good practice according to most Quality approaches.
3. to identify Good Practices as indicated by high scoring for Enablers and Results. High scoring of Results are usually an indication of the existence of Good Practices in the Enablers field.
4. to help to find valid partners to learn from (Benchmarking: How we compare; and Bench learning: What we learn from each other).

With regard to bench learning however, it should be noted that comparing CAF scores has limited value and carries a risk, particularly if it is done without experienced external assessors trained to validate the scores in a homogeneous way in different public organisations. The main aim of bench learning is to compare the different ways of managing the enablers and achieving results. The scores, if validated, can be a starting point in this regard. That is how bench learning can contribute to improvement.

### How to score?

New in the CAF 2006 is that it provides two ways of scoring. The “classical” CAF scoring is the updated version of the CAF 2002 assessment panels. The “fine-tuned” CAF scoring is suitable for organisations that wish to reflect in more detail the analysis of the sub-criteria. It allows you to score – for each sub-criterion - all phases of the Plan Do Check Act (PDCA) cycle simultaneously.

The PDCA-cycle is the fundament of both ways of scoring.

#### 1. CAF classical scoring

This cumulative way of scoring helps the organisation to become more acquainted with the PCDA-cycle and directs it more positively towards a quality approach.

The scores as defined in the CAF 2002 version are presented in the column “level 2002”.

In the enablers assessment panel the PDCA phase is in place only when bench learning activities are part of the continuous improvement cycle.

In the results assessment panel a distinction is made between the trend of the results and the achievement of the targets.

## Assessment panels 1

Phase	ENABLERS PANEL 1	Score
	We are not active in this field We have no information or very anecdotal.	0 – 10
PLAN	We have a plan to do this.	11 – 30
DO	We are implementing/doing this.	31-50
CHECK	We check/review if we do the right things in the right way.	51-70
ACT	On the basis of checking/reviews we adjust if necessary.	71-90
PDCA	Everything we do, we plan, implement, check and adjust regularly and we learn from others. We are in a continuous improvement cycle on this issue.	91-100

### Instructions:

- Choose the level that you have reached: Plan, Do, Check or Act. This way of scoring is cumulative: you need to have accomplished a phase (e.g.: Check) before reaching the next phase (e.g.: Act).
- Give a score between 0 and 100 according to the level that you have reached inside the phase. The scale on 100 allows you to specify the degree of deployment and implementation of the approach.

\* \* \*

RESULTS PANEL 1	Score
No results are measured and/or no information is available.	0 – 10
Results are measured and show negative trends and/or results do not meet relevant targets.	11 – 30
Results show flat trends and/or some relevant targets are met.	31-50
Results show improving trends and/or most of the relevant targets are met.	51-70
Results show substantial progress and/or all the relevant targets are met.	71-90
Excellent and sustained results are achieved. All the relevant targets are met. Positive comparisons with relevant organisations for all the key results are made.	91-100

### Instructions:

- Give a score between 0 and 100 for each sub-criterion on a scale divided in 6 levels.
- For each level, you can take into account either the trend, either the achievement of the target or both.

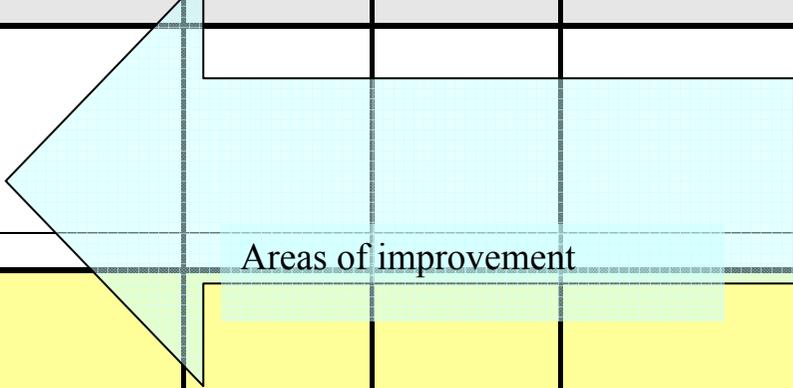
## **2. CAF fine-tuned scoring**

The fine-tuned scoring is a simultaneous way of scoring closer to the reality where e.g. many public organisations are doing things (Do) but sometimes without enough planning (Plan).

- In the enablers panel, the emphasis lays more on the PDCA as a cycle and progress can be represented as a spiral where in each turn of the circle improvement may take place in each phase: PLAN, DO, CHECK and ACT.
- Bench learning activities are normally taken into account at the highest level of all the phases.
- This way of scoring gives more information on the areas where improvement is mostly needed.
- The results panel shows you if you have to accelerate the trend or focus on the targets achievement.

**Assessment Panel**

<b>ENABLERS PANEL 2</b>								
<b>PHASE</b>	<b>Scale</b>	0-10	11- 30	31-50	51- 70	71 - 90	91-100	
	<b>Evidence</b>	No evidence or just some ideas	Some weak evidence, related to some areas	Some good evidence related to relevant areas	Strong evidence related to most areas	Very strong evidence related to all areas	Excellent evidence, compared with other organisations, related to all areas.	
PLAN	<b>Planning is based on stakeholders' needs and expectations. Planning is deployed throughout the relevant parts of the organisation on a regular basis.</b>							
	Score							
DO	<b>Execution is managed through defined processes and responsibilities and diffused throughout the relevant parts of the organisation on a regular basis</b>							
	Score							
CHECK	<b>Defined processes are monitored with relevant indicators and reviewed throughout the relevant parts of the organisation on a regular basis</b>							
	Score							
ACT	<b>Correction and improvement actions are taken following the check results throughout the relevant parts of the organisation on a regular basis</b>							
	Score							
							<b>Total /400</b>	
							<b>SCORE /100</b>	



### **Instructions for each sub-criterion:**

- Read the definition of each phase (Plan, Do, Check and Act);
- Find evidence of strengths and weaknesses and give a global judgement for each phase in the appropriate box. This judgement can be illustrated by some examples or evidence in order not to overcomplicate the scoring exercise. However, those who want to go further can put all the examples or evidence in the different boxes of the four phases and calculate the average for each phase.
- Calculate the sum of the four phase scores and divide by four in order to obtain a score out of 100 for the enabler sub-criterion. This score should be plausible and consistent e.g. total scoring should not exceed 40 if any of the four evaluation criteria (Plan, Do, Check, Act) is lower than or equal to 20. It should not exceed 60 if any of the criteria is lower than 30.

### **EXAMPLE of a fine-tuned scoring: Enablers – sub-criterion 1.1:**

#### **Provide direction to the organisation by developing its mission, vision and values**

#### ***Synthesis of the evidence emerged in self-assessments (starting points for improvement planning and basis for scoring).***

*1.1.a. - A vision and a mission for the administration was elaborated three years ago. It was requested by the director-general and the discussion involved all the first line managers. An elegant, coloured card with the vision and mission statement was distributed to all employees.*

*1.1.b - Nothing has yet been done in the area of values statement and code of conduct. The Human Resources Manager has developed a project to this end. Middle management will be invited to a seminar to reflect together on the values of the organisation. The values will be crystallised by teaching what positions have to be taken in difficult situations.*

*1.1.c - Employees, customers/citizens and other stakeholders have not been involved up to now in the vision and mission definition process. However, awareness of the importance of such involvements arose two years ago, when some managers of the administration participated in TQM seminars, in particular one dedicated to the CAF model. The decision was then taken to carry out internal and external surveys to collect employees' and citizens' perceptions. Results indicated that middle managers and employees considered the vision and mission as "image" statements, totally detached from reality, and that the objectives quite often did not seem in tune with such statements. As far as customers are concerned, surveys indicated that alignment of management perceptions with customer perceptions is needed. Meetings with managers and employees and with representatives of citizens have been planned and will take place soon. The decision was also taken to conduct surveys among employees and customers every year. An administration-wide self-assessment is also being planned.*

*1.1.d - The above-mentioned surveys should guarantee that in the future the vision and mission statements will be periodically reviewed and updated, taking into account the needs and expectations of customers/stakeholders, and that employees' involvement will increase as will communication within the organisation.*

The above findings have been placed in the following Enabler Matrix, to help elaborate a global scoring for the sub-criterion. Note: that **does not necessarily mean** giving scores to the individual examples; the blank boxes of the matrix are used as a memo pad, to pass from the evidence collected during the sub-criterion assessment to a global sub-criterion scoring, and a way to guide the discussion in the consensus meeting.

<b>ENABLERS PANEL 2 – Scoring 1.1.</b>								
<b>PHASE</b>	<b>Scale</b>	<b>0-10</b>	<b>11- 30</b>	<b>31-50</b>	<b>51- 70</b>	<b>71 - 90</b>	<b>91-100</b>	
	<b>Evidence</b>	No evidence or just some ideas	Some weak evidence, related to some areas	Some good evidence related to relevant areas	Strong evidence related to most areas	Very strong evidence related to all areas	Excellent evidence, compared with other organisations, related to all areas	
PLAN	<b>Planning is based on stakeholders' needs and expectations. Planning is deployed throughout the relevant parts of the organisation on a regular basis.</b>			1b				
	Score			<b>50</b>				<b>50</b>
DO	<b>Execution is managed through defined processes and responsibilities and diffused throughout the relevant parts of the organisation on a regular basis</b>			1a				
	Score			<b>40</b>				<b>40</b>
CHECK	<b>Defined processes are monitored with relevant indicators and reviewed throughout the relevant parts of the organisation on a regular basis</b>					1c		
	Score					<b>85</b>		<b>85</b>
ACT	<b>Correction and improvement actions are taken following the check results throughout the relevant parts of the organisation on a regular basis</b>	1d						
	Score	<b>5</b>						<b>5</b>
							<b>Total /400</b>	<b>180</b>
							<b>SCORE /100</b>	<b>45</b>

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<b>RESULTS PANEL 2</b>						
<b>Scale</b>	<b>0-10</b>	<b>11-30</b>	<b>31-50</b>	<b>51-70</b>	<b>71-90</b>	<b>91-100</b>
<b>TRENDS</b>	No measurement	Negative trend 	Flat trend or modest progress 	Sustained progress 	Substantial progress 	Positive comparison with relevant organisations for all results 
Score						
<b>TARGETS</b>	No or anecdotal information	Results do not meet targets	Few targets are met	Some relevant targets are met	Most of the relevant targets are met	All the targets are met
Score						
					<b>Total/200</b>	
					<b>Score/100</b>	

**Instructions**

- Consider separately the trend of your results for three years and the targets achieved in the last year.
- Give a score for the trend between 0 and 100 on a scale divided into 6 levels.
- Give a score for the target achievement of the last year between 0 and 100 on a scale divided into 6 levels.
- Calculate the sum of the trends and target achievement and divide by 2 in order to obtain a score out of 100 for the result sub-criterion.

**EXAMPLE of a fine-tuned CAF scoring: Results – sub-criterion 9.1:  
Key performance results. External results.**

*Synthesis of the evidence emerged from self-assessments (starting points for improvement planning and basis for scoring).*

*In preparation of the strategic meeting at the beginning of the new working year, a report was prepared for the board of directors on the key performance results of last year in order to optimise the strategic planning for the next year. The conclusions of the report were clear: more than 50% of the performance goals had been met, and in comparison to the previous year a progress of 10% was established. The appreciation of these conclusions was far from anonymous and gave way to intensive discussions among the members of the board.*

<b>RESULTS PANEL 2 – Scoring 9.1.</b>						
<b>Scale</b>	<b>0-10</b>	<b>11-30</b>	<b>31-50</b>	<b>51-70</b>	<b>71-90</b>	<b>91-100</b>
<b>TRENDS</b>	No measurement	Negative trend	Flat trend or modest progress	Sustained progress	Substantial progress	Positive comparison with relevant organisations for all results
Score			<b>45</b>			
<b>TARGETS</b>	No or anecdotal information	Results do not meet targets	Few targets are met	Some relevant targets are met	Most of the relevant targets are met	All the targets are met
Score				<b>65</b>		
					<b>Total/200</b>	<b>110/200</b>
					<b>Score/100</b>	<b>55/100</b>

## **Guidelines to improving organisations using CAF**

The process of continuous improvement can be designed and carried out in a number of ways. The size of the organisation, the culture and prior experience with Total Quality Management tools are some of the parameters that help to determine what the most appropriate way of launching the TQM approach will be.

In this chapter we have identified a 10 step process of continuous improvement with CAF that may be considered relevant to most organisations.

It is important to emphasise that the advice given here is based on the experience of the many organisations that have used CAF. However each improvement process is unique and therefore this description should be seen as an inspiration for the people responsible for the process of self-assessment rather than as a precise manual for the process.

### ***Phase 1 – The start of the CAF journey***

#### **Step 1 DECIDE HOW TO ORGANISE AND PLAN THE SELF-ASSESSMENT**

A high level of commitment and shared ownership between the senior management and the people of the organisation are most crucial elements in securing the success of the self-assessment process.

In order to gain commitment and ownership, the experience of many organisations shows that a clear management decision through a sound consultative process with the stakeholders of the organisation is necessary. This decision should clearly illustrate the willingness of the management to be actively involved in the process by recognizing the added value of the self-assessment and guaranteeing the openness of mind, respect for the results and readiness to start improvement actions afterwards. It also includes the commitment to set aside the resources needed to carry out the self-assessment in a professional way.

Knowledge about the potential benefits of a CAF-self-assessment and information about the structure of the model and the process of self-assessment are necessary elements in providing management with a basis for decision making. It is very important for all managers to be convinced of these benefits from the outset.

#### **Survey 2005 - The most important benefits of a CAF self-assessment**

The CAF users' survey of 2005 shows that major benefits of a self-assessment include:

- Effective identification of the strengths of the organisation and the areas where improvement has to be made
- Identification of relevant improvement actions
- Increased level of awareness and communication throughout the organisation
- People started to become aware and interested in quality issues

In relation to other TQM tools the CAF users generally find CAF to be easy to use, low cost and well adapted to the public sector.

In this phase it is vital that one or more persons in the organisation take responsibility for securing these basic principles. A good idea is to contact the organisation responsible for dissemination of CAF in your country (for information on this see [www.eipa.eu](http://www.eipa.eu)) and either ask them to make a presentation of the CAF model or get information on/from other organisations that have already used the model and are willing to share their experience.

In order for the people of the organisation to support the process of self-assessment it is important that consultation takes place before the final decision about carrying out self-assessment has been made. Apart from the general benefits of carrying out self-assessment experience shows that many people find CAF to be an excellent opportunity to gain more insight into their organisation and want to be actively involved in its development.

For some organisations it may also be relevant to seek the acceptance or approval of external stakeholders before deciding to carry out self-assessment. This may be the case with politicians or senior management of higher level organisations who are traditionally closely involved in management decision making. Key external stakeholders may have a role to play, particularly in data collection and processing information, and also potentially benefit from changes regarding some of the areas of improvement that may be identified.

### **Initial planning of the self-assessment**

Once a decision has been made to carry out self-assessment the planning process can start. One of the first elements in this – that may have been included in the management decision - is the definition of the scope and the approach of self-assessment.

A frequently asked question is whether the self-assessment has to cover the whole organisation or if separate parts such as units or departments can undertake self-assessment. The answer is that separate parts can perform self-assessment but in order to assess all criteria and sub-criteria in a meaningful way, they should have enough autonomy to be considered as a mainly autonomous organisation with a proper mission and significant responsibility for Human Resources and financial processes. In such cases the relevant supplier/customer relations as well as stakeholder relations between the selected unit and the remaining part of the organisation should be assessed.

It is recommended to include in the management decision the choice of the scoring panel to be used.

Two ways of scoring are offered. An organisation should choose depending on the time available to invest in scoring and on its level of experience and maturity.

A very important action by top management to undertake in this phase is the appointment of a **project leader** for the self-assessment process. Tasks that are normally performed by the project leader include:

1. Detailed planning of the project, including the communication process;
2. Communication and consultation with all stakeholders regarding the project;
3. Organising training of the self-assessment group;
4. Gathering of supporting documents and evidence;
5. Active participation in the self-assessment group;
6. Facilitation of the consensus process;

7. Editing of the self-assessment report;
8. Supporting the management in prioritising actions and out-lining of the action plan.

The demands regarding the competences of the project leader are high. The person has to have both a high level of knowledge regarding his or her own organisation, knowledge of the CAF model as well as knowledge about how to facilitate the process of self-assessment. Appointing the right project leader who has this knowledge and the confidence of senior management and people within the organisation is one of the key management decisions that can affect the quality and outcome of the self-assessment. Appropriate project management training is available at national and European level.

For some organisations the language and the examples used in the CAF model are unfamiliar and too far away from their daily practise to be used directly. If this is not resolved early in the familiarisation of the model, it can later be an obstacle in the process of self-assessment. What can be done in such cases, in addition to the training efforts that are later described, is to “adapt” the model to the language of the organisation. Prior to embarking on this action it is a good idea to check if this has already been done by an organisation similar to your own. This can be done through the organisation responsible for disseminating CAF in your country or with the CAF Resource Centre at EIPA.

## **Step 2 COMMUNICATE THE SELF-ASSESSMENT PROJECT**

A very important planning activity once the project approach has been defined is the out-lining of a communication plan. This plan includes communication efforts targeted at all stakeholders in the project with a special emphasis on middle managers and people of the organisation.

Communication is a core field in all change management projects, but especially when an organisation is performing self-assessment. If communication regarding the purpose and the activities of the self-assessment is not clear and appropriate it is likely that the self-assessment effort will be seen as “just another project” or “some management exercise”. The risk here is that these assumptions become self-fulfilling prophecies as there may be a reluctance from middle managers and other people to be fully committed or involved.

### **Survey 2005 - The importance of communication to create ownership by the employees is generally underestimated**

An important conclusion of the latest CAF users’ survey is that the users of CAF find that they have generally not prioritised sufficiently the communication efforts regarding employees during the process. The lessons learned show that one of the major potential benefits of CAF is to increase the level of awareness and communication across the organisation. But this can only be realized if management and the people responsible for the CAF self-assessment are active at a very early stage in communicating and involving people and middle managers in the organisation about the purpose and the potential benefits of self-assessment.

An important result of early communication is to stimulate the interest of some of the employees and managers to be directly involved in a self-assessment group. Involvement should ideally be pursued through personal motivation. Motivation should be the basic element that links people to the whole process of self-assessment. People should have a completely clear view of the purpose of the CAF self-assessment process: **the improvement in the overall performance of the organisation**. The communication policy on the CAF self-assessment process should focus on win-win outcomes for all stakeholders, people and citizens/clients.

Clear and coherent communication to all stakeholders during the relevant phases of the project is key to securing a successful process and follow up action. The project leader along with the top management of the organisation should reinforce that policy by focusing on:

1. how self-assessment can make a difference;
2. why it has been given priority;
3. how it is connected to the strategic planning of the organisation;
4. how it is connected (for example as the first step to) to a general effort for improvement in the organisation's performance, for instance through the implementation of an innovative operational reform programme.

The communication plan should be differentiated and consider the following elements: focus group, message, medium, sender, frequency and tools.

## ***Phase 2 – Self-Assessment Process***

### **Step 3 COMPOSE ONE OR MORE SELF-ASSESSMENT GROUPS**

The self-assessment group should be as representative of the organisation as possible. Usually people from different sectors, functions, experience and levels within the organisation are included. The objective is to establish an effective group as possible, while at the same time a group, which is able to provide the most accurate and detailed internal perspective of the organisation.

The experience of the CAF users shows that groups are composed with between 5-20 participants. However, in order to secure an effective and relatively informal working style, groups around 10 participants are generally preferable.

If the organisation is very large and complex it could be relevant to compose more than one self-assessment group. In this case it is critical that the project design takes into consideration how and when the appropriate coordination of the groups will be taking place.

Participants should be selected on the basis of their knowledge of the organisation and their personal skills (e.g. analytical and communicative skills) rather than professional skills alone. They can be selected on a voluntary basis but the project leader and the management remain responsible for the quality, the diversity and credibility of the self-assessment group.

The project leader of the group may also be the chair, this can help with project continuity but care should be taken in order to avoid conflicting interests. What is important is that the chair of the

group is trusted by all the members of the group to be able to lead discussions in a fair and effective way that will enable everybody to contribute to the process. The chair can be appointed by the group itself. An effective secretariat to help the chair and organise meetings is essential as well as good meeting facilities and ICT support.

A frequently asked question is whether senior managers should be included in the self-assessment group. The answer to this will depend on the culture and tradition of the organisation. If management is involved, they can provide additional information and it will increase the likelihood that management has ownership to the later implementation of the improvement actions identified. It also increases diversity/representation. However, if the culture is not likely to support this, then the quality of the self-assessment can be jeopardised if one or more of the group members feels inhibited and unable to contribute or speak freely.

## **Step 4 ORGANISE TRAINING**

### **Information and training of management**

It could be of value to involve top, middle management and other stakeholders in self-assessment training, on a voluntary basis, to widen knowledge and understanding of the concepts of TQM in general and self-assessment with CAF in particular.

### **Information and training of the self-assessment group**

The CAF model should be introduced and the purposes and nature of the self-assessment process explained to the group. If the project leader has been trained prior to this phase it is a very good idea that this person plays a major role in the training. In addition to theoretical explanations, training should also include practical exercises to open the minds of participants to the principles of total quality and also to experience consensus building as these concepts and behaviours may be unfamiliar to most members.

The CAF Resource Centre at EIPA arranges “train the trainer” sessions every year, and similar activities take place in a number of European countries.

A list provided by the project leader with all relevant documents and information needed to assess the organisation in an effective way should be available for the group. One sub-criterion from the enablers criteria and one from the results criteria could be assessed in common. This will give the group a better understanding of how the CAF self-assessment is operating. A consensus has to be reached on how to evaluate evidence of strengths and areas for improvement and how to assign scores.

Another relevant session that will afterwards - during the consensus phase - save time is to get a common picture of the key stakeholders of the organisation, those which have a major interest in its activities: customers/citizens, politicians, suppliers, partners, managers and employees. The most important services and products delivered to, or received from, these stakeholders and the key processes to assure this should also be clearly identified.

## **Step 5 UNDERTAKE THE SELF-ASSESSMENT**

### **Undertake individual assessment**

Each member of the self-assessment group, using the relevant documents and information provided by the project leader, is asked to give an accurate assessment, under each sub-criterion, of the organisation. This is based on their own knowledge and experience of working in the organisation. They write down key words of evidence about strengths and areas for improvement. It is recommended to formulate the areas for improvement as precisely as possible in order to make it easier to identify proposals for action at a later stage. They should then overview their findings and score each sub-criterion, according to the scoring panel that has been chosen.

The chair must be available to handle questions from the members of the self-assessment group during the individual assessment. He/she can also coordinate the findings of the members in preparation for the consensus meeting.

### **Undertake consensus in group**

As soon as possible after the individual assessments, the group should meet and agree on the strengths, areas for improvement and the scores on each sub-criterion. A process of dialogue and discussion is necessary, indeed essential as part of the learning experience, to reach consensus as it is very important to understand why differences regarding the strengths and areas of improvement and scoring exist.

The sequence for assessment of the nine criteria can be established by the self-assessment group. It is not necessary for this to be in strict numerical order.

### **The consensus finding**

How can the consensus be achieved?

In the process of arriving at consensus, a four-step method may be used:

1. Presenting all evidence concerning the identified strengths and areas for improvement per sub-criterion - identified by each individual;
2. Reaching consensus on strengths and areas for improvement. This is usually reached after the consideration of any additional evidence or information;
3. Presenting the range of individual scores under each sub-criterion;
4. Reach consensus regarding the final scoring.

A good preparation of the meeting by the chairperson (e.g. collection of important information, coordination of the individual assessments) can lead to smooth running of meetings and important time saving.

### **Survey 2005 – The added value of discussions**

Overall, the practice of coming to conclusions was the same as observed in 2003: the majority reached consensus after discussions. The discussion itself is very often seen as the real added value of a self-assessment: when a consensus is reached, the end result is more than the pure sum of the individual opinions. It reflects the common vision of a representative group and in this way it corrects and goes beyond the subjective individual opinions. Clarifying evidences and expressing the background to different views on strengths and weaknesses are often considered to be more important than the scores.

The chair is responsible and has a key role in conducting this process and arriving at a group consensus. In all cases, the discussion should be based on **clear evidence** of actions undertaken and **results achieved**. In the CAF, a list of relevant examples is included, to help provide assistance in identifying appropriate evidence. This list is not exhaustive nor is it necessary to meet all the possible examples, only those relevant to the organisation. However, the group is encouraged to find any additional examples which they feel are relevant to the organisation.

The role of the examples is to explain the content of the sub-criteria in more detail in order to:

- 1 explore how the administration answers the requirements expressed in the sub-criterion;
- 2 provide assistance in identifying evidence; and
- 3 be an indication of good practices in that particular area.

### **How to score**

The CAF provides two ways of scoring: the classical approach and the fine-tuned approach. Both scoring systems are explained in detail in this brochure. It is recommended to use the classical scoring system if an organisation is not familiar with self-assessment and/or inexperienced in Total Quality Management techniques.

### **Duration of the self-assessment exercise**

Comparing the reality and the preference, based on the survey 2005, 2 to 3 days seems to be rather short to do a reliable self-assessment whilst 10 days or more is too long. It is difficult to suggest an ideal time schedule for a CAF self-assessment as there are too many variables which include the objectives of management, the time, resources and expertise available for investment, the availability of data, stakeholder time and information and political pressures. However to the majority of organisations a duration of up to 5 days is the norm. This includes individual assessment and consensus meeting(s).

The large majority of organisations completed the whole CAF application process in 3 months, including the preparation, the self-assessment, the drawing of conclusions and the formulation of an action plan.

Three months seems to be an ideal lapse of time to stay focused. Taking more time raises the risk of reduced motivation and interest of all parties involved. Furthermore, the situation might have changed between the start and the end of the self-assessment process. In such a case, the assessment and scoring may no longer be accurate. This is highly likely as improving an organisation using CAF is a dynamic, continuous improvement process and therefore updating data and information is part of that process.

## **Step 6 DRAW UP A REPORT DESCRIBING THE RESULTS OF SELF-ASSESSMENT**

A typical self-assessment report should follow the structure of CAF (as showed in scheme A) and consist at least of the following elements:

1. The strengths and areas for improvement for each sub-criterion supported by relevant evidence;
2. A score which is justified on the basis of the scoring panel;
3. Ideas for improvement actions.

In order to use the report as basis for improvement actions it is crucial that Senior Management officially accepts the self-assessment report, ideally endorses and approves it. If the communication process has worked well this should not be a problem. Senior Management should reconfirm its commitment to implementing the improvement actions. It is also essential at this stage to communicate the main results to people in the organisation and other participating stakeholders.

## **Phase 3 – Improvement plan/ prioritisation**

### **Step 7 DRAFT AN IMPROVEMENT PLAN**

#### **Survey 2005: Lack of measurements**

Many organisations encountered obstacles during their first CAF application. The lack of measurement has obviously been the major problem in many public organisations doing self-assessment for the first time, very often resulting in the installation of measurement systems as the first improvement action.

The self-assessment procedure should go beyond the self-assessment report in order to fulfil the purpose of CAF implementation. It should lead directly to a report of actions to improve the performance of the organisation.

This action plan is one of the main goals of the CAF self-assessment effort and also the means to feed vital information to the strategic programming system of the organisation. It must realise an integrated plan for the organisation to upgrade its functioning as a whole. Specifically the core logic of the report is that:

1. It is integrated systematic action planning for the whole span of the organisations functionality and operability.
2. It comes as a result of the self-assessment report, so it is based upon evidence and data provided by the organisation itself and – absolutely vital - from the aspect of the people of the organisation.
3. It builds on the strengths, addresses the weaknesses of the organisation and responds to each of them with appropriate improvement actions.

#### **Prioritise areas of improvement**

In preparing an improvement plan, the management might wish to consider the use of a structured approach, including the questions:

- Where do we want to be in 2 years in line with the overall vision and strategy of the organisation?

- What actions need to be taken to reach these goals (strategy/task definition)?

The process for building an improvement plan could be structured as follows:

The management – in consultation with relevant stakeholders

1. collects ideas for improvement from the self-assessment report and collates these ideas for improvement under common themes;
2. analyses the areas for improvement and suggested ideas then formulates improvement actions taking into account the strategic objectives of the organisation;
3. prioritises the improvement actions - using agreed criteria to calculate their impact (low, medium, high) in the improvement areas, such as:
  - strategic weight of the action (a combination of impact on the stakeholders, impact on the results of the organisations, internal/external visibility)
  - ease of implementation of the actions (looking into the level of difficulty, the resources needed and the speed of realisation);
4. assigns ownership to each action as well as a time schedule and milestones & identifies the necessary resources (cf. scheme B).

It can be useful to link the ongoing improvement actions to the CAF structure in order to keep a clear overview.

One way to prioritise is to combine:

1. the level of scoring per criterion or sub-criterion which gives an idea of the organisations' performance in all fields,
2. the key strategic objectives.

### **Recommendations**

While a CAF self-assessment is recognised to be the start of a longer-term improvement strategy, the assessment will inevitably highlight a few areas that can be addressed relatively quickly and easily. Acting on them will help with the credibility of the improvement programme and represent an immediate return on time and training investment, it also provides an incentive to continue - success breeds success.

It is a good idea to involve the people who carried out the self-assessment in the improvement activities. This is usually personally rewarding for them and boosts their confidence and morale. They may also become ambassadors for further improvement initiatives.

#### **Survey 2005 - The members of the Self assessment groups (SAG)**

The members of the SAG have invested a lot of their energy in the exercise, very often besides their usual daily work. Very often they start their work in the SAG with some suspicion about the usefulness of the task, the engagement of the management, the dangers of being open and honest etc. After a while, when they see that things are taken seriously, motivation and even some enthusiasm raise and at the end they take the full ownership of the results. They have the potential to become the most motivated candidates for improvement teams and should be treated in accordance with this role.

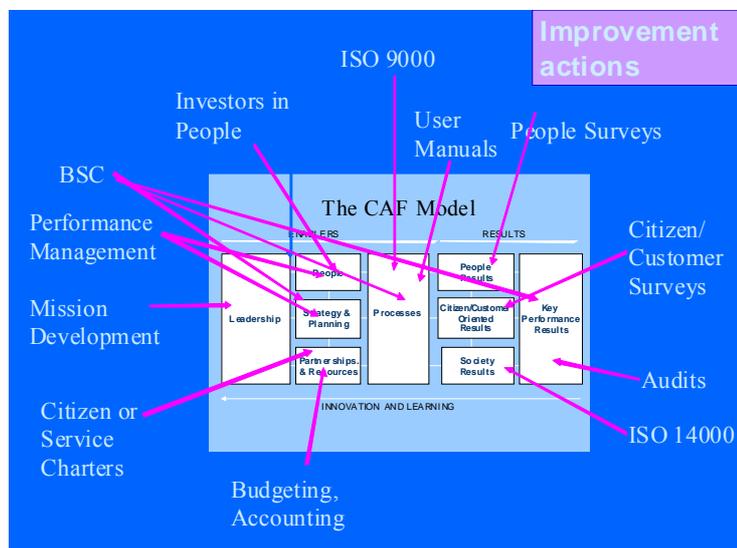
At best, the action plan resulting from the self-assessment should be integrated into the strategic planning process of the organisation and become part of the overall management of the organisation.

## Step 8 COMMUNICATE THE IMPROVEMENT PLAN

As mentioned previously, communication is one of the critical success factors of a self-assessment and the improvements actions that follow. Communication actions must provide the appropriate information with the appropriate media to the appropriate target group at the appropriate moment: not only before or during but also after the self-assessment. An organisation should decide individually whether or not it makes the self-assessment report available, but it is good practice to inform the whole staff about the results of the self-assessment i.e. the main findings of the self-assessment, the areas in which action is most needed, and the improvement actions planned. If not, the possibility to create an appropriate platform for change and improvement runs the risk of being lost. In any communication about results it is always good practice to highlight the things that the organisation does well and how it intends to further improve - there are many examples of organisations taking for granted their strengths sometimes forgetting, or even not realising, how important it is to celebrate success.

## Step 9 IMPLEMENT THE IMPROVEMENT PLAN

As described in step 7, the formulation of the prioritised improvement action plan is very important. Many of the examples in the CAF model can be considered as a first move towards improvement actions. Existing good practices and management tools can be linked to the different criteria of the model. Examples of them are shown below.



The implementation of these improvement actions should be based on a suitable and consistent approach, a process of monitoring and assessment; deadlines and results expected should be clarified; a responsible person for each action (an “owner”) should be assigned, and alternative scenarios for complex actions should be considered.

Any quality management process should be based on regular monitoring of implementation and evaluation of the outputs and outcomes. With monitoring it is possible to adjust what was planned in the course of implementation and post evaluation (results and outcomes), to check what was achieved and its overall impact. To improve this it is necessary to establish ways to measure the performance of the actions (performance indicators, success criterion, etc). Organisations could use the Plan-Do-Check and Act cycle (PDCA) to manage improvements actions. To fully benefit from the improvements actions they should be integrated in the ordinary processes of the organisations.

On the basis of the CAF self-assessment more and more countries are organising recognition schemes. The CAF self-assessment could also lead to a recognition from *EFQM Levels of Excellence* ([www.efqm.org](http://www.efqm.org)).

Implementation of CAF action plans facilitates the permanent use of management tools such as Balanced Scorecard, customer and employee's satisfaction surveys, performance management systems, etc.

#### **005 - CAF as an introduction to TQM**

shows that the use of quality or management instruments was limited before users applied CAF. Most used are and employees satisfaction surveys, external and internal audits, ISO 9000 /2000 standard(s) with and without on, project management and BSC. The ambition to use more of these tools in the future is very high.

### **Step 10 PLAN NEXT SELF-ASSESSMENT**

Using the PDCA cycle to manage the Action Plan implies a new assessment with CAF.

#### **Monitor progress and repeat the assessment**

Once the improvement action plan is formulated and the implementation of changes has begun it is important to make sure that the changes have a positive effect and are not having an adverse effect on things that the organisation was previously doing well. Some organisations have built regular self-assessment into their business planning process – their assessments are timed to inform the annual setting of objectives and bids for financial resources.

The evaluation panels of the CAF are simple but powerful tools to use when assessing the on-going progress of the improvement action plan.

#### **Survey 2005 - CAF is generally repeated every 2<sup>nd</sup> year**

The organisations consent that in order to be effective, the CAF has to be applied several times. There is a preference towards the use of CAF every 2 years (44%). The investments in the exercise and the time needed to generate results in the improvement actions support this view.

## Glossary CAF and education

### Accountability

Accountability is the obligation to answer for responsibilities that have been conferred and accepted and to report on the use and management of resources entrusted. Those who accept accountability are responsible for answering questions and reporting on resources and operations that are under their control to those who have to hold accountability; both parts have their duties.

### Action Plan

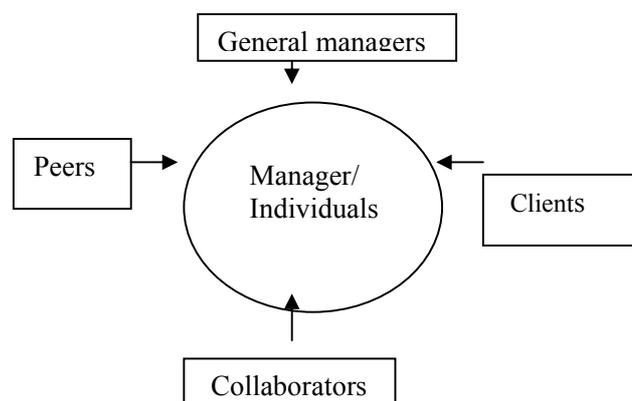
A document which is a plan of tasks, allocation of responsibilities, goals for the implementation of the project (e.g. targets/deadlines) and resources needed (e.g. hours, money).

### Appraisal/ Performance appraisal

“Performance appraisal” needs to be understood in the management context. Usually, the management system of an institution will include the assessment of individual employees’ job performance. This practice helps to monitor the departmental and overall institutional performance by aggregating the individual performance at different management levels within the institution. The personal appraisal interview between the individual employee and his/her line manager is the most common way for appraisal to be carried out. During the interview, in addition to an appraisal of performance, other aspects of the individual’s employment can be assessed, including level of job knowledge and competences, from which training needs can be identified. In a TQM approach, the PDCA, based on continuous improvement, is used at the individual level: PLAN the job for the coming year, realise the job (DO), CHECK your realisation during the performance appraisal interview and adapt (ACT) if necessary for the next year: the objectives, the means and the competences.

There are several ways to increase the objectivity of performance appraisal:

- The upward appraisal where managers are evaluated by employees directly reporting to them;
- The 360 degrees appraisal where managers are evaluated from different points of views: general managers, peers, collaborators and customers;



- Evaluation of teaching practices by the learners.

## **Audit**

- Auditing is an independent appraisal function to examine and evaluate the activities of an institution and its results. The most common audits are: financial audit, operational audit, ICT audit, compliance audit and management audit. Three levels of auditing control activity can be distinguished:
  - Internal control carried out by management (control of processes and results; for example, processing students files, timetables, certificates, compliance of certificates,...)
  - Internal auditing by an independent unit of the institution. In addition to compliance/regulation activities it may also have a role in controlling the effectiveness of the institution's internal management (for example, Internal Evaluation Commissions in Higher Education institutions);
  - External auditing done by an independent body from outside the institution. It validates the internal auditing. (For example, auditing of the Quality Agencies of European Higher Education).

## **Balanced Scorecard**

The Balanced Scorecard (**BSC**) is composed by quantitative measurements evaluating to what extent the institution succeeds in realising its mission and strategic objectives. These measurements are built up around four viewpoints: innovation and learning (people management), internal processes, customers, and financial management. The indicators of each approach are linked to each other through a cause-effect relationship. These relationships are based on hypotheses that have to be monitored permanently.

The BSC is also very useful as a communication tool for management to inform the people in the institution and the stakeholders to what extent the strategic plan has been realised.

The Balanced Scorecard is increasingly used in the public sector in Europe.

It should be noted that the Balanced Scorecard can be used within CAF assessment.

## **Benchmark**

A measured achievement at a high level (sometimes referred to as “best-in-class ” see Benchmarking below); a reference or measurement standard for comparison; or a performance level which is recognised as the standard of excellence for a specific process.

## **Benchmarking**

There are numerous definitions, but the key words associated with benchmarking are ‘to make comparison with others’.

“Benchmarking is simply about making comparisons with other organisations and then learning the lessons that those comparisons reveal” (Source: European Benchmarking Code of Conduct).

In practice, benchmarking usually encompasses:

- regularly comparing aspects of performance (functions or processes) with those institutions or organisations that are considered to be good practitioners; sometimes reference is made to best in class, but as no one can ever be certain as to who is best, the term ‘good’ is preferred;
- identifying gaps in performance;
- seeking fresh approaches to bring about improvements in performance;
- following through with implementing improvements; and
- following up by monitoring progress and reviewing the benefits.

Benchmarking in European public administrations usually focuses on the learning aspects and is now more commonly referred to as ‘**Bench learning**’, as learning how to improve through sharing

knowledge, information, and sometimes resources, is recognised to be an effective way of introducing institutional change. It reduces risks, is efficient and saves time.

- **Strategic benchmarking**

Strategic Benchmarking is used where institutions seek to improve their overall performance by examining the long-term strategies and general approaches that have enabled high-performers to succeed. It involves comparisons of high-level aspects, such as core competencies; the development of new products and services; a change in the balance of activities or an improvement in capabilities for dealing with changes in the background environment.

**Best/ Good practice**

Superior performances, methods or approaches that lead to transferable achievement. Best practice is a relative term and sometimes indicates innovative or interesting practices that have been identified through benchmarking. As with Benchmark it is preferable to talk about “good practice” since one cannot be sure that there is not a better one.

**Bologna process**

European reform process aiming to create a European Higher Education Area by 2010. It is managed by the 46 participating countries, in cooperation with a number of international organisations, including the Council of Europe. The Bologna process endeavours to build bridges to facilitate the mobility of persons wishing to pass from one educational system to another, or from one country to another. Consequently, for example, qualification systems are showing more and more structural similarities.

**Bottom-up**

Direction of the flow of, for example, information or decisions from lower levels of an institution to higher levels. The opposite is top-down.

**Business Process Re-engineering (BPR)**

We can always make further improvements to an existing process by means of minor adaptation (Kaizen approach). In some cases, this approach is no longer suitable for accomplishing the required goals and it may be necessary to redesign the whole process. We call this approach BPR (Business process Re-engineering) or simply re-engineering. The idea of BPR is to completely redesign the process, which creates opportunities to make a big leap forward or to accomplish an important breakthrough. Once this new process has been implemented, you may then return to the process of searching for ways to make gradual continual improvements to optimise the process.

**Change management**

Change management involves both generating the changes needed in an institution, usually preceded by Modernisation and Reform agendas, and mastering the dynamics of change by organising, implementing and supporting the change.

**Citizen/ Customer**

The term citizen/customer is used to emphasise the dual relationship between the public administration on the one hand, and on the other hand the users of public services and all the members of the public, who as citizens and taxpayers, have a stake in the services and their outputs. *Learners* are regarded as the citizen/customer of an education and training institution.

**Coaching**

Individual coaching is an action supporting change, which allows a person from the institution to develop according to his/her own needs and to make the most of his/her potential thanks to a “coach” (for example, a peer), who helps him/her to clarify his/her objectives and provides him/her with the necessary tools to develop.

**Code of conduct**

May be expressed or implied, rules and guidelines, for standards of behaviour for individuals, professional groups, teams or institutions. Codes of conduct may also apply to specific activities, such as auditing or benchmarking and often refer to ethical standards.

**Competence**

Competences include the knowledge, skills and attitudes used in practise by an individual in a job situation. When an individual is able to carry out a task successfully he/she is regarded as having reached a level of competence.<sup>3</sup>

**Conflict of interest**

In the public sector this refers to a conflict between the public duty and the private interest of a public official, in which a public official’s private-capacity interest could improperly influence the performance of his/her official duties. Even if there is no evidence of improper actions, a conflict of interest can create an appearance of impropriety that can undermine confidence in the ability of that person to act properly.

In the educational sector the expression refers to any situation in which an individual behaviour can create a conflict with the institution interest.

**Consensus**

As the word implies, this is about reaching an agreement and usually follows an initial self-assessment involving individual assessors getting together to compare and discuss their individual assessments and scores. The process usually ends with individual assessors reaching an agreement on a combined overall score and assessment for the institution.

**Consensus or self-assessment report**

A report describing the results of self-assessment. This report must include strengths and areas of improvement for the institution. It may also contain (optional) proposals for improvement in some key projects.

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<sup>3</sup> This is a European definition, please be aware that countries have different definitions.

**Continuous improvement process**

The ongoing improvement of processes in terms of quality, economy or cycle time. The involvement of all stakeholders of an institution is normally a pre-requisite in this process.

**Corporate social responsibility**

Corporate social responsibility is a commitment by education and training institutions to contribute to sustainable development working with employees, their families, local communities, and society at large to improve the quality of life. The aim is to bring benefits both for institutions and wider society.

**Cost effectiveness**

The relationship between the effects that are implied by the goals of the institution and the costs – possibly including the full social cost – of achieving them. See also effectiveness.

**Critical success factor**

The prior conditions that must be fulfilled in order for an intended strategic goal to be achieved. It highlights those key activities or results where satisfactory performance is essential for an institution to succeed.

**Diversity**

Diversity relates to **differences**. It may refer to values, attitudes, culture, philosophy or religious convictions, knowledge, skills, experience and lifestyle between groups, or individuals within a group. It may also be on the basis of gender, sexual orientation, national or ethnic origin, disability or age.

In public administration a diverse institution would be considered to be one which reflects the society it serves.

**ECTS (European Credit Transfer System)**

A credit system is a method which allows credits to be allocated to all elements of a programme of study. The definition of credits at the higher education level can be based on parameters such as the student's workload, number of teaching hours and training objectives. The European system of transferring and accumulating credits is a system centred on the student, and based on the workload to be carried out by the student in order to reach the objectives of the programme, which are defined in terms of final knowledge, skills and competences to be acquired.

**ECVET (European Credit for Vocational Education and Training)**

European system of accumulating and transferring units, designed for vocational education and training in Europe. It consists of demonstrating and registering the acquired knowledge, skills and competences of the learners and persons involved in a course of learning, leading to a qualification, a diploma or a professional certification. This system supports the recognition of prior learning (RPL) in the framework of lifelong learning.

**E (Rule of the 5 E)**

The rule of the 3 E's Economy, Effectiveness and Efficiency (see definitions below) used in the public sector recently added Ethics and Environment thereby creating the rule of the 5 E's, useful for quality management. The notion of environment is not defined here.

**Economy**

Economy and economising refer to prudent financial management including reducing costs through more efficient purchasing processes and saving money without affecting the quality of outputs or objectives.

**Effectiveness**

Effectiveness is the relation between the set goal and the impact, effect or outcome achieved.

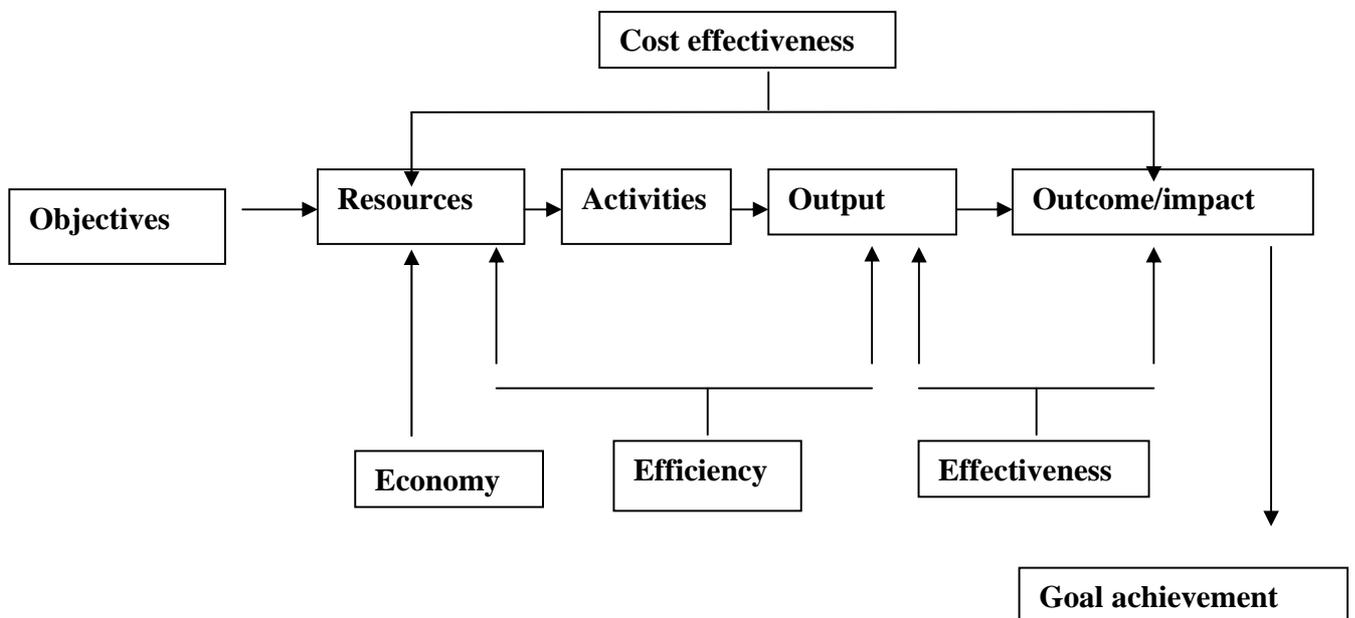
**Efficiency**

Outputs in relation to inputs or costs. Efficiency and productivity may be regarded as one and the same. Productivity may be measured in ways that capture either the input of all factors of production (total factor productivity) or a specific factor (labour productivity or capital productivity).

**Ethics**

Ethics in public service may be defined as those common values and norms to which public servants subscribe whilst carrying out their duties. The moral nature of these values/norms, which may be stated or implicit, refer to what is considered to be right, wrong, good or bad behaviour. Whereas values serve as moral principles, norms may also state what is legally and morally correct in a given situation.

**Efficiency – Effectiveness – Economy**



**eGovernment**

The use of Information and Communication Technology (ICT) in public administrations. Combined with institutional change and new skills it helps to improve public services and democratic processes and also strengthen adherence to public policies. eGovernment is regarded as an enabler to realise a better and more efficient administration. It can improve the development and implementation of public policies and help the public sector to cope with the potentially conflicting demands of delivering more and better services with fewer resources.

**e-Learning**

The use of new multimedia and internet technology to improve the quality of education and training, through remote access to resources and services, as well as collaborations and exchanges.

**Empowerment**

A process by which more autonomy and responsibility is given to an individual or a group of people in the decision-making process. It may apply to learners or to people of the institution by involving the person/group and by granting a degree of autonomy in actions/decisions.

**EQUIS (European Quality Improvement System)**

System for improving and certifying the quality of higher education institutions of management in Europe. This international system for strategic audit and European accreditation is implemented by the EFMD (European Foundation for Management Development) according to international criteria.

**ERASMUS**

The ERASMUS programme of the European Commission aims to promote cooperation between higher education institutions, notably through the mobility of teachers and students throughout the EU Member States and the associated countries (Liechtenstein, Norway and Turkey).<sup>4</sup>

**eTwinning**

Electronic twinning between two or more European education and training institutions. eTwinning is also a cross-sectoral project within the integrated programme of the European Commission "Lifelong education and training".

**Evaluation / assessment**

Examining whether actions undertaken have given desired effects and whether other actions could have achieved a better result at a lower cost.

**Evidence**

Information that supports a statement or fact. Evidence is considered to be essential for forming a firm conclusion or a judgement.

**Excellence**

Outstanding practice in managing an institution and achieving results which are based on a set of fundamental concepts from Total Quality Management as formulated by EFQM. These include: results orientation, customer focus, leadership and constancy of purpose management by processes

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<sup>4</sup> [http://ec.europa.eu/education/lifelong-learning-programme/doc80\\_en.htm](http://ec.europa.eu/education/lifelong-learning-programme/doc80_en.htm)

and facts, involvement of people, continuous improvement, and innovation, mutually beneficial partnerships, corporate social responsibility.

### **Follow-up**

Subsequent to a self-assessment process and changes to an institution, a follow-up aims to measure goal achievement against stated objectives. The analysis may result in the launching of new initiatives and adjusting strategy and planning in accordance with the new circumstances.

### **Governance**

The main elements of good public governance are determined by the appointed framework of authority and control. It will set out: the obligation to report on the achievement of goals, transparency of actions and the decision-making process to the stakeholders; efficiency and effectiveness; responsiveness to the needs of society; anticipation of the problems and trends; and respect of the law and rules.

### **Human resources management**

Managing, developing and utilising the knowledge, skills and full potential of the peoples of an institution in order to support policy and education planning and the effective operation of its processes.

### **Indicators**

A factor, variable, or observation that is indicative, i.e. showing the results of an action.

The main indicators are either predictive or reporting, or indicators of results, means, advancement or environment. They will be object of a normative or comparative interpretation.

#### **- Performance indicators**

These are the numerous operational measures used in public administration to help us

- Monitor
- Understand
- Predict and
- Improve

how we function and perform.

There are several terms used to measure institutional performance; outcomes, measures, indicators, parameters. However measurement terminology is less important and we should use terms with which we are comfortable and familiar. If we follow Pareto's principle, we realise that around 20% of what we do will deliver 80% of our outcomes. It is therefore important that we at least measure the performance of those processes that are essential to the delivery of our desired results.

#### **- Key performance indicators**

Those measures that are most critical and evaluate the performance of key processes, contained in CAF criteria 5, which are most likely, to influence the effectiveness and efficiency of our key performance outcomes.

#### **- Satisfaction indicators**

This allows the measurement of the quality perceived by the learners and stakeholders concerned. A good example of learner satisfaction may be measurements in customer/citizen results of the performance of the processes we have put in place to deliver customer/citizen products and

services (for example, assessment of the learners' satisfaction with the coaching for the placement).

**Impact**

The effects and the consequences of possible and actual actions, interventions or policies in public, private and third sectors.

**Innovation**

Innovation is the process of translating good ideas into new services, processes, tools, systems and human interaction. An institution may be described as innovative if an existing task is performed in a new way, or if the institution offers learners a new service in a different way, such as registration via the internet.

**Input**

Any kind of information, work, knowledge, material and other resources used for production.

**Institutional culture**

The total range of behaviours, ethics, and values which are transmitted, practised and reinforced by members of an institution; it is influenced by national, socio-political and legal traditions and systems.

**Institutional structure**

The way an institution is structured, i.e. the division of work areas or functions, formal chains of communication between management and employees, and the way tasks and responsibilities are divided throughout the institution.

**ISO**

ISO (International Organisation for Standardization) is a global network that identifies what international standards are required by business, government and society, develops them in partnership with the sectors that will put them to use, adopts them by transparent procedures based on national input, and delivers them to be implemented worldwide.

ISO standards specify the requirements for state-of-the-art products, services, processes, materials and systems, and for good conformity assessment, managerial and institutional practice.

**Job description**

A complete outline of the function (description of tasks, responsibilities, knowledge, competences and abilities). The "job description" is a fundamental instrument for human resources management. It constitutes an element of knowledge, analysis, communication and dialogue. It represents a type of charter between the institution and the holder of the position. Furthermore, it is a key factor for making employers as well as employees aware of their responsibilities. (according to B. Dubois, and K. Rollot)

**Key performance results**

The results the institution is achieving with regard to its strategy and planning related to the needs and demands of the different stakeholders (external results); and the results of the institution in relation to its management and improvement (internal results).

### **Knowledge management**

The explicit and systematic management of vital knowledge and its associated processes of creation, organisation, diffusion, use and exploitation.

It is important to note that knowledge encompasses both tacit knowledge (that contained in people's minds) and explicit knowledge (codified and expressed as information in databases, documents etc.). A good knowledge programme will address the processes of knowledge development and transfer for both these basic forms. The most vital knowledge in most organisations is often related to: customer knowledge; knowledge in processes; knowledge in products and services, customised to users' needs; knowledge in people; organisational memory, drawing on lessons from the past or elsewhere in the organisation; knowledge in relationships; knowledge assets; measuring and managing intellectual capital. A wide variety of practices and processes are used in knowledge management. Some of the more common ones are: creating and discovering; sharing and learning (communities of practices); organising and managing.

### **Leaders**

Traditionally we associate the term Leader with those responsible for an institution.

The word may even refer to those people who, thanks to their competence on a particular topic, are recognized as a role model by the others.

### **Leadership**

The way in which leaders develop and facilitate the achievement of the mission and vision of the institution. It reflects how they develop values required for long-term success and implement them via appropriate actions and behaviours. It indicates how leaders are personally involved in ensuring that the management system is developed, implemented and reviewed and that institutions permanently focus on change and innovation.

### **Learner**

Person who is learning in an organized and structured context and/or following a course of training.

### **Learning**

The acquisition and understanding of knowledge and information that may lead to improvement or change. Examples of institutional learning activities include benchmarking/bench learning, internally and externally led assessments and/or audits, and best practice studies. Examples of individual learning include training and developing skills.

#### **- Learning environment**

An environment within a working community where learning takes place in the form of skill acquisition, knowledge sharing, the exchange of experience, and dialogue on best practice.

- **Learning school**

An institution where people continually expand their capacity to achieve the results they desire, where new and expansive patterns of thinking are fostered, where collective aspiration is set free, and where people are continually learning within the context of the whole institution.

- **Learning labs**

System where the computer assumes the role of stimulating the operational capacity of the learner; the catalyst to the learning process.

The word may refer to any learning set in which the operational capacity of the learner is stimulated and called upon through digital technologies.

**Lifelong Learning Programme**

Lifelong education and training programme; main European financing programme in the area of education and training. For the first time, a unique programme (2007-2013) is covering training possibilities from childhood to advanced age.

**Mentoring**

Interpersonal contact for support, exchanges and learning, in which an experienced person invests his/her acquired wisdom and expertise in order to encourage the development of another person who has skills to acquire and professional objectives to reach. (according to C. Cuerrier)

**Mission**

A description of what an institution should achieve for its stakeholders. The mission of a public sector institution results from a public policy and/or statutory mandates; the “raison d’être” of the institution (it provides the answer to questions such as: “Who are we?” “What do we want to achieve?” “Why do we act as we do?”)

The final goals set out by an institution in the context of its mission are formulated in its vision.

The mission should be clearly stated in a specific document.

**Network**

An informal organisation connecting people or institutions that may or may not have a formal line of command. Members of the network often share values and interests.

**Objectives (goals/aims/targets)**

A formulation of a desired situation describing the desired results or effects as defined in the mission of the institution.

- **Strategic objectives**

Global objectives for the mid and long term indicate the overall direction in which the institution wants to go. It describes the final results or effects (outcomes) it wants to pursue.

- **Operational objectives**

They are a concrete formulation of the strategic objectives, e.g. at unit level. An operational objective can be immediately transformed into a set of activities and tasks.

**Outcome**

The overall effect that outputs have on external stakeholders or on wider society and learners (socio-professional insertion or re-insertion, individual development,...).

**Outcomes:** Anticipated or achieved results of programmes or the accomplishment of institutional objectives, as demonstrated by a wide range of indicators (such as student knowledge, cognitive skills, and attitudes). Outcomes are direct results of the instructional programme, planned in terms of student/learner growth in all areas (The Unesco definition)

**Learning Outcomes:** Statements of what a learner is expected to know, understand, and/or be able to demonstrate after completion of a process of learning as well as the specific intellectual and practical skills gained and demonstrated by the successful completion of a unit, course, or programme (the Unesco definition).

### **Output**

The immediate result of production, which may be either goods or services. There is a distinction between intermediate and final outputs: the former being products delivered from one department to another within an institution; the latter being delivered to someone outside the institution.

### **Partnership**

Collaboration with other parties on a commercial or a non-commercial basis to reach a common goal, thus creating added value for the institution and its stakeholders.

### **PDCA cycle**

A cycle of four stages to be followed to achieve continuous improvement, as described by Deming:

- **Plan** (project phase)
- **Do** (execution phase)
- **Check** (control phase)
- **Act** (action-, adaptation- and correction phase)

It emphasises that improvement programmes must start with careful planning, must result in effective action, be checked and eventually adapted, and must move on again to careful planning in a continuing cycle.

### **Perception measurement**

Measurement of subjective impressions and opinions of an individual or a group of people, e.g. the customer's perception of the quality of a product or service.

### **Performance**

A measure of attainment achieved by an individual, team, institution or process.

### **Procedure**

A detailed and well-defined description of how activities should be carried out.

## **Process**

A set of intertwined activities which transforms a set of inputs into outputs, thereby adding value. The nature of processes in public service institutions may vary greatly, from relatively abstract activities such as support for policy development or regulation of economic activities, to very concrete activities of service provision. One can distinguish four types of processes:

- Core processes are critical for the delivery of products and services;
- Support processes deliver the necessary resources;
- Management processes steer the institution and support processes.

Key processes are those of the above processes that are of utmost importance for the institution.

## **Process diagram (flow chart)**

A graphical representation of the series of actions taking place within a process.

## **Process map**

A graphical representation of the series of actions linking processes.

## **Process owner**

The person responsible for designing, improving and performing processes, their coordination and integration inside the institution. Responsibilities include the following:

- Understand the process: How is it carried out in practice?
- Target the process: How does it fit into the broader vision? Who are the internal and external stakeholders and are their expectations met? How does the process relate to other processes?
- Communicate the process to the internal and external stakeholders.
- Monitor and measure the process: To what extent is the process efficient and effective?
- Benchmark the process: How do other organisations perform and what can we learn from them?
- Envision the process: What is the long-term vision for the process and what do we have to do to reach it?
- Report the process: What exactly can be improved? Where are the weaknesses and how can they be targeted?
- By employing these steps the process owner has the chance to continually improve the process.

## **Product**

Output of the key activity in the school that is the creation of a “study programme”. After that, customer (pupil, student, course participant) consume this product via the educational process.

## **Provider-client relationship**

Each element of an educational or training structure provides a service that is used by others. For example:

- Basic teaching provides learners for secondary education; the same with secondary to higher education, i.e. each year provides learners for the following year;
- Each teacher/trainer provides the learning used by the learners. This learning is used by colleagues in other disciplines (e.g. mathematics → science → technology → English and vice versa);
- Schools provide educated citizens for society;

- Training leading to qualification provides qualified staff for the economy;
- Companies provide places for traineeships;
- Etc.

### **Public policy**

A purposeful course of action followed by governmental bodies and officials to deal with a problem or a matter of public interest. This includes government action, inaction, decisions and non-decisions; it also implies choices between competitive alternatives.

### **Public service organisation/ Public administration**

A public service organisation is any institution, service organisation or system, which is under the policy direction of and controlled by an elected government (national, federal, regional or local). It includes organisations that deal with development of policy and enforcement of law, i.e. matters that could not be regarded strictly as services.

### **Quality**

Delivering quality in the public sector is concerned with maximising the value of products and services for all stakeholders within a political and financial framework. TQM focuses on procedures and processes that are deemed instrumental in promoting quality.

#### **- Quality control**

Systematic control of the organisation's ability to create professional quality in the services it offers and delivers. It is systematic in that the results emerge from a planned, deliberate effort. Some organisations choose a system for quality control based on a quality manual or process manuals. Quality control systems usually contain a select collection of guidelines for implementing quality controls in practice, and how quality is measured and improved.

#### **- Quality management**

A method for ensuring that all the activities necessary to design, develop and implement a product or service are effective and efficient with respect to the system and its performance.

#### **- Quality management system**

A system that outlines the policies and procedures necessary to improve, control and integrate the processes eventually leading to a better performance.

### **Recognized Qualification**

Process aiming to assimilate studies (or parts of studies) carried out abroad, with studies (or parts of studies) organised by the national education institutions.

### **Resources**

Resources include the knowledge, labour, capital, buildings or technology an institution uses to perform its tasks.

### **Role model**

Persons or organisations who serve as a model in a particular behavioural or social role for other persons to imitate or learn from.

### **SEQuALS (Supporting the Evaluation of Quality and the Learning of Schools)**

System for evaluating the quality in secondary education based on the synergy between self-assessment and external assessment (see [www.sequals.org](http://www.sequals.org) and [www.syneva.net](http://www.syneva.net)).

### **SMART objectives**

Objectives state what an institution has set out to achieve. It is recommended that objectives should be SMART:

- **S**pecific – precise about what you are going to achieve
- **M**easurable – with quantified objectives
- **A**chievable
- **R**ealistic – are the necessary resources available?
- **T**imed – within manageable timing

### **Staff**

All individuals employed by the institution including full time, part time, and temporary employees.

### **Stakeholders**

Stakeholders are all those who have an interest, whether financial or not, in the activities of the institution. Internal and external stakeholders can be classified in four categories:

- the political authority and the organising power
- the partners
- the learners and their legal representatives
- the staff, who is considered the most important stakeholder

Examples of stakeholders: political decision-makers, citizens/customers, employees, society, inspection agencies, media, partners, etc. Government organisations are also stakeholders.

### **Strategy**

A long-term plan of prioritised actions designed to achieve a major or overall goal or to fulfil a mission.

### **Survey**

Method of collecting data on opinions, attitudes or knowledge from individuals and groups. Frequently only a cross-section of the whole population is asked to participate.

### **Sustainable development**

Development suitable for meeting present needs without compromising the possibility of meeting the needs of future generations.

### **SWOT Analysis**

Analysis of the **S**trengths, **W**eaknesses, **O**pportunities (potential advantages) and **T**hreats (potential difficulties) of and to an institution.

### **Term**

Period of time in which results should be achieved:

- Short term

- Refers usually to less than one year;
- Medium term  
Refers usually to periods of one to five years ahead;
- Long term  
Refers usually to periods of more than five years.

**Top-down**

Flow of information and decisions from upper levels to lower levels within an institution. The opposite is bottom-up.

**TQM (Total Quality Management)**

A customer-focused management philosophy that seeks to continuously improve business processes using analytical tools and teamwork involving all employees. There are several TQM models; the EFQM, the CAF, the Malcolm Baldrige (USA), ISO 9004 being the most commonly used.

**Transparency**

Transparency implies openness, communication, and accountability. It is a metaphorical extension of the meaning used in the physical sciences: a "transparent" object is one that can be seen through. Transparent procedures include open meetings, financial disclosure statements, the freedom of information legislation, budgetary review, audits, etc.

**Tutoring**

Methodology, in which a learner (or a small group of learners) receives individual and personalised education.

**Value**

Value refers to monetary, welfare, cultural and moral values. Moral values are considered to be more or less universal, whereas cultural values may shift between institutions as well as between countries. Cultural values within an institution should be transmitted and practised and also be related to the mission of the institution. They may be quite different between non-profit organisations and private businesses.

**Vision**

The achievable dream or aspiration of what an institution wants to do and where it would like to be.

The context of this dream and aspiration is determined by the mission of the institution.

## **Annex I – What is useful to know about applying TQM and the CAF?<sup>5</sup>**

### **1. Managing organisation quality**

#### **From product and service quality to organisation quality**

Over the years, organisations (initially private-sector enterprises competing on the market, later public-sector organisations) have come to the realisation that the quality of their results depends on the quality of the organisation and have therefore focused their attention on this aspect, extending quality concepts from products and services to organisational structures. Where product and service quality signifies “suitability for use”, organisation quality substantially signifies “suitability for achieving goals”.

In a context of continuous change, this definition implies the ability both to identify the appropriate targets for the organisation’s goals and to achieve those targets with minimal variance and minimal use of resources.

The concept of quality has gradually evolved, from “quality control” (avoiding non-conformity/defectiveness in execution) to “quality assurance” (preventive action on the system and on processes to ensure that the development/execution/delivery of the product or service meets user expectations) and to “continuous improvement” (which covers the general need to adapt to change by improving performance, as well as the approach of organisations aiming to be top performers).

An important milestone in this evolution came in 1987 with the introduction of two quality models that would have a decisive influence on future developments: America’s Malcolm Baldrige model and an international standards-based model: the ISO 9000 standards for quality management systems.

The Malcolm Baldrige model developed in a highly competitive business environment (automobiles, electronics) and so competition in customer satisfaction is its ultimate goal; the ISO 9000 standards developed in the context of Business To Business and Business To Administration relations, and its main goal is therefore to ensure that the product/service delivered to customers complies with the agreed specifications. “Quality system certification”, introduced with the ISO 9000 standards, tends to provide “Business” and “Administration” customers with an *a priori* guarantee that the organisation chosen as a supplier or partner has the system characteristics needed to generate satisfactory quality.

So just as the industrialised world was mobilising on the quality theme in response to the Japanese offensive, two quality approaches arrived on the market at the same time.

This brings us to the present day, in particular to the gradual extension of quality concepts and methods (quality management) to services and public administration.

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<sup>5</sup> Contribution from Italy by Tito Conti & Sabina Bellotti to give more insights to the CAF process as a whole, especially for non-users of the caf model.

## Quality management models

“Models” are useful tools to manage an organisation and improve its suitability for achieving its goals. Models are simplified representations of complex realities, created to make those realities easier to understand and manage. Management models are numerous and serve different purposes. In public administration, for example, there are models for innovation management, for economic and financial management, for project and process management, for project assessment (*ex ante – in itinere – ex post*), for assessment of managers, for management of training processes, for learning assessment, etc. In each case, the model sets out to represent the specific dynamics, highlighting factors of critical importance for the organisation’s goals and ignoring other factors of little or no importance.

In quality management too, models – representations of the organisational dynamics – are useful. Quality models simply represent those dynamics as the relationship between the critical organisational variables (frequently referred to as “Enabling factors”) and the performance targets/results the organisation intends to achieve. The two most important types of model today are: models based on standards (the ISO 9001 standard is a typical example) and continuous improvement models (such as the Total Quality Management – TQM – or Excellence models).

When the aim is to standardise management methods, assessment criteria, measurements, the language used among organisations (or among the functions of an organisation), the model becomes a standards model. Management system standards may apply to an organisation (internal standards), to an industry, at national and international levels. The ISO 9001 standard, for example, is an international standard, designed to demonstrate, through certification, organisations’ ability to generate quality, and thus harmonise supplier relationships among companies and between companies and public agencies.

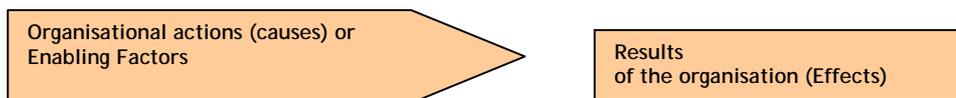
If the organisation were a mechanistic system, all it would need to achieve the desired levels of quality would be appropriate rules and procedures. The organisation, however, is a socio-technical system, whose main component are people. Rules and procedures are still necessary, but are not sufficient to ensure the quality of results, still less continuous improvement. Standards-based quality provides the organisation with a solid foundation; it helps it “keep its house in order”, establish a set of rules, procedures and processes to guarantee rigor, discipline, repeatable results. Further progress can be built on these solid foundations.

When the aim is to maintain and gradually improve suitability for achieving goals, to be above average, TQM or excellence models should be used. Whereas standards-based quality may be delegated to skilled experts, TQM requires the direct involvement of top management. And it is top management’s job to identify the appropriate balances for the organisation (the term top management ideally means a management team, not an isolated chief officer).

The point to underline is that TQM models (like the EFQM and the CAF models) should be seen as tools for managing the entire organisation from a quality standpoint. If necessary, they may include use of the ISO 9000 standards, with or without formal certification, to guarantee that the whole organisation or, more often, a part of it achieves certain results with a high level of reliability (for example, when people's lives, health and safety are involved, or when absolute compliance with deadlines or the security of important assets are essential).

There are a number of TQM models, at national or regional level (the Deming in Japan, the Malcolm Baldrige in the USA, the EFQM and the CAF in Europe). Depending on the purpose for which they were created – typically to foster the competitiveness of their respective socio-economic systems – they developed and spread initially as models for quality awards, and later evolved into models for improvement through self-assessment. But even this approach is incomplete, because the models are in fact management tools, which can be used at every phase in the organisation's activities

The usefulness of the TQM models lies in their function as “compasses” to help management chart a path to excellence. Represented graphically, modern models assist an understanding of organisational mechanisms and the cause/effect relationships between organisational factors/actions and results.



Use of TQM models (or models based on them) is spreading to the public sector, in an attempt to make public systems more effective (improve people's quality of life and rationalise relations among organisations – profit and non-profit – set up by people) and more efficient (raise system cost-effectiveness). The CAF is a model for use in the public sector. Based on the EFQM model, which was originally intended for the corporate sector, the CAF has been developed at European level for use by any type of public agency.

### **A method to optimise management**

If models are to deliver a strategic and organisational advantage, they should be deployed in conjunction with a Plan-Do-Check-Act cycle (PDCA). The model is the compass, the tool indicating “where” the organisation should investigate, intervene, measure. To understand “how” to investigate, intervene and measure, the organisation needs appropriate cultural tools for planning, doing, checking and acting; in other words, the organisational and technical know-how and skills typical of TQM. If the model helps the organisation chart a path, the PDCA cycle provides the working methodology to help it

reach its targets. The PDCA cycle is simply a way to rationalise management of the organisation by defining the optimal sequence of activities:

1. clear definition of the targets the organisation intends to achieve, beginning with the requirements of the users addressed by those targets. This phase is identified with the letter P, “Plan”;
2. execution of the planned activities through correct formulation and management of processes, monitored with specific indicators. This phase is identified with the letter D, “Do”;
3. checks on the result of planning and doing, with respect to the parameters assumed by the organisation (targets, benchmarks, trends). This phase is identified with the letter C, “Check”;
4. implementation of ensuing action: corrections, improvements, stabilisation at new performance levels. This phase is identified with the letter A, “Act”.

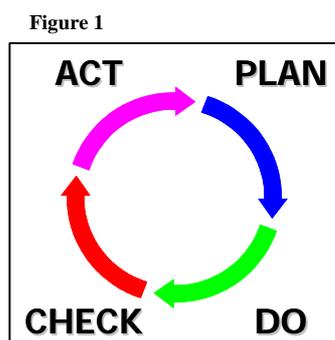
This type of management approach is rare, especially among public agencies. Normally, a Plan phase and a Do phase are envisaged: an incomplete sequence that cannot guarantee sustainable quality in results. If the organisation wishes to grow, to learn from experience, to improve, it needs to add the Check and Act phases.

The organisation can improve and learn only if, after planning and doing, it analyses the causes of gaps between actual and expected results, and identifies weaknesses.

The PDCA cycle is described as a “heuristic” methodology, because its underlying pragmatic assumption is that progress is achieved not at a stroke, but through a series of best guesses. This is particularly important in a culture that tends to respond to the failure of a plan by cancelling everything and starting again from scratch, without sufficient analysis of the reasons for the failure, with the result that the same mistakes are liable to be repeated. With the plan, do and correct approach, we learn from our mistakes and gradually resolve them. The first step for a learning organisation, therefore, is to establish a PDCA culture, to help it learn from its mistakes (which can never be fully eliminated, however effective the prevention system).

The PDCA cycle may be applied to a specific project, process or experiment, but it reaches its full potential when applied to the entire organisation and its annual operations cycle. The starting point is not usually a newly formed entity, but an organisation whose plans and operations are already in place. In this case, it is best to begin from the Check phase, with a self-assessment that analyses current conditions in the organisation. So the sequence will be: CAPD.

The figure represents the PDCA cycle.



The CAF model is usually described as a self-assessment model (Check phase). This is because self-assessment and improvement are “new” activities, whose importance has emerged only in recent decades. In practice, however, the organisation that truly embraces the CAF philosophy soon realises that the model can be used in each phase of the PDCA cycle, that is, throughout the organisation’s annual round of operations.

### **Why self-assessment and continuous improvement are important**

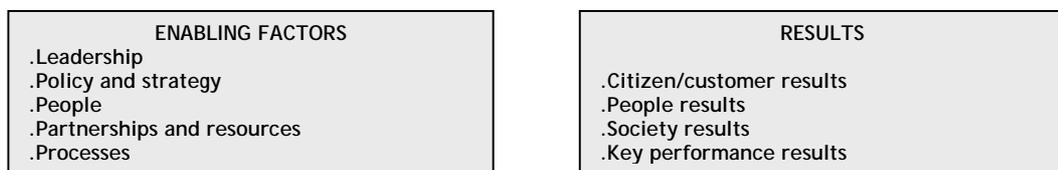
Self-assessment – in the EFQM definition – is an exhaustive, systematic and regular analysis of an organisation’s operations and results, conducted by the organisation with reference to a TQM model.

Organisations conduct self-assessments to identify their strengths and weaknesses (potential areas for improvement). As the “Check” phase in the PDCA cycle, self-assessment is complete if it is followed by planned improvements monitored over time. But this is not the only reason why self-assessment and improvement processes are worthwhile; there are other reasons too, which in some cases have a significant impact on the organisation’s culture:

- self-assessment favours consensus, communication, participation and delegation of responsibilities, motivating personnel;
- self-assessment provides a photograph of the true state of the organisation based not only on objective data but also on the voice of its people, thereby highlighting aspects and elements that management may not or cannot always perceive;
- self-assessment focuses attention on the customer/user/citizen, making him the key driver of subsequent changes and improvements in services;
- self-assessment enables the organisation to strengthen and enhance its existing competences and know-how, through communication and training;
- self-assessment is particularly important for public administration, where there is no feedback from the market, i.e., the final verdict delivered when the customer makes a purchase decision.

## 2. The basic principles of TQM models: enabling factors

The aim of self-assessment with TQM models is to identify areas for potential improvement through systematic analysis. The models divide the analysis into a series of Criteria, corresponding to the elements to be analysed, which are subdivided in turn into sub-criteria and examples. The previous section introduced the concept of Enabling Factors and Results, and provided a figure illustrating the cause-effect relationship between them. The figure below shows the criteria for the Enabling Factors and for Results (expected or achieved) adopted by EFQM-based models like the CAF.



In the Plan phase, the right side of the model is seen mainly as the place where the expected results (Targets) are defined. In the Do phase, it is seen mainly as the place where the results gradually obtained with respect to targets emerge. In the Check phase, it is the area showing the results obtained and the starting point for an analysis of the gaps between results and targets. The results it reflects should be regarded as the visible tips of so many icebergs. The nature of and explanations for the results can only be found in the submerged part of the iceberg, which in the model corresponds to the left side, the Enabling Factors. This is where the keys to improving the results on the right side can be found.

Given that the self-diagnosis process should identify the causes of dysfunctions, it is evident that, logically speaking, assessment should begin by considering results: measuring the outcome of operations in order to trace the root causes of any areas of weakness, among the Enabling Factors. The sequence proposed by the TQM models, however, for organisations wishing to conduct a self-assessment is to assess, first, suitability for achieving goals (adequacy of the enabling factors), then effectiveness (as reflected in performance results).

With experience, as the level of organisational maturity grows, the organisation will find that the diagnostic approach – from results to enabling factors – is the best choice for self-assessment. But at first, especially if the self-assessment team has no diagnostic experience, the cause-effect sequence is advisable, provided that: 1) the self-assessment of the enabling factors is reviewed in light of the results; 2) the diagnosis of the weaknesses found correctly highlights the links between effects (results) and causes (management of enabling factors). As time passes, the organisation's diagnostic competences should grow, permitting an ever deeper understanding of the links between

results and the processes that generate results, and between processes and the underlying enabling factors.

Before using the CAF model, the organisational significance of the Criteria that relate to the Enabling Factors should be examined.

## **Leadership**

Leadership is commonly regarded as the locomotive of continuous improvement, the “key driver” of all TQM models. These models make a conceptual distinction between the figure of the manager and the figure of the leader. In this discussion, the two figures are presented as extremes, to highlight the differences between their distinguishing characteristics; specifically, the manager is the classic figure of the Weberian hierarchical model, now largely in disuse. The manager – or the leader – in the pure state is very rarely found. Mixed profiles are more common, but certainly the traits of the manager still prevail, especially in the public sector. The reference here is to leaders when the characteristics of the leader predominate, to managers when the characteristics of the manager predominate.

The **manager** is skilled in managing complex organisations. He has expertise in operational planning, execution and control (predictability, minimisation of variability), in cost control, in measuring results. The manager favours a rigorous, disciplined approach. He regards people as resources whose role is defined by specific tasks. This is a “mechanistic” view where people are seen as parts of a machine, but although they have clear “additional” talents with respect to the machine, they are handicapped by a potential tendency to not comply with rules and to evade control. Consequently, the structure of the organisation (preferably a hierarchical pyramid) is designed and run to prevent anomalous behaviour.

The manager is suited to managing the organisation in periods of relative stability, when external and internal conditions are predictable. This point alone suggests that these are difficult times for the manager: external scenarios are changing rapidly and continually; inside the organisation, rigour and discipline are no longer a given. When the manager is unable to manage because the traditional tools are beyond his control, the risk of a crisis and relinquishment of responsibility is high.

Systemically speaking, the manager is a figure suited to managing “closed” or “semi-closed” systems, where windows on the external environment are kept to the indispensable minimum. The inevitable external communication channels are closely monitored to ensure that nothing more than the essential is conveyed (materials, products, services, information): anything else could lead to cultural contamination, disorder, unpredictability, and must therefore be filtered.

The key characteristics of the **leader** are imagination, creativity, a real interest and belief in people, considered in terms of their positive potential (the knowledge, competences,

creativity they offer) rather than their negative potential (which the leader believes can be contained through motivation and involvement). The leader is not content with the status quo and is always on the look-out for opportunities for improvement; he is inquisitive, attracted by unexplored territory. The leader is convinced that people have hidden potential and enjoys finding and cultivating that potential: putting people to the test, helping them grow, become leaders themselves. He appreciates and rewards results, especially through increased responsibility. The leader believes that the nature of organisations requires a cohesive system, with shared values, typically mutual respect and trust and a sense of belonging (being part of a team). He openly applies performance assessment criteria, particularly with regard to appreciated and unwanted organisational behaviour. He does not leave his staff to themselves, in situations of risk he supports them and fosters their growth.

The leader knows that excellent results can only be obtained through synergy, that is, through the performance enhancement obtained through true integration. So he places importance on formal and informal interpersonal relationships. He is particularly suited to leading the organisation when the scenario and the future, and therefore objectives, are uncertain. He knows how to augment capabilities and energy, in part by pursuing opportunities for synergy and alliances outside the organisation.

Systemically speaking, the leader is suited to running open systems, since he understands that since resources are normally scarce, external synergies provide an opportunity to enhance his ability to generate value. Consequently, he does not avoid external territories, nor view external contact as a source of dangerous contamination; on the contrary, the external environment offers partnerships, opportunities for cross-fertilisation that stimulate improvement and innovation.

As noted above, the figures of the manager and the leader are not mutually exclusive. In practice, they are both present, to a greater or lesser degree. The “dosage” depends on the type of organisation and on the geo-economic-historical-political context in which it operates. Today’s constantly changing scenarios generally mean that leadership gifts are more in demand today than in the past. At the same time, competition between economic systems requires great attention to efficient use of resources, in other words rigour. What is needed, therefore, is an appropriate combination of leadership and management, not so much in a specific individual as in the system of governance. In other words, organisations that put priority on dynamism and innovation should be headed by a leader.

Like all excellence models that promote a dynamic vision of quality, the CAF stresses the importance of the role of the leader; first because, as noted above, the role is particularly necessary today, second because we come from a long historical period dominated absolutely by the classical figure of the manager proposed by the hierarchical/functional model. For this reason, CAF literature frequently uses the term “leader” as a synonym for “head”. It should be interpreted in general terms, as a figure combining the talents of leader and manager in the most appropriate mix for the specific role.

The CAF also underlines the importance, for the management of an organisation, of compliance with a series of values assumed as necessarily being common to the entire public sector in the European Union: legality, transparency, equity, respect for diversity and rejection of conflicts of interest. In particular, respect for diversity signifies not only tolerance but also active pursuit of policies for equal gender opportunities (with regard to access to and use of services, and to stakeholders involved in the service production chain, including the organisation's own human resources) and for disadvantaged categories, respect for religious and ethnic differences, sexual preferences and so on.

The question of conflicts of interest upholds the principle that players must place respect for laws and the public good, in particular responsibility for the results of public action, before their own and others' private interests; in other words, they should maintain a position of independence in order to avoid making decisions or taking action in situations of apparent or actual conflict of interests. Leaders are responsible for divulging official codes of conduct within their organisations (e.g., the code of conduct for public-sector employees). Even better, they should draft specific documents where the codes of conducts and values are personalised in line with the specific features of the organisation.

Leaders act to enable their organisations to adapt to society's continually changing needs and requirements, to strengthen their organisations' role and the effectiveness of their performance.

They also promote initiatives and create conditions to foster innovation (introduction of previously untested methods) and modernisation (transfer of good practices developed by others, consistently with national and European programmes). This is particularly important when the resources available decrease or fluctuate. This is precisely the sort of situation when a capacity for leadership can overcome the frequent lack of motivation ("we can't do anything, because we don't have the resources") and guide the organisation to achieve the changes needed to improve performance and workplace conditions, even with fewer resources.

Finally, leaders make sure that the introduction of technology is accompanied by a review of the organisation and its work, to turn this into an opportunity for continuous improvement of the performance results defined by the organisation's mission, vision and strategic planning.

### **Policy and strategy**

The PDCA cycle, a fundamental concept in continuous improvement, is applied at all levels, from the micro level of individual initiatives, projects, processes, to the macro level of the organisation as a whole. In the latter case, it is customary to have an annual cycle for operational planning and often a multi-year cycle for strategic planning. In this regard, policy and strategy represent the P phase of the annual or long-term macro-cycle of the organisation's activities.

The first key concept introduced in planning by TQM is that targets, strategies and plans must be rooted in the organisation's vision and mission (therefore the vision and mission must be defined previously and reviewed continually to take account of changing conditions). A frequent objection is that objectives in public administration are hetero-directed and the possibility for differentiation is minimal. This objection is irrelevant in modern quality systems: even if the "what" to be done is fully defined, quality, which addresses the "how", would leave ample room for manoeuvre. In practice, the "what" too often has upward freedom of movement, once the logic of value creation for customers and stakeholders and optimal use of resources has been taken on board. Analysis of the organisation's policy and strategy should also consider the willingness to introduce innovation in managing the organisation and dealing with the problems of the community, the mission of public-sector organisations.

The second key concept introduced in planning by TQM, and the PDCA cycle in particular, is that the preliminary condition for satisfying the expectations of users of the value generated by the organisation is to know what value they expect. Planning input should therefore include full information about the current situation, and simulations/forecasts about the effects of what is being planned. The focus on stakeholders – citizens, first of all – and their needs is therefore fundamental. To collect complete information about these needs, the first step is to draw up a map of all the organisation's stakeholders. In the PDCA approach, regular reviews should be conducted jointly with the stakeholders (or their representatives) to monitor their changing needs and the degree to which they are satisfied. The quality of this information and systematic analysis of feedback from stakeholders is a *sine qua non* for the quality of results. So too is the ability of the organisation to take a proactive working approach, in other words not only to respond to the demands of the public and business, but to foresee problems that could arise by developing an internal environment sensitive to changes in society and to the opportunities offered by advances in know-how and technology.

The third fundamental concept for quality planning is known as policy deployment and goal deployment. It originated among large corporations but is even more important in public administration. Policy deployment is the phase during which strategy is translated into macro-goals and involves both the political leaders and the senior administrators of the organisation. Its guaranteed outcome must be clear goals and general feasibility. Senior management is subsequently responsible for goal deployment, in other words, the definition and validation of operating goals consistent with policy. Methodologies using top-down and bottom-up interactive processes have been developed to verify goal feasibility, which is crucial when challenging goals are set. An added advantage is that all levels are involved in goal definition and validation; this is extremely important to achieve broad involvement and empowerment in the execution phase.

Effective policy formulation and deployment is strengthened by definition of strategies, in other words scenarios that focus the organisation's operations on medium/long-term results. These scenarios are developed after analysis of the external context in which the organisation operates and assessment of previous performance.

The formulation of strategies increases the capacity for effective service implementation if it is supported by plans and programmes detailing the targets and results expected from each organisational unit; technically speaking, a target may be defined as such if it is accompanied by an indicator establishing the level of change to be achieved (expected result), the minimum value below which the target is not valid and the time in which the change is to be accomplished.

Experience with TQM models, including the CAF, has found that the innovative aspects of planning are frequently not fully grasped. Once the revolutionary scope and breadth of application of the PDCA cycle is understood, then the concept that satisfaction of the users of an activity depends on the degree to which their expectations are known – and what is done to meet those expectations – will follow naturally.

Whatever the activity, the first step is to understand the expectations of the users of that activity and of the other stakeholders directly or indirectly involved. It will then be clear that self-reference is wholly incompatible with equitable satisfaction of citizens' expectations. It will also be clear that the indicators and result-monitoring systems used in the subsequent execution phase must be defined during planning.

## **People**

TQM requires a change of perspective with regard to the role and importance of people: people are to be considered not as components of mechanistic/bureaucratic systems governed only by setting rules and checking results, but as the living, intelligent, creative part of the system. In any case, in a culture that tends to lack controls, the bureaucratic approach is a double loser. The organisation's leaders should help people achieve their often latent potential, through example, training, empowerment and delegation, broader involvement. It is nonsense to talk about continuous improvement and excellence without wider contribution from people, without activation of people's intelligence and commitment, in other words without the lever of personal motivation.

In an organisation pursuing excellence, relationships, interaction among people and groups, are fundamental, the means to create synergies and augment the capacity to generate value. Clearly, involvement of people, the request that they act as partners must be accompanied by appropriate rewards. Quality demands recognition of merit.

## **Partnerships and resources**

By definition, organisations seeking excellence mobilise all their resources in pursuit of their goal; above all they create synergies to enhance the value they intend to create. In addition to internal People-related synergies, they look for external synergies by identifying, involving and motivating strategic partners in the attainment of their objectives. This extends the range of stakeholders, parties who contribute to the creation

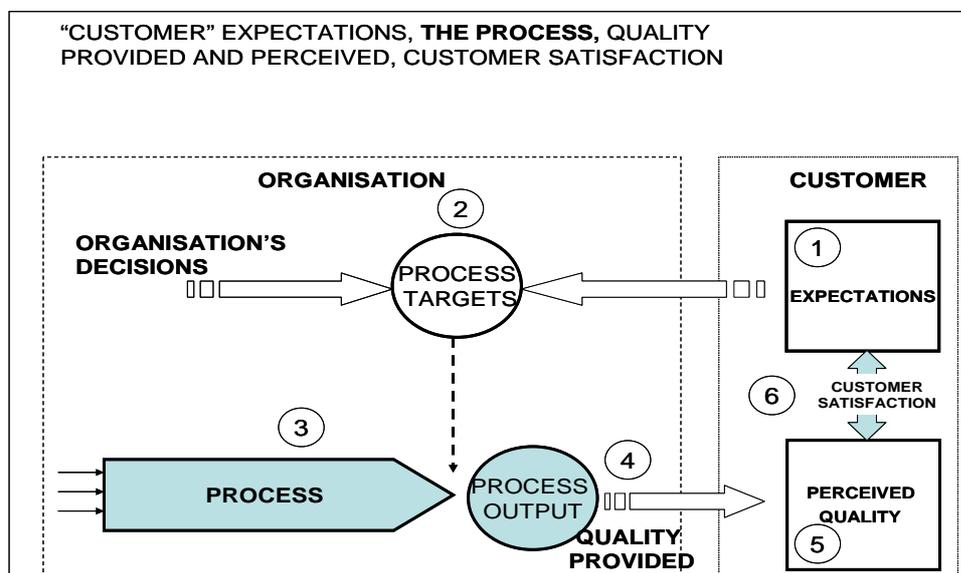
of the value sought by the organisation and who in turn obviously expect to generate value with respect to their own objectives. It is in this area that dynamic, open organisations can be clearly distinguished from bureaucratic, closed organisations. Partnerships are entirely optional, and it is up to the leader to find and develop them. As noted with regard to internal relations, the leader is more concerned with interactions than with actions.

As with the model's other criteria, the organisation should be prepared to take a fresh approach, to move beyond its customary positions. If it simply reviews the usual partnerships, it will reap few benefits. If, on the other hand, it looks around with an open mind and gives rein to its creativity, it will certainly identify relationships that can be developed into partnerships to help it better achieve its mission.

## Processes

Process-based management is another fundamental pillar of TQM. It is always worth making the effort, however great, to accept and internalise the term "processes", because the concept in question is a cornerstone of organisation culture and quality. Processes are "the cells where quality is generated and the links in the value chain". The most general definitions of process are (cfr. *Vocabolario della lingua Italiana*, Treccani 1991): "...any sequence of phenomena that presents a certain unity or is performed in an homogeneous and regular manner ..." and "...method used to achieve a specific purpose".

Figure 2



In the specific field of organisation and quality, a process is defined as an organised set of inter-related activities intended to achieve precise targets, which must satisfy the expectations of the process “customers”. Organised signifies that the process is designed to achieve a goal and is managed in order to limit variability. In its simplest representation, the process is characterised by the expected output of the process and by inputs. The inputs normally represented are those on which the process acts in order to obtain the output. The transformation of input into output is usually repetitive. The process has other inputs, but these come into play only during planning, re-planning, improvement, checking, and so can be ignored in normal representations.

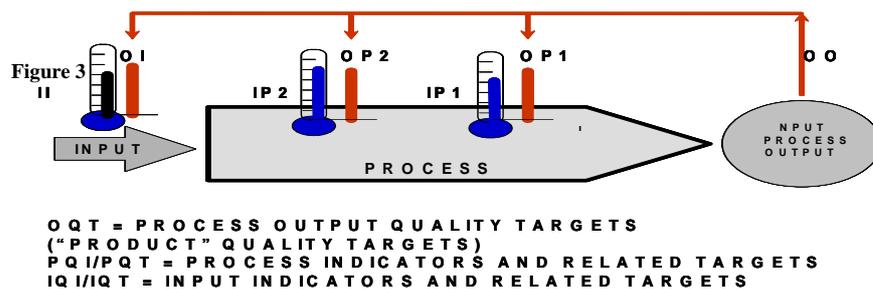
The figure above shows the process in context, which determines its significance. The purpose of a process is to meet the expectations of specific “customers”. Consequently, the process targets will depend on the expectations (phase 1), even though the process does not necessarily have to meet those expectations “blindly”. It is up to the organisation to decide on the degree of response by setting the process output targets (phase 2): in business relations, the response, i.e., the “value proposition”, is of critical importance in winning and retaining customers and so is a primary competitive factor. The competitive element may be absent in the public sector, but satisfaction of citizens expectations and those of internal and external stakeholders is nevertheless strategically important.

Once the process output targets have been established (the product/service), the process must be first planned and then managed to achieve those targets on a continuous basis (phase 3). The organisation will measure the “quality provided” (phase 4), while the “customer” will evaluate the “quality perceived” (phase 5) and relate this to their expectations, to achieve a global level of satisfaction (phase 6).

It should be stressed that the process manager will be able to guarantee the defined output only if process performance can be monitored with suitable internal process indicators and input indicators.

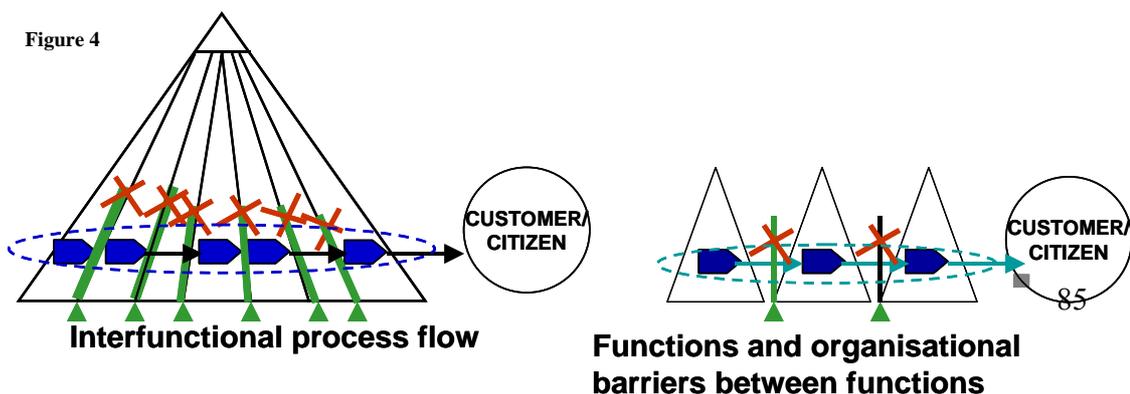
- Processes must therefore be seen as the area of measurement.
- If something is not measured, it cannot be managed, let alone improved.
- Any variable, including intangible variables, can be measured, provided the measurement concept is sufficiently broad.
- With regard to intangibles, reference is made to “intersubjective measurements”, based on a clear verbal definition of the significant qualities of the variable to be measured; on a rigorous definition of the skills needed to express an opinion and the criteria to be adopted; on formal delegation of measurement procedures to a team of qualified experts.

In service processes, in addition to the process indicators used to monitor specific quality elements (for example, learning parameters for a training process), the time factor is usually very important (for example, for a judicial proceeding, the time taken by the proceeding). Without indicators for the various time periods, without *a priori* targets, without monitoring, without checking, it is by no means certain that the global target will be achieved.



When a process is organisationally well integrated, that is, when responsibility is clearly attributed to a single manager, process management is simply a technical problem, a question of defining indicators and using them to check output. In some cases, however, processes assume complex dimensions, covering various organisational areas and involving multiple responsibilities (and when many managers are responsible, then no one is). The organisational problems involved in management of these interfunctional processes may be far greater than technical concerns. Organisational integration and unitary responsibility for quality, costs and time acquire fundamental importance.

The concept is illustrated in the figure below. Traditional "functions" are shown as vertical divisions of the organisation pyramid, while the "processes" operate along largely horizontal lines. When a process is interfunctional, barriers to communication and cooperation will inevitably be created to a greater or lesser extent. The more bureaucratic the organisation – in the sense that it has a strongly hierarchical, pyramid structure with strictly defined roles and tasks – the higher the organisational barriers will be. But satisfaction of customer expectations, execution times and global costs will be adversely affected by organisational barriers. The aim of organisational integration is to eliminate these barriers.



Figures 3 and 4 show an interfunctional process in a single public agency and a process flow crossing a series of agencies before reaching the “customer”. In this case too, integration is vital to satisfy the customer and optimise time and costs. Lack of integration among agencies is the most common cause of dissatisfaction, for example of the “corporate customer” waiting for an application approval when the time factor is critical. Bureaucracy even manages to neutralise the benefits of computerisation and telecommunication technologies, when multiple agencies are involved and no one is able to undo the bureaucratic Gordian knot. The problem can be resolved only by designating a single manager to coordinate the team of managers of the individual processes (with a team leader or process owner).

The need for integration stems from the realisation that processes not only form the “value chains” that generate the value requested by citizens/customers and other stakeholders, they are also cost and time chains, which, in the absence of compelling competitive pressures, tend to grow, often out of all proportion. Integration means creating the optimal conditions to maximise value and minimise cost and time.

A final important point needs to be made about processes. The PDCA sequence also applies to the process, since the process has to be designed to meet “customer” expectations, managed with appropriate techniques, measured, assessed, corrected when necessary, improved.

### 3. The basic principles of TQM models: how to analyse results.

Before the advent of TQM models, quality models did not include “Results”; they stopped with “Enabling Factors”, known at the time as the “Quality System”. This was because the models in question were used *a priori*, before results had been obtained, to assess the ability of the system to generate results. Consequently, they were known as “quality assurance” systems. They were also based on the somewhat deterministic assumption that validation of the quality of the means would also ensure the quality of the results. The assessment, known as an “audit”, evaluated *compliance* with the model, which thus acquired the status of a standard, and was performed by an independent body. It consisted of a bureaucratic audit (based on a check list) of the compliance of the organisation’s internal standards and procedures (described in a “Quality Manual”) with the chosen reference model and the match between actual conditions with the descriptions in the manual.

The fallacy of the assumption that compliance with a model “of good practice” was a sufficient assurance of quality was revealed in 1970/80, when a number of major Western multinationals suffered severe market setbacks, despite their sophisticated quality systems, rigorous check procedures and detailed documentation. They were defeated by the dissatisfaction of their customers, who based their final opinion on results, not on the methods used to achieve results. And they were defeated by companies who took user expectations into account when planning products and services, and subsequently checked the degree to which those expectations were satisfied.

The revolutionary aspect of TQM was the extension of quality models to include *performance results*, subdivided into specific Criteria as described above in section 1.2, beginning with the results perceived by the users of those results. Together with the “Enabling Factors”, now valued no longer simply in terms of compliance but also in terms of suitability, the organisation’s actual performance (what it actually achieves) is measured: its “Results”, viewed as the yardstick of the *effectiveness* of its activities.

The logic behind this approach is represented in figure 2 on page 8, which shows the fundamental distinction between “*quality provided*”, which can be measured by the provider as process output, and “*perceived quality*”, which can only be measured by questioning the user (customer or stakeholder). This distinction justifies the importance of *perceived quality* in the definition of the Criteria used by TQM models as guidelines for analysis of results. Perceived quality may diverge from quality provided for many reasons – and it is up to the provider to identify those reasons and take action to bring his measurements into line with user perceptions.

The results Criteria cover the various categories concerned with the organisation’s results: citizens/customers, who are the direct beneficiaries of the value generated by the organisation, and the stakeholders: the organisation’s people, society, the organisation itself in its bid to improve effectiveness and efficiency.

Together with the results perceived by the users, indicated as “external results” (perceived quality in the true sense), the Criteria also consider “internal performance

results". These are measured with indicators (whose significance is directly proportionate to the match with user perceptions) designed to provide managers with real-time feedback on their effectiveness (perception indicators are important, but by definition not immediate).

In measuring results, a distinction should be made between:

- output results (achievements): measured by the provider at the end of the process and intended to be perceived as such by users;
- outcome results: users' perception with respect to the effects intended by the provider.
- impact results: effects on direct and indirect users over and beyond intended results.

Analysis of results naturally comprises an assessment not just of the organisation's achievements, but also of the utility and on-going sustainability of those achievements. Specifically, utility is the capacity to bring about a positive change with regard to the problems of the community (a reduction in pollution, for example) or those of specific categories of users with needs (for example, the need for rapid imposition of a penalty for a wrong suffered). Sustainability concerns the ability to maintain over time an action and its characteristics (intrinsic quantity and quality) in financial and organisational terms. In short, the basic idea is to analyse results in terms of changes observed in the situation of users after an action, compared with the previous situation.

### **Citizen/customer results**

Since the activities of public agencies are legitimised by the fact that their purpose is to respond to the needs and requests of society, the opinion of users is significant for adequate planning and delivery of public services. This should be carried out with the PDCA approach, in the awareness that although gaps between quality provided and expected quality are inevitable, weaknesses in planning and/or delivery can be corrected through timely feedback from users and gradual adjustments/improvements. Proximity to citizens/customers – through organised feedback networks – enables the agency to acquire the information needed for improvement, not only through formal customer satisfaction surveys, but on an on-going basis. It should be stressed that continuous improvement of services is possible only if networks of this type provide information rapidly. The quality of information is more important than quantity, and speed is a component of quality.

In analysing the results of the services provided to respond to citizen/customer needs and questions, an activity obviously at the heart of the performance of any organisation since it relates to its institutional mission, priority must be given to this *network* and information quality approach, since this is the only way to trigger a dynamic pursuit of excellence. Even if the quantity of data is small at first (a fairly normal situation), the important point is to identify the information flows to be built between provider and user and vice versa, and to move in that direction, step by step.

Since public agencies operate through various channels, for various purposes, there are corresponding differences in the ways citizens and companies acquire experience of public agencies. Specifically:

- there is a difference between the production of services and the production of rules: services address direct users, or beneficiaries, whereas the production of rules does not affect parties with needs but parties (the “users” of the rules) who are induced to change their operations to improve the condition of other categories (for example, the courts are the “users” of rules governing management of legal proceedings, to the benefit of those whose rights must be protected); in this particular case, the opinions of the “users” of the rules are important too, to ensure that they are not excessively penalised;
- for some services, it is important to identify clearly who can provide a useful opinion; generally speaking, preference should be given to those who interact direct with the provider during service “delivery”. In some cases, it is not the end beneficiary who interacts with the provider, but an intermediary (barristers, assessors, accountants, surveyors, etc.) or specific officers. So assessment of opinions should be diversified.

### **People results**

People results reflect the outcome of action relating to the management and enhancement of the organisation’s human resources, regarded as one of the organisation’s key stakeholder groups.

Mutual satisfaction in relations between the organisation and its people is a key factor in performance quality, in all fields. Assessment of people results should therefore verify the relationship between the two and – even more important – whether and to what degree the two parties merge to form a “system” designed to satisfy the needs of customers, of society, of the organisation itself. Clearly, personnel surveys should not only measure the satisfaction of people’s needs, but also their engagement with and commitment to attainment of the organisation’s goals. People are the best sensors for monitoring service users’ expectations and perceptions and transmitting them to management in real time (provided that management listens), and of course for gathering information on the state of internal processes, where their role is sometimes that of provider, sometimes of manager, sometimes of user. Generally speaking, TQM underlines the importance of the opinion of the people involved in the various phases of work processes, particularly in identifying and introducing management improvements.

Listening to people therefore has a number of objectives and can be achieved in a number of ways. Climate/satisfaction surveys address people chiefly as parties with needs and expectations. The questionnaires must be well organised, the survey must ensure that people believe the organisation will listen to them. This trust must be confirmed by the transparency of results and evidence that results are given full consideration. Surveys that give the impression that there will no follow-up, analysis or action are counterproductive.

Another listening tool are surveys that see people as active contributors. These surveys relate to people's role in the organisation and aim to highlight areas for possible improvement. They can be "gold mines" for organisations and leaders who use them on a regular, systematic basis. As with external customers – but even more importantly in the case of people, given their proximity – networks should be built to channel information on a continuous basis, and in any case on specific occasions when management requires everyone's attention. Self-assessment should be one of those occasions.

People working at the various levels of the organisation can provide useful information and opinions:

- about the organisation's overall image, the level of awareness and engagement with respect to the organisation's values and missions and to conflicts of interest;
- about the way management handles roles and functions, and about management systems and workplace conditions: climate, culture, sensitivity to social issues and equal opportunities.

The quality of activities directly relating to personnel treatment should also be analysed: recruitment, management and enhancement (assessment, training, careers, etc.). Taking these three categories as a basis, a number of indicators can be defined for systematic measurement of information and data in order to assess the consistency of the organisation's targets with its attitudes (age, gender, potential, career paths, rewards for merit, development of competences, etc.).

### **Society results**

Given that the goals and consequences of public policies go beyond the requests and needs of direct beneficiaries, generally speaking the literature on assessment draws attention to the influence of public-sector activities on society as a whole (including possible negative consequences on certain groups of citizens as a result of activities that in themselves are positive). This is the specific area of self-assessment known as "impact analysis". It is a vast subject, but attention should be drawn to a number of priorities that must not be neglected.

The first priority is the need to survey the satisfaction not only of beneficiaries, but of all stakeholders with respect to a particular policy or service: in short, all the players in the "service chain". Specifically, society results include the various parties – other than direct beneficiaries – with "a vested interest" in the action taken by the organisation to achieve its missions, who are involved in the "chain" from input to delivery of the service and its effects. Examples include the suppliers of the goods and services needed to complete the activity; players who implement the activity on behalf of the institutions; users whose interests are directly or indirectly affected, possibly in a negative sense; experts, the mass media.

A second priority is to check for unexpected consequences arising from the organisation's activities:

- a) analysis of unexpected negative effects on any category;

- b) analysis of any other positive effects not considered by the initial objectives.

A third priority is analysis and assessment of how, in pursuing its missions and primary goals, the organisation takes account of other fundamental problems concerning the community or specific groups of citizens, whose importance is of interest to all citizens. In the corporate sector, this is known as “corporate social responsibility”. Important issues in this area include:

- attention to deprived or disadvantaged groups (the disabled, etc.);
- focus on conduct and decisions consistent with the principles of environmental sustainability and the environmental impact of activities (e.g., support for employee carpools, energy and resource savings, differentiated waste collection, etc.);
- attention to ethical conduct (e.g., support for fair trading, cooperation with developing nations, development of citizenship rights, integration of minorities, ethical organisations, support for civic and cooperative involvement in local communities, etc.).

Society results should therefore be an analysis of the impact of public-sector activities not just on the direct beneficiaries of services, but on the social and economic fabric of the community as a whole. The analysis should bear in mind the following suggestions:

- concentrate on the core missions of the organisation;
- identify all stakeholders involved in implementation of activities, that is parties with an interest in the production process (suppliers, operators) and in the results of activities (excluding direct beneficiaries);
- collect their opinions;
- identify benefits and any costs arising from activities in qualitative and quantitative terms;
- take account of the opinions of citizens and the media.

### **Key performance results**

Key performances relate to “everything the organisation indicates as essential”. This is a somewhat subjective criterion, but the assessment is the responsibility of management.

A parameter to identify the most strategically important results is the value of the organisation’s activities in reducing the needs and improving the conditions of the community (cfr. figure 5 on page12). But attention should also be given to the internal workings of the organisation.

The following should be therefore be measured and assessed:

- external results, especially in terms of the effectiveness of policies and services;
- significant internal results, relating to management and, in particular, to improvement and innovation.

As far as external results are concerned, factors to be measured and assessed should include:

- improvement of products and services;
- improvement of costs and times with an impact on external parties;
- recognition expressed by citizens/clients and stakeholders;
- results of benchmarking/benchlearning activities.

As far as internal results are concerned, indicators relating to the use of available financial resources are significant, including:

- expenditure capacity, when using operating funds, that is the ability to engage and pay service providers within the agreed terms, or to provide users with money in a timely manner, in compliance with reference standards;
- the consistency of expenditure with agreed targets;
- minimisation of costs per product unit (management efficiency); for example, the cost of one minute of wire-tapping;
- efficient use of production factors (personnel, equipment); for example, reduction of absenteeism; use of car fleets; etc.
- cost effectiveness, with regard both to compliance with income and expense ratio targets and to the maintenance or reduction of spending on supplies per product unit.

With reference to both external and internal results, the ability to build partnerships and to develop and manage innovation (two activities that are frequently linked) must be carefully assessed.

The ability to build partnerships with other external parties is related to the ability to recognise and take advantage of opportunities to boost available resources in order to resolve mission-critical problems. Cooperation with other parties can be a way to increase information and knowledge, or to gain access to greater financial resources, to lobby other parties more effectively, to share responsibility for results, to increase the chances of success in complex decision-making processes.

The ability to develop organisational innovations through action on enabling factors (governance and management processes) is important in improving the effectiveness of the services provided. Particular importance is attached to this question by the management analysis tool known as the “balanced scorecard”. Basically, the aim is to evaluate the ability to promote and implement change projects as a way to resolve mission-related collective problems more effectively and to enhance the organisation’s legitimacy with respect to the other parties involved in the same areas of operation.

## **Annex II**

### **European Declarations concerning quality assurance in education**

In higher education, the term quality assurance refers to all the policies, ongoing review processes and actions designed to ensure that institutions, programmes and qualifications meet specified standards of education, scholarship and infrastructure.

Quality assurance relies on stakeholder engagement and aims to guarantee and further enhance the quality of higher education provision.

The Standards and Guidelines for Quality Assurance in the European Higher Education Area adopted by Ministers in 2005 and commonly referred to as European Standards and Guidelines (ESG) provide guidance on quality assurance to agencies and institutions.

The European Quality Assurance Register for Higher Education (EQAR) set up in 2008 is designed to list those agencies which operate in accordance with the European Standards and Guidelines and the appropriate national legal provisions. The Register aims to increase confidence and transparency regarding quality assurance – and ultimately qualifications – in higher education.

### **Bologna 1999**

Promotion of European cooperation in quality assurance with a view to developing comparable criteria and methodologies. Promotion of the necessary European dimensions in higher education, particularly with regards to curricular development, interinstitutional cooperation, mobility schemes and integrated programmes of study, training and research.

### **Prague 2001**

**Promotion of European cooperation in quality assurance.** Ministers recognised the vital role that quality assurance systems play in ensuring high quality standards and in facilitating the comparability of qualifications throughout Europe. They also encouraged closer cooperation between recognition and quality assurance networks. They emphasised the necessity of close European cooperation and mutual trust in and acceptance of national quality assurance systems. Furthermore, they encouraged universities and other higher education institutions to disseminate examples of best practice and to design scenarios for mutual acceptance of evaluation and accreditation/certification mechanisms. Ministers called upon the universities and other higher education institutions, national agencies and the European Network of Quality Assurance in Higher Education (ENQA), in cooperation with corresponding bodies from countries which are not members of ENQA, to collaborate in establishing a common framework of reference and to disseminate best practices.

### **Berlin 2003**

The quality of higher education has proven to be at the heart of the setting up of a European Higher Education Area. Ministers commit themselves to supporting further development of quality assurance at institutional, national and European level. They stress the need to develop mutually shared criteria and methodologies on quality assurance.

They also stress that consistent with the principle of institutional autonomy, the primary responsibility for quality assurance in higher education lies with each institution itself and

this provides the basis for real accountability of the academic system within the national quality framework.

Therefore, they agree that by 2005, national quality assurance systems should include:

- ⇒ A definition of the responsibilities of the bodies and institutions involved.
- ⇒ Evaluation of programmes or institutions, including internal assessment, external review, participation of students and the publication of results.
- ⇒ A system of accreditation, certification or comparable procedures.
- ⇒ International participation, cooperation and networking.

At the European level, Ministers call upon ENQA through its members – in cooperation with the EUA, EURASHE and ESIB – to develop an agreed set of standards, procedures and guidelines on quality assurance, to explore ways of ensuring an adequate peer review system for quality assurance and/or accreditation agencies or bodies, and to report back through the Follow-up Group to Ministers in 2005. Due account will be taken of the expertise of other quality assurance associations and networks.

### **Bergen 2005**

Almost all countries have made provisions for a quality assurance system based on the criteria set out in the Berlin Communiqué and with a high degree of cooperation and networking.

However, there is still progress to be made, in particular as regards student involvement and international cooperation. Furthermore, we urge higher education institutions to continue their efforts to enhance the quality of their activities through the systematic introduction of internal mechanisms and their direct correlation to external quality assurance.

We adopt the standards and guidelines for quality assurance in the European Higher Education Area as proposed by ENQA. We commit ourselves to introducing the proposed model for peer review of quality assurance agencies on a national basis, while respecting the commonly accepted guidelines and criteria. We welcome the principle of a European register of quality assurance agencies based on national review. We ask that the practicalities of implementation be further developed by ENQA in cooperation with EUA, EURASHE and ESIB with a report back to us through the Follow-up Group. We underline the importance of cooperation between nationally recognised agencies with a view to enhancing the mutual recognition of accreditation or quality assurance decisions.

### **London 2007**

Quality Assurance and a European Register of Quality Assurance Agencies

2.12 The Standards and Guidelines for Quality Assurance in the EHEA adopted in Bergen (ESG) have been a powerful driver of change in relation to quality assurance. All countries have started to implement them and some have made substantial progress. External quality assurance in particular is much better developed than before. The extent of student involvement at all levels has increased since 2005, although improvement is still necessary. Since the main responsibility for quality lies with HEIs, they should continue to develop their systems of quality assurance. We acknowledge the progress made with regard to mutual recognition of accreditation and quality assurance decisions, and encourage continued international cooperation amongst quality assurance agencies.

2.13 The first European Quality Assurance Forum, jointly organised by EUA, ENQA, EURASHE and ESIB (the E4 Group) in 2006 provided an opportunity to discuss European developments in quality assurance. We encourage the four organisations to continue to organise European Quality Assurance Fora on an annual basis, to facilitate the sharing of good practice and ensure that quality in the EHEA continues to improve.

2.14 We thank the E4 Group for responding to our request to further develop the practicalities of setting up a Register of European Higher Education Quality Assurance Agencies. The purpose of the register is to allow all stakeholders and the general public open access to objective information about trustworthy quality assurance agencies that are working in line with the ESG. It will therefore enhance confidence in higher education in the EHEA and beyond, and facilitate the mutual recognition of quality assurance and accreditation decisions. We welcome the establishment of a register by the E4 group, working in partnership, based on their proposed operational model. The register will be voluntary, self-financing, independent and transparent. Applications for inclusion on the register should be evaluated on the basis of substantial compliance with the ESG, evidenced through an independent review process endorsed by national authorities, where this endorsement is required by those authorities. We ask the E4 group to report progress to us regularly through BFUG, and to ensure that after two years of operation, the register is evaluated externally, taking account of the views of all stakeholders.

#### **Leuven 2009**

##### **Student-centred learning and the teaching mission of higher education**

We reassert the importance of the teaching mission of higher education institutions and the necessity for ongoing curricular reform geared toward the development of learning outcomes. Student-centred learning requires empowering individual learners, new approaches to teaching and learning, effective support and guidance structures and a curriculum focused more clearly on the learner in all three cycles. Curricular reform will thus be an ongoing process leading to high quality, flexible and more individually tailored education paths. Academics, in close cooperation with student and employer representatives, will continue to develop learning outcomes and international reference points for a growing number of subject areas. We ask the higher education institutions to pay particular attention to improving the teaching quality of their study programmes at all levels. This should be a priority in the further implementation of the European Standards and Guidelines for quality assurance.