

Data Quality

District of Easington

Audit 2008/09

February 2009



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Introduction

- 1 The purpose of this report is to summarise the findings from our work on data quality for 2007/08.
- 2 Auditors' work on data quality and performance information supports the Commission's reliance on performance indicators (PI) in its service assessments for comprehensive performance assessment (CPA).
- 3 Our work on data quality 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. The expected impact of the Audit Commission's 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 of our work

- 4 We have followed the Audit Commission's three-stage approach to the review of data quality as set out in Table 1.

Table 1 Data quality approach

Stage 1	Management arrangements A review using key lines of enquiry (KLOE) 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 2007/08 BVPI and non-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 2007/08 PIs [most/all of which] [amend as applicable] come from a list of specified BVPIs and non-BVPIs used in CPA, to determine whether arrangements to secure data quality are delivering accurate, timely and accessible information in practice. For 2007/08 PI spot checks, the Audit Commission specified that it is compulsory to review two housing benefits PIs at all single tier and district councils as a minimum.

- 5 As this is the third year of applying this approach to data quality, we tailored our work to focus on the key changes and actions taken to address previously identified weaknesses and recommendations.

Summary conclusions

Stage 1 – Management arrangements

- 6 The Council's overall management arrangements for ensuring data quality are at minimum requirements and the Council has continued to implement improvements in its approach to the arrangements.

Stage 2 – Analytical review

- 7 Our analytical review work at Stage 2 identified that a limited number of the PI values fell outside expected ranges. Where this occurred, there were acceptable explanations for the variance.

Stage 3 – Data quality spot checks

- 8 Because of the findings at stages 1 and 2, our detailed spot checks of the indicators were limited to the Audit Commission mandated HB PIs - BVPI 78a and BVPI 78b. We found that both indicators were fairly stated and the data was appropriately supported by the HB system.

Recommendation

- 9 We have not made any specific recommendations as a result of this work other than we suggest the Council share this report with the new unitary authority so that account can be taken of any good practice or procedures that need further review for the future to support data quality improvements.

Detailed findings

Management arrangements (Stage 1)

10 Overall, the Council's corporate arrangements for data quality are at minimum requirements. The following provides summarised feedback for each of the five KLOE areas.

Governance and leadership

- 11** An officer has overall responsibility for performance management including the quality of data with which to manage performance and a central list is maintained of all officers responsible for data quality. Accountability for data quality is spread throughout the Council; Directors and service heads have a role in monitoring data quality.
- 12** The Executive Member for Improvement has responsibility for Performance Management, encompassing data quality. Whilst data quality is not explicitly mentioned as part of the appraisal system, individuals with data quality as a key part of their role will be appraised in terms of this, as part of the Council's appraisal process. The data quality action plan is regularly discussed and approved by Management Team and Members.
- 13** While a formal data quality strategy is still not in place, partly due to LGR, there is a formal action plan for data quality. This is agreed and monitored by the Audit Committee, and all service teams are aware of the need to adhere to data quality standards set out in the BVPI/NI guidance.
- 14** The Council monitors data quality quarterly as part of performance reporting. A standard pro forma is used to report departmental data returns. Data quality audit are undertaken on a planned basis as part of the data quality action plan and in conjunction with Internal Audit. Data is not externally reported until it has been subject to this scrutiny. There is a data quality action plan regularly updated to address any actions required. The Corporate risk register identifies any data quality risks.

Policies

- 15** Although there is no formal data quality strategy the Council's approach is based on national guidance. Proformas are in place for capturing data and providing an audit trail for data quality. Guidance notes are also in place for the departmental officers responsible for collecting and calculating data.
- 16** The Council has processes in place to ensure that staff are updated on guidance changes for PIs. This process supports provision of good data quality when it comes to calculating PIs. The corporate development unit supports departmental staff in the need to follow appropriate guidance or to identify areas that need improvement.

Systems and processes

- 17 The performance reporting approach is reviewed on an annual basis. A number of data systems are still manual as plans to procure a Performance Management system have been put on hold due to LGR. Corporate performance is reported on a quarterly basis.
- 18 Data quality systems are reasonably up to date and deemed as being robust and reliable and have been improved through the Data Quality Action Plan. Data is validated by service heads and Directors before being passed to the corporate development unit.
- 19 Audits of data quality are carried out on a planned basis. There are formal arrangements in terms of assessing data quality and reporting the results to the Audit Committee. There is more output data validation carried out by managers than previously but limited reviews of input controls in operation.
- 20 PGP encryption software or secure Government Connect Network is used to transfer data between organisations. Performance data is protected by the Council's general IT security systems and guidance. There are access controls to all data on all IT systems but the Applications Development officer was unable to confirm the minimum standard.
- 21 Performance data is shared between partners but formal protocols have yet to be developed in all cases. The Community Safety Partnership has an agreed protocol for the use of Crime data and the benefits section has a protocol in place with the Department for Work and Pensions. Some work has been done with the East Durham Strategic Partnership to develop further arrangements for strengthening data sharing with partners.

People and skills

- 22 All staff whose role includes data management are clear about this role and it is incorporated informally into job descriptions. Where data quality is part of the role of staff, this will be included in work targets, and covered during staff appraisals.
- 23 Appropriate training is given to staff with specific responsibility for data management along with support from the Corporate Development Unit. Feedback from data quality audits includes identifying any further training and follow up monitoring. The Council has also organised workshops on an 'as required' basis rather than a formal training programme.
- 24 There is a programme of audits in place where lessons learned are shared. Internal Audit also has an active part in supporting data quality by carrying out audits in specific areas.

Data use and reporting

- 25 Performance data is regularly reported, and is routinely used by senior management and Members in decision making.
- 26 The year-end proformas include a section which relates to the audit trail for each indicator. These are collated, checked and centrally held by the Corporate Development Unit. Evidence needed to support the audit trail is also requested and checked. All externally reported data is subject to validation including reporting to senior management and Members.

Detailed findings

Analytical review (Stage 2)

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

Table 2 Analytical review findings

2007/08 Performance indicator	Assessment	Comment
BV 199b Local street and environmental cleanliness - graffiti	The variance is attributable to a real change in performance	A dedicated graffiti removal service introduced along with improved partnership working.
BV 199c Local street and environmental cleanliness - fly-posting	The variance is attributable to a real change in performance	Raised awareness through the Pride in Easington Initiative.
BV 212 Average time taken to re-let council dwellings	The variance is attributable to a real change in performance	Number of improvement initiatives undertaken in partnership with East Durham Homes to improve void turnover.
BV 11c Top 5 per cent of earners that have a disability	The variance is attributable to a real change in performance	Review undertaken by Personnel has updated figures plus indicator is sensitive to small changes.
BV 127a Violent crime per 1,000 population	The variance is attributable to a real change in performance	Change is due to Partnership working and implementation of various projects in accordance with the Community Safety Strategy.
BV 127b Percentage of ill health retirements	The variance is attributable to a real change in performance	The Council has a policy of redeployment wherever possible, rather than retirement; over the last year the Council has endeavoured to prevent retirement by considering alternatives.

2007/08 Performance indicator	Assessment	Comment
BV 15 Percentage of buildings accessible for disabled people	The variance is attributable to a real change in performance	Council has programme of improvements in place to increase access to public buildings
BV 8 Racial incidents per 100000	The variance is attributable to a real change in performance	There were only two reported incidents in 2007/08
BV 17a The percentage of appeals allowed against the authorities decision to refuse planning applications	The variance is attributable to a real change in performance	Council has programme of training with Members and reviewed processes in place to improve performance.
BV 204 Number of homelessness cases prevented	The variance is attributable to a real change in performance	This function was brought back to the Council control from East Durham Homes, and strengthened, following a review of the service two years ago.
BV 213 Information on contaminated land is available to decide whether remediation of the land is necessary, as a percentage of 'sites of potential concern'.	The variance is attributable to a real change in performance	The number of site of potential concern has reduced, as they were no longer of 'potential concern'.
BV 216b Conservation areas - character appraisals	The variance is attributable to a real change in performance	There are four conservation areas within the District, during 2007/08, the Council completed another appraisal, bringing the total to three completed.
BV 219b Advice and Guidance Services: direct provision	The variance is attributable to a real change in performance	Increase due to the set up of the new Homelessness Unit, providing direct advice to the public - increase is therefore in staff costs.

Detailed findings

2007/08 Performance indicator	Assessment	Comment
BV 226c Number of private sector dwellings returned into occupation	The variance is attributable to a real change in performance	limited resources available during year has had impact on the indicator
BV 64 Rent Collection and Arrears Recovery - seven weeks arrears	The variance is attributable to a real change in performance	Performance Improvement Activity at East Durham Homes during the early part of the financial year led towards a restructuring of the Rent arrears team, resulting in the creation of additional capacity to provide better focus on this area, including carrying out more frequent preventative work to take early action with tenants running into arrears.
BV 66b Rent Collection and Arrears Recovery - Notice seeking and possessions served	The variance is attributable to a real change in performance	Work in conjunction with East Durham Homes has seen improvements
BV 66c Rent Collection and Arrears Recovery - Evictions	The variance is attributable to a real change in performance	Work in conjunction with East Durham Homes has seen improvements
BV 66d Percentage of recoverable overpayments recovered (HB)	The variance is attributable to a real change in performance	Improved recovery mechanisms and piloted use of external debt collection service
BV 79b (i) Percentage of recoverable overpayments recovered (HB)	The variance is attributable to a real change in performance	Improved recovery mechanisms and piloted use of external debt collection service

28 All other PIs reviewed were found to be complete and within plausible and permissible values.

Data quality spot checks (Stage 3)

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

Table 3 Spot check findings

Performance indicator	Assessment	Comment
Housing Benefits BVPI 78a	Indicator is fairly stated.	Detailed testing confirmed that the PI was correctly stated.
Housing Benefits BVPI 78b	Indicator is fairly stated	Detailed testing confirmed that the PI was correctly stated.

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