INTERNAL AUDIT SUMMARY REPORT

SYSTEMS AUDIT – COMMUNITY CARE

1. INTRODUCTION

1.1. This audit was carried out in line with the Internal Audit Plan 2019/20, and in full consultation with operational staff and management.

1.2. The scope of the audit was to determine the effectiveness of the internal controls within the Community Care processes with specific regard to the adherence to the Adult Services Quality Assurance process.

1.3. The audit was conducted by the Senior Auditor and took the form of a series of detailed tests and checks, together with discussions with operational staff and managers.

2. SUMMARY OF FINDINGS

2.1. Thirteen weaknesses were identified, five of which were classified as High Risk, seven of which were classified as Medium Risk, with the one remaining weakness classified as Low Risk. The weaknesses identified as High Risks were:

- The Care Management policy or guidance notes were out of date at the time of the audit.
  Agreed Action – The Care Management guidance notes are being reviewed and updated as necessary in accordance with the new procedures and documentation that are being designed. These will be subject to formal DMT approval.
- There were instances identified where the Tier 1 Quality Assurance (QA) Self-Assessment form had not been completed and attached to WCCIS (Welsh Community Care Information System).
  Agreed Action – The process is being redesigned with the QA process being integrated within the ordinary procedures that must be completed by the practitioner within each case.
- There were instances identified where a Consent to Share Information document had not been attached to WCCIS.
  Agreed Action – The Consent to Share process is being redesigned where the information is captured and verified once. Consent to Share will form part of the Care Management and QA process that is integrated.
- The Corporate Performance Team do not have access to the Tier 2 QA information to facilitate the Tier 3 process.
  Agreed Action – A new policy and Quality Assurance process is being designed and will negate the requirement for this access.
- It could not be confirmed that the outcomes of the Tier 3 QA process had been fed back to the relevant practitioner.
  Agreed Action – The integrated QA process that is being designed will ensure accountability for the practitioners involved and will provide feedback to address any issues.

3. CONCLUSION

3.1. After reviewing all documentation and the current system, it was found that the internal controls used within the Community Care process generally appear to be operating effectively in respect of care management processes. However, a significant number of weaknesses have

been identified through the sample testing undertaken specifically in respect of the Quality Assurance policy and the adherence to the procedures contained therein.

3.2. The Social Services DMT has agreed mitigating actions for the weaknesses identified.

4. INTERNAL CONTROL STANDARD GRADING

4.1. In accordance with the standard gradings, the systems examined indicate that internal controls used within the Community Care processes generally appear to be operating effectively; however, a significant number of weaknesses were identified through the sample testing undertaken specifically in respect of the Quality Assurance policy and operation of its procedures. The grading is therefore assessed as **'Limited Assurance'**.