

Appendix 2 – Recommendations Over 9 Months Overdue

Audit Title	Due Date	Recommendation	Management Response	Update/Opinion	Ownership and Actions
<p>Homecare Services – Contract Management</p> <p>7 March 2018</p>	<p>31 May 2018</p>	<p>The Strategic Commissioning Manager in liaison with the Head of Social Work and Head of Adults Finance should put in place a clear process for the reporting, investigation and follow up of variations in invoice value / care provision immediately.</p> <p>This should involve:</p> <ul style="list-style-type: none"> •A clear policy on the levels of upwards and downwards variation that should be reported / investigated. •Clear designation of responsibility for investigating variances and the action that to be taken on overpayments. •How variations are prioritised and a target timeline for investigation based on priority. •An evidence trail of actions taken confirming the approval of any payment for variation to planned care. •Reporting so that management can be assured 	<p>Commissioning Manager will draft a pro forma for the finance and front line services to follow in the event of underpayments, this will need to be proportionate with the risk associated to it. The work will have an impact on capacity due to the size and number of services involved.</p> <p>Policy and process for over payment is already in place, Strategic Lead, Social Care will undertake checks that teams are following this.</p> <p>Head of Adults Finance will work with Head of Social Care and Commissioning</p>	<p>The Assistant Directors attended Audit Committee March 2019 to provide an update on actions taken in progressing the outstanding recommendation.</p> <p>In advance of the new framework contract, control arrangements were amended to provide greater assurance over variations. Any significant variances between actual and contracted hours are looked into by managers to see if there is an explanation and this is then raised with the provider. Those which are continually above or below contracted hours are allocated for review/reassessment to ensure citizens are receiving the right level of care. In order to support capacity going forward the service is currently recruiting more managers as part of the Adults Improvement Plan.</p>	<p>Director: Bernie Enright Strategic Director Commissioning</p> <p>Executive Member: Councillor Craig</p> <p>Status: 13 months overdue</p> <p>Action: Notification of overdue recommendation letter issued to Executive Member and Director December 2018. Attendance at Audit Committee March 2019.</p> <p>A new target date of October 2019 was agreed when Internal Audit will seek further updates.</p>

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		that investigations and recovery are taking place.	Manager to review the decision on suspensions. This will include an analysis of whether it is appropriate to re-introduce the earlier suspensions policy. In addition to this the Payments Team Leader will run a periodic report for the Commissioning Manager based on weekly delivery against planned for both under and over delivery.	Internal Audit Opinion: Partially Implemented	
Transition to Adult Services	31 October 2018	The Interim Deputy Director of Adults Social Services should ensure that within six months an operational plan is in place for delivering the revised transitions offer in line with the agreed strategy and vision. This plan should include the formalisation of policy and procedure, roles and responsibilities and the use of transition specific	Operational Plan in place for delivering the revised transitions offer in line with the agreed strategy and vision	Action has been taken to amend and strengthen working practices within the transitions team. The Locality Strategy Manager, Learning Disability is continuing to engage with stakeholders from groups eligible for transitions where there has previously not been a pathway into the service such as mental health. The Assistant Director has	<p>Director: Bernadette Enright, Director of Adults Services</p> <p>Executive Member: Councillor Craig</p> <p>Status: Eight months overdue</p> <p>Action: Notification of overdue</p>

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		documentation referred to in NICE guidance.		<p>confirmed she is trying to get interim senior manager in post to support the structural change as they are unable to advertise for permanent senior management post until the structure has been agreed. Project Management support has also been requested for what is a large change project. The changes to Transitions has been included in the Adults Improvement Plan and delivery monitored.</p> <p>Internal Audit Opinion: Partially implemented</p>	<p>recommendation letter to be issued to Executive Member and Director in July 2019 requesting an update to Audit Committee as part of the Adults Improvement Plan delivery.</p>
Transition to Adult Services	30 April 2018	The Interim Deputy Director of Adults Social Services should develop a clear transitions strategy and vision in conjunction with Children's Services and other key partners, in line with Care Act requirements. Once developed the strategy and vision should be used to inform the development of a clear service offer for transitions. This offer should be clearly	Transitions Strategy and Vision to be developed	There has been considerable slippage in the implementation of this recommendation and significant management change has been made since the recommendation was agree. However the new management team are now in place and committed to addressing the issues as a matter of priority. Addressing the ongoing issues in relations to the transitions offer is a key	<p>Director: Bernie Enright, Director of Adult Services</p> <p>Executive Member: Councillor Craig</p> <p>Status: 14 months overdue</p> <p>Action: Notification of overdue recommendation letter</p>

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		<p>communicated to confirmed key stakeholders including service users.</p> <p>Advice could be sought from other Local Authorities including the Council's Adults Services improvement partner, and differing approaches considered.</p>		<p>element of the Adults Social Care Improvement Plan.</p> <p>Work has continued by the Assistant Director, Complex Needs to engage with key partners and stakeholders to develop the offer. The Assistant Director met with the Directors of Children's, Adults and Education Services to share ideas and priorities.</p> <p>Work is also ongoing to try to get an interim appointment in place as unable to advertise for the permanent senior management position until the structure has been agreed. Also the AD is trying to get project management support for the change project.</p> <p>Internal Audit Opinion: Partially Implemented</p>	<p>to be issued to Executive Member and Director in July 2019 requesting an updated to Audit Committee as part of the Adults Improvement Plan delivery.</p>
Transitions to Adult Services	30 June 2018	To support day to day performance management the Interim Deputy Director of Adults Social Services should introduce a suite of Key	Key performance Indicators (KPIs) introduced.	Work to develop KPIs will be informed by the development of the strategy, vision and operational practices for the Transition Services	<p>Director: Bernie Enright Director of Adult Services</p> <p>Executive Member:</p>

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		<p>Performance Indicators. This should be defined once the strategy and vision in place.</p> <p>A long term solution should be considered and built into Liquid Logic to help identify performance trends and provide assurance to senior management.</p>		<p>Progress on this recommendation will be linked to the strategy development timeframe.</p> <p>Internal Audit Opinion: Outstanding</p>	<p>Councillor Craig</p> <p>Status: 12 months overdue</p> <p>Action: Notification of overdue recommendation letter to be issued to Executive Member and Director in July 2019 requesting an update to Audit Committee as part of the Adults Improvement Plan delivery.</p>
<p>Disability Supported Accommodation Services: Quality Assurance Framework</p> <p>14 February 2018</p>	<p>31 August 2018</p>	<p>Management should consider which key areas of the Care Act registered managers and support coordinators should provide assurance over for all citizens in their properties. To support this, there will need to be:</p> <ul style="list-style-type: none"> A register of each citizen, staff member and property which should be monitored 	<p>I agree with the activity identified within recommendation 1.</p> <p>Register of all details including residents; staff and properties to be sent to PRI.</p>	<p>The Programme Lead and the Service Manager for Disability Accommodation Services provided Internal Audit with an update on progress made. They confirmed that a register was in place and management were satisfied that this was up to date.</p> <p>Internal Audit have not yet been able to see and validate this register and have asked</p>	<p>Director: Bernadette Enright, Director Adult Services</p> <p>Executive Member: Councillor Craig</p> <p>Status: Ten months overdue</p> <p>Action: Issue Follow Up Audit Report July 2019</p>

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		<p>centrally to ensure full, timely coverage.</p> <ul style="list-style-type: none"> • Each Centre's own registered manager and support coordinators should complete these checks as soon as possible to support the CQC inspections and provide results to the Interim Service Manager (DSAS) and Programme Lead. • Accountability for registered managers and support coordinators to implement any actions that are identified. Results can then be assessed and addressed at a strategic level if further support or resources are needed. • Clarity as to how registered managers assure themselves that quality control checks are built into day to day service provision. This should help inform the QA Framework, allowing auditors to provide an opinion on these 		<p>for further information as part of a planned follow up audit to enable this to be assessed. A meeting was held with the Head of Service and further request for this information has been made.</p> <p>Internal Audit Opinion: Partially Implemented</p>	

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		arrangements rather than lower level, task specific compliance.			
Disability Supported Accommodation Services: Quality Assurance Framework 14 February 2018	31 August 2018	Management should consider integrating oversight of the Supported Living QA process into the role of Adults QA team and revise the content of the Framework. This could include: <ul style="list-style-type: none"> • A workshop including key partners, support coordinators and registered managers used to inform a revised framework. • Supporting an effective QA audit process and clarifying whether inquiry or inspection of evidence is required for each question/section and QA auditors recording where this has been done. • Where assurance is being, or should be, sought from more specialist input such as HR, Health and Safety, Risk and Resilience, Corporate Property, 	With regard to recommendation 2 whilst I have welcomed the support and expertise the Adults QA Team have provided to date and would want this to continue going forward I do not think it is appropriate to integrate oversight into the role of the Adults QA Team. The service is a commissioned In House Provider and is regulated and inspected by CQC and is also subject to commissioning reviews by the contracts team. However it will be helpful to be able to access the QA	The workshops were undertaken and management confirmed that a revised audit tool is now in place. Evidence to support implementation. was delayed since the last update however this has recently been received and will be evaluated in July 2019 as part of the planned follow up audit. Internal Audit Opinion: Partially Implemented	Director: Bernadette Enright, Director Adult Services Executive Member: Councillor Craig Status: Ten months overdue Action: Issue Follow Up Audit Report July 2019

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		<p>Contract Monitoring and Learning and Events teams.</p> <p>Internal Audit propose to support development action by assisting management in the development and delivery of a redesign workshop.</p>	<p>Team's support for the further development work we have planned. Also in terms of oversight and challenge this will be provided through the Adults Quality Assurance and Performance Board.</p> <p>Workshops with staff and stakeholders to review and propose any desired changes to: QA Framework; Audit Tool and Guidance Documentation to be delivered throughout March and April.</p>		