

**Manchester City Council
Report for Resolution**

Report to: Audit Committee - 11 March 2019
Subject: Adults Services Assurance Update
Report of: Director of Adult Services

Summary

It is the role of the Audit Committee to “monitor the implementation and outcomes of the Council’s internal audit programme” and this includes the implementation of Internal Audit recommendations.

In 2017/18 Internal Audit reported limited assurance over four audits and Audit Committee have monitored the implementation of recommendations arising from these. A management update was provided to Audit Committee in September 2018 and at the request of Audit Committee this report updates the current position in respect of two audits where original, agreed actions are overdue: Transitions (Childrens to Adults) and Homecare Contract Monitoring.

Recommendations

Audit Committee is requested to consider the assurance provided by the updates on actions taken in addressing risks noted in the Transitions (Children’s to Adults) and Homecare Contracts internal audit reports.

Wards Affected: All

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Background documents (available for public inspection):

Audit Committee: March 2018: Internal Audit Annual Opinion
Audit Committee: March 2018: Adults Assurance Update
Audit Committee: September 2018: Adults Assurance Update
Audit Committee: February 2019: Outstanding Audit Recommendations

1. Introduction

- 1.1. During 2017/18 the Council's Internal Audit Service issued reports in four areas relating to adult services with limited assurance opinions:
 - Transition: Children to Adults
 - Disability supported accommodation services, Quality Assurance
 - Homecare Contracts
 - Client Financial Services
- 1.2. Assurance update on actions being taken to address risks in these areas were presented to Audit Committee by the Executive Director Strategic Commissioning and Director of Adult Social Services on 22 March 2018 and the Director of Adults Services on 2 September 2018.
- 1.3. The key issues raised from the four audit reports have been followed up by Internal Audit and their last update report on (11 February 2019 noted that five recommendations have been overdue for between six and nine months in two of the above reports as follows:
 - Homecare Service Contract Management (1 partially implemented)
 - Transitions (2 not implemented, 2 partially implemented)
- 1.4. At the February 2019 meeting Audit Committee requested updates in respect of both of these reports and how the identified risks were being addressed. The actions taken to date and further actions planned are set out below.

2. Transitions

Audit Findings

- 2.1. The report on the process of transition was finalised on 15 February 2018. This provided limited assurance that effective arrangements were in place to support young people transitioning from Children's to Adults' Services. The key audit findings were that:
 - Action was needed to confirm the vision and strategy for delivery of transition responsibilities and to develop and then to share a transition offer and plan for delivery.
 - Governance arrangements should be revised to support delivery of the vision and strategy once agreed.
 - Action should also be taken to confirm key roles and responsibilities as well as establishing policy and procedure for the delivery of the transitions offer once it has been developed.
- 2.2. As noted in the September 2018 report to Audit Committee, the response to the Internal Audit has been holistic, to ensure that changes required to be made to the strategy, approach, governance and delivery of transition will be sustainable and will engage and secure buy-in from all partners who have a key role in

supporting children and young people, including care, health and education services.

Transitions: Background Context

- 2.3. The Care Act 2014 places a duty on the local authority to assess a child, young carer or child's carer before the age of 18. This is in order to help them plan if they are likely to have needs and would significantly benefit from the provision of support or services once they (or the child they care for) turn 18.
- 2.4. This duty is a key role of the Transition Planning Team, which has developed over the past four years. This development is linked to the implementation of the Care Act which widened the scope of the transitional offer to young people and their families. For example, the Act requires that the offer should no longer be solely for children with learning disabilities but for all children and young people who have care and support needs.
- 2.5. Work has been ongoing in engaging, consulting and securing support from all partner agencies including colleagues from across the Council (Children's Services, Education and Schools), health (commissioners and providers including the Mental Health Trust) as well as parent and carer groups. The scale and complexity of this task continues to present challenges and is still often seen through the prism of the unique perspective of the partner agency. As a result of sustained work however all partner agencies are focused on achieving a shared understanding of transition in this often complex area of professional social work practice.
- 2.6. The Care Act 2014 widened the scope of those who should be considered for transition planning. A known group of young people who we can plan for include those in receipt of current support as a Looked After Child (LAC), as a Child in Need (CIN) or if they are known to the Children with Disabilities team. Those children and young people who are presented to the multi-agency panel (comprising children's social care, health and education with adult social care link in attendance) are also known to the service as they may be supported through permanence, locality teams and / or the care leavers service. In these circumstances work can be done to establish consent, and project any significant benefit and care and support needs for when they turn 18.
- 2.7. In some areas of education and children's social care, ongoing work is being done to ensure professionals know how to refer young people into the Transition Planning Team. For those young people who have Children and Adolescent Mental Health services (CAMHS) involvement and where an adult mental health offer is being sought, a process has been established so those young people can have a clinical handover - the consolidation and merging of this process and of the Transition Panel across services and partners is in scope for future work as part of proposals to streamline processes. Where a young person has an acute medical issue further work is also needed to ensure that professionals involved in their care and treatment are aware and inform the young people of the transition offer.

- 2.8. To ensure that we are changing what we do now to make it more outcome focused as a holistic system, work has started on a co-produced strategy. The foundation for this is a wide range of ongoing consultation with partners; and critically with young people and their parents / carers.

Actions to Date

- 2.9. Written report and verbal presentation to the Manchester Children's Safeguarding Board; the Manchester Safeguarding Adults Board and to Health Scrutiny Committee.
- 2.10. Consultation to date has been extensive across the health, care and education system within the City and engagement with self-advocates, parent and carers and young people is ongoing. A 'one-tool' approach has been taken to seek views in the format of a 'Working / Not Working' and 'Hopes and Fears' template. The topics for consultation have been taken from the Greater Manchester Learning Disability Delivery Group and the Greater Manchester Autism Consortium (GMAC). They are areas that would be covered in a pathway plan for our children who are care leavers and include the themes of employment, training, relationships and housing.
- 2.11. Pathway planning by Children's Services for those eligible for care leavers support is a statutory requirement. This work has been started with the Manchester People First confirm and challenge group, the parent / carer forum, the Preparation for Adulthood network; and will be done with parent / carer champions on 1 March 2019. The young people's Special Educational Needs (SEN) Engagement Officer is going to complete the same work with young people's consultation groups. Once consultation is complete it will be used to contribute to the future strategy.
- 2.12. Partnership working with the Deputy Director of Children's Services and his team has been ongoing as it has been across the wider health and social care system. This has included:
- jointly facilitated system-wide workshops led by the Deputy Directors of Children's and Adults;
 - key partner's meetings led by the Director of Adults and Deputy Director of Children's Services;
 - the initial draft design of a transition service and SWOT analysis;
 - ongoing work through the multiagency panel (alongside education and children's health commissioners) to develop a more strategic approach to commissioning; and
 - agreement to jointly fund a leadership post working across children's and adult social care so that the authority to implement changes across the whole social care system can be completed.
- 2.13. In addition to strengthening leadership across the system to drive change, the structure within adult social care has been strengthened to enable the design, implementation and governance of strategy to be embedded. This includes appointment to post of the Assistant Director for Complex Needs under which

the Transition Planning Team now sit. Transition is part of the Adult social care improvement plan that has been worked on for the last four months.

2.14. Partnerships required to develop transition extend beyond the Council. Wider partnerships include the Parent Carer Forum, Greater Manchester Mental Health Trust (GMMHT), health commissioners and other health providers are all part of the system and are essential to affect change. Work has been ongoing since a system wide workshop of February 2018 which kicked-off this process of focused engagement with partners. Each shall be represented at the Transition Board at which aims, outcomes, design and governance of a system approach to transition for our young people and their families / carers can be agreed.

Further Actions and Timeline

2.15. Clearly there is more to do in the finalisation of a transitions strategy, governance and delivery model. Significant time has been invested in consultation and engagement to date and further consultation is planned to ensure that a new approach secures the buy-in not just of parents but also, crucially, is based on the views and views of children, young people and carers. The key actions planned over the next nine months are as follows:

- The first system wide Transition Board meeting is to take place on 19 March 2019. The first Board will focus on terms of reference, membership, governance and a work plan. This Board will meet bi-monthly to oversee and drive progress and actions.
- Development of role profile for joint post (grade 12) for submission for formal sign off between children's and adults social care (April 2019).
- Critical, accurate management information available to the Transitions Planning Team through the current social care system is limited and should be addressed as part of implementation of the new Liquid Logic system. A sign off meeting is in place to confirm performance reporting requirements from the system (April 2019)
- Consultation work is ongoing and parent / carer feedback and young people's feedback consultation sessions need to take place before the end of Summer term. The strategy will be informed by the outcomes of consultation and a first draft to be presented to the Transition Board November 2019.
- We will utilise the recently published National Institute for Health and Care Excellence (NICE) guidance on planning for transitions to evaluate the effectiveness of our approach to improving services for children to who require services into adulthood.

2.16. In summary the time taken to fully address the risks confirmed in the Internal Audit of transitions will significantly exceed the initial deadlines agreed for the completion of actions. This is due the holistic, system-wide approach being taken and scale of consultation with both partners but also with parents, carers and young people to ensure that the strategy and related governance and operational roles and responsibilities agreed are sustainable and can meet both

current future needs for Manchester children and young people and their parents/ carers.

3. Homecare Contacts

Audit Findings

- 3.1. The limited assurance report on homecare contract governance was finalised on 7 March 2018. This was an area where a need for improvement had been acknowledged by service management and the audit assessment has helped focus improvement actions based on the following key issues:
- Level of scrutiny and payment to providers on and off framework was not always equitable.
 - Not all suppliers were being monitored as required and monitoring focuses on organisations' records and not quality of care.
 - Volumes of payments going through the manual system mean that levels of validation checks are less than audit would expect.
 - Full reporting of variances between commissioned and invoiced hours did not take place

Homecare Contracts: Background Context

- 3.2. The gross homecare budget for 2018/19 is £16.9m. This equates to approximately 26,000 hours of homecare a week. In December 2018 1,857 people were using homecare provided via Council contracts and a further 126 people living in Extra Care schemes included in the tender process also use homecare.
- 3.3. 85% of the people who use homecare are aged over 65. Some people under 65 with Learning Disabilities and Mental Health issues also use homecare services.
- 3.4. Adult Services last commissioned homecare in 2008, on a framework basis. A number of providers are also commissioned on individual 'spot' contracts. About a third of total homecare hours are delivered through spot contracts and over 40 providers are contracted (spot and framework) to deliver this support to Manchester residents.

Actions to Date

- 3.5. Adults Services have used feedback from citizens, in-depth health and care data about the homecare cohort and co-design work with homecare providers and with professionals across the health and care system, to design and specify a new model of homecare.
- 3.6. The model was endorsed by Health Scrutiny Committee on 4 September 2018 and has the following key differences with the existing model:

- Moves away from **time and task** by using a budget of hours: homecare workers will plan with people how to use hours of homecare to help achieve the **outcomes** which matter to them most.
 - **Strengths based:** homecare workers helping build or maintain independence, doing tasks with, not for.
 - **Continuity of care:** small, core team of care workers, known to the homecare user and their family.
 - **Place based:** neighbourhood model with providers picking up all packages of care in their area (meaning an end to spot purchasing). Providers and Integrated Neighbourhood Teams (INTs) to build relationships, at all levels, facilitated by Link Managers. Escalation routes for homecare workers into 'the system'.
 - **Trust and partnership:** stronger role for providers in assessment and review. More freedom for providers to take decisions with people who use homecare, without always needing permission. Ability to flex, increase and decrease a package of care, within limits.
- 3.7. At the end of September 2018 procurement tenders were published for 12 lots, based on the footprint of health and care Integrated Neighbourhood Teams. There was a positive response to the tender process and evaluation, which took account of advice from a service user panel, has been completed. Awards are now progressing through the internal decision making reporting stages prior to award of contracts. The decision making timeline allows for at least the recommended 12 week mobilisation period and with new contracts expected to go live in the summer.

Suspensions and Payments

- 3.8. In the interim, in advance of new contracts, arrangements were amended to provide greater assurance over the completeness of billing and payment arrangements.
- 3.9. Team Managers now check a suspended invoices spreadsheet sent from the Commissioning Team to ensure that any issues are picked up with providers. For example, where there are significant variances between actual and contracted hours, managers check to see if there is any explanation for this and raise any issues with providers. For those that have repeat entries, where they are constantly above or below contracted hours, these are allocated for review/reassessment to ensure citizens are receiving the right level of care, and where there are invoice errors, managers contact the Finance Team who arrange to recover any overpayment.
- 3.10. As the service moves into 12 Integrated Neighbourhood Teams and works with neighbourhood providers in the new model managers will reinstate monthly meetings with home care providers with suspended invoices as an agenda item

so individual cases can be discussed in details. The Service is currently recruiting more managers as part of the Adults Improvements Plan and this will support capacity going forward.

Further Actions and Timeline

- 3.11. Work is currently underway to recruit staff to form the mobilisation team, some of whom will have the ongoing responsibility to work closely with the new homecare providers to ensure the service is of a high quality and can develop further over time. Once contracts are awarded these officers work closely with our new group of providers to plan mobilisation in detail and once mobilisation is complete the service will work with the provider group to plan full implementation of the model. This is planned for the end August 2019.

4. Conclusion

- 4.1. There have been a significant number of actions taken and further planned in respect of these areas identified as requiring improvement by management and supported through the work of Internal Audit work. We continue to work closely with audit colleagues in providing updates.
- 4.2. Whilst work on the redesign and recommissioning of Homecare Contracts is nearing completion, there is more to do on transitions to ensure that changes are system wide, sustainable and are centred around delivery of two of the key Council priorities: Young People and Healthy; Cared for People. This work will continue in 2019 and subject to Members' comments, a further detailed update on assurance over progress is proposed to be presented to Audit Committee in the autumn.

5. Recommendation

- 5.1. Audit Committee is requested to consider the assurance provided by the updates on actions taken in addressing risks noted in the Transitions (Children's to Adults) and Homecare Contracts internal audit reports.