

NORTH LINCOLNSHIRE COUNCIL

AUDIT COMMITTEE

DATA QUALITY UPDATE

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 Inform the committee of North Lincolnshire Council's current position with regards to Data Quality Audits carried out
- 1.2 Inform the committee of North Lincolnshire Council's current position with regards to the Data Quality Action Plan (Attached at appendix 3)

2. BACKGROUND INFORMATION

- 2.1 The key to better information to support decision making and accountability lies with actions the council takes to embed a culture that values the quality of the data that underpins information. It is vital for any organisation that aspires to perform well.
- 2.2 In reviewing data quality arrangements during the 2008/09 Use of Resources Assessment, the Audit Commission reported they were able to find evidence to support the view that data quality of the indicators reviewed was good. The auditors made some recommendations in their report which have been incorporated into the revised Data Quality Action Plan (Nov 2009), and in most cases these actions have been addressed. (See Appendix B for a copy of the Data Quality action plan). To date, of the 28 actions on the plan, 24 have been completed, 2 are in progress and 2 are on hold.
- 2.3 Central Government have subsequently abolished the Use of Resources Assessment for 2009/2010. However a 2009/2010 Value for Money assessment was carried out based on the Use of Resources KLOE's, an element of which was a review of '*Data Quality and the Use of information*'.
- 2.4 The Audit Commission reported they found evidence of service improvement following intervention by performance management and improving data quality for key indicators. The report also stated that we have further improved arrangements, responding to recommendations made in 2008/09 across all KLOE focus points, and our arrangements have demonstrated clear impact. There were no areas identified for improvement.
- 2.5 As a result of the abolition of the Use of Resources Assessment, It is expected that there will no longer be any external inspection of our Data Quality

arrangements. Due to this, there is a risk that the recent focus on the quality of data may, in future, decline. There will however still be a requirement for councils to publish information about their local performance and a new set of indicators will be produced in the New Year. The council will therefore need to continue to ensure the data needed for decision making and for external accountability remains of high quality.

- 2.6 Following recommendations from Internal audit the process for auditing Indicators was completely redesigned. The new process ensures a more robust, evidence based evaluation of the controls services have in place in terms of data quality arrangements.
- 2.7 This document was shared on the Communities of Practice website and has since been incorporated as an example of good practice in a Data Quality Toolkit produced in December 2010 by Local Government Improvement and Development called “Managing Local Performance”.
- 2.8 From April 2010 all audits are carried out using this redesigned Audit Form. Staff in other services are also utilising this form to audit indicators within their own service, most notably in Strategic Regeneration, Neighbourhood and Environment and Highways & Planning. See table in 2.9 for a summary of audits carried out.
- 2.9 A summary of the audits carried out from April to December 2010 is outlined below. A summary list of the indicators audited can be found at Appendix A. Recommendations were identified in most of the indicators audited; however in the majority of cases these have been addressed. Following recent government announcements the current National Indicator Set will cease to exist from April 2011. With this in mind the benefits of following up the outstanding recommendations are being assessed on a case by case basis.

Completed by Corporate Performance Team:	24
Completed by Services:	9
Completed by internal Audit:	4

- 2.10 The inbuilt data quality rating function has been utilised since April 2010 to ‘score’ the audits carried out. See Appendix A for a summary of audits carried out. This information can now be extracted automatically from the Performance Management System.
- 2.11 In summary, Data Quality achievements in the last 6 months include:
- Positive comments received from the Audit Commission’s VFM report (see 2.9)
 - Successful utilization of the new Audit Form / template to audit Indicators, by the Corporate Team and internally by services.
 - Successful utilization of the data quality rating function with the Performance Management System. A Data Quality rating report can now be produced directly from the system.

- Four data quality sessions aimed for managers were held, along with a further half day workshop. Positive feedback received.
- Following the manager sessions we had requests to carry out a short session in the Housing Divisions team meeting and to a Highways and Planning Performance Indicator Team meeting (H&P to be arranged)
- To date we have trained approx 90 staff from across all services with a further 17 on a waiting list for training to be arranged in the New Year.
- A Data Quality page is now available on the Intranet. It contains all relevant documentation and links to useful information and contacts.
- The Data Quality Policy and Protocol have been updated.
- A guide for drawing process maps has been developed and is included as part of the training session, as an appendix to the DQ policy and on the Intranet.

3. OPTIONS FOR CONSIDERATION

- 3.1 The Audit Committee should consider whether the data quality progress provides sufficient assurance of the adequacy of the council's data quality arrangements

4. RESOURCE IMPLICATIONS (FINANCIAL, STAFFING, PROPERTY, IT)

- 4.1 The risk in not identifying and addressing weaknesses in data quality is potential loss of funding due to inaccurate calculation of indicators, and decisions based on inaccurate data may lead to inappropriate allocation of resources.

5. OTHER IMPLICATIONS (STATUTORY, ENVIRONMENTAL, DIVERSITY, SECTION 17 - CRIME AND DISORDER, RISK AND OTHER)

- 5.1 Poor quality data may lead to misleading information, decision making may be flawed, poor services may not be improved, and policy may be ill-founded. There is also a danger that good performance may not be recognised and rewarded. An integrated impact assessment is not required for this report.

6. OUTCOMES OF CONSULTATION

- 6.1 N/A

7. RECOMMENDATIONS

- 7.1 The Audit Committee should consider whether the report provides sufficient assurance of the adequacy of the council's data quality arrangements.

HEAD OF STRATEGY DEVELOPMENT

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Date: 4th January 2011

Background Papers used in the preparation of this report:

Audit Commission report on North Lincolnshire Council 2008/09 Use of Resources Assessment.

Appendix A - Performance Indicators - Data Quality Rating Report As at December 2010

Data Quality Rating Summary	
*****	19
****	4
***	3
**	1
*	0
N/A	7
Qualified	0
Internal Audit	4
Total Indicators Audited:	38

This report summarises the Audits that have been carried out from April 2010 to the current date. The report identifies audits that have been completed and all recommendations have been actioned. The report also identifies audits which have not yet been completed. In these cases we expect the initial star rating to improve once recommendations have been put in place.

All audit reports are available to view as attachments to the relevant indicator within PMS

Ref	Description	Owner	Data Quality Rating	Data Quality Rating Comments
NI 107A	Key Stage 2 Attainment for Black and Minority Ethnic Groups DCSF DSO - White Other	Paula Bennett	*****	All recommendations from the audit carried out in July 2010 have been actioned. Now identified as a 5 star indicator for Data Quality.
NI 107B	Key Stage 2 Attainment for Black and Minority Ethnic Groups DCSF DSO - Gypsy, Romany & Traveller	Paula Bennett	*****	All recommendations from the audit carried out in July 2010 have been actioned. Now identified as a 5 star indicator for Data Quality.
NI 107C	Key Stage 2 Attainment for Black and Minority Ethnic Groups DCSF DSO- Bangladeshi	Paula Bennett	*****	All recommendations from the audit carried out in July 2010 have been actioned. Now identified as a 5 star indicator for Data Quality.
NI 156	Number of households living in Temporary Accommodation PSA 20	Geoff Emberlin	*****	Audited by service in June 2010 - Awarded 5 stars as no issues or recommendations were identified
NI 163	Working age population qualified to at least Level 2 or higher PSA 2	Laura Farr	*****	Update 03/06/2010 - All service recommendations on the audit report have been addressed. (See attached). Data quality rating has been updated to reflect this. Current rating based on Audit Carried out on 18/05/2010. Minor recommendations which are to be addressed by 31/05/2010. At which point if the rating will increase to a 5*
NI 164	Working age population qualified to at least Level 3 or higher PSA 2	Laura Farr	*****	Update 03/06/2010 - All service recommendations on the audit report have been addressed. (See attached). Data quality rating has been updated to reflect this. Current rating based on Audit Carried out on 18/05/2010. Minor recommendations which are to be addressed by 31/05/2010. At which point if the rating will increase to a 5*
NI 165	Working age population qualified to at least Level 4 or higher PSA 2	Laura Farr	*****	Update 03/06/2010 - All service recommendations have been completed by the agreed due dates. Now awarded 5 star data quality rating. See report attached. Current rating based on Audit Carried out on 18/05/2010. Minor recommendations which are to be addressed by 31/05/2010. At which point if the rating will increase to a 5*

Ref	Description	Owner	Data Quality Rating	Data Quality Rating Comments
NI 166	Median earnings of employees in the area BERR DSO	Laura Farr	*****	Update 03/06/2010 - All service recommendations have been completed by the agreed due dates. Now awarded 5 star data quality rating. See report attached. Current rating based on Audit Carried out on 18/05/2010. Minor recommendations which are to be addressed by 31/05/2010. At which point if the rating will increase to a 5*
NI 171	New business registration rate BERR DSO	Laura Farr	*****	Audited by service in September 2010. Awarded 5 stars as no issues or recommendations were identified.
NI 172	Percentage of small businesses in the area showing employment growth BERR DSO	Laura Farr	*****	5 star rating given following audit by service on 30/07/2010. See report attached.
NI 187a	Tackling fuel poverty – people receiving income based benefits living in homes with a low energy efficiency rating Defra DSO	Liz Webster	*****	Audited by service on August 2010. Awarded 5 stars as no issues and recommendations were identified.
NI 187b	Tackling fuel poverty - people receiving income based benefits living in homes with a high energy efficiency rating.	Liz Webster	*****	Audited by service on August 2010. Awarded 5 stars as no issues and recommendations were identified.
NI 190	Achievement in meeting standards for the control system for animal health	Malcolm Osborne	*****	Audit Carried out by service in July 2010. Assessed as 5 star following the audit. No recommendations or issues found.
NI 54	Services for disabled children PSA 12	Darren Chaplin	*****	Update 02/06/2010 - all recommendations on the report have been addressed. Data Quality rating updated. Current rating based on Audit Carried out on 20/04/2010. Minor recommendations which are to be addressed by 31/05/2010. At which point if the rating will increase to a 5* See report attached.
NI 81	Inequality gap in the achievement of a Level 3 qualification by the age of 19 DCSF DSO	Jim Garbutt	*****	Assessed as 1 star following audit. Recommendations have been reviewed in December 2010 and has now been assessed as 5 star.
NI 82	Inequality gap in the achievement of a Level 2 qualification by the age of 19 DCSF DSO	Jim Garbutt	*****	Assessed as 1 star following audit. Recommendations have been reviewed in December 2010 and has now been assessed as 5 star.
NI 86	Secondary schools judged as having good or outstanding standards of behaviour DCSF DSO	Paul Chivers	*****	Audited 13 Oct 2010, all minor findings implemented, see report.
NI 89a	Number of schools in special measures DCSF DSO	Jim Garbutt	*****	Data sets were originally set at the default of Fin Yr thus out of sync with Data Hub, now reloaded, all agree. All findings/recc's implemented, see report.
NI 89b	Amount of time spent by schools in special measures	Jim Garbutt	*****	Originally the data sets were loaded on the default setting of Fin Yr and thus did not sync with the Data Hub and DCSF, now reloaded, all agree. All findings/recommendations implemented, see report.
NI 145	Adults with learning disabilities in settled accommodation PSA 16	Joanne Mosby	****	Audited 18 Aug 2010. Minor recommendation over attachment of target setting forms to PMS.
NI 19	Rate of proven re-offending by young offenders PSA 23	Lynne Goodall	****	Audited 16 Nov 2010, minor work required re upgrading of process map, and ensure that verification forms are dated by the signatory so as to identify which result they are verifying. Consider password protecting excel files.
NI 52a	Take up of school lunches - Primary Schools PSA 12	Sharon Seddon	****	Audited by Service on 18th June 2010. Rating based on findings was a 4 star. Minor issues found which were addressed immediately however one issue remains which has not yet been addressed by the Owner.
NI 52b	Take up of School lunches - Secondary Schools	Sharon Seddon	****	Audited by Service on 18th June 2010. Rating based on findings was a 4 star. Minor issues found which were addressed immediately however one issue remains which has not yet been addressed by the Owner.
NI 154	Net additional homes provided PSA 20	Chris Barwell	***	Audit carried out by the service on 22/07/2010. Awarded a 1 star, with recommendations identified in 4 out of the 5 sections. Service confident this will increase to a 4/5 star once recommendations are actioned. Spoke to service an advised that remaining recommendation will not be followed up in light of the future of the National Indicator Set.

Ref	Description	Owner	Data Quality Rating	Data Quality Rating Comments
NI 182	Satisfaction of businesses with local authority regulation services BERR DSO	Julie MacKinnon	***	Audit Carried out by service in June 2010. Assessed as 3 star following Audit on. Minor issues with password protection requirements of working papers.
NI 43	Young people within the Youth Justice System receiving a conviction in court who are sentenced to custody MoJ DSO	Lynne Goodall	***	Audited 29 June 2010, minor work required to update process map, improve quality of commentaries, add verification forms etc. NOTE; Unable to complete statistical sampling owing to CRB complications though result agrees with data Hub.
NI 167	Congestion – average journey time per mile during the morning peak PSA 5	Phil Wheldale	**	Audit carried out by the service in September 2010. Service awarded a 2 star rating with recommendation to be followed up at the end of the calendar year.
NI 30	Re-offending rate of prolific and priority offenders	Adrian Evans	N/A	Audited by internal Audit
NI 38	Drug-related (Class A) offending rate	Kay Aisthorpe	N/A	Audited by internal Audit
NI 40	Drug users in effective treatment	Kay Aisthorpe	N/A	Audited by internal Audit
NI 102	Achievement gap between pupils eligible for free school meals and their peers achieving the expected level at Key Stages 2	Paula Bennett	N/A	Audited by internal Audit
NI 110	Young people's participation in positive activities PSA 14	Lynne Goodall	N/A	NOTE: ADVISED BY SERVICE THAT THE TELL US SURVEY WILL NO LONGER TAKE PLACE - AUDIT RECOMMENDATIONS WILL NOT BE FOLLOWED UP. Audit carried out on 02/06/2010. Data quality rating based on controls partially or not met as identified on the report. Recommendations identified and communicated to the service. Review of the recommendations due at the end of June 2010 at which point the data quality rating will be updated
NI 115	Substance misuse by young people PSA 14	Lynne Goodall	N/A	NOTE: ADVISED BY SERVICE THAT THE TELL US SURVEY WILL NO LONGER TAKE PLACE - AUDIT RECOMMENDATIONS WILL NOT BE FOLLOWED UP - Audit carried out on 02/06/2010. Data quality rating based on controls partially or not met as identified on the report. Recommendations identified and communicated to the service. Review of the recommendations due at the end of June 2010 at which point the data quality rating will be updated
NI 119	Self-reported measure of people's overall health and wellbeing DH DSO	Mike Briggs	N/A	Update - Survey will no go ahead so recommendations will not be followed up. Audit carried out on 02/06/2010. Data quality rating based on controls partially or not met as identified on the report. Recommendations identified and communicated to the service. Review of the recommendations due at the end of June 2010 at which point the data quality rating will be updated
NI 199	Childrens satisfaction with parks	Barry Hutchinson	N/A	NOTE: ADVISED BY SERVICE THAT THE TELL US SURVEY WILL NO LONGER TAKE PLACE - AUDIT RECOMMENDATIONS WILL NOT BE FOLLOWED UP Audit carried out on 02/06/2010. Data quality rating based on controls partially or not met as identified on the report. Recommendations identified and communicated to the service. Review of the recommendations due at the end of June 2010 at which point the data quality rating will be updated
NI 50	Emotional health of children PSA 12	Mike Biggs	N/A	NOTE: ADVISED BY SERVICE THAT THE TELL US SURVEY WILL NO LONGER TAKE PLACE - AUDIT RECOMMENDATIONS WILL NOT BE FOLLOWED UP Audit carried out on 02/06/2010. Data quality rating based on controls partially or not met as identified on the report. Recommendations identified and communicated to the service. Review of the recommendations due at the end of June 2010 at which point the data quality rating will be updated
NI 69	Children who have experienced bullying DCSF DSO	Lynne Goodall	N/A	NOTE: ADVISED BY SERVICE THAT THE TELL US SURVEY WILL NO LONGER TAKE PLACE - AUDIT RECOMMENDATIONS WILL NOT BE FOLLOWED UP Audit carried out on 02/06/2010. Data quality rating based on controls partially or not met as identified on the report. Recommendations identified and communicated to the service. Review of the recommendations due at the end of June 2010 at which point the data quality rating will be updated

Ref	Description	Owner	Data Quality Rating	Data Quality Rating Comments
NI 88	Number of Extended Schools DCSF DSO	Gill Ayre	N/A	Further work required to produce process map, target setting form, improve quality of commentaries, attachments, no checking to the Data Hub. NOTE: these findings will not be pursued as indicator has been lapsed by central govt as confirmation received via email dated 27 August 2010 from TDA (Stephen Baker, Corporate Communications) that LA's are no longer required to collect and submit data to support NI 88 to the TDA for reporting purposes to the Department for Education.

Appendix B - Data Quality Action Plan

November 2009 Refresh

Last updated: 10th December 2010

Updated By: Jo Busby

28 actions

24 complete (86%)

2 In progress (7%)

2 On Hold (7%)

ACTION	WHO	DUE DATE	COMMENTS / PROGRESS	Date Completed	
1.	Training & Communication				
1.1	Inclusion of DQ in general staff & Manager competency framework (KLoE 2.2.2)	Jo Busby	31/12/2009	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	03/12/2009
1.2	Once the competency framework is in place, data quality targets should be set for all relevant staff as part of the EDR process and training needs reviewed. (AC ref. R8)	Jo Busby	TBC	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	03/12/2009
1.3	PMS officer training to be developed to include a section on DQ (AC ref. R9)	Nigel Manders	31/12/2009	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	24/02/2010
1.4	DQ to be included in the Corporate induction process and new starter pack (AC ref. R9)	Jo Busby	31/03/2010	See 1.1	03/12/2009
1.5	Develop a DQ / performance page on the intralinc. DQ information to be put onto Internet. (KLoE 2.2.2)	Nigel Manders & Antony Rowland	TBC	Data Quality age is now complete and published on the Intralinc INTRALINC page is complete and published. Next stage is to look at the internet information as part of communications project led by JT.	31/07/2010
1.6	Develop memorandums of understanding with Services to set out roles and responsibilities in relation to the data requirements and data quality.		July 2010	Roles and responsibilities have been clearly defined in the Data Quality Policy, which will be communicated at the next CPWG and is available on both doc manager and the intranet. Roles and responsibilities are also covered as part of the Data Quality Training.	July 2010
1.7	Enhance member involvement by providing regular reports that evaluate the controls in place give assurance of data quality elements of information governance	Antony Rowland & Jo Busby	31.01.2010	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	30/11/2009

ACTION	WHO	DUE DATE	COMMENTS / PROGRESS	Date Completed
1.8	Review and refresh the data quality policy and protocol	Jo Busby	25/06/2010 COMPLETE – both protocol and policy have been updated and are will be communicated at the next CPWG and is available on both doc manager and the intranet. The policy and protocol are also covered as part of DQ training June 2010 – Policy and Protocol currently under review	June 2010
1.9	Better guidance for completing a process map will be compiled and include an example of what a process map should look like. This guidance will be issued to all indicator owners via the PMS/email.	Jo Busby	31/07/2010 COMPLETE – A guidance document for completing process maps has been developed and added as an appendices to the Data Quality Policy. This document is also attached to the DQ page on the intralinc. Process Mapping is covered as part of the DQ training sessions. June 2010 - Process Maps have been revamped and formed part of the DQ training session for practitioners on 24 February. This will be re-run and further manager sessions will be run in July. Further action will be to put this information into guidance notes and place on PMS	June 2010
2. Partners				
2.1	Once partners have formally ratified the Joint Data Quality Protocol all partner owners/editors will be issued with the protocol and advised that it must be followed. This will be via PMS and email. (Internal Audit APACS report 3.1.2)	Nigel Manders	30/06/2010 Dec 2010 – All partners have received a copy of the protocol but no further work is expected to be carried out on this action. June 2010 - All Partners have been given the Joint DQ Protocol and Policy through the Partnership Performance Working Group. The Policy has now been altered and the method of assuring partner Data Quality has changed. This will be discussed at the PPWG in late June and an assurance letter sought from each partner.	June 2010
2.2	Data Quality champions (i.e. members of the corporate Performance working Group) to seek assurance that data quality can be assured in all instances of data sharing from third party organisations	All	31/03/2010 This can be picked up as part of the individual 1-2-1 meetings the performance team will hold with the individual service areas. The process for auditing indicators is under review (See 3.3). This element can be included and evidenced as part of the new/updated audit process. April 2010 update – New audit report template has been completed and is in use. Question 3.3 of the report covers this element.	April 2010
3. Audits				
3.1	Continue with internal audits from risk list of National Indicators (AC ref. R4) (KLoE 2.2.2)	AR	In progress COMPLETE - process has been refined and the risk spreadsheet is continually monitored as this process is now established this action can be closed. Risk spreadsheet has been updated to include: <ul style="list-style-type: none"> • Assurance that LAA indicators are the priority. • Inclusion of a level of priority for Sustainable Community Strategy Indicators Have agreed a schedule of LAA indicators for Elaine Portess to work through, based on the risk spreadsheet and known issues. (15 days available). Following this there is provision for a further 20 days to audit other indicator. Need further discussion with internal audit t to priorities the schedule. Mar 2010 – Risk spreadsheet updated to include those where a discrepancy has been found between the HUB and PMS.	June 2010

ACTION	WHO	DUE DATE	COMMENTS / PROGRESS	Date Completed	
			April 2010 – Elaine Portess has completed audit of LAA indicators. Report and recommendations now available.		
3.2	Review the current indicator risk list and re-priorities as appropriate	JB	31/11/2009	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	09/11/2009
3.3	Review current method of auditing, develop the process and documents used to include (but not limited to): <ul style="list-style-type: none"> • Improve methods of communicating and monitoring recommendations and concerns identified • Review the Audit / Data quality checklist used • Methods to communicate the importance of providing working papers, verification forms and process maps. • Ensure detail on sample checked is included 	JB	31/03/2010	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	31/03/2010
3.4	Better integration / communication with internal audit. To include: <ul style="list-style-type: none"> • Provide guidance on carrying out internal audits. • Better communications between the teams to reduce duplication of effort. 	Jo Busby	31/03/2010	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	31/03/2010
3.5	Internal Audit of PMS (KLoE 2.2.2)	Stuart Anderson	31/12/2009	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	22/03/2010
4.	PMS				
4.1	Develop the use of the PMS DQ checklist (AC ref. R3)	Jo Busby	31/03/2010	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	29/03/2010
4.2	Set base data for all NI's in PMS (KLoE 2.2.2)	Jo Busby	31/12/2010	Have carried out some work on this in the test system and have managed to get this working. However to set this up for all indicators will be a time consuming process. Further discussion required. Agreed that setting base data for all NI's would be a time consuming process that would require further officer training and further clicks into other elements of the system. It was felt this was not the right time to pursue this but may be re-considered at a later date.	
4.3	Set decimal precision for all NI's, as specified on the National Indicator definitions (KLoE 2.2.2)	Antony Rowland	31/06/2010	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	29/04/2010
4.4	Link all NI's to the ESD toolkit (KLoE 2.2.2)	Jo Busby	30/11/2010	COMPLETE – see NOV 09 ACTION PLAN ARCHIVE\Data quality action plan Nov09 refresh.doc for further details	November 2011
4.5	Process maps (including controls), working papers and verification forms are attached to the	Antony Rowland	ONGOING	ON HOLD – in light of recent government announcements relating to the National Indicator set, this action will be revisited as and when the new list of data / indicator requirements in	

ACTION	WHO	DUE DATE	COMMENTS / PROGRESS	Date Completed	
PI in PMS (AC ref. R3 / KLoE 2.2.2)			known. Thought need to be given ai how data quality is embedded within local indicators to ensure robust and reliable data considering the responsible now placed on local authorities to govern their own arrangements. Various requests and reminders have been issued to services. Exceptions will be reported to the Corporate Q.P.R. Updates will also be provided to Audit Committee on a quarterly basis. Issue could be raised at the individual 1-2-1 meeting s with services and be included as part of the development work on the NI audit process so the request and responses are clearly evidenced. March 2010 – work continues to encourage services to include all the missing information. This is monitored regularly; however it is unlikely that we will achieve 100% inclusion of all necessary documents. Ongoing piece of work.		
4.6	Quality of process maps to be addresses. All process maps to be improved, in particular linking to risks and controls in place to mitigate those risks.	Antony Rowland	31/12/2010	ON HOLD – see above A session on drawing process maps with particle emphasis on linking these to risks and controls in place to mitigate these risks.	
4.7	Develop DQ FAQ's and add to PMS (KLoE 2.2.2 / AC ref. R9)	Jo Busby	31/06/2010	DQ FAQ's are available in various forms. Internal FAQ's have been developed and various guidance can be found on the internet. This information will be pulled together into a comprehensive document that will be attached to PMS.	
5. PERFORMANCE					
5.1	Ensure robust, evidence based, SMART targets for all PI's	Nigel Manders	07/05/2010	Dec 2010 – All target setting forms that are likely to be received have been files and attached to the indicator in PMS. In light of recent government changes and the abolition of the NIS a further discussion is required at the appropriate time regards target setting mobbing forward Nigel Manders to develop a template for service to evidence the rationale for targets they have set. March 2010 – Templates have been created and issued to services. Completed forms are being returned to the performance team and attached to the relevant indicator in PMS. Still some outstanding which is being addressed by NI owners.	Sept 2010
5.2	Monitor compliance & effectiveness of the Q.P.R process.	All	31/12/2009	COMPLETE – QPR quality and completeness is being monitored by individuals in the Corporate Performance team as part of their quarterly service review meetings and reported to Corporate QPR. Each service lead in the performance team has been tasked to review their services Q.P.R to ensure they are being carried out. Can be discussed at service 1-2-1 meetings to assess their view on the effectiveness of the meetings. These meetings have been arranged throughout January, therefore there will be a slight delay on delivery to due date.	June 2010
5.3	Include DQ as a standard agenda item at Q.P.R's and performance related meetings within services.		31/12/2009	COMPLETE March 2010 – data quality is a standard agenda item at both CPWG and PPWG, and within the service 1-2-1 meetings. As above. Already standard item at CPWG and CPWG. Need further discussion with	December 2009

ACTION	WHO	DUE DATE	COMMENTS / PROGRESS	Date Completed
			services to include within the QPR process.	
5.4	Review the Performance Management Framework Document (KLoE 2.2.2)	Nigel Manders	30/06/2010 Dec 2010 Requests for amendments have been made. These are currently being worked through by NM Nigel Manders has completed the review of the document. Waiting final approval from Caroline Barkley.	
5.5	Update the Data Quality Policy to clarify the roles and responsibilities of indicator owners, approvers, editors and all information providers (both internal and external) (Finding ref 1 – Internal Audit Report May 2010)	Jo Busby	30/09/2010 COMPLETE – roles and responsibilities of indicator owners, editors and information providers is clearly defined in the new Data Quality Policy. June 2010 – Data quality policy is currently in draft form for update. Expect completion by the end of June 2010.	June 2010