



FINAL INTERNAL AUDIT REPORT
EDUCATION, CARE AND HEALTH SERVICES DEPARTMENT

REVIEW OF ADULTS HEALTH AND SOCIAL CARE INTEGRATION

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REVIEW OF ADULTS HEALTH AND SOCIAL CARE INTEGRATION

INTRODUCTION

1. This report sets out the results of our audit of Adults Health and Social Care Integration. The audit was carried out as part of the work specified in the 2019-20 Internal Audit Plan agreed by the Section 151 Officer and Audit Sub-Committee. The controls we expect to see in place are designed to minimise the Council's exposure to a range of risks. Weaknesses in controls that have been highlighted will increase the associated risks and should therefore be addressed by management.
2. We would like to thank all staff contacted during this review for their help and co-operation.
3. The Health and Social Care Act 2012 resulted in the creation of Health and Wellbeing Boards, which were tasked with increasing the integration of health and care services. The Care Act 2014 then placed a duty on local authorities to promote the integration of care and support services with health services.
4. Corporate Risk No.3, recorded on the Council's Corporate Risk Register (as at April 2019), has two elements: *'Failure to achieve partial implementation of Health and Social Care Integration'* and *'Plans are not in place to deliver partial integration by 2020'*. The impact of non-achievement would be that the Council may fail to deliver its statutory duties or fail to achieve its priorities.
5. The audit therefore looked to review the key controls linked to the risks identified in the Corporate Risk Register around the management of ECHS Health and Social Care Integration. This was a high level (strategic) review of the existing controls in place, used to help provide assurance over the achievement of statutory duties, including secure joint working across the Health and Social Care economy (particularly looking at the use of Delayed Transfer of Care (DToC), Better Care Fund (BCF) and Improved Better Care Fund (iBCF)).
6. The BCF grant is ring fenced for the purpose of pooling budgets and integrating services between Clinical Commissioning Groups (CCGs) and local authorities, for the benefit of local residents using health and care services. The Council's BCF Plan for 2017-19 has annual budgets for BCF schemes of £22.125m for 2017/18 and £22.670m for 2018/19.

AUDIT SCOPE

7. The original scope of the audit was outlined in the Terms of Reference issued on 25 April 2019.

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8. The following were considered to be the key risks inherent to Adults Health and Social Care Integration:
- In the absence of clear Implementation Plans and/or Strategies, agreed with partners such as the Bromley Clinical Commissioning Group (CCG), the Council may experience difficulties in achieving the rapid change required in a system as complex as Health and Social Care.
 - If the Council fails to work effectively with health partners to deliver the main transformation programmes (per the Council's Risk Register), there is an increased risk that the Council may not adapt effectively to the rising social care costs caused by an ageing population and people living longer with increasingly complex needs.
 - If the Council does not embed effective governance mechanisms to control and manage its integration strategy (such as through the activity of the Integrated Commissioning Board (ICB)), there is an increased risk that the Council may have difficulties in agreeing budgets (given the likely funding reductions going forward) and embedding complex governance arrangements and/or workforce planning structures.
 - If the Council fails to think and work collaboratively, there is an increased risk that cultural differences may materialise, which prevents the implementation of the intended levels of integration. This could also result in an inability to respond to the pressures being placed on Social Care, which expect services to be made accessible seven days a week (both in terms of the Council's own workforce and in respect of its contracts with external providers).
 - There is an increased risk that the Council may not have access to the resources it needs, to effectively deliver the services it is responsible for, if it does not engage with system reviews designed to help ensure that funding follows the patient.

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AUDIT OPINION

9. Our overall audit opinion, number and rating of recommendations are as follows.

AUDIT OPINION	
Reasonable Assurance	(Definitions of the audit assurance level and recommendation ratings can be found in Appendix B)

Number of recommendations by risk rating		
Priority 1	Priority 2	Priority 3
0	4	0

SUMMARY OF FINDINGS

10. Controls noted to be in place and working well, based on the audit testing conducted, included:

- A Bromley Health and Wellbeing Strategy was approved by the Health and Wellbeing Board in November 2018.
- An Integrated Commissioning Board with formal Terms of Reference meets every two months.
- The Integrated Commissioning Board has a detailed work programme and receives regular reports on progress made on completion of tasks.

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- The Health and Wellbeing Board receives quarterly performance reports for Better Care Fund and Improved Better Care Fund workstreams, which include updates on integration of health and social care and detailed budget monitoring information.
- Integrated Care Networks (ICNs) have been in place in Bromley since 2016, enabling shared health and social care services to be delivered to individuals by local multi-disciplinary teams.
- Bromley CCG is leading the One Bromley Partnership, which consists of local health providers, Bromley Council and representation from the voluntary sector. The partnership is designed to deliver seamless joined-up services to individuals.
- Bromley Council and Bromley CCG are developing an integrated commissioning unit, which covers joint procurement arrangements, sharing of expertise, service development, oversight of quality and safety and performance management (to be in place by April 2020).
- The Council and Bromley CCG are working on a 'digital roadmap' in conjunction with other local authorities and CCGs in south east London to enable care records for individual service users to be viewed by all health and social care professionals.

11. We would like to bring to management attention the following issues:

- Outstanding actions in the superseded 2020 Bromley Action Plan need to be transferred to the Integrated Commissioning Board's Work Programme.
- The draft Joint Mental Health and Wellbeing Strategy was not approved by the Council's Adult Care and Health Policy Development and Scrutiny Committee because more work needed to be done in several areas (e.g. interface with Child and Adolescent Mental Health Services and accessing of services by people with limited access to the internet).
- Performance statistics for ICNs reported to the Health and Wellbeing Board for 2018/19 did not relate to agreed performance indicators and require further development.
- The latest revised version of the Section 75 Agreement between Bromley Council and Bromley CCG (which governs the administration of the pooled fund for integrated services) has not yet been signed off.

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DETAILED FINDINGS / MANAGEMENT ACTION PLAN

12. The findings of this report, together with an assessment of the risk associated with any control weaknesses identified, are detailed in Appendix A. Any recommendations to management are raised and prioritised, together with management's responses and timescales for implementation. Appendix B details the definition of the audit assurance and priority ratings.

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DETAILED FINDINGS AND ACTION PLAN

APPENDIX A

No	Finding	Risk	Recommendation and Priority *Raised in previous Audit	Management Response	Agreed timescale and responsible manager
1	<p><u>2020 Bromley Action Plan</u> The draft Bromley 2020 Integration Strategy contained a detailed action plan. It was established that the Strategy has not been formally adopted by Bromley Council and Bromley CCG and is now out of date. However, the Bromley 2020 Action Plan contains actions, which do not appear in any other action plan and still appear to be valid (e.g. completion of a self-assessment against the vision for integration and objectives for health and social care integration, and production of a workforce development plan).</p>	<p>Where actions identified as necessary are not carried out in a timely manner, there is a risk of failure to achieve objectives.</p>	<p>Outstanding actions in the 2020 Bromley Action Plan, appended to the superseded Bromley 2020 Integration Strategy, should be transferred to the Integrated Commissioning Board's Work Programme.</p> <p>Priority 2</p>	<p>The launch of the Self-assessment was postponed from the last ICB as key officers were on leave. This item is on the next agenda for the meeting on 16th September.</p> <p>Workforce development plan to be considered when new Director of Integrated Commissioning is in post – target date January 2020 subject to member approval.</p>	<p>16th September 2019 to launch – Assistant Director Strategy. Performance and Corporate Transformation</p> <p>February 2020 – Director of Integrated Commissioning</p>
2	<p><u>Joint Commissioning Strategies</u> A draft Joint Mental Health and Wellbeing Strategy was submitted to Bromley's Adult Care and Health and PDS Committee for approval on 7th March 2019, but was not</p>	<p>Where joint commissioning strategies are produced without sufficient consultations with groups of service users and elected</p>	<p>The development of future joint commissioning strategies should involve increased consultations with groups of service users and elected members.</p> <p>Priority 2</p>	<p>Task and finish group set up by Bromley's Adult Care and Health PDS due to meet for final time on 4.9.19.</p> <p>Final report to be signed off at PDS on 17.9.19.</p>	<p>17th September 2019</p> <p>Head of Service, Complex and Long Term Commissioning</p>

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	<p>approved due to concerns about lack of clarity in certain areas including:</p> <ul style="list-style-type: none"> • Interface between Adult Mental Health Services and Child and Adolescent Mental Health Services (CAMHS); • Re-entry of service users who do not permanently recover; • Cultural and language barriers experienced by people in minority communities trying to access services; and • Access to services by people who have limited access to the internet. <p>Comments made by members of the Committee highlighted a lack of public consultation and stakeholder engagement and a lack of involvement by members in the production of the draft strategy.</p>	<p>members, there is a risk that they will not be fit for purpose.</p>		<p>Further engagement with those with living experience and key stakeholders to inform the development of the action plan that falls out of the Strategy.</p>	

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3	<p><u>Integrated Care Networks</u> The quarterly Better Care Fund performance reports to the Health and Wellbeing Board for 2018/19 included statistics for Integrated Care Networks, but they were activity statistics, which did not relate to any performance indicators. For example, the report for Quarters 3 and 4 of 2018/19 refers to a “speedier response to referrals and assessment and turnover of cases” (paragraph 4.93), but the statistics in paragraph 4.94 do not cover the timeliness of responses to referrals and assessments of cases. It is noted that work on developing performance management systems for Integrated Care Networks is currently ongoing.</p>	<p>Where performance statistics for Integrated Care Networks do not include comparisons with targets, there is a risk that the effectiveness of Integrated Care Networks will not be clearly established.</p>	<p>Performance statistics for Integrated Care Networks submitted to the Health and Wellbeing Board should include comparisons of actual performance with targets.</p> <p>Priority 2</p>	<p>To be addressed at next reporting round.</p>	<p>Quarter 3 2019/20</p> <p>Head of Service, Community Living Commissioning</p>

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4	<p><u>Section 75 Agreement</u> The Section 75 Agreement between the Council and Bromley CCG is due to be refreshed every Autumn, but it was established that the latest refreshed version of the Agreement had not yet been formally signed off by the two parties.</p>	<p>Where the current signed version of the Section 75 Agreement is out of date, there is a risk that any disputes between the two parties may not be resolved in an efficient and effective manner.</p>	<p>The latest revised version of the Section 75 Agreement between the Council and Bromley CCG should be signed off in a timely manner.</p> <p>Priority 2</p>	<p>To be signed off by Director of Adults and Chief Officer of CCG.</p>	<p>September 2019 Director of Adult Services</p>

Assurance Level

Assurance Level	Definition
Substantial Assurance	There is a sound system of control in place to achieve the service or system objectives. Risks are being managed effectively and any issues identified are minor in nature.
Reasonable Assurance	There is generally a sound system of control in place but there are weaknesses which put some of the service or system objectives at risk. Management attention is required.
Limited Assurance	There are significant control weaknesses which put the service or system objectives at risk. If unresolved these may result in error, abuse, loss or reputational damage and therefore require urgent management attention.
No Assurance	There are major weaknesses in the control environment. The service or system is exposed to the risk of significant error, abuse, loss or reputational damage. Immediate action must be taken by management to resolve the issues identified.

Recommendation ratings

Risk rating	Definition
Priority 1	A high priority finding which indicates a fundamental weakness or failure in control which could lead to service or system objectives not being achieved. The Council is exposed to significant risk and management should address the recommendation urgently.
Priority 2	A medium priority finding which indicates a weakness in control that could lead to service or system objectives not being achieved. Timely management action is required to address the recommendation and mitigate the risk.
Priority 3	A low priority finding which has identified that the efficiency or effectiveness of the control environment could be improved. Management action is suggested to enhance existing controls.