

Government and Public Sector

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# Peterborough City Council

## Review of Data Quality arrangements

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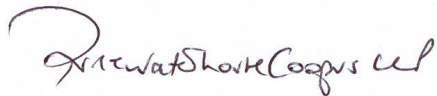
December 2008

Dear Sir

**Review of Data Quality arrangements**

We are pleased to present the summary results of our review of the Council's arrangements to ensure data quality which has been completed in accordance with the methodology and guidance issued by the Audit Commission.

Yours faithfully



cc J Harrison – Director of Strategic Resources

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**Code of Audit Practice and Statement of Responsibilities of Auditors and of Audited Bodies**

*In April 2008 the Audit Commission issued a revised version of the ‘Statement of responsibilities of auditors and of audited bodies’. It is available from the Chief Executive of each audited body. The purpose of the statement is to assist auditors and audited bodies by explaining where the responsibilities of auditors begin and end, and what is to be expected of the audited body in certain areas. Our reports and management letters are prepared in the context of this Statement.*

*Reports and letters prepared by appointed auditors and addressed to members or officers are prepared for the sole use of the audited body, and no responsibility is taken by auditors to any Member or officer in their individual capacity, or to any third party.*

# Introduction

The Audit Commission requires us to undertake a review of the Council's data quality arrangements. The review focuses on all aspects of data quality at a corporate level across the Council and is also linked to the requirement for us to conclude on the Council's use of resources.

The review of data quality is a three-stage approach prescribed by the Audit Commission as follows:

	<b>Description</b>
Stage 1	Management arrangements - Review of overall management arrangements to secure data quality.
Stage 2	Completeness check – Collection of non-BVPI data and variance analysis.
Stage 3	Data quality spot checks - In-depth review of a sample of PIs (from a list of specified BVPIs and non-BVPIs).

This report sets out the results of our review.

## **Stage 1 – Management Arrangements**

The assessment of the management arrangements in place for data quality is used to:

- Direct the detailed work that we undertake on data quality spot checks (Stage 3 of the review); and
- Inform our Use of Resources Conclusion in respect of performance information (as reported in our 2007/08 audit report).

The work that we have undertaken is also reported to the Audit Commission to inform its CPA assessment.

The assessment that we have undertaken covers five themes relating to data quality:

- Governance and leadership;
- Policies and procedures;
- Systems and processes;
- People and Skills; and
- Data use.

Each theme is supported by a number of key lines of enquiry, setting out areas of audit focus and showing the performance levels required to be rated as 1, 2, 3 or 4. These performance levels translate into the following assessments:

1 = below minimum requirements – inadequate performance

2 = only at minimum requirements – adequate performance

3 = consistently above minimum requirements – performing well

4 = well above minimum requirements – performing strongly

The purpose of the score is to describe the maturity of the Council's management arrangements for data quality and to identify constructive recommendations where needed. The score will be reported in this form to the Audit Commission and will inform the risk assessment required for Stage 3 of the audit process.

Our Use of Resources Conclusion is reported separately in our Audit Report on the 2007/08 accounts and is based on a simple assessment of whether the arrangements in place are adequate (i.e. consistent with a score of 2-4) or inadequate (i.e. consistent with a score of 1).

### **Stage 2 – Completeness Check**

The Audit Commission required us to collect the 2007/08 data for a number of non-Best Value Performance Indicators (BVPIs). These are included in the 12 performance indicators (PIs) selected by the Audit Commission for further testing at Stage 3 of the review. We were also required to investigate reasons for significant variances in the performance of these 12 PIs, as notified to us by the Commission.

### **Stage 3 – Data Quality Spot Checks**

Stage 3 of the review requires the 12 PIs selected by the Commission, as presented in Appendix C, to be subject to in-depth

review and testing on a sample basis. The size and basis of the sample is dependent upon a risk assessment, informed by the results of Stages 1 and 2 of the review. The testing includes:

- Review of the individual management arrangements in place over the specific PI selected;
- Documentation and assessment of the systems in place for recording and calculating the PI's data;
- Testing the accuracy of PI calculation; and
- Data testing.

### **Information Governance**

Allied with data quality is information governance, a topic high on the government's agenda following recent high profile incidents and the publication of the Poynter report in June 2008. Following Cabinet Office guidance, all local authorities will be required to identify and review their data transfers. However, this is just one area of risk to information governance – information and data security breaches can occur from weaknesses in the IT environment and underlying business processes as well as inappropriate behaviours of the people handling or managing sensitive information or data. Where third parties are used to deliver services, these will also need to be considered and steps taken to ensure that the requirements are met.

The Poynter report, as produced by PwC, is seen as a comprehensive review of the information governance agenda. We have developed a tested methodology for the review of information governance. If you would like further information on how we may be able to assist you in reviewing this important area, please contact Julian Rickett on 01603 883321 or Debbie Tilson on 01603 883243.

# Summary of findings – Data quality review

## Stage 1 – Management Arrangements

A summary of the results from our review of the Council's management arrangements for ensuring data quality, together with the prior year scores, are presented below. Overall, these scores give rise to an adequate assessment of the Council's arrangements in our Use of Resources conclusion which was reported to the Council in September 2008. The overall score reported to the Audit Commission in October in respect to this stage of the audit was "3". This is an improvement on the prior year when the Council achieved an overall score of "2". We report in Appendix A the detailed findings from assessment.

Key line of enquiry	2007/08 KLOE score	2006/07 KLOE score
<b>Governance and leadership: overall score</b>		
<ul style="list-style-type: none"> <li>Responsibility for data quality is clearly defined.</li> </ul>	3	2
<ul style="list-style-type: none"> <li>The body has clear data quality objectives.</li> </ul>	3	2
<ul style="list-style-type: none"> <li>The body has effective arrangements for monitoring and review of data quality.</li> </ul>	2	2
<b>Policies and procedures: overall score</b>		
<ul style="list-style-type: none"> <li>A policy for data quality is in place, supported by a current set of operational procedures and guidance.</li> </ul>	3	1

Key line of enquiry	2007/08 KLOE score	2006/07 KLOE score
<ul style="list-style-type: none"> <li>Policies and procedures are followed by staff and applied consistently throughout the organisation.</li> </ul>	3	2
<b>Systems and processes: overall score</b>		
<ul style="list-style-type: none"> <li>There are appropriate systems in place for collection, recording, analysis and reporting of data used to monitor performance, and staff are supported in their use of these systems.</li> </ul>	2	2
<ul style="list-style-type: none"> <li>The body has appropriate controls in place to ensure that information systems secure the quality of data used to report on performance.</li> </ul>	2	2
<ul style="list-style-type: none"> <li>Security arrangements for performance information systems are robust, and business continuity plans are in place.</li> </ul>	2	2
<ul style="list-style-type: none"> <li>An effective management framework for data sharing is in place.</li> </ul>	2	1
<b>People and skills: overall score</b>		
<ul style="list-style-type: none"> <li>The body has communicated clearly the responsibilities of staff, where applicable, for achieving data quality.</li> </ul>	2	2
<ul style="list-style-type: none"> <li>The organization has arrangements in place to ensure that staff with data quality responsibilities have the necessary skills.</li> </ul>	2	2

Key line of enquiry	2007/08 KLOE score	2006/07 KLOE score
<b>Data use: overall score</b>		
<ul style="list-style-type: none"> <li>▪ The body has put in place arrangements that are focused on ensuring that the data supporting performance information is used to manage and improve the delivery of services.</li> </ul>	3	3
<ul style="list-style-type: none"> <li>▪ The body has effective controls in place for data reporting.</li> </ul>	2	2

It should be noted that the assessment has been undertaken against the criteria specified by the Audit Commission, and reflects the arrangements to ensure the quality of reported data as opposed to the review and use of that data. The Audit Commission criteria place significant weight on the existence of documented policies and procedures, and on arrangements that ensure or confirm the robustness of data which, although related, are not simply the monitoring or use of that data.

## Stage 2 – Completeness Check

We completed Stage 2 of the review and reported the results to the Audit Commission within the timescales specified. We identified no areas we wish to bring to your attention associated with this part of the review.

## Stage 3 – Data Quality Spot Checks

We selected 6 PIs, from the Audit Commission's list of selected PIs, based upon our assessment of the risk associated with the Council's arrangements for ensuring data quality and in line with guidance issued by the Audit Commission. These included the two housing benefit PIs which the Audit Commission specified as being mandatory as the testing links into the testing of the Council's Housing and

Council Tax Benefit grant claim. The PIs selected for review as part of stage 3 were as follows:

- HIP HSSA - % of total private sector homes vacant for more than six months;
- HIP HSSA - Repeat homelessness;
- BV 82a - Recycling performance;
- BV 82b - Composting performance;
- BV 78a - Average time for processing new claims (housing and council tax benefit); and
- BV 78b - Speed of processing: change in circumstances for housing and council tax benefit claims.

Of these, we are pleased to report that only one was reported to the Audit Commission as "unfairly stated". This compares favourably with other Councils. Two indicators required amendment as a result of audit procedures and these amendments were submitted to the Audit Commission at the conclusion of our review.

Our detailed recommendations arising from Stage 3 of the review are detailed in Appendix B to this report.

# Appendix A - Summary of Key Findings and Areas for Improvement

<b>Governance and leadership</b>	
<b>Has the body put in place arrangements at a senior level to secure the quality of data used to manage and report on performance?</b>	
<b>Overview</b>	
<p>Following the 2007 assessment an action plan was created to progress the Council from a level two authority to a level three. Significant progress had occurred in the period up to 31 March 2008 and the Council is able to demonstrate progress in a number of key areas of the action plan namely:</p> <ul style="list-style-type: none"> <li>• Portfolio Holder for strategic resources has senior member responsibility for data quality and the Strategic Director for the strategic priority “accessible and efficient and effective” council (with delegated authority from the Chief Executive) is the key officer responsible.</li> <li>• Issues about data quality are considered by and reported to Directors and Heads of Service (HoS). Regular monthly and quarterly reporting arrangements via PPlus are signed off by Lead Business Unit Administrators, prior to review by HoS and Director’s signoff. Reports are then referred through to Strategic Improvement Division to provide a performance commentary and quarterly reporting to CMT with a risk assessment and critical issues report.</li> <li>• A data quality strategy and policy has been created and communicated through a development group and departmental performance contacts. The policy and Council’s overall approach is monitored by the Council’s Strategic Improvement Division with the Strategic Director taking the lead role on data quality issues. The strategy/policy states that data should be captured as quickly as possible after an event/activity and should be captured only once even if it has multiple uses.</li> <li>• The Data Quality Strategy / Policy clearly specifies the roles and responsibilities for Data Quality, is referenced through to the Corporate Plan that also states that it is the role of all staff to input/store or otherwise manage data ensuring it is to the highest standard.</li> </ul>	
<b>Key Lines of Enquiry</b>	
<ul style="list-style-type: none"> <li>• Responsibility for data quality is clearly defined</li> </ul>	<b>3</b>
<ul style="list-style-type: none"> <li>• The body has clear data quality objectives</li> </ul>	<b>3</b>
<ul style="list-style-type: none"> <li>• The body has effective arrangements for monitoring and review of data quality</li> </ul>	<b>2</b>
<b>Areas for Improvement</b>	
<ul style="list-style-type: none"> <li>• The Council has made progress in considering data quality as part of the corporate risk management arrangements. However, further work is still required</li> </ul>	



to explicitly support all level 3 criteria, in particular the need to demonstrate the regular assessment of the risks associated with unreliable and/or inaccurate information. Evidence will be required for the 2009 assessment to demonstrate that key actions/processes have been fully embedded as part of the corporate risk management arrangements.

## Policies and procedures

### Has the organisation defined its expectations and requirements in relation to data quality?

#### Overview

Significant progress has been made by the Council since the last assessment when a Data Quality Policy was under development. This has now been implemented and covers all criteria for judgement. As well as the policy, further guidance has been provided for staff which clearly explains its structure and use. This documentation was initially communicated through a workshop to staff, but all policies, procedures and guidance are available to all staff using Insite (an internal intra-net site).

A group meet monthly to identify possible areas of concern. The Council provides a weekly information bulletin for all staff and members of Peterborough City Council. This newsletter includes information of any policy changes with hyperlinks to the full policy for easier access to staff e.g. The ICT policy (Information, Communications and Telecoms) policy is accessed through the public folders as well as all other relevant staff policies and guidelines. Examples include – ICT Private usage policy/mobile telephone policy as well as others, as well as HR. The responsibility then resides with Lead Business Unit Administrators to promote and ensure compliance.

#### Key Lines of Enquiry

- A policy for data quality is in place, supported by a current set of operational procedures and guidance
- Policies and procedures are followed by staff and applied consistently throughout the organisation

3

3

#### Areas for Improvement

- The Council will need to ensure that data quality arrangements affecting partnership working, where relevant are both fully embedded and clearly demonstrable for the 2009 assessment. Consideration should also be give to ensuring that partner bodies are fully involved an the development and updating of future data quality policies, procedures and guidance notes.

## Systems and processes

### Are there effective systems and processes in place to secure the quality of data?

#### Overview

It is acknowledged that the Council has been undertaking developments in this area, but further work is required to fully demonstrate the extent to which the arrangements are fully embedded.

Performance Plus (PPlus) is Peterborough City Council's performance system which is in place for the collection, recording, analysis and reporting of the council's performance. Administrators have been trained throughout with additional support for ensuring the system is secure. These administrators have key roles for mainlining PPlus as well as responsibility of its operation. Data entry clerks then have the role of adding and amending. Regular group meetings are held to ensure that any updates to the system are communicated throughout, as well as monitoring and reviewing.

Lead Business Unit Administrators have the responsibility of the day to day operation of PPlus. A Performance Management Development Group has been set up (September 2007) to work across the directorates to improve the monitoring and reporting of performance and to disseminate any new issues and changes to original systems and processes. The group has re-aligned performance management to meet the needs for the organisation for the future – this provides linkages from operational services to HoS and reporting through to directors & CMT.

No control mapping has been undertaken to date, although the officers have stated that PPlus does allow errors to be reviewed and training/mentoring can be arranged as appropriate, it is not clear what arrangements have been put in place to progress this. Whilst performance clinics have been used to monitor inadequate performance and action plans have been put into place there is no evidence of annual data quality review or results of reviews to top management.

The Council has business continuity plans. These plans cover the organisational critical information systems to ensure protection of records and business continuity after a disaster. The overall corporate plan is developed through the creation of individual service continuity plans which are stored on the corporate system "Office Shadow". The Resilience team have trained nominated people in each service to create plans through the use of templates, guidance and training sessions. These plans have been subjected to a challenge session to ensure that the processes work and that all contingencies are covered. It has recently been agreed that Peterborough PCT will also use this system and the Council's process to create its Business continuity plan. However, tests have not yet been performed on this, but are due in July 2008, as a result reports have not been submitted to management.

The Council has also launched Emergency planning, a full version of this has been issued to heads of services and is available on CD; it is to be used as a reference document. A pocket version of this is also available as well as being available on the website.

Protocols for sharing key data internally and externally are still to be developed. However, the Local Strategic Partnership receives reports on a quarterly basis on the performance of Peterborough's Local Public Service Agreement (LPSA). Working with both internal and external partners the Council has reviewed the process that was in place to create the LPSA and created a summary of lessons learned so that these can be addressed and used to support the development of the new Local Area Agreement. However, it remains unclear what validation process has been established during the year of assessment for data that has been provided by partners or other third parties.

#### Key Lines of Enquiry

- There are appropriate systems in place for collection, recording, analysis and reporting of data used to monitor performance, and staff are supported in their use of these systems

**2**

<ul style="list-style-type: none"> <li>• The body has appropriate controls in place to ensure that information systems secure the quality of data used to report on performance</li> <li>• Security arrangements for performance information systems are robust, and business continuity plans are in place</li> <li>• An effective management framework for data sharing is in place</li> </ul>	<b>2</b>  <b>2</b>  <b>2</b>
<p><b>Areas for Improvement</b></p> <p>Evidence will be required for the 2009 assessment to demonstrate that key actions/processes identified in the Data Quality action plan have been fully implemented and embedded in particular:</p> <ul style="list-style-type: none"> <li>• Mapping of controls functions.</li> <li>• Evidence that a programme of consistent data quality reviews is carried out before reporting to senior management and beyond.</li> <li>• Performance information systems have built-in controls to minimise the scope for human error or manipulation, and prevent erroneous data entry, missing data, and unauthorised data changes.</li> </ul> <p>The Council's current data sharing guidance provides information on sensitivity of data and council information and primarily addresses the Council's way of sending information externally. This is available to all staff. However, this does not detail whether and/or how the Council validates data from third parties i.e. checking samples of data against source records. The proposed Information Management Policy should identify and take account of all instances where data is shared and also the types of data being shared. The Council should ensure that the policy addresses:</p> <ul style="list-style-type: none"> <li>• Adequate processes to validate data from third parties.</li> <li>• Is approved by senior management.</li> <li>• Communication to all employees, Members and partners.</li> <li>• Regular review and data quality assessments carried out by say internal audit.</li> </ul>	

## People and skills

### Does the organisation have the resources in place to secure data quality?

#### Overview

Key roles and responsibilities of data quality are evidenced in the Data Quality Policy. In addition, there are some specific responsibilities incorporated in the job descriptions for both the Performance Framework Manager and Officer. No other officer's job descriptions contain specific data quality roles and responsibilities – although the Performance Management Development Group provide a structure and roles for the central Performance team and the Key Departmental Performance Contacts (KDPC) and Lead Business Unit Administrators (LBUA's) network.

There are no stated DQ targets or standards set for staff against which they are assessed. Whilst the **PerformancePlus** procedures appear to detail certain data input time targets, as well as guidelines for inputting, it remains unclear what outcomes and impacts have arisen from the previous year's skills audit which was dependent upon the implementation of the Information Management Policy and associated actions.

The Council's **PerformancePlus** system has been fully rolled out throughout the Council. This has been completed after a number of training sessions. There are also PPlus training guides for staff to use. On site training sessions have also been held to ensure that roles and responsibilities of all individuals are covered. In 2008 there have been three sessions with 62 attendees. A support network is available for staff to monitor and respond to weaknesses in data collection and monitoring. Monthly meetings are held to ensure all areas of concern are discussed but it is not clear how the impact of either internal or external reviews has been addressed through training or whether any evaluation has yet been undertaken of the arrangements.

#### Key Lines of Enquiry

- The body has communicated clearly the responsibilities of staff, where applicable, for achieving data quality
- The organisation has arrangements in place to ensure that staff with data quality responsibilities have the necessary skills

2

2

#### Areas for Improvement

Further consideration should be given to our previous recommendations that the Council should:

- Monitor and report on the interventions made by the Strategic Improvement Division and Performance Management Development Group as appropriate, as this would provide an indication of the state of data quality within the Council, and not just Best Value Performance Indicator data.
- Linked to the above, assess the extent and quality of training provided across all departments to ensure that relevant officers have the necessary skills to ensure the effective collection, recording, analysis and reporting of data.
- Demonstrate whether any levels of inadequate poor performance have led to corrective actions.
- Review future developments that may impact on data quality staff skills and capacity to enable the Council to proactively manage its future training programmes.

**Data use****Are there effective arrangements and controls in place for the use of data by the organisation?****Overview**

The Council continues to develop and embed a culture where performance information is seen as critical to business improvement and the setting of objectives.

Heads of Service use monthly reports from **PerformancePlus** to monitor the performance of their service, this includes comments with an explanation on the performance, as well as identifying what actions are required to achieve the agreed target. A corporate pack is produced on a monthly basis which looks at 8 different perspectives of the Council's performance i.e. corporate plan, LAA, CPA/CAA, customers, people, finance/VFM, projects and critical issues in order to highlight areas of concern and to support the council's decision making process.

Through the restructure of the Strategic Improvement Division the performance of the Council has been refocused with closer monitoring of performance. Critical issues are reported to the CMT on a monthly basis and the improvements required to change any deviations from planned performance are agreed and allocated to the relevant Director for monitoring and subsequent reporting back.

The Council has arrangements in place to primarily support the validation and reporting of best value performance indicators (Level 2 criteria) and although audit trail templates are in place for all data returns, as communicated via the Lead Business Unit Administrator network, it is unclear how the Council's arrangements address the Level 3 criteria in respect of:

- Validating data returns to government departments; and
- Ensuring senior management approval prior to external reporting to regulators and government departments e.g. IPF, CLG, DH, DEFRA etc.

We understand that some work has been undertaken on the processes in respect of DEFRA information only and that all other information should be covered off by the quarterly reporting and sign off arrangements by HoS but no further evidence was provided.

**Key Lines of Enquiry**

- The body has put in place arrangements that are focused on ensuring that the data supporting performance information is used to manage and improve the delivery of services
- The body has effective controls in place for data reporting

**3****2****Areas for Improvement**

The Council should:

- Continue to develop a review programme that assesses the impact of data quality issues identified through internal and external reports.
- Ensure all data, not just Best Value Performance Indicators, is subject to appropriate senior approval prior to external reporting.
- Develop demonstrable evidence of follow-up action by senior officers and Members to address identified problems to ensure action has been both implemented and effective.

- Clarify the arrangements required for external reporting to regulators and government departments.

## Appendix B – Recommendations arising from detailed spot checks of performance indicators

Indicator	Definition	Findings	Management response, timescale for implementation and responsible officer
<b>Reservations to Performance Indicators</b>			
HIP HSSA	% of total private sector homes vacant for more than six months	<p>To generate this indicator, the Council needs to calculate the total number of private sector homes. To do this, the Council takes the total number of properties within the Peterborough boundary, as advised by the District Valuer, and subtracts the number of properties held by Housing Associations.</p> <p>We identified that there was an insufficient audit trail to support the total number of private sector homes. No confirmations had been received from the majority of the Housing Associations to provide details of the number of properties they held at 31 March 2008. Moreover, two of the Associations' total properties appeared to have been double-counted. No information was provided by the Council to explain these duplications or to support the figures subtracted.</p> <p>The Council should ensure that procedures are in place to obtain complete and accurate confirmations of the total non-private dwellings owed/operated by Housing Associations as at 31 March. The Council should retain evidence to support the calculations made.</p>	<p>We will ensure that we ask Housing Associations for their stock and request written confirmation of this on 31 March 2009. This evidence will be retained with the PI documentation.</p> <p>Responsible Officer: Belinda Childs.</p>
		<p>We identified one property, from a sample of twenty, for which there was no evidence to support the Council's conclusion that the property was empty.</p> <p>Management should ensure that all documentation to support the status of properties is retained.</p>	<p>Procedures have been put in place to ensure that all evidence supporting the status of empty properties is kept/input onto the M3 system. We are currently looking at the option of an empty homes module on M3.</p> <p>Responsible Officer: Belinda Childs.</p>



Indicator	Definition	Findings	Management response, timescale for implementation and responsible officer
		<p>In our 2006/07 data quality report we commented that working papers to support the figures did not include the date the properties became vacant, and therefore we were unable to undertake test 6 of the Audit Commission's testing schedule. We recommended that the importance of the date for which the data should be sought, and the reasoning for requesting the information, is appropriately communicated to those staff collecting it.</p> <p>No progress has been made against this recommendation during 2007/08 – the date the Council is informed that the property is vacant is still being used. We therefore re-iterate our recommendation.</p>	<p>In cases where the owner cannot be located the team will check council tax records and ask neighbours to ascertain when the property became vacant. The team only use the date Council was informed when all other sources have been exhausted.</p> <p>Responsible Officer: Belinda Childs.</p>
<b>Other matters arising</b>			
BV 82ai and BV 82aii  BV 165  IPF	Recycling performance  % of pedestrian crossings with facilities for disabled people  Cost per library visit	<p>These PIs required amendment during the course of our audit as a result of the Council becoming aware of additional information that allowed a revised figure to be calculated. These revised figures were submitted to the Audit Commission. Two of the PIs (BV165 and IPF) were outside of the sample under review but as these PIs had been amended in the prior year we did a high level review of those PIs to identify whether there was also a similar issue in the current year.</p> <p>The Council should ensure that sufficient resources are made available and appropriate timetables put in place to ensure that finalised PI values can be reported accurately by the submission deadline.</p>	<p><u>BV82:</u></p> <p>We have taken the following steps to make data more reliable and ensure future on time reporting</p> <ul style="list-style-type: none"> <li>▪ We are keeping a close eye on the MRF data and auditing the operator more closely to resolve all data discrepancies as soon as the data is collected for each month;</li> <li>▪ We now get weighbridge printout for each month in excel format – where each and every load can be traced and matched up with the tonnage report;</li> <li>▪ We now get a separate report of material laying in stock for each month from the MRF that is matched up with the in stock data in the tonnage report; and</li> </ul>

Indicator	Definition	Findings	Management response, timescale for implementation and responsible officer
			<ul style="list-style-type: none"> <li>▪ We get a quality report each month which helps us to change the percentage of Council materials processed through the facility on a quarterly basis in our internal data management systems.</li> </ul> <p>Responsible Officer: Paul Pace.</p> <p><u>BV165</u></p> <p>A comprehensive data record has been established for the provision of disabled facilities at signalised pedestrian crossings that enables accurate and timely reporting. Furthermore additional funding has been committed to accelerating the provision of such facilities on site such that a greater compliance with the national criteria can be achieved, hence improving the overall performance measure.</p> <p>Responsible Officer: Peter Tebb.</p> <p><u>IPF</u></p> <p>This indicator is reliant on joint working between Finance and the Library and an agreed timescale has been put in place.</p> <p>Responsible Officer: Heather Walton.</p>

# Appendix C – Performance Indicators selected by the Audit Commission

## Culture

- Cost per library visit (IPF)

## Environment

- % of pedestrian crossings with facilities for disabled people (BV165)
- Recycling performance (BV82a)
- Composting performance (BV82b)
- Cleanliness of public places (BV 199a - litter and detritus / BV 199b – graffiti / BV 199c – fly posting)

## Housing

- Proportion of non-decent homes (BV184a)
- Average re-let time (BV212)
- Average time in temporary accommodation: hostels (BV183b)
- % of total private sector homes vacant for more than six months (HIP HSSA)
- Repeat homelessness (HIP HSSA)

## Housing Benefits

- Average time for processing new claims (housing and council tax benefit) (BV78a)
- Speed of processing: change in circumstances for housing and council tax benefit claims (BV78b)

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