



Comhairle nan Eilean Siar
Internal Audit Review
Final Report- Care at Home 2023/24 - 14

22 April 2024

COMHAIRLE NAN EILEAN SIAR
INTERNAL AUDIT FINAL REPORT
CARE AT HOME

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Management Response Received	8 March, 15 March, 22 April
Final Report Issued	22 April 2024

Issued to:	
Chief Executive	Malcolm Burr
Chief Officer	Nick Fayers
Head of Partnership Services	Emma Macsween
Service Manager- Home Care and Reablement	Mary Anne Maciver
External Audit	Martin Devenny

SECTION 1: EXECUTIVE SUMMARY

Introduction

1.1 The Report has been prepared following an internal audit review of the Care at Home Service as part of the operational annual internal audit plan for 2023/24. The purpose of the Report is to provide an overview of the Comhairle's arrangements for the operation and management of Care at Home. The scope of the audit included a review of the following objectives:

- Confirm that sufficient documentation exists to evidence compliance with policies and protocols;
- Confirm that the demand for home care is continuously monitored by senior officers and the care packages provided and requested are analysed to verify the need is adequate;
- Confirm the procedures in place for where the authority has been unable to provide Care at Home when there is a need;
- Confirm that there are regular reports provided to Management on the level and demand for Care at Home services;
- Confirm that there are ongoing monitoring reviews to meeting the care needs and maintaining a sustainable budget;
- Confirm the results of the most recent Care Inspectorate inspections;
- Confirm that every person using a Care at Home service has a personalised care and support plan which details how health and wellbeing needs will be monitored and met in a way that meets the needs of the individual;
- All Care at Home employees are SSSC registered, are working towards a recognised qualification, have training undertaken relevant to the profession, i.e. medication, palliative care, ulcer recognition, foot care, managing a stoma, how to look for signs of distress etc;
- Confirm that there is a strategic plan in place between the two parent bodies – IJB and the Comhairle for the delivery of the Care at Home services;
- Undertake a sample of thirty service users and confirm if the hours provided are in accordance with the care plan;
- Confirm what support is available for managing stress and high workloads in the Care at Home sector;

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- Confirm the number of agency workers and how many have been deployed over the financial year; Protocols, procurement, checks etc.
- Confirm the impact and effects of the cyber incident of November 2023; and
- Confirm the business continuity plan has sufficient risk mitigation given the recent events which have affected the Comhairle.

Background Information

- 1.2 Care at Home is the preferred option for most people who have limited mobility and/or frailty to receive the right support to remain at home. The Western Isles have the challenges of an ageing population and reduced availability of public funding as well as a huge shortfall in the staff availability to provide a safe and reliable service.

We have 242 service users and 108.23 full time equivalent staff delivering an invaluable service. Seventy-nine service users use /also use the Self-Directed Support (SDS) payments. Service users have four options to choose from in the provision of care offered by Comhairle nan Eilean Siar. After Option 3 (Local Authority Arrangement of Services), the second most popular option is Option 1 (Direct Payment) where service users are free to choose and control their own care and support. Monitoring is undertaken through detailed quarterly return to the Comhairle. Without SDS availability this would, without doubt, add to the number of people waiting for Care at Home.

Concluding Remarks

- 1.3 Our detailed findings are included within the body of the Report. We would point out that the most significant issues arising from our review which require management attention are:
- Completion of formal training SVQ Level 2/SVQ Level 3 (Medication Unit) to be progressed and other mandatory training to be refreshed as necessary (Med 1, Med 2), .and
 - Sickness levels and return to work procedures to be examined and training offered to Line Managers who are tasked to undertake these processes. (Med 3)

The demand for Care at Home is continuously monitored. Current demand for service currently outweighs what the service can offer. Short-term strategy of agency workers is being utilised to keep the service functioning; this is however very costly. A medium-term strategy is being looked at to advertise the vacancies further afield and offer key worker accommodation status to attract workers.

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It should be noted that our findings and conclusions are based on the information made available to us at the time of our review. There are current limitations in place as a result of a cyber-attack on 7 November 2023. This is likely to have limited our access to documentation prior to this date which requires to be acknowledged when considering the contents of the Report.

SECTION 2: RECOMMENDATIONS AND AUDIT OPINION

- 2.1 We have graded our detailed findings and recommendations, based on the likelihood of the identified weakness occurring and the impact on the Comhairle if it should occur.

The following table contains the definitions applied by Internal Audit in rating audit findings/actions and the number of recommendations in each rating.

Definition of recommendation	Grade	No.
Major weaknesses that could have a significant impact on the Comhairle if not addressed and contained urgently.	High	
Important issues relating to controls being absent, not operating as expected or could be improved.	Medium	3
The weakness is unlikely to have a material impact on the Comhairle. These are not critical but management should address.	Low	2

Where we have identified isolated exceptions in our sample testing, and we consider that they are unlikely to recur; and would have no significant impact if they should occur;

We have classified them as minor or trivial, discussed them with relevant officers and detailed them in Appendix C to the Report.

- 2.2 Based on the audit work carried out our overall opinion is that a **Reasonable** level of assurance can be placed upon the control environment of the service/area under review.

A sound system of governance, risk management and control exist, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

It should be noted that our findings and conclusions are based on the information made available to us at the time of our review.

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22 April 2024

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SECTION 3 – FINDINGS, RECOMMENDATIONS AND ACTION PLAN

GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Low 1	A fully comprehensive Home Care and Reablement Handbook is in place. There have been various updates with the last update in 2021.	Consideration should be given to refresh the Home Care and Reablement Handbook in the event that there have been any changes/updates to legislation since the last date.	The format of the Handbook is such that the pages can be removed and replaced with updates to reflect changes and additional information. A review of the handbook will be undertaken over the coming months.	Service Manager- Home Care and Reablement	June 2024

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GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Low 2	Strategic frameworks are structured approaches for establishing methods to outline plans to achieve future goals of the service. The Health and Social Care Strategic Framework 2023-26 is at draft stage with work going on through ICMT to formalise.	Progress should be made to finalise the framework document.	<p>The IJB has now moved to formally consult on the Strategic Framework and the principles outlined in the framework will support annual cycle of commissioning and in turn service delivery.</p> <p>The Health and Social Care Business Plan and associated Risk Register is the substantive source for reference in terms of business planning for strategic and operational matters and is updated for member oversight in line with corporate requirements.</p>	<p>Chief Officer</p> <p>Head of Partnership Services</p>	<p>Ongoing</p> <p>Complete</p>

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GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Med 1	<p>It is a requirement that new and existing staff start their SVQ level 2 within 6 months of appointment. Following completion of the SVQ level 2, the SVQ level 3 unit in Medication is a requirement. There are no time limits set for completion of these modules.</p> <p>From our findings, progression of the SVQ2 is not going as we would expect. We found a number of employees are at different levels with not much progression since the start of the module, with other nearing completion.</p> <p>The staff that have completed the SVQ2 are able to progress to a higher pay grade, but further competency is required by completing the SVQ3, medication module. This makes a difference to the service as more staff can undertake medication duties and takes the pressure of the Care & Support Supervisors in delegating and scheduling tasks with a limited resource.</p>	<p>The Employability Manager and Service Manager- Home Care and Reablement to continue discussions to accelerate the progress of the SVQ level 2 and SVQ level 3 Medication unit, specifically the ones that have started in 2023 and beforehand with little or no progress to date.</p>	<p>Have met with Employability Services Manager and awaiting a robust training programme for staff who have yet to commence the required qualification, SVQ level 2 as well as the medication unit level 3.</p> <p>Have requested that staff who are currently working toward their qualification are supported to complete it in agreed timescale and that existing staff are prioritised over new staff into the service, to attain their qualification.</p>	<p>Employability Services Manager/ Service Manager- Home Care and Reablement</p>	

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GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Med 1 (cont)	Further discussions have identified that the staff working toward the qualification are eager to complete to progress to the uplift in pay grade.				

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GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Med 2	<p>Post the cyber-attack of 07 November 2023 the training logs held on the server are no longer available. We were provided with logs downloaded from the Call Confirm Live (CCL) system where training is also recorded for Lewis and Uist. Training covered includes Dementia Awareness, Medication Administration, Moving/ Handling, Health and Safety and Personal Care.</p> <p>From analysis of the training logs provided there are gaps where training has not been undertaken and where training certificates have lapsed. Due to the missing data, it cannot be determined if the training has not been undertaken or if it has been undertaken and not recorded on the CCL system.</p>	<p>Training logs are to be brought up to date and arrangements to be made for any training that has lapsed/ not been completed to be undertaken.</p>	<p>All training undertaken by staff is recorded on CCL (staff monitoring and scheduling IT system). There are some instances where training has lapsed mainly due to long term sickness absences. For training completed on Learnpro a monthly report has been set up in order for Admin staff to be able to update the training log on CCL on a more regular basis. Where Learnpro training has lapsed Supervisors will follow up with staff and support them to complete the required training modules.</p>	<p>Service Manager- Home Care and Reablement.</p>	<p>July 2024</p>

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GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Med 3	<p>A report was presented in November 2023 to the HR Subcommittee detailing an increase in sickness levels in 2022/23 for Residential and Care at Home services.</p> <p>Care at Home provided their sickness report for the period May - October 2023 and this identified high levels of sickness absence mainly due to Musculoskeletal issues, Stress at Work/ Home and Arthritis. There are several long-term absences within the department and this will have an impact in relation to costs and staff morale.</p> <p>Expectation is that any sicknesses over 4 weeks should be continuously followed through with meetings, assessments, and other areas to be explored to get the employee back to work.</p>	<p>Follow up sickness reviews for long term sickness absence to be more rigidly applied going forward as absences due to staff being off has an impact on the service and colleagues.</p>	<p>The policy on Sickness Absence identifies any areas of sickness must be addressed by the Line Managers of the service and not by the HR function.</p> <p>HR supports Line managers and facilitates meetings upon request.</p> <p>The service always aims to follow the Sickness Absence policy with the service identifying levels of sickness requiring to be addressed and plan and arrange sickness absence reviews accordingly as well as contact being made with staff who are off on long term sickness. There was a hiatus where sickness absence reviews were put on hold due to limited HR staff resource. In recent weeks the service has progressed with this, in particular with the staff who are off on long term sickness. The management of sickness absence is a high priority for the service as the sickness absences compounded by the high level of vacancies in the service impacts negatively on service provision and on staff morale.</p>	<p>Head of Human Resources and Performance/</p> <p>Service Manger – Home Care and Reablement</p>	<p>ongoing</p>

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GRADE	FINDINGS & IMPLICATIONS	RECOMMENDATION	MANAGEMENT COMMENT	RESPONSIBLE OFFICER	TARGET DATE OF IMPLEMENTATION
Med 3 (cont)	<p>We undertook a short survey as part of our review for all Care & Support Supervisors and one of the main issues identified was that the follow up sickness reviews are taking a long time in being addressed.</p> <p>The policy on Sickness Absence identifies any areas of sickness must be addressed by the Line Managers of the service and not by the HR function.</p> <p>Additionally, there were very positive remarks in the survey from the Care & Support Supervisors in the support received from their Line Managers and also how the agency workers have assisted in keeping the service going due to recruitment difficulties.</p>				

RESPECTIVE RESPONSIBILITIES OF MANAGEMENT AND INTERNAL AUDIT

Responsibility in Relation to Internal Controls

It is the responsibility of the Comhairle's management to maintain adequate and effective financial systems and to arrange for a system of internal controls. Our responsibility as internal auditors is to evaluate the financial systems and associated internal controls. In practice, we cannot examine every financial implication and accounting procedure within an activity, and we cannot substitute for management's responsibility to maintain adequate systems of internal controls over financial systems. We therefore may not identify all weaknesses that exist in this regard.

It is the responsibility of the Comhairle's management to consider the detailed findings of this Report, where such findings have a specific impact on risk registers. This may include a risk that has not yet been identified, or current risk controls which may be required to be updated to reflect any changes as a result of the findings contained in this report.

Responsibilities in Relation to Fraud and Corruption

The prime responsibility for the prevention and detection of fraud and irregularities rests with management. They also have a duty to take reasonable steps to limit the opportunity for corrupt practices. It is our responsibility to review the adequacy of these arrangements, but our work does not remove the possibility that fraud, corruption or irregularity may have occurred and remained undetected.

We nevertheless endeavour to plan our internal audit work so that we have reasonable expectation of detecting material fraud, but our examination should not be relied upon to disclose all such material frauds that may exist.

DEFINITION OF AUDIT OPINIONS AND RATINGS

The standard definitions for internal audit assurance over an engagement are as follows:

Level of Assurance	Definition
Full Assurance	Internal control, governance and risk management are of a high standard. A sound system of control to achieve the system objectives exists and the controls are being consistently applied.
Substantial Assurance	A sound system of governance, risk management and control exist, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

ISOLATED EXCEPTIONS TO EXPECTED PROCEDURES AND CONTROLS

ITEM	ISOLATED EXCEPTION	RESPONSIBLE OFFICER	AGREED Y/N	DATE OF DISCUSSION