

# ***Aberdeen City Council***

## **Service Reviews – Adult and Older People**

### **Final Report**

Internal Audit Report  
2014/2015 for Aberdeen  
City Council

**February 2015**

	<b>Target Dates per agreed Internal Audit Charter</b>	<b>Actual Dates</b>	<b>Red/Amber/Green and commentary where applicable</b>
Terms of reference agreed 4 weeks prior to fieldwork	6 October 2014	15 October 2014	Amber
Planned fieldwork start date	3 November 2014	3 November 2014	Green
Fieldwork completion date	5 December 2014	5 December 2014	Green
Draft report issued for Management comment	5 January 2015	7 January 2014	Amber
Management Comments received	21 January 2015	22 January 2015 13 February 2015	Amber – initial comments received in timely manner but follow up required due to complex nature of the review
Report finalised	13 February 2015	13 February 2015	Green
Submitted to Audit and Risk Committee	26 February 2015	26 February 2015	Green

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This report has been prepared solely for Aberdeen City Council in accordance with the terms and conditions set out in our engagement letter [update with new date of EL]. We do not accept or assume any liability or duty of care for any other purpose or to any other party. This report should not be disclosed to any third party, quoted or referred to without our prior written consent.

Internal audit work will be performed in accordance with Public Sector Internal Audit Standards. As a result, our work and deliverables are not designed or intended to comply with the International Auditing and Assurance Standards Board (IAASB), International Framework for Assurance Engagements (IFAE) and International Standard on Assurance Engagements (ISAE) 3000.

# 1. Executive Summary

Report classification	Total number of findings				
High Risk	<div> <div></div> <div>Section 3</div> <div></div> </div>				
	Critical	High	Medium	Low	Advisory
	Control design	-	-	-	-
	Operating effectiveness	-	2	1	-
	Total	-	2	1	-

## Summary of findings

- 1.01 The Council's Care Management Standards state that as well as on-going monitoring, an overall review of service users' needs will take place on a pre-arranged date. The scope of our review was to assess compliance with policies and procedures in relation to scheduled service reviews for care users (Adult and Older People), in terms of responsibilities and timeframes. From this review we have identified two high risk and one medium risk findings.
- 1.02 Please note that due to the data quality within the CareFirst System, management were unable to provide a list of care packages which were due for review within the testing period. As a result, our work has focused on reviewing the business processes which have led to these inaccuracies and we have proposed control recommendations to resolve the issues going forward.

### High Risk Findings

- 1.03 **Reviews not being performed.** Although we have been unable to validate the number of outstanding reviews (due to data quality within the CareFirst system), through discussions with Care Workers and SC&W management, it has been highlighted that reviews are not performed due to limited resource capacity within SC&W. Internal guidance also states that reviews may not be performed due to staffing issues. As a result, the requirements of the Council's Care Management Standards which relate to timely periodic reviews are not met, and clients may be receiving care packages which are not fit for purpose. In addition to this, reminders which are intended to alert Care Workers to reviews needing performed are inaccurate and not used in practice. From sample testing, we identified 56 out of 60 reminders which were incorrect. As a result, Care Workers have inadequate information to allow them to determine which reviews should be performed when.
- 1.04 **Interpretation of what constitutes a 'review'.** The Council's Care Management Standards clearly defines a review as a formally planned and executed visit with the client which is separate from on-going monitoring. Through detailed discussions with members of SC&W, we have noted that there are inconsistencies in

the way in which Care Workers interpret what a review is and what a review should involve. As a result of Care Workers incorrectly interpreting the definition of a review, inadequate and untimely reviews may occur.

#### Medium Risk Finding

- 1.05     **Recording of reviews.** There are inconsistencies regarding the methods used to record a review, and as a result there is inadequate information detailing which reviews have been performed and which are overdue. In addition to this, when clients are reassigned, the new Care Worker may not be able to interpret previous interactions with the client. This may result in missed review dates and unsatisfactory client service. CareFirst has the functionality to record all review information internally via the 'Care Assess' module. As fields on the electronic forms allow for intelligent data use in other parts of the client file, there are numerous advantageous to using this functionality which are not utilised.

#### **Management Comments**

- 1.06     This has been an area of challenge to the service since the loss of a Review Team in 2010 (to budget savings) and the Inspection Report in 2012 that highlighted Review as an area for improvement. The service proposed this Internal Audit to support its efforts to improve performance. The findings in relation to lack of clarity of definition of a 'review' and inconsistencies in recording can be addressed through staff training and use of the functionality of the Care First 'Care Access' module. The issue of capacity in care management to conduct reviews to the standards expected, as set out in the Care Management Standards, has resourcing implications that may impact on budgets, even with service redesign to make more effective use of care management staffing across Adult Services.

## 2. Detailed findings and recommendations

### 2.01 Reviews not being performed – Operating effectiveness

#### Finding

Although we have been unable to validate the number of outstanding reviews (due to data quality within CareFirst), through interviews with care workers and management, it has been highlighted that reviews are not performed due to limited resource capacity within SC&W. Internal “monitor and review” guidance also states that reviews may not be performed due to increasing demands on the service.

Within CareFirst, each Care Manager has a ‘clipboard’ which provides a list of activities to be performed. The ‘request for funding’ activity is intended to inform Care Managers when a review is due to be performed. However, it was noted that not all Care Workers are aware of this, and instead, understand ‘request for funding’ to mean that a service specification is to be generated. Through discussions with management it appears that the intent for the ‘request for funding’ activity has been lost over time. As a result, the review reminders are not being utilised by Care Managers.

On further investigation, it also appears that clipboards are congested with inaccurate data such as review reminders for former clients, reassigned clients and clients which are not as of yet requiring a review. To help identify business processes which are causing this data inconsistency, we selected a sample of 60 outstanding ‘request for funding’ activities and discussed the situation with the relevant Care Manager. Of the activities tested:

- 37 related to closed or cancelled care packages where the reminder activity had not been closed down. In this instance, closed down care packages are those where the client no longer requires any form of social care and the worker has formally cancelled the package on CareFirst;
- 6 related to reviews which were not outstanding but appear to be because no future date had been entered when the activity was created;
- 8 related to instances where the client had been reassigned to another care worker or team clipboard but the review reminder remained assigned to the original care worker who created the care package. In all of these instances, no review had been performed by the new assignee. All 8 cited under resourcing as the reason, with 3 of the 8 determined as low risk clients where review duties had been passed onto the care home.
- 4 related to genuinely outstanding reviews where all 4 cited under resourcing as the reason, with 2 of the 4 determined as low risk clients where review duties had been passed onto the care home.
- 1 related to a care package which remained open on CareFirst but had been cancelled with the supplier. According to CareFirst, the client was still receiving care, but in reality this was not the case in reality.
- 4 related to instances where we were informed the review had been performed but the activity was not updated on CareFirst.

Please note that due to PwC not being able to inspect client sensitive information, we were reliant on the confirmation from Care Workers in relation to the above results.

#### Risks

Reviews are not being performed on a timely basis and as a result, the Care Management Standards are not being met and clients may be receiving care packages which are not fit for purpose.

Care Workers have inadequate information to allow them to determine which reviews should be performed when.

### Action plan

Finding rating	Agreed action	Responsible person / title
High	1. Management should formally assess the staffing issues within SC&W and consider increasing the resource budget if appropriate.	Social Care and Wellbeing Senior Management Team
	2. The following reports should be run on a monthly basis and distributed to the relevant teams who will action the closing or reassignment of the activities:	Trevor Gillespie (Team Manager – Performance Management)
	a. A report detailing open activities which have no open service agreement. and;	
	b. A report detailing open activities which are not assigned to the care worker who is currently assigned the care package.	Angela Watson (Systems development officer)
	3. The ‘request for funding’ activity should be renamed to ‘review of care package’ to ensure clarity on the purpose of the activity. The ‘required date’ field of the ‘request for funding’ activity should be made mandatory to ensure the activity can be used appropriately. Please note, OLM will be required to make these system changes.	
	4. Guidance on the purpose and operational use of the newly renamed activity should be created and distributed.	
		<b>Target date:</b>
		1. 30 June 2015 (subject to scoping work for integration of health and social work services)
		Others: 31 March 2015

## 2.02 Interpretation of what constitutes as a ‘review’– operating effectiveness

Finding		
The Council’s Care Management Standards clearly define a review as a formally planned and executed visit with the client, which is separate from on-going monitoring. Through detailed discussions with members of SC&W we have, however, noted that there are inconsistencies in the way in which Care Workers interpret what a review is and what a review should involve. Although a number of care workers correctly consider a review to be a formally planned and executed visit, many consider a review to be any form of communication with the client. In these instances, a review is considered to be a part of on-going monitoring. As a result of this misinterpretation, Care Workers may not perform reviews in line with the appropriate timescales or requirements as defined in the standards.		
Risks		
Care Workers may interpret the definition of a review incorrectly, leading to inadequate and untimely review of client needs.		
Action plan		
Finding rating	Agreed action	Responsible person / title
High	The definition, requirements and timeliness of a review under the Care Management Standards should be re-communicated to Care Workers via team meetings.	All Service Managers
		<b>Target date:</b>
		28 February 2015

## 2.03 Recording of reviews– Operational effectiveness

Finding
<p>Reviews are documented in two ways:</p> <ul style="list-style-type: none"><li>• The ‘observations’ section of the client file within CareFirst is completed with details of all interactions with the client; and</li><li>• A word document is generated by CareFirst and is stored on the relevant teams shared drive.</li></ul> <p><u>Observations</u></p> <p>The ‘observations’ section of the client file within CareFirst should be completed with details of all interactions with the client, and a drop down menu exists to allow Care Workers to differentiate between the types of interactions. However, within the drop down menu, there are five options which contain the word ‘review’; with two being extremely similar (‘review’ and ‘review assessment’). This has resulted from each service area being able to set individual observation options, and each of the service areas being able to view and use the options of others. Please note that the menu is titled ‘subject’ as opposed to ‘Interaction type’, adding to the confusion of what should be recorded.</p> <p>Through interviews it was also highlighted that Care Workers rarely use the options containing the word ‘review’. Instead, observations are recorded under the ‘needs/service provision’ option and the interaction type is differentiated by entering it manually into the comments box.</p> <p>Due to the reasons noted, there are significant inconsistencies regarding the methods used to record a review, and as a result we were unable to extract a report from CareFirst which contains details of all of the reviews performed. To determine whether a review has been performed, it would be necessary to manually inspect each individual observation for the word ‘review’. However, as previously noted in Finding 3.02, this may not be conclusive due to the differing interpretations of the word ‘review’.</p> <p>To provide statistical evidence that reviews are not being recorded under the correct headings, we have worked with the CareFirst team to extract observation reports with the ‘review’ and ‘review assessment’ parameters.</p> <ul style="list-style-type: none"><li>• For residential based packages, it was found that 71% of all open packages have had no review recorded under these headings. Of the 944 clients with care packages over 12 months old, 712 (75%) did not have a review recorded under these headings.</li><li>• For community based packages, it was found that 61% of all open care packages had no review recorded under these headings. Of the 967 clients with care packages over 12 months old, 560 (58%) did not have a review recorded under these headings.</li></ul> <p><u>Word document</u></p> <p>Whilst a record of the review is intended to be recorded within ‘observations’ on the CareFirst system, the in-depth details of the review which are required under the care management standards, are recorded on external word documents. These documents are generated by the CareFirst system but are then stored externally on shared team network drives.</p> <p>CareFirst has the functionality to record all review information internally via the ‘Care Assess’ module. As fields on the electronic forms allow for intelligent data use in other parts of the client file, there are numerous advantageous to using this functionality. For example, if the outcome of the review was for a</p>



Care package to be closed, this outcome would be recorded within a field. Reports could then be run using this field to determine which care packages should be closed, according to the latest review, but remain open on the CareFirst system

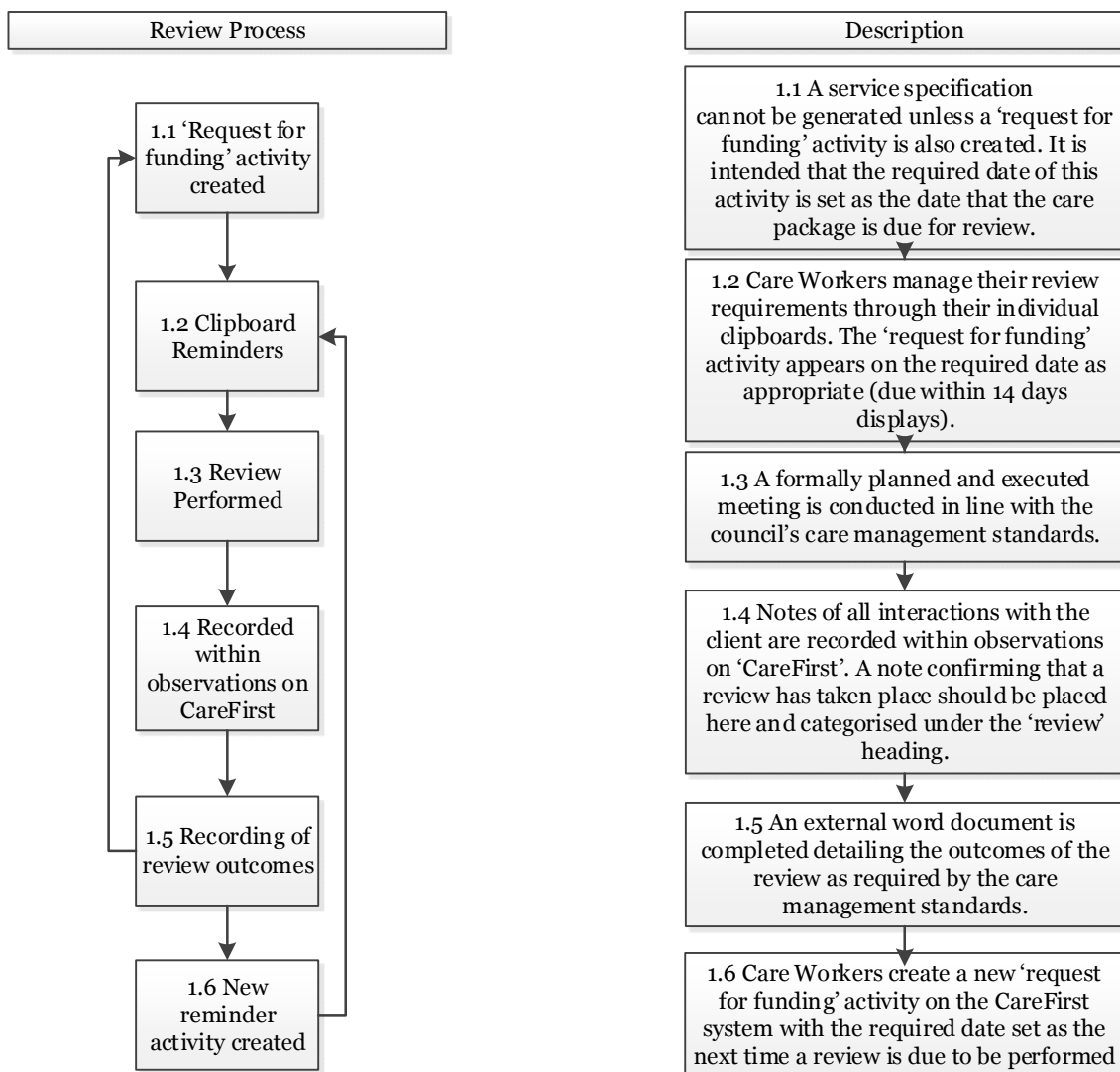
## Risks

- There is inadequate management information detailing which reviews have been performed and which are overdue;
- When clients are reassigned, the new Care Worker may not be able to clearly interpret the previous client interactions. This may result in missed review dates and unsatisfactory client service;
- As a result of reviews being documented out with the CareFirst system, there may be increased data protection risks;
- No completion checks are in place out with the system, resulting in an increased risk of incomplete documents; and
- Care Workers may be less incentivised to fully document the review as no system reports can be run.

## Action plan

<b>Finding rating</b>	<b>Agreed action</b>	<b>Responsible person / title</b>
Medium	Users should be instructed to record all reviews in the CareAssess form. This electronic form allows observations to be created and has reporting functionality.	Trevor Gillespie (Team Manager – Performance Management)
		Service Managers
		<b>Target date:</b>
		31 August 2015

# Appendix 1 – Review Process Diagram



# Appendix 2 – Background and Scope

## Background

- 2.01 Social Care and Wellbeing (SC&W) is currently facing a number of pressures from factors in the external economic environment. Aberdeen City Council is encountering difficulties in sourcing the quantity of care that is required for their client's needs. The reason for this is twofold: firstly, high living and operating costs in the city are making the area unattractive for new private investment in social care services; and secondly, unemployment rates in the city are some of the lowest in the UK. The success of Aberdeen's energy industry is bringing unfavourable consequences to the public sector. A fundamental challenge being faced is regarding an ageing population which is placing strain on public sector services. The increasing demand and shortage in supply of care in Aberdeen is significantly contributing to the Council's challenge of being able to balance their own staffing resources.

### Care Inspectorate

- 2.02 The Care Inspectorate scrutiny report on social work services at Aberdeen City Council was issued in December 2012. This report found that overall Aberdeen City Council was level 2, which is described as "exhibiting moderate risk", with adequate performance and moderate activity on improvement work.
- 2.03 The report identified a recommendation for improvement around the annual reviews of people placed in care homes, to ensure that there is clarity on the responsibilities and timescales for conducting these reviews. Reviews should be held at least annually as laid out in the national care home contract and the Council's care management standards. However, at the time of the Care Inspectorate review, the standards referred to what the review should consider and record but not who is responsible for calling and convening the review, nor sharing the review minute.

### Care Management Standards

- 2.04 The Council's current Care Management Standards now provide clarity on the timescales that are required for reviewing both community based care packages and residential and nursing home packages. As well as on-going monitoring, an overall review of service users' needs is required to take place on the following pre-arranged date:
- Reviews of community based care packages take place within 3 months of completion of the Care Plan and at least 6 monthly thereafter; and
  - Residential and Nursing Home reviews take place 6-8 weeks after admission and at least annually thereafter.

The day to day monitoring of the adherence with the Care Management Standards is also outlined as being the responsibility of the appropriate team leader. Additional guidance is available to staff detailing the responsibilities relating to the care of individual clients through the team allocation process and duties to formally record the review.

## **CareFirst System**

- 2.05 CareFirst is an information management system used by Aberdeen City Council within SC&W. The software is used to record the care provision provided and is operated by a number of other local authorities. CareFirst is also used to generate the service specification between Aberdeen City Council and the third party care provider which forms the contract for provision of a care package to the individual user.

## **Management and recording of review on CareFirst**

- 2.06 Within CareFirst, each Care Manager has a 'clipboard' which provides a list of all activities to be performed. Included within these activities are the reviews which are due within 14 days and overdue. When a Care Manager creates a care package they are required to create an activity called 'request for funding' before the system permits them to generate a service agreement. It is currently intended that the 'request for funding' activity is assigned to a date in the future when the review is due. It is this activity which appears on the clipboard of the individual Care Manager at the required date and the number of days overdue is displayed.
- 2.07 Due to the high volume of clients currently requiring care, 'team clipboards' are also being used across many teams. The intention of the team workload is to avoid overwhelming individual care workers with exceptionally large caseloads. After a client has been assessed and the care package has been completed, clients are transferred to the team clipboard if there is reasonable belief that no further attention is likely to be needed in the coming months.
- 2.08 Reviews performed by care workers are expected to be recorded in two ways:
- The 'observations' section of the client file within CareFirst should be completed with details of all interactions with the client; and
  - A formal in-depth review document should be completed. A word document is generated by CareFirst and is stored on the relevant teams shared drive. After this, 'request for funding' activities should be set up as appropriate.

For illustrative purposes, a diagram of the process is contained in Appendix 1

## **Scope and limitations of scope**

- 2.09 The detailed scope of this review is set out in Appendix 3. We have undertaken a review of the design and operating effectiveness of the Council's controls in regard to service reviews.

# Appendix 3 – Agreed Terms of reference

## Background

This review is being undertaken as part of the 2014/15 internal audit plan approved by the Audit and Risk Committee in April 2014.

## Scope

PwC will review compliance with policies and procedures in relation to scheduled service reviews for care users (Adult and Older People), in terms of responsibilities and timeframes. The sub-processes included in this review are:

Sub-process	Control objectives
Response to Care Inspectorate Report	<ul style="list-style-type: none"><li>• The Council's care standards reflect current practices and are available to care managers;</li><li>• Roles and responsibilities in relation to service reviews are clear for both community based care packages and residential and nursing homes. This includes responsibilities for the Council and for external care providers; and</li><li>• Guidance on retaining minutes and actions as a result of service reviews is clear.</li></ul>
Service reviews	<ul style="list-style-type: none"><li>• Service reviews are undertaken in line with the agreed timescales per the care standards; and</li><li>• Outcomes and actions are documented and shared between the Council and the service provider where required.</li></ul>

## Audit approach

Our audit approach is as follows:

- ☐ Obtain an understanding of the procedures in place through discussion with key personnel, review of documentation and walkthrough tests where appropriate.
- ☐ Identify the key risks in respect of service reviews.
- ☐ Evaluate the design of the controls in place to address the key risks.
- ☐ Test the operating effectiveness of the key controls on a sample basis.

Please note: Management have agreed to provide a download from the Care First system which will allow internal audit to test compliance without compromising the confidentiality of client data.

## Key Council Contacts

Name	Title	Role	Contact details
Liz Taylor	Director of Social Care and Wellbeing	Sponsor	litaylor@aberdeencity.gov.uk
Kate Mackay	Business Manager	Key contact	KMacKay@aberdeencity.gov.uk
Trevor Gillespie	Team Manager – Performance Management	Key contact	TGillespie@aberdeencity.gov.uk

## Agreed timings

Fieldwork start	03 November 2014
Fieldwork completed	05 December 2014
Draft report to client	05 January 2015
Response from client	19 January 2015
Final report to client	26 January 2015
Reported to Audit and Risk Committee	26 February 2015

# Appendix 4 - Limitations and responsibilities

## Limitations inherent to the internal auditor's work

We have undertaken a review of Service Reviews, subject to the limitations outlined below.

### Internal control

Internal control, no matter how well designed and operated, can provide only reasonable and not absolute assurance regarding achievement of an organisation's objectives. The likelihood of achievement is affected by limitations inherent in all internal control systems. These include the possibility of poor judgment in decision-making, human error, control processes being deliberately circumvented by employees and others, management overriding controls and the occurrence of unforeseeable circumstances.

### Future periods

Our assessment of controls relating to Service Reviews is as at December 2014. Historic evaluation of effectiveness is not relevant to future periods due to the risk that:

- the design of controls may become inadequate because of changes in operating environment, law, regulation or other; or
- The degree of compliance with policies and procedures may deteriorate.

## Responsibilities of management and internal auditors

It is management's responsibility to develop and maintain sound systems of risk management, internal control and governance and for the prevention and detection of irregularities and fraud. Internal audit work should not be seen as a substitute for management's responsibilities for the design and operation of these systems.

We endeavour to plan our work so that we have a reasonable expectation of detecting significant control weaknesses and, if detected, we shall carry out additional work directed towards identification of consequent fraud or other irregularities. However, internal audit procedures alone, even when carried out with due professional care, do not guarantee that fraud will be detected.

Accordingly, our examinations as internal auditors should not be relied upon solely to disclose fraud, defalcations or other irregularities which may exist.

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