BROMSGROVE DISTRICT COUNCIL

19 JUNE 2007

PERFORMANCE MANAGEMENT BOARD

SELF ASSESSMENT OF CURRENT POSITION AGAINST THE DATA QUALITY KEY LINES OF ENQUIRY

Responsible Portfolio Holder	Councillor Roger Hollingworth Leader of the Council
Responsible Head of Service	Hugh Bennett Assistant Chief Executive

1. <u>SUMMARY</u>

This paper provides an assessment of the Council's current position against the Audit Commission's Data Quality Key Lines of Enquiry (KLOE's), as requested by Performance Management Board at the meeting in May.

2. <u>RECOMMENDATIONS</u>

2.1 That The Board notes the current position

3. BACKGROUND

- 3.1 This report follows from the report considered at the previous meeting which set out the Council's data Quality Strategy and Action plan.
- 3.2 A six month update on progress on implementation of the Data Quality Action plan will be brought to the Board meeting in October 2007

4. CURRENT POSITION AGAINST THE KLOE's

4.1 Appendix 1 shows the current self assessment position against the KLOEs. The key is contained in the header.

5. FINANCIAL IMPLICATIONS

5.1 No financial implications

6. LEGAL IMPLICATIONS

6.1 No Legal Implications

7. CORPORATE OBJECTIVES

7.1 Improved quality of data contributes to management of performance thus to the objective of improving performance.

8. <u>RISK MANAGEMENT</u>

8.1 There are no risk management issues

9. CUSTOMER IMPLICATIONS

9.1 None

10. OTHER IMPLICATIONS

Procurement Issues: None.		
Personnel Implications: None		
Governance/Performance Management: see 7.1 above		
Community Safety including Section 17 of Crime and Disorder Act		
1998: None		
Policy: None		
Environmental: None		
Equalities and Diversity: None		

11. OTHERS CONSULTED ON THE REPORT

Portfolio Holder	No
Chief Executive	No
Corporate Director (Services)	No
Assistant Chief Executive	Yes
Head of Service	No
Head of Financial Services	No
Head of Legal & Democratic Services	No
Head of Organisational Development & HR	No
Corporate Procurement Team	No

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12. <u>APPENDICES</u>

Appendix 1 Key Lines of Enquiry Self Assessment

13. BACKGROUND PAPERS

None

CONTACT OFFICER

Name:John Outhwaite, Interim Senior Policy & Performance OfficerE Mail:j.outhwaite@bromsgrove.gov.ukTel:(01527) 881602

Self Assessment of Management Arrangements for data quality against Key Lines of Enquiry (KLOE) Position as at may 2007 Key – Green box – currently achieving this level, Amber box – nearly achieving this level. *Text in italics is summary evidence*

performance? Key line of enquiry 1.1 Responsibility for data quality is clearly defi	inod	
Audit Focus	ilieu.	
Evidence that:		
 there is top level commitment to data quality 	ality: and	
• the council acts on this commitment, to s		
Criteria for Judgement		
Level 2	Level 3	Level 4
1.1.1 Responsibility for data quality has been assigned within the council, although this may have been assigned to a number of individuals and is not at top management level.	 1.1.5 An individual at top management level has overall strategic responsibility for data quality. Assistant Chief Executive has overall strategic responsibility for DQ 	1.1.9 The council has a member lead for data quality issues and this role is undertaken effectively. Members should have received training on the importance of data quality and should also have an awareness of the arrangements the council has put in place to mitigate the risks associated with poor quality data.
 1.1.2 Issues relating to data quality are considered and reported at least to departmental managers. Senior Policy & Performance Officer with responsibility for DQ reports issues to PI owners, Departmental Performance contacts and, sometimes, Heads of Service 	 1.1.6 Issues relating to data quality are considered by and reported to those charged with governance, e.g. to directors or heads of service. Senior Policy & Performance Officer in CCPP and ACE bring issues of data quality to the attention of HoS 	
 1.1.3 The council's commitment to data quality (for example, the importance of, and arrangements for, securing the quality of key data) is outlined in key strategic documents, such as the corporate performance plan or performance management framework. A Data Quality Strategy has been developed, it will be submitted to Cabinet for approval in June, but work on implementation has 	1.1.7 The corporate commitment to data quality is actively promoted, making clear to relevant staff their responsibility for data quality (eg accuracy, completeness, timeliness).	1.1.10 Data quality is fully integrated into the council's planning, monitoring and reporting processes.

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already begun. The PMF will be updated to include specific references to DQ 1.1.4 Accountability arrangements for data quality are developing, but these may not yet	1.1.8 Accountability for data quality throughout the council is clearly and formally
be applied or required in all areas of the council, or be formally defined.	defined for relevant staff and is considered as part of the corporate performance appraisal process for those staff.
The DQS has been presented to Heads of Service and their Departmental Performance contacts. Ownership for each corporately reported PI (BVPI's and local PI's) has been established through the 2006/07 PI certification/sign off process. New Corporately reported PI's will have owners	
established within the next 2 months. It is planned to ensure that responsibility for performance data and data quality is included within job descriptions wherever relevant.	

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Key line of enquiry			
1.2 The council has clear data quality objectives and these are formally documented.			
Audit Focus			
Evidence that:			
 specific data quality objectives have bee 			
there is a plan for delivery of these object	tives.		
Criteria for Judgement	1	1	
Level 2	Level 3	Level 4	
1.2.1 Arrangements for data quality management are developing, but may not yet be formalised in strategic or planning documents.	1.2.4 There is evidence of a strategic approach to data quality in one or more key council documents. <i>Council Results document includes</i>	1.2.7 A formal strategy for data quality is in place and has been approved at top management level. The strategy covers all departments and functions.	
DQS developed, corporate responsibility assigned, DQS being rolled out.	reference to DQS		
1.2.2 The organisation has begun to focus on data quality, but this work has so far been driven departmentally rather than corporately.	1.2.5 Corporate objectives for data quality are formally defined and are linked to business objectives. These have been agreed and adopted at top management level. <i>Improvements to Data Quality is a key</i> <i>deliverable in the CCPP Business Plan</i> ,	1.2.8 Challenging data quality objectives have been set for all individual departments or functions.	
1.2.3 The organisation is working to improve data quality, but there may be no defined milestones, targets or monitoring.	 1.2.6 There are plans to deliver quality data, with clearly identified actions, responsibilities and timescales to support improvement. This is reflected in an appropriate document eg. the corporate plan. The DQS contains an action plan with responsibilities and timescales. Progress will be monitored on a six monthly basis by the Performance Management Board 	1.2.9 Regular monitoring of the delivery plan can demonstrate that data quality objectives are being achieved.	

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Key line of enquiry1.3 The council has effective arrangements forAudit FocusEvidence that:• there is a framework in place for monitor• there is a formal programme of review of	ing performance in relation to data quality; and	
Criteria for Judgement		
Level 2	Level 3	Level 4
 1.3.1 Monitoring and review of data quality has been undertaken, although this has primarily been on an ad hoc basis rather than via an explicit framework. Senior Policy & Performance Officer in CCPP has reviewed data quality of a number of PI's with departments, but so far, this has been ad-hoc. It is planned to introduce Internal Audit DQ checks as part of the implementation of the DQS. 	1.3.3 There is a framework in place which has led to action to address the results of internal and external data quality reviews.	1.3.5 There is a framework for monitoring and review of data quality, with regular formal reporting on the accuracy of data supporting key performance indicators. Examples of good practice in securing data quality are shared and promoted for adoption to all relevant staff.
1.3.2 The council has begun to consider data quality as part of its corporate risk management arrangements.DQ appears in the CCPP risk register	1.3.4 Data quality is embedded in corporate risk management arrangements, with regular assessments of the risks associated with unreliable and inaccurate information.	1.3.6 Where appropriate, risks associated with data quality have been fed through to the production of the statement on internal control.

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Audit FocusEvidence that:organisational policy for data quality has boperational procedures and guidance meet	been defined and is supported by a current set	of operational procedures and guidance.
Criteria for Judgement		
Level 2 2.1.1 Senior management has defined and approved data quality policies at individual operational or departmental levels. Data Quality Strategy & Implementation plan	 Level 3 2.1.3 A comprehensive data quality policy has been defined and approved by senior management. This covers: data collection, recording, analysis and reporting; and all business areas. It also includes any relevant national standards and requirements, as well as defining local practices and monitoring arrangements. 	Level 4 2.1.5 The data quality policy covers data quality requirements in relation to partnership working, where relevant. (see KLOE 3.4 on shared data)
 2.1.2 There are some procedures and guidance notes in place but these do not yet cover: all aspects of data collection, recording, analysis and reporting; and/or all business areas. DQS provides overall guidance. Some procedures exist. DQS implementation will deliver procedures for all PI's. 	2.1.4 The council's data quality policy is supported by a comprehensive and current set of operational procedures and guidance notes that meet user needs and are fit for purpose.	 2.1.6 The council can demonstrate that: data quality procedures and guidance notes are reviewed at least annually and updated when needed; operational processes and guidance continue to be developed and updated; relevant staff are fully involved in the development and updating of data quality policies, procedures and guidance notes.

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Key line of enquiry 2.2 Policies and procedures are followed by staff and applied consistently throughout the organisation.			
Audit Focus			
Evidence that:			
	 processes are carried out in line with established policy and procedures. 		
Criteria for Judgement			
Level 2	Level 3	Level 4	
2.2.1 Relevant staff are aware of the data quality policy, operational procedures and guidance and generally have access to them. <i>Implementation of the DQS will involve</i> <i>awareness training and development of</i> <i>relevant procedures</i>	2.2.3 All relevant staff are able to access the policies, procedures and guidance. Where possible this is supported by information systems or helpdesk provision.	2.2.5 Each department has been assigned a data quality champion (or equivalent) who promotes existing data quality policies and procedures and who regularly reviews and reports on compliance .	
 2.2.2 Policy or procedure updates are generally notified to staff on a timely basis, although some improvements could be made in this respect. Senior Policy & Performance officer informs all Departmental performance contacts of any changes to BV definitions etc. It is planned to develop procedures to support 	2.2.4 The council can demonstrate that it is proactive in informing staff of any policy or procedure updates and required standards on a timely basis.	2.2.6 The data quality champion (or equivalent) is effective in rectifying any non- compliance and can demonstrate an impact on data quality.	

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3. SYSTEMS AND PROCESSES		
Are there effective systems and processes in place to secure the quality of data?		
Key line of enquiry		
	r the collection, recording, analysis and reportin	g of the data used to monitor performance.
Audit Focus		
Evidence that:		
 systems (manual or computerised) produced 	uce data which is fit for purpose.	
Criteria for Judgement		
Level 2	Level 3	Level 4
3.1.1 There may be some minor weaknesses in the systems for data collection, recording, analysis and reporting, but action is being taken to address these. <i>Procedure notes to support gathering of</i> <i>performance data will be produced as part of</i> <i>the DQS action plan</i>	3.1.3 There are systems in place (which may be stand alone) for the collection, recording, analysis and reporting of corporate performance information which is based on data which is accurate, valid, reliable, timely, relevant and complete.	3.1.5 Systems from different departments are linked for reporting corporate performance information.
3.1.2 The council recognises the importance of these systems, whether manual or computerised, operating on a 'right first time' principle. Some work is needed to achieve this. Procedure notes to support gathering of performance data will be produced as part of the DQS action plan	3.1.4 Systems and processes operate according to the principle of 'right first time' rather than employing extensive data cleansing or manipulation processes to produce the information required. Arrangements for recording and reporting data are integrated into the council's wider business management processes, and support staff in their day to day work.	 3.1.6 Where appropriate, systems have eliminated the need for data cleansing and manipulation. System output is still however monitored. 3.1.7 The council consults effectively with staff when developing or implementing new information systems.

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Key line of enquiry 3.2 The council has controls in place to ensure that information systems produce the quality of data needed to report on performance and to keep top management aware of necessary action in relation to data quality.		
Audit Focus		
Evidence that:		
The council has appropriate controls to ensure that information systems produce accurate information.		
Criteria for Judgement		
Level 2	Level 3	Level 4
3.2.1 The council has some arrangements in	3.2.2 Performance information systems are	3.2.4 The council can demonstrate that:
place to review the effectiveness of controls.	subject to control mapping and testing to prevent and detect data manipulation and error.	 it is proactive in strengthening performance information system controls rather than merely reacting
Internal Audits initiated via the implementation of the DQS will achieve this	3.2.3 Controls are reviewed at least annually to ensure that they are working effectively.	to issues when detected.
	Results of annual reviews are reported to top management.	 it keeps senior management informed of identified issues and how these are being addressed.

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Key line of enquiry				
3.3 Security arrangements for performance information systems are robust, and a business continuity plan is in place.				
Audit Focus				
Evidence that:				
performance information systems are see	cure, allowing the organisation to function under	r adverse circumstances.		
Criteria for Judgement				
Level 2	Level 3	Level 4		
 3.3.1 Security arrangements, including access control, are in place for the organisation's business critical performance information systems (e.g. procurement, cash management, HR/, payroll, social care, benefits, education) though there may be some weaknesses. <i>It is within the remit of Internal Audit to examine security arrangements and report to the Audit Board</i> 	3.3.2 The council regularly tests its business critical performance information systems to ensure that processes are secure. Reports are made to top management on outcomes. There are plans which are being implemented to address any identified weaknesses.	3.3.3 A business continuity plan is in place to provide protection for records and performance data which are vital to the continued effective functioning of the body. The organisation can demonstrate that it has carried out detailed risk analysis of current and future challenges to the robustness of its performance information systems and made changes to address any weaknesses identified. For example, this may manifest itself as scenario planning.		

3.4 Standards are specified for shared data or Audit Focus	data supplied by third parties.	
Evidence that:	ards for the quality of data it shares or relies on	internally and externally.
Criteria for Judgement		
Level 2	Level 3	Level 4
3.4.1 All instances of internal and external data sharing have been formally identified (e.g. with PCTs, police authorities and voluntary bodies to support LAAs and the children's joint area review (JAR)), but formal protocols or standards have yet to be developed.	3.4.3 Quality requirements are specified for all data used by the council which is supplied by another internal department, shared with external partners, or which is provided by a third-party organisation. This includes identifying and complying with all relevant legal, compliance and confidentiality standards.	 3.4.5 There is a formal data sharing protocol(s) which specifies the responsibilities of partners to provide data which is 'fit for purpose'. If the council contracts out services the service level agreement should state how performance is to be reported and that the data is of the required quality.
3.4.2 Third party providers of data may subject their data to their own quality controls, but the council is not able to or simply does not carry out any validity checks. <i>The Council recognises this weakness and is</i> <i>considering how to address it</i>	3.4.4 There are some processes in place to validate data from third parties eg. council staff check samples of data against source records, eg. the social services department may check the timesheets of home help carers where this service is contracted out.	3.4.6 The council seeks assurance that supplied data are of a reasonable quality e.g. a data quality assessment may be carried out by internal or external audit.

4. PEOPLE AND SKILLS				
Does the organisation have the resources in place to achieve quality data?				
Key line of enquiry				
4.1 The council has communicated clearly the responsibilities of staff, where applicable, for achieving data quality.				
Audit Focus				
Evidence that:				
	tion to data quality have been identified; and ata quality; and are putting the theory into prac	tice.		
Criteria for Judgement				
Level 2	Level 3	Level 4		
 4.1.1 The council has considered the roles and responsibilities needed within directorates, necessary to achieve data quality but has not yet formalised how these will work in practice. DQS has identified these, implementation has commenced with responsibilities being 	4.1.4 Roles and responsibilities of management and operational staff, in relation to data quality, are clearly defined and documented, eg. these may be incorporated into job descriptions.	4.1.7 The council can demonstrate that it has an effective internal network of data quality champions (or equivalent) that have successfully driven data quality improvement throughout the council.		
written into Job Descriptions 4.1.2 All staff are clear about their responsibilities in relation to data quality. Implementation of DQS will achieve this (& level 3)	4.1.5 Data quality targets and standards are set for relevant staff who are assessed against these.	4.1.8 Staff are proactively informed of the results of their efforts in ensuring data quality.		
 4.1.3 It is recognised that relevant staff need to be supported in their responsibility towards capturing quality data. Awareness & training seminars are being developed as part of the DQS action plan 	4.1.6 Relevant staff have access to guidelines when inputting data e.g. classification conventions, on-line help or quick reference guides to hand.	4.1.9 Information staff work closely with service level staff to address data recording problems and other data issues.		

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Self Assessment of Management Arrangements for data quality against Key Lines of Enquiry (KLOE) Position as at may 2007 Key – Green box – currently achieving this level, Amber box – nearly achieving this level. Text in italics is summary evidence

Key line of enquiry

4.2 The council has arrangements in place to ensure that staff with data quality responsibility have the necessary skills.

Audit Focus

Evidence that:

• the council has provided training to ensure that staff have the necessary skills and knowledge in relation to data quality.

Level 2	Level 3	Level 4
 4.2.1 Staff with specific responsibilities for data input or data quality have been identified and received ad hoc data quality training on a departmental basis. Ownership for PI's has been established, some training carried out. Implementation of the DQS will achieve level 3 	4.2.3 There is a formal programme of training (including updates when necessary) on data quality issues tailored to the varying needs of all relevant staff. Corporate arrangements are in place to ensure that this training is periodically evaluated and adapted to changing needs. <i>Awareness & training seminars are being</i> <i>developed as part of the DQS action plan</i>	4.2.5 The council can demonstrate that it has identified the implications and impact of future developments on data quality staff skills and capacity, and is proactively managing these.
4.2.2 Some departments are addressing weaknesses identified from data quality reviews through training but this has yet to be developed corporately.	4.2.4 Any weaknesses identified through internal or external reviews of data quality are adequately addressed through the training programme or debriefing and sharing good practice sessions. Debriefing and sharing of good practice, flagging up potential issues/problems takes place via the "Performance Plus User Group" – which is attended by Departmental Performance reps	4.2.6 The departmental data quality champion or information staff strengthen the feedback loops by identifying potential data quality issues through, for example, error reports, and see that they are addressed through front line staff training or briefing.

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Self Assessment of Management Arrangements for data quality against Key Lines of Enquiry (KLOE) Position as at may 2007 Key – Green box – currently achieving this level, Amber box – nearly achieving this level. *Text in italics is summary evidence*

5. DATA USE AND REPORTING Are there effective arrangements for the use of data for performance management and service improvement? Key line of enquiry 5.1 The council has put in place arrangements that are focused on ensuring that data supporting performance information is also used to manage and improve the delivery of services. Audit Focus Evidence that: reported performance information is actively used in the decision making process. **Criteria for Judgement** Level 2 Level 3 Level 4 5.1.3 Data used for reporting to those 5.1.1 Reported information is made available 5.1.5 Senior management routinely and to the operational staff who generate it, to charged with governance is also used for actively use data supporting performance reinforce understanding of the way it is used. day-to-day management and improvement of information to plan services and allocate the council's business. resources. Performance figures are discussed at DMT's and taken down through the organisation. Areas where performance is below target are candidates for 'Performance review' clinics led by the Director of Improvement 5.1.4 Reports relate performance information 5.1.6 There is evidence that management 5.1.2 Performance information is regularly used, to identify deviations from planned to specific targets in the business plan and action is taken to address service delivery issues identified by data returns and performance. are used to: monitor service delivery performance information reports. forecast year-end achievement Members have available to them high level information with which they can assess identify areas where action is needed. delivery of services in relation to agreed milestones. Monthly performance reporting compares performance in month to in month target. YTD performance to YTD target and estimated YE outturn to annual target. Corrective actions are set and considered by officers & members

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Audit Focus Evidence that:	ures in place to ensure the accuracy of data used	······································		
	e is subject to a system of internal control and va	lidation.		
Criteria for Judgement				
Level 2	Level 3	Level 4		
5.2.1 All BVPI data returns are supported by an audit trail, although there may be some weaknesses. <i>PI certification process in place</i>	5.2.4 Data returns to government departments, their agencies and regulators are supported by a clear and complete audit trail.	5.2.7 There is evidence of the outcome of effective quality assurance of the audit trail confirming accuracy of the data.		
5.2.2 Definitions are usually applied correctly to all BVPI data items and values are checked to be within valid ranges and respect counting rules. <i>PI certification process in place</i>	5.2.5 Data underpinning the information which is used for external reporting e.g. to AC, IPF, CLG, DH, is subject to departmental verification checks.	5.2.8 Councils have limited resources so all reported data is rigorously verified both departmentally and corporately, but the extent of this is informed by an analysis of the:		
···· , ···· , ···· , ····		 level of the risk of the data being mis- stated; 		
		 likelihood and impact of data errors; and 		
		 accuracy required in the reported performance. 		
5.2.3 Only some data e.g. BVPIs is signed off by a senior manager. Reported data is usually submitted on a timely basis.PI certification process in place, signed off by HoS	5.2.6 All data is subject to senior management approval prior to external reporting to regulators and government departments e.g. AC, IPF, CLG, DH, DEFRA and is submitted on a timely basis. <i>PI certification process for BVPI's and key</i> <i>local PI's</i>	5.2.9 A formal documented process for checking externally reported data/performance indicators, both departmentally and corporately, is in place to assure the quality of the data. An example (for this level) is given below.		