

# Corporate Data Quality Strategy

**FINAL DRAFT**

### Version control

Version	Date	Status	Issued to	Corporate Contact
1.0	04 <sup>th</sup> March 08	Initial Draft	Management Team	Mike Foy Snr Performance Management Officer Ext 1177 <a href="mailto:Mike.foy@halton.gov.uk">Mike.foy@halton.gov.uk</a>
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## 1.0 Background and Strategic Context

- 1.1 The 2006 Local Government White Paper '*Strong and prosperous communities*' and the more recent 2007 '*Local Government and Involvement in Health Act*' have set out a new legislative framework for the delivery of local services and the future relationship between central government and public bodies.
- 1.2 This framework will place greater reliance upon the use of good quality data as a foundation of the effectiveness of local performance management arrangements and their use in shaping the future delivery of local services and in providing accountability to local citizens and communities.
- 1.3 This new framework will introduce a number of significant changes to existing arrangements that will include: -
  - The introduction of a new National Indicator Set (NIS), from April 2008, that comprises 198 performance measures that all local authorities will have a duty to report. This suite of indicators replaces all existing nationally prescribed indicators, numbering around 1200, including Best Value Performance (BVPI's) and Performance Assessment Framework (PAF) indicators.
  - The strengthening of second round Local Area Agreements (LAA's) from April 2008 with some £5 billion of grant being mainstreamed to the period to 2011.
  - The evolution of the Corporate Performance Assessment (CPA) framework into a new regime of Comprehensive Area Assessments (CAA) from April 2009. This new approach reflects an increasing focus on outcomes in a place or area, i.e. what matters here and to whom, rather than the processes and service delivery mechanisms of individual agencies. Existing regulatory Direction of Travel (DoT) and Use of Resources (UoR) assessments for individual authorities will be maintained.
  - Local authorities management arrangements for securing data quality will become an explicit Key Line of Enquiry (KLOE 5.2) in the Use of Resources Assessments from April 2008. This reflects a move away from the extensive annual testing of a large number of BVPI's and results from recognition that such an approach had a number of limitations as described overleaf.

- 1.4 In previous years a large number of BVPI's were selected for scrutiny to ensure that reported levels of performance were auditable, definition compliant and accurate. However this approach had a number of primary weaknesses i.e.
- The audit process was time consuming and comparatively costly. Whilst it established that year-end performance data had been calculated and reported correctly it did not necessarily provide assurance to inspecting bodies that the in-year performance information, used in the decision-making or reporting processes of the authority, was of the same standard and;
  - The breadth of data used to underpin effective performance management frameworks extended beyond the nationally prescribed indicator data set and therefore the focus of such assurance arrangements was too narrow.
- 1.5 As a result of these considerations greater emphasis has been placed upon the authority's arrangements to secure the quality of its data. In order to encourage and assist public bodies to improve the quality of the data that they use, both as individual organisations and within local and regional partnerships, the Audit Commission have recently published a voluntary framework<sup>1</sup> based around the following key themes: -
- The governance of data quality.
  - The policies and procedures in place for data recording and reporting
  - The systems and processes in place to secure data quality
  - The knowledge skills and capacity of staff to achieve data quality objectives and
  - The arrangements and controls in place for the use of data
- 1.6 The guiding principles and standards enshrined within this framework have been fundamental to the development of this strategy.

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<sup>1</sup> Improving information to support decision-making: standards for better quality data (*Audit Commission*) November 2007 ([Insert hyperlink to document](#)).

## **2.0 Purpose of this strategy and Key Directorate Contacts**

- 2.1 The Council has for some time had in place arrangements for securing the quality of its data. It has however been recognised that whilst representing good practice such arrangements have, to some extent, been driven by the nature of the data in question, or the purposes for which it was being used, e.g. data of a confidential or highly personal nature or data used in the annual reporting and publishing of nationally prescribed performance indicators
- 2.2 Whilst present arrangements have served the authority well to date changes in the operating environment present further opportunities to develop a more consistent and strengthened approach to Halton's future management arrangements.
- 2.3 Additionally, as with all large organisations, there have over time been changes to both personnel and structures and it is therefore timely to reconsider how organisational intentions regarding data quality are expressed and communicated, and how existing good practice can be integrated and reflected within our corporate governance arrangements.
- 2.4 The purpose of this strategy therefore is to establish and communicate the authority's corporate data quality objectives and the means by which it will improve its management arrangements for securing data quality in the medium term. In order to ensure that this strategy remains fit for purpose, and incorporates any actions required as a result of inspection activity, it will remain subject to regular review.
- 2.5 This Data Quality Strategy forms part of the wider arrangements that the authority has in place, and may develop, concerning information management, which will include those relating to information governance, information security, data sharing and records management.
- 2.6 It will also take account of the authority's statutory responsibilities in relation to, for example,
- The Freedom of Information Act
  - The Data Protection Act.

- 2.7 The strategy primarily underpins the following Corporate Priority and associated Area of Focus, as detailed within the Halton Corporate Plan (2006 – 11).

**Corporate Priority 6:**

Corporate Effectiveness and Business Efficiency

**Area of Focus 33:**

Ensuring that we are properly structured and fit for purpose and that decision makers are supported through the provision of timely and accurate advice and information.

- 2.8 As a consequence of ensuring that effective data quality management arrangements are in place the strategy also complements the delivery of the authority's five remaining Corporate Priorities namely: -

- **A Healthy Halton**
- **Halton's Urban Renewal**
- **Halton's Children and Young People**
- **Employment, Learning and Skills in Halton**
- **A Safer Halton**

- 2.9 Although often used interchangeably the terms data, information, and knowledge have, for the purposes of this strategy, different meanings as illustrated within the table below. This document therefore focuses upon data as '***the basic facts from which information can be produced by processing or analysis***'.

*Table 1: Definitions of terminology<sup>2</sup>*

<b>Data</b>	Are numbers, words or images e.g. facts and figures that have yet to be organised or analysed to answer a specific question.
<b>Information</b>	Is produced through processing, manipulating and organising data to answer questions, adding to the knowledge of the receiver
<b>Knowledge</b>	Is what is known by a person or persons. It involves interpreting information received, and adding relevance and context to clarify the insights the information contains.

<sup>2</sup> As described by Audit Commission within Standards for better quality data (Nov 2007)

- 2.4 Directorate Data Quality Lead Officers have been identified to provide a primary contact within each of the authority's four Directorates and to assist in the implementation, monitoring and future delivery of this strategy.

Directorate representatives can be contacted as follows: -

<b>Children &amp; Young People Directorate</b>		
<b>Primary Contact(s)</b>	<b>Telephone</b>	<b>E-mail</b>

<b>Corporate and Policy Directorate</b>		
<b>Primary Contact(s)</b>	<b>Telephone</b>	<b>E-mail</b>
Mike Foy	Ext. 1177	<a href="mailto:Mike.foy@halton.gov.uk">Mike.foy@halton.gov.uk</a>

<b>Environment Directorate</b>		
<b>Primary Contact(s)</b>	<b>Telephone</b>	<b>E-mail</b>
Dave Unsworth	01928 516112	<a href="mailto:Dave.unsworth@halton.gov.uk">Dave.unsworth@halton.gov.uk</a>
Tim Ward-Dutton	01928 583913	<a href="mailto:Tim.ward-dutton@halton.gov.uk">Tim.ward-dutton@halton.gov.uk</a>

<b>Health &amp; Community Directorate</b>		
<b>Primary Contact(s)</b>	<b>Telephone</b>	<b>E-mail</b>



### 3.0 Corporate Data Quality Objectives

- 3.1 At a local level data is used to produce information for a number of purposes including; -
- Meeting the needs of both the individual and the community;
  - Understanding local circumstances and making decisions about the allocation of resources and levels of current and future service demand;
  - Identifying areas for improvement in future service delivery;
  - Monitoring and reporting upon the extent to which services are being delivered economically, efficiently and effectively and determining where intervention may be appropriate;
  - Communicating organisational and partnership priorities and providing stakeholder accountability.
- 3.2 At a national level locally produced data is used to assist regulators and government departments to form judgements about how well services are being delivered and establish national trends and future priorities.
- 3.3 Halton has identified five primary corporate objectives in relation to securing and sustaining data quality and these are: -

**Objective 1:** To provide assurance to all stakeholders that the quality of data used in decision making and in accounting for and reporting the performance of the authority, either directly or through partnership arrangements, is wholly fit for purpose

**Objective 2:** That, through a rigorous process of monitoring, review and refinement, the authority's arrangements for securing data quality remain relevant reliable and robust and that exemplary arrangements for securing data quality are achieved within the medium term.

**Objective 3:** That arrangements for securing data quality are widely shared, communicated and understood by all of those with data quality responsibility and that relevant staff are provided with timely and appropriate training, guidance and support.

**Objective 4:** That all departments, partners and agencies that deliver services on behalf of the Council use complete, accurate and verifiable data which is collected and communicated in an effective and timely manner.

**Objective 5:** That all data used in the calculation of nationally prescribed performance indicators is definition compliant and verifiable and that no such indicators will be amended or qualified as a result of work undertaken by inspecting bodies.

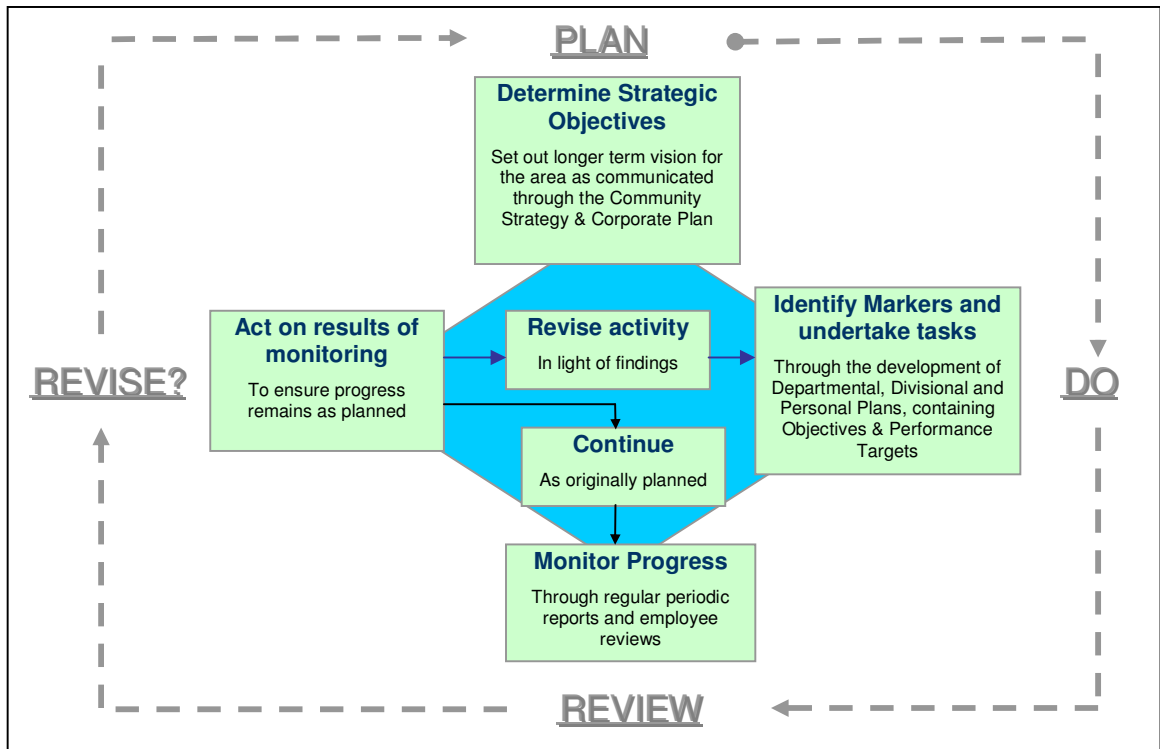
## 4.0 Good quality data and organisational context

- 4.1 Against the backdrop of changes to the operating landscape described previously it is becoming increasingly important for local authorities, and other publicly accountable bodies, to demonstrate that they have robust and widely understood arrangements in place to secure the quality of data and ensure that it is fit for purpose in managing and improving services, determining and acting upon shared priorities, and accounting for performance to inspecting bodies and the local community.
- 4.2 It is therefore important that the authority has in place mechanisms by which the quality of its data can be judged and that action can be taken where appropriate to address any weakness that may become apparent. Such judgements will be made using the six key dimensions of good quality data illustrated within the table below.

*Table 2: Six key dimensions of good quality data*

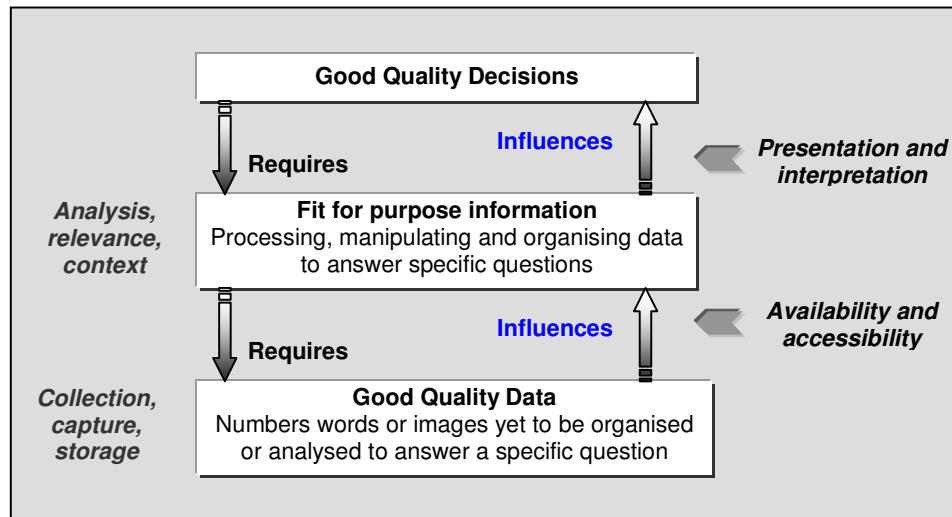
<b><u>ACCURATE</u></b>	For its intended purpose and although having multiple uses is, wherever possible, collected only once.  Where compromises on accuracy have been reached, e.g. in the interests of timeliness, resulting limitations of the data are made clear.
<b><u>VALID</u></b>	By being consistently recorded and used in compliance with relevant requirements including the correct application of definitions and rules.  Any proxy data being used meets its intended purpose.
<b><u>RELIABLE</u></b>	By reflecting stable and consistent data collection processes whether using manual or IT systems, or both, to assure stakeholders that changes in performance reflect real differences and not changes in collection methods.
<b><u>TIMELY</u></b>	By being captured and made available for use as quickly as possible after that activity or event. Data is available frequently enough to support information needs and influence decision making processes.
<b><u>RELEVANT</u></b>	Data that is captured is relevant for its purpose and periodic reviews are implemented to consider any changing needs and requirements.  Quality assurance and feedback processes are evident.
<b><u>COMPLETE</u></b>	Data requirements are clearly specified based upon the information needs of the organization and collection processes are matched to these requirements.  The monitoring of incomplete, missing or invalid data is avoided.

- 4.3 The authority's Corporate Planning and Performance Management Framework, as illustrated below, is the principle means by which operational day-to-day activity is aligned to the delivery of both organisational priorities and those that are shared with partners through the Local Strategic Partnership.



- 4.4 Although within this cycle data is regularly used at the monitoring stage it has to be remembered that the integrity of data is a crucial element in the successful planning of future service delivery and resource requirements.
- 4.5 Procedures and monitoring of data must complement and support other corporate arrangements such as: -
- Business Continuity and Risk Management arrangements, whereby risks are assessed in terms of probability and severity and mitigating actions are determined to minimise or neutralise such risks.
  - Local Area Agreement arrangements, whereby data is shared and used in support of partnership arrangements.
  - The discharge of the authority's statutory responsibilities e.g. the calculation and reporting of nationally prescribed performance indicators.

- 4.6 The diagram below illustrates the significance of good quality data and its relationship to both the provision of information and the decisions that flow from it.



- 4.7 The use of poor quality data can have a number of unwanted consequences, which can include: -

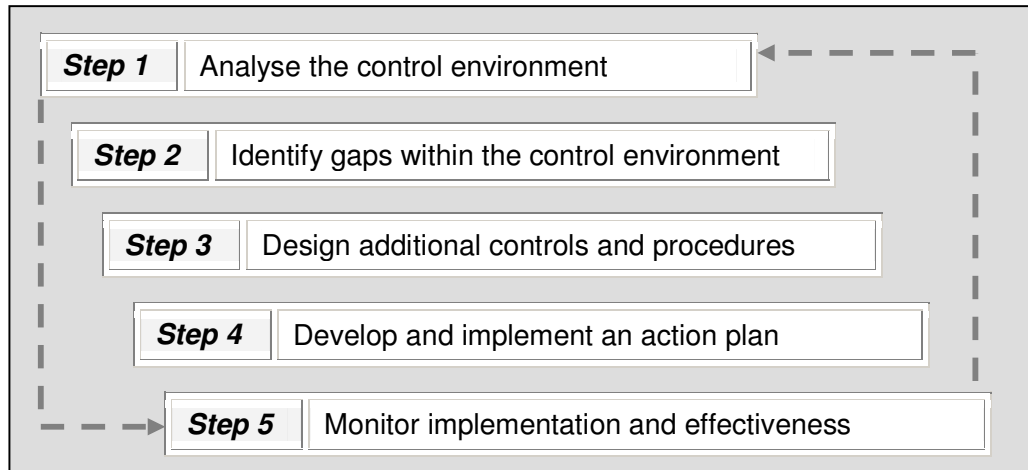
- The provision of misleading information leading to poor decision-making at an organisational or partnership level.
- Damage to the authority's reputation and credibility through the mis-reporting of performance.
- Missed opportunities to improve services and ineffective allocation of resources.
- Avoidable costs being incurred in 'cleansing' erroneous data.

- 4.8 In order to target limited resources most effectively the authority will take a risk-based and proportionate approach to identifying high-risk data systems.

- 4.9 There are a number of factors that may contribute to a system being considered high-risk and these are: -

- Where previous review activity has identified problems.
- Where there is a high volume of data transactions or where the data being captured is technically complex.
- Where new / inexperienced staff are involved in data capture or where there is a high turnover of personnel
- Where new manual or automated data systems are being used or where known gaps exist within the control environment.

- 4.10 Following the identification of such high-risk systems the following steps will need to be taken to ensure their integrity.



- 4.11 In using the six criteria described earlier for establishing good quality data, and based upon 'right first time' principles, the delivery of this strategy will provide assurance that the integrity of the authority's corporate planning framework is not compromised by the use of poor quality data.
- 4.12 Given that the process of improvement is iterative this strategy will be subject to periodic review and will be supported by a medium term Corporate Data Quality Action Plan. An Implementation Programme that will provide more explicit details concerning roles and responsibilities, and the timeframe for the delivery of lower level actions, will support this plan.

## **5.0 Corporate Minimum Standards**

5.1 To support the consistency of good quality data across the organisation the following Corporate Minimum Standards have been developed. Each Operational Director will have primary responsibility to ensure that these standards are maintained within those departments of the Council for which they have responsibility.

### **5.2 Data Collection**

5.3 The following minimum standards must be applied in relation to the collection of data: -

- In determining the frequency at which data is collected attention should be paid to its sensitivity, changeability and volume.
- In relation to data used in the completion of Departmental Quarterly Monitoring Reports data should be collected as soon as possible, and normally within two weeks following quarter period end.
- The acquisition and development of data collection systems, whether IT or manually based, must be considered using the principle of 'collect once, use many times'.
- In relation to the acquisition, procurement or development of IT based systems compatibility with existing systems and whole life costs must be considered.
- All performance data will be subject to annual review within the process of Departmental Service Plan development to ensure that it remains relevant and robust.
- All performance data must be supported by a clear audit trail including, where appropriate, copies of databases that would allow the duplication of the calculation and interrogation of data by audit teams. In relation to performance data supporting the calculation of those indicators within the National Indicator Data Set information will also need to be collected in relation to:
  - Full indicator definition and method of calculation.
  - Information on supporting data sources
  - Information concerning explanations of variance and current status

#### 5.4 **Data Recording**

5.5 The following minimum standards must be applied in relation to the recording of data: -

- Each member of staff should have a clear understanding of the purposes of recording the information for which they are responsible and that individual performance, upon the principle of 'right first time', is considered through the Employee Development Review process.
- Individuals responsible for the recording of data should be clearly identified and should be provided with appropriate training in the use of IT or manually based recording systems.
- Where relevant the recording of data onto IT based systems should be password protected. Only the individual responsible for recording the data and their appropriate line manager should hold such passwords.
- All performance data should have a clear and auditable evidence trail and the arrangements for the recording of such data should be supported by a periodic risk-based departmental review.
- To support the robustness of performance data all local performance indicators should be included within a departmental indicator directory. This directory will detail information concerning responsible officers, indicator definitions and methods of calculation, frequency of collection, and data sources. A template suitable for this purpose has been included as Appendix 1

#### 5.6 **Data Validation and Authorisation**

5.7 The following minimum standards must be applied in relation to the validation and authorisation of data: -

- All Operational Directors will have ultimate responsibility for ensuring that all data is valid and is authorised at the appropriate level within the department.
- All publicly reported performance data must be authorised by the relevant Operational Director.
- All performance data, including Local Performance Indicators (LPI's), must have an identified Responsible Officer who will act as validating officer.

**Data Validation and Authorisation cont'd**

- All performance data must be supported by a clear evidence trail
- All performance data must be validated and the use of estimated data discouraged. However where the use of estimated data is practicable such data should be clearly annotated with sufficient explanation as to any limitations that may apply.
- Performance data in relation to the National Indicator Data Set must be collected using the electronic password protected Corporate System Assessment Sheets. An example is included as Appendix 2.
- All sections of Corporate System Assessment Sheets must be completed. Particular attention should be paid to those sections relating to supporting evidence and the explanation of variances in current and previous, and actual and targeted, performance levels
- All such information must be provided within the corporate timeframe, which will be determined annually, in order for the authority to meet its statutory responsibilities in regards to the publishing of such data.
- All performance indicators within the National Indicator Data Set must have a named Responsible Officer. Such Officers must ensure that they have a named deputy who is fully conversant with the calculation of such indicators and can act on their behalf during any period of absence. The Corporate Performance Management Team will maintain a central register of such officers.
- All Operational Directors have a responsibility to provide assurance of the data supplied by third parties and external agencies. Where concerns exist in this respect these should be clearly articulated and any limitations as to the data in question should be made clear.
- Wherever possible specific objectives concerning the quality of data, and the arrangements for its validation will be included explicitly within appropriate Service Level Agreements with third party organisations delivering services on the Council's behalf.



## 5.8 **Data Analysis and Reporting**

5.9 The following minimum standards must be applied in relation to the analysis and reporting of data: -

- That data is used routinely and effectively within departments in developing and delivering service improvement.
- That the ongoing relevance of such data is considered as an integral element of the annual review of departmental service plans.
- That those indicators within the National Indicator Data Set that are pertinent to the department's area of operations, although not necessarily wholly within the department's control, are recorded within the relevant Departmental Service Plan and subsequent departmental Quarterly Monitoring Reports.
- That due regard is paid to the development of a basket of clearly defined departmental performance indicators, including locally determined and nationally prescribed indicators, that adequately measure departmental progress and sufficiently reflect the corporate indicator categorisation set i.e. Corporate Health, Cost & Efficiency, Fair Access, Quality and Service Delivery.
- That all performance indicators are supported by mid-term annual targets, which are subject to annual review.
- That data required for the purposes of Quarterly Departmental Performance Monitoring reports is provided to the Corporate Performance Management Team for quality assurance within agreed corporate timescales.
- That data estimations or omissions are avoided where possible. Where this is unavoidable concise explanations are provided within reports.
- Where performance data suggests that progress is not proceeding as planned a clear explanation of the causes and the remedial action to bring performance back on track is provided.

## 6.0 Primary Roles and Responsibilities

- 6.1 In developing the strategy it is recognised that data quality should be a concern of all staff within the organisation and that it's effectiveness will result from the consistency and appropriateness of actions that are taken at an individual level.
- 6.2 However to ensure that the right behaviours permeate throughout every level of the organisation there is a need to provide leadership and direction at the highest level. As such the following key Officers and Members will have specific and complementary roles to play in ensuring that the authority strives to achieve the highest standards in its ongoing arrangements to secure data quality.
- 6.3 ***The Portfolio Holder for Quality and Performance*** will act as Lead Member for data quality issues.
- 6.4 ***The Strategic Director (Corporate and Policy)*** will act as the Corporate Data Quality Lead Officer. As such this role will include the following primary responsibilities: -
- Ensuring that this strategy is widely available to all staff and that the importance of 'right first time' principles are widely communicated and understood.
  - To develop and monitor the implementation of an Action Plan, endorsed by Management Team, in response to recommendations that result from the annual inspection of data quality management arrangements.
  - Ensuring that the Corporate Data Quality Strategy is periodically monitored and reviewed and that it is supported by a medium term Data Quality Implementation Plan that will be subject to annual review.
  - Ensuring that a Corporate Data Quality Lead Officer group is established, and membership maintained, in order to provide a source of expertise, advice and guidance within each of the directorates and to ensure that the adoption of good practice is consistent across all of the functional areas of the authority.
  - Ensuring that corporate arrangements are in place to facilitate a risk-based approach to the monitoring of compliance with relevant Corporate / Directorate Data Quality Policies.

6.5 **Each Strategic Director** will have primary responsibility for: -

- The accuracy of data input to and provided by information systems within services that are delivered by the Directorate.
- Providing support to the development of the Corporate Data Quality Lead Officer Group by nominating both a primary and secondary Lead Officer from within the Directorate and ensure that such Officers attend meetings as and when required.
- Ensuring the significance of data quality is promoted within Directorates at senior level.
- Ensuring arrangements are in place to assure of the quality of data and information contained within relevant Departmental Quarterly Monitoring Reports.
- Ensuring that the collection, analysis and provision of all externally reported and centrally prescribed performance data complies with statutory and organisational requirements.

6.6 **The Operational Director (Policy & Performance)** will have primary responsibility for: -

- Ensuring that performance data in relation to the National Indicator Data Set is collected, reported, and published within statutory timescales and that a reliable and robust corporate system is maintained for this purpose.
- Ensuring, through the activities of the Corporate Performance Management Team, that relevant statutory guidance and information is disseminated to all Responsible Officers and that they are provided with appropriate corporate advice and support to enable them to discharge their responsibilities efficiently and effectively.

6.7 **The Chief Internal Auditor** will have primary responsibility for: -

- Providing annual assurance concerning data quality to the Council's Business Efficiency Board (Audit Committee).
- Ensuring that corporate data quality arrangements are subject to risk-based review and that such work is incorporated within the Annual Audit Plan.
- Taking action in response to data quality matters that are reported through the Council's Confidential Reporting system.

6.8 **Each Operational Director** will have primary responsibility for: -

- Ensuring that data loss forms an integral element of departmental business continuity / risk planning arrangements. In support of this process Business Continuity training materials and toolkits will be subject to periodic review by the Head of Risk and Emergency Planning.
- Ensuring that data quality systems and processes are subject to regular risk-based review and that appropriate action is taken to address any actual or potential weaknesses that become evident.
- Promoting data quality at a departmental level and ensuring that relevant staff have access to appropriate training and that responsibilities for data quality are explicitly contained within appropriate job descriptions.
- Identifying Responsible Officers for each of the performance indicators contained within the Departmental Service Plan.
- Authorising reported levels of annual performance in relation to those indicators within the National Indicator Set and ensuring that the reporting of such indicators within their area of operations complies with statutory and corporate requirements.
- Ensuring that a Departmental Register is maintained (*Please refer Appendix 1 for a template that can be used for this purpose*) and reviewed annually, that identifies locally determined indicators, which are concisely and clearly defined and that this information is supplied to the Corporate Performance Management Team.
- That a proportionate and risk-based approach is taken to the audit of such indicators to ensure that they remain verifiable and definition compliant.
- Ensuring that departmental performance data is collected, analysed and presented to Management Team and Policy and Performance Boards as soon as possible following quarter-period end.
- Providing assurance to Policy and Performance Boards, through Quarterly Performance Monitoring Reports, as to the quality of performance data and ensuring that data that has been estimated, omitted, or sourced from third parties that this is clearly annotated.
- Ensuring that where service delivery has been commissioned through third parties that data quality issues are integrated into Service Level Agreements or similar contractual arrangements.

6.9 **Each Divisional / Line Manager** will have primary responsibility for: -

- Promoting data quality at divisional / team level and ensuring that relevant staff are provided with appropriate training, both at an organisational level and in relation to specific divisional systems that are used in the performance of their duties.
- Ensuring that where data management i.e. capture, analysis, verification and reporting, forms a significant element of an individuals duties performance in relation to data quality, based upon the principle of 'right first time', is reviewed as an element of the EDR process (Employee Development Review).
- That an annual review is undertaken of divisional local performance indicators and that the Departmental register of such indicators is updated annually.
- Ensuring that data are input as soon and as near to the point of delivery as possible and that there are clear divisions of responsibility to avoid duplication and double entry.
- That all staff are made aware that concerns regarding data quality issues can be raised through both direct discussion with the appropriate line manager or through the Council's Confidential Reporting Code.

6.10 **Responsible Officers** (In relation to those measures within the National Indicator Set) will have responsibility for: -

- Ensuring that performance indicators within the set are authorised by the appropriate Operational Directors and reported through the Corporate Performance Management Team within the specified timeframe.
- That all sections of the Corporate System Assessment Sheets (refer Appendix 2 for an example) are fully completed, including explanations regarding variances and the use of estimated data. *It is acknowledged at the time of writing this strategy that documentation for the 2008 – 09 year outturn data may need to be slightly revised in light of the first year implementation of the NIS performance indicators.*
- That performance is calculated in accordance with the latest available definitions and guidelines and those calculations are supported by appropriate and auditable evidence and documentation.

6.11 **Every employee** will have responsibility for: -

- For ensuring data quality in relation to the collection, analysis and presentation of data and carrying out their duties will pay due regard to 'right first time principles.
- Attending data quality training sessions that are provided either corporately or through Directorate / Departmental work programmes.

6.12 **Directorate Data Quality Lead Officers** will have primary responsibility for: -

- Attending scheduled Lead Officer group meetings and promoting the role of data quality and acting as primary contacts within each of their respective Directorates.
- Keeping abreast of developments within the area of data quality and providing a source of expertise to assist the Strategic Director (Corporate and Policy) in the discharge of his responsibilities.
- Carry out tasks and activities to support the delivery of the Corporate Data Quality Action Plan as determined by the Strategic Director (Corporate and Policy).

6.13 **The Corporate Performance Management Team** will have primary responsibility for: -

- Co-ordinating the annual process of collecting and reporting performance data in relation to nationally prescribed performance indicators (NIS) and providing a quality assurance role.
- Maintaining a register of all Departmental Responsible Officers responsible for reporting performance in relation to such indicators.
- Providing appropriate guidance and support to Responsible Officers and liaising directly with the Audit Commission to resolve issues relating to such indicators.
- Providing a key point of contact for internal / external audit teams and resolving any difficulties that may arise.
- Maintaining, with the support of Operational Directors, a compendium of all Local Performance Indicators that have been identified within Departmental Performance Indicator Registers.

## 7.0 Key Actions

- 7.1 Each year the Audit Commission, the government's regulatory body, undertakes an assessment of the authority's use of resources. In reaching such judgements the Commission follows a series of key Lines of Enquiry (KLOE's), one of which is a standards based assessment relating to data quality management arrangements as illustrated below.

<b>Level 2</b>	The council has adequate arrangements to produce reliable data
<b>Level 3</b>	The council has good arrangements to produce reliable data
<b>Level 4</b>	The council has exemplary arrangements to produce reliable data. It has an agreed approach with partners to produce reliable data.

- 7.2 This review, conducted in 2007, concluded that: -
- The authority's management arrangements for securing data quality were adequate and;
  - That performance indicator values reviewed fell into expected ranges and;
  - That detailed spot checks, with one exception, found that reported levels of performance were fairly stated.
- 7.3 The Commission found that there were a number of strengths that were evident within the authority's approach to managing its data and these included: -

### ***Governance and leadership***

That the importance of data quality is recognised at and across the corporate level.

### ***Policies and procedures***

That data policies and procedures were in place and that they had the authority of senior management.

***Systems and processes***

That arrangements are in place for collecting, recording and reporting data are in place and that performance is incorporated into the wider management of services and the Council as a whole.

***People and skills***

That staff in performance monitoring and performance management roles have clearly defined responsibilities for data quality and that Data Quality Champions have been appointed in some areas.

***Data use and reporting***

This was an area of strength for the Council with the routine reporting of performance measures, which link Departmental Service plans with Corporate Priorities. Additionally the emphasis upon exception reporting provided a clearer focus to those areas for attention.

- 7.4 In addition the Commission identified a number of areas, which it considered could be strengthened.
- 7.5 As a result of the recommendations made by the Commission a Data Quality Action Plan has been developed. This Action Plan, which will be refreshed annually and is detailed overleaf, identifies a number of key areas of focus that will be given attention during the medium term
- 7.6 It is intended that this Plan will complement the information contained within this Data Quality Strategy in securing improvement in the management arrangements for securing data quality.



### Data Quality Action Plan (2007/08)

Action	Officer Lead	Target Date	Status
<b>Governance</b>			
Undertake a review of data quality objectives set within each of the Directorates for the purpose of informing a corporate approach.	Data Quality Lead Officer Group	January 2009	
Provide annual assurance to Efficiency Board (Audit Committee) concerning data quality	Chief Internal Auditor	Included in 2008/09 Audit Plan	
<b>Policies and Procedures</b>			
Develop a suite of data polices for all directorates and services including a policy on service user data and performance data, a policy on recording, storing and sharing data and a policy on internal and external reporting of performance and other data	Operational Director (ICT Services) / Data Quality Lead Officer Group	August 2009	
Expand the data quality Lead Officer role to include the monitoring of compliance with directorate data policies by: -.  Establishing a Corporate Data Quality Lead Officer Group  Developing and implementing a risk-based approach to monitoring compliance with relevant policies.	Strategic Director (Corporate & Policy)	February 2008  November 2008	
<b>Systems and Processes</b>			
Set standards against which the Council can test its ability to 'get it right first time' when recording and reporting performance information.	Strategic Director (Corporate & Policy)	January 2009	
In addition to the existing quality and assurance role provided by the Corporate Performance Management team include a statement of assurance regarding the quality of data within Quarterly Performance Monitoring Reports submitted to Policy & Performance Boards.	Operational Directors	April 2008	
In planning for business continuity evaluate the risks to the Council that would arise from the loss of performance data and ensure that this issue is clearly identified within relevant training and guidance materials.	Operational Directors / Head of Risk and Emergency Planning	January 2009	

Action	Officer Lead	Target Date	Status
<b>People and Skills</b>			
Appoint Data Quality champions for all Directorates and ensure that there is consistency within the role	Strategic Director (Corporate & Policy)	June 2008	
Provide a consistent training regime for Officers whose role includes collecting and recording data, set clear data standards and assess their performance against these roles.	Data Quality Lead Officer Group / Head of Training / Operational Directors	December 2008	
<b>Data Use and Reporting</b>			
Establish procedures for sharing data with third parties and include arrangements for checking and audit of shared data	Data Quality Lead Officer Group / Operational Directors	December 2008	

## Appendix 1 – Local Performance Indicator Definitions Template (2008)

PI Ref	Indicator Descriptor

Responsible Officer	Name, Job Title and contact number				
Good Performance	High or Low	Collection Interval	Weekly, Monthly, Quarterly	Return Format	Percentage / Number

Actual / Planned Performance Levels	2006 - 07		2007 - 08		2008 -09	2009 - 10	2010 - 11
	Actual	Target	Actual	Target	Target		

Full PI Definition	
Formula	
Data Sources	
Worked Example	

### Guidance Notes

PI Ref	Where a local performance indicator is included within the Departmental Service Plan references should be consistent. In other cases the referencing system should ideally comprise of the title of the division followed by sequential numbers e.g, A1, 2, etc would denote indicators for the accountancy division within the finance department.
Performance levels	Should include, where available, actual performance for the preceding two years, and targeted performance for the current and future two years
Full definition	Should include a detailed definition of the indicators i.e. days as calendar or working days, full or part time staff etc.
Formula	Should illustrate the equation use in the calculation e.g. A divided by B multiplied by 100 e.g. where A = number of FTE staff and B = total working hours lost during the period
Data Sources	Should identify the primary data sources / systems used in the calculation of the indicator.
Worked Example	Should give an example of how the indicator is calculated and how any numerators and denominators have been determined.

**Appendix 2 – Example of System Assessment Sheet (National Performance Indicators)**



***Please note that this sheet must be completed by no later than 24 May***

**BEST VALUE PERFORMANCE INDICATORS – SYSTEM ASSESSMENT SHEET**

**SECTION 1**

BVPI REF	Description	2006/07 Target	2006/07 Outturn (Pre-audit)	2007/08 Target	2008/09 Target	2009/10 Target

Indicator priority (good performance is):

**The 2006/7 outturn figure supplied above is:**

Estimated\*       Actual

**Is there a variance between?**

Performance (06/07) and target (06/07)       Yes       No

Performance (06/07) and performance (05/06)       Yes       No

**\*Additional commentary supplied in section 2**

**Comparative Benchmarking Data (England)**

2005/6 (Post Audit)	Bottom 25%	Median	Top 25%

**Key Officers Involved**

Officer Name	Position	Tel./Ext. No.
	<b>Responsible Officer</b>	

**Supporting Documentation**

Document name	Location/Format**	Tel./Ext. No.

\*\* Please indicate details of location e.g. Municipal Building, Runcorn Town Hall etc.. Where documents are available electronically please provide details of file type e.g. word document, PDP file etc., and where appropriate, internet address.

**Other Evidence**

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**Calculation**

--

**SECTION 2**

Where estimated figures have been supplied for 2006/7 please provide reason below

--

Please provide below a brief commentary in relation to

**Variance between 2006/7 performance and target**

--

**Variance between 2006/7 performance and 2005/06 performance**

--

**CHECKLIST**

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| 1. I am familiar with the statutory requirements in relation to the above performance indicator as detailed within the Best Value Performance Indicators 2006/7 Guidance (As detailed in the Appendix to this sheet). | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have there been any changes in the method of compiling the indicator compared with that of previous years.   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. The actual performance figure for 2006/7 shown above can be supported by appropriate documentation and this is attached / has been identified.   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. I have considered the performance of this indicator, and reviewed and explained above any variances that have occurred.  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**I confirm that the information contained within this system assessment sheet is correct.**

Signed \_\_\_\_\_  
(Officer Completing Assessment Sheet)

Name

Name

Name

Signed Off \_\_\_\_\_  
(Operational Director)

Name

Ext.

Date

**Electronic Sign - Off**

Status:

To change status to FINAL or return to DRAFT enter password in the blue box and then click **here**

To AUTHORISE enter password in the red box and then click **here**