DASS: Procurement of Commissioned Care – Summary of Recommendations & Client Response

Rep Ref	Recommendation	Priority Level	Clients Comments	Implementation Timescale
5.2.3	A risk assessment methodology should be devised for visits to Care Homes and Care Providers which should incorporate regular liaison with the Care Quality Commission.	High	Each Quality Assurance officer has been allocated 30 homes/providers and a risk assessment process is being used to define order of proactive monitoring visits i.e. based on most recent CQC report; no of safeguarding referrals; no of complaints To be written into QA policy documentation.	Implemented 03 July 2012 Verified by IA
5.3.3	The sub analysis codes and charges to the DASS budgets should be reviewed to ensure charges are coded correctly. It may also be prudent to devise codes which identify provider expenditure for transparency and governance purposes e.g. devise budgetary codes that separate accredited and non accredited Providers. Staff who have miscoded the expenditure should be identified and provided with the relevant budgetary code training. Evidence must be provided to ensure that the discrepancies identified during this audit review have been rectified by the relevant Finance Officer.	High	These miscoding will be picked up by Management Accounts Team who will validate and identify	Implemented 03 July 2012 (Partial implementation verified on 21 August 2012)

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5.4.3	Management should research the results identified in Appendix C which annotates the eight discrepancies identified in the Provider list testing. Management should also communicate these additions etc to the Procurement team so that they have a full up to date picture of the Provider System (in order that they can work effectively for the DASS team).	Medium	Already been done. For example, correct list sent to corporate procurement and brokerage	Implemented Verified by IA
5.5.3	The Provider Rota's and the provider Tracker forms which evidence why the provider was selected e.g. • The Provider has been used previously. • The Provider has been requested by the Client. • Selected as per Provider Rota/lowest rate. should be kept electronically on the ESCR system and annotated on the Brokerage Teams Data Base (in order that Management Reports can be generated accordingly). These controls will provide the Local Authority with sufficient evidence to why a specific provider had been selected.	High	Brokerage team record rationale for choice of provider using a tracker form that stays on that person's file.	Implemented 03 July 2012 Verified by IA

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5.6.3	There needs to be formalised links with other local Authorities to provide satisfactory assurance that the service provided to the client is up to standard e.g. a passport arrangement between Local Authorities.	High	Contracts team check with CQC and "host" local authority prior to a placement being made before making recommendations to social workers whether a provider can be used.	Implemented 03 July 2012 Verified by IA
5.7.3	Clearly evidenced links with the Care Quality Commission should be maintained in the event of any problems surrounding the service delivered by the Provider.	High	Contracts team notify CQC of any issues with a provider with Wirral funded regardless of whether they have signed our contract or not	Implemented 03 July 2012 Verified by IA