

Internal Audit

Follow up Audit Committee Summaries

2023/24

Follow up report: 0-19 Healthy Child Programme

Original audit assurance rating



Substantial

	Extreme	High	Medium	Low
Number of actions				3
Implemented				2
Superseded				
Progressing				1
Not implemented				

Our previous review of the 0-19 Healthy Child programme, reported in March 2023, resulted in a substantial assurance opinion. We reported that:

- Robust financial monitoring arrangements are in place and there is scrutiny of Key Performance Indicator (KPI) submissions. The Public Health Practitioners identify any anomalies or errors in the performance information, along with any trends; declines and improvements in performance, they also provide feedback to the provider and will ask for data to be presented differently where it does not meet their needs.
- The outcome reporting has identified a number of areas not meeting the required targets and the council and the provider have been working together on these areas, in an effort to improve performance.
- The underperformance has been internally escalated to the Public Health Contracts and Procurement board, with decisions being taken at the highest level on the appropriateness of implementing a formal remedial action

plan, which the council and the provider agreed to be delivered during quarter 4 of 2022/23.

- The Public Health team have already recognised areas where the service specification could be improved and on where there have been lessons learned from the existing contract which can be taken forward into the re-commissioning of the service.

Our original review did not identify any significant gaps or weaknesses in the overall contract monitoring framework. We did agree two actions to strengthen the current control environment and one to improve efficiency and are pleased to report that two of these have now been implemented and one is progressing well ready for the mobilisation of the new provider.

Follow up report: Management of Failing Care Homes

Original audit assurance rating



Moderate

	Extreme	High	Medium	Low
Number of actions			3	1
Implemented			2	
Superseded				
Progressing			1	1
Not implemented				

A follow-up audit has been completed to determine the progress made to implement the actions agreed in the internal audit report, Managing Failing Care Homes, issued in November 2022. The processes and controls operated by the Quality Improvement and Contract Monitoring Teams in relation to the management of failing care homes were adequately designed and effectively operated.

Three medium and one low risk action were agreed to be implemented and based on the information and evidence provided to us, we are satisfied that adequate progress had been made in implementing these actions. One action had been partially implemented, although staff had received training on the Quality Performance and Improvement Plan processes the peer review had yet to be completed. It is intended that it will be conducted later in the year allowing time for processes to embed and updates to the terms of reference to be completed. A revised implementation date of when they intend to have conducted the peer review was agreed.

Follow up report: Safeguarding Adult Reviews

Original audit assurance rating



Moderate

	Extreme	High	Medium	Low
Number of actions			3	
Implemented			3	
Superseded				
Progressing				
Not implemented				

A follow-up audit has been completed to determine the progress made to implement the actions agreed in the internal audit report, Safeguarding Adult Reviews, issued in November 2022. The processes and controls operated by the Lancashire Safeguarding Adults Board in relation to safeguarding adult reviews (SARs) were adequately designed. At the time of the review only one SAR had been completed and there was insufficient evidence available to provide assurance over the effectiveness of the controls in operation.

Three medium risk actions were agreed to be implemented and based on the information and evidence provided to us, we are satisfied that they have been implemented. The SAR process has been reviewed and guidance updated to include contingency arrangements to send an alternative officer to the SAR Panel in the event the representative is not able to attend. Also, a decision flowchart has been developed for the key stages of the SAR setting out timescales. Learning is highlighted throughout the SAR literature and meetings have been held with senior managers to address implementation of the historic Lancashire actions.

Follow up report: Transition from Children's to Adults' Services

Status of agreed actions

Original audit assurance rating



Moderate

	Extreme	High	Medium	Low
Number of actions			2	1
Implemented			2	1
Superseded				
Progressing				
Not implemented				

A follow-up audit has been completed to determine the progress made to implement the actions agreed in the internal audit report, Transition from Children's to Adult Services, issued in March 2023. Our original audit provided moderate assurance that the processes and controls operated by the Transitions team in relation to the transitioning of young people into Adult Social Care are adequately designed and effectively operated.

Two medium and one low risk actions were agreed to be implemented and based on the information and evidence provided to us, we are satisfied that they have been implemented. The Transitions Policy has been approved by Cabinet in December 2023 and had been published on the council's intranet policy, procedures, and guidance. A terms of reference had been introduced for the Preparing for Adulthood Delivery Group and actions are recorded and allocated to a named officer and annotated when the actions have been completed. Officers had been reminded to complete mental capacity assessments and instances are raised where staff have been asked to undertake work outside their remit.

Follow up report: Workforce Wellbeing

Status of agreed actions

Original audit assurance rating



Moderate

	Extreme	High	Medium	Low
Number of actions		1	2	
Implemented		1	1	
Superseded				
Progressing			1	
Not implemented				

Our previous review of Workforce Wellbeing was completed in March 2023. We reported one high priority action associated with governance and responsibility for a consolidated corporate approach, and two medium priority actions regarding publicising availability and accessibility of wellbeing information, support and training, and measuring effectiveness of employee support mechanisms on offer.

The original review considered existing methods and how the wellbeing approach and offer could be further enhanced and improved to contribute to the overall corporate workplace wellbeing agenda and staff experience. Across the council, there were a number of teams and services delivering various aspects of the wellbeing approach, and also corporate and directorate workstreams such as the People Strategy and the Adult Social Care Workforce Development Strategy being progressed via corporate improvement and change programmes.

During 2023, the overall wellbeing approach was subject to corporate review. This has resulted in changes to governance structures and operational delivery processes, and specifically, establishment of People Services. As development continues, we are pleased to confirm that significant progress has been made towards improving and delivering the wellbeing offer and achieving the organisational outcomes of the People Strategy.

Follow up report: Supervision within the Quality, Contracts and Safeguarding Adults Service

Status of agreed actions

Original audit assurance rating



Moderate

	Extreme	High	Medium	Low
Number of actions			5	3
Implemented			3	2
Superseded			1	1
Progressing			1	
Not implemented				

Our previous review of Supervision within the Quality, Contracts and Safeguarding Adults Service (QCSAS) was completed in October 2021. We reported five medium priority actions associated with supervision practice, guidance and procedure requirements, and three low priority actions regarding policy revision, consistent approach, and supervisee experiences.

The review considered the adequacy of supervision arrangements for supporting staff, ensuring compliance or quality issues are appropriately identified, reported and acted upon, enabling staff to maintain and develop their capacity to meet work objectives.

Since the original review was completed, adult social care supervision practice guidance and procedure has changed, they are now administered electronically, also there have been staffing structure changes within the QCSAS. As a result and based on the information and evidence provided to us, we are satisfied that two agreed actions regarding updating policy and maintaining contracts have been superseded, five relating to process requirements and continuous improvement have been implemented, and one associated with quality assurance is progressing.