Buckinghamshire County Council Quality Assurance Framework

January 2017

Version control

Version number	Date	Notes
1	14-9-16	First draft
2	26-9-16	BI Business Partner comments/ revisions
3	4-10-16	SA comments re: scope/ structure
4	24-10-16	With contributions from QAF working group
5	25-10-16	Circulated to BU colleagues for comments
6	9-11-16	With BU comments, submitted to OCB
7	20-1-17	With OCB comments, submitted to Reg & Audit

1.Background and purpose

On 5th April 2015 Buckinghamshire County Council launched a new Strategic Plan, which sets out our vision, values, and priority outcomes for the two-year period to 2017. These priorities were set by Members, with residents, and commit us to delivering a range of outcomes.

At the same time the Council adopted a new operating model – the Future Shape. This forward-thinking model commits the Council to delivering these priorities through stronger outcomes-based commissioning and performance management. Our Operating Framework document sets out for staff how we will work to achieve this.

This document complements the Operating Framework by setting out an over-arching framework for assuring the priority outcomes set out in the Strategic Plan are delivered. It aims to provide information and guidance for Officers on our high-level quality assurance processes, and to provide assurance to Members.

The Council's Business Assurance Framework sits beneath the overarching Quality Assurance Framework and provides structured and reliable evidence to Members and Officers to support the continuous effectiveness of operations and key activities. The Business Assurance Framework will inform the Combined Assurance reports for the Business Units and the Council's Annual Governance Statement.

There are a number of other, more specific, quality assurance frameworks operating within the Council that focus on ensuring high quality service delivery in specialised areas – including the Children's Social Care Quality Assurance and Learning Framework. This document complements the service-specific documents; providing an organisation-wide framework and set of principles to support quality assurance activities across the Council.

2. Principles of quality assurance

Flowing from our Future Shape operating model, the key principles of quality assurance in Buckinghamshire within the context of achieving our priority outcomes are:

- We have a greater focus on outcomes and value for money – with an outcomes-based approach to planning and commissioning
- We set clear accountability for performance;
- A robust framework of activities is in place to monitor performance, plan performance to meet targets and ensure quality
- We focus on insight-led improvement, not just reporting data;
- The right information is made available to the right audience
- We use this information to drive improvement planning, and monitor the delivery of this

Principle	How is this achieved?
We have a greater focus on outcomes and value-for-money	Our Strategic Plan is based on a set of outcomes – which drive our commissioning, key projects, strategies and plans. Strategic Options Appraisals' give capacity, tools and support to Business Units/ Commissioners around achieving the best value for money and improving outcomes.
Set clear accountability for performance	We have a clear performance framework, with measures and targets set for all Business Units, agreed reporting schedules and governance. The framework results in a clear understanding of why performance is good or below expected levels and identifies areas for service improvement.
A focus on insight-led improvement, not just reporting data	Challenging and driving improvement through deeper analysis of the drivers of performance, and using insight and intelligence to underpin business improvement and planning.
Information is relevant, quality assured, and made available to the appropriate audience	The right performance information is provided to the right part of the Council for assurance, decision making or action. Quality assurance processes are in place to ensure it is robust.
Improvement planning/ delivery	Services are clear on areas they want to improve, and improvement planning/ monitoring are explicit parts of the performance management framework/ cycle.

3. Quality assurance model

The model adopted in Buckinghamshire is based on the 'analyse, plan, do, review & revise' model (see Fig. 1 below), reflecting the stages of our commissioning model. In practice these activities

overlap rather than being linear stages in a process, but the distinctions help to draw out the features of quality assurance.

- **Analyse:** using insight and engagement to better understand the needs, preferences, experiences and priorities of service users and residents. Using the findings to identify our priority outcomes, and underpin our service planning, commissioning, and improvement activities
- **Plan:** planning and prioritising our activity to achieve our priority outcomes
- **Do:** taking action through service delivery and managing risk
- **Review & Revise:** monitoring delivery and auditing, reviewing performance and identifying areas for improvement. Further analysis to understand the drivers of performance and inform improvement reviews. Using this information to revise and plan future action to make improvements.
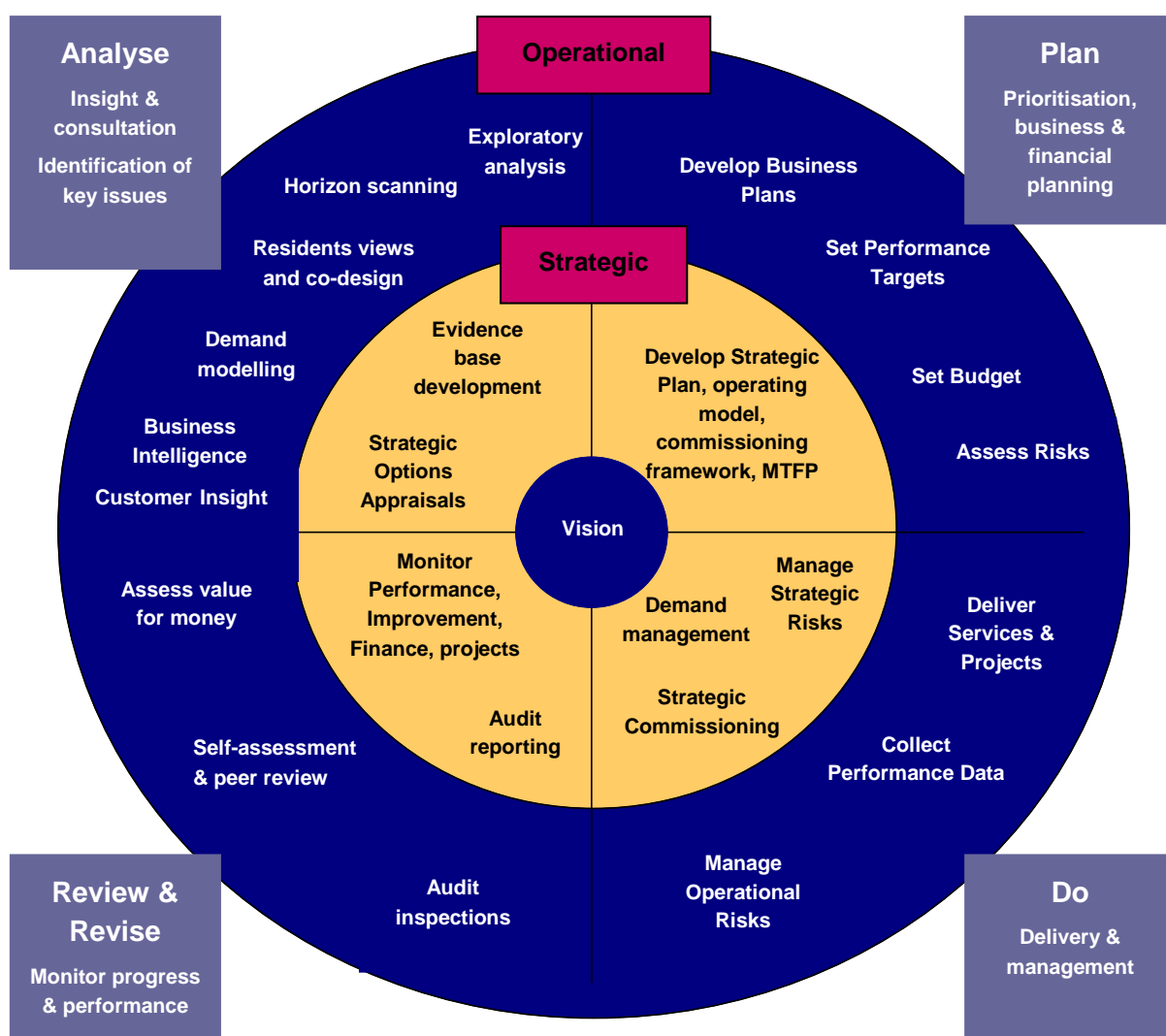

Fig 1 – Bucks quality assurance model

4. Analyse

Business intelligence and insight will be used to improve outcomes for local people and communities by

- Ensuring that decisions, policies, plans and strategies are evidence-based.
- Informing service planning and transform services to improve outcomes for local people.
- Shaping how resources are used so that they are focused on the areas of highest need or where the impact will be the greatest.
- Identifying and communicating what is working well and what needs improving, and support service redesign.

There are three types of product that support this:

1) Regular reports and evidence to understand how well council services are performing and delivering against the strategic plan and Business Unit plans. Providing evidence to shape service delivery
2) Insight products that help the council understand issues affecting how services are being delivered and how services can be improved
3) Developing and collecting the information we hold and providing this to teams to enable services to be run or to government for statutory returns

4.1 Horizon scanning

To enable the council to identify and focus on the key issues that it needs to address internal and external horizon scanning will take place. Internally these include an understanding of the key issues affecting BUs (Performance, Operational, HR, Finance), externally these include identifying and understanding the key impact of government policy changes, changes to finances, factors that affect the outlook of the local/national economy, key environmental issues, legislative issues and factors affecting society and how people live (PESTL).

4.2 Plans

The council undertakes a range of analysis to understand current need in the population and to understand the key issues that it needs to plan for in the future. These products take the form of a range of needs assessments and plans to develop council policy (JSNA, Transport Plan, Council Plan, BU Plans, etc) and includes analysis that understand levels of need in the population, profiles and benchmarks this against other areas and models future demand based on population or other service demand information.

Understanding residents and stakeholder views on council services and ensuring these are fed into council decisions affecting their services to deliver the most important services in an effective way to residents is a fundamental part of what the council does. The council involves residents in decisions affecting services through consulting on budget and overall issues affecting the council as well as when considering how specific services could be improved through co-design research with stakeholders, surveys, focus groups and interviews.

4.3 Exploratory Insight

Where performance issues are identified and improvements are required the reason for underperformance needs to be better understood. In some cases service managers will already know what has caused underperformance from running the service (e.g. lack of staffing, contract issues, low service take up etc), but where this is not known the council will undertake exploratory research to understanding the causes of this to help inform how the service could be improved. This analysis can take a range of quantitative or qualitative forms to help answer initial questions and pin down key questions that need answering to improve services e.g. profiling of service users to identify specific groups that relate to the underperformance, understanding the impact of staffing on performance or understanding the root causes of issues that would need to be addressed.

4.4 Targeting, reach and evaluation

In addition to exploratory insight, where the council is looking to improve specific services, a range of information to understand how well services are reaching specific population groups and evaluating how well services support the achievement of the council's outcomes can be analysed.

4.5 Understanding demand

To enable the council to commission specific services a detailed accurate understanding of current demand is needed. This enables services to be commissioned (what service is delivered where and to what level) with a financial commitment to this. For many services, an understanding of how demand may change in the future is required to plan for the infrastructure, staffing and budgets required (e.g. pupil places for schools).

Where the council is looking at longer-term options on what types of services should be considered a less detailed understanding of future demand may be required to enable cost-benefit analysis of different service models to be considered and inform longer term strategic decision making on the types of services required for the future.

5. Plan

Once the nature and the scale of the local challenges have been agreed, priorities can be set and resources such as finance, workforce and facilities can be identified. The planning stage involves working with stakeholders to decide how to address the identified needs effectively, efficiently, equitably and in a sustainable way. Where relevant, involving partners such as the NHS and District Councils is vital at this stage.

The table below sets out the planning activity undertaken in a strategic and operational context. It is important that this involves co-design and participation from relevant key stakeholders, including Members, Business Units and HQ to design, implement and embed the plans:

Strategic Planning	Operational Planning
The Strategic Plan	Commercial Business Unit Plans
Operating Framework	Set Performance Targets
Commissioning Framework	Set Budgets
MTFP	Assess Risks

5.1. Strategic Planning

5.1.1. The Strategic Plan

On 5th April 2015 Buckinghamshire County Council launched a new Strategic Plan, which sets out our vision, values, and priority outcomes for the two-year period to 2017. These priorities were set by Members, with residents, and commit us to delivering a range of outcomes.

5.1.2. One Council Performance Plan

This is a new plan which will sit alongside the Strategic Plan, setting out the Level 1 and 2 performance measures we will use to assure we are delivering the priority outcomes. This plan will be refreshed annually as part of the planning cycle.

5.1.3. Operating Framework

The Operating Framework covers key topic areas that matter in running the business to achieve a one Council approach; as well as where it is helpful to set out clear expectations on standards, roles, accountabilities and responsibilities across the organisation, particularly on the respective roles of the Council's Headquarters,, Business Services Plus and other Business Units.

Members (County Councillors) sit above the Council officer structures, providing the democratic leadership for the Council in their strategic roles as decision-makers, scrutineers (via the Council's Select Committees) and in carrying out their local roles as community leaders.

The purpose of the Operating Framework is to:

- Enable Council employees to understand the different accountabilities and responsibilities of HQ and BUs and how the two parts work together to deliver a one Council approach.
- To ensure a one Council approach in our governance system, providing robust organisational assurance.

HQ Assurance takes the lead in overseeing the implementation of the Operating Framework, including overseeing the following assurance processes:

- The Regulatory and Audit Committee will monitor compliance with the Operating Framework through the Annual Governance Statement and audit processes.

- The One Council Board will receive quarterly exception reports on the Operating Framework.

- Managing Directors and BU Boards will conduct a compliance self-assessment report at least annually, and implement an annual local action plan to address any areas of action needed.

- There will be professional lead officers with oversight roles of specific aspects of the Operating Framework who will be responsible for providing quarterly information on compliance

5.1.4. Commissioning Framework

This framework is designed to complement the Council's Operating Framework. The purpose of the framework is to:

- Create an outcomes commissioning environment that can secure value for money through better relationships with other bodies: public, private and voluntary.

- Promote responsible commissioning in terms of addressing social, economic and environmental issues, equality and diversity.

- Help deliver a shared understanding of the commissioning process between commissioners, members and wider stakeholders, defining the basic principles that should underpin all commissioning decisions.

- Ensure openness, transparency and value for money, at all times, through the application of consistent commissioning standards and approaches across the Council's Business Units.

The framework is reviewed annually.

5.1.5. Medium Term Financial Plan

This covers the next 4 financial years and identifies resources likely to be needed to finance our service priorities and meet spending pressures. It also determines the resources (ie Council Tax income, fees, charges, Government funding and other grants) likely to be available over the same period.

It aims to:

- ensure the sustainability of our budget

- facilitate proactive, strategic management of the budget to ensure investments and disinvestments flow from our corporate priorities

- guarantee responsiveness to an ever-changing and uncertain financial climate

The process is Member led in conjunction with their Portfolio teams. Work starts in late spring each year and ends when Council agrees it in February each year. This is the same time the annual budget and Council Tax is set

5.2. Operational Planning

5.2.1. Commercial Business Unit Plans

The Commercial Business Unit Planning is an integral part of the quality assurance framework, it provide residents with an understanding of the BU's commercial vision, priorities, challenges and opportunities. It provides assurances to Members, employees, partners and residents that income and savings targets are recognised by the BU and there is a plan in place to achieve them.

The strategic planning cycle sets out the outcomes each Business Unit works towards in order to meet the needs of our residents and businesses. BU's plan to deliver or commission goods / services based on these outcomes.

5.2.2. Setting Performance Targets

Level 3 performance targets are set by BU's within the Commercial Business Unit Plans, which are translated into individual team planning to ensure the golden thread of outcomes and performance is maintained throughout the organisation.

5.2.3. Setting Budgets

Budgets are set through the strategic planning process and translated by Managing Directors and Financial Directors into Business Units and cascaded though to individual teams. The quality of budget setting at all levels is assured through Finance Directors.

5.2.4. Assess Risks

Strategic and organisational risks are monitored via Assurance, however each Managing Director and Head of Services is accountable for identifying, monitoring and managing risk within their own teams.

5.3. Planning Framework
See figure 2 below.

5.4. Business planning timetable

Business planning usually takes place between September and March. It starts with a review of existing plans and preparation for the next financial year, taking into account changing Government agendas and other external influences and the Council's budget.

1. The high level priorities for the Council are set by Members through the Strategic Plan. The Plan includes strategic objectives. It is underpinned by the Medium Term Financial Plan and the Implementation Plan, which includes outcome measures and activity measures for each of the strategic objectives.

2. The strategic objectives and supporting measures are cascaded down to a set of Portfolio Plans, which are prepared and agreed by individual Cabinet Members. It is worth noting that the Strategic Plan does not represent *all* of the activities undertaken by individual portfolio/services, and the Portfolio Plan will therefore include additional objectives to the Strategic Plan.

3. Service Directors are responsible for cascading the Portfolio Plan objectives down to their service plans and/or team plans, according to their particular business needs.

4. At an individual level, each employee has a set of personal objectives agreed through the 'Delivering Successful Performance' process.
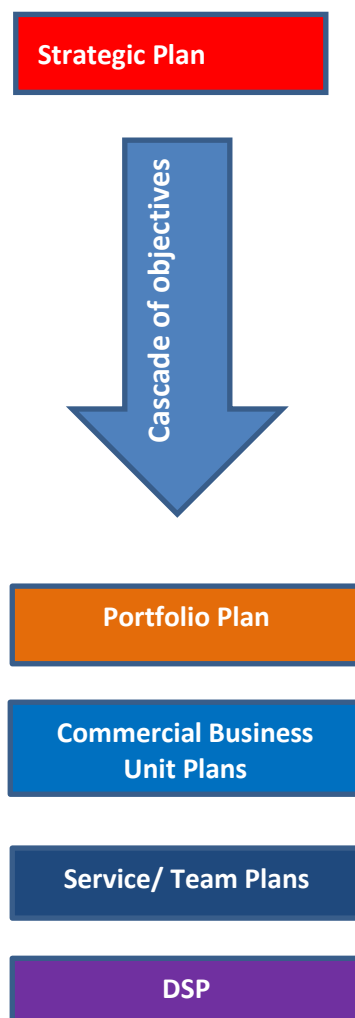
Strategic Plan

Cascade of objectives

Portfolio Plan

Commercial Business Unit Plans

Service/ Team Plans

DSP

Figure 2: Business planning framework

6. Do

6.1. Programmes/ projects

Within project management there are essentially two levels of assurance – Project Assurance and Quality assurance.

	Project Assurance	**Quality assurance**
What they do	Provide assurance to the project's stakeholders that the project is being conducted appropriately and properly.	Provide assurance to the wider corporate organisation that the project is being conducted appropriately, properly and complies with relevant corporate standards and policies.
How they differ	Responsibility of the Project Board, therefore undertaken from	Responsibility of the corporate organisation, therefore **external to the**

	within the project. Nb. This must be independent of the Project Manager, Project Support and project teams.	project (i.e. not a member of the project management team).

Once a project has been planned, the project management team should put in place the system to provide and confirm assurances that the project activities have been carried out in line with the corporate standards and policies.

The Project Management toolkit sets out the documented standards and best practices for delivering projects across Buckinghamshire County Council.

A summary of the key controls that support Project Assurance is shown below:

Item / Activity	Control Document
Business Case	The **Business Case** establishes whether a project is viable and worthwhile. The Business Case should be referred to throughout to ensure the ongoing viability of the project. All Business Cases must be approved by the Project Sponsor and where applicable, by the respective Business Unit Board or the One Council Board to obtain approval to proceed. The Outline Business Case should outline the range of delivery options being considered, whereas the Full Business Case should focus on delivery of the recommended option. Nb. Business Cases are also produced through the Medium Term Financial Planning (MTFP) process, which is subject to a process of review and challenge before being agreed by Full Council.
Baseline	The **Project Initiation Document (PID)** acts as a baseline against which progress, ongoing viability and ultimately overall success of the project can be assessed and measured throughout the lifecycle. The PID is used to obtain management commitment to the project and should be approved by the Project Sponsor and/or Project Board.
Risks	All identified project risks should be recorded on the project **Risk Register** and managed effectively. Risks are given three scores: Untreated, Current and Target. The use of all three enables risk owners to see the movement of a risk from its inherent or untreated score through to a tolerable or target score. The target score should represent the level of impact we are willing to accept. The current score is then used as a marker to show movement; once mitigating actions have been implemented, from the untreated to the target score. Risks should be reviewed by the Project Manager / Risk Owner(s) and updated on a regular basis with clear details about the actions being taken i.e. mitigating actions.

	Any significant project risks that could have a wider impact (i.e. outside the project) should be escalated for consideration and inclusion in the strategic risk register for the respective Business Unit.
Issues	All project issues should be recorded on the **Issue Register** with clear details about how they are being dealt with.
	Any significant issues should be included in the Highlight Report and notified to the Project Sponsor immediately.
Change Control	All requests for change should be documented in the **Change Log** to enable the progress of each change to be tracked through to closure.
	This can also be used to help monitor and control the effect of changes on the project.
Benefits	A **Benefits Review Plan** should define how and when the achievement of the projects benefits can be measured.
	At or after closure of the project a **Post Completion Review** should be undertaken to check that the project has delivered all of the business benefits identified in the Business Case.
	Ultimately, the Project Sponsor is responsible for ensuring that business benefits are delivered.
Project Progress	A **Highlight Report** is produced regularly (e.g. monthly) to provide the Project Sponsor (and other key stakeholders) with regular information on project progress against the key deliverables contained in the PID.
	This should include any key risks and issues for the Project Sponsor to consider.
	An **Exception Report** is produced to notify the Project Sponsor when a project is forecast to exceed agreed tolerance levels – these should be clearly expressed in the PID. This enables them to make informed decisions on the best way to resolve the situation / problem.
	A decision may be made to close the project early if it is felt that it is failing to meet the Business Case. This should be brought to the attention of the Project Sponsor and/or Project Board through the Exception Report.
Project Closure	An **End Project Report** is required to formally close the project and assess how well the project has performed against the deliverables set out in the PID. It is also used to obtain formal acceptance of the projects deliverables.
	The Project Sponsor is responsible for approving the End Project Report and to ensure that any follow-on actions have been identified and responsibility for them agreed and assigned (e.g. handover to BAU environment).

Oversight of the major transformational change projects and programmes is reported to and reviewed by the One Council Board on a quarterly basis, focusing on those that are reporting as

off-track. Plans are in place to bring this together with monthly budget monitoring reporting to provide a more coherent and joined up approach. It is expected that this will commence in November 2016.

6.2 Quality assurance

It is acknowledged that the Council doesn't currently have a separate Quality assurance function, however we have started to develop our thinking around implementing a model to provide corporate oversight by introducing a second line of assurance, for example via use of a scorecard for our key strategic projects and programmes.

This will form part of the ongoing development of the Programme Management Office function to provide the appropriate level of assurance to the One Council Board and Councillors around project management.

6.2. Risk Management

Risk management is an important aspect of the quality assurance framework and is defined as "the planned and systematic approach to the identification, evaluation and economic management of the risks associated with the council's activities". The Business Assurance and Risk Strategy sets out the Council's approach to risk management. A summary of the basic principles of risk management is given below:

- Identification and management of risk is aligned to the council's priorities
- Approach to internal control is risk-based, including an evaluation of the likelihood and impact of risks occurring
- Review procedures cover strategic and operational risks, key contract and major project risks, as well as key financial risk
- Regulatory and Audit Committee receives regular reports during the year on risk and internal control
- Principal results of risk identification, evaluation and management review is reported to, and reviewed by, the Business Unit Boards, One Council Board, Risk Management Groupand Regulatory and Audit Committee
- Risks that are of a particular concern are escalated as appropriate and mitigating actions identified to respond to these

Risks are defined as strategic and operational:

- Strategic risks are those which may impact on the delivery of strategic activities such as those outlined in the corporate plan.
- Operational risks are those that may impact on the delivery of operational activities such as those outlined in Business Unit plans

Figure 3 below summarises the risk reporting hierarchy. Responsibility for monitoring the overall effectiveness of the Council's risk management approach sits with the Regulatory and Audit Committee, which reports directly to Council.
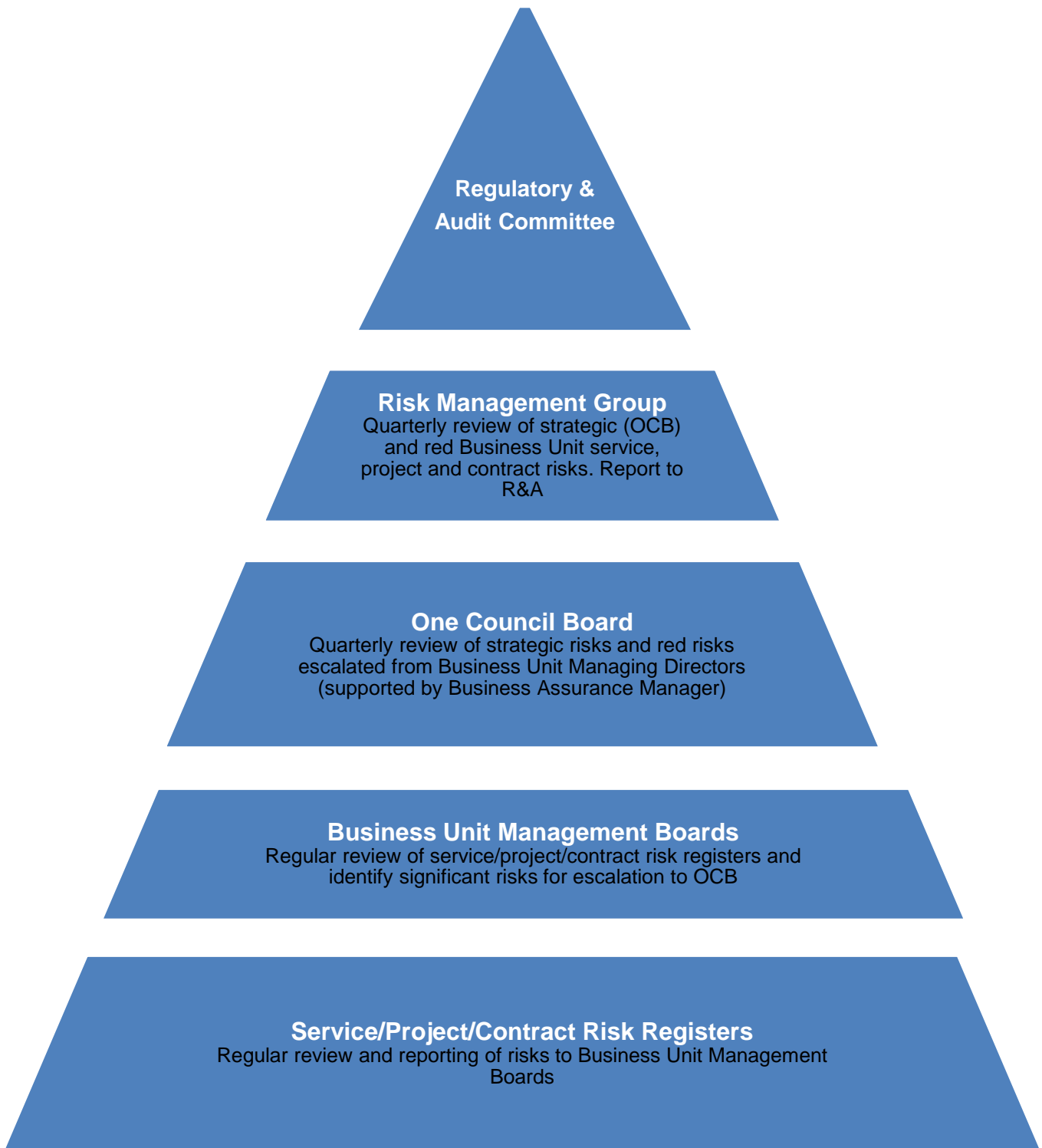
Figure 3: Risk reporting pyramid

7. Review and revise

7.1. Performance management

Performance monitoring is important for us to know (and demonstrate to our customers) how well we are delivering against our priority outcomes (as set out in the Strategic Plan), and to enable areas requiring improvement to be identified and managed.

7.1.1. One Council Performance and Improvement Management

The remainder of this section introduces a new approach (One Council Performance and Improvement Management, OCPIM) to understanding, reporting and managing performance against the key Level 1[1], 2 and 3 outcomes[2] set out in the Strategic Plan.

The approach focuses on enabling and monitoring *improvement*, through a deeper understanding of the drivers of performance, and the monitoring of improvement plans. It also seeks to further strengthen relationships and flows of information/ insight between business units, embedding a central principle of our operating framework.

7.1.2. The purpose of the OCPIM framework

To provide assurance that:

- The Council is delivering its strategic outcomes, as identified in the Strategic Plan
- Resources are allocated effectively to support the delivery of these outcomes - effort is focused in the right places
- The Council has the information it needs to respond to performance issues at the earliest opportunity
- Performance information is used enable improvement
- The council understands key area of good performance and key areas where performance is lower than expected
- Issues that affect performance are understood either from feedback from operational deliver, or from insight in areas where the council wants to improve how services are delivered
- Operational teams are able to forward plan towards meeting performance targets, as well as consider past performance
- Our performance management approach supports the development of deeper insight and a stronger evidence base to support improved decision making (as per the Future Shape)

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[1] Level 1 outcomes are broad and set an ambition for the County (e.g. Buckinghamshire Residents enjoy a high quality and sustainable environment), level 2 outcomes set out the BCC contributions to the level 1 outcomes (e.g. households and businesses use more energy), level 3 outcomes set out the BU contribution to level 2 (e.g. more households and businesses have energy saving measures)

[2] The performance and improvement management approach measures how well outcomes are being delivered through council services; wider factors affecting outcomes (for example where they are impacted by partner organisations) will be considered where appropriate.

The new approach is designed around 5 principles:

Efficiency and Automation	**Focus on improvement, supported by insight**	**Understanding performance in Collaboration**	**Data sharing by default**	**Integration**

Automation

We aim to automate five key performance dashboards during 2016/17 (Cabinet and OCB, CSCL, CHASC and TEE), widening the net to incorporate further requirements in 2017/18. Automation will free up capacity within our insight function to carry out more in-depth analysis of trends, bench-marking and high-value insight work to support decision-making and the development of improvement plans.

Focus on improvement supported by insight

Our new approach puts improvement in the spotlight, making this a focus of our reporting and monitoring. This will be achieved by the introduction of 'improvement plans' for all red and amber indicators that are identified as key issues following discussions at BU boards/ OCB/ Operational Units. The plans will follow a simple template which will be populated by the business unit that owns the indicator, and signed off by the relevant Lead Member. Plans will be appended to the One Council Balanced Scorecard. The main purpose of the improvement plan is to set out a 'trajectory of improvement' (for all remaining quarters of the financial year), and a set of actions planned to achieve this.

The One Council Balanced Scorecard will be submitted to Finance, Performance and Resources Select Committee Scrutiny Committee. The improvement plans will be the key tool scrutiny use to hold service areas to account. Lead Members and Directors owning improvement plans will be invited to present them and respond to questions.

In-depth improvement reviews are a new tool to help us understand persistent performance issues. They could be triggered when a red indicator fails to meet its expected trajectory of improvement. The HQ BI function will support and inform (for example through the provision of insight), the review process should be led and resourced by business units.

Understanding Performance in Collaboration

The Council's insight function has been restructured to enable more cross-cutting insight, and linking of performance information to understand interconnections between service areas. Roles and responsibilities will be clearly defined - the HQ team will co-ordinate the quarterly OCPIM pack, and will continue to attend BU performance meetings to gain 'soft' intelligence to help identify key areas of good performance or where performance is lower than expected. BI Business Partners in TEE, CHASC and CSCL will develop an understanding of what is affecting key performance issues and propose exploratory insight projects in areas where drivers of poor performance need to be better understood to make service improvements.

BI teams in TEE, CHASC and CSCL will own the process of setting indicators for their BU for the beginning of a new performance year (see performance planning section below), in line with the

priorities of their Lead Members and Directors. HQ will provide support and 'critical friend' challenge. Data, commentaries and improvement plans will be populated and quality assured (QA) by BI teams in TEE, CHASC and CSCL and submitted to HQ, where a second round of QA will take place. HQ will pull the report together and develop the insight pack presenting deeper analysis of trends and links, helping OCB and Cabinet make sense of the information. See roles and responsibilities section below for further detail.

Data sharing by default

The One Council approach emphasises the freer flow of data enabling faster insight and controlled access to relevant source data for quality assurance of performance measures. This reflects a key tenet of our Operating Framework which states that data should be shared by default within the Council.

The development of 'standard views' has been successfully piloted over recent months to enable this – involving the creation of a standard set of data derived from a back-office system (the pilot was carried out on the children's social care system LCS). This standard view is specified in line with data protection regulations (e.g. where data is used for the purpose that it has been collected for), is refreshed regularly and is freely accessible to all insight teams.
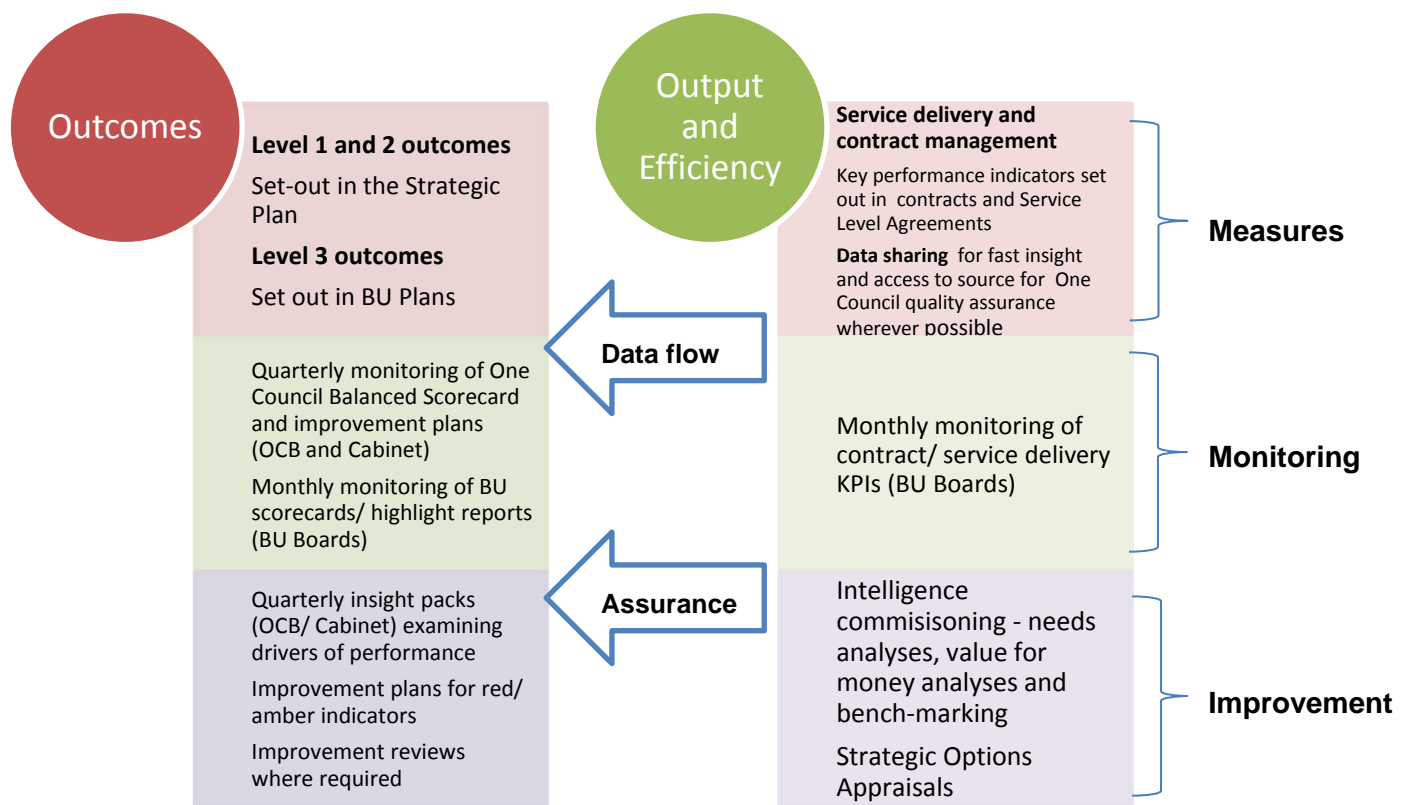

Figure 4: flow of information and assurance from service/ contract management to One Council outcomes performance monitoring

Integration

The current OCB and Cabinet Balanced Scorecards integrate performance, finance data and HR. We are exploring, through the BI Tool programme, the integration of risk, and potentially project and programme reporting as well.

Indicators will be standardised across the organisation (so that wherever possible existing operational indicators are used to feed into strategic performance reporting) aligned as much as possible e.g. across BU Board, OCB, Cabinet reporting.

The full range of indicator types will be deployed to measure the effectiveness of services including; quality, timing, efficiency, demand, effectiveness (where available), project tracking / benefits realisation.

7.1.3. One Council Performance Governance

The performance management framework is part of the wider corporate governance framework that ensures controls are in place to effectively manage the Council's business. There are several levels of governance within the Council, see Fig. 5 below.

Residents
Quarterly oversight fo published One Council Balanced Scorecard & improvement plans

Cabinet and Selet Committees
Quarterly oversight of One Council Balanced Scorecard & improvement plans

OCB
Quarterly oversight of One Council Balanced Scorecard & improvement plans

BU Boards
Monthly oversight of major project/ programme performance within BU

Monthly BU performance scorecard review

Team/ programme/ project managers
Performance management of projects and programmes and managing individual performance against DSP objectives
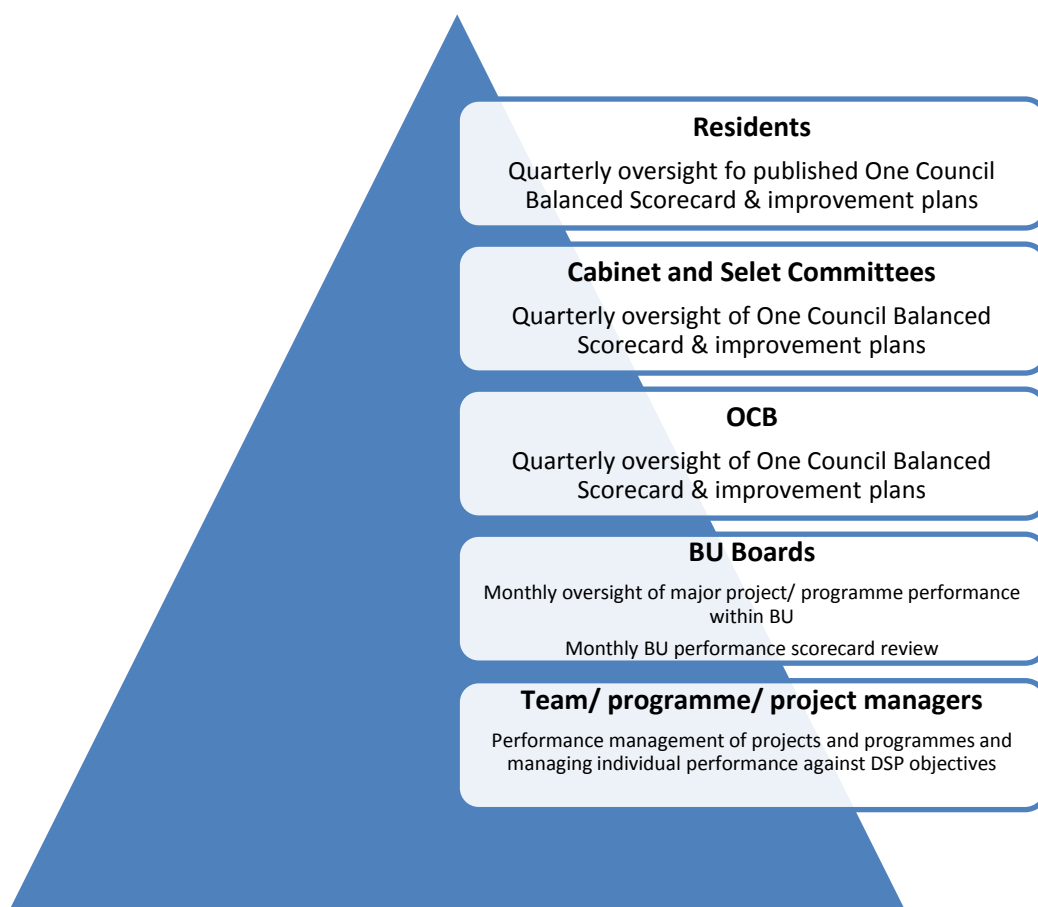
Figure 5: Governance structure for One Council Performance Management

7.1.4. One Council performance planning process

A One Council Performance Plan will be developed to sit alongside the Strategic Plan. The main purpose of the document is to set out our performance indicators against Level 1 and 2 outcomes – to assure Cabinet they will receive the info they need to oversee performance against these.

The performance plan will be refreshed on an annual basis during January to March. The refresh will be co-ordinated by the HQ BI team, in close collaboration with BU's. The business plan will be

submitted to OCB for approval before the start of every new financial year. Targets and tolerances will be agreed during this process, but there will be flexibility to reconsider these in-year where a solid case for this agreed by OCB.

The annual review of indicators will enable new challenges and priorities for the Council to be reflected in the performance plan. Key level 1 and 2 indicators associated with the Level 1 and 2 outcomes in the Strategic Plan must be retained for the whole Strategic Plan period.

7.1.5. Reporting

Our aim is to establish the most efficient reporting framework possible. This will be achieved by:

1) Scorecard automation programme (discussed above)
2) Drill down (enable more interrogation of data to better understand performance)
3) One performance and improvement pack for OCB and Cabinet
4) Aligning level 1, 2 and 3 indicators where possible
5) Using systems to structure and strengthen performance reporting framework

Figure 4 above shows the One Council performance reporting process with responsibilities and timescales.

BU Boards

Level 3 indicators are reported to BU Boards/ Leadership Teams. BU's design their reporting variously according to needs. Most report performance information monthly to their BU Board. Contract management and service delivery monitoring underpins most of these reports

Each BU has a distinct performance framework developed and delivered in accordance with BU requirements. Within each BU, performance information is reported via a (set of) scorecard(s) through tiers of management which may include any or all of: Operational Managers, Heads of Service, Service Directors, the BU Managing Director and/or the relevant Cabinet Member(s).

Cabinet and OCB

The OCPIM pack will be submitted to OCB every quarter for sign-off before being taken to Cabinet. It will contain measures enabling the tracking of performance against the Strategic Plan, as well as others capturing organisational effectiveness and new/ emerging challenges and opportunities. Figure 6 below shows the OCPIM reporting process with responsibilities.

The OCPIM pack will consist of:

- Balanced scorecard – presenting performance across 4 quadrants:
    - o Managing Resources – value for money
    - o Service to Customers – customer service experience
    - o Business Improvement – quality of services
    - o Colleagues, Self and Partners – workforce and leadership
- Summary of areas of key good performance, and areas where performance is lower than expected
- Insight report – presenting 'deep dive' insight around exception-areas of performance

- Improvement plans – developed by BU's, these plans will be produced for all red/ amber indicators, mapping expected trajectory of improvement and planned actions to achieve this. Actions for each plan will be monitored at OCB.
- Appendix – list of results for all corporate PIs

Scrutiny

Improvement plans will be the key focus for Scrutiny. Lead Members and Directors who own new improvement plans, or those where the expected trajectory of improvement is not met, will be invited to present them to the Finance, Performance and Resources Select Committee, enabling this committee to assure the improvement process.

7.1.6. Methodology statements

Methodology statements will be completed for all Level 1 and 2 indicators, providing assurance around definition, data quality, capture and storage, target setting and ownership.

7.1.7. Roles and responsibilities

Service Directors

Service Directors co-own (with their Lead Member) the indicators, targets and tolerances within the One Council Performance Plan that are relevant to their service, and are responsible for refreshing these during the annual performance planning process (with support from the BI Team, and in collaboration with Lead Members). Directors are also responsible for delivering any improvement plans relevant to their service, for assuring their indicators, commentaries and improvement plans are reported in a timely and robust way, and for briefing their Lead Members as appropriate.

Directors are accountable to Lead Members, Cabinet and Scrutiny for performance against their indicators, and the delivery of any improvement plans they own.
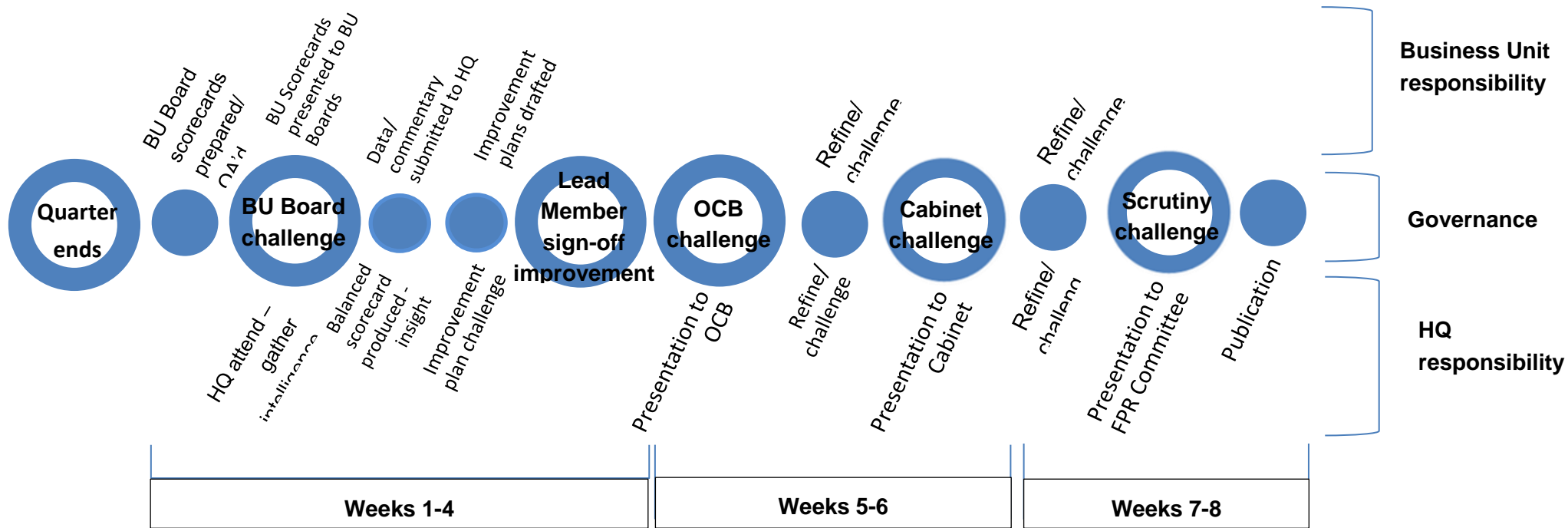
Cabinet

Cabinet Members own the indicators, targets and tolerances within the One Council Business Plan that are relevant to their portfolio. Members are responsible for signing off refreshed indicators, targets and tolerances during the annual performance planning process, and for signing off any improvement plans developed against their red/ amber indicators.

Members are accountable to Cabinet and Scrutiny for performance against their portfolio indicators, and the delivery of any improvement plans they own.

It is the responsibility of Cabinet to hold Service Directors and Lead Members accountable for performance against their indicators and the delivery of any improvement plans they own.

Figure 6: One Council Quarterly Performance and Improvement Pack - reporting process

Business Unit responsibility

Governance

HQ responsibility

Quarter ends

BU Board scorecards prepared/QA'd

BU Scorecards presented to BU Boards

Data/ commentary submitted to HQ

Improvement plans drafted

HQ attend – gather intelligence

Balanced scorecard produced – insight

Improvement plan challenge

BU Board challenge

Lead Member sign-off improvement

OCB challenge

Presentation to OCB

Refine/ challenge

Refine/ challenge

Cabinet challenge

Presentation to Cabinet

Refine/ challenge

Refine/ challenge

Scrutiny challenge

Presentation to FPR Committee

Publication

Weeks 1-4

Weeks 5-6

Weeks 7-8

OCB

OCB is responsible for providing leadership in managing the performance of the organisation as a whole. OCB will consider the OCPIM pack on an exception basis each quarter and will be responsible for commissioning corrective action; and for accounting to Cabinet on the policy implications of performance. OCB will focus on actions they wish to take to drive improvement to services when considering performance.

Scrutiny

The Scrutiny function plays a crucial role in the new improvement-focused approach to performance management in Bucks. We will look to negotiate for the Finance, Performance and Resources Select Committee Scrutiny Committee to review the improvement plans every quarter, and hold Cabinet Members and Service Directors to account for their delivery.

It is hoped that the Select Committee would also use the end-of-year report to feed into the Scrutiny work programme for the following year.

BU BI teams

The Council now has one BI division, which sits within HQ. The unit consists of BI teams within CHASC, CSCL, TEE, Public Health and HQ. These teams focus on meeting the BI needs of their BU, as well as contributing to cross-cutting insight programmes.

The BU BI teams will support the definition of indicators, targets and tolerances (in line with the annual performance planning process/ timescales) for their BU Board Scorecard, and indicators in the One Council Balanced Scorecard, relevant to their BU. They will also be responsible for collating One Council data, commentaries and improvement plans for their BU every quarter, and ensuring these are signed off by the relevant Directors before reporting them to the HQ BI team according to the timescales set at the beginning of the year.

BU BI teams will work with the HQ team to develop deeper insight around the drivers of performance issues in their BU, including facilitating access to 'softer' intelligence around performance (for example ensuring the HQ team are invited to BU Board and any other meetings where performance is discussed). This intelligence will feed into the insight report element of the quarterly OCPIM pack.

HQ BI team

The HQ BI team are responsible for co-ordinating the annual One Council Performance Planning process, and the quarterly OCPIM packs, in collaboration with BU BI teams.

The HQ team will provide a 'critical friend' service offering supportive challenge around the definition of indicators/ targets, and quarterly data, commentaries and improvement plans – before they are submitted for scrutiny by OCB, Cabinet and Finance, Performance and Resources Select Committee Scrutiny Committee.

HQ will be responsible for gathering and developing intelligence and insight around the performance information, working with BU BI Leads, to help develop understandings of the

drivers and wider impacts of performance. HQ will present this insight back, along with the main scorecard to OCB and Cabinet.

HQ will also co-ordinate a quarterly performance network meeting, bringing together colleagues from across the Council with performance reporting responsibilities/ interests. This network will be used to communicate process/ timescales and supporting guidance around performance planning and quarterly reporting, as well as update on the development of the automation programme, and external trends/ advancements in performance management.

7.1.8. Supporting materials – to be developed

- Timetable for data submission/ report production and publication
- Template for improvement plan
- Process map for improvement plan – when do they need to be produced/ refreshed
- Guidance for indicator, target and tolerance setting
- Template for methodology statements
- Guidance for annual corporate performance planning process with timescales
- Guidance for commentary/ narrative
- Performance network terms of reference
- Template to capture summary of key performance issues/good areas of performance for the organisation to 'know' at any point

8. Benchmarking

Benchmarking data provides context and comparison and is a key tool for performance management, commissioning, financial and contract management. Bench-marking should also inform decision-making by senior managers and members.

Historically bench-marking has been carried out in a piecemeal way across BUs. We are shaping a new unified approach (see fig. 7 below) to prioritising and managing bench-marking returns to ensure we are focusing our capacity, assuring data quality, and maximising the value of the output.
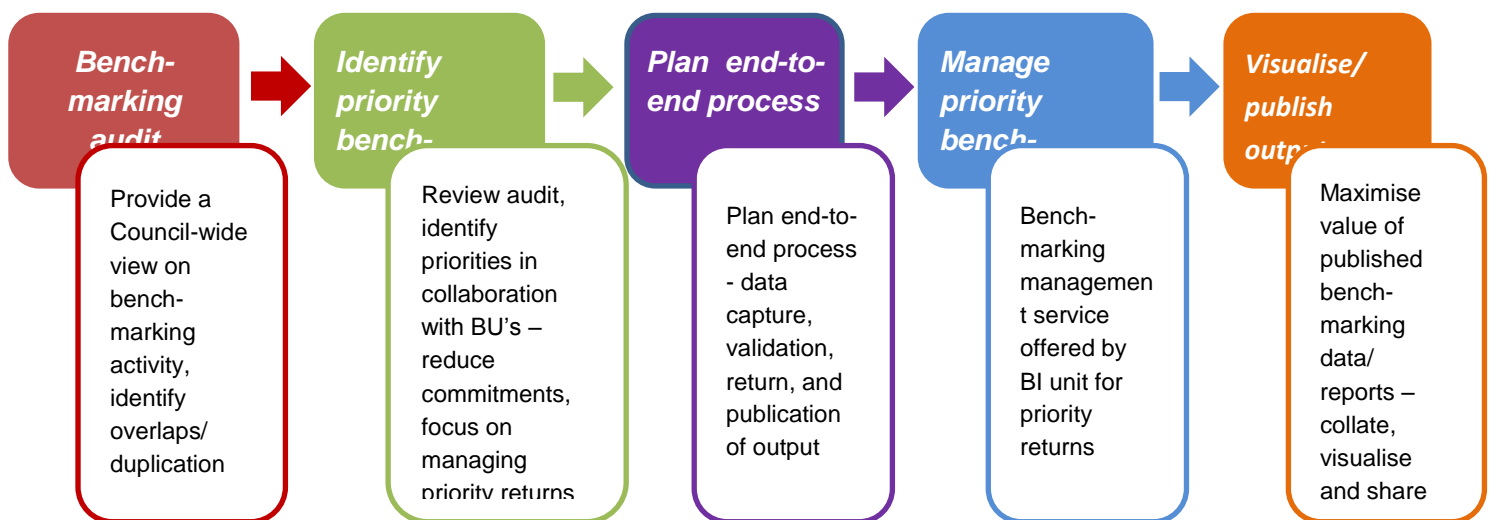

Bench-marking audit — Provide a Council-wide view on bench-marking activity, identify overlaps/ duplication

Identify priority bench- — Review audit, identify priorities in collaboration with BU's – reduce commitments, focus on managing priority returns

Plan end-to-end process — Plan end-to-end process - data capture, validation, return, and publication of output

Manage priority bench- — Bench-marking management service offered by BI unit for priority returns

Visualise/ publish outpu — Maximise value of published bench-marking data/ reports – collate, visualise and share

Figure 7 – bench-marking review process

Benchmarking is used in a number of key ways across the organisation:

- **Financial planning** – to identify areas where unit costs are higher than others to help understand if services could be delivered more cost effectively e.g. within the MTFP
- **HQ Performance** – to help show the councils overall position compared to other Las
- **Service performance** – to help understand if services are operating effectively by showing where performance is higher or lower than other LAs and understanding possible reasons for this (e.g. better practice, higher budgets, staffing mix etc), or what levels of demand may be appropriate for services.

To aid this analysis 'performance groups' are required to compare BCC with similar LAs where performance should be comparable. In addition performance is often summarised from national returns which can be between 1-2 years behind the current position, which informs a general position, but in some cases where more up-to-date information is required (e.g. as there is a focus on improving performance in an area) or where sharing information on how services are delivered from LAs who are performing well may be beneficial to help identify where services can be improved then benchmarking clubs (often linked to Policy Groups) are attended e.g. Association Directors of Adults Social Services (ADASS), Association Directors Children's Services (ADCS) etc.

9. Data Quality

To fulfil the Council's commitment to provide value for money services, we need to be confident that decisions are based on high quality information. All staff are responsible for maintaining complete, accurate and timely records. The Data Quality Strategy is focused on five key components (below) and provides assurance to members, partners and other stakeholders that the quality of data is reliable and sustainable:

- Governance for and accountability of data quality
- Policies and procedures in place for data recording and reporting
- Systems and processes in place to secure data quality
- Knowledge, skills and capacity of staff to achieve data quality objectives
- Arrangements and controls in place for the use of data

10.1 Cross-cutting data quality programme

The BI team is delivering a new cross-cutting data quality programme which is identifying key datasets and information in the organisation used to inform key decisions and to enable the efficient and effective operation of services, including these key types of information

- PIs/Performance Data
- Information/data that drives funding decisions (including statutory returns)
- Financial information (including different sources of similar information e.g. invoices v's client records)
- Operationally critical data/information
  - Within BCC e.g. within a service or cross-service

- o   With partners
- Benchmarking (including statutory returns)
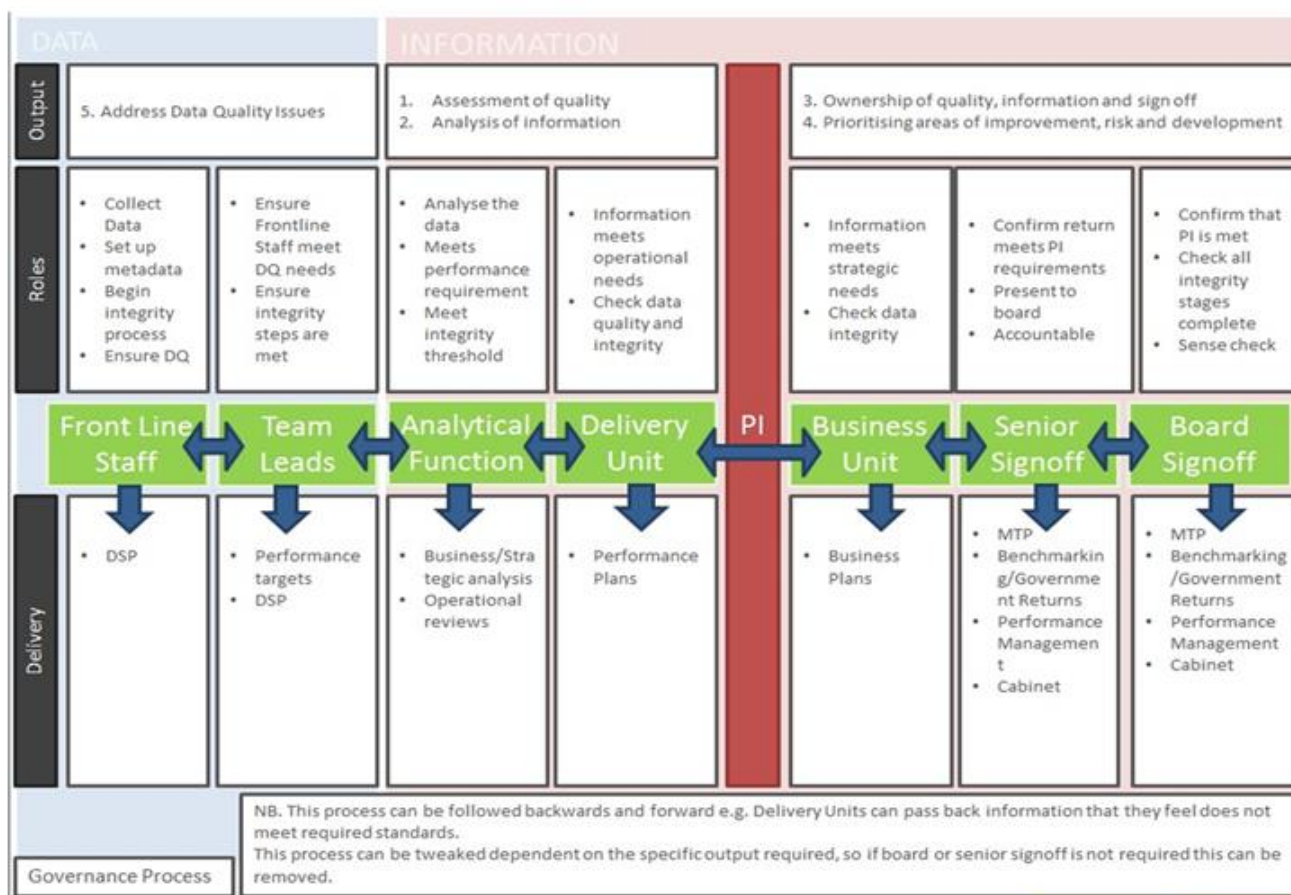- Other datasets as appropriate

Figure 8 – Bucks data quality model

Figure 8 above shows how the council will ensure that the quality of data is appropriate in the above areas by:

1) **Assessing the quality of data** – at data analysis stage an assessment of the quality of the dataset will be made by the teams responsible for analysing or summarising data into information (e.g. BI or finance teams)
2) **Analysing the information** – it will be clear who is responsible for analysing data and turning it into information, how they check results and work with service managers to understand what it means for services
3) **Interpretation and sign off** – clear responsibilities will be in place that give ownership and responsibility of understanding what the results mean for services to managers. This will ensure that information is seen at appropriate levels before decisions are made on it (e.g. in some cases this will mean operational managers, service managers, senior managers, members) and that information is 'signed off' for use where appropriate.
4) **Data Quality improvements** – this structure and clarity of responsibly will enable oversight of the quality of the data, where an assessment of 'risk' associated with the quality of the

key data can be created. Key data and information with a high quality risk can be discussed with Information Governance managers and the CID board to identify where improvements need to be made. In some cases this may mean working with operational teams to improve the quality of base datasets (requiring operational time and hence senior management direction to improve quality), in others this may mean helping improve analysis or interpretation/sign off responsibilities.

10. Customer Feedback

The Council encourages feedback from service users and residents– both positive and negative. Complaints are taken very seriously and clear processes are in place for managing them. They provide a simple way for users and residents to voice concerns about services, and give valuable feedback on how the Council is performing. By effectively resolving complaints, services can be improved.

The Council introduced a new two stage corporate complaints process in February 2016, providing assurance that complaints are dealt with efficiently and effectively:

- Stage 1 – complaints are investigated by a senior manager in the service (i.e. Head of Service) and a response provided within 28 calendar days of receipt

- Stage 2 – if complainants are not happy with the outcome after Stage 1, they can ask for their complaint to be referred to the Council's Deputy Monitoring Officer for review.
- The Local Government Ombudsman is a free and independent service available to support customers with complaints if they are not satisfied with the outcome.

There are two additional complaint procedures: one for dealing with Specialist Children's Services complaints and the other for Adult Social Care complaints. Both procedures have their own timescales and rules. However all complaints, irrespective of which procedure is used, are reported quarterly to relevant Boards and an Annual Report is prepared. Information on complaints is also included in the quarterly Performance Report to Cabinet. This report framework provides assurance to senior managers and members on the effectiveness of the process and confidence that action is being taken.

11. Public Scrutiny

The Council has a duty to inform, consult and involve local people. With less reliance on top down prescription and more focus on the co-design of services with customers, local residents are at the centre of the Council's business now more than ever.

Benefits of involving the public:

- **Better services** – by consulting and engaging with service users the Council is more able to effectively target and tailor services to those in most need

- **Better outcomes** - service users and local people often have detailed experiences and knowledge of local issues, which can prove invaluable in redesigning services. By enabling people to be involved in local decisions they are more likely to be satisfied with services

- **Strengthening social capital** – when local people and service users feel they are involved in planning, delivering and assessing services they feel stronger ties with and a commitment to the local community

Not everyone wants to be directly involved in decision-making but most people will want to be kept informed. The provision of good quality and easy to understand information aimed at service users and the public is valuable for keeping people up-to-date.

The Council uses different techniques and methods to keep people informed, for example:

- Council website
- Social media
- Enewsletters
- Webcasting of Cabinet, Council and Select Committee meetings
- Media coverage (print, broadcast and online)
- Communications campaigns targeted to relevant audiences

Through the Government's transparency agenda, more information is being made available to the public online, so that local services can be held to account. This includes expenditure, grants and payments to the voluntary, community and social enterprise sectors, senior salaries, councillor allowances and expenses, contracts and tenders to businesses and the voluntary, community and social enterprise sectors, policies and democratic data. Performance information is also reported in an open and transparent way - customers can access Cabinet performance reports and decisions via the Council website.

12. Member Scrutiny

The overview and scrutiny function is a statutory power and duty. It enables non-executive members to hold the executive to account and review the effectiveness of policy and to influence the future direction of the Council and its partners.

There is no one right way to carry out scrutiny, and councils have adopted different approaches. However, there are some basic principles that set out what 'good scrutiny' looks like. The Centre for Public Scrutiny has set out four specific principles for scrutiny:

1. Provide a 'critical friend' challenge to the executive as well as external authorities and agencies
2. Reflect the voices and concerns of the public as users of services as well as electors
3. Take the lead and own the scrutiny process on behalf of the public. Members act as champions for effective scrutiny, actively promoting its status and credibility throughout the organisation and among external organisations
4. Make an impact on the delivery of public services – to do this effectively, members should develop an understanding of scrutiny's position within the corporate planning cycle, timing interventions to have maximum impact on key decisions such as budget setting and service planning

Scrutiny plays an important role in assuring the quality of services and contributing to the council's improvement journey by investigating performance, questioning the appropriateness of targets and adequacy of resources. Scrutiny is undertaken by 4 Select Committees:

- Finance, Performance and Resources
- Children's Social Care & Learning
- Transport, Environment & Communities
- Health & Adult Social Care

Each year the these Committees (see below) agree an indicative work programme for the year ahead. This is developed through research, through discussions with officers and Members, and members of the public are encouraged to suggest topics for scrutiny to investigate using an online form on the Council's website.

During any year, Select Committees will undertake scrutiny inquiries, which provide the opportunity to thoroughly investigate topics and make recommendations for improvement. This type of work enables more robust and effective challenge and leads to better decision-making. In-depth inquiries also help engage the public, and provide greater transparency and accountability.

Inquiry groups are set up for each review and have an agreed scope. Inquiries gather evidence from officers, representatives from partner agencies and service users as well as through different media, such as questionnaires, focus groups, site visits, reports and written submissions. . When an Inquiry Group has finished gathering evidence, its report is agreed by the relevant Select Committee, before being presented to to Cabinet to respond. Cabinet may decide whether to fully accept, partially accept or reject the recommendations. An update report, outlining progress made in implementing the accepted recommendations, is provided after six months and again after a year. This provides assurance to Members that improvements identified in the report are being implemented.

13. Internal Audit

The Accounts and Audit Regulations 2015 (S5) state that the Council must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance; these are defined as the Public Sector Internal Auditing Standards 2013.

The Public Sector Internal Auditing Standards defines internal auditing as:
"An independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes."

Under its Operating Framework, the Council is adopting a combined assurance model, with Internal Audit operating as the third line of assurance. The first line of assurance is achieved by the management controls and systems, and the second line of assurance from the professional leads monitoring the key governance systems.

To provide an opinion on the System of Internal Control, the Chief Internal Auditor will use the work undertaken by the Business Assurance Team:

- The Business Assurance Officers focus on the system of risk management, and the performance risks within the key services, including the development of Alternative Delivery Vehicles and major projects. It is also the responsibility of this team to co-ordinate the combined assurance reporting which includes monitoring and reviewing the completeness of the management control, (first line of assurance) and the professional lead statements, (second line of assurance).

- The Internal Audit team reviews the key control processes across the organisation, including those supporting critical service areas. The activity focusses on governance, and internal control, including financial management and fraud risk. As the third line of assurance, it is the role of Internal Audit to consider the adequacy and effectiveness of the first two lines of assurance.

14. Financial assurance

Finance is an underpinning theme throughout the Quality Assurance Framework. It is essential that financial resources are allocated appropriately to support the delivery of the desired outcomes. Finance needs to be considered at all stages of the Analyse, Plan, Do, Review & Revise cycle.

15.1 Medium Term Financial Plan (MTFP)

The initial stages of the development of the MTFP include an analysis of the financial environment to assess the likely available resources. Issues considered as part of this process include: The Governments approach to funding local government, inflation, demographic change, legislative change, deliverability of the current plans, etc.

The detailed financial plans are drawn up initially by individual Business Units. This should be done in conjunction with the development of the Commercial Plans and be consistent with those plans. These Business Unit and political portfolio plans are then consolidated to corporate level and subject to scrutiny by OCB, Cabinet and the Budget Scrutiny Committee before being submitted to Full Council for final approval. Additional quality assurance is provided by a statement from the S151 Officer, which in turn is supported by statements from each of the MDs.

15.2 Financial Records

From a financial perspective the Do phase of the cycle is delivered through the keeping of proper financial records. How the records are kept is defined by the financial processes adopted which are set out in Financial Procedures sitting under the Financial Regulations. Assurance on these processes is provided in the first instance by checks and balances built into the processes themselves. Further assurance is provided by regular Internal Audit

reviews of financial processes and the external audit of our Statement of Accounts provides a further level of assurance still.

15.3 Budget Monitoring

Progress against financial plans is Reviewed on an on-going basis throughout the year with regular reporting provided to BU Boards, OCB and Cabinet. Where the budget monitoring reports indicate that the actual position is diverging from the Plan, Business Units are required to develop action plans and to then monitor progress against the Revised plans. When reviewing and revising financial plans it is important to have regard to the impact of any changes on the service outcomes.

15. Self-Assessment, Peer Review and Inspection

There are regular statutory inspections of adult and children's social care by the Care Quality Commission, education by OFSTED, youth offending by HM Inspectorate of Probation and financial probity by the Audit Commission. Since the abolition of the national performance framework, there is also renewed emphasis on councils being able to evaluate the effectiveness of their own performance through self-assessment and peer review.

16. Learning

The revise stage of the cycle is about learning to change what we do, as a result of review. It can involve formal "lessons learned" activities, staff development and/or training or changing the way services are delivered to ensure a continued focus on Council priorities and value for money.

Staff learning and development needs are identified in a variety of ways, including through the Delivering Successful Performance process. New skills can be developed by attending formal training courses and though informal learning opportunities such as reading, coaching, mentoring, shadowing and secondments. By actively encouraging staff to participate in learning, performance can be improved.