

Appendix 2: Audit Opinion and Summaries

Assurance



Adults Covid-19 Social Care Recovery

Objective

To assess the robustness of measures to monitor and review the temporary changes to normal day-to-day processes / arrangements which aimed to ensure the care and support of vulnerable residents was prioritised (eg. postponement of financial assessments for residents receiving care and relaxation in approval arrangements for changes to care packages) during the lockdown in response to the Covid-19 pandemic.

Summary

The Covid-19 pandemic represents the biggest challenge to human health and wellbeing in recent times. It has had, and will continue to have, a fundamental impact on the day-to-day life of everyone in the UK, the world, national and local economy, national public policy, as well as the services, finances and governance of all local authorities.

The Council, working collaboratively with partners and the community, has overseen an unprecedented mobilisation of resources to address the crisis. This response has helped to significantly mitigate the impact, has saved lives of residents, alleviated a crisis in the NHS and Care sector and supported the most vulnerable in our community.

The Council has worked very closely with its health colleagues to ensure hospital capacity remained available by helping care providers prepare to receive those being discharged. Furthermore, support in understanding national guidance, managing workforce challenges, providing PPE, maintaining contact and communication channels and providing financial support to both domiciliary care providers and residential care homes for 3 months was also part of the Council's response.

In order to respond, the Council made changes to the way services were delivered, managed and monitored. The purpose of this audit was to review how several of these process changes were agreed, implemented, operated and where applicable, have transitioned back to business as usual.

Processing of Adult Social Care payments and Financial support to domiciliary care providers and residential care homes

Payments for the provision of domiciliary care and residential care provision continued to be made by the Council for commissioned care in line with standard operating processes.

In addition, the Council provided additional financial support to domiciliary care providers and residential care homes for 3 months at the beginning of the pandemic to ensure they could maintain their services whilst their resources were being impacted by the largescale response to the pandemic.

Appendix 2: Audit Opinion and Summaries

Assurance



This support was clearly articulated to providers on commencement, with an agreement that domiciliary care providers had to provide 75% delivery of their expected commissioned care in order to be reimbursed up to 100% and, for residential care homes, a 10% top up of their agreed scheduled payments would be provided.

The Council used actual data recorded in systems to assess the attainment of domiciliary care providers and payment schedules for residential care homes to inform their payment calculations. Specifically for domiciliary care providers, as payment was made for “frustrated” visits where care was not accepted / required, despite an attempt to deliver, the Council tracked these visits, which ensured that no provider was paid beyond 100% of their agreed contract value.

Throughout the 3-month period of support, the Council performed reconciliations for all payments, to ensure no under or over payments were present. A final reconciliation was performed to confirm all providers and care homes were paid what they were due in line with the rationale set.

The decision to provide this financial support aided the Council’s ability to exercise their duty of care to those who needed support through the delivery of services by such providers. The processes and controls, using the systems in place, were effective in identifying the necessary payments to be made, with these payments remaining in line with the budget allocation made by the Council and payments were approved in line with the Council’s standard working practices.

Internal Audit were able to sample test payments made during the period and appropriate controls were noted as being in place.

Hospital discharge process

The Government and the NHS introduced a revised hospital discharge process to help free up hospital beds in a timely manner when a patient was ready to be discharged. This change transferred the responsibilities for performing an initial assessment of care to hospital ward staff so patients could be duly supported in either returning home or into a care setting. Then for a period of up to 6 weeks, this care could be recharged back to the NHS by the Council, whilst the Council assessed the need for longer term care and, if that was required, the Council would resume responsibility for this care and its cost and the service user would be duly assessed for any financial contribution.

It is clear the Council has mobilised and adapted to the hospital discharge process to work with its partners and embed working practices at a fast pace, making the necessary changes to team alignment, system use and functionality to ensure when a person is discharged, they are supported and cared for accordingly. This was all completed, and continues to operate, whilst both the hospital and Adult Social Care teams have been under immense pressure, as well as supporting on a number of frontline activities.

Appendix 2: Audit Opinion and Summaries

Assurance



Internal Audit were able to validate the key stages of the process, which are supported by required documentation and that has informed the recharging regime. The recharge process uses the best available data to inform its invoicing to ensure that the Council is in receipt of the funding it is due.

This audit has provided management with positive feedback on the process changes implemented and the execution of specific decisions across the areas of scope. Where there have been minor areas to strengthen the process identified, management have acted on these promptly. It will be important that the Council looks back and considers what worked well as part of this experience as well as what didn't and take on board any identified key learnings to ensure, in the likelihood a response is needed to a similar largescale incident / event again, the agility demonstrated through this incident is accompanied by the documentation and governance requirements incumbent on all public bodies in safeguarding public funds.

Number of actions agreed: 0