Cabinet – 14 June 2006

BVPI 2005/06 Out-turn and Securing Data Quality

Portfolio: Councillor Marco Longhi, Transformation and performance management

Service: Corporate Performance Management

Wards: All

Key decisions: No

Forward plan: No

Summary of report

This report seeks approval to publish the 2005/6 out-turn as an addendum to the council's 2006/7 corporate plan and approve the new data quality assurance policy for the council. The addendum sets out our performance during 2005/6 and forward targets for key performance indicators for the next 3 years. The report also highlights work underway to strengthen and improve data quality arrangements throughout the council to ensure data used to support key decision making is accurate and robust which is formalised through the quality assurance policy.

Recommendations

(1)   That cabinet approve the draft 2005/6 out-turn data for publication as an addendum to the 2006/7 corporate plan for publication before 30 June. (**Appendix A**)

(2)   That the Executive Director (Corporate Services) be delegated authority to finalise the addendum prior to publication in line with legislative requirements.

(3)   That cabinet approve the new data quality assurance policy for the council. (**Appendix B**)

Resource and legal considerations

Robust performance management and reporting framework contributes to the effective management of resources and informs decisions to invest in or divest services. As a 3 ★ rated authority we are no longer required to publish a full Best Value Performance Plan as in previous years. Under new streamlined requirements for producing Best Value Performance Plans set out in ODPM circular 05/2006 published in April 2006, 4

★ and 3 ★ rated authorities are required to publish the following performance data by 30 June:

1) Out-turn performance over the past year on all Best Value Performance Indicators (BVPIs)
2) Targets for the current year and subsequent 2 years for all BVPIs.

This data can be published as an addendum or annexe to the council's corporate plan. The draft addendum shown at **appendix A** complies with these requirements.

The tight timescales and the meetings timetable mean that inevitably the draft addendum contains a number of gaps whilst information and data is being finalised following the year end. As has occurred previously, it is proposed to be finalised by officers prior to publication.

Due to recent developments in CPA and, in particular, strategic regulation more reliance is being placed on performance data than ever before. One implication of this is that Audit Commission (AC) is currently developing a new approach to the audit of BVPIs and other non BVPI measures i.e. Housing Investment Program (HIP) and Public Library Service Standards (PLSS) in local government. This approach is being developed so that it will both:

- enable auditors to deliver their conclusion on audited bodies' arrangements to secure value for money (specifically the arrangements for 'monitoring and reviewing performance, including arrangements to ensure data quality'); and
- support the Commission's CPA function.

The new approach will be rolled out in spring 2006, in relation to performance indicators for 2005/06 to inform CPA 2006.

Walsall council has worked as a pilot authority with the AC to develop and refine their approach so that it best serves the needs of the AC and also minimises the audit burden placed on councils. Although formal feedback is not yet available, a data quality assurance policy has been developed (**Appendix B**) based on draft key lines of enquiry made available to us during the pilot and discussions with the local Audit Manager and his team. The policy aims to:

- Make Walsall council a leading authority on the collection, recording, analysis and reporting of accurate, reliable and consistent performance data to inform the decision making process
- Provide council employees with a framework to ensure sufficient action is being taken to meet the data quality objectives set
- Meet external audit standards and requirements
- Make a significant impact on the council's path to excellence requirements in relation to data integrity and decision making processes

Meeting these aims will ensure the council has made all reasonable efforts to ensure the data upon which key decisions are made and which ultimately affect the lives of our citizens are as robust and accurate as possible.

Citizen impact

The council's commitment to improving services will impact on all borough residents. This performance data and forward targets demonstrates the ways in which the council is ensuring continuous service improvement. It is essential that this data is used to practically and proactively manage performance, targeting effort and resources to improving on a continuous basis.

Community safety

Several BVPIs relate to community safety issues and reported under community safety and well being in **appendix A**. These include measures around domestic burglaries, violent crime, vehicle crime, robberies and domestic crime.

Environmental impact

Several BVPIs relate to environmental issues and are reported under environment and environmental health in **appendix A**. These include measures around waste, environmental health, transport and planning.

Performance and risk management issues

Regular performance monitoring and reporting is part of the council's corporate integrated planning and performance framework (CIPPF). This report includes BVPIs that are used within the scoring process for the Comprehensive Performance Assessment (CPA). Our focus is to improve council performance to benefit our residents and service users. The CPA uses PIs and inspection results to award an overall category to every council. Current proposals for CPA 2006 continue the move away from service inspections for Housing, Culture and the Environment, placing greater emphasis on PIs and other performance data. The CPA category is intended to show each council's performance relative to others. These high level PI targets are used to manage performance of services, teams and individuals; with targets set for individual employees through the internal individual performance management system.

Regular performance monitoring and reporting is used proactively to measure progress towards achieving targets and to benchmark our services with others. This enables services to take corrective action where necessary to ensure that performance stays on track and improves. BVPIs are monitored via the service plan review process, the executive management team and directorate performance boards.

Analysis of the 2005/06 performance data available is shown in table 1 below

Table 1
BVPI Outturn summary as at 25/05/2006

	Improved or at optimum		Static		Declined		Total		Targets			
	Number of PI's	%	Number of PI's	%	Number of PI's	%	Number of PI's	%	Met or exceeded Target	%	Not met	%
Corporate Health	8	73%	1	9%	2	18%	11	100%	8	67%	4	33%
Education	11	79%	2	14%	1	7%	14	100%	5	31%	11	69%
Housing	10	83%	0	0%	2	17%	12	100%	15	88%	2	12%
Health & Social Care	10	91%	0	0%	1	9%	11	100%	12	92%	1	8%
Environment	21	72%	1	3%	7	24%	29	100%	21	51%	20	49%
Cultural & Related	2	67%	0	0%	1	33%	3	100%	2	67%	1	33%
Community Safety	3	60%	0	0%	2	40%	5	100%	2	33%	4	67%
Total	**65**	**76%**	**4**	**5%**	**16**	**19%**	**85**	**100%**	**65**	**60%**	**43**	**40%**

This shows that 76% of the councils BVPIs have either shown an improvement from their 2004/05 position or maintained optimum performance compared to 70% last year. 60% BVPIs also either met or exceeded their 2005/06 target compared to 55% in 2004/05. This level of continued improvement demonstrates further embedding of the CIPPF across the council.

Equality implications

Several BVPIs monitor equality and are reported under corporate health, community safety and well being in **appendix A**. These include measures to monitor the proportion of staff who are disabled, from minority ethnic backgrounds, and the proportion of senior posts occupied by women. The number of racial incidents is also reported. This enables council services to maintain a clear focus on these important aspects and thereby improve quality in both service delivery and employment matters

Consultation

All directorates have provided performance data and forward targets for BVPIs within their remit. The addendum will also be published on the website, and copies made available in key council buildings.

Vision 2008

The council's CIPPF framework monitors progress made towards achievement of its vision and key priorities. The performance data published show the incremental improvements being made each year which contribute towards the delivery of the council vision and its key priorities. This improvement is essential if the council is to achieve its overarching aim to be an excellent authority in both CPA and wider qualitative terms.

Background papers

Local Government Act 1999: part 1
ODPM Circular 05/2006
Corporate Plan 2006/07

Authors

Robert Flinter
Head of Performance Management
☎ 653524
✉ flinterr@walsall.gov.uk

Kam Mavi
Senior Performance Improvement Officer
☎ 652050
✉ mavik@walsall.gov.uk

Carole Evans
Executive Director

5 June 2006

Councillor Marco Longhi
Transformation & Performance Management

5 June 2006

	Corporate Health	Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 2a (Beacon Index)	The level (if any) of the Equality Standard for Local Government to which the authority conforms	2	2	2	↔	Comparator Data not available		2	3	3
BV 2b	The duty to promote race equality	84%	89%	89%	⬆	69%	63%	95%	100%	100%
BV 8	The percentage of invoices for commercial goods and services which were paid by the authority within 30 days of such invoices being received by the authority	62.80%	100.00%	91.20%	⬆	94.26%	88.30%	100%	100%	100%
BV 9 (Beacon Index)	Percentage of Council Tax collected	96.60%	96.80%	96.00%	⬇	96.90%	95.87%	97.10%	97.40%	97.60%
BV 10 (Beacon Index)	The percentage of non domestic rates due for the financial year which were received by the authority	97.80%	98.10%	97.50%	⬇	98.64%	98.02%	98.30%	99.00%	99.10%
BV 11a (Beacon Index)	The percentage of top 5% of earners that are women	35.19%	37.00%	39.12%	⬆	44.42%	41.15%	40.00%	42.00%	45.00%
BV 11b (amended) (Beacon Index)	The percentage of the top 5% of staff who are from an ethnic minority	9.74%	11.00%	11.01%	⬆	4.39%	3.53%	11.75%	12.00%	12.25%
BV 11c	The percentage of the top 5% of staff who have a disability	New indicator 2005/06	Target not set	1.66%	n/a	Comparator Data not available				
BV 12 (Beacon Index)	The number of working days/shifts lost due to sickness absence per FTE	11.02	8.00	10.14	⬆	10.59	11.51	9	8.75	8.5
BV 14	The percentage of employees retiring early (excluding ill-health retirements) as a percentage of the total workforce	0.53%	0.47%			0.28%	0.61%			
BV 15	The percentage of employees retiring on grounds of ill health as a percentage of the total workforce	0.34%	0.27%			0.33%	0.43%			

	Corporate Health	Our Performance				Comparator Data		Improvement Targets		
PI Ref	**PI Description**	**2004-05 Out-turn**	**2005-06 Target**	**2005-06 Out-turn**	**Trend**	**2004-05 Metropolitan Authority Top Quartile**	**2004-05 Metropolitan Authority Average**	**2006-07 Target**	**2007-08 Target**	**2008-09 Target**
BV 16a (Beacon Index)	The percentage of local authority employees declaring they meet the Disability Discrimination Act 1995 disability definition	1.86%	2.00%	2.63%	⬆	3.73%	2.91%	3%	3%	3.25%
BV 17a (amended) (Beacon Index)	The % of employees from ethnic minority communities	Amended 2005/06	9.5%	10.05%	n/a	4.6%	4.7%	9.75%	10.00%	10.25%
BV 156 (Beacon Index)	The percentage of authority buildings open to the public in which all public areas are suitable for and accessible to disabled people	18.00%	25.00%	31.50%	⬆	Comparator Data not available				
BV 157	The percentage of interactions with the public, by type, which are capable of electronic service delivery and which are being delivered using internet protocols or other paperless methods	86.00%	100.00%	100.00%	⬆	92.95%	80.41%	BVPI deleted		

	Education	Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 38	Percentage of 15 year old pupils in schools maintained by the Local Education Authority achieving 5 or more GCSEs at grades A*-C or equivalent	43.5%	46.0%	46.3%	↑	51.50%	47.70%	48%	51%	52%
BV 39	Percentage of 15 year old pupils in schools maintained by the Local Education Authority achieving 5 GCSEs or equivalent at grades A*-G or equivalent	81.1%	83.0%	81.3%	↑	88.0%	85.6%	N/A	N/A	N/A
BV 40	Percentage of pupils in schools maintained by the Local Education Authority achieving Level 4 or above in the Key Stage 2 Mathematics test	69.0%	81.0%	70%	↑	76.8%	73.3%	80%	80%	83%
BV 41	Percentage of pupils in schools maintained by the Local Education Authority achieving Level 4 or above in the Key Stage 2 English test	74.0%	79.0%	77%	↑	78.3%	76.1%	80%	81%	83%
BV 43a	Percentage of statements of special educational need issued by the authority in a financial year and prepared within 18 weeks excluding those affected by "exceptions to the rule" under the SEN code of practice.	74.6%	95.0%	93.60%	↑	99%	84.8%			
BV 43b	Percentage of statements of special educational need issued by the authority in a financial year and prepared within 18 weeks including those affected by "exceptions to the rule" under the SEN code of practice	71.4%	68.0%	69.80%	↓		65.8%			
BV 45	Percentage of half days missed due to total absence in secondary schools	8.4%	8.17%	7.93%	↑	7.79%	8.53%	7.86%	7.50%	7.17%
BV 46	Percentage of half days missed due to total absence in primary schools maintained by the local education authority	6.20%	6.00%	5.70%	↑	5.32%	5.68%	6.06%	5.88%	5.69%
BV 181a	Percentage of 14 year old pupils in schools maintained by the local education authority achieving Level 5 or above in the Key Stage test in English	65.00%	74.0%	69%	↑	69.25%	66.2%	76%	77%	79%

PI Ref	PI Description	Our Performance				Comparator Data		Improvement Targets		
		2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 181b	Percentage of 14 year old pupils in schools maintained by the local education authority achieving Level 5 or above in the Key Stage test in Mathematics	65.00%	69.00%	67%	↑	73.25%	69.26%	73%	75%	79%
BV 181c	Percentage of 14 year old pupils in schools maintained by the local education authority achieving Level 5 or above in the Key Stage test in Science	58.00%	63.00%	61%	↑	66.25%	61.42%	70%	74%	74%
BV 181d	Percentage of 14 year old pupils in schools maintained by the local education authority achieving Level 5 or above in the Key Stage test in ICT assessment	62.00%	73.00%	68%	↑	70.78%	65.74%	74%	75%	N/A
BV 194a	Percentage of pupils achieving level 5 or above in Key Stage 2: English	25%	32%	25%	⇔	27%	25%	N/A	N/A	N/A
BV 194b	Percentage of pupils in schools maintained by the local education authority achieving level 5 or above in Key Stage 2: Maths	26%	33%	26%	⇔	32%	30%	N/A	N/A	N/A
BV 221a	Participation in and outcomes from youth work:recorded outcomes	New indicator 2005/06	60.0%	86%	n/a	Comparator Data not available				
BV 221b	Participation in and outcomes from youth work:accredited outcomes	New indicator 2005/06	30%	12%	n/a	Comparator Data not available				
BV 222a	Quality of early years and childcare leadership - leaders	New indicator 2005/06	Target not set	49%	n/a	Comparator Data not available				
BV 222b	Quality of early years and childcare leadership - postgraduate input	New indicator 2005/06	Target not set	20%	n/a	Comparator Data not available				

Health & Social Care		Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 49 (PAF A1)	Stability of placements of children looked after by the authority by reference to the percentage of children looked after on 31st March in any year with three or more placements during the year	13.20%	11.50%	12.30%	↑	Comparator Data not available				
BV 50 (PAF A2) (Beacon Index)	Educational qualifications of children looked after (interface indicator with education services) by reference to the % of young people leaving care aged 16 or over with at least 1 GCSE at grades A*-G, or General National Vocational Qualification (GNVQ)	63%	50%	59%	↓	56%	49%			
BV 161 (PAF A4)	Employment, education and training for care leavers	75.00%	80.00%	1	n/a	84.00%	72.00%			
BV 162 (PAF C20)	Reviews of child protection cases	100%	100%	100%	optimum	100%	99%			
BV 163 (PAF C23)	Adoptions of children looked after	8.8%	9.0%	10.2%	↑	9.4%	7.9%			
BV 53 (PAF C28)	Intensive home care per 1000 population aged 65 or over	12.40	13.50	15.1	↑	23.43	18.59			
BV 54 (PAF C32)	Older people (aged 65 or over) helped to live at home per 1000 population aged 65 or over	63.90	68.00	68.5	↑	111.54	95.62			

	Health & Social Care	Our Performance				Comparator Data		Improvement Targets		
PI Ref	**PI Description**	**2004-05 Out-turn**	**2005-06 Target**	**2005-06 Out-turn**	**Trend**	**2004-05 Metropolitan Authority Top Quartile**	**2004-05 Metropolitan Authority Average**	**2006-07 Target**	**2007-08 Target**	**2008-09 Target**
BV 56	Percentage of items of equipment delivered within 7 working days	66%	70%	78.10%	⬆	90%	81%			
BV 195	Acceptable waiting time for assessment	46.5%	75.00%	87.20%	⬆	75.60%	67.40%			
BV 196	Acceptable waiting time for care-package	63.9%	86.00%	87.00%	⬆	90.30%	83.60%			
BV 201	Adults and older people receiving direct payments at 31 March per 100,000 population aged 18 or over (age standardised).	29	52	84	⬆	65	56			
BV 197 (Beacon Index)	Changes in the number of conceptions to females aged under 18, resident in an area, per thousand females aged 15-17 resident in the area, compared with the baseline year of 1998	-11.3%	-21.7%	-27.50%	⬆	-15.3%	-9.1%			

PI Ref	PI Description	Our Performance				Comparator Data		Improvement Targets		
	Housing	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 64	The number of private sector vacant dwellings that are returned into occupation or demolished during 2004-05 as a direct result of action by the local authority	33.00	45.00	77.00	⬆	140.75	163.42	125	150	
BV 183a (CPA)	The average length of stay in bed and breakfast accommodation	2 weeks	1 .00 week	1 .00 week	⬇	1 week	2 weeks	1 week	<1 week	<1 week
BV 183b (CPA)	The average length of stay in hostel accommodation of households which include dependent children or a pregnant woman whom are unintentionally homeless and in priority need	0 weeks	0 weeks	0 weeks	optimum	0 weeks	6 weeks	0	0	0
BV 202	The number of people sleeping rough on a single night within the area of the local authority	0	0-10 cases	0	optimum	Comparator Data not available		0	0	0
BV 203	The percentage change in the average number of families, which include dependent children or a pregnant woman, placed in temporary accommodation under the homelessness legislation compared with the average from a previous year	-13.0%	-1.00%	1.86%	⬆	41%	35%	-0.03%	-0.50%	-0.75%
BV 213	Number of households who considered themselves as homeless, who approached the local housing authority's advice service's), and for whom housing advice casework intervention resolved their situation.	New indicator 2005/06	50	119	n/a	Comparator Data not available		150	200	225
BV 214	Proportion of households accepted as statutorily homeless who were accepted as statutorily homeless by the same authority within the last two years.	New indicator 2005/06	<8%	3.32%	n/a	Comparator Data not available		3%	2.75%	2.50%
	Benefits									
BV 76a	Number of claimants visited per 1,000 caseload	7.16	125.00	129.51	⬆	256.89	217.04			

Housing		Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 76b	Number of fraud investigators employed per 1,000 caseload	0.19	0.18	0.20	⬆	Comparator Data not available				
BV 76c	Number of fraud investigations per 1,000 caseload	23.31	24.00	30.1	⬆	36.69	26.98			
BV 76d	Number of prosecutions and sanctions per 1,000 caseload	2.02	2.10	3.51	⬆	3.3	2.48			
BV 78a (Beacon Index)	Speed of processing - Average time for processing new claims	68.93 days	45 days	77.91 days	⬇	30.9	43.5			
BV 78b	Speed of processing - Average time for processing notifications of changes of circumstance	20.93 days	17 days	20.23 days	⬆	9.7 days	15.2 days			
BV 79a	Accuracy of processing - Percentage of cases for which the calculation of the amount of benefit due was correct on the basis of the information available for the determination for a sample of cases checked post determination	97.00%	98.00%	98.20%	⬆	98.85%	96.74%			
BV 79b(i) (amended)	The amount of housing benefit overpayments (HB) recovered during the period being reported on as a % of HB deemed recoverable overpayments during that period.	Amended 2005/06	55.00%	84.66%	n/a	Comparator Data not available				

Housing		Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 79b(ii) (amended)	HB overpayments recovered during the period as percentage of the total amount of HB overpayments debt outstanding at the start of the period plus amount of HB overpayments identified during the period	Amended 2005/06	30.00%	30.10%	n/a	Comparator Data not available				
BV 79b(iii) (amended)	Housing Benefit (HB) overpayments written off during the period as a percentage of the total amount of HB overpayment debt outstanding at the start of the period, plus amount of HB overpayments identified during the period.	Amended 2005/06	4.00%	1.39%	n/a	Comparator Data not available				

	Environment		Our Performance				Comparator Data		Improvement Targets		
PI Ref	**PI Description**	**2004-05 Out-turn**	**2005-06 Target**	**2005-06 Out-turn**	**Trend**	**2004-05 Metropolitan Authority Top Quartile**	**2004-05 Metropolitan Authority Average**	**2006-07 Target**	**2007-08 Target**	**2008-09 Target**
BV 199a (CPA)	The proportion of relevant land and highways that is assessed as having combined deposits of litter and detritus that fall below an acceptable level (%)	19.7%	18.5%	23%	⬇	Comparator Data not available				
BV 199b	The proportion of relevant land and highways (expressed as %) from which unacceptable levels of graffiti are visible	New indicator 2005/06	Target not set	10%	n/a	Comparator Data not available				
BV 199c	The proportion of relevant land and highways (expressed as %) from which unacceptable levels of fly posting are visible	New indicator 2005/06	Target not set	1%	n/a	Comparator Data not available				
BV 199d (Beacon Index)	The year-on-year reductions in total number of incidents and increase in total number of enforcement actions taken to deal with 'fly tipping'	New indicator 2005/06	Grade 2 Effective	Grade 2	n/a	Comparator Data not available				
BV 82a(i) (Amended) (CPA) (Beacon Index)	Percentage of household waste arisings which have been sent by the Authority for recycling	6.3%	13.0%	12.39%	⬆	Comparator Data not available				
BV 82a(ii) (Amended)	Total tonnage of household waste arisings which have been sent by Authority for recycling	New indicator 2005/06	19,674.85	16,420.90	n/a	Comparator Data not available				
BV 82b(i) (Amended) (CPA) (Beacon Index)	The percentage of household waste sent by the Authority for composting or treatment by anaerobic digestion	12.4%	12.0%	12.05%	⬇	Comparator Data not available				
BV 82b(ii) (Amended)	The tonnage of household waste sent by the Authority for composting or treatment by anaerobic digestion	New indicator 2005/06	18,161.39	15,975.56	n/a	Comparator Data not available				
BV 82c (i) (Amended)	Percentage of the total tonnage of household waste arisings which have been used to recover heat, power and other energy sources	6.2%	6.0%	3.36%	⬇	Comparator Data not available				

	Environment	Our Performance				Comparator Data		Improvement Targets		
PI Ref	**PI Description**	**2004-05 Out-turn**	**2005-06 Target**	**2005-06 Out-turn**	**Trend**	**2004-05 Metropolitan Authority Top Quartile**	**2004-05 Metropolitan Authority Average**	**2006-07 Target**	**2007-08 Target**	**2008-09 Target**
BV 82c (ii) (Amended)	Tonnage of household waste arisings which have been used to recover heat, power and other energy sources	New indicator 2005/06	9,080.69	4,452.39	n/a	Comparator Data not available				
BV 82d (i) (Amended)	Percentage of household waste arisings which have been landfilled	75.1%	69.0%	72.20%	⬆	Comparator Data not available				
BV 82d (ii) (Amended)	The tonnage of household waste arisings which have been landfilled	New indicator 2005/06	104,428.03	95,715.82	n/a	Comparator Data not available				
BV 84a (Amended)	Number of kilograms of household waste collected per head of the population	516.52kg	509.0kg	524.36kg	⬇	Comparator Data not available				
BV 84b (Amended)	Percentage change from the previous financial year in the number of kilograms of household waste collected per head of the population	Amended 2005/06	-1.45%	3%	n/a	Comparator Data not available				
BV 86	Cost of waste collection per household	£39.20	£46.00			£31.68	£37.74			
BV 87	Cost of waste disposal per tonne for municipal waste	£33.98	£40.77			£34.14	£38.91			
BV 91a (Amended) (CPA)	Percentage of households resident in the authority's area served by kerbside collection of recyclables	94.40%	96.0%	95.51%	⬆	Comparator Data not available				
BV 91b (Amended)	Percentage of households resident in the authority's area served by kerbside collection of at least two recyclables	94.40%	96.0%	95.51%	⬆	Comparator Data not available				

PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
	Environment		**Our Performance**			**Comparator Data**		**Improvement Targets**		
BV 223	Percentage of the local Authority principal road network where structural maintenace should be considered	New indicator 2005/06	Target not set			Comparator Data not available				
BV 224a (CPA)	Percentage of the non-principal classified road network where maintenance should be considered	New indicator 2005/06	Target not set			Comparator Data not available				
BV 224b (CPA)	Percentage of the unclassified road network where structural maintenance should be considered	New indicator 2005/06	Target not set			Comparator Data not available				
BV 99a(i) (CPA)	Number of people killed or seriously injured in road traffic collisions	108	148.0	97	⬆	86	153			
BV 99b(i)	Number of children (aged under 16 years) killed or seriously injured in road traffic collisions	16	31.5	24	⬇	14	27			
BV 99c(i) (CPA)	Number of people slightly injured in road traffic collisions	944	1016.5	868	⬆	953	1470			
BV 99a(ii)	Percentage change in the number of killed or seriously injured (All road users) in road traffic collisions since the previous year	11.3%	-4.0%	-10.10%	⬆	-9.09%	4.59%			
BV 99b(ii)	Percentage change in the number of children (aged under 16 years) killed or seriously injured in road traffic collisions since the previous year	-30.4%	-5.4%	50%	⬇	-15.28%	5.18%			

	Environment	Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 99c(ii)	Percentage change in the number of people slightly injured (All road users) in road traffic collisions since the previous year	0.6%	-0.9%	-8.10%	↑	-10.00%	-3.52%			
BV 99a(iii)	Percentage change in the number of people killed or seriously injured (All road users) in road traffic collisions since the 1994/98 average	-41.6%	-20.0%	-47.60%	↑	-28.07%	-18.21%			
BV99b(iii)	Percentage change in the number of children killed or seriously injured in road traffic collisions since the 1994/98 average	-61.9%	-25.0%	-42.90%	↓	-48.93%	-32.21%			
BV 99c(iii)	Percentage change in the number of slightly injured (All road users) in road traffic collisions since the 1994/98 average	-11.8%	-5.0%	-18.90%	↑	-16.61%	-6.89%			
BV 100	Number of days of temporary traffic controls or road closure on traffic sensitive streets or the road was closed, due to local authority road works or utility street works per km of traffic sensitive road	0.17	0.14	0.1	↑	0.00	0.80			
BV 165 (CPA)	The percentage of pedestrian crossings with facilities for disabled people	100.0%	100.0%			95.50%	79.90%			
BV 178a (CPA)	The percentage of the total length of footpaths and other rights of way which were easy to use by members of the public	64.6%	76.0%	51.2%	↓	comparator data not available				
BV 178b	Use the CSS/Countryside Agency methodology for BV 178? (Yes/No)	Yes	Target not required	Yes	optimum	comparator data not available				
BV 187 (CPA)	Condition of footways (Category 1,1a,2)	10%	10%			14%	23%			

PI Ref	PI Description	Our Performance				Comparator Data		Improvement Targets		
		2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 215a	The average number of days taken to repair a street lighting fault, which is under the control of the local authority	New indicator 2005/06	3 Days	2.87	n/a	comparator data not available				
BV 215b	The average number of days taken to repair a street lighting fault, which is under the control of a DNO	New indicator 2005/06	20 days	26.66	n/a	comparator data not available				
BV 216a	Number of 'sites of potenital concern' within the local authortiy area, with respect to land contamination	New indicator 2005/06	Target not set	1212	n/a	comparator data not available				
BV 216b	Number of sites for which sufficient detailed information is available to decide whether remediation of the land is necessary, as a percentage of all sites of potential concern	New indicator 2005/06	Target not set	2.55%	n/a	comparator data not available				
BV 217	Percentage of pollution control improvements to existing installations on time	New indicator 2005/06	Target not set	78%	n/a	comparator data not available				
BV 218a	Percentage of new reports of abandoned vehicles investigated within 24 hours of notification	New indicator 2005/06	100.0%	88%	n/a	comparator data not available				
BV 218b	Percentage of new reports of abandoned vehicles removed within 24 hours from the point at which the Authority is legally entitled to removed the vehicle	New indicator 2005/06	100.0%	94%	n/a	comparator data not available				
BV 106 (CPA)	Percentage of new homes built on previously developed land	91.80%	85.00%	100%	⬆	93.13%	82.88%			
BV 109a (CPA)	Percentage of planning applications determined in line with the Government's new development control targets to determine: (a) 60% of major applications in 13 weeks	52.04%	60.00%	67.31%	⬆	67.00%	57.96%			

	Environment	Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 109b (CPA)	Percentage of planning applications determined in line with the Government's new development control targets to determine: (b) 65% of minor applications in 8 weeks	65.05%	68.00%	82%	⬆	75.12%	67.77%			
BV 109c (CPA)	Percentage of planning applications determined in line with the Government's new development control targets to determine: (c) 80% of other applications in 8 weeks	83.85%	85.00%	91.03%	⬆	87.20%	83.33%			
BV 179 (CPA)	The percentage of standard searches carried out in 10 working days	100.00%	100.00%	100%	optimum	100.00%	95.86%			
BV 200a (Amended)	Did the local planning authority submit the Local Development Scheme (LDS) by 28th March 2005 and thereafter maintain a 3 year rolling programme?	Amended 2005/06	Yes	Yes	n/a	comparator data not available				
BV 200b (Amended)	Has the local planning authority met the milestones which the current Local Development Scheme (LDS) set sout?	Amended 2005/06	Yes	No	n/a	comparator data not available				
BV 200c (Amended)	Did the Local Planning Authority publish an annual report by 31st December of each year?	Amended 2005/06	Yes	Yes	n/a	comparator data not available				
BV 204	The number of planning appeal decisions allowed against the authority's decision to refuse on planning applications as a percentage of the total number of planning appeals against refusals of planning applications	46.6%	40.0%	31.0%	⬆	26.0%	33.9%			
BV 205	Score against a quality of service checklist	89.0%	100.0%	100.0%	⬆	88.9%	81.2%			
BV 166a (CPA)	Score against a checklist of enforcement best practice for environmental health	78.0%	90.0%	80.0%	⬆	100.0%	93.4%			

		Environment		Our Performance				Comparator Data		Improvement Targets		
PI Ref	**PI Description**		**2004-05 Out-turn**	**2005-06 Target**	**2005-06 Out-turn**	**Trend**	**2004-05 Metropolitan Authority Top Quartile**	**2004-05 Metropolitan Authority Average**	**2006-07 Target**	**2007-08 Target**	**2008-09 Target**
BV 166b (CPA)	Score against a checklist of enforcement best practice for trading standards		100.0%	100.0%	100.0%	optimum	100.0%	93.4%			

Cultural & Related Services		Our Performance				Comparator Data		Improvement Targets		
PI Ref	PI Description	2004-05 Out-turn	2005-06 Target	2005-06 Out-turn	Trend	2004-05 Metropolitan Authority Top Quartile	2004-05 Metropolitan Authority Average	2006-07 Target	2007-08 Target	2008-09 Target
BV 170a (Amended)	The number of visits to/usages of local authority funded or part-funded museums per 1,000 population	1049	1171	1473	⬆	1406	1003			
BV 170b (Amended)	The number of visits to/usages of local authority funded or part-funded museums that were in person per 1,000 population	637	752	598	⬇	774	643			
BV 170c (Amended)	The number of pupils visiting museums & galleries in organised school groups	13034	12838	13851	⬆	19597	12928			
BV 219a	Total number of conservation areas in the local authority area	New indicator 2005/06	Target not required	18	n/a	Comparator Data not available				
BV 219b	Percentage of conservation areas in the local authorioty area with an up to date chracter appraisal	New indicator 2005/06	Target not required	22%	n/a	Comparator Data not available				
BV 219c	Percentage of conservation areas with published management proposals	New indicator 2005/06	Target not required	0%	n/a	Comparator Data not available				
BV 220	Compliance Against the Public Library Service Standards	New indicator 2005/06	20	Outturn will be provided via IPF following the publication of the Library Annual CIPFA Statistics		Comparator Data not available				

Community Safety		Our Performance				Comparator Data		Improvement Targets		
PI Ref	**PI Description**	**2004-05 Out-turn**	**2005-06 Target**	**2005-06 Out-turn**	**Trend**	**2004-05 Metropolitan Authority Top Quartile**	**2004-05 Metropolitan Authority Average**	**2006-07 Target**	**2007-08 Target**	**2008-09 Target**
BV 126	Domestic burglaries per 1,000 households	14.21	13.50	13.9	⬆	13.86	18.48			
BV 127a (Amended)	Violent crime per year, 1000 population in the Local Authority Area	Amended 2005/06	22.19	25.4	N/A	4.72	7.00			
BV 127b (Amended)	Robberies per year, per 1,000 population	1.49	1.41	1.81	⬇	11.21	13.25			
BV 128 (Amended)	Vehicle crimes per year per 1,000 population	14.33	13.62	15.27	⬇	14.68	16.83			
BV 174	The number of racial incidents recorded by the authority per 100,000 population	45.76	47.50	80.69	⬆	Comparator Data not available		82.84	86.78	90.73
BV 175 (CPA)	The percentage of racial incidents that resulted in further action	100.00%	100.00%	100.00%	Optimum	Comparator Data not available		100.00%	100.00%	100.00%
BV 225	The percentage of 'yes' responses to the 11 Actions Against Domestic Violence questions	New indicator 2005/06	Target not required			Comparator Data not available				
BV 226a	Total amount spent by the Local Authority on Advice and Guidance services provided by external organisations	Amended 2005/06	Target not required	£ 678,187.00	n/a	Comparator Data not available				
Clarification being sought from Audit Commission on whether funding provided to external organisations from external funding sources such as Supporting People should be included in these figures or not										
BV 226b	Percentage of monies spent on advice an guidance services provision which was given to organisations holding the CLS Quality Mark at 'General Help' levels and above.	Amended 2005/06	Target not required	56.50%	N/A	Comparator Data not available				
BV 226c	Total amount spent on Advice and Guidance in the areas of housing, welfare benefits and consumer matters which is provided directly by the authority to the public.	Amended 2005/06	Target not required			Comparator Data not available				

Version: Draft 1.6

Walsall Council	**Data Quality Assurance Policy Document**

CONTENTS

1. INTRODUCTION

This is the first edition of the Council's Data Quality Assurance Policy (DQAP). The main objectives of the policy are to set out how the council wishes to effectively manage and optimise the quality of its performance management data now and in the future and to ensure this approach facilitates delivery of the council's vision, aims and objectives.

All effective organisations measure their performance to understand how well they are performing and to identify opportunities for improvement. It is a vital component in the drive to improve services.

The effective use of performance measurement depends on indicators that are robust and accurate. There needs to be sufficient operational data available to be sure that performance is on track, and so that early warning can be given if targets may be missed.

There is an increased emphasis on the use of published performance indicators as the primary means by which public bodies account for the non-financial aspects of their performance to service users and other stakeholders. Performance information is also used to monitor and manage performance, aid benchmarking, set targets and allocate resources.

'Performance information' covers a wide range of quantitative data, including financial and non-financial information. Performance indicators are a means of reporting performance information.

In practice data quality management is very much a part of the council's mainstream activity, and whilst this document seeks to bring together in one place the major components of the policy, in practice elements of it are evident in a range of council activities, processes and culture.

The principles are intended to remain relatively constant thus providing a robust and consistent approach whilst enabling organisational improvement and transformation. Although intended to remain broadly constant, these principles will be reviewed and refreshed each year to reflect our evolutionary development.

The national and local context elements will be reviewed and changes made in our policy to reflect internal and external factors.

Risk will be managed using our established best practice principles. Prevailing risks to data quality will be identified and managed within that framework and updated regularly, according to the nature of each risk.

Councils increasingly operate within the wider local, sub-regional, regional and national communities; working with a range of partners and other stakeholders to deliver joint aims and objectives, most notably those in the local Community Plan. It is essential, therefore, that the data quality implications of joint work are considered and addressed.

2.   NATIONAL CONTEXT

The Comprehensive Performance Assessment (CPA) framework applied by the Audit Commission (AC) is highly dependent upon performance indicator data to decide the overall performance category of each authority. For the CPA rating to be valid it must be based upon accurate and reliable performance indicators.

The CPA methodology for service assessments is now also less dependent on inspection activity and makes more effective use of performance information, specifically in environment, housing and culture services.

The AC is changing its approach to the review of management arrangements for data quality. The new approach will enable them to form a judgement on the adequacy of the arrangements a body has in place to monitor the quality of its performance information, and to report the results to members. This judgement will form one of the criteria on which the 2005/06 value for money conclusion will be based.
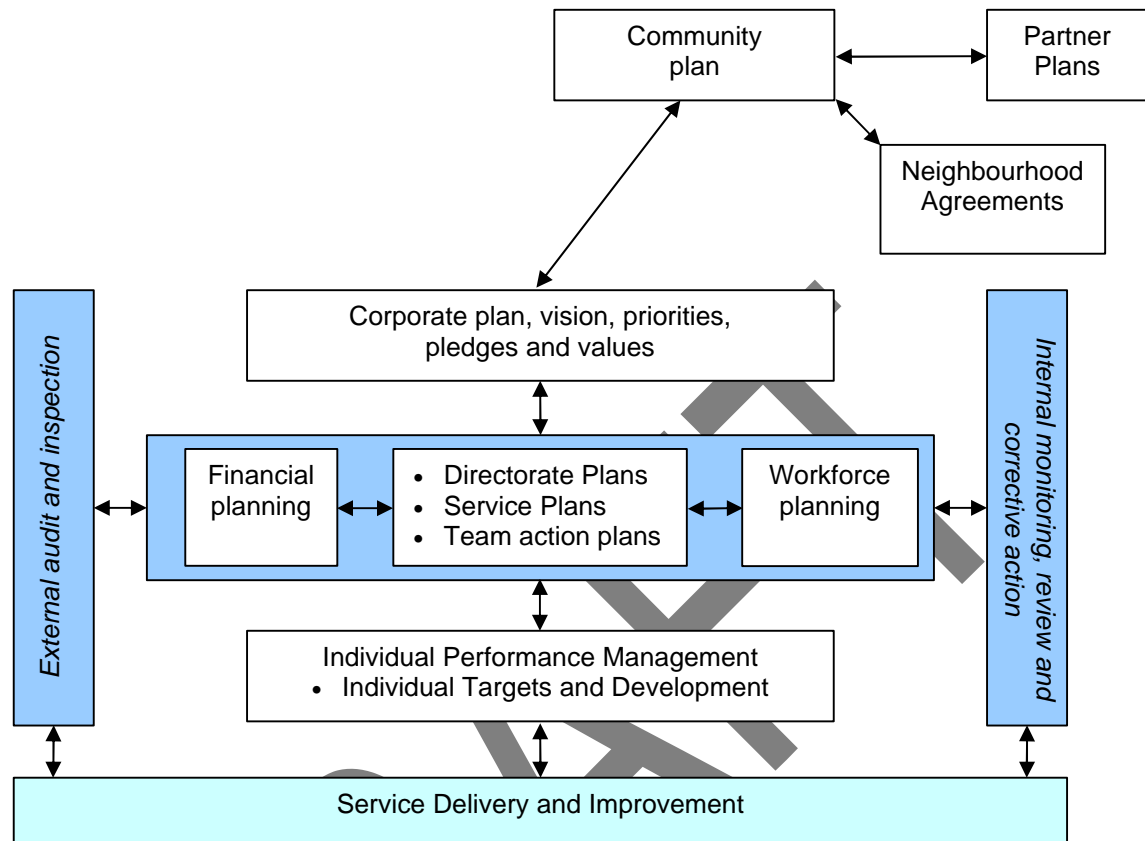
3.   LOCAL CONTEXT

Significant improvements to data quality have been secured within the council over the last few years both at a strategic and operational level. Integrating data quality into the Corporate Integrated Planning and Performance Framework (CIPPF) is an acknowledgement of the commitment required to manage data quality effectively.

The CIPPF sets out how the various planning processes interlink and jointly demonstrate how services and resources are managed. It is the framework within which the council operates and is underpinned by functional frameworks that provide guidance and protocols. The CIPPF exists to embed performance management and continuous improvement into our normal business activities. It connects the following:

- Community Plan
- Corporate Plan, vision, pledges and values
- Service planning (of all levels) of the council and its partners
- Neighbourhood Agreements
- Individual Performance Management (IPM)

All of which take place in an environment of stakeholder influence, audit and inspection, internal control and monitoring in order to develop continuously improving services. The diagram overleaf shows the major components of the CIPPF.

CORPORATE INTEGRATED PLANNING & PERFORMANCE FRAMEWORK

```
                          ┌──────────────┐        ┌──────────┐
                          │ Community    │◄──────►│ Partner  │
                          │ plan         │        │ Plans    │
                          └──────────────┘        └──────────┘
                                                  ┌──────────────┐
                                                  │ Neighbourhood│
                                                  │ Agreements   │
                                                  └──────────────┘

┌───────────┐     ┌─────────────────────────────┐     ┌──────────────┐
│ External  │     │ Corporate plan, vision,     │     │ Internal     │
│ audit and │     │ priorities, pledges and     │     │ monitoring,  │
│ inspection│     │ values                      │     │ review and   │
│           │     └─────────────────────────────┘     │ corrective   │
│           │     ┌─────────────────────────────┐     │ action       │
│           │◄───►│ ┌─────────┐ ┌─────────────┐ ┌─────────┐ │
│           │     │ │Financial│ │•Directorate │ │Workforce│ │
│           │     │ │planning │ │  Plans      │ │planning │ │
│           │     │ │         │ │•Service     │ │         │ │
│           │     │ │         │ │  Plans      │ │         │ │
│           │     │ │         │ │•Team action │ │         │ │
│           │     │ │         │ │  plans      │ │         │ │
│           │     │ └─────────┘ └─────────────┘ └─────────┘ │
│           │     └─────────────────────────────┘     │              │
│           │     ┌─────────────────────────────┐     │              │
│           │     │ Individual Performance      │     │              │
│           │     │ Management                  │     │              │
│           │     │ •Individual Targets and     │     │              │
│           │     │   Development               │     │              │
│           │     └─────────────────────────────┘     │              │
└───────────┘                                         └──────────────┘
┌─────────────────────────────────────────────────────────────────┐
│                 Service Delivery and Improvement                   │
└─────────────────────────────────────────────────────────────────┘
```

Although developed as a separate policy, the approach to data quality is very much an integral element of all council services. Through incorporating it into the CIPPF the council recognises the importance of a robust and consistent approach to data quality.

This policy has been written to address the issue of data quality assurance within the council. It is supported by a comprehensive delivery plan, with a current set of operational procedures and guidance under development.

There are already a range of activities undertaken to ensure data collected, recorded, analysed and reported is accurate, reliable and consistent. This document and its associated delivery plan seeks to formally set out the council's approach to data quality to ensure that high standards are clearly set, achieved and maintained.

The development of this policy fully supports the vision and priorities of the council by making sure that accurate and trustworthy data is used in the decision making and planning processes.

Ultimately, the performance culture of the council will have a considerable impact on the accuracy of the data it produces. As performance measures are

more widely used to help manage performance, greater focus is placed upon how these figures are produced and the processes employed to produce them. As a result any potential weaknesses in the data process are identified and can be addressed accordingly.

4. THE IMPORTANCE OF DATA QUALITY

To maintain strong corporate governance, political and managerial leaders need to know how effective the council is both in terms of individual service delivery and whether it is actually making a positive difference to the quality of life of the citizens of Walsall. Council leadership can only achieve this if it has up to date and accurate information on performance. One of the main ways in which the effectiveness of the council is judged is by measuring performance and assessing it against desired outcomes.

Good quality information is essential for sound decision making at every level and is an underpinning element of the CIPPF. It is vital that the performance information used to inform, manage and plan activities is accurate, reliable and comparable, both over time and with different authorities/service providers.

The council has a statutory responsibility to publish performance information and to provide assurance that the data is accurate. To achieve this, adequate arrangements for data quality must be in place across the authority.

If guidelines are not followed closely or if data is unreliable then there is more chance that the out-turn itself will be flawed. This could result in the qualification of the indicator and undermine external confidence in the robustness of the council's quality assurance arrangements resulting in a negative impact on inspection and assessment processes. In extreme cases it could also result in management reaching the wrong decision impacting negatively on the council's CPA path to excellence targets. Conversely, if the quality of the data is higher, the resulting information is more likely to be accurate and consistent.

As the accountable body for Walsall's Local Area Agreement (LAA), the council is working closely with Walsall Borough Strategic Partnership (WBSP) to help manage performance against targets set in the LAA to secure potential funding of £8.75m of funding. Accurate, trustworthy and timely data is essential in monitoring performance against these targets to maximise the likelihood of achieving them by promptly identifying areas where performance is off track.

Poor quality data can mean that comparisons and benchmarking fail to produce useful ideas for improving performance, that the credibility of the information is weakened and that corrective action does not occur when it should.

Initial analysis suggests that the quality of data underlying performance information is variable across the council. Internal controls over the recording

of data and preparation of performance information may not be as well developed as data utilised within financial management processes.

It is not possible to apply a universally accepted process covering the collection and collation of performance data as each measure is subject to its own method of counting. However, a standard approach to the principles of accurate data collection and collation can be applied in order to increase the level of confidence in the quality of performance data used.

5. POLICY AIMS

This policy aims to:

- Make Walsall Council a leading authority on the collection, recording, analysis and reporting of accurate, reliable and consistent performance data to inform the decision making process
- Provide council employees with a framework to ensure sufficient action is being taken to meet the data quality objectives set
- Meet external audit standards and requirements
- Make a significant impact on the council's path to excellence requirements in relation to data integrity and decision making processes

6. APPLICATION OF THE POLICY

This policy applies to all employees of Walsall Council as it is clear that all staff have a responsibility for data quality. It is accepted, however, that certain officers will have greater lead responsibility for activities to secure a high standard of data quality and this is outlined within the policy itself.

This policy and the overall data quality approach are championed at EMT level by the Executive Director for Corporate Services. A similar member champion will be identified at cabinet level.

It is also acknowledged that the Internal Audit service has an important role in securing quality data within the council. Both the corporate performance management team and individual services will continue to work closely with Internal Audit where appropriate to help improve data quality.

A number of activities and actions are required to maintain quality data and to achieve this there is an associated delivery plan with clearly identified actions, responsibilities and timescales to support improvement.

7. A QUALITY ASSURANCE APPROACH

Data quality assurance involves identifying processes, applying standards, assessing performance and providing guidelines, templates and tools to enable and sustain improvement.

Four core areas have been identified which form the basis of the council's overall policy on data quality. This approach will help support a common structure to the collection, recording, analysis and reporting of data across the authority. The four core areas of the approach are:

- **Clearly understood standards**
- **Fully applied standards**
- **Effective management of information quality**
- **Creation of a quality culture**

7.1   Clearly Understood Standards

In order to be able to produce quality data it is imperative that there is a sound understanding of what quality data is. Clearly understood standards supported by guidance and assistance, both corporately and from within the directorates, will ensure that all staff involved in the data process adhere to the appropriate guidelines.

Formal control procedures are being established based upon already identified good practices within the council to ensure that there is a documented set of guidelines for the data collection and reporting process. The corporate performance management team will consult with the internal audit service on how best these procedures can be evaluated.

Confirmation will be required that current performance measure definition guidelines as produced by the relevant authoritative body are understood and applied in terms of the collection, calculation and reporting of the measure. This will be addressed through the development of formal procedures and guidance, which will be communicated to appropriate staff through the performance improvement group. The corporate performance management team will collate a record to verify that current definitions are applied consistently.

Local authorities use more than simply best value performance indicators (BVPIs) as a means of measuring performance. Walsall utilises various different indicators including; Public Library Service Standards (PLSS), Performance Assessment Framework (PAF) statements, Housing Investment Programme (HIP) statements, local PIs etc which will all require the same clear understanding in order to ensure data quality standards are maintained.

Any alterations or amendments to existing indicators will need to be communicated in a structured way to ensure all appropriate staff are made aware of such changes and the impact changes may have on reporting mechanisms and quality control. This will be done through the corporate performance management team via the performance indicator group. The same process will apply for all new indicators.

When communicating the required standards in relation to performance indicators, it is important that staff involved in the data process also understand the impact the quality of data they produce has across their

service, directorate and ultimately the council as a whole – including the potential impact upon CPA scores.

Standards also need to be understood by senior managers and members, recognising the different role of council, cabinet, audit committee in relation to internal audit service reports and scrutiny panels regarding their role in policy development and also as a critical friend.

In providing services to the people of Walsall the council works in many different ways with various different partner organisations and groups. Information gathered by the council is used to develop the ambitions for the community and its neighbourhoods. It is through data sharing between partners that perhaps one of the biggest threats to data quality exists. It is essential that the understanding of data standards extends beyond the council in such circumstances to ensure quality is not compromised. This will require service level agreements or shared data protocols to formally establish terms between partners.

Each year there are a number of performance indicators which are nationally deemed as 'high risk' by the Audit Commission. In addition to this the local audit manager performs a risk assessment and can decide to add to this list if necessary. Work is then undertaken to scrutinise data quality standards on these measures and recommendations are made where appropriate. The corporate performance management team works with directorates to ensure recommendations are implemented and communicated through the performance improvement group to services and co-ordinates responses back to the Audit Commission.

In addition to this the council employs a formal risk management process which is used to identify, monitor and review risks at all levels within the organisation. It is the responsibility of each directorate to ensure that any potential risks which may arise relating to the reliability and accuracy of performance data are recorded and managed in accordance with the corporate process.

7.2 Fully Applied Standards

Although each performance indicator will undoubtedly be subject to its own rules of counting, there remains a very real need to maintain a standard approach to the principles of accurate data collection, collation recording, analysis and reporting in order to increase the level of confidence in the quality of performance data used.

The corporate performance management team is responsible for the development of information templates which are to be adopted and applied within directorates and will consult all services as items are developed.

All performance indicators will need to have an accepted chain of accountability with nominated owner and data providers being identified and recorded. Data providers will be responsible for supplying performance figures

for indicators to the corporate performance management team and also into the councils' Performance Information Management System (PIMS). Data owners will be the accountable person for that indicator with whom escalated issues will be resolved.

Any new performance indicators will require a nominated owner and data provider. This will be determined by the service area the indicator relates to.

An up-to-date record of all data owners and providers will be maintained at a corporate level by the corporate performance management team and this will be shared and reviewed through the performance improvement group which contains representatives from all directorates.

All final year end out-turn data will be compiled using corporate templates which are distributed from and returned to the corporate performance management team with associated supporting evidence. The team will monitor their return, and once received the data templates will be used as part of the provision of figures and evidence to the Audit Commission.

The corporate performance management team will initiate a review of the out-turn data and evidence provision process in conjunction with performance improvement group where potential improvements can be discussed and implemented where appropriate. This will take place once Audit Commission has completed their work with the data and evidence.

7.3 Effective Management of Information Quality

In order to maintain high standards of data quality, there needs to be an ongoing robust monitoring and review of processes and practices.

Through the use of all published guidance from sources such as the Audit Commission, other Government Departments etc the corporate performance management team will ensure correct processes and practices are communicated through the performance improvement group to appropriate members of staff.

Performance improvement group representatives will extend the link from the corporate centre out into the directorates. They will be instrumental in monitoring the processes and practices at service level to ensure they continue to meet the standards required.

Any recommendations made following internal or external inspections or reviews of data quality will be addressed through the performance improvement group.

The council's corporate integrated planning and performance framework outlines the role of performance boards which will include data quality reviews. This forum provides a structured opportunity for data issues identified to be raised and resolved.

The council is currently reviewing its responsibility to ensure that information systems are secure through effective continuity planning. The executive management team have identified 20 essential services which are in the process of reviewing their current plans. Three of these services cover the provision of e-services; e-mail, internet/intranet, and telephony. Although responsibility for electronic continuity rests with the council's information system services (ISS), services will be examining their system continuity requirements in order to discuss with ISS how they can best be met. This provides protection for records and data which are vital to the continued effective functioning of the council.

The council's performance information system (PIMS) contains current and historic data on a broad range of performance measures and helps directorates and services perform statistical analysis and produce performance reports to inform decision making and planning. PIMS is used not only to monitor performance across the directorates and services, but also provides management and members with accurate and timely performance data on the Beacon Index. PIMS is also being used to host the scorecard for performance management of Walsall's Local Area Agreement. Access to this system is strictly controlled by an authority administrator based in the corporate performance management team. All data held within this secure system is supported by a daily back-up performed by ISS.

7.4 Creation and maintenance of a quality culture

The ultimate aim for the council is to embed a culture of data quality as part of the day job across the authority.

The monitoring and review of data quality forms part of the corporate integrated planning and performance framework. This illustrates the relationship between the various elements of the organisation that when jointly managed ensure continuous improvement and effective service delivery.

Effective leadership and awareness are essential to the development of a quality culture in Walsall. Whilst the drive to improve services must be service led, the corporate performance management team will support services in the pursuit of better data quality.

There will be a clear defined responsibility for data quality, with an executive director having overall strategic responsibility and a member also having a champion role for data quality issues.

The performance management network group (PMNG) is a network of senior officers with particular responsibility for performance management across all directorates. Their role is crucial in supporting and communicating the corporate commitment to data quality. This group will also provide a facility for the escalation of issues relating to data quality, consider the strategic impact of them and decide on the most appropriate course of action. The performance improvement group will be used as a sub-group of PMNG to resolve issues relating directly to performance indicators.

It is important that people are appropriately trained to meet data quality standards. Such training will take place in awareness sessions or one-to-ones as and when required as opposed to solely providing classroom training sessions. This will allow a flexible, prompt and tailored delivery to ensure data quality is not jeopardised due to lack of knowledge.

Examples of data quality best practice within the authority will be communicated through the corporate centre via performance improvement group.

Once this policy has become more established within the council it will be the responsibility of the corporate performance management team to review the effectiveness of monitoring and review arrangements. This can be performed through gap analysis of the key lines of enquiry, and benchmarking activity against other authorities.

All policy and procedures will be reviewed at least annually and updated when required.

8 CONCLUSION

In order to reach a high standard of data quality the council must be able to satisfy the Audit Commission that processes and practices are in place and are sufficiently incorporated into every day business.

Improving data quality is a complex issue as poor data quality often stems from a number of factors and it is unlikely that one single intervention will address all issues. By setting and communicating clear standards, supporting services in their delivery, and monitoring and reviewing their application, improvements can be made and high levels of data quality can be secured.

This policy and the delivery plan will be regularly reviewed to ensure any new issues are included and the ultimate aim of embedding a data quality culture is achieved, making the council a leading authority on data quality.

9 MONITORING AND DELIVERY

The delivery plan associated to this policy will be used to drive improvements in data quality within the council. It contains clearly identified actions, responsibilities and timescales and will be managed by the corporate performance management team.

Ongoing monitoring will take place within the performance team which will report progress to performance management network group on a quarterly basis. The head of corporate performance management will also report progress through the corporate services directorate performance board and issues will be raised with cabinet and scrutiny as necessary.

Data Quality Assurance Delivery Plan

Ref	Requirement	Action	By Whom	By When	Comments/Status
Clearly Understood Standards					
1	Confirm that current performance measure definition guidelines are understood and applied correctly	Check that all staff applying guidelines use and understand most recent version	PIG	Ongoing	
2	Ensure that staff involved in the data process understand the role their work plays through their service, directorate and council, including impact upon CPA scores	Awareness sessions to be held in all directorates to be delivered to all staff involved in the data process	CPM Performance Team and Performance Management Account Managers	Ongoing	
3	Relevant staff are informed of any policy or procedure updates on a timely basis	Formal communications process to be drawn up and applied	CPM Performance Team and PIG	Ongoing	Although process already in place, requires formal guidelines document
4	Adequate support is provided for all staff	Accountabilities framework to be communicated to all appropriate staff. Corporate contact point to be set up and incorporated into responsibilities table	Andy Field – CPM Performance Team	30/06/06	
5	A formal set of quality requirements is applied to all third party data used by the organisation	Service level agreements or data sharing protocol to be established with all partners providing data	Service area or directorate leading / involved in establishing the partnership	Ongoing	
Fully Applied Standards					
6	Accountability for data quality throughout the organisation is clearly and formally defined	Accountabilities framework to be drafted detailing where data quality responsibilities lie	Andy Field – CPM Performance Team	30/06/06	
7	Accountability for data quality is part	Check job descriptions of appropriate	CPM	30/06/06	

	of IPM for those defined as responsible for data quality	staff and amend as necessary			
8	All performance indicators will need to have an accepted chain of accountability with nominated owner and data providers being identified and recorded	A comprehensive and up-to-date list of data providers and owners to be compiled and maintained	Angela Slattery – CPM Performance Team	Ongoing	Initial list of all BVPI owners and providers already compiled. To be expanded to include all other data measures
9	All final year out-turn data will be compiled using corporate templates	Templates to be distributed, monitored for return and checked for accuracy. All inaccuracies to be resolved promptly	CPM Performance Team	23/06/06	
		A formal review of out-turn process to be undertaken, with lessons learnt, best practice etc to be shared throughout performance community	CPM Performance Team	31/10/06	Review pending reported findings from Audit Commission on out-turn data
Effective Management of Information Quality					
10	There is a framework for monitoring data quality, with regular formal reporting on key measures	Data quality to be included as a standing agenda item on all performance boards, PMNG and PIG meetings	PMNG/PIG Performance account managers (re performance boards)	30/06/06	
11	The authority undertakes benchmarking exercises to review the effectiveness of its own monitoring and review arrangements	Other authorities contacted to compare processes as a means of identifying potential improvements	Andy Field – CPM Performance Team	27/10/06	To be performed in advance of formal review of policy and procedures in Walsall due by 30/11/06
12	Each directorate has been assigned a data quality champion	Data quality champions to be agreed for each directorate through PMN/PIG	PIG	30/06/06	
13	Directorate data quality champions regularly review compliance with the relevant policies and procedures	Champions to ensure data quality forms part of agenda for performance boards	Directorate Data Quality Champions	30/06/06	
14	There are systems in place for the	Framework to be developed to record	Andy Field – CPM	31/07/06	Framework will need to be

		information for each performance measure	Performance Team		populated by directorates and services via PIG
	collection, recording, analysis and reporting of data which is accurate, valid, reliable, timely, relevant and complete				
15	Data is subject to service checks and management review before being reported to EMT	Out-turn proforma to be completed for all indicators with appropriate check points and sign-offs built into process	CPM Performance Team	Ongoing	Proforma has already been developed and distributed. Checks will be performed by Performance Team to ensure compliance
16	Reported data for external reporting is signed off by senior management	Out-turn proforma to be completed for all indicators with appropriate check points and sign offs built into process	CPM Performance Team	Ongoing	Proforma has already been developed and distributed. Checks will be performed by Performance Team to ensure compliance
17	Data returns are supported by a clear and complete audit trail	Out-turn proforma to be completed for all indicators which incorporates signatories confirming all appropriate data has been provided	The nominated data owner and data provider	Ongoing	
Creation of a Quality Culture					
18	A formal strategy is in place and has been approved by the EMT and Cabinet	Obtain EMT and Cabinet approval for data quality strategy	Rob Flinter	14/06/06	
19	A senior individual at board level has overall strategic responsibility for data quality	Agree with Executive Director for Corporate Services that they take strategic responsibility	Rob Flinter	14/06/06	
20	There is a member champion for data quality issues	Identify and agree member lead for data quality	EMT	Tbc	
21	Members have received data quality awareness training	Deliver data quality overview presentation to members	CPM Performance Team	Ongoing	
22	The authority clearly communicates	Communicate update on data quality to	Andy Field – CPM	Ongoing	

	its commitment to data quality to staff at all levels	staff through Team Spirit, CPM newsletter, news and views etc.	Performance Team		
23	The authority has undertaken a review of staff awareness of data quality issues	Investigate possibilities of integrating review into existing staff surveys	Andy Field – CPM Performance Team	28/07/06	
24	Examples of good practice in securing data quality are publicised to all staff	Performance Boards, PMNG, PIG, CPM newsletter etc. to be used to communicate best practice and good examples	PIG/Andy Field	Ongoing	
25	The policy and procedures are reviewed at least annually and updated when needed	Policy and procedures documents to be formally reviewed and amended as appropriate	CPM Performance Team	30/11/06	
26	Appropriate training given to relevant staff to ensure they have the necessary skills to ensure the effective collection, recording, analysis and reporting of data	Awareness sessions to be held in all directorates with additional training delivered in the most effective way where appropriate.	CPM Performance Team and Performance Management Account Managers	Ongoing	
27	Weaknesses identified through internal or external reviews of data quality are adequately addressed	Formal review process implemented for all review findings	CPM Performance Team	As required	
28	Instances of data not being submitted on a timely basis are reported to management	Updates provided as part an annual out-turn review process	CPM Performance Team	31/10/06	As part of the formal review of the out-turn process
29	Corporate assessment KLOE provide guidance on data quality requirements	Corporate assessment KLOE to be analysed with actions relating to data quality assurance being identified	Kam Mavi – CPM Performance Team	Ongoing	