

REPORT TO: Audit and Governance Committee

MEETING DATE: 22 January 2013

BY: Executive Director (Support Services)

SUBJECT: Internal Audit Report – Care at Home

1 PURPOSE

1.1 To inform the Audit and Governance Committee of the recently issued audit report on Care at Home.

2 RECOMMENDATION

2.1 That the Audit and Governance Committee note the contents of the Executive Summary and Action Plan for Care at Home.

3 BACKGROUND

- 3.1 A review of payments made to Care at Home providers was undertaken as part of the audit plan for 2012/13.
- 3.2 The objective of the audit was to ensure that the internal controls in place were operating effectively.
- 3.3 The main findings from our audit work are outlined in the attached report.

4 POLICY IMPLICATIONS

4.1 None

5 EQUALITIES IMPACT ASSESSMENT

5.1 This report is not applicable to the well being of equalities groups and Equality Impact Assessment is not required.

6 RESOURCE IMPLICATIONS

- 6.1 Financial None
- 6.2 Personnel None
- 6.3 Other None

7 BACKGROUND PAPERS

7.1 None

AUTHOR'S NAME	Mala Garden	
DESIGNATION	Internal Audit Manager	
CONTACT INFO	01620 827326	
DATE	11 January 2013	

EAST LOTHIAN COUNCIL – INTERNAL AUDIT CARE AT HOME

1. EXECUTIVE SUMMARY

1.1 Introduction

A review of the internal controls surrounding the administration of payments made to Care at Home providers was undertaken as part of the Audit Plan for 2012/13. A summary of our main findings is outlined below.

1.2 Areas where Expected Controls were Met

- A clear audit trail exists for all payments made to Care at Home providers.
- For both generic and specialist Care at Home services, the Council has undertaken tendering exercises to appoint framework providers.

1.3 Areas with Scope for Improvement

- The monitoring arrangements in place for ensuring that providers are only paid for actual hours worked require review. Risk payments may be made for services not provided.
- In some cases, Care at Home services were being delivered by non-framework providers. Risk the Council's minimum requirements for service providers may not be met.
- The existing arrangements for investigating and recording the reasons for variances between the client's committed service provision as recorded on Frameworki and the amounts invoiced by providers require review. Risk errors and irregularities may remain undetected.
- In some cases, the level of service provision recorded on Frameworki failed to accurately reflect the actual service that was being delivered. Risk – lack of accurate information.
- There was a lack of effective monitoring of recurring variances. Risk failure to promptly identify errors.
- In some cases, invoices submitted by providers failed to clearly detail both the number of hours charged and the rate per hour. Risk over or under payments may occur and remain undetected.

1.4 Summary

Our review of payments to Care at Home providers identified a number of areas with scope for improvement. Detailed recommendations and opportunities for improvement are contained in our main Audit Report.

Mala Garden Internal Audit Manager

January 2013

ACTION PLAN

PARA REF	RECOMMENDATION	RESPONSIBLE OFFICER	AGREED ACTION	RISK ACCEPTED/ MANAGED	AGREED DATE OF COMPLETION
3.1.1	Management should review the existing use of non-framework providers and seek to ensure that all providers used meet the Council's minimum requirements.	Head of Adult Wellbeing	Agreed New tendering exercise to commence in 2013 and new contracts to be in place by April 2014.		April 2014
3.2.2	Management should ensure that effective arrangements are in place to monitor the delivery of Care at Home services by providers.	Head of Adult Wellbeing	Agreed This area is being reviewed with a view to introducing electronic monitoring.		July 2014
3.3.1	Management should ensure that all invoices received from providers are for a four weekly period and clearly outline both the number of hours charged and the rate per hour.	Head of Adult Wellbeing	Agreed		April 2013
3.3.2	Management should ensure that all variances are properly investigated and the reasons for the variances are accurately recorded on Frameworki.	Corporate Finance Manager	Agreed		To be confirmed
	Adequate monitoring arrangements should be in place to ensure that the approved service accurately reflects clients' care plans.	Head of Adult Wellbeing	Agreed		July 2013

PARA REF	RECOMMENDATION	RESPONSIBLE OFFICER	AGREED ACTION	RISK ACCEPTED/ MANAGED	AGREED DATE OF COMPLETION
3.3.2 (cont)	Management should review all recurring variances to ensure that the commitment recorded on Frameworki is accurate.		Agreed		July 2013