



Accountants &
business advisers

Nottingham City Homes

Supporting People – Sheltered Housing Service Delivery

March 2013

Final Report

Assurance Level:

Partly meets expectations

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Staff Interviewed – Chris Holloway, Lis Robinson, Joanne Smith and Jane Seel

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1 Introduction

- 1.1 Our work was performed as part of our internal audit plan for 2012/13, which was agreed with the Audit Committee.
- 1.2 The purpose of our review was to assess the adequacy and effectiveness of the internal controls over the Supporting People sheltered housing service delivery currently in place at Nottingham City Homes.
- 1.3 In particular, our review considered the following potential risks:
- Elderly support needs may not be effectively identified; and
 - Arrangements may not be in place to ensure adequate delivery of support services in line with identified needs.
- 1.4 The work was carried out primarily by holding discussions with relevant staff, reviewing any available documentation and testing controls in place to determine their effectiveness.
- 1.5 This report has been prepared as part of the internal audit of Nottingham City Homes under the terms of the contract for internal audit services. It has been prepared for Nottingham City Homes and we neither accept nor assume any responsibility or duty of care to any third party in relation to it. The conclusions and recommendations are based on the results of audit work carried out and are reported in good faith. However, our methodology relies upon explanations by managers and sample testing and management should satisfy itself of the validity of any recommendations before acting upon them.

2 Executive Summary

- 2.1 We have carried out the audit in accordance with the programme agreed with management and the Audit Committee. Based on the audit work carried out we have concluded that the level of control over the Supporting People sheltered housing service delivery is: **partly meets expectations**.
- 2.2 The sheltered housing service delivery approach changed on 6th June 2012. This change was driven by a 65% cut in the Organisation's Supporting People grant and the Organisation's move to a more needs-led service. As part of this change, the service switched from using paper-based processes to staff using laptops and completing electronic forms on-site. There were some IT issues with the electronic forms and these were not fully integrated until October 2012. The Nottingham On Call team (the 24 hour emergency response service for all Nottingham City Homes tenants) maintain paper copies of support needs paperwork in case of IT failure but do not currently have system access to the support needs paperwork themselves.

- 2.3 There is a comprehensive framework in place for the identification of support needs and documentation of support planning. However, our testing identified that the framework is not being consistently adhered to in practice. Staff noted that the issues that we found may have been caused by the switch from paper-based processes to using electronic forms.
- 2.4 Arrangements for support needs are clearly communicated and input into the planning schedule for the delivery of support needs. Arrangements for provision of support are in line with the tenant's identified level of need. However, we also identified some instances of non-adherence with procedures in relation to the completion of full Support Plans for tenants with a medium or high level of support needs.
- 2.5 There are relevant arrangements in place for the regular and reactive review of support needs. The support needs of tenants should be reviewed at least every six months and after any significant event, for example if the tenant has been in hospital. Our testing found some instances where the six-monthly reviews had not been completed in time or were incomplete. These findings should be addressed by the enhancements which should be made to management monitoring of support provision discussed further later in this report.
- 2.6 The Senior Independent Living Co-ordinators carry out monitoring of completed, outstanding and overdue support plan requirements. However, this monitoring could be enhanced as most of the monitoring carried out is not currently evidenced and there is no set target in place for how much monitoring the Senior Independent Living Co-ordinators should carry out on a monthly basis.
- 2.7 There are relevant arrangements in place for the continuing development of support providers including annual staff appraisals, monthly one-to-ones and the delivery of an annual training plan for the Supported Housing team. The areas of non-adherence with procedures identified in this report should be included in the Supported Housing training plan for 2013.
- 2.8 Key performance indicators have been developed to monitor the completion of support requirements and highlight overdue reviews. Enhancements should be made to the reporting of key performance information. We also found that a Support Needs Assessment had been reported as completed for performance measuring purposes, but we were unable to review evidence to show that it had been completed.
- 2.9 We identified the following key enhancement opportunities:
- The Organisation should ensure the following:
 - that the specific instances of non-adherence with procedures identified within all sections of this report are fully investigated and rectified. The staff members involved should be provided with additional training where appropriate.

- The areas of non-adherence with procedures identified in this report should be included in the Supported Housing training plan for 2013.
- The Organisation should increase the scope and frequency of monitoring of completion of support activities until adherence with procedures has improved, for example through requiring the Senior ILCs to review and sign the monthly scheme reports

- All new tenants should have their initial support level checked by a Senior Independent Living Co-ordinator.
- The Organisation should ensure a consistent approach to its policy regarding the storing of support needs documentation. This could be achieved through agreeing a target date for all current paperwork relating to supported tenants to be saved electronically. The Organisation should also consider whether the Nottingham On Call team can have electronic access to this paperwork.
- The Organisation should carry out an extended sample review of tenants with medium and high level support needs to confirm whether a recent Support Plan has been carried out.
- The Delivery Schedule template should be enhanced (see R5 within this report for full recommendation).
- The scheduled six-monthly Support Needs Assessments must not be reported as completed unless the fully completed monthly scheme reports have been received by the Administrative Assistant by the due date.
- The Organisation should decide on an appropriate format to record the monitoring which the Senior ILCs carry out including quality assurance checks.
- The Organisation should decide on a target number of checks which each Senior Independent Living Co-ordinator should carry out on a monthly basis of correctly completed weekly delivery schedules, completion of support plans on a timely basis and quality assurance checks of support plans.
- Support reviews and plans which have not been completed for a valid reason should still be reported as not being completed. Reported figures for overdue support reviews and plans should then be broken down to show those not completed for a valid reason, for example if the tenant is in hospital. For those not completed and without a valid reason for this, a narrative should be provided with an explanation.

2.10 Finally, we wish to thank all members of staff for their availability, co-operation and assistance during the course of our review.

PKF (UK) LLP
March 2013

3 Detailed Findings

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified.</p>	<p>Framework for the identification of support needs and documentation of support planning</p> <p>We confirmed whether there is a framework in place for the identification of support needs of tenants in supported properties. There are documented procedures in place in relation to support planning and risk assessment. Discussions indicated these are currently under review.</p> <p>Support planning is carried out by Independent Living Co-ordinators or Senior Independent Living Co-ordinators. We confirmed that job descriptions for these roles contain appropriate skills, for example knowledge and understanding of the needs of older and vulnerable people. There are three ways in which support needs are identified:</p> <ul style="list-style-type: none"> - Support needs are identified when a new tenant enters a supported property. Until the first Support Needs Assessment has taken place, the tenant is presumed to have a high level of support needs and is visited by a member of the Independent Living team on a daily basis. - A full Support Needs Assessment will be carried out if a significant event occurs to the tenant, for example a hospital stay. - A full Support Needs Assessment is carried out with each tenant at least every six months. This includes the completion of a Support Plan each time for tenants with medium and high support needs. 	<p>There is a comprehensive framework in place for the identification of support needs and documentation of support planning. Support planning is completed by an appropriately skilled member of staff. New tenants identified as having a high level of support needs do not currently have their initial support level checked by a Senior ILC.</p> <p>Our testing identified that the framework is not being consistently adhered to in practice.</p> <p>R1</p> <p>The Organisation should ensure the following:</p> <ul style="list-style-type: none"> • The specific instances of non-adherence with procedures identified within all sections of this report are fully investigated and rectified. The staff members involved should be provided with additional training where appropriate. • The areas of non-adherence with procedures identified in this report should be included in the Supported Housing training plan for 2013. • The Organisation should increase the scope and frequency of monitoring of completion of support activities until adherence with procedures has improved, for example through requiring the Senior ILCs to review and sign the monthly scheme reports.

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified. (Continued)</p>	<p>The Support Needs Assessment (SNA) is used to identify any disability or long-term illness which the tenant suffers from, as well as confirming the tenant's support needs in eight areas including 'health and wellbeing', 'feeling part of your community' and 'managing your safety and security'. If the tenant is identified as having medium or high support needs overall then a full Support Plan is completed. This identifies the additional areas of support required for the tenant and how the support will be provided.</p> <p>Tenant's support needs are identified as being high (needing a daily visit), medium (a mixture of visits and phone calls) or low (a visit a week or equivalent) and independent (one phone call a week). Tenants who are identified as being independent can opt out of the service if they can agree with the Independent Living Co-ordinator (ILC) that they do not require this service. Tenants who choose to opt out must sign a disclaimer. We noted within our testing discussed below that a disclaimer had not been kept on file for one tenant who had chosen to opt out.</p> <p>A Change of Support Level form is completed if the level of support offered to a tenant has changed. The form is authorised by a Senior Independent Living Co-ordinator (Senior ILC). This means that the support level for every new tenant who is identified as having medium or low support needs or as being independent has their initial support level checked because new tenants are initially recorded as having a high level of support needs. New tenants who are identified as having a high level of support needs after their first assessment do not currently have their initial level of support checked by a Senior ILC. This should be addressed so that all new tenants have their initial level of support checked by a Senior ILC. We also noted within our testing discussed below that a Change of Support level form was not kept on file for one tenant within our sample whose support level had changed from independent to low..</p>	<p>As above</p> <p>R2 All new tenants should have their initial support level checked by a Senior Independent Living Co-ordinator.</p> <p>R3 The Organisation should ensure a consistent approach to its policy regarding the storing of support needs documentation. This could be achieved through agreeing a target date for all current paperwork relating to supported tenants to be saved electronically. The Organisation should also consider whether the Nottingham On Call team can have electronic access to this paperwork.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified. (Continued)</p>	<p>Support Needs Assessments and Support Plans should be completed and signed electronically by the ILC and tenant at the time of the visit. This is then saved to the Independent Living shared drive. This was a paper-based process until the service changed in June 2012. Staff identified that there were initial problems with the technology and training staff to use laptops for the first time. The use of electronic forms was not fully integrated until October 2012. Nottingham On Call (the call centre based at the same site as the Independent Living Team) maintains paper copies of the Support Needs Assessments in case of I.T failure. We noted that there are system access restrictions which do not allow Nottingham On Call (the 24 hour emergency response centre) to access the support needs paperwork electronically. The Organisation should consider whether this can be addressed to ensure that up-to-date SNAs are available to staff who may need access to this information out of hours (see Recommendation 4).</p> <p>We carried out testing on a sample of tenants to confirm whether Support Needs Assessments are being carried out in full by appropriately skilled members of staff. We reviewed the most recent SNA on file for each tenant within our sample of ten. Within our sample of ten, we confirmed that eight had a completed SNA on file dated within the last six months. Each SNA had been completed by an ILC. However, we found the following discrepancies:</p> <ul style="list-style-type: none"> • Four out of four tenants within the sample with medium or high support needs had not had a full Support Plan completed during their most recent SNA. Staff noted that this may have been due to difficulties in the transitional period from providing a paper-based service to using e-forms and that staff may not have printed off the correct forms to use. However, it is part of standard procedure to complete a Support Plan for tenants with medium and high support needs at least every six months. 	<p>As above.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified. (Continued)</p>	<ul style="list-style-type: none"> • The only recent paperwork on file for one tenant was a Support Needs Level Assessment dated July 2012. This was in the old format and provided very little information about the support needs of the tenant (identified as having low support needs). • One tenant was assessed as being independent in October 2012 but was identified as having low support needs on the Delivery Matrix (the spread-sheet detailing the service delivery for each tenant). A Change of Support Level form was not kept on file. • One tenant who had opted out of the service did not have a signed 'no visit disclaimer' kept on file confirming their request to opt out of the service. <p>Overall, we noted that SNAs are either saved on the shared drive, or a paper copy is kept at the scheme sites, or both. This is due to the switch from a paper-based service to using electronic technology. The Organisation should agree a target date for all current paperwork to be saved electronically.</p> <p>We discussed the individual discrepancies that we found with staff on-site who confirmed that steps will be taken to complete any overdue or outstanding paperwork identified. Recommendations 1, 2, 3 and 4 also cover these issues.</p>	<p>As above.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified. (Continued)</p>	<p>Arrangements for delivery of support needs The Senior ILCs are responsible for documenting tenants' support needs onto the Delivery Matrix. This is a password-protected Excel spread-sheet which includes each tenant, their level of need, what days the tenant should receive visits and/or phone calls. This is saved on the shared drive.</p> <p>ILCs can access the Delivery Matrix in a read-only format and use the information included to check and update the Delivery Schedule template for the schemes they are responsible for on a weekly basis. The Delivery Schedule shows what visits need to be carried out each week for each scheme. The ILCs update the Delivery Schedules each day to show their completed visits and record the outcome. Changes in Support forms are authorised by Senior ILCs and this information is input to the Delivery Matrix by the Senior ILCs who have password access to edit the spread-sheet.</p> <p>We reviewed the most recent Delivery Schedule for each property in our sample of ten and confirmed that visits and phone calls had been carried out for each property as scheduled.</p>	<p>Arrangements for support needs are clearly communicated and input into the planning schedule for the delivery of support needs.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified. (Continued)</p>	<p>Support arrangements in line with the identified level of need of tenants We reviewed a sample of ten tenants to confirm whether support is being provided to tenants in line with their identified level of need. We confirmed that the support level provided to nine tenants within our sample of ten matched the support need level identified on their most recent SNA. As noted above, one tenant was identified as being independent on their SNA, but was receiving a low support level. Also noted above, four out of four tenants within the sample with medium or high support needs had not had a full support plan carried out during their most recent SNA. So although they are receiving the required amount of contact, for example one visit a day, there is a risk that it has not been decided how best to support the tenant as part of these visits.</p> <p>Arrangements for review of support needs Support needs are reviewed in three ways:</p> <ul style="list-style-type: none"> • An SNA is carried out for every new tenant. • Every tenant has their support needs reviewed (in the form of an SNA) at least every six months. These are scheduled annually by the Senior ILCs for their schemes. It is the responsibility of the ILCs to confirm that the scheduled six monthly visits are actually required as in some cases a visit may have already been carried out more recently. • A full SNA will be carried out if a significant event has occurred involving the tenant, for example a hospital stay. Additionally, a tenant (or their family/care team etc.) can request a change in support at any time and this is discussed with the ILC and approved by the Senior ILC. 	<p>Arrangements for provision of support are in line with the tenant's identified level of need. However, we identified some instances of non-adherence with procedures.</p> <p>R4 The Organisation should carry out an extended sample review of tenants with medium and high level support needs to confirm whether a recent Support Plan has been carried out.</p> <p>There are relevant arrangements in place for the regular and reactive review of support needs. However, we identified some non-adherences with procedure. These should be addressed by the enhancements which should be made to management monitoring of support provision discussed further in this report.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Elderly support needs may not be effectively identified. (Continued)</p>	<p>As part of our testing we confirmed whether reviews of support needs are being carried out at least every six months as per procedure. Six out of ten tenants had an SNA on file which was dated within the last six months. However, within this six, the two tenants with high level support needs have not had a full Support Plan completed as part of their SNA within 2012. Additionally, we found the following non-adherence with procedures:</p> <ul style="list-style-type: none"> • One tenant had not had an SNA carried out within the last seven months; • One tenant had an SNA carried out in September 2012 but had not had one for a year prior to this date; • Two tenants had an SNA on file which was dated within six months of the most recent SNA but the documentation had not been completed. <p>We discussed the individual discrepancies that we found with staff on-site who confirmed that steps will be taken to complete any overdue or outstanding paperwork identified.</p> <p>We identified some enhancements which should be made to management monitoring of support provision discussed further in this report. These enhancements should assist with ensuring support needs reviews are carried out on a timely basis and that full Support Plans are carried out as per procedure for tenants with medium and high level support needs.</p>	<p>As above.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Arrangements may not be in place to ensure adequate delivery of support services in line with identified needs.</p>	<p>Identification of completed, outstanding and overdue support plan requirements</p> <p>We confirmed how completed, outstanding and overdue support plan requirements are identified. The Senior ILCs monitor the completion of weekly Delivery Schedules and the completion of six-monthly support needs reviews by carrying out spot checks.</p> <p>Delivery Schedules are in place for each scheme, which record the visits due for each tenant within the scheme on each weekday. The Delivery Schedules are used to record if the visits have been completed and what the outcome was, for example if there was no answer from the tenant.</p> <p>The Delivery Schedules will show if a particular visit for tenants with high support needs has not been carried out by showing a symbol at the top of the Delivery Schedule document. However, this monitoring information cannot be entirely relied upon because the 'not planned' option can be chosen for a visit for a particular day and the Delivery Schedule will not flag that a visit has not been carried out.</p> <p>There is also an issue with the Delivery Schedule recognising whether tenants with medium level support needs have had the correct weekly contact carried out. These tenants will receive daily contact through a combination of visits and telephone calls. The Delivery Schedule will assume that a visit has not been carried out if the 'no contact' or 'not planned' option for the daily visit is chosen. The Delivery Schedule template should be enhanced to address these issues identified with monitoring the completion of weekly support delivery.</p>	<p>Monitoring of completed, outstanding or overdue support plan requirements could be enhanced.</p> <p>R5</p> <p>The Delivery Schedule template should be enhanced in the following ways:</p> <ul style="list-style-type: none"> • If the 'not planned' option is chosen to confirm what contact has taken place for a particular day for tenants with a high level of support needs, the form should recognise that a visit has not been carried out. • If the 'no contact' or 'not planned' option is chosen for tenants with medium level support needs, the form should recognise that a visit has not been carried out. <p>R6</p> <p>The scheduled six-monthly Support Needs Assessments must not be reported as completed unless the fully completed monthly scheme reports have been received by the Administrative Assistant by the due date.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Arrangements may not be in place to ensure adequate delivery of support services in line with identified needs. (Continued)</p>	<p>The completion of the six-monthly support needs reviews are monitored by the Senior ILCs for their schemes. This monitoring has been in place since November 2012. A weekly progress sheet is completed for each scheme by the ILC which shows which properties are due for a support needs review that month and which have been completed that week. This is to enable the Senior ILCs to identify if further resources are required to get all due Support Plans completed within the month. The Senior ILCs will each pick a sample of completed support needs reviews to confirm that the SNAs have actually been completed.</p> <p>We picked a sample of five schemes to confirm whether a weekly progress report had been completed for the week commencing 5 November 2012. This had been completed in each case. We then picked a property from each weekly progress sheet which was marked as having an SNA due and completed.</p> <p>We confirmed that SNAs (and Support Plans where appropriate) had been completed for four tenants within our sample of five in November. However, we were unable to confirm that an SNA had been carried out for one tenant because there was not an SNA saved on the property folder on the shared drive or in the paper file. This SNA had been reported as being completed (and therefore not overdue) in November for performance measuring purposes.</p>	<p>As above.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Arrangements may not be in place to ensure adequate delivery of support services in line with identified needs. (Continued)</p>	<p>We were unable to review the form which confirmed that this had been completed to the Administrative Assistant who collects performance information, because it had been verbally agreed between the relevant ILC and Senior ILC that the SNA had been completed and that the paperwork would follow. The ILC who carried out the SNA in November had saved this on their laptop desktop and not on the shared drive which is why we were unable to review evidence of its completion.</p> <p>The scheduled six-monthly Support Needs Assessments must only be reported as completed if the fully completed monthly scheme reports have been received by the Administrative Assistant by the due date.</p> <p>Evidence of management monitoring We confirmed whether Senior ILCs regularly evidence the monitoring of paperwork to ensure that client visits and support plan requirements are recorded as complete. The Senior ILCs will review the completion of client visits and support plan requirements by carrying out spot checks as described above in this report but this monitoring is not evidenced. The Organisation should decide on an appropriate way to evidence this monitoring.</p> <p>Additionally, Senior ILCs will carry out a random sample of quality assurance checks of Support Plans. This is evidenced by an e-signature on the Support Plan. However, there is no target in place for how many Support Plans should be quality checked and there is no overall way of monitoring how many checks have been carried out.</p>	<p>As above.</p> <p>Senior ILCs do not currently evidence the monitoring of paperwork which they carry out. There is also no stated target in place for how many checks should be carried out.</p> <p>R7 The Organisation should decide on an appropriate format to record the monitoring which the Senior ILCs carry out including quality assurance checks.</p> <p>R8 The Organisation should decide on a target number of checks which each Senior Independent Living Co-ordinator should carry out on a monthly basis of:</p> <ul style="list-style-type: none"> • Correctly completed weekly delivery schedules • Completion of support plans on a timely basis • Quality assurance checks of support plans.

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Arrangements may not be in place to ensure adequate delivery of support services in line with identified needs. (Continued)</p>	<p>Arrangements for the continuing development of support providers Training needs for Independent Living Service staff are identified through annual individual staff appraisals. Additionally, the Head of Supported Housing has worked with the Learning and Development Team to identify an Action Plan for training which is delivered to staff. This includes procedural training (including computer training), behavioural training and technical competence. The areas of non-adherence with procedures identified within this report should be included in the training plan for 2013.</p> <p>The Senior ILCs also hold monthly one-to-ones with the ILCs to discuss strengths in performance and any identified areas for improvement.</p> <p>Key performance indicators The following key performance indicators (KPIs) are currently measured using Covalent performance management software:</p> <ul style="list-style-type: none"> • Support reviews which are due to be completed and the amount actually completed (target – 100%); • Support Plans due to be completed for medium and high risk assessments and the amount actually completed (target – 100%). <p>These KPIs are in line with reporting requirements for the Organisation's Supporting People contract. 100% of support reviews and plans due were reported as completed in October 2012. In November 2012, 98.81% of reviews due were completed and 97.73% of support plans due were completed. There is no reason provided for why the targets were not met.</p>	<p>There are relevant arrangements in place for the continuing development of support providers.</p> <p>Key performance indicators have been developed to monitor the completion of support requirements and highlight overdue reviews. Enhancements should be made to the reporting of key performance information.</p> <p>R9 Support reviews and plans which have not been completed for a valid reason should still be reported as not being completed. Reported figures for overdue support reviews and plans should then be broken down to show those not completed for a valid reason, for example if the tenant is in hospital. For those not completed and without a valid reason for this, a narrative should be provided with an explanation.</p>

Key Risks	Key Controls and Mitigating Action	Conclusion
<p>Arrangements may not be in place to ensure adequate delivery of support services in line with identified needs. (Continued)</p>	<p>Performance information is collected by the Administrative Assistant. Monthly scheme reports are completed for each Scheme which show the number of support plans due and completed. These are now sent electronically and must be received by the day of reporting or will be marked as overdue. The Administrative Assistant also copies the reports onto her personal drive to ensure she has evidence that reported figures are correct at a particular point in time. The forms are completed by the ILCs and also signed by the ILCs.</p> <p>If the report shows that a due support review or plan has not been completed then the ILC must provide a reason for this, for example if the tenant is in hospital. The Administrative Assistant will not include the support review or plan as overdue in the reported figures if a valid reason is provided. Where these reviews should be performed at a later date, this gives rise to a potential risk that these are overlooked. Reported figures should therefore include all support reviews and plans not completed. Reported figures for overdue reviews and plans should then be broken down to show those not completed for a valid reason, for example if the tenant is in hospital. For those not completed and without a valid reason for this, a narrative should be provided with an explanation.</p> <p>As discussed above in this report, we identified a Support Plan that had been reported as completed but we were unable to evidence that this had been completed. The Organisation should enhance the monitoring of completion of support activities until adherence with procedures has improved. This could be done by requiring the Senior ILCs to review and sign the monthly scheme reports.</p>	<p>As above.</p>

4 Action Plan

Ref.	Findings	Recommendations	Priority	Management Response	Responsibility/ Due date
R1	There is a comprehensive framework in place for the identification of support needs and documentation of support planning. However our testing identified that the framework is not being consistently adhered to in practice.	<p>The Organisation should ensure the following:</p> <ul style="list-style-type: none"> The specific instances of non-adherence with procedures identified within all sections of this report are fully investigated and rectified. The staff members involved should be provided with additional training where appropriate. The areas of non-adherence with procedures identified in this report should be included in the Supported Housing training plan for 2013. The Organisation should increase the scope and frequency of monitoring of completion of support activities until adherence with procedures has improved, for example through requiring the Senior ILCs to review and sign the monthly scheme reports. 	High	<p>Each instance has been reviewed and rectified by the relevant senior ILC and verification provided to the head of service.</p> <p>Some inconsistencies had already been noted during the first months of the new service and significant improvements have been made since then to ensure consistency and compliance (including additional training to staff) Further training has been discussed with each member of staff concerned and will be delivered in agreement with the individual.</p>	<p>Chris Holloway – Head of Supported Housing</p> <p>Completed</p>

Ref.	Findings	Recommendations	Priority	Management Response	Responsibility/ Due date
R2	New tenants identified as having a high level of support needs do not currently have their initial support level checked by a Senior ILC.	All new tenants should have their initial support level checked by a Senior Independent Living Co-ordinator.	Medium	<p>We have reviewed the details of all new tenants who have moved in to independent living accommodation since June 6th (the date the new service went live) and found 43 tenants who are classed as HIGH dependency. The respective ILC has completed a change of support form for each tenant and has been signed by the respective SILC and continued in future.</p> <p>There are currently 3 exceptions:</p> <ul style="list-style-type: none"> • 1 deceased • 1 trialling extra care accommodation • 1 not part of ILS any more (33 Briar) 	Senior Independent Living Co-ordinator Completed
R3	Currently, Support Needs Assessments are either saved on the shared drive, or a paper copy is kept at the scheme sites, or both. This is due to the switch from a paper-based service to using electronic technology. The Nottingham On Call team maintains paper copies of SNAs in case of IT failure but do not have electronic access to the paperwork themselves.	The Organisation should ensure a consistent approach to its policy regarding the storing of support needs documentation. This could be achieved through agreeing a target date for all current paperwork relating to supported tenants to be saved electronically. The Organisation should also consider whether the Nottingham On Call team can have electronic access to this paperwork.	Low	<p>Resources have been set aside to purchase bespoke software for this service area. Existing IT package will be monitored in the meantime.</p> <p>Paper records are required onsite at independent living communities for emergency access (for example a mobile support officer attending an incident) and NOC are required to retain paper copies of records for 5 years for audit purposes.</p> <p>The Head of service will scope out the requirements to save all current paperwork electronically and see if this is feasible.</p>	Chris Holloway - Head of Supported Housing August 2013

Ref.	Findings	Recommendations	Priority	Management Response	Responsibility/ Due date
R4	Arrangements for provision of support are in line with the tenant's identified level of need. However we identified some instances of non-adherence with procedures.	The Organisation should carry out an extended sample review of tenants with medium and high level support needs to confirm whether a recent Support Plan has been carried out.	High	There are currently 560 tenants with high and medium support needs. We will complete a 10% quality assurance check each month for 3 months as an extended sample review to ensure compliance and continue thereafter.	Chris Holloway - Head of Supported Housing March 31 st 2013 (and ongoing)
R5	Monitoring of completed, outstanding or overdue support plan requirements could be enhanced.	The Delivery Schedule template should be enhanced in the following ways: <ul style="list-style-type: none"> • If the 'not planned' option is chosen to confirm what contact has taken place for a particular day for tenants with a high level of support needs, the form should recognise that a visit has not been carried out. • If the 'no contact' or 'not planned' option is chosen for tenants with medium level support needs, the form should recognise that a visit has not been carried out. 	Medium	Head of service has discussed with IT to scope feasibility of recommendation. At present, when a 'no visit' is recorded that affects the performance statistics, when there is no contact planned and no visit this should not be allowed to affect our reporting statistics. However, we will review our current procedure for completing electronic forms to ensure consistency.	Chris Holloway - Head of Supported Housing 1 st March 13
R6	Within our testing we found that a Support Needs Assessment had been reported as being completed for performance measuring purposes but we were unable to review evidence of this.	The scheduled six-monthly Support Needs Assessments must not be reported as completed unless the fully completed monthly scheme reports have been received by the Administrative Assistant by the due date.	Low	This issue was acknowledged at the time and a new process was trialled successfully in November 2012 and is now in operation.	Senior Independent Living Co- ordinator Completed

Ref.	Findings	Recommendations	Priority	Management Response	Responsibility/ Due date
R7	Senior ILCs do not currently evidence the monitoring of paperwork which they carry out.	The Organisation should decide on an appropriate format to record the monitoring which the Senior ILCs carry out, including quality assurance checks.	Low	The senior ILCs now evidence their monitoring on a spreadsheet. This is currently in place and will record the quality checks mentioned in R9 below.	Senior Independent Living Co-ordinator Completed
R8	Senior ILCs do not currently have a target in place for how much monitoring they should carry out on a monthly basis of completed paperwork.	The Organisation should decide on a target number of checks which each Senior Independent Living Co-ordinator should carry out on a monthly basis of: <ul style="list-style-type: none"> • Correctly completed weekly delivery schedules • Completion of support plans on a timely basis • Quality assurance checks of support plans. 	Medium	The following monthly targets have been agreed and set for 2012/13 and will be reviewed for 2013/14 <ul style="list-style-type: none"> • Completed delivery schedules - 15 • Support Plans Completed on time – 100% • Quality assurance checks (support plans) – 60 per month (20 per region) Quality checks for January 2013 show a consistent approach to service delivery.	Senior Independent Living Co-ordinator (Completed)
R9	Key performance indicators have been developed to monitor the completion of support requirements and highlight overdue reviews. Enhancements should be made to the reporting of key performance information.	Support reviews and plans which have not been completed for a valid reason should still be reported as not being completed. Reported figures for overdue support reviews and plans should then be broken down to show those not completed for a valid reason, for example if the tenant is in hospital. For those not completed and without a valid reason for this, a narrative should be provided with an explanation.	Low	Our current contract with Supporting People (NCC) did not reference variations for non completion (with valid reason or otherwise) and these were excluded from the reporting as a result. Head of service has since discussed this with SP and agreement has been reached on reporting and valid exceptions. These have been reflected in our third quarter reporting.	Chris Holloway - Head of Supported Housing (Completed)

5 Definitions

Assurance Level	Definition
Fully meets expectations	Our audit work provides assurance that the arrangements should deliver the objectives and risk management aims of the organisation in the area under review and meet or exceed relevant external requirements. There is only a small risk of failure or non-compliance.
Substantially meets expectations	Our audit work provides assurance that the arrangements should deliver the key objectives and risk management aims of the organisation in the area under review and meet most relevant external requirements. There is some risk of failure or non-compliance.
Partly meets expectations	Our audit work provides assurance that the arrangements will deliver only some of the key objectives and risk management aims of the organisation in the area under review or may not meet relevant external requirements. There is a significant risk of failure or non-compliance.
Does not meet expectations	Our audit work provides little assurance. The arrangements will not deliver the key objectives and risk management aims of the organisation in the area under review or will not meet relevant external requirements. There is an almost certain risk of failure or non-compliance.

Recommendation priority	Definition
High priority recommendations	Those that failure to address would result in a significant and unacceptable risk to the organisation arising or continuing.
Medium priority recommendations	Those that failure to address would result in a moderate risk to the organisation arising or continuing or relate to significant best practice improvements.
Low priority recommendations	Those that failure to address would result in a minor risk to the organisation arising or continuing or relate to moderate best practice improvements.