

WIRRAL COUNCIL

REPORT OF THE DIRECTOR OF ADULT SOCIAL SERVICES

**AUDIT AND RISK MANAGEMENT COMMITTEE 3 NOVEMBER 2009**

**PROGRESS REPORT ON ACTION PLAN IN RELATION TO PUBLIC INTEREST DISCLOSURE ACT 1998 (PIDA).**

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### ***Executive Summary***

*The purpose of this report is to update members on the actions undertaken by the Department of Adult Social Services in response to the Public Interest Disclosure Act 1998 (PIDA). The report has been set out to inform members as to the actions completed by January 2009 at which point this report was delayed whilst the investigation into audit and disciplinary matters were undertaken. The actions completed since January 2009 and any matters which remain outstanding have therefore been identified separately.*

## **1 Background**

1.1 The PIDA report produced by the Audit Commission identified 5 broad actions:

- *Complete the outstanding matters in respect of the Supported Living contracting process, including the completion of contracts by current providers (AC R1).*
- *Clarify plans for the subsequent re-tendering of the Domiciliary Care Contract (AC R2).*
- *Formalise and embed contract monitoring arrangements for Supported Living contracts (AC R3).*
- *Complete outstanding financial assessment reviews for service users with Learning Disabilities, ensuring required financial compensation is provided (AC R4).*
- *Ensure appropriate safeguards are applied to protect vulnerable service users from the risk of any potential financial abuse. (AC R5).*

1.2 Progress has been made through a series of sub actions, most of which have been completed as outlined in the attached action plan (Appendix I).

1.3 In addition to the Audit Commission Report an Internal Audit Report dated 13 March 2008 identified 7 broad actions in relation to the PIDA:

- *Written procedures should be compiled for the accreditation process. They should be comprehensive and ensure fair competition and a consistent approach is maintained. They should be authorised by the DASS Strategic Leadership Team and be readily available to all relevant staff.*

- *To ensure a fair and consistent desktop evaluation and interview process, the same panel should be involved in both.*
- *All desktop evaluations should be validated by a second member of the panel. This should be evidenced with a signature and date.*
- *Each interview sheet should be scored, signed and dated by the individual undertaking the interview. This should be completed at the conclusion of the interview.*
- *The service provider should return a signed General Service Agreement prior to the inclusion of the Accredited List.*
- *A formal system for contract monitoring and the standard of care being proved by the service providers, should be introduced.*
- *A record of the Panel's decision on which service provider to procure services from should be retained to ensure an effective audit trail exists.*

1.4 All of these actions were completed by 28 November 2008 and are shown in detail in Appendix 1.

1.5 A further three recommendations were made by Internal Audit in their report to Audit and Risk Management Committee on 4 November 2008. These were endorsed by members and comprised:

- (i) *Immediately review the procedures in operation within the department for evaluating the performance of independent living providers on an ongoing basis, to ensure that provision is made for the inclusion of the views and opinions of officers of the Council undertaking work in these areas regarding the effectiveness of individual providers.*

**RESPONSE:** The Department monitors the performance of independent supported living providers against a contract monitoring framework introduced in January 2009. The framework includes a survey of key stakeholders to ensure that the views of people who use the service, relevant members of DASS, clinical staff, and staff working for providers are heard and they have an opportunity to comment and raise any concerns they may have. Measuring the effectiveness of each provider in delivering outcomes is an integral to the monitoring process and this approach has also been embedded in the Learning Disability Review Team.

- (ii) *Immediately implement all of the outstanding recommendations identified in the Audit Commission and Internal Audit reports dated March, August and October 2008 respectively.*

**RESPONSE:** The Department has implemented actions as detailed in Appendix 1

- (iii) *Immediately review the procedures in operation within the department for evaluating reported issues of this nature and determining the most appropriate actions to be taken to investigate them and assess the adequacy and effectiveness of these arrangements.*

**RESPONSE:** The Department logs all reports from Internal Audit in the Finance Section by the Principal Officer for Resources and forwards them to the Director for approval to action and for monitoring arrangements to be agreed. Regular monitoring reports are provided to the Strategic Leadership Team on progress by the Principal Officer who attends SLT to personally report on this.

## **2. Actions completed by January 2009**

- 2.1 Members are advised that most of actions outlined in Appendix 1 were completed by January 2009 at which point a report was prepared for Cabinet. However this report was delayed whilst the investigation into audit and disciplinary matters were undertaken.
- 2.2 The key actions that were completed by January 2009 include:
- The accreditation of all providers
  - The development of a Quality Assessment Framework for Wirral
  - Financial Assessments completed for all people supported by in-house provision.
  - Signed contracts in place for all providers.

## **3. Actions completed since January 2009**

- 3.1 Since January 2009 the key actions that have been completed include:
- Financial Review **of all people** supported by independent sector providers.
  - Value for money appraisal of existing domiciliary care arrangements

## **4 Ongoing actions**

- 4.1 It will be seen from the above paragraphs and the detail in Appendix 1 that most of the actions set to respond to issues highlighted by the PIDA have been completed. The following actions are listed in Appendix 1 as “ongoing” for which explanations are given below.
- 4.2 **Review all LD People who Use Services (AC R4).** The Specialist Adult Learning Disabilities Review Team is working through a scheduled programme of reviews of all people with Learning Disabilities in Supported Living tenancies where the Department funds their support. The team has robust written procedures and staff from a number of disciplines (social

care, contracts, and finance) to ensure that the needs and outcomes of people receiving services are met. There is robust senior operational management oversight and quality control of the Team with the Supported Living providers involved and targets have been set for the completion of these reviews.

**4.3 Review current Domiciliary Care contract in terms of the personalisation agenda and context of individual budgets (ACR2).**

The department is currently undertaking a pilot of personal budgets the outcome of which will be used to inform the contracting process. The department is working with the corporate procurement team to ensure that future contracts in general are time limited and provide a more robust arrangement for the market. The department's response to personalisation agenda through contracts is also being developed and a report will be presented to Cabinet in November 2009 setting out a range of options for members to consider. Some initial work to develop and new domiciliary care contract has been undertaken with consideration being given to personalisation, the shape of delivery taking into account the department move to locality working, and closer working with NHS Wirral.

4.4 As part of the PIDA action plan Providers confirmed that they were acting as appointees for 22 people. Whilst this remains an individual's choice it is discouraged by the Council as there are potential conflicts of interest, The Council can offer to become the appointee for these people as an alternative option, but cannot enforce it. To date 5 people have agreed to take advantage of the offer and we will continue to promote its take-up.

**5. Contract Monitoring**

5.1 The department currently has 257 people supported by 26 accredited supported living providers. In Wirral there are a further 20 accredited providers with whom no people are currently placed by DASS. Since the monitoring process was launched in January 2009 the Contracts Monitoring Team has completed 10 spot check inspections and 9 full inspections. Most of these inspections have been carried out jointly with a seconded officer from the Supported Living Team. Following each inspection an action plan is agreed with the Provider and its implementation monitored with follow up visits being arranged where appropriate.

5.2 Annual Contract monitoring visits/inspections are being undertaken by the Contracts Team for all supported living providers.

5.3 However contract monitoring and quality control is also a matter for future work in the context of broader developments in the transformation/ personalisation agenda. These include the role and place of Wirral's Local Involvement Network (LINK) – members will be aware that this new organisation has a statutory role to monitor the quality of provision across health and social care. In turn as we develop our new contracting approach expectations upon providers and some more comprehensive

person centred arrangements will be developed. These will be reported separately.

## **6 Financial and Staffing Implications**

- 6.1 The financial implications of this report will be contained within the revenue budget available to the Department of Adult Social Services.
- 6.2 There are no staffing implications arising from this report.

## **7 Equal Opportunities Implications**

The action plan addresses historical issues relating to inequalities and ensures equity for the future

## **8 Local Member Support Implications**

People who live in supported accommodation potentially live in all parts of Wirral

## **9 Human Rights Implications**

No known human rights implications

## **10 Community Safety Implications**

The action plan ensures that people within supported accommodation are safeguarded

## **11 Planning Implications**

No known planning implications

## **12 Health Implications**

- 12.1 The Quality Assessment Framework developed for Supported Living tests a broad range of issues relating to the health and wellbeing of people living in supported living homes funded by the department. Specifically Standard 11 of the framework requires providers to demonstrate and evidence how health needs are facilitated.
- 12.2 Wirral NHS is in the process of rolling out a programme to ensure that all people with a learning disability receive a health check from their GP and other professionals from the NHS. The Health Action Group, a sub group of the Learning Disability Board is in the process of revising the Strategic Health Action Plan for March 2010 which will build further on the work done on health passports and health checks.

### **13 Background Papers**

Audit Commission PIDA Action Plan August 2008  
Internal Audit of Accreditation process 13 March 2008  
Internal follow up report dates 29 October 2009.

### **14 Recommendations**

That

- 1) Members note progress.

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23 October 2009

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23 October 2009