



AGENDA ITEM: 5

**AUDIT AND GOVERNANCE:
28 JANUARY 2014**

Report of: Transformation Manager

Relevant Managing Director: Transformation

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SUBJECT: DATA QUALITY PROTOCOL - UPDATE

Wards affected: Borough wide

1.0 PURPOSE OF THE REPORT

1.1 To update Members regarding the effectiveness of the Data Quality Protocol.

2.0 RECOMMENDATIONS

2.1 That the effectiveness of the current Data Quality Protocol is noted.

3.0 BACKGROUND

3.1 Members will recall that in September 2012 a report was brought to Audit & Governance seeking approval for a new Data Quality Protocol. The Protocol will be updated as appropriate rather than on a scheduled basis.

3.2 The committee requested the Transformation Manager submit a report to a future meeting on the effectiveness of the Protocol.

4.0 CURRENT SITUATION

4.1 The Protocol contains guidance for appropriate data management. It provides a statement of required standards for data management practices and complements the approach to all forms of data management within the council. It applies to all areas and systems of the council and will help support staff in providing worthwhile data that is sufficiently accurate, valid, reliable, timely, relevant and complete. This will assist in delivering the government's aim of increasing transparency and openness about how councils conduct their business.

- 4.2 The Protocol states that *“The benefit of improving the level of data quality should not be outweighed by the resources necessary to achieve the improvement. The council therefore focuses on arrangements for collection and reporting data, rather than the data itself...”*.
- 4.3 Given resources available, implementation of formal data quality governance procedures across the organisation is not possible. Effectiveness of the protocol therefore relies on the uptake of the principle by services/all staff. Specific data sets may be subject to different regulations (for example, CIPFA rules for financial data). However, as a minimum all data should meet the overarching data quality criteria outlined in the Protocol. This includes any information regularly reported, either internally or externally, upon which decisions are made. For example:
- Data items submitted to central government/arms length bodies (eg. Single Data List)
 - Published data sets specified in the *Code of recommended practice for local authorities on data transparency*
 - All performance information stored within the electronic performance and risk management system (Covalent).
- 4.4 The previously approved data quality management arrangements have been maintained since the last report:
- the Data Quality Protocol remains in place
 - the Council’s External Auditors continue to examine data quality arrangements in relation to the Council’s Financial Statements as part of their audit work.
 - Internal Audit continue to carry out a risk based programme relating to the procedures for the production of PIs and other work designed to attest the accuracy of other data available internally for the management of the authority.
- 4.5 The Protocol complements activities around information governance within the areas of management of personal data, data security, release of information under Freedom of Information or Data Protection, or information / records management. Although these are managed under separate policies, the quality of the data within any relevant system is subject to the DQ Protocol’s requirements.
- 4.6 Requirements to allow public access to council data are growing. The Government has published a revised draft *Code of Recommended Practice for Local Authorities on Data Transparency* which includes the requirements to publish various data sets, for example expenditure over £500, Councillor allowances and expenses, senior salaries. The Council already meets many of the requirements. The Government is currently (January) seeking points of clarification prior to the code becoming enforceable. It will be necessary for the council to keep abreast of these transparency requirements and to ensure that public data is as accurate as possible at first publication.

5.0 EFFECTIVENESS OF THE PROTOCOL

- 5.1 The most recent external audit of the council did not raise any serious issues in relation to data quality. Internal Audit's Annual Report noted that their work in the year had led to recommendations for further improvement in data management with regard to data protection and these recommendations were accepted by management. This work is ongoing and strengthens existing arrangements to secure data quality.
- 5.2 WLBC adopts its own performance indicators and assigns its own targets on an annual basis. These are formally agreed by Members and help provide information as to whether the authority is on track to achieve the priorities of the Council's Business Plan. The key performance indicators are reported quarterly to Members and the full suite annually in order to highlight the performance of the Council across a range of service areas on an ongoing basis. The data is also recorded in Covalent.
- 5.3 The Council has a duty to report many data items direct to central government over a wide variety of services. The requirements are contained within a Single Data List published by the Government.
- 5.4 During the year, Internal Audit carries out a risk-based review of a basket of higher risk PIs (those that are reported to Members) and testing of certain items from the Single Data List. The most recently concluded review highlighted that some PIs needed attention in terms of the definition requirements concerning data collection and recording. It is therefore evident that in some cases the guidance provided in the protocol had not been applied by service areas.
- 5.5 As a result of the review:
- Where required, actions from the Audit review for individual indicators will be agreed and signed off with the responsible person.
 - The importance of the "ownership" of data by the individuals responsible for collecting/recording/approving data was re-enforced. A reminder of the data quality protocol and the need to follow guidance and definitions of indicators was sent to all staff responsible for data entry/management of corporate PI's held within Covalent.
 - Work is ongoing to ensure that relevant guidance for all corporate PIs is held on Covalent.
 - Internal Audit's risk-based approach to reviewing performance indicators will continue into 2014/15.

6.0 CONCLUSION

- 6.1 All staff need to apply the principles of data quality to information that is produced and/or published for whatever purpose. Steps have been taken as outlined in s.5.5 above to increase the effectiveness of the protocol which is available on the intranet.

6.2 It is essential to have effective data quality management arrangements in place to ensure the information on which services rely, management decisions are made and is either submitted to other organisations or published is sound as part of the general approach to data management within the Council.

7.0 SUSTAINABILITY IMPLICATIONS/COMMUNITY STRATEGY

7.1 There are no significant sustainability impacts associated with this report and, in particular, no significant impact on crime and disorder. The report has no significant links with the Sustainable Community Strategy. Good quality data will however assist with all decision making.

8.0 FINANCIAL AND RESOURCE IMPLICATIONS

8.1 All activity associated with this report will be achieved from existing resources.

9.0 RISK ASSESSMENT

9.1 This report highlights the requirement to produce and where applicable, publish, data that is fit for purpose and acknowledges the likely increase in access of data by the public in the future. The risk to the organisation is from the use of unreliable data and non-compliance with national guidelines. Adherence to the Data Quality Protocol and implementation of national guidance regarding public access to data should ensure that the risk to the organisation is minimised.

Background Documents

There are no background documents (as defined in Section 100D(5) of the Local Government Act 1972) to this Report.

Equality Impact Assessment

The decision does not have any direct impact on members of the public, employees, elected members and / or stakeholders. Therefore no Equality Impact Assessment is required.

Appendices

None