

**High Importance Recommendations at 6 July 2018**

<b><u>Audit Title (Director)</u></b>	<b><u>Summary of Finding(s) and Recommendation(s)</u></b>	<b><u>Management Response</u></b>	<b><u>Action Date (by end of)</u></b>	<b><u>Confirmed Implemented</u></b>
<b>Reported July 2018</b>				
<b>Clinical Governance Framework</b>	<p><b>Reporting on provider clinical governance activity and serious incidents was still at development stage</b></p> <p><b>Recommended:</b></p> <ol style="list-style-type: none"> <li><b>1. Departmental Management Team (DMT) to provide oversight and challenge to reports covering provider clinical governance activity and serious incidents.</b></li> <li><b>2. With specific regard to serious incidents, to introduce a process where they are regularly reported to DMT until such time the incident is ‘de-escalated’ through a formal ‘sign-off’ process.</b></li> </ol>	<p><b>Reports have started to be received at DMT from April 2018. A programme of reporting is being developed which will set out the proposed schedule of reporting for 2018/19.</b></p> <p><b>Critical (i.e. serious) incidents will be collated and discussed as part of the regular reports plus these incidents continue to be monitored by the clinical governance lead and service leads on a daily basis.</b></p>	<b>May 2018</b>	<p><b>Yes</b></p> <p><b>Evidence of reports for the past 3 months.</b></p>

Reported April 2018				
Iveshead school (C&FS)	<p>A full review was undertaken of the School's financial systems and procedures and a review of the internal controls in place following the merger of Hind Leys College and Shepshed High School, given the significant deficit held by the School. This audit was specifically commissioned by the local authority to give assurances, or otherwise, regarding the School's financial systems and processes.</p> <p>A number of improvements required with some high risk issues to be addressed.</p>	<p>The School devised an action plan which was approved by the governing body on March 6th.</p> <p><b>HI recommendations have been implemented. The school will be brought into the 'normal' pattern of audit visits, ie. Two yearly for a school this size.</b></p>	June 2018	<p><b>Yes</b></p> <p><b>Finance Business Partner (CR) has independently tested and confirmed the HI's have been addressed.</b></p>
Reported January 2018				
Office Safes (A&C)	<p>An investigation into the potential misuse of a service user's funds identified that the employee under suspicion had been able to deposit a large sum of cash into an area office safe, with no evidence of questions asked nor checks undertaken and no record of the deposit. The safe also contained cash and other valuable items held on behalf of service users which are not covered by the LCC insurance policy. Visits to other sites revealed similar with improvements required for controlling access and recording contents.</p> <p>The Department had previously identified gaps in its management of service user's personal property, including that in safes and had instigated a multi-function working group to review and improve practice and put into place a policy. Recommended that finalisation of the policy should be expedited and</p>	<p>Agreed</p> <p><b>A policy governing the retention of service users' cash and other belongings, including pets is 95% developed. The policy is underpinned by a clear understanding that the Council will only take on custody of such items as a last resort, i.e. where there are no family or friends able to. The policy will be tabled at the departmental policy oversight group and subsequently the department's Management Team for formal approval and subsequent adoption. Further work will be required to ensure that these systems are also adopted by C&amp;FS as best practice</b></p>	<p>March 2018</p> <p>Extend to end of June 2018</p> <p><b>Extend to end of September 2018</b></p>	

	rolled out to Area Offices regarding safes and contents. Unannounced follow up audit visits will take place.	<p><b>across their services. It is anticipated therefore that it will be tabled at a joint management team – date to be arranged.</b></p> <p><b>Management has given assurances that it has put in place standards/protocols around safes in local offices. Internal Audit Service will test this without giving notice.</b></p>		
Reported September 2017				
Direct Payments (A&C)	<p>Signed copies of Direct Payment (DP) Card Agreements could not be located for two service users, from a sample of seven that had transferred from cash payments to direct payment cards. The absence of an up to date agreement could cause the Council problems if any misuse, other breaches or disputes arise.</p> <p>Recommended that an up-to-date signed DP card agreement should be obtained for all service users who have transferred from cash payments to DP Cards.</p>	<p>Agreed.</p> <p><b>An exercise has taken place to ensure that up-to-date signed DP agreements are on file for all DP service users (approx. 3000 s/u). Approximately 100 agreements are outstanding and are being worked through with Care Pathway colleagues. These are cases where mental capacity is unknown or has changed since the DP agreement was set up and Care Pathway colleagues are now working with families to resolve these.</b></p>	June 2018	<p><b>Yes</b></p> <p><b>Significant progress made</b></p>

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