Internal Audit Report





Internal Audit Report Education and Children's Services, Children and Families' Services 13-35 Looked After Services – The Cottages March 2014

Final Report

Chief Executive's Service Finance Division Perth & Kinross Council 2 High Street Perth PH1 5PH

Background and Introduction

This audit is undertaken as approved by Members of the Audit Committee in December 2013 as an addition to the Internal Audit Plan. The addition to the Audit Plan will be requested to be formally approved in February 2014 at Audit Committee.

The two cottages at Almondbank (The Cottages) provide a facility for children with challenging situations. The facility includes a residential aspect, respite opportunities for carers of children / young people, crisis care and also an outreach service for identified young people within the community. The services are provided by the Community Support Team (CST) in compliance with the Social Care and Social Work Improvement Scotland (SCSWIS) registration.

Education & Children's Services (ECS) provides the financial framework, legal and operational guidance for Children and Families' Services. This framework and guidance are included within the Service's Operational Guidance documents which are available online. They provide details of legal requirements and operational functions and objectives and include procedures and guidelines applicable to Looked After Children / Young People.

The scope of this audit was to review the adequacy of the arrangements in place to ensure the achievement of management control objectives within Looked After Services. This report details the findings in relation to senior managers in the service, ECS Finance Support Team and the Community Support Team. Visits to managers and the teams took place during January and February 2014.

Acknowledgements

Internal Audit acknowledges with thanks the co-operation of CST staff at Almondbank House and ECS Finance Support Team during this audit.

Control Objectives and Opinions

This section describes the purpose of the audit and summarises the results. A 'control objective' is a management objective that requires the maintenance of adequate and effective internal controls to ensure that it is achieved. Each control objective has been given a rating describing, on the basis of the audit work done, the actual strength of the internal controls found to be in place. Areas of good or poor practice are described where appropriate.

Control Objective: To ensure that arrangements are in place to identify service users and to ensure that appropriate risk assessments are carried out.

Auditor's Comments:

Service users are identified by staff using approved procedures, guidelines and standard forms available on the Council's intranet pages. The range of documents is comprehensive and readily available, with links to facilitate appropriate use. Using the forms and guidelines available, arrangements to identify service users are generally effective although the majority of the documents were issued in 2008 and some have subsequently been the subject of ad-hoc revisions which have not been reflected across the full range of documents.

The Functions and Objectives document is a prime document and is largely appropriate, but would benefit from updating to better reflect the admission criteria

and the distinct nature of services available at the Cottages.

Our review confirms that the identification and referral of service users follows published guidelines and procedures. Although the reasons in support of decisions by the CST to accept or refuse referrals are noted in individual case files they are not recorded in the referral documentation, which does not allow transparency and ease of future reference.

Our sample test of 2013 files confirms that risk assessments have been satisfactorily carried out for potential service users using the standard templates which form part of the referral process. However, there are no guidelines or recommendations in respect of re-assessment of risks, which may be advisable when service users return to the cottages after periods away or when their circumstances have changed.

Strength (of Internal	Controls [.]
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Moderately strong

Control Objective: To ensure that consideration is given to the provision of value for money in service delivery models.

Auditor's Comments:

Use of the services provided by The Cottages is, to a significant extent, demand driven, thus services delivered to individual service users are not routinely the subject of value for money assessments. The audit therefore looked at the broad range of management controls including value for money, performance and financial management.

Value for Money / performance monitoring does not play a significant role at team level, value for money exercises would be considered when appropriate at senior management consideration of strategic reviews, resource allocations and budget proposals.

Performance of The Cottages was assessed as good or very good under the 2013 annual review by the Care Inspectorate.

The CST produce monthly reports of daily bed occupancy statistics for The Cottages although these are not supported by comparators or explanatory notes.

CST also collates a broad range of statistics for inclusion in annual reports, both internal to the Council and external to the Care Inspectorate/SCSWIS. However, in the absence of a team improvement plan which should be in place, there is no inyear performance monitoring or reporting. This represents a potential management control weakness

Monthly budget monitoring processes at team level are good and have identified an over-spend on the CST for 2013/14 of approximately £75,000, which represents 10% of the budget. There is, however, evidence that the Service Management Team review expenditure within the looked after children budget to ensure that overall expenditure is contained.

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Management Action and Follow-Up

Responsibility for the maintenance of adequate and effective internal controls rests with management.

Where the audit has identified areas where a response by management is required, these are listed in Appendix 1, along with an indication of the importance of each 'action point'. Appendix 2 describes these action points in more detail, and records the action plan that has been developed by management in response to each point.

It is management's responsibility to ensure that the action plan presented in this report is achievable and appropriate to the circumstances. Where a decision is taken not to act in response to this report, it is the responsibility of management to assess and accept the risks arising from non-implementation.

Achievement of the action plan is monitored through Internal Audit's 'follow up' arrangements.

Management should ensure that the relevant risk profiles are reviewed and updated where necessary to take account of the contents of Internal Audit reports. The completeness of risk profiles will be examined as part of Internal Audit's normal planned work.

Feedback

Internal Audit welcomes feedback from management, in connection with this audit or with the Internal Audit service in general.

Reporting

The final report has been distributed to:

B Malone, Chief Executive

J Fyffe, Executive Director (Education & Children's Services)

B Atkinson, Depute Director (Education & Children's Services)

A Irvine, Head of Children and Families' Services

C Mackie, Service Manager, Looked After Services and Planning, Performance and Partnership

L Richards, Service Manager, Children & Families' Services

E Beck, Team Leader, Looked After Children, Community Support Team

J Symon, Head of Finance

G Boland, Senior Business & Resources Manager

G Taylor, Head of Democratic Services

P Dickson, Complaints & Governance Officer

External Audit

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Authorisation

The auditor for this assignment is D.Brownlow. The supervising auditor is J.Clark. This report is authorised for issue:

Jacqueline Clark Chief Internal Auditor Date: 12 March 2014.

Appendix 1: Summary of Action Points

No.	Action Point	Risk/Importance
1	Procedures, Guidelines and Forms	Low
2	Functions and Objectives	Medium
3	Admission Criteria	Low
4	Risk Assessments	Low
5	Performance Monitoring	Medium

Appendix 2: Action Plan

Action Point 1 - Procedures, Guidelines and Forms

Whilst the range of Children and Families' Services documents is comprehensive and readily available on the Council's intranet, the majority of the documents were issued in 2008. Some of the documents have subsequently been the subject of ad-hoc revisions, new documents have been introduced and the services provided at The Cottages have evolved resulting in a number of the documents and links no longer being entirely appropriate. The headings/descriptions and the intended use is not always clear.

Management Action Plan

The operational guidance held on the intranet will be updated to reflect the current functions and services of the Community Support Team.

Importance:	Low
Responsible Officer:	C Mackie, Service Manager & Linda Richards, Service Manager
Lead Service:	Education and Children's Services
Date for Completion (Month / Year):	May 2014
Required Evidence of Completion:	Updated intranet pages

Auditor's Comments

Satisfactory			
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Action Point 2 - Functions and Objectives

A detailed document setting out the functions and objectives of the service is included in the range of documents on the intranet but was issued in 2008 with a timetabled review due in 2009. Although parts of the document have been reviewed, a full review and update under the document control process has not been undertaken resulting in the following:

- the section setting out the admission criteria, which includes targeted and potential age range of service users and guidance on the intended length of residencies at the cottages should be extended to describe the flexibility of services available; and
- a section setting out the specific objectives of, and services available at, the cottages should be included.

Management Action Plan

The operational guidance held on the intranet will be updated to reflect the current functions and services of the Community Support Team.

Importance:	Medium
Responsible Officer:	C Mackie, Service Manager & Linda Richards, Service Manager
Lead Service:	Education and Children's Services
Date for Completion (Month / Year):	May 2014
Required Evidence of Completion:	Updated Functions & Objectives document

Auditor's Comments

Action Point 3 - Admission Criteria

The final decision regarding the admission or otherwise of a referred service user rests with the Improvement Manager and the CST team leader.

Although the reasons in support of decisions by the CST to accept or refuse referrals are noted in individual case files they are not recorded in the referral documentation, which does not allow transparency and future reference.

Management Action Plan

A review of the internal Resource Panel is currently underway to develop a process for logging the discussion and decisions around all children and young people considered for placement and to be recorded on SWIFT. Further development of the SWIFT system will be required to enable reports to be drawn down for management overview and audit of the decision making process.

Importance:	Low
Responsible Officer:	E Beck, Team leader, Looked After Children, Community Support Team
Lead Service:	Education and Children's Services
Date for Completion (Month / Year):	July 2014
Required Evidence of Completion:	Evidence of SWIFT recording

Auditor's Comments

Action Point 4 - Risk Assessments

The process of referring a child / young person for admission to The Cottages includes the completion of risk assessment documentation. However guidance documents do not include a requirement for risks to be subsequently re-assessed to reflect either the passing of time or changes in circumstances.

CST confirmed that risks would be reviewed as part of the process of completing each service user's weekly Placement Plan although this is not noted in guidance documents.

Management Action Plan

The Operational Guidance will be updated to include the development of the Placement Plan and the dynamic risk assessment process already in place within the Residential unit. This will also be rolled out to the Respite unit.

Importance:	Low
Responsible Officer:	E Beck, Team leader, Looked After Children, Community Support Team
Lead Service:	Education and Children's Services
Date for Completion (Month / Year):	July 2014
Required Evidence of Completion:	Updated operational guidance

Auditor's Comments

Action Point 5 – Performance monitoring

The CST produce monthly reports of daily bed occupancy statistics for The Cottages. This information is not supported by comparators or explanatory notes.

CST also collates a broad range of statistics in respect of The Cottages for inclusion in annual reports, both to the Council and to the Care Inspectorate/ SCSWIS. However, in the absence of any agreed performance targets or indicators or a team improvement plan, there is no in-year performance monitoring or reporting.

Performance monitoring reports would be expected to include brief details of any targets, activities, challenges or outcomes from across the whole range of activities of the team including both within The Cottages and with Outreach work.

As the performance of The Cottages is assessed primarily on quality rather than quantity this would be expected to be reflected in performance monitoring reports with comments and explanations being more significant than statistics or numbers.

Management Action Plan

Building on the quarterly reporting of occupancy for The Cottages to Children and Families' Service Management Team, a 'balanced scorecard' approach will be introduced. This will include information and statistics covering the work undertaken by the team, such as community support, assessment, outreach and out of hours support. Monitoring of the outcomes in relation to these interventions will be collated.

Qualitative information that is already collected from residents and their families/carers as part of the Care Inspectorate annual report will be included in this performance overview.

The service Improvement Plans already in place were developed as part of the recent inspections, and these will be used as the basis for the new 2014/15 improvement plan.

A process for reporting information with trends from previous years will be developed in draft format initially.

Importance:	Medium
Responsible Officer:	A Irvine, Head of Children & Families' Services
Lead Service:	Education and Children's Services
Date for Completion (Month / Year):	May 2014
Required Evidence of Completion:	Balanced scorecard and improvement plan

Auditor's Comments