

To the Chair and Members of Audit Committee

ADULTS, HEALTH AND WELLBEING AUDIT RECOMMENDATIONS PROGRESS REPORT:

EXECUTIVE SUMMARY

1. Audit Committee at its meeting in September noted the current progress being made in relation to the outstanding actions within Adults Health and Wellbeing and requested further update at the next meeting scheduled for January 2016 particularly in relation to the Major Risks.
2. This report provides the basis for a further update on the completion of recommendations since April and those that were still outstanding as at 31 December 2015. The table below gives a brief overview of the progress made and the current position:

Progress in relation to the 84 original recommendations					Current Position including new actions
	Feb 2015	June 2015	August 2015	December 2015	
Major Risk	7	6	2	2	2
Significant Risk	73	27	22	19	25
Moderate Risk	11	1	1	1	3
Total	84	34	25	22	30

3. Some progress has been made in reducing the number of outstanding recommendations since the last meeting in September, but there are still 22 of the original 84 actions outstanding. The reason for this is the length of time it is anticipated to deliver the required outcomes and individual deadlines have been extended appropriately to accommodate this. In addition to the 84 original actions from February 2015, a further 7 significant and 3 moderate actions have been issued resulting from the completion of two further audits.
4. Since the last Audit Committee Meeting in September, five actions have been signed off as completed (4 significant and 1 moderate – made up of three significant actions from the original 84 actions plus one significant and one moderate action from from the improvement plans that have been issued since February 2015) There are currently 30 outstanding actions within the directorate and these are all currently being addressed. This is made up of 22

recommendations remaining from the original 84 and 8 from the 10 actions that have been added since February 2015.

5. One action relating to Section 117 emergency payments that had previously been de-escalated from Major risk to Significant risk, has now been completed.
6. There are two “Major” risks outstanding; both have progressed since the last meeting:
 - The Debtors’ Write-Off process has been transferred to Professional Business Support and whilst the deadline has been extended, work is ongoing and it is currently on track to be delivered within the revised deadline of 31/03/2016
 - In relation to the Resource Allocation System (RAS), calibration has commenced and substantial progress has been made in relation to the analysis. It is acknowledged that the some of the stages within action plan timeline have slipped and this is mainly due to the availability of the external RAS expert who is supporting the process, but a meeting has been scheduled for the 15th January to look at progress and review the timeline, However, it appears that there will not be much change to the overall timeline which has a completion date of 29/02/2016

Table 1 provides a more detailed update on the Major risks. **Annexes 1 and 2** show action plans relating to the two remaining Major risks.

7. Of the 24 actions still outstanding from the original 84, ten sit within one improvement plan which relates to Direct Payments/Personal Budgets. Both major actions sit within this area and are dealt with separately within this report. Of the remaining 8, due to recent structural changes a meeting has been held with the Head of Service to reallocate ownership of these actions and a further meeting is to be arranged imminently with the new owners to determine a way forward for the completion of these actions.
8. It should also be noted that a further audit of Direct Payments/Personal Budgets is currently ongoing and indications are that there will be a further improvement plan which when produced will be managed alongside the current actions. Internal Audit are encouraged by progress being made in this area and the positive approach by both staff and management within both the Adults, Health and Wellbeing and Finance and Corporate Services directorates

RECOMMENDATIONS

9. **Audit Committee is asked to:**
 - a) **Note the update on current recommendations.**

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

10. Audits and subsequent improvement plans are designed to improve services, make them more efficient and effective and identify issues with processes that could cause reputational and financial damage to the authority. By delivering the audit recommendations, the interactions between the authority and citizens should be a more positive experience, work will be progressed more quickly which will mean that individuals will achieve their outcomes much more quickly and the potential for them receiving confusing or conflicting information will be greatly reduced.

BACKGROUND

11. This report provides audit committee with a further update on the progress of outstanding audit recommendations within Adults, Health and Wellbeing.

IMPACT ON THE COUNCIL'S KEY OUTCOMES

12. Any improvement in the management of the risks will have a positive impact thereby increasing the likelihood of the Adults, Health and Wellbeing achieving its objectives. Monitoring and implementing Internal Audit's recommendations is therefore relevant to all priorities but in particular the following:

Outcomes	Implications
Council services are modern and value for money.	By delivering audit action plans performance will improve and increase the effectiveness and efficiency of a whole range of services across the directorate.
Working with our partners we will provide strong leadership and governance.	The work undertaken to address and implement audit actions will drive forward performance improvements across the directorate

RISKS AND ASSUMPTIONS

13. The implementation of audit recommendations is a response to identified risks and hence is an effective risk management action.

LEGAL IMPLICATIONS

14. Part of the process is to identify issues that could have open the council up to litigation, therefore by delivering the recommended improvements there can be more confidence that processes are compliant and less likely to be subject to challenge.

CONSULTATION

15. There have been a number of meetings between the Directorate and internal Audit.

This report has significant implications in terms of the following:

Procurement		Crime & Disorder	
Human Resources		Human Rights & Equalities	
Buildings, Land and Occupiers		Environment & Sustainability	
ICT		Capital Programme	
Directorate Strategies and Policies		The Care Act	

BACKGROUND PAPERS

16. Internal Audit Reports

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Table 1 below highlights the current situation of the 2 Major Risks

Action	Service Area	Comments
Direct Payments/ Personal Budgets – Manage and Monitor Debtor Accounts	M & C	This process has now moved to Professional Business Support and it has been reported that progress is being made and completion within the revised deadline is anticipated. Training is underway to strengthen social care workers role supporting financial management for service users.
Direct Payments/ Personal Budgets – Improve the Resource Allocation System	M & C	Almost 70 cases have been scrutinised in depth to determine whether variances between the RAS and the final budget amount are due to the RAS calibration or the use of the new RAS (or both). Findings are currently being analysed but the indications are that no or only minimal changes to the calibration will be recommended...

Direct Payments/ Personal Budgets – Manage and Monitor Debtor Accounts Action Plan

Milestone	Target Date	Date Completed	Interdependencies	Status Update
Backfill vacant post and identify nature of current outstanding monies	August 2015	October 15	HR processes	<p>Commenced working through outstanding debtor accounts to establish nature of debt.</p> <p>Implemented monitoring procedures to ensure balances and contributions are managed effectively.</p> <p>Commenced recruitment to backfill vacant posts to undertake audit and recovery work.</p> <p>Direct payment policy and processes to be reviewed to ensure more robust.</p> <p>Decision taken that direct payment account (Card account) will be the default position for the first 6 months of a new direct payment to allow easy audit and support of new accounts to reduce likelihood of debts accruing and non-payment of contributions</p>
Establish process for recovery action	September 2015	November 15		
Establish proactive approach to monitoring balances and contributions	July 2015	December 15		
Engagement with Legal services on recovery of outstanding raised debtor accounts	July 2015	October 15		
Audits up to date to end March 2015	January 2016		Direct payments Policy	
Evaluate findings of exercise to inform revised assessment and review processes	March 2016			

RAS Action Plan

Task	Deadline	Date Achieved	Progress	Comments
RAS developed, tested and calibrated ready for go live	10/11/2014	10/11/2014	Complete	
Go Live of new RAS	01/04/2015	01/04/2015	Complete	Interdependencies with wider Re-Script project and Care Act changes relating to eligibility and carers meant that that the RAS roll out date had to coincide with the go live date for the Re-Script on 1/4/15.
Specify requirements, agree re-calibration methodology and sign off proposal for re-calibration work	31/07/2015		Complete	Approval has now been granted for external consultant's (OLM) involvement in developing the recalibration process and discussions have commenced
Analyse data, identify issues and investigate results to determine change requirements	31/12/2015		In Progress	The extent of work required at this stage is unknown until the number of cases that fall outside the acceptable range have been determined. Detailed scrutiny of outlier cases will be required to determine root cause and inform the re-calibration.
Produce calibration options and recommendations	15/01/2016			
Obtain sign off for re-calibration option for go live	31/01/2016			
Configure and test in CareFirst and sign-off for go live	29/02/2016			

Notes:

A number of measures to manage risk have been included in the roll out of the new RAS:

Controls are included within the new Re-Script process and forms on the new CareFirst system to manage risk and to ensure that budget allocations are appropriate. This includes evidence based practise for any changes in the budget amount that require manager or Risk Panel decision for the change to take place.

Under the new RAS system, Workers are required to evidence their judgements around needs, risk frequency and risk severity which managers scrutinise prior to authorisation.

Additionally the initial RAS calibration that was rolled out includes a 15% contingency which means that the funding pot was reduced by 15% to manage the risk of it being a new RAS and to make provision for referrals to Risk Panel for an increase in the RAS amount.