



## **Devon Audit Partnership**

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Devon Audit Partnership has been formed under a joint committee arrangement comprising of Plymouth, Torbay, Devon, Torridge and Mid-Devon councils and we aim to be recognised as a high quality public sector service provider.

We work with our partners by providing professional internal audit and assurance services that will assist them in meeting their challenges, managing their risks and achieving their goals. In carrying out our work we are required to comply with the Public Sector Internal Audit Standards (PSIAS) along with other best practice and professional standards.

The Partnership is committed to providing high quality, professional customer services to all; if you have any comments or suggestions on our service, processes or standards, the Head of Partnership would be pleased to receive them at [robert.hutchins@devonaudit.gov.uk](mailto:robert.hutchins@devonaudit.gov.uk).

## **Confidentiality and Disclosure Clause**

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This report is protectively marked in accordance with the National Protective Marking Scheme. Its contents are confidential and, whilst it is accepted that issues raised may well need to be discussed with other officers within the organisation, the report itself should only be copied/circulated/disclosed to anyone outside of the organisation in line with the organisation's disclosure policies.

This report is prepared for the organisation's use. We can take no responsibility to any third party for any reliance they might place upon it.

## 1 Introduction

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Plymouth City Council and Northern, Eastern and Western Devon Clinical Commissioning Group (NEW Devon CCG) formed an Integrated Commissioning function to allow budgets to be pooled and resources and management to be integrated. This provided the opportunity to commission an integrated provider function for health and social care with an aim to improving health and wellbeing outcomes for people in Plymouth and to improve people's experience of care.

In April 2015, Plymouth City Council's Adult Social Care workers transferred to a new provider organisation; Livewell Southwest (formally PCH) to allow for an integrated delivery of Adult Social Care Services. Currently, there are a number of statutory duties which cannot be delegated to a provider and remain within the retained client function within Plymouth City Council.

To ensure accountability is not lost, Plymouth City Council require a robust oversight as the responsibility of the service remains with the Local Authority despite services being outsourced.

## 2 Audit Opinion

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**Good Standard** – The systems and controls generally mitigate the risks identified but a few weaknesses have been identified and / or mitigating controls may not be fully applied. There are no significant matters arising for the audit and the recommendations made serve to strengthen what are mainly reliable procedures.

## 3 Executive Summary

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Livewell Southwest and Plymouth City Council (PCC) have been working together, since the transfer of Adult Social Care (ASC) staff in 2015 to deliver effective community based and residential services to the people of Plymouth. The audit found evidence of good collaborative working relationships with regular and effective communication between managers and staff across the organisations. There was also evidence of staff working together across the organisations to achieve reductions in spending, make savings and address debt management issues.

There is a dedicated team of staff within Livewell Southwest who carry out focussed reviews on areas where savings can be achieved. Regular "budget containment" meetings are held, comprising of both PCC and Livewell Southwest staff, with Livewell Southwest having achieved the savings targets that they have been set each year. Meetings also regularly take place between the organisations to look at ways of reducing the overall debt owed by Adult Social Care service users and improving the collection rate of client contributions. A number of specific cases with high levels of outstanding debt are reviewed jointly by PCC and Livewell Southwest each month in order to identify the reasons why debt has accrued and to take steps to rectify the situation.

There is an up-to-date Scheme of Delegation in place, for Livewell Southwest staff, which details the delegated financial limits for authorisation for Community Services and Residential/Nursing Care. This is reviewed by PCC regularly and both PCC and Livewell Southwest are satisfied that the authorisation levels set within it are appropriate. High value cases are considered at Panel, which is chaired by the Deputy Director of Operations and decisions are recorded on a spreadsheet.

Joint workforce development is improving with mandatory joint training sessions carried out by Livewell Southwest and PCC now in place and being delivered for Adult Social Care workers. There are plans for a centralised electronic record of training available and attended with a Business Administrator post to ensure all staff receive the necessary training and non-attendance is followed up. In addition there is a comprehensive induction programme in place for new staff in Livewell Southwest with additional areas covered for ASC staff. Currently guidance documents are duplicated on both the PCC system and Livewell Southwest intranet with both PCC and Livewell Southwest producing their own guidance for the areas for which they are responsible. There is a process in place to ensure PCC documents are included on the Livewell Southwest intranet site, however, the audit review did find instances where this had not happened correctly or in a timely way. There is potential to resolve this situation through setting up a SharePoint site to enable the sharing of documents through a secure, centralised database.

The meetings held between PCC and Livewell Southwest with a view to reducing ASC debt are not formally recorded. Several useful suggestions have been made at these meetings but again, without formal minutes being taken and a review of previous minutes, there is a risk that these suggestions may not come to fruition and agreed actions may not be taken.

There is no process in place for the removal of a financial representative from a service users record. One case was found where permission was given by the Advanced Practitioner to remove a financial representative from the records without a reassessment on the service user being carried out. The financial representative was removed without a replacement being found. Invoices continued to be raised without anyone accepting responsibility for the continued, increasing debt.

The detailed findings and recommendations regarding these issues and less important matters are described in the Appendices. Recommendations have been categorised to aid prioritisation. Definitions of the priority categories and the assurance opinion ratings are also given in the Appendices to this report.

## **4 Assurance Opinion on Specific Sections**

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The following table summarises our assurance opinions on each of the areas covered during the audit. These combine to provide the overall assurance opinion at Section 2. Definitions of the assurance opinion ratings can be found in the Appendices.

Areas Covered		Level of Assurance
1	Money is spent appropriately in line with Procedures	Good Standard
2	Functions are carried out correctly, in line with processes	Good Standard

The findings and recommendations in relation to each of these areas are discussed in the "Detailed Audit Observations and Action Plan" appendix. This appendix records the action plan agreed by management to enhance the internal control framework and mitigate identified risks where agreed.

## 5 Issues for the Annual Governance Statement

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The evidence obtained in internal audit reviews can identify issues in respect of risk management, systems and controls that may be relevant to the Annual Governance Statement.

We are pleased to report that there are no issues that warrant inclusion in the Annual Governance Statement.

## 6 Scope and Objectives

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In April 2015, Plymouth City Council's Adult Social Care workers transferred to a new provider organisation; Livewell Southwest (formally PCH) to allow for an integrated delivery of Adult Social Care Services.

The objective of this audit was to evaluate and report on the adequacy of the controls, processes and procedures operating within Livewell Southwest. Consideration was also given to the effectiveness of the retained client function and its ability to support and facilitate Livewell Southwest in leveraging and innovations necessary to deliver the business outcomes required by Plymouth City Council in the delivery of Adult Social Care services.

The review focussed on the following areas:

- PCC processes, including The Scheme of Delegation, are in place and being adhered to;
- Levels within the Scheme of Delegation are appropriate;
- Verification process for care packages is being followed;
- Best value options have been explored, reflected in the support plan and authorised;
- Management checks include ensuring support plans are fit for purpose and in line with assessments;
- Joint workforce development is carried out consistently for inductions, refresher training and professional development.

## **7 Inherent Limitations**

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The opinions and recommendations contained within this report are based on our examination of restricted samples of transactions / records and our discussions with officers responsible for the processes reviewed.

## **8 Acknowledgements**

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We would like to express our thanks and appreciation to all those who provided support and assistance during the course of this audit.

**Robert Hutchins**  
**Head of Partnership**

**Detailed Audit Observations and Action Plan**

1. Area Covered: Money is spent appropriately in line with Procedures		Level of Assurance
<p><b>Opinion Statement:</b>                      A current up to date Scheme of Delegation for approval of support plans and the procedures that must be followed by Livewell Southwest is in place. The Scheme states that community packages of care over £350 per week and Residential/Nursing placements greater than the base rates in the Scheme must be submitted to Panel for approval. A spreadsheet record is maintained of all cases submitted to Panel and their outcomes. The reasons for deferment or why services were not agreed are also recorded on the spreadsheet. From reviewing the spreadsheet it was established that approx 3% of cases which had been deferred/not agreed were due to errors or missing documentation /information.</p> <p>There is no process in place for monitoring cases that are required for resubmission to Panel, therefore these cases are not followed up. There is no evidence to suggest that cases are not resubmitted at the required time, however, there is the risk that services could continue passed the agreed timeframe without being identified and reconsidered if there is no monitoring process in place. In addition, the Authorisation Proforma document which must be completed and submitted for each case being taken to Panel was not always completed and saved electronically.</p> <p>There is a Budget Containment Project Group in place with representatives from PCC and Livewell Southwest. Budget containment meetings occur regularly and a team of Livewell Southwest staff is in place to work specifically on identified areas in order to generate savings through reduction in spending on specific high cost packages. Savings are reported back to the budget containment meetings. In addition to the budget containment exercises, meetings also take place between Livewell Southwest and PCC to review overall ASC debt and (separately) to identify and work on specific cases in order to reduce ASC debt. The cases selected for review are large debts taken from the Debtors over £10k report, however it would also be useful to select lesser debts with a view to getting payments back on track before debts become unmanageable.</p>		<p><b>Good Standard</b></p>
No.	Observation and implications	
1.1	<p>When a service user selects a residential home which charges over the base rate in the Scheme of Delegation, the service user/family can opt to top up the difference if they have sufficient funds. The Council is responsible for the payment to the home of the full cost of the package. The "top up" is then recharged to the service user or family.</p> <p>The Scheme of Delegation section 7.2 states: support plans for Residential or Nursing placements which include a "1st or 3rd party top up" can only be authorised by the Service Manager if the base rate is no greater than the amounts shown above" (in the Scheme of Delegation).</p>	

	<p>In effect, this means that the Service Manager can authorise a care package much higher than the base rate, provided the difference is to be paid via a 1st or 3rd party top up. There is no requirement for these cases to be submitted to panel, if the cost is over the Scheme of Delegation amount. However, if the 1st or 3rd party top up is not paid, then the Council is left with the debt.</p> <p>There have been recent instances where the top up has been difficult to recover. Examples include a family member claiming that they did not understand the requirement to pay both a contribution and a top up and a case where the family member signed up to pay the top up fee but was unable to afford to do so.</p>		
	Recommendation	Priority	Management response and action plan including responsible officer
1.1.1	<p>Consideration should be given as to whether there is merit in cases which include a 1st/3rd party top up being agreed by panel. This could provide better oversight for these cases and help to ensure that the difference is likely to be paid.</p>	Opportunity	<p>The Scheme of Delegation has been updated (as from 5 July 2018) to amend the level of authorisation for 1<sup>st</sup>/3<sup>rd</sup> party top-ups to the bottom line cost. Cases will therefore be authorised at panel.</p> <p>Target Date: Implemented</p>
1.1.2	<p>Training for staff should include 1st and 3rd party top ups. This will provide staff with the understanding and confidence to ensure that person(s) committing to make top up payments fully understand the financial undertaking they are signing up to. Staff should be encouraged to make a record of the conversations they have had with service user and family regarding financial assessments, contributions and top ups to evidence that there is a clear understanding of responsibility.</p> <p>Cases that require urgent intervention because the top up payment is not being met should be reviewed. Where top up payments cannot be met, then another placement at the base rate cost may need to be found.</p>	Medium	<p>The Scheme of Delegation has been updated to amend the level of authorisation for 1<sup>st</sup>/3<sup>rd</sup> party top-ups to the bottom line cost. In addition guidance notes were sent to Adult Social Care workers in March 2018 and information is provided on the intranet and during Care Act Training. A prompt will also be added to the Support Plan checklist.</p> <p>Responsible Officer: Service Manager, Livewell Southwest (ES) Target Date: 31 August 2018</p>
No.	Observation and implications		
1.2	<p>High value packages of care must be authorised at Panel in line with the Scheme of Delegation. Many of these cases are agreed on a temporary basis to be reviewed again in the future, at which time they must be resubmitted to panel for further consideration. It was found that there is no process in place to monitor these cases to ensure that they are brought back to panel at the required time. Without a process in place there is a risk that services could continue past the agreed timeframe without the Deputy Director being aware.</p>		

	Recommendation	Priority	Management response and action plan including responsible officer
1.2.1	A process needs to be put in place to record and monitor those cases where the service has been agreed for a specified period of time only to ensure they are brought back to panel at the appropriate time.	Medium	<p>An additional check will be added to the panel process.</p> <p>Responsible Officer: Deputy Director of Operations, Livewell Southwest (SW) Target Date: 31 August 2018</p> <p>Further to this consideration will be given to implementing a way of monitoring the lower cost cases which are not authorised at panel.</p>
No.	Observation and implications		
1.3	An "Authorisation Proforma" must be completed and submitted to the panel for consideration. The Authorisation Proforma is the evidence that the service and cost has been agreed. It also includes a summary of the case for consideration at panel. Once agreed it is signed by the Deputy Director (or in her absence by a PCC representative). Processes were not always followed in respect that the Authorisation Proforma was not always completed and signed, and when it had been completed, it was not always on the client A-Z file.		
	Recommendation	Priority	Management response and action plan including responsible officer
1.3.1	An authorisation proforma is part of the panel process and should be used in all cases and submitted prior to the allocation of a panel appointment. Once the service is agreed and the proforma is authorised it should be saved on the the Client A-Z.	Low	<p>Additional checks will be carried out on the authorisation proforma as part of the auditing tool when reviewing cases.</p> <p>Responsible Officer: Principal Social Worker, Livewell Southwest (KD) Target Date: 31 August 2018</p>
No.	Observation and implications		
1.4	<p>A budget containment project group with representatives from Plymouth City Council and Livewell Southwest has been in place since 2015 and each year priority areas are selected where it is felt that savings can be achieved. The workstream selects a number of areas to target budget savings and these are separately tracked and savings reported back. However, at the time of the audit, concerns were raised by the Head of Adult Social Care and Retained Functions that the specific cases selected were not always reported to the budget containment meetings and therefore there was a risk that some cases may be "double counted".</p> <p>Formal minutes are not always recorded at budget containment meetings which could result in agreed action not being taken or difficulty in</p>		

retrospectively locating important information / decisions relating to these meetings.			
	Recommendation	Priority	Management response and action plan including responsible officer
1.4.1	Cases "removed" from the main budget for budget containment savings work should be reported back to the meetings to ensure that savings achieved are not also counted in the main budget.	Medium	<p>There is now an active list of cases being worked by budget containment projects and budget savings are confirmed by Livewell Southwest with PCC Finance prior to meetings taking place.</p> <p>Responsible Officer: Service Manager, Livewell Southwest (IL) and Head of Adult Social Care and Retained Functions, PCC (GW) Target Date: Implemented</p>
1.4.2	Budget containment meetings should be formalised with the recording of minutes in all cases.	Low	<p>Minutes and action points are issued to all relevant parties as soon as practical after the meetings. A central action log is also to be introduced.</p> <p>Target Date: Implemented</p>
No.	Observation and implications		
1.5	<p>Meetings are held between Livewell Southwest and Plymouth City Council (Service Centre, Legal, Finance and Commissioning) with an aim to reducing overall ASC debt. There have been several good proposals put forward such as a debt prevention guide, advertising direct debit as the Council's preferred method of payment and having benefits paid directly to the Council as proactive ways of reducing the amount of debt in ASC. Agreed actions and responsible officers are recorded in emails which are circulated to those in attendance.</p> <p>At the time of the audit, although some issues have been captured, the debt prevention guide has not been completed.</p> <p>Additionally, meetings are also held with the PCC Income Recovery Team Leader and Livewell Southwest to investigate specific high level ASC debt cases (greater than £10k); these are identified by the Income Recovery Team Leader from PCC outstanding debt reports. Whilst this is a beneficial exercise, once debt reaches such a large amount it is a challenge to recover the outstanding money.</p>		
	Recommendation	Priority	Management response and action plan including responsible officer
1.5.1	To ensure that actions identified in the ASC Debt meetings are followed up and carried out within agreed timescales consideration should be given to formalising the meetings to include notes and action points which can be tracked until implemented.	Opportunity	This meeting was set up as an informal working group that, based on some progress, has continued to develop improved practice and processes. Current emails with notes and action points are distributed to other relevant managers for their information. Action points will be brought back to each meeting and notes will be filed centrally on PCC's and Livewell

			<p>Southwest's systems.</p> <p>Responsible Officer: Care Home Business Improvement Partner, PCC (JB) Target Date: Immediate</p>
1.5.2	<p>Alongside the work to reduce outstanding high value debts, a further exercise should be instigated to tackle smaller debts. The early intervention work should be carried out with the aim of promptly identifying payment defaults to ensure vulnerable clients are contacted early on to identify the problems they are experiencing and support them in getting payments back on track before debt becomes totally unmanageable.</p> <p>Whilst PCC can identify the clients with arrears, it is likely to require joint working with Livewell Southwest staff to identify the reasons for non-payment and negotiate a way forward.</p>	Medium	<p>A change in process has been implemented, whereby when payment is over 31 days overdue on the first invoice, CFST will attempt to make contact with the service user. CFST are looking to joint work with Livewell Southwest to identify issues earlier.</p> <p>As part of the review of end to end processes, the way in which financial assessments are carried out will be reviewed.</p> <p>Responsible officer: Advance Practitioner, Livewell Southwest (CB); Care Homes Business Improvement Partner, PCC (JB) and Income Recovery CFS Team Leader (CC) Target Date: 31 December 2018</p>
1.5.3	<p>As per the meeting notes dated 15 December 2017 a Debt Management Guide should be developed as soon as practicable and issued to relevant staff.</p>	Medium	<p>Currently a Bad Debt Guidance and Best Practice document is in draft form and is waiting to be finalised.</p> <p>Responsible Officer: Project Manager, PCC (KJ) Target Date: 31 December 2018</p> <p>At the working group meeting in May it was acknowledged that we needed a robust and fair approach to preventing, managing and recovering personal debts relating to adult social care. This will require a review of all practices and policies relating to adult social care income collection from front end services through to the current end result.</p> <p>Responsible Officer: Advance Practitioner, Livewell Southwest (CB) and Care Homes Business Improvement Partner, PCC (JB) Target Date: 31 December 2018</p>
No.	Observation and implications		
1.6	PCC process states that prior to a service commencing, the Adult Social Care worker should discuss with the client the requirement for making a		

	<p>financial contribution towards their care. A Financial Assessment Information Handout should be supplied (drawn up by PCC), signed and scanned into the PCC client A-Z folder. The purpose of the document is to ensure that the client is aware of their financial responsibilities prior to the service commencing and to provide the Council with evidence that the client / financial representative was informed and understood the requirements for a financial assessment and potentially a financial contribution towards their care prior to their service commencing.</p> <p>Feedback from Livewell Southwest staff at a recent Care Act training day was that this was not an effective process and was not well received by clients. There have been some brief discussions between Livewell Southwest and PCC to look at other ways of evidencing that clients have been notified of the financial assessment requirements. Meanwhile the Financial Assessment Information Handout continues to be used.</p>		
	<p>Recommendation</p>	<p>Priority</p>	<p>Management response and action plan including responsible officer</p>
<p>1.6.1</p>	<p>The Financial Assessment Information Handout should be revisited and discussed between Livewell Southwest and PCC to ensure that care workers and service users are clear on the purpose of the handout. Service users and financial representatives need to be clearly informed of the requirement to comply with a financial assessment and that they may be required to financially contribute towards their care. PCC require evidence of that information being delivered. .</p> <p>Discussions should be held to understand the reasons why the current Financial Assessment Information handout is unpopular with social care staff and service users prior to any amendments being made to the document.</p>	<p>Opportunity</p>	<p>As above – this will be included in the review of end to end processes. Currently the Financial Assessment Information Handout is still being used.</p> <p>Responsible Officer: Advance Practitioner, Livewell Southwest (CB) and Care Homes Business Improvement Partner, PCC (JB) Target Date: 31 December 2018</p>
<p>No.</p>	<p>Observation and implications</p>		
<p>1.7</p>	<p>Four suppliers were checked against the contracts register to ensure that a valid contract was in place at the time of the service. One case, for a spot contract, there was no record of the provider on the contract register.</p>		
	<p>Recommendation</p>	<p>Priority</p>	<p>Management response and action plan including responsible officer</p>
<p>1.7.1</p>	<p>Suppliers should only be selected if they appear on the Council's contracts register.</p>	<p>Medium</p>	<p>Noted. Believe this is a one-off case - systems are in place to ensure suppliers are selected from the contracts register.</p> <p>Target Date: Implemented</p>

2. Area Covered: Functions are carried out correctly, in line with processes		Level of Assurance
<p><b>Opinion Statement:</b></p> <p>Mandatory Care Act training is currently being rolled out to all Adult Social Care staff within Livewell Southwest. This training is being delivered jointly by Plymouth City Council and Livewell Southwest. Feedback so far has been positive and there is the possibility that parts of the training may also be beneficial to Health Workers within Livewell Southwest. The training has also given both Livewell Southwest staff and PCC staff the opportunity to discuss problems and difficulties they have experienced. Issues such as a lack of procedures for Livewell Southwest staff on financial assessments and potential duplication of work relating to financial assessments have been raised and are being taken forward by the Service Manager (IL) who is leading on process mapping financial assessments with PCC.</p> <p>There is a comprehensive induction programme in place for new Livewell Southwest staff with additional areas to be covered for ASC staff. Instruction for some PCC processes are delivered by guidance notes or through training from the Manager. These areas would benefit from some bespoke training from PCC for new employees and refresher training to support the guidance supplied by PCC on areas such as Direct Payments, Deferred Payments and Fairer Charging Policy.</p> <p>Training is beginning to be recorded on Livewell Southwest's electronic system (ESR) and once all ASC training courses are included there will be a robust training log able to highlight to managers when training is required for their staff.</p> <p>Work has also been undertaken by Service Managers to identify training gaps with a Skills Audit and managers training and support programme. This has recently been carried out and has identified some areas for further support and training.</p> <p>Guidance documents for ASC staff are held on both the Plymouth system and Livewell Southwest's intranet. When PCC policies and procedures are updated a request is made to Livewell Southwest to update their intranet document. In most cases documents on both systems mirrored each other. However, there were issues with two documents which did not. This may have resulted in staff unable to follow the correct procedures and incorrect calculations for Direct Payments being made.</p> <p>Input of services / contracts is carried out by the PCC Business Support Team. There are plans for a new structure for Business Support with the creation of a new role of Business Support Manager. Recruitment for this post is due to commence within the next month. Working practice documents within Business Support would benefit from a review and update. Currently the "New Services Report" which is used to ensure services have been authorised in line with the Scheme of Delegation is not being checked.</p>		<p><b>Good Standard</b></p>
No.	Observation and implications	
2.1	<p>There is no integrated system for guidance and procedural notes for Livewell Southwest and PCC staff. Information is stored on both the PCC "S" drive and the Livewell Southwest intranet. PCC request Livewell Southwest to post updated versions of PCC policies and procedures but do not have the means to check to ensure those documents have been updated and old versions removed. In addition some Livewell Southwest staff have access to one system but not the other. There is a risk that information may not be removed once it is out of date, or new information may not be added.</p>	

	<p>From a review of both systems it was found that in most cases the documents mirrored each other and the correct versions of updated documents were held. However, two documents required action to be taken:</p> <ul style="list-style-type: none"> <li>• The new Direct Payments Guidance document contained hyperlinks to other guidance documents. The hyperlinks were not functioning and the hyperlinked documents could not be found on the Livewell Southwest intranet site;</li> <li>• The ready reckoner for calculating Direct Payments differed between the two systems. It was later confirmed that the ready reckoner on the Plymouth system was correct and had been updated on the Plymouth system at the end of March 2018. Livewell Southwest were not contacted with the updated version until 20 April 2018 and their Communications Department on 27 April 2018 to request the upload. As at the time of the audit (2 May 2018) the old version was still showing on Livewell Southwest's intranet.</li> </ul> <p>There is a risk that correct processes will not be followed for Direct Payments if guidance is missing from the system and that Direct Payments could be incorrectly calculated and inconsistently applied if there is more than one version of the ready reckoner in existence.</p>		
	<p>Recommendation</p>	<p>Priority</p>	<p>Management response and action plan including responsible officer</p>
<p>2.1.1</p>	<p>Explore the potential of setting up a SharePoint site to create a single centralised database of documents to be securely shared and accessed by both PCC and Livewell Southwest.</p> <p>Meanwhile, additional care should be taken to ensure that information on both systems reflect each other and that where possible workers have access to both systems.</p>	<p>Opportunity</p>	<p>Care Home Business Improvement Partner, PCC (JB) to contact Head of Integrated Finance, PCC (DN) to investigate if SharePoint is a possible option.</p> <p>Responsible Officer: Care Homes Business Improvement Partner, PCC (JB) Target Date: 31 August 2018</p> <p>One person in each organisation has been identified as the point of contact for all new information to be loaded to the respective systems.</p> <p>Target Date: Implemented</p>
<p>2.1.2</p>	<p>The supporting documents for the Direct Payment Guidance should be included on the Livewell Southwest intranet site and the hyperlinks tested to ensure that they work. Whenever, a document is updated the hyperlinks should be retested to ensure staff have access to the Guidance and all supporting documentation.</p>	<p>Medium</p>	<p>The hyperlinks are being put in place but in the meantime the links have been saved as separate documents and therefore are accessible.</p> <p>Responsible Officer: Principal Social Worker, Livewell Southwest (KD) Target Date: 31 October 2018</p>

2.1.3	<p>The correct ready reckoner for Direct Payments should be shown on the Livewell Southwest intranet. When documents are updated they should be updated on both systems at the same time.</p> <p>Devise a means of testing to ensure that amended and updated versions of Plymouth City Council Policies and Procedures are saved onto the Livewell Southwest intranet as requested.</p>	Medium	<p>One person in each organisation has been identified as the point of contact for all new information to be loaded to the respective systems.</p> <p>Target Date: Implemented</p>
No.	Observation and implications		
2.2	<p>Once care packages have been authorised by Livewell Southwest, PCC Business Support are responsible for the input of services triggering the payments. On occasions services cannot be input due to incorrect or missing information on the Care Planner, incorrect authorisation or queries over costings and out of county placements. These issues can hold up input which results in a delay to payments being made.</p> <p>PCC Business Support have written working practices in place, however some have not been reviewed or updated for some time.</p> <p>The New Services Report can be run at any time and details all new services input and changes made to services. It also shows the weekly amount and authorising officer together with the names of those inputting and authorising the service on CareFirst. The report can be used to check that packages of care have been authorised in line with the Scheme of Delegation and to ensure separation of duties within Business Support between the inputting officer and the final authorisation which triggers the payment. All staff within Business Support have both input and authorisation access and this report is an essential management tool to check that the correct procedures have been followed. Whilst no issues were identified within the sample checked during this audit review, the service has advised that the report is not subject to review because Business Support have insufficient capacity, increasing the risk of non-compliance with the Scheme of Delegation going undetected.</p>		
	Recommendation	Priority	Management response and action plan including responsible officer
2.2.1	Working practices and guidance within Business Support should be reviewed and updated accordingly.	Low	<p>Working practices will be reviewed and, where necessary updated to reflect current working practices.</p> <p>Responsible Officer: Business Support Manager, PCC Target Date: 31 December 2018</p>
2.2.2	To mitigate the risk of non-compliance and errors going undetected or even fraudulent payments being made, checking of the New Services Report should be reinstated as soon as possible. Working practices should be developed identifying who has responsibility for undertaking the checks, detailing what the checks consist of and the frequency, i.e. weekly, monthly.	Medium	<p>Business Support Manager, PCC to liaise with Head of Adult Social Care and Retained Client Functions to consider what working practices should be developed and the responsibility for undertaking checks.</p> <p>Responsible Officer: Business Support Manager, PCC Target Date: 31 August 2018</p>

2.2.3	Business Support should keep a log of the issues found which delay the input of services. Any areas of concern or identification of reoccurring issues should be shared with Livewell Southwest so that appropriate and targeted training can be provided.	Opportunity	Clerical Officer, PCC (JG) meets weekly with Service Manager, Livewell Southwest (ES) and Care Home Business Improvement Partner, PCC (JB) to discuss common issues. Care Act training also provides an opportunity to raise issues which can then be addressed.  Target Date; Implemented
No.	Observation and implications		
2.3	One case was found (P199131) where the residential home had notified the Council of a client's death which was then recorded in the observations field on CareFirst. This information however, did not feed through to either ASC or Livewell Southwest and the home continued to be paid for a further 4 months resulting in an overpayment of more than £47k. As the home was out of county, the overpayment could not be recovered by a "claw back" from other residents. As at 15 May 18 an invoice had not been raised to recover the overpayment. This was 5 1/2 months after the client passed away and 2 1/2 months after the death came to ASC's attention.		
	Recommendation	Priority	Management response and action plan including responsible officer
2.3.1	In order to maximise the chances of recovery an invoice should be raised for an overpayment as soon as possible if the overpayment cannot be collected via a "claw back" on other residents payments.  Management to confirm that the invoice for the £47k overpayment in respect of P199131 has been raised and issued.	Medium	Care Home Business Improvement Partner to investigate this case and check that an invoice has been raised to the Care Home.  Responsible Officer: Care Home Business Improvement Partner, PCC (JB) Target Date: 31 August 2018
2.3.2	There should be a process in place to ensure that when the Council is notified of the death of a service user the correct service area is notified immediately in order for the service to be stopped. Officers in all service areas should be aware that completing an observation does not stop the service and / or the payment.	High	The Care Home Business Improvement Partner and the Business Manager, PCC will review the above specific case to identify any lessons learned which can be fed into processes to ensure the same situation does not re-occur.  Responsible Officer: Care Home Business Improvement Partner, PCC (JB) and Business Manager (CM) Target Date: 31 August 2018

No.	Observation and implications		
2.4	<p>Some mandatory joint training related to the Care Act 2014 has recently been undertaken by Livewell Southwest and Plymouth City Council. All staff within ASC have been required to attend and this training is planned to continue. Areas covered were CareFirst input, Financial Assessments, Care Homes and Ordinary Residence. A training slot on Direct Payments has recently been added to the Care Act mandatory training.</p> <p>PCC have produced guidance documents on their processes and procedures, however there is no specific training available for Livewell Southwest staff on areas such as Direct Payments, Deferred Payments and the Fairer Charging Policy. There is also no guidance or training on how to deal with the deliberate disposal of assets which was felt to be an area which could be developed.</p>		
	Recommendation	Priority	Management response and action plan including responsible officer
2.4.1	<p>PCC and Livewell Southwest should jointly agree areas for specific targeted training where it is felt there are gaps in knowledge or understanding or where there is currently guidance but no training available, for example Deferred Payments. Monitor the Care Act training to ensure that there is sufficient time to allow for effective Direct Payments training or consider supplying this separately.</p>	Opportunity	<p>Care Act training covers a wide range of training needs. In addition separate Direct Payments training will be undertaken in August by the Project Manager, PCC (KJ) for Advanced Practitioners to enable them to become the “experts” for their teams.</p> <p>Responsible Officer: Project Manager, PCC (KJ) Target Date: 31 August 2018</p>
2.4.2	<p>PCC to offer training and/or guidance on deprivation of assets to ensure that Adult Social Care workers are aware of the processes within the Council and to provide guidance of who to notify if deprivation of assets is suspected.</p>	Low	<p>Deprivation of assets needs to be very clearly defined from the outset. Information will be developed on the PCC website as part of the end to end review.</p> <p>Responsible Officer: Care Homes Business Improvement Partner, PCC (JB) and Advance Practitioner, Livewell Southwest (CB) Target Date: 31 December 2018</p>
No.	Observation and implications		
2.5	<p>Assessments and Support Plans are reviewed at each level of authorisation to ensure that quality assessments are carried out. To assist with this and to ensure that other options had been considered in relation to best value and the best outcome for the client, a Support Checklist was put together. Ideally these should be completed, however they are not always used or used in the correct way. There are plans for a briefing note to be communicated to staff to ensure checklists are completed correctly.</p>		

	Out of six cases reviewed, two completed checklists were found on the A-Z. In the other four cases there was information within the assessment to demonstrate that family support had been considered but there were no details regarding best value options. There was also no mention as to whether Direct Payments had been offered to these clients.		
	Recommendation	Priority	Management response and action plan including responsible officer
2.5.1	It would be beneficial to have a process in place for staff to capture the important considerations to be taken when carrying out an assessment, whether that be by a support checklist or summary embedded in the assessment document.	Opportunity	A summary is now included in the support plan and is being introduced for Adult Social Care workers to complete.  Responsible Officer: Service Manager, Livewell Southwest (ES) Target Date: 31 December 2018
2.5.2	Undertake random "Deep Dive" reviews on a sample number of cases across the locality teams to ensure continued quality assessments are carried out resulting in the best outcomes for service users and best value for the service area.	Opportunity	Clinical audits are due to take place on cases.  Responsible Officer: Service Manager, Livewell Southwest (ES) Target Date: 31 March 2019
No.	Observation and implications		
2.6	There is no defined period of time from when an assessment is commenced to when a service is authorised and implemented. From the cases selected to review there was an average timescale of two months between the start of the assessment and the commencement of the service after authorisation.  In two additional cases, the assessment process appeared to take approximately four months and in one of these cases, payments to the home were backdated 2 1/2 months.		
	Recommendation	Priority	Management response and action plan including responsible officer
2.6.1	PCC and Livewell Southwest should agree a target timeframe from the receipt of the referral to the service start and monitor this to ensure it is being complied with in all possible cases.	Medium	A performance indicator is already in place with a 35 day target (5 working days to complete the referral and 30 working days to complete the assessment and support plan). A monthly performance meeting is held with PCC and Livewell Southwest.

			Target Date: Implemented  It would be useful to have a report which could identify where the longest delays occur.
No.	Observation and implications		
2.7	<p>In one case (0509806) there was a delay of six weeks from the time the service was agreed at panel to a financial assessment letter being sent to the financial representative on 21 December 2017. On 8 February 2018 an invoice for the full cost (over £8k) was sent due to non disclosure of financial information. It is understood that there had been no response from the financial representative. On 9 February 2018 a communication was received from the financial representative requesting to be removed from this responsibility. Livewell Southwest were contacted by the CFST and the financial representative was removed. There was no further action taken by the AP to reassess the service user in order to find another financial representative. As a consequence, invoices continued to be raised, despite there being no one to take responsibility for the debt and at the time of the audit the debt had increased to more than £11k.</p> <p>This case has highlighted the following issues:</p> <ul style="list-style-type: none"> <li>• Delay in contacting service user in order to carry out a Financial Assessment - potentially resulting in difficulty in collecting the income due;</li> <li>• Lack of process for triaging high risk cases to visit in order to carry out a Financial Assessment - potentially resulting in difficulty in collecting the income due;</li> <li>• Lack of process for communicating with service users/ financial representatives when a large backdated invoice is produced to ensure it can be paid - potentially resulting in difficulty in collecting the income due; inaccurate expected income recorded; reputational risk to the Authority;</li> <li>• Failure to reassess or take action when a service user is left without a financial representative resulting in a potential safeguarding risk and inability to collect Council income.</li> </ul>		
	Recommendation	Priority	Management response and action plan including responsible officer
2.7.1	<p>In order to maximise the potential for collecting income due, financial assessments should be carried out in a timely manner.</p> <p>Response Required from: CFST</p>	Medium	<p>Financial assessments will be included in the review of the end to end processes.</p> <p>Responsible Officers: Service Manager, Customer Services, PCC (PD), Advance Practitioner, Livewell Southwest (CB) and Care Home Business Improvement Partner, PCC (JB) Target Date: 31 December 2018</p>

2.7.2	There should be a process in place for when a large backdated invoice is raised to ensure the service user / financial representative is contacted by telephone to discuss repayment prior to the receipt of the invoice.	Medium	<p>Financial assessments will be included in the review of the end to end processes.</p> <p>Responsible Officers: Service Manager, Customer Services, PCC (PD), Advance Practitioner, Livewell Southwest (CB) and Care Home Business Improvement Partner, PCC (JB) Target Date: 31 December 2018</p>
2.7.3	A Financial Representative should not be removed without an urgent reassessment to identify a replacement.	High	<p>Agreed. The Residential/Nursing checklist includes a specific question relating to the financial representative. Gaps in knowledge has been identified and training should have improved this.</p> <p>Target Date: Implemented</p>
2.7.4	<p>There should be a process in place to identify cases most at risk of non-payment or of ignoring the assessment request. Cases may include where a reluctance to make a contribution has already been demonstrated or, where the service user has capacity but may struggle in producing the documents required eg. elderly without family support. In these cases it may be advantageous to carry out the financial assessment by a visit. Livewell Southwest staff should be encouraged to inform CFST of any cases they feel are of particular concern and CFST should check the observations on CareFirst for indications of reluctance to pay.</p> <p>In the case highlighted above, there are notes on file that suggest that the service user may have been reluctant to contribute towards his care. In addition the service user had recently moved from another local authority area and therefore there was the potential that he could own property in another area.</p>	High	<p>Look to add information on the referral form to CFST to request a visit if the Adult Social Care Worker feels this would be useful.</p> <p>Also review under the end to end process.</p> <p>Responsible Officers: Service Manager, Customer Services, PCC (PD), Advance Practitioner, Livewell Southwest (CB) and Care Home Business Improvement Partner, PCC (JB) Target Date: 31 December 2018</p>

## Definitions of Audit Assurance Opinion Levels

Assurance	Definition
High Standard.	The system and controls in place adequately mitigate exposure to the risks identified. The system is being adhered to and substantial reliance can be placed upon the procedures in place. We have made only minor recommendations aimed at further enhancing already sound procedures.
Good Standard.	The systems and controls generally mitigate the risk identified but a few weaknesses have been identified and / or mitigating controls may not be fully applied. There are no significant matters arising from the audit and the recommendations made serve to strengthen what are mainly reliable procedures.
Improvements required.	In our opinion there are a number of instances where controls and procedures do not adequately mitigate the risks identified. Existing procedures need to be improved in order to ensure that they are fully reliable. Recommendations have been made to ensure that organisational objectives are not put at risk.
Fundamental Weaknesses Identified.	The risks identified are not being controlled and there is an increased likelihood that risks could occur. The matters arising from the audit are sufficiently significant to place doubt on the reliability of the procedures reviewed, to an extent that the objectives and / or resources of the Council may be at risk, and the ability to deliver the service may be adversely affected. Implementation of the recommendations made is a priority.

## Definition of Recommendation Priority

Priority	Definitions
High	A significant finding. A key control is absent or is being compromised; if not acted upon this could result in high exposure to risk. Failure to address could result in internal or external responsibilities and obligations not being met.
Medium	Control arrangements not operating as required resulting in a moderate exposure to risk. This could result in minor disruption of service, undetected errors or inefficiencies in service provision. Important recommendations made to improve internal control arrangements and manage identified risks.
Low	Low risk issues, minor system compliance concerns or process inefficiencies where benefit would be gained from improving arrangements. Management should review, make changes if considered necessary or formally agree to accept the risks. These issues may be dealt with outside of the formal report during the course of the audit.
Opportunity	A recommendation to drive operational improvement which may enable efficiency savings to be realised, capacity to be created, support opportunity for commercialisation / income generation or improve customer experience. These recommendations do not feed into the assurance control environment.

## Confidentiality under the National Protective Marking Scheme

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Marking	Definitions
Official	The majority of information that is created or processed by the public sector. This includes routine business operations and services, some of which could have damaging consequences if lost, stolen or published in the media, but are not subject to a heightened threat profile.
Secret	Very sensitive information that justifies heightened protective measures to defend against determined and highly capable threat actors. For example, where compromise could seriously damage military capabilities, international relations or the investigation of serious organised crime.
Top Secret	The most sensitive information requiring the highest levels of protection from the most serious threats. For example, where compromise could cause widespread loss of life or else threaten the security or economic wellbeing of the country or friendly nations.