**Data Quality Report** 

February 2008



# **Data Quality Report**

**Herefordshire Council** 

**Audit 2006/07** 

External audit is an essential element in the process of accountability for public money and makes an important contribution to the stewardship of public resources and the corporate governance of public services.

Audit in the public sector is underpinned by three fundamental principles.

- Auditors are appointed independently from the bodies being audited.
- The scope of auditors' work is extended to cover not only the audit of financial statements but also value for money and the conduct of public business.
- Auditors may report aspects of their work widely to the public and other key stakeholders.

The duties and powers of auditors appointed by the Audit Commission are set out in the Audit Commission Act 1998, the Local Government Act 1999 and the Commission's statutory Code of Audit Practice. Under the Code of Audit Practice, appointed auditors are also required to comply with the current professional standards issued by the independent Auditing Practices Board.

Appointed auditors act quite separately from the Commission and in meeting their statutory responsibilities are required to exercise their professional judgement independently of both the Commission and the audited body.

#### Status of our reports

The Statement of Responsibilities of Auditors and Audited Bodies issued by the Audit Commission explains the respective responsibilities of auditors and of the audited body. Reports prepared by appointed auditors are addressed to non-executive directors/members or officers. They are prepared for the sole use of the audited body. Auditors accept no responsibility to:

- any director/member or officer in their individual capacity; or
- any third party.

#### Copies of this report

If you require further copies of this report, or a copy in large print, in Braille, on tape, or in a language other than English, please call 0844 798 7070.

#### © Audit Commission 2008

For further information on the work of the Commission please contact: Audit Commission, 1st Floor, Millbank Tower, Millbank, London SW1P 4HQ Tel: 020 7828 1212 Fax: 020 7976 6187 Textphone (minicom): 020 7630 0421 www.audit-commission.gov.uk

# **Contents**

Background	4
Scope and objectives	5
Conclusions	6
Management arrangements (stage 1)	7
Analytical review (stage 2)	10
Data quality spot checks (stage 3)	11
Appendix 1 – Action plan	12

# **Background**

- Public bodies are accountable for the public money they spend: they must manage competing claims on resources to meet the needs of the communities they serve, and plan for the future. The financial and performance information they use to account for their activities, both internally and externally, to their users, partners, commissioners, government departments and regulators, must be appropriate for these purposes, providing the level of accuracy, reliability and consistency required.
- 2 Considerable weight is attached to published performance indicators as the basis for reducing the burden of regulation and awarding freedoms and flexibilities. This has made reliable performance information, and the quality of the underlying data, significantly more important. Regulators and government departments need to be assured that reported information reflects actual performance. This will provide confidence that they are focusing on the key areas for improvement.
- 3 Auditors' work on data quality and performance information supports the Commission's reliance on performance indicators in its service assessments for comprehensive performance assessment (CPA). This delivers the commitment to reduce significantly the level of service inspection required.
- Introducing the comprehensive area assessment (CAA) framework from 2009 will make reliable performance information more important. The CAA will place greater emphasis on assessments that are proportional to risk. Councils will also be required to use information to reshape services, and to account to the public for performance.
- The responsibility for securing the quality of the data underpinning performance information can only rest with the bodies that collect and use the data. Producing data which is fit for purpose should not be an end in itself, but an integral part of a body's operational, performance management, and governance arrangements. Organisations that put data quality at the heart of their performance management systems are most likely to be actively managing data in their day-to-day business, and turning that data into reliable information.
- This is the second year in which we have undertaken work on data quality in local government. Our work is complemented by the Audit Commission's paper, 'Improving information to support decision making: standards for better quality data.' This paper sets out standards, for adoption on a voluntary basis, to support improvement in data quality.
- 7 The expected impact of our work on data quality is that it will drive improvement in the quality of local government performance information, leading to greater confidence in the supporting data on which performance assessments are based.

# Scope and objectives

8 The Audit Commission has developed a three-stage approach to the review of data quality.

#### Table 1

Stage 1	Management arrangements  A review to determine whether proper corporate management arrangements for data quality are in place, and whether these are being applied in practice. The findings contribute to the auditor's conclusion under the Code of Audit Practice on the council's arrangements to secure value for money (the VFM conclusion).
Stage 2	Analytical review An analytical review of 2006/07 BVPI data and selection of a sample for testing based on risk assessment.
Stage 3	Data quality spot checks In-depth review of a sample of 2006/07 PIs, all of which come from a list of specified BVPIs used in CPA, to determine whether arrangements to secure data quality are delivering accurate, timely and accessible information in practice.

- 9 All three stages of the review have been carried out at this Council.
- 10 For stage 3, we selected 4 performance indicators to review from the list of specified indicators. These indicators were:
  - BVPI 82a Recycling Performance;
  - BVPI 82b Composting Performance;
  - BVPI 183b Temporary Accommodation: Hostels; and
  - **BVPI 214** Homelessness Prevention.
- No further in depth review was carried out on the Council BVPIs.

### **Conclusions**

#### **Stage 1 – Management arrangements**

- 12 The Council's overall management arrangements for ensuring data quality are demonstrating adequate performance. The Management arrangements review revolved around five specific themes:
  - Governance and Leadership;
  - Policies;
  - Systems and Processes;
  - People and Skills; and
  - Data Use and Reporting.
- The weakest theme was Policies where there was not yet a data quality policy in place. Arrangements for Governance and Leadership, Systems and Processes, People and Skills and Data Use and Reporting had improved on previous year findings but were still subject to some improvement before the Council could be considered to be performing well.

### Stage 2 – Analytical review

Our analytical review work at stage 2 identified that some of the PI values reviewed fell within expected ranges, some could not be substantiated by evidence and were therefore selected for review in detail at stage 3.

# Stage 3 - Data quality spot checks

- Our review and spot checks of PIs found that BVPI 82a (Recycling Performance) and 82b (Composting Performance) were fairly stated, although information with regards to both indicators is received from Worcestershire Council. The Council will need to ensure that the figures that they report have been reviewed in the first instance by themselves. BVPI 183b (Temporary Accommodation: Hostels) and BVPI 214 (Homelessness Prevention) were incorrectly stated. The analysis carried out at Stage 2 identified that there was a significant variance in year on year reporting for BVPI 183b and 214 and this was investigated.
- 16 After consultation with the Council, there was acceptance that these BVPIs were incorrectly calculated. The Council have made the amendment and resubmitted the BVPIs.
- 17 An action plan has been agreed with the Council (see Appendix 1) to address the issues arising from this review.

# **Management arrangements (stage 1)**

18 Overall, the council's corporate arrangements for data quality are demonstrating adequate performance.

### Governance and leadership

19 Data Quality is included within the Integrated Performance Report (IPR) which is reported to Cabinet bi-monthly. This document considers significant performance indicators and colour codes them by risk which is an improvement on previous years. There is also a much clearer focus on DQ requirements at directorate level. However linkages between key documents such as the Corporate Plan and Medium Term Financial Strategy need to be clearer, there is little evidence of a strategic approach to data quality within key council documents such as the Corporate Plan.

#### Recommendations

- R1 Data Quality must be included within the Corporate risk management arrangements.
- R2 Data Quality needs to be embedded into the culture of the Council at Strategic levels.
- R3 Ensure Data Quality links between key documents such as the Corporate and Medium Term Financial Strategy are clear.

#### **Policies**

The Council has not defined its expectations or requirements in relation to data quality. At the time of the review the Council did not have a data quality policy document in place. Data Quality processes have worked by word of mouth or from the utilisation of ad-hoc documents informing staff of their responsibilities. This is a fundamental requirement for the Council to be assessed as adequate.

#### Recommendation

R4 The Council should put in place a Data Quality Policy which can be accessed and used by staff at all levels.

#### Systems and processes

- 21 There are systems in place for the collection and reporting of data, some of the systems being used rely on manual intervention and this needs to be carefully controlled otherwise errors can occur, the work carried out at stage 2 and 3 of the process have identified errors in the collection of data and subsequent reporting. Work at Stage 3 showed that of the 4 performance indicators reviewed, 2 were incorrectly reported, Temporary Accommodation (Hostels) and Homelessness prevention.
- 22 Whilst the DQ process works reasonably for some indicators, this is not consistent which suggests that the reported information within the IPR could be inaccurate. Internal Audit carry out reviews of some performance indicators and provide reports which are acted upon. There are no formal protocols in place with those partners of the Council who supply data quality information.

#### Recommendations

- R5 Internal Audit should review a greater number of performance indicators in 2007/08.
- R6 The systems for the collection of data will need to be reviewed to ensure that they are fit for purpose.
- R7 Formal protocols with Council partners need to be developed to ensure accuracy of data.

# People and skills

There is some training of staff for data quality, such as adult and children's services, however training has not occurred for other staff involved in data quality. There should be clearer guidance issued to all staff involved in the process and roles and responsibilities for all should be documented.

#### Recommendations

- R8 Training of all staff involved in compiling performance indicators should take place at the earliest opportunity.
- R9 Guidance for staff should be readily accessible for all involved in the compilation process.
- R10 Roles and responsibilities for all staff included within the DQ process needs to be clearly defined.

# Data use and reporting

24 Best Value performance indicator returns are supported by an audit trail, however there are weaknesses within the compilation process which will need review. BVPI information is made available bi-monthly to Cabinet. The BVPI information produced for Cabinet is not widely used within directorates with Heads of Service preferring to utilise their own management information.

#### Recommendations

- R11 The Audit trail needs to be improved upon. Pls made available for audit should have an audit trail which has been reviewed by management prior to Internal Audit review.
- R12 The IPR, as the key performance management document should be widely used across directorates rather than directorates using their own reports.

# **Analytical review (stage 2)**

An analytical review of the following BVPIs was carried out. The findings, subject to the validation of a sample of PIs in stage 3 spot checks, are shown below.

### Table 2

2006/07 Performance indicator	Assessment	Comment
BVPI 82a - Recycling Performance	Fairly stated	None
BVPI 82b - Composting Performance	Fairly stated	None
BVPI 183b - Average length of stay in Temporary accommodation	Further review	Decrease on year for year PI from 29 to 20 weeks. Large variance.
BVPI 214 - Homelessness Prevention	Further review	Increase from 2.88 per cent to 4.05 per cent. Subject to further review.
BVPI 165 - % of pedestrian crossings with facilities for the disabled	Reasonable	Not selected for further review, although year on year change was significant.  There was a lower than expected increase in facilities and a review had been carried out by Internal Audit.
BVPI 199 - Cleanliness of public spaces.	Fairly stated	None

# Data quality spot checks (stage 3)

A number of PIs were reviewed using a series of detailed spot checks and audit tests. Our findings are shown below.

### Table 3

Performance indicator	Assessment	Comment
Housing BVPI 183b Temporary Accommodation: Hostels	Unfairly stated	Changes made to Pi, stated as 20 weeks, after intervention changed to 26.5 weeks.
Housing BVPI 214 Homelessness Prevention	Unfairly stated	Changes made to Pi, stated as 4.05 per cent after intervention changed to 5.4 per cent
Environment BVPI 82b Composting Performance	Fairly stated	None
Environment BVPI 82a Recycling Performance	Fairly stated	None

# **Appendix 1 – Action plan**

Page no.	Recommendation	on	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
7		y must be included within ite risk management nts.	2	Herefordshire County Council			
7		y needs to be embedded ture of the Council at vels.	2	Herefordshire County Council			
7	key docume	a Quality links between ents such as the Corporate n Term Financial Strategy	2	Herefordshire County Council			
7	Data Qualit	l should put in place a y Policy which can be nd used by staff at all	3	Herefordshire County Council			
8	review of a	dit should carry out a greater amount of e indicators in 2007/08.	3	Herefordshire County Council			
8	of data will	s in place for the collection need to be reviewed to they are fit for purpose.	3	Herefordshire County Council			
8		ocols with Council partners developed to ensure data.	2	Herefordshire County Council			
8	compiling p	all staff involved in erformance indicators place at the earliest	2	Herefordshire County Council			

Page no.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
8	R9 Guidance for staff should be readily accessible for all involved in the compilation process.	2	Herefordshire County Council			
8	R10 Roles and responsibilities of all staff included within the DQ process needs to be clearly defined.	2	Herefordshire County Council			
9	R11 The Audit trail needs to be improved upon. PI's made available for audit should have an audit trail which has been reviewed by management prior to Internal Audit review.	2	Herefordshire County Council			
9	R12 The IPR, as the key performance management document should be widely used across directorates rather than directorates using their own reports	2	Herefordshire County Council			