



Doncaster Council

Report

Date: 27th October 2022

To: To the Chair and Members of the Audit Committee

Report Title: Performance Management Framework

Relevant Cabinet Member(s)	Wards Affected	Key Decision?
Cllr Jane Nightingale	All	Yes

EXECUTIVE SUMMARY

1. This report serves to present the revised Performance Management Framework. A robust Performance Management Framework (PMF) will ensure that all the key components are in place across the organisation, ensuring both good governance and successful delivery of our key priorities.
2. The PMF is the Statement of Implementation that outlines the mechanisms by which the council will manage, monitor and govern key activities that contribute to the successful delivery of the Corporate Plan, the Councils contribution to Doncaster Delivering Together.
3. The Audit Committee has a role “to monitor the effective development and operation of risk management in the council” and the Risk Management is a key element of the PMF.

EXEMPT REPORT

4. This report is not exempt

RECOMMENDATIONS

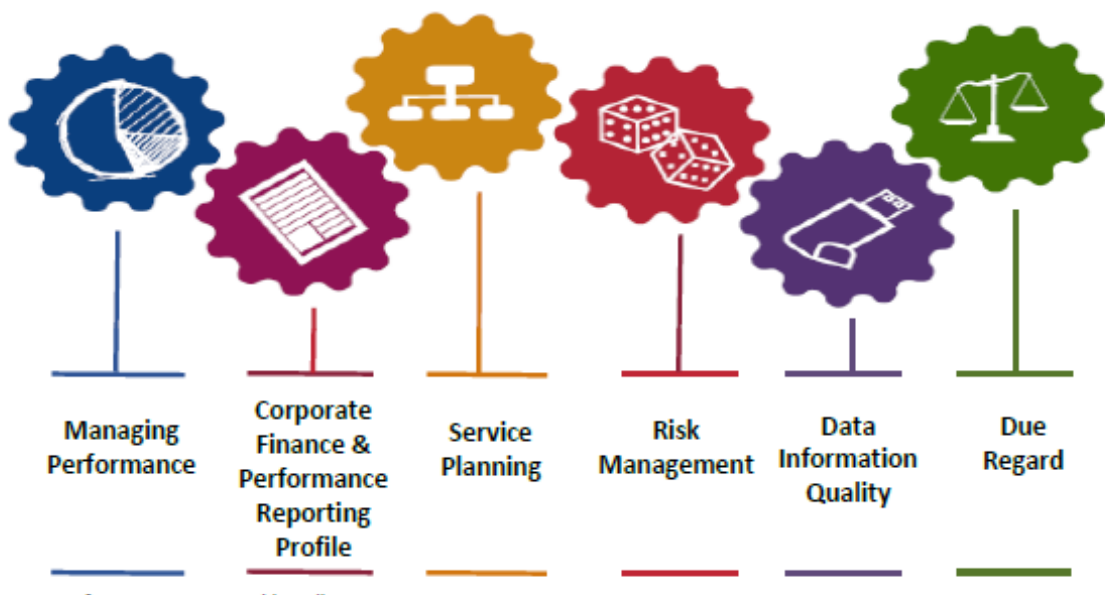
5. That the Chair and members of the Audit Committee note the revisions to the Performance Management Framework:

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

6. The embedding of robust risk management arrangements within the Council incorporating the management of strategic risks creates an environment in which we can successfully meet our objectives to deliver Doncaster’s priorities and the Mayoral Priorities Outcome Framework.

BACKGROUND

7. In September 2021, our new borough strategy ‘Doncaster Delivering Together’ (DDT) was launched. This included a new set of Wellbeing Goals, which highlights six long-term strategic goals for the borough. Moreover, in February 2022 we agreed a new Corporate Plan outlining what will be delivered and how we align to Doncaster Delivering Together.
8. The PMF is the mechanism by which we ensure we have the means to assess our progress of the Corporate Plan and ensure clear governance of our work. The PMF was last refreshed in 2019 but a light review was carried out in 2020 to ensure it remained fit for purpose during the challenging times of the pandemic.
9. The PMF brings together six key standalone elements of governance under one strategic umbrella. Together these documents ensures individuals, teams and the council overall have clear guidance and systems in place. It shows what we should be doing, how we should be doing it and outlines key responsibilities for delivery.
10. The PMF Overview Diagram below sets out the structure and purpose and the documents that make up the PMF.



11. The following improvements have been made to the 6 key elements that make up the PMF:
 - **Managing our Performance** – sets out the ‘golden thread’ and governance flow to deliver the Corporate Plan. The Golden Thread diagram has been updated to

allow for the additional focus on locality plans and has been included in the Corporate Plan 22-23.

- **Corporate Finance & Performance Reporting Profile** - . This process provides the rigour, through challenge and assurance, to evidence that we are continually monitoring, reviewing and improving. For 2022-23 the performance narrative will be structured around the Great 8 priorities and a Regenerative Council theme. A detailed report production process has been included that outlines all the production stages and details those responsible and the outputs. A Clear mechanism to instigate a 'service review' (if needed) has been added.
- **Service Planning** - The council's priorities are clearly set out in the Corporate Plan. It is acknowledged that there will be other priorities that are of importance to the Directorate that are not at a Strategic level and these outcomes will also be captured and managed/monitored via individual Head of Service Plans. The production of the Head of Service plans has been streamlined to ensure there is no duplication and information is captured in one place once a quarter and used for many purposes. The use of Pentana will continue to be embedded across directorates;
- **Risk Management Strategy** - Our Risk Management Strategy is designed to provide structure and guidance to support our organisation, and the individuals within it, to take risks in an informed way. It gives clear direction to allow the approach to be consistent across the organisation. The council approach to risk management has been reviewed to ensure it continues to reflect the revisions to the HM Orange Book on Risk Management and no major changes were required;
- **Data Information Quality Policy** - Sets out the principles of data quality and how we intend to improve the quality of information throughout the council. This will help to improve services and support the delivery of the priorities within the Borough Strategy and the Corporate Plan. The Data Quality Strategy was reviewed in January 2020. As part of the PMF review a very light refresh took place and It has been branded in line with the other PMF Elements;
- **Due Regard Statements** - As part of our commitment to ensure the decisions we make take account of the variety of diverse backgrounds living, working and visiting the Borough, this document highlights the corporate process for evidencing 'Due Regard'. This is an area that has had a major overhaul to ensure consistency in approach and to ensure that when the council takes a decision, it knows who is affected and has taken reasonable mitigating action to ensure its impact is as equitable as possible. A three stage interactive process has been developed that will be included in all Cabinet reports that require a decision to be made. The Due Regard Statement will be uploaded on the Council's Internet.

• OPTIONS CONSIDERED









12. Not applicable

REASONS FOR RECOMMENDED OPTION

13. Not applicable

IMPACT ON THE COUNCIL'S KEY OUTCOMES

14.

Great 8 Priority	Positive Overall	Mix of Positive & Negative	Trade-offs to consider – Negative overall	Neutral or No implications
 Tackling Climate Change				✓
Comments: Improves corporate governance				
 Developing the skills to thrive in life and in work				✓
Comments: Improves corporate governance				
 Making Doncaster the best place to do business and create good jobs				✓
Comments: Improves corporate governance				
 Building opportunities for healthier, happier and longer lives for all				✓
Comments: Improves corporate governance				
 Creating safer, stronger, greener and cleaner communities where everyone belongs				✓
Comments: Improves corporate governance				
 Nurturing a child and family-friendly borough				✓
Comments: Improves corporate governance				
 Building Transport and digital connections fit for the future				✓
Comments: Improves corporate governance				
 Promoting the borough and its cultural, sporting, and heritage opportunities				✓
Comments: Improves corporate governance				
Fair & Inclusive	✓			
Comments: The improvements to the Due Regard Statements will ensure decisions continue to be made based on accurate data, up to date information and in consultation with the appropriate communities.				

Legal Implications [Officer Initials: SF | Date: 17/02/22]

15. There are no specific legal implications arising from this report.

Financial Implications [Officer Initials: MS | Date: 17/10/22]

16. There are no direct financial implications to the Audit Committee noting the revisions to the performance management framework. A robust performance management framework is important in ensuring the Councils limited resources and used efficiently.

Human Resources Implications [Officer Initials: KG | Date: 17/02/22]

17. There are no specific human resource implications associated with this report

Technology Implications [Officer Initials: PW | Date: 17/10/22]

18. There are no direct technology implications in relation to this report.

RISKS AND ASSUMPTIONS

12. Consideration of the effective development and operation of performance and governance within the Council is an important process which helps to reduce risks that could prevent or delay delivery of objectives.

CONSULTATION

19. Consultation has taken place with Directors and Executive Board as part of the review of the Performance Management Framework.

BACKGROUND PAPERS

20. Not applicable

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

21. PMF – Performance Management Framework
DDT – Doncaster Delivering Together

REPORT AUTHOR & CONTRIBUTORS

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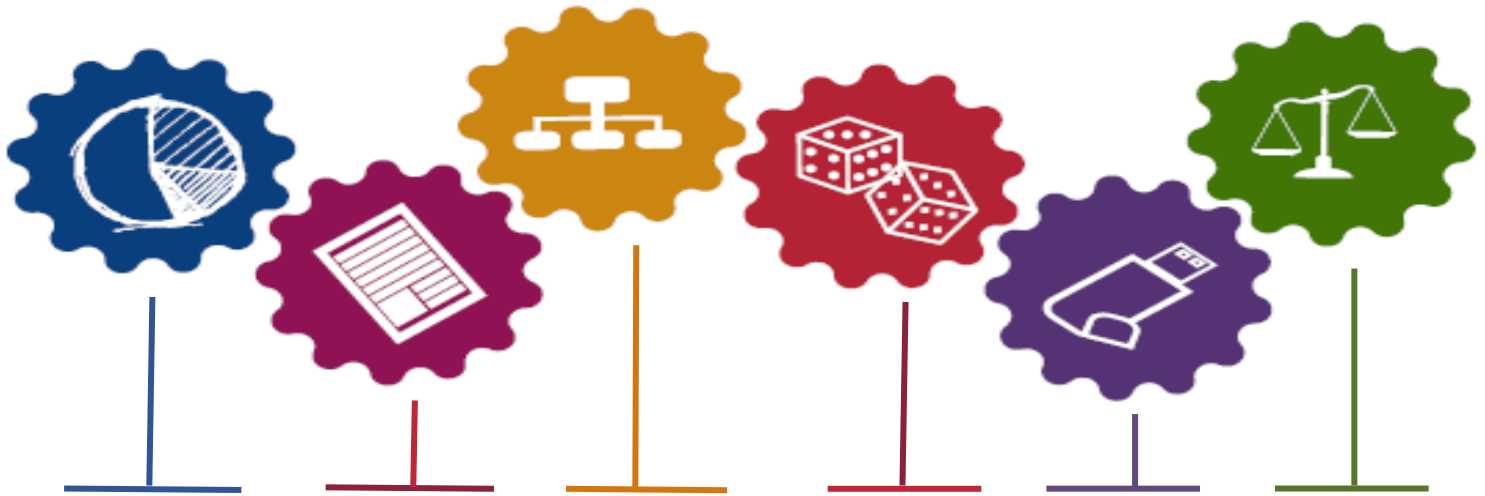
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Director of Corporate Resources

PERFORMANCE MANAGEMENT FRAMEWORK

The PMF is the Statement of Implementation that outlines the mechanisms by which the council will manage, monitor and govern key activities that contribute to the successful delivery of the Corporate Plan.



Managing Performance

Performance management is used to continually improve the services the Council delivers and the way they are delivered, learning from experiences, from others and listening to customer needs.

Managing Performance Strategy

Corporate Finance & Performance Reporting Profile

This outlines the corporate finance and performance reporting cycle the Council priorities. It provides the rigour, through challenge and assurance, to evidence that we are continually monitoring, reviewing and improving.

Corporate Finance & Performance Reporting Profile
Corporate Finance & Performance Reporting Profile Toolkit

Service Planning

This is process by which we deliver the service level element of the Golden Thread. It captures all the key activity managed at a Head of Service level, both programme/ project management and business as usual.

Service Planning Strategy

Risk Management

The process of embedding RM within our planning, business processes and culture, creating an environment in which we can successfully meet our objectives and achieve continuous improvement in service delivery.

Risk Management Strategy
Risk Management Toolkit

Data Information Quality

Setting out the principles of data quality and how we intend to improve the quality of information throughout the council to support the delivery of the priorities within the Borough Strategy and the Corporate Plan

Data Information Quality Policy

Due Regard

As part of our commitment to celebrating EDI and promoting good relations between our diverse communities this highlights the corporate process for evidencing 'Due Regard'

Due Regard Strategy
Due Regard Toolkit

PURPOSE

DOCUMENTS



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MANAGING PERFORMANCE

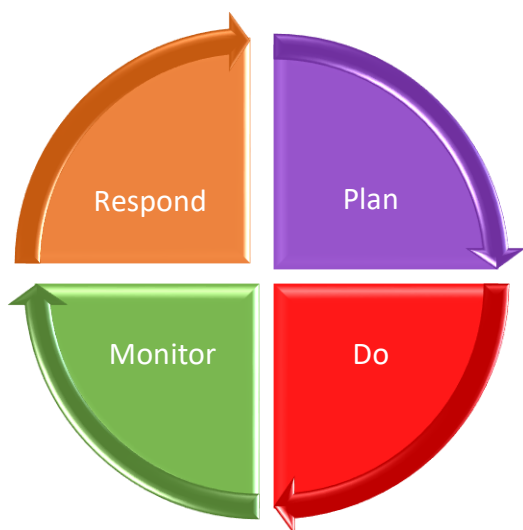


Performing well is fundamental to improving the services that we provide to the people of Doncaster and to the successful delivery of agreed Council priorities.

This Strategy forms part of a suite of documents, that when combined, make up the Corporate Performance Management Framework.

This framework:

- Aims to assist Senior Managers, Staff and Councillors to understand the key components that contribute to effective performance as well as providing a corporate approach for the Council.
- Focuses on the Council's key objectives, ensuring the right actions underpin their delivery as well as robust measures that evidence progress and to ultimately achieve our Outcomes.
- Is used to continually improve the services the Council delivers and the way they are delivered, learning from experiences, from others, developing our workforce and listening to customer needs.
- Pulls together partnership contribution to our borough wide priorities within 'Doncaster Growing Together'. Setting out both the governance arrangements and the information flow.



PLAN

We need to plan our activities and concentrate on how we will deliver real improvements. When we have decided on what actions we need to carry out, they should be prioritised and the resources that are needed identified. When planning an activity you should answer the following key questions:

What is the story behind the baseline...

- What is the real issue?
- Where are we now/what is our current position?
- Where do we want to get to?
- How do we get there/what do we need to do?

The processes that we use to “plan” include: developing objectives as part of the Corporate Plan and Heads of Service Plans; budget setting; addressing inspection and audit recommendations; completing personal development reviews (PDRs) as part of the workforce strategy.

It is good practice to include staff at this ‘plan’ stage as this initial identification stage can aid motivation, staff development and support needs, ownership and also provides focus that is owned and understood by the individuals who will be tasked to deliver.



DO

This is service delivery - the so-called “Day Job” that we spend most of our time on. Staff should be supported to help them develop and perform well. However, everyone should look for ways to improve the quality and efficiency of the service they deliver so that we are constantly striving to improve and to achieve Value for Money. This stage includes the giving and receiving of feedback, having the

right skills and behaviours as well as measuring service performance.



MONITOR

To improve services we need to measure how services are performing. Performance monitoring is part of the “Day Job” to ensure we deliver good, quality services. The focus should be on measuring what matters and the recording of good quality data. We use many data and case management systems, but the shared partnership performance management system is called **Pentana** and this is used corporately to monitor our main priorities. The Pentana System is used to monitor our key strategic plans such as Doncaster Delivering Together (DDT), our Corporate Plan, Workforce Strategy, Head of Service Plans and our Strategic Risks.

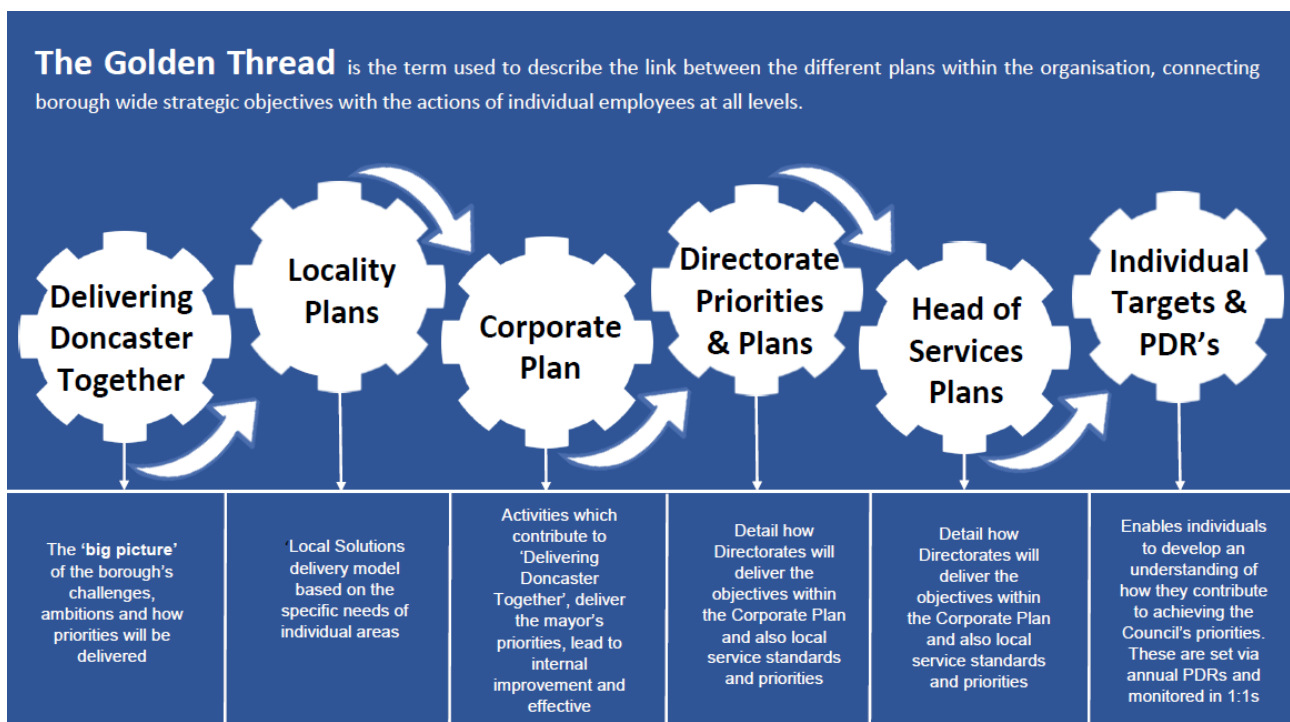
The processes we use to “monitor” performance include: 1 to 1 supervision and PDRs; customer feedback; Directorate challenge meetings; Programme Assurance Boards.

RESPOND

Assessing the impact we have and the outcomes we achieve will help us to recognise good performance and areas for improvement. This will help retain motivation and ensure focus remains on the right and appropriate activity. If services are not performing well it is important to identify the reasons why and to learn how to stop it happening again. The actions that were planned may have to be revised to ensure that we achieve our targets, deliver our objectives, and achieve our outcomes.

We “respond” by: reviewing existing actions and resources; taking improvement action; escalating issues through the governance structure.

‘Golden Thread’. The Golden Thread is the term used to describe the link between the different plans within the organisation, connecting borough wide strategic objectives with the actions of individual employees at all levels.





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CORPORATE FINANCE & PERFORMANCE REPORTING PROFILE



The Purpose of this Report

The Corporate Finance and Performance report (report) is an overview of the Councils performance against the strategic objectives set out in the Corporate Plan. It clearly shows:

- what we are measuring
- progress against these measures
- current and proposed activity
- expected outcomes

The report also provides the Council the flexibility to highlight additional areas of focus as and when required.

This reporting profile forms part of a suite of documents, that when combined, make up the Corporate Performance Management Framework.

Report Content

Executive Summary

A high level summary that sets the narrative for the performance and financial landscape for the quarter and pulls out the key headlines contained within the report.

What does this mean for the citizens of Doncaster?

Each Directorate outlines their commitments and performance measures to contribute to the delivery of the Great 8.



Tackling Climate Change



Developing the skills to thrive in life & work



Making Doncaster the best place to do business & create good jobs



Building opportunities for healthier, happier & longer lives for all



Creating safer, stronger, greener & cleaner communities where everyone



Nurturing a child & family-friendly borough everyone belongs



Building transport & digital connections fit for the future



Promoting the borough & its cultural, sporting & heritage opportunities

A key suite of performance measures are chosen from the Corporate Plan that highlights to our communities our overall priorities for the coming year. These measures are referred to as **'service standards'** and they inform the content of the performance element of our quarterly report. Our service standards show how we are delivering against our outward facing priorities.

We also have a number of inward facing priorities that measures the health of our directorates from a governance perspective. These are referred to as **'governance standards'** and these are reported within the Connect Council section of the report that has a focus on our internal activity.

The purpose of this section is to

- Communicate how we are performing against our key priorities measured against our targets
- Provide narrative on the current position of our performance
- Provide narrative on how we plan to maintain/improve performance
- Evidence achievements

Programmes & Projects

The delivery of key programmes and projects help to deliver the corporate plan. There is a comprehensive reporting process through to individual project and programme boards.

For transparency and accountability a high level update on the Councils progress against its programmes and projects is included in the report

Additional areas of focus

This section of the report gives the Council the flexibility to include updates on areas of performance that are out-side the remit of the Corporate Plan.

Financial Position

For each Directorate income and expenditure is projected for the year and then compared to the budget. Significant variances between budgets and projections are discussed in the report. This enables Cabinet members and senior management to make decisions about reducing overspends and utilising underspends. The report covers the general fund revenue budget, collection fund, housing revenue account and capital programme.

Report Production timeline 2022/23

The report is also used to seek approvals where required by the Council’s governance framework (for example, changes to the budget).

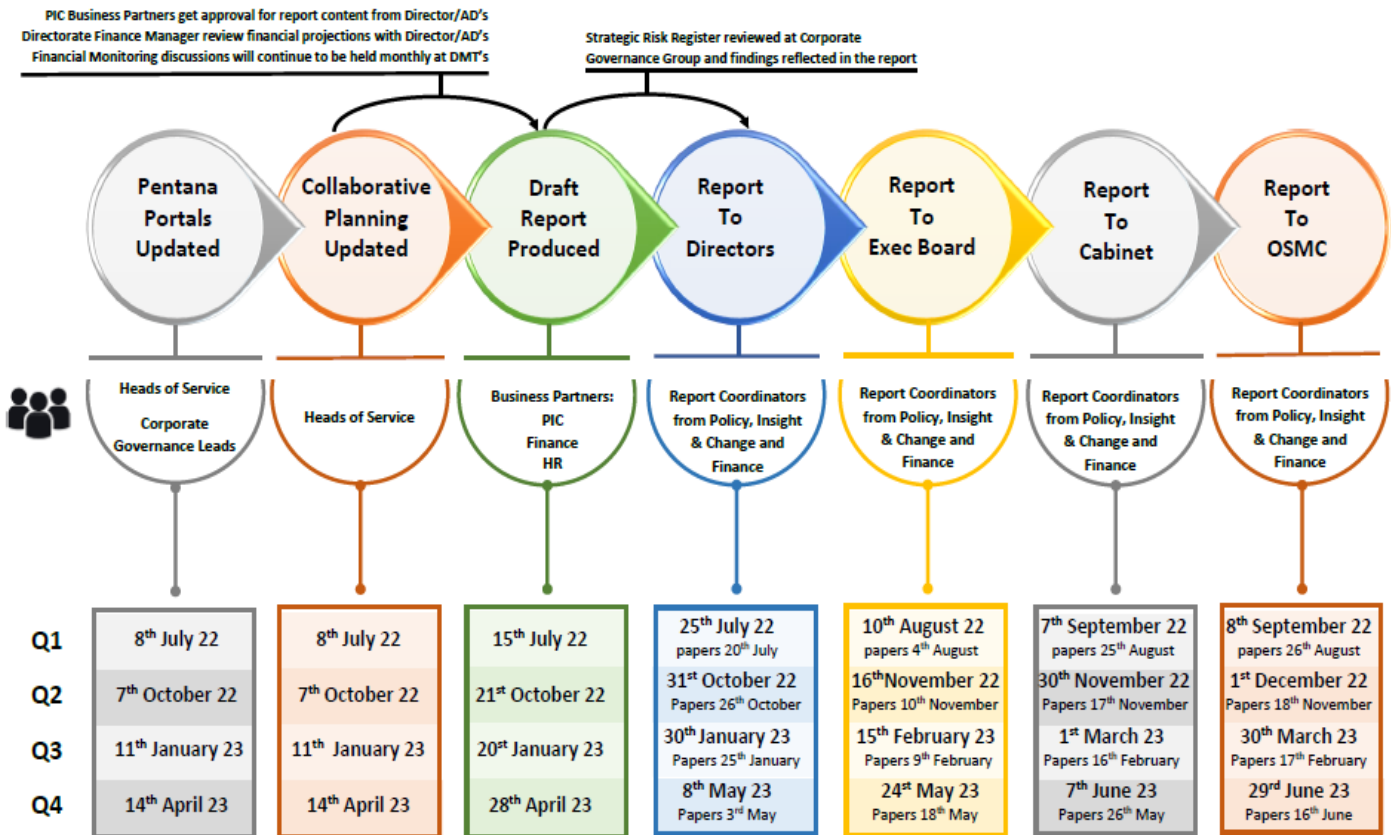
Workforce Position

For each Directorate an overview of key workforce profiles, measures and performance information is provided. This enables Cabinet members and senior management to make decisions about emerging trends and policy decisions to support, manage and develop our workforce.

Strategic Risks

The management of the Councils strategic risks is embedded in the corporate reporting process. The risks are reviewed alongside the service standards and governance indicators.

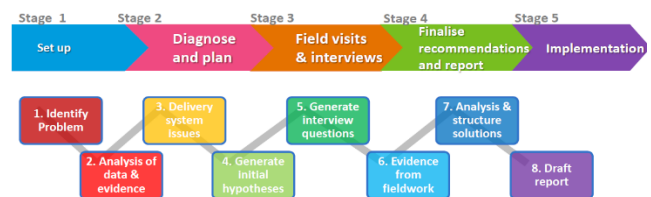
An update on how these risks are being managed, the identification of new risks and the demotion of closed risks is included in this



achieve outcomes. These will be categorised into three action levels;

- a) Action addressed in service area – No further action but to review in next quarterly cycle.
- b) Action addressed in service area with additional support identified – additional resources or support identified from outside of the service area but reported in next quarterly cycle
- c) Action addressed via a ‘Service Review’ – Working with the service additional capacity from the organisation will identify a team to work with the service to help accelerate understanding and improvements.

‘Service reviews’ will be agreed and signed off by Directors before being implemented. Various methods could be used but a suggested staged process is included as an example below.



Executive Board will receive updates on the action log and the areas that require a position statement as an escalation route and as an assurance to the system in previous levels. The Quarterly report is then present to Cabinet and Overview & Scrutiny Management Committee.

This process is well established and is constantly reviewed to ensure it remains fit for purpose. The complete process is outlined in Appendix A.

Report Production Process

In order for the council to publish this report in a timely manner the production process is extremely tight.

Directorate Resource meetings are held each quarter with the individual Directorate Senior Leadership Teams to review performance of our governance measures, key service standards, strategic risks, workforce and finances.

Policy, Insight and Change (PIC), HR and Finance teams will analyse the performance, highlighting areas of concern and areas of good performance for discussion and challenge with improvement actions identified. The Directorate Resource Meetings take place the week before the **Directors Resource Meeting** where all Directorate performance and finance is collated and centrally reported.

Improvement Issues and Escalation

One of the key parts of performance improvement is ensuring issues identified are ultimately resolved. This may take many forms including resource allocation, strategic buy in, collaboration or simply holding appropriate officers to account.

Issues that will hinder our progress towards the successful delivery of our outcomes will be flagged up on a regular basis from within the service, corporately or externally (inspections, peer reviews or partner observations). Some may be implemented, some ‘not yet implemented’ and others are potentially not possible. The basic premise is that an **Action Log** is created for the Directors Resources Meeting and monitored as part of the quarterly reporting cycle.

The recorded issues on the action log will be mainly dealt with within existing resources and service areas but we may need to wrap around service areas to realise improvements and



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SERVICE PLANNING



The council's priorities are clearly set out in the Corporate Plan and monitored via the Councils Quarterly Challenge process.

It is acknowledged that there will be other priorities that are of importance to the Directorate that are not at a Strategic level and these outcomes will be captured and managed/monitored via individual Service Plans, Service Plan and Team Plans.

Head of Service Plans will contain key strategic objectives taken directly from the Corporate Plan as well as other key priorities, these include:

Workforce priorities, Service Standards,; Strategic Risks; Directorate Objectives; Equality, Diversity and Inclusions Outcomes and; Identified Annual Governance Statement actions

These priorities will be formed from, and contribute to the corporate and service PDR objectives. However, please note that the Service plans should not contain 'day to day business'.

It is the responsibility of the Directorates to monitor the plans associated with their Directorates.

Directorates identify their priorities for the coming year

- Include priorities from the Corporate Plan & Workforce Strategy
- Include service and workforce priorities but not day to day tasks

Heads of Service complete the Service Plan Template

- Service plans are a mixture of actions, performance indicators and risks
- Service Plans do not need to contain all 3 elements – only add what is relevant
- Risk should be worked in-line with the corporate approach as outlines in the Risks Management Strategy

Email completed template to the Pentana in box
(pentana@doncaster.gov.uk)

The Policy, Insight & Change Team will:

- Upload your plan onto Pentana
- Create all the relevant scorecard, dashboards and reports
- Link your revised plan to the directorate portals
- Email you when your plan is ready

Head of Service Plans

The process for producing Heads of Services Plans, highlighted previously, may be used to produce Service/Team Plans. The only difference is that these plans can be managed on Pentana or within the service area via an alternative method.

The structure on Pentana will provide the flexibility for selected performance information to be extracted for different purposes – e.g. Portfolio Holder meetings, DLTs etc. supporting the ‘report once, use many times principle’.

All Head of Service plans will be monitored and maintained on Pentana. Monitoring and challenge of the Head of Service Plans will be via Directorate leadership meetings and Head of Service 1:1 reviews.

Activity	Date
Approval of reviewed PMF at Exec Board	23 rd March 2022
Send out Service Planning templates	Thurs/Fri 24/25th March 2022
Send dates for PMF Training	W/C 28 th March 2022
PMF Training dates commence	W/C 11 th -22 nd April 2022
Deadline for service plan templates to be agreed and send back to PIC via AD’s	CoP Wed 4th May 2022
Report mapping and Service standard amendments back to Directorates	W/C 6 th June 2022
Communicate SP uploads onto Pentana and reporting Schedule in preparation for Q1 2022-23	W/C 13 th June 2022
2022-23 Q1 reporting deadline	Fri 8 th July 2022

Additional Content

Corporate activity will automatically be added to the Head of Service plan that has responsibility for its delivery. For example activity linked to the Annual Governance Statement, Equality, Diversity and Inclusion objectives and workforce strategy priorities.

These elements will be updated as part of the corporate quarterly reporting process

Service Manager/Team Plans

Any ‘Service Manager/Team’ level plans below the Head of Service level are at the discretion of the Directorate. There is no corporate requirement for plans below this level.

Performance Development Reviews and 1:1’s

We are committed to achieving a high performing organisational culture as set out in the Workforce Strategy. Effective performance management is crucial and PDR's are an important element in achieving that culture and success.

The plans generated as part of the Performance Management Framework will be linked to and inform PDR's and 1:1's. The corporate timetable for PDR's to be completed for 2022/23 is as follows:-

- Directors and Assistant Directors – 30th April
- People Managers – 30th June
- All staff – 30th September

Refer to the intranet for more information on PDR's



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Risk Management Strategy



Introduction

Doncaster Council recognises that risk management is an integral part of good governance and management practice. Managing our risks effectively contributes to the delivery of the strategic and operational objectives of the authority. We strive to embed risk management within our planning and business processes and into our organisational culture, creating an environment in which we can successfully meet our objectives and achieve continuous improvement in service delivery. Our Risk Management Strategy is designed to provide structure and guidance to support our organisation, and the individuals within it, to take positive risks in an informed way.

This Strategy forms part of a suite of documents, that when combined, make up the Corporate Performance Management Framework.

What is Risk Management?

Risk is an uncertain event or set of events that, should it occur, will have an effect on the achievement of objectives.

Risk Management is the process by which we identify, evaluate and manage risks.

Risk Management should be viewed as a positive and enabling process that, if embraced, can help an organisation to achieve positive outcomes from the decisions it makes. All too often, risk management can become a process of identifying the negatives of why a decision, action or opportunity should not be taken; this leads to opportunities not being pursued.

Risk management is not a process of completely avoiding risk, but more a

process that, if used effectively, can help The Council to pursue innovative opportunities with higher levels of risk because exposure to risk is understood and managed down to acceptable levels.

Every organisation manages risk but not always in a way that is visible, repeatable and consistently applied throughout the organisation. A risk management process tries to ensure that the organisation undertakes cost-effective actions to manage and control risk to acceptable levels, through everyone following a well-defined and structured process. The aim of risk management is to enable better decision making, by having the best understanding of the potential problems before they happen and to enable pre-emptive action to be taken.

Risk Management is also an essential part of the CIPFA/SOLACE framework 'Delivering Good Governance in Local Government' recommended as good practice for all Local Authorities.

Risk Appetite

In order for The Council to achieve its objectives some amount of risk taking is inevitable. By being 'risk aware' The Council can identify and avoid threats and take advantage of opportunities.

Risk appetite can be defined as 'the amount and type of risk that an organisation is willing to take in order to meet their strategic objectives.'

Our risk appetite reflects our current position; encouraging managed risk taking for minor to moderate level risks, but controlling more closely those risks that come further up the scale. Our appetite for risk will vary over time depending on our ambitions and

priorities and the environment we work in.

The chart below shows the Corporate Risk Matrix that the Council has adopted. Typically those risk that, when mitigated, lie in the green or yellow zone lie within the accepted appetite. Those that are red zone fall outside of our risk appetite and must be a priority for immediate management action.

		Impact on objectives					
		<i>slight</i>	<i>moderate</i>	<i>significant</i>	<i>major</i>	<i>critical</i>	
		1	2	3	4	5	
Likelihood	Very Likely	5	L	M	M	H	H
	Likely	4	L	M	M	H	H
	Possible	3	L	M	M	M	M
	Unlikely	2	L	L	M	M	M
	Very unlikely	1	L	L	L	L	L

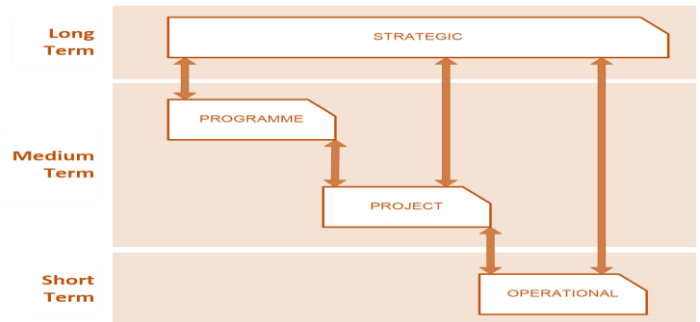
To ensure a consistent application of the risk appetite all relevant information is recorded on Pentana, the Councils performance management system, and is subject to regular review as part of the 'Resource Management' process

The risk appetite is reviewed periodically or when there are significant changes to the organisation.

When to Implement Risk Management

Risk Management should be most rigorously applied where critical decisions are being made. Decisions about risk will vary depending on whether the risk relates to long, medium or short-term goals. Strategic decisions are primarily concerned with long-term goals, medium-term goals are usually addressed through programmes and projects to bring about business change and short-term goals usually ensure on-going continuity of business services.

This approach is shown in the diagram below.



Roles and Responsibilities

Clear roles and responsibilities have been established to ensure the successful implementation of the Councils Risk Management Strategy and ensure Officers and Members are aware of the part they will play to introduce, embed and own the risk management process.

Chief Executive:

- Ultimate officer responsible for embedding risk management throughout The Council.

Elected Members:

- Receive reports outlining strategic risks;
- Attend awareness training where relevant;
- Adopt the Risk Management Strategy;
- They should also have due regard to the risks facing the authority in determining its policy and ensure a balance between managed risk taking in order to enable improved services and the achievement of objectives and risk control to protect the reputation and assets of the Authority.

Cabinet:

- Monitor the Strategic Risk Register.

Audit Committee:

- Consider the effectiveness of the risk management arrangements within The Council;
- Seek assurance that action being taken in risk related issues determined by Auditors and Inspectors;
- Be satisfied that the Annual Governance Statement properly reflects the risk environment and actions to improve it;

Directors:

- Monitor performance to ensure the effective management of critical risks and the implementation of the Risk Management Policy and Process Guide, for the quarterly performance reporting process.

Directorate Management Teams:

- Apply the Risk Management Strategy and Process Guide within the service area they manage following the current guidance;
- Identify risks for major projects and contracts;
- Assess & prioritise risks;
- Ensure Pentana is updated in line with the quarterly performance reporting process.

Service Managers:

- Manage risks in their service areas;
- Identify and develop staff competencies in risk management through the staff appraisal process.

Employees

- Assess risks in their service area in association with service managers;
- Recognise and accept responsibility for risk management for self and others.

Policy Insight & Change Team:

- Develop the Risk Management Strategy (including an annual review);
- Corporate advisor of risk at strategic and operational level;
- Promote a positive culture of risk awareness within the organisation and to all partners;
- Continual development and maintenance of the corporate risk registers;
- Regular reporting of strategic risks;
- Design and implement risk management training;
- Provision of corporate and service based risk management advice and support as required.

Internal Audit

- Challenge established process, risk identification and evaluation and provide assurance to officers and members, when appropriate, on the effectiveness of controls;
- Feed the results of risk analysis onto its annual audit plan;

Monitoring, Reviewing & Reporting Risks

The Pentana Performance Management System is used to record, monitor and report on all risk registers and progress against all mitigating actions.

Reviewing the progress and mitigating actions against the operational and strategic risk registers is embedded in the quarterly Resource Management process. The Resource Management process informs the contents of reports to Director, Executive Board, Cabinet and Overview and Scrutiny Management Committee. The quarterly Strategic Risk update will also be presented at Audit Committee.

Strategic risks will be monitored at corporate level and operational risks will be monitored and reviewed at directorate level. Risks may be promoted and demoted as part of the quarterly Resource Management process or at any Directors Meeting. This will allow The Council to effectively react to changes in priorities.

Review

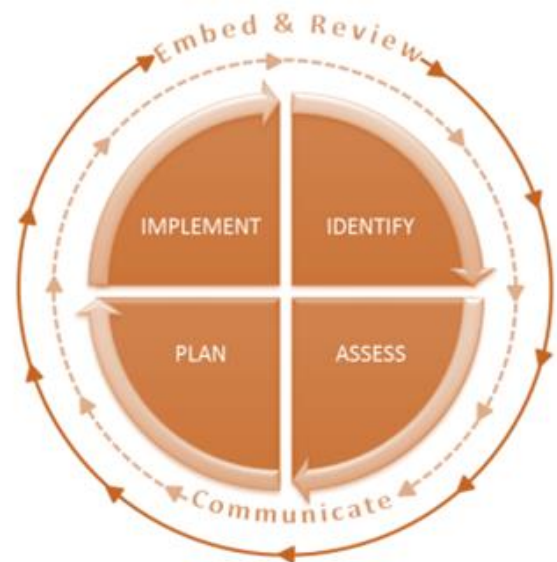
The Risk Management Strategy will be reviewed on an annual basis to incorporate lessons learned and to continually improve our risk management arrangements.

Risk Management Process Guide

This section outlines the detailed process required to introduce and embed risk management. The risk management process is based on good practice and can be applied at all levels of the organisation and beyond.

The management of risk process is divided into four primary elements:

- Identify
- Assess
- Plan
- Implement



Additionally, the ‘Communicate’ and ‘Review and Embed’ activities operate through each stage. This is to ensure activity is constantly evaluated throughout the life cycle of the risk.



Identify

The primary goal of the ‘Identify’ step is to identify the risks to The Council that would reduce or remove the likelihood of The Council achieving its objectives, whilst maximising opportunities that could lead to improved performance.

A risk is defined as: ‘An uncertain event or set of events that, should it occur, will have an effect on the achievement of objectives’.

An opportunity is defined as ‘an uncertain event that could have a favorable impact on objectives or benefits’.

The starting point to identifying risks and/or opportunities is therefore clarity on what the objectives are. The Council’s Priorities and key objectives are identified in the Corporate Plan. Objectives in Projects and/or Partnerships are identified in the initiation documents.

When describing a risk it is good practice to consider 3 key terms, **cause**, **event** and **effect**. The following prompts may be used to ensure risks are effectively identified and described.

As a result of

 (cause)

There is a
 threat/opportunity..... (event)

That could lead to

 (effect)

When creating a list of potential risks it is sometimes easier to focus on categories of risks. The categories of risk that have been adopted by Doncaster Council can be viewed in the Risk Management Toolkit.

For effective risk management , it is critical that each risk has an ‘owner’ who is responsible for dealing with the risk, ensuring that all internal controls are working and that relevant mitigating actions are taken. The role involves regularly monitoring the risk status and adjusting risk ratings accordingly, based on current information and knowledge.

Some risks identified will already have measures in place to control the impact or likelihood of the risk occurring. To be effective these internal controls should be demonstrated by policy, procedure or practice. Controls can be classified in four ways:

- **Directive controls:** these controls are designed to ensure that a particular outcome is achieved.

They are particularly important when it is critical that an undesired event should be avoided. An example of directive controls would be training staff with required skills before allowing them to work unsupervised.

- **Preventive controls:** these controls are designed to limit the possibility of an undesirable outcome being realised. The more important it is that an undesirable outcome should not arise; the more important it becomes to implement appropriate preventive controls. An example of preventive control is separation of duties (e.g. the person who authorises payment of an invoice is separate from the person who ordered the goods, thus preventing one person securing goods at public expense for their own benefit).
- **Detective controls:** These controls are designed to identify occasions when undesirable outcomes have been realised. These types of control, by definition, occur ‘after the event’. An example of detective control is an asset check (this might identify assets that have been removed without authorisation).
- **Corrective control:** These controls are designed to correct undesirable outcomes, which have been realised. They provide a route of recourse to achieve some sort of recovery against loss or damage. An example of a corrective control is ‘claw back’ for staff who have been overpaid.

A key question is whether the existing controls are adequate or whether further controls / solutions are required to effectively manage the risk.



Assess

The primary goal in the 'Assess' step is to understand the effect of the identified threats and opportunities on the activity. In order to decide which risks are most important and merit most attention, there needs to be some way of comparing risks relative to each other. Using a score to rate risks provides a quantitative basis for comparison and can be achieved by assessing the risk along two dimensions:

- The **likelihood** (or probability) that the risk will occur.
- The **impact** (or severity) that the risk will have if it occurs.

The first evaluation should be undertaken on the 'inherent risk' i.e. the risk before any controls have been put in place. This is to ensure that all significant risks are highlighted and assurance provided that these risks are being managed. If you only assess the risk after controls have been put in place, 'residual risk', then you are assuming that the controls will always be there. The inherent and residual risk scores are calculated using the following equation:

Likelihood score x Impact score

The impact of a risk is often considered in terms of the level of severity. Establishing a consistent approach for scoring the risk impact is more complex than likelihood as it will vary by risk category. For consistency a table that outlines elements to consider in terms of their impact from a number of perspectives can be viewed at Appendix B. The criterion against each score are to be used as a guide and is not exhaustive. This table can be


personalised by service areas to take account of their own perspectives. When using this approach if more than one perspective applies choose the column containing the more serious outcome.


Likelihood is often considered in the context of 'what timescale the risk might occur within, or what frequency'. A table that contains descriptions for the risk event with an associated score for each descriptor can be viewed in the Risk Management Toolkit.


A target profile is input onto Pentana. This is to demonstrate where the risk will be managed down to and by what date the target profile is expected to be achieved.

The Council uses the 5 x 5 risk matrix to display its risk profiles. This allows us to align with partner organisations, improve the scope for a flexible risk appetite and distinguish between serious and critical events.

The risk rating corresponds to the traffic light status below.

 Risks rated Low – Entered onto Pentana, linked to the relevant actions and reviewed annually.

 Risks rated Medium - Entered onto Pentana, linked to the relevant actions, controls and mitigating actions recorded and reviewed quarterly as part of the Resource Management process

 Risks rated High– Entered onto Pentana, linked to relevant actions, additional controls and mitigating actions recorded, reviewed quarterly as part of the Resource Management Overview meetings and the Resource Management process



Plan

The primary goal of the 'Plan' step is to prepare specific management responses to the threats and opportunities identified, to remove or reduce these threats, and to maximise the opportunities.

Once the risks have been identified and assessed, appropriate management action needs to be taken. The 'Four Ts' is the generic approach that can be used when planning how to manage a risk or opportunity:

Tolerate: The risk is accepted making limited, if any, efforts to mitigate it or reduce its likelihood/impact. This may be because the cost of mitigation exceeds the consequence of the risk.

Transfer: The risk rating is reduced by transferring the risk to a third party by changing contractual terms. Typically this would mean The Council discontinuing the activity that gives rise to the risk, and sub-contracting/outsourcing that activity to another organisation. Other alternatives include insurance or private finance initiatives.

Treat: Actions will be taken to reduce the risk, possibly by putting in additional controls.

Terminate: The activity that gives rise to the risk will cease, be avoided or altered, thus eliminating the risk.

With the exception of taking a 'tolerate' approach, mitigating actions will need to be developed and monitored in order to effectively manage the risk.

The risk, the risk profile and the mitigating action against each activity are recorded collectively in the form of risk registers.

All corporate risk registers within The Council are recorded on Pentana, and monitored and reviewed in line with this Risk Management Strategy.

Programme and Project risks must be managed in line with this Risk Management Strategy but may contain bespoke elements to meet the needs of the programme/project, for example a tailored impact or likelihood guide or a reporting cycle. This approach compliments the principles in 'Managing Successful Programmes' (MSP).

Risk Registers are structured under the following headings on Pentana:

Operational Risk Register: All risks identified with the delivery of the Service.

Strategic Risk Register: Any risk from the operational risk register that may prevent or delay the delivery of The Council's shared priorities, or that may prevent or delay the delivery of the internal cross-cutting actions needed by The Council to improve performance and underpin the Borough Strategy may be elevated to a Strategic Risk. In addition new or emerging risks may be added directly to the strategic risk register either through the Resource Management process or from the weekly Directors Meeting.

Programme & Project Register: All risks associated with the delivery of high level programmes and projects.

Fraud Risk Register: The Fraud Risk Register is a specific register dedicated to the assessment, monitoring and treatment of the risks relating to fraud and corruption. It is an integral part of the Risk Management strategy designed to focus attention on minimising the damage caused

by fraud and corruption and on upholding The Council's principles of zero tolerance to fraudulent and corrupt activity. The fraud risk register will be used by both management and Internal Audit Services to focus anti-fraud and corruption resources and training on raising the awareness of fraud and corruption and its associated effects.



Implement

The primary goal of the 'Implement' step is to ensure that the planned risk management actions are implemented and monitored as to their effectiveness, and corrective action is taken where responses do not match expectations.

Pentana is used to record, monitor and report on all corporate risk registers and progress against all mitigating actions.

- Operational risks will be reviewed at directorate level as part of the Resource Management process.
- Strategic risks will initially be reviewed as part of the Resource Management process and then as part of the Resource Management Overview meeting. These risks will then be reported to Executive Board and Cabinet.
- Fraud Risk will be regularly reviewed and reported upon by The Council's Internal Audit function.
- Programme and Project risks will be directly managed within the governance of the programme or project. If the programme or project is part of The Councils transformation approach these will also be reviewed as part of the Resource management process



Communicate

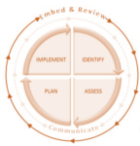
'Communicate' is not a distinct step in the management of risk process, it is an activity that is carried out throughout the whole process. Doncaster Council's exposure to risk is never static: effective communication is key to the identification of new threats and opportunities, or changes in existing risks.

The implementation of risk management is dependent on participation, and participation, in turn, is dependent on communication. It is important for managers to engage with staff across The Council to ensure that:

- Everyone understands The Council's Risk Management Strategy in a way that is appropriate to their role. If this is not achieved, effective and consistent embedding of risk management will not be realised and risk priorities may not be addressed;
- Everyone understands the benefits of effective risk management and the potential implications if it is not done or is done badly;
- Each level of management actively seeks and receives appropriate and regular assurance about the management of risk within their control. Effective communication provides assurance that risk is being managed within the expressed risk appetite and that risks exceeding tolerance levels are being escalated;
- There is no misunderstanding over the respective risk priorities within and across business perspectives. This will help management to avoid

being diverted from the most significant risks and will enable appropriate levels of control to be applied;

- Any organisation providing outsourcing services has adequate risk management skills and processes. Gaining assurance that a partner organisation has implemented adequate risk management for itself will avoid dependence on a third party that may fail to deliver in an acceptable way, or may not deliver at all.



Embed & Review

How an organisation manages its risks demonstrates a part of that organisation's core values and improves stakeholder's confidence in the organisation's ability to cope and manage its risks.

Doncaster Council needs to ensure that risk management has been integrated successfully, has the necessary support, is addressed in an appropriate way and is successful. Key indicators that demonstrate that the management of risk culture had been embedded are:

- The understanding of risk management policies and the benefits by all staff;
- The existence and operation of a transparent and repeatable risk management framework;
- The support by the organisational culture of well thought-through risk taking innovation;
- The close linking of management of risk with the achievement of objectives;

- The explicit assessment and management of the risks associated with working with partners;
- The active monitoring and regular review of risks;
- The reporting of risks to management in a timely manner (together with sufficient information to enable risk treatment to be developed) and the escalation of risks within appropriate timescales if they develop.

As the management of risk is a live process it is vital to constantly review and evaluate during all elements of the process. Mitigating actions can be amended to target emerging issues throughout the life cycle of the risk and to ensure the desired outcomes are delivered.



Corporate Governance

Good governance is about getting things right first time. It is about demonstrating legitimate leadership, respecting the democratic process, making proper and timely decisions, managing risk and allocating resources for valid reasons.

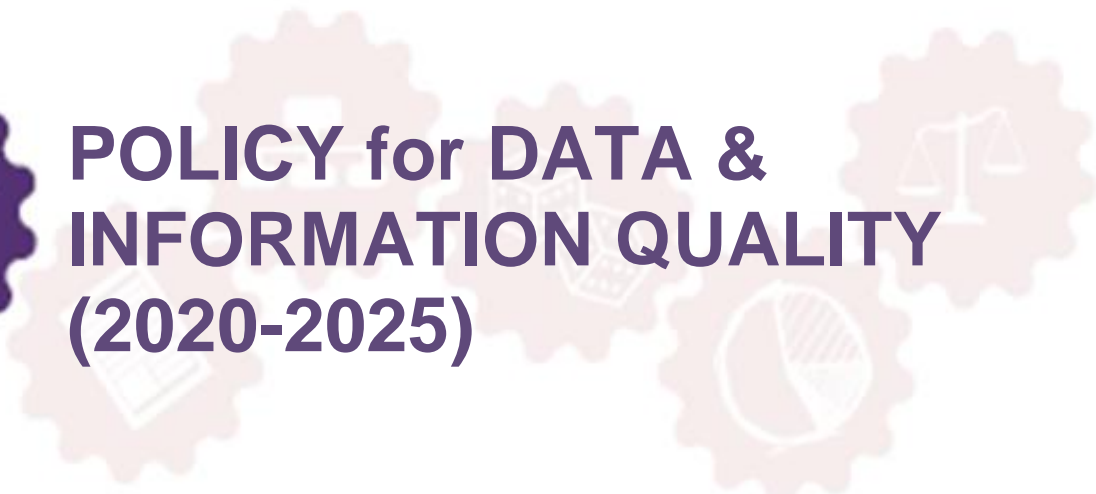
Good governance principles should be instilled in everything that we do at every level of the organisation. It is embedded in a number of key policies and procedures maintained and published by The Council. Compliance with these policies and procedures is the key to instilling good governance throughout Doncaster Council and the Risk Management Strategy, as part of the Performance Management Framework, has been identified as a key governance document



Doncaster
Council



**POLICY for DATA &
INFORMATION QUALITY
(2020-2025)**



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Introduction

Doncaster Council recognises the importance of holding reliable information as a fundamental requirement for the delivery and management of providing an effective service to service users. This policy outlines how we can ensure any data and information used is of consistently high quality.

Data standards must not just be seen as supporting the collection of data on a consistent basis throughout the council, but they also have an important role in supporting the flow and quality of information used in different parts of the council so that all employees are presented with the relevant information where and when it is required.

Purpose and Scope of this Policy

To provide information to employees on how we will manage data quality.

Everyone has a responsibility for data quality, whether on paper, electronic or on any other media and the purpose of this document is to draw together the many strands of data quality in a complete and defining policy, the principles of which must be reflected in all aspects of the activity carried out within the council.

This policy must be adhered to by anyone handling data (collecting, reporting or processing) that is used across the council.

Doncaster Council's commitment to data quality

To make data quality sustainable and consistent throughout the council, it must become an integral part of the organisation's culture.

Data should be right, first time, on time.

The council has a clear vision of what this will mean in practice:

- There is a strong demand for high quality performance and management information from officers and members to improve decision making.
- Efficient processes and procedures are in place to produce high quality data and information. It will seek to improve these processes whilst ensuring that efforts to improve data quality are proportionate to the benefits.

The council is committed to putting data quality at the heart of performance management and in all aspects of its day-to-day operations.

What is data quality and why is it important?

Data quality is the accuracy of material used to judge performance or inform business decisions. Data quality ensures that this source material is fit for its intended use in operations, decision making and planning. This can include information collected from processes or systems, performance indicator results, information about key actions and projects, or high level collective results about an organisation. It also includes collection, use, storage and disposal of personal and/or sensitive data and information which may include residents of the borough and employees of the council.

In line with the Corporate Performance Management Framework, accurate data regarding service users is essential for internal management and for external comparison and scrutiny. The quality of the data held is important for external uses such as national reporting requirements, as well as legislative requirements and for the monitoring of legally binding contracts with commissioners and partner organisations.

This is particularly important because:

- It supports continuous improvement and more effective use of resources.
- Good data quality is crucial to support effective decision-making.
- It contributes to the provision of high quality information to the public, Government departments, auditors, and partners.
- It allows us all to make informed judgements regarding the quality of the services the council delivers.

The Importance of Good Quality Data

Incorrect information could result in serious inconvenience to residents and even claims against the council. If the data recorded on our systems is not correct then a service may not be received. The council may not be able to then keep other third parties correctly informed. Our service to the residents of the borough could be compromised and the reputation of the council damaged.

Some of the data collected by the council is also used to monitor performance and activity. It is essential that this data is accurate in order that the council can continually plan improvements for services. The data needs to report activity accurately if we are to have confidence in the information. If data is of poor quality, the council could face loss of income or incur larger costs. The General Data Protection Regulation (GDPR) requires that information held on computer and paper systems is accurate, relevant and up to date.

Data quality Requirements

The council needs to be accountable for the public money spent and the information produced about performance and improvement must therefore be accurate, reliable and timely. As a result, data quality arrangements are audited to check:

- Performance results are calculated accurately, given that the council's performance is compared to other authorities and large amounts of government funding is now linked to performance.
- Adequate arrangements are in place to manage the council effectively and to make key decisions.

To help do this effectively, the National Audit Office (NAO) has developed a framework to help improve data quality in local government. This framework provides the basis of any key lines of enquiry that may be used by external auditors to assess the effectiveness of the council's data quality arrangements.

Roles and Responsibilities

All employees have a responsibility to ensure that the data and information they handle is relevant, accurate, complete and captured/recorded in a timely manner.

Team	Roles and Responsibilities
<p>Senior Leadership Team</p>	<ul style="list-style-type: none"> ○ Promoting the importance of data quality in decision-making. ○ Promoting the importance of data quality through the Corporate Plan and associated initiatives. ○ Promote the importance of the six principles of good data quality.
<p>Heads of Service & Information Asset Owners</p>	<ul style="list-style-type: none"> ○ Application of data quality standards to performance indicators. ○ Complete data quality self-assessment tool annually. ○ Report major data quality issues to SLT. ○ It is their responsibility to ensure a high level of quality data. Identify performance data and actions, which are strategically important, so the data quality standards can be applied.
<p>People Managers</p>	<ul style="list-style-type: none"> ○ Act as data quality champions within directorates, supporting services. ○ Maintain and review data quality reports and dashboards to monitor and action data quality issues. ○ Takes steps to minimise collection and input errors. ○ Report inconsistencies and problems to Head of Service and PIC. ○ Responsible for ensuring that all their employees are aware of and comply with the Data quality Policy. ○ Departmental procedures must be in place to allow all employees the opportunity to adhere to this policy. ○ All staff must be provided with adequate training on the processes and systems relevant to their role to ensure high data quality standards.
<p>All Staff within the Council</p>	<ul style="list-style-type: none"> ○ Staff must ensure that they read, understand and comply with this policy. ○ Employees must take responsibility for improving poor data including that provide by others. ○ Persistent problems must be reported to the manager for action.
<p>Policy, Insight and Change Team (PIC)</p>	<ul style="list-style-type: none"> ○ Manage the council relationship with external audit and work with internal audit to review progress on this data quality policy. ○ Produce and co-ordinate corporate templates which support data quality. ○ Implementing the strategic approach and procedures internally, for data quality ○ Maintain the corporate framework for data quality. ○ Monitoring data quality, identifying any problems that may arise through service improvement work. ○ Working closely with Service Areas to agree remedial actions for common/persistent errors made by their teams (e.g. further training, change of procedure etc...) ○ Implementation and roll-out of the data quality improvement plan.
<p>Internal Audit</p>	<ul style="list-style-type: none"> ○ Carry out regular audits of data quality across the council, working with the Information Governance Team to review the quality of data produced on high-risk performance indicators and actions. Liaise with the National Audit Office to support audit processes.

Partners	<ul style="list-style-type: none"> ○ Develop data sharing protocols as appropriate to ensure the timeliness and accessibility of data.
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New Systems & New Processes






Where any new systems or processes are implemented or where changes to systems are made the data quality checklist will be completed in-line with the Data Protection Impact Assessment (DPIA).


Guidance can be found on the intranet under **Data Protection Impact Assessment**.

The Six Principles of Good Quality Data

Doncaster council has adopted the six principles of data quality to use as a way of driving the consistency of good data throughout the organisation.

All data and information within the council should follow and be consistent with these six principles as below:

 Complete	Information and descriptions should give the whole, complete picture. Nothing should be vague, ambiguous or omitted.
 Accurate	All data and information should be recorded error-free to present an honest reflection of the expected and actual outcome.
 Valid	Content should be clearly, solely and adequately represent the intended purpose and results.
 Reliable	Information should be extracted from trusted and reliable sources and we will use consistent collection and recording methods.
 Timely	Reports and documentation containing data will always be completed and delivered within the expected timeframe.

 <p>Relevant</p>	<p>Material should only include details for that specific intended purpose and should not include anything more.</p>
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Training

All staff will be required to complete the Data Quality eLearning. Where continuous data quality issues are identified it is the responsibility of the manager to ensure training needs are provided. All staff will be provided with the correct information and training when they start work

Information Governance

Information Asset Owners have a responsibility to ensure all data and information is recorded with Information Governance.

If we check and supervise the quality of data we reduce the risk of a data breach as described within GDPR.

Data quality Standards

A formal set of Data quality standards in line with the six principles will be applied to all data which is used by the council, or shared externally. Achieving these standards will ensure our data is to a high standard to be used with confidence. Work will be completed to create DQ standards for service specific areas to highlight where high quality data is required.

Partnership Working

A validation process is required for all data provided by or to partners or third parties.

Sharing data with and obtaining data from partners

Local authorities are required to collect, analyse and report performance across all partnerships. Data will need to be shared with key partners and other contractors. Data quality must be checked within any work that will be shared to ensure accuracy.

Sourcing data

A significant amount of data used throughout the council comes from external sources that could include:

- Data from official government websites (e.g. NOMIS, ONS, etc...)
- Regional statistics documentation (e.g. Yorkshire Devolution).
- Surveys or research (e.g. MORI statistics)

When reporting this type of data or when completing data quality templates the data source should be referenced. This not only places the data into context, it also shows that it has come from a reputable or reliable source.

Data Use and Reporting

The council will ensure there are appropriate systems in place for the collection,

recording, analysis and reporting of data. To operate on a right first time principle, the council will consult with staff and managers and partners when creating and implementing new information systems and reporting tools. When creating reports the council will use a collect once and use numerous times approach to prevent the extraction of data in various forms.

Internal Control and Validation

To ensure data is accurate, validation processes will be implemented into reporting dashboards to ensure continuous monitoring and improvement. Audits will be carried out to ensure validation checks have been completed.

Evidence and Records

Clear and concise evidence to demonstrate that data assurance procedures are in place for all stages is required for self-assessment.

Data quality Improvement

The council is committed to improving awareness and responsibility for good quality data at all levels of the organisation. Special attention should always be given to data being collected at source. As part of service improvement, work will be carried out with each service to identify data quality issues and implement improved standards, using an action plan to correct any identified issues.

Applying risk to data quality

Risks and issues should be identified when looking at data quality. It is important to try and understand what the potential problems might be with data collection and what can be put in place to reduce these risks. Correcting errors or issues at source will always reap greater rewards later in the process. All data risks should be logged on the Data Risk Log and any exceptions should be escalated to the appropriate governance level.

An effective way of improving data quality in the early stages is to carry out integrity checks on these systems by using the data quality framework, making all Service Areas responsible for their own data. Such checks should be standardised throughout the council so that they meet the quality assurance expectations.

Data quality Audits

The standards set out in this policy are needed to improve the way the council manages its data, and they also need to be delivered to help us demonstrate to external auditors that we have robust and effective data quality procedures in place.

Data quality Self-Assessment Toolkit

To help teams identify their own data quality issues the council has provided a self-assessment checklist which should be completed honestly by all line managers to assess work streams against our expected data integrity and information standards.

The self-assessment checklist can be accessed by the Data and Information quality page on the intranet.

Data quality Identification Notice

The data quality Identification Notice will be used to identify issues from Service improvement work, projects and issues identified upon completion of the self-assessment checklist, to document actions required and escalate to the Head of Service.

Data quality Action Plan

Data quality issues from the identification document will be recorded on the data quality Action Plan to identify what is required and when it should be completed.

This document will be the centrally held (in PIC) data quality monitor, tracking data quality issues and improvement targets across all work areas.

A monthly update will be sent to each Head of Service for onward communication to line managers to ensure data quality remains a constant focus within the team.

Data quality Monitoring Tool

The Data quality monitoring tool will be used for quantitative information to track the reduction in the data quality issues raised.

Tools and Templates for Data quality

All documents are available on the Data and Information quality intranet page.

Risk assessments

The risks of not implementing this policy include:

- Ineffective and poor decision making
- Lack of accountability and reliable performance information
- Inefficient service delivery
- Financial loss or monetary penalty imposed
- Detrimental impact on council business and service delivery
- Non-compliance with legislation and potential litigation

Review

This policy will be reviewed annually. It will be reviewed by the Policy, Insight and Change Team and will be presented to the council committee annually, in line with the council's Policy Framework.

If you have any queries relating to this policy or other areas of data quality, please contact the Policy, Insight and Change Team.



Doncaster
Council



DUE REGARD STRATEGY



The Public Sector Equality Duty (PSED)

The PSED was created by the Equality Act 2010 and replaces the race, disability and gender equality duties. The duty came into force in April 2011 and places a duty on public bodies and others carrying out public functions.

The aim of the PSED is to embed equality considerations into the day to day work of public authorities, so that they tackle discrimination and inequality and contribute to making society fairer.

The PSED consists of a **general duty**, with three main aims (set out in section 149 of the Equality Act 2010 and outlined below); and **specific duties**. The specific duties are designed to help public bodies meet the general duty.

The General Duty

The new Equality Duty requires public bodies to have **due regard** to the need to:

- Eliminate discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The Equality Act explains that the second aim (advancing equality of opportunity) involves, in particular, having due regard to the need to:

- Remove or minimise disadvantages suffered by people due to their protected characteristics.
- Take steps to meet the needs of people with certain protected characteristics where these are different from the needs of other people.
- Encourage people with certain protected characteristics to participate in public life or in other activities where their participation is disproportionately low.

It states that meeting different needs includes (among other things) taking steps to take account of disabled people's disabilities. It describes fostering good relations as tackling prejudice and promoting understanding between people from different groups. Compliance with the general equality duty may involve treating some people more favorably than others.

Specific Duties

In addition to the general Equality Duty, set out above, Section 153 of the Equality Act gives the Government a power to impose specific duties on certain public bodies to enable them to perform the Equality Duty more effectively.

The specific duties are intended to support compliance with the General Duty.

The new specific duties focus on reducing burdens and bureaucracy on public bodies, and moving away from a process-driven approach to focus on transparency.

The specific duties require organisations like the Council too;

- publish information to demonstrate their compliance with the Equality Duty, at least annually; and

- set equality objectives, at least every four years

Showing Due Regard

It is obvious that a 'one size fits all' approach is not an effective approach of planning, designing or delivering services to a community with different needs.

Showing due regard will lead to services that are more appropriate to the user, and services that are more effective and cost-effective.

By operating from a position of this level of understanding you:

- Will be better at prioritising and meeting service user needs within the resources available.
- Deliver best value for the citizens of Doncaster.
- Support Doncaster in achieving its strategic priority outcomes
- Commission services that are support delivering improved outcomes across all the protected groups

By showing this consideration, the general duty will enable you to demonstrate that you are making decisions in a fair, transparent and accountable way. Showing due regard in this way helps to ensure that Doncaster's reducing resources are better targeted and that money is spent where it will have the greatest effect. It promotes evidence based decision making

Our Approach to Due Regard

Equality, diversity and Inclusion (EDI) analysis and due regard is a process used to ensure that when the council takes a decision, it knows who is affected and has taken

reasonable mitigating action to ensure its impact is as equitable as possible.

Equality, diversity and Inclusion needs to be considered throughout the development, implementation and review or establishment of any key decisions, strategies, policies, services and functions. In all instances, these considerations should be undertaken before decisions are finalised and agreed.

Examples of when you should consider equality, diversity and Inclusion,

Include:

- any proposals to introduce or add to a service
- any proposals to remove, reduce or alter a service
- any new policies or changes to policies
- any proposals to adopt policy priorities, strategies and plans
- services or practices that have not previously considered EDI
- changes to staffing structures where groups of employees are likely to be negatively affected
- any proposals in relation to procured or commissioned services

There are nine characteristics protected under the Equality Act 2010. They are:

- **Age** - A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds)
- **Disability** - A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

- **Gender reassignment** - the process of transitioning from one gender to another.
- **Marriage and civil partnership** - Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favorably than married couples (except where permitted by the Equality Act).
- **Pregnancy and maternity** - Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavorably because she is breastfeeding.
- **Race** - Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.
- **Religion or belief** - Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (such as Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition.
- **Sex** - A man or a woman
- **Sexual orientation** - Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

as a protected characteristics for consideration:

Veterans - Doncaster Council has committed to the aims of the National Community Covenant, which is to encourage local Authorities and the armed forces community (AFC) to work together in order to recognise and remember the sacrifices faced by the AFC and encourage activities which help to integrate the AFC into local life, help and support the wider community.

The covenant ensure that Veterans, which includes any ex serving armed forces personnel / reservist and their families should not be at disadvantage when they try to access public services such as education, employment, housing or health and social care and that special consideration is given where appropriate , especially for those who have given the most.

The Homeless- The Council wants you to have due regard and consider how your decisions may impact onto those who are homeless or threatened with homelessness. The definition of Homelessness is: 'Someone who is eligible for assistance, unintentionally homeless and falls within a specified priority need group'.

The 'priority need groups' include households with dependent children or a pregnant woman and people who are vulnerable in some way e.g. because of mental illness or physical disability. This includes those aged 16 or 17, those aged 18 to 20 who were previously in care, those vulnerable as a result of time spent in care, those who have spent time in custody, or in HM Forces, those vulnerable as a result of having to flee their home because of violence or the threat of violence.

Doncaster Council includes Veterans, the Homeless and Socio-Economic (anti-poverty)

The person applying may be pregnant or have dependent children who will live with them, or be threatened with homelessness as a result of a flood, fire or other disaster. They also may have someone who lives with them who is vulnerable through old age, mental illness, handicap or physical disability. They will have no accommodation or will become homeless within 56 days.

This includes Rough Sleepers who are people sleeping, or bedded down, in the open air (such as on the streets, or in doorways, parks or bus shelters); people in buildings or other places not designed for habitation (such as barns, sheds, car parks, cars, derelict boats, stations, or encampments).

Socio-Economic (anti-poverty)

The Local Authority aims to tackle the inequalities of outcome caused by socio-economic disadvantage as part of Due Regard. Section 1 of the Equality Act 2010 requires specified public bodies to consider how their decisions might help to reduce the inequalities associated with socio-economic disadvantage when making strategic decisions such as deciding priorities and setting objectives. Inequalities associated with socio-economic disadvantage could include inequalities in education, health, housing or crime. It is for public bodies subject to the duty to determine which socio-economic inequalities they are in a position to influence.

Strategic decisions must be carefully considered so as far as reasonably practicable, they are as effective as they can be in tackling socio-economic disadvantage and reducing any associated inequalities. Tackling inequalities associated with socio-economic disadvantage could include improving where services and

activities are focused or adjusting communications, campaigns, cost and access to ensure that people are not disadvantaged.

Due Regard Statement

A Due Regard Statement (formerly known as Equality Impact Assessment) is used to ensure that when the council takes a decision it knows how specific communities of interest may be effected by the decision and can consider any potential discriminatory impact on people with protected characteristics.

Due Regard Statements can also help improve or promote equality by encouraging you to identify ways to remove barriers and improve participation for people with a protected characteristic.

Due Regard Statements are about understanding and meeting the needs of local people and supporting us to deliver our vision for Doncaster.

- A DRS should be initiated at the beginning of the programme, project or change to inform project planning
- A DRS is required for all Cabinet reports that required a decision
- The DRS runs adjacent to the programme, project or change and is reviewed and completed at the relevant points
- The DRS cannot be fully completed until the programme, project or change is delivered.

Due Regard Process

The Councils Due Regard process is a three step approach

- Initial Assessment
- Due Regard Statement
- Final Signoff

The process is designed to complement and inform the decision making process and should be put in place as soon as the project/programme/change is in the conception stage. When the following guidance mentions 'activity' it refers to either the project/programme/change etc.

The Due Regard Statement is a living document that is updated throughout the whole life span of the activity and is used to shape further consultation and actions.

Step One - Initial Due Regard Assessment

An electronic template is completed that outlines:

- A brief outline for the proposal and the overall aims/purpose for making the activity
- The expected levels of Impact on those who identify with a protected characteristic
- A brief description on the data and intelligence used to make the initial impact assessments

Taking into account all the answers you have provided in the initial assessment an outcome will be automatically generated.

'No further action required' – The Initial assessment will be signed off by the relevant Assistant Director and a copy sent to the Policy Insight and Change Team. This initial assessment needs to be referenced in the Fair

and Inclusive section of any reports linked to this activity.

Please complete a Due Regard Statement –

Due to the level of impact evidenced in the initial Due Regard Assessment you are required to complete a Due Regard Statement.

Step Two – Due Regard Statement

A copy of the Initial Due Regard Statement is sent to the Policy Insight and Change Team. They will reply with the Due Regard Statement template with a reference number that will be live through the life of the activity.

The action plan element of the DRS records the key activity through the life cycle of the Due Regard Assessment. It may be used to gather additional information, to identify and inform consultation(s), to reduce the impact and/or to inform revised approaches.

As part of your initial assessment you identified evidence/intelligence that support your assessment of the impact of your proposal on different groups and triggered the need for further information and activity to manage/reduce the impact.

The Consultation Profile will help shape what consultation you need to do and who you might want to consult with. After each consultation the results will be analysed to show what the consultation is telling us, can we do anything to reduce the impact and to start to develop key actions required and identify additional areas of consultation.

The results of any consultation are used to inform the content of the action plan.

Step Three - Final Signoff

Once the final report has been produced and the decision made the Due Regard Statement will be signed off by the relevant Assistant Director and a copy sent to the Policy Insight

and Change Team who will publish it on the relevant section of the Councils internet page.