

Final Internal Audit Report

End to End Placements – Children with Disabilities

July 2022

Distribution: Interim Corporate Director of Children, Families & Education
Director Early Help & Children's Social Care
Head of Social Work with Families & Children with Disabilities
Service Manager, Children with Disabilities
Corporate Director of Resources & S151 Officer

Assurance Level	Issues Identified	
Substantial Assurance	Priority 1	0
	Priority 2	3
	Priority 3	0

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Please refer to the Statement of Responsibility in Appendix 3 of this report for further information about responsibilities, limitations and confidentiality.

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1. Introduction

- 1.1. The London borough of Croydon (the 'Council's) Children with Disabilities (CWD) team provides support for children and young people aged 0-18 years who have a permanent and substantial disability, and their families. This includes profound multiple disabilities, disability associated with complex health problems, severe sensory disabilities and severe social communication difficulties.
- 1.2 Requests for support are received into the Single Point of Contact for Early Help & Children's Social Care (SPOC) by referrals from various sources including parents of disabled children, schools, police and health professionals. Taking into consideration the initial available information a decision is made by the CWD Team Manager, in conjunction with the SPOC as to whether the eligibility criteria are likely to be met and if so, the most appropriate team to support the child/young person and their family.
- 1.3 If it has been considered that the eligibility criteria is likely to be satisfied, a Child & Family Assessment (under section 17 of the Children Act 1989) is undertaken by a Social Worker within the CWD Team. The Social Worker meets with the child and family to further understand and record observations on areas within the eligibility criteria (such as health, communication, emotional and behavioural development) as well as their home or care environment.
- 1.4 Children and young people will be reviewed every six months to determine if the eligibility criteria continues to be met and if services are meeting assessed needs. Children and young people who have an allocated social worker will be visited every three months, and more frequently if this is deemed necessary by the Social Worker and CWD Team Manager. These visits are referred to as Child in Need meetings and will usually be undertaken at home and in other settings which the child or young person attends, however, due to COVID-19, some visits were undertaken virtually.
- 1.5 In some instances, a child or young person will require closer attention from a carer for an agreed number of hours per week. This will be set out in the initial assessment or subsequent Child in Need meetings. The Resource Panel discusses the proposed care and agrees the payment to be made to provide the care.
- 1.6 Records of assessments and payments to be made are electronically stored within the case management system called Liquid Logic.
- 1.7 The fieldwork for this review was completed during the government measures put in place in response to COVID-19. While our review and testing were performed remotely, we have been able to obtain all relevant documents required to complete the review.

- 1.8 The audit was undertaken as part of the agreed Internal Audit Plan for 2020/21 and carried into 2021/22 due to delays caused by Covid-19. The objectives, approach and scope are contained in the Audit Terms of Reference at Appendix 1.

2. Key Issues

Priority 2 Issues

Testing of a sample of 25 cases found two instances with delays (in excess of five months) in finalising Child & Family Assessments, of which one was still in draft form at the time of the audit. **(Issue 1)**

Testing of a sample of 25 cases found three instances where Child in Need reviews were not undertaken at the expected intervals, of which the longest interval without review was 11 months. **(Issue 2)**

Testing the five instances, where the provision of a care package was agreed from the sample of 25 cases, found that there were issues with the timeliness of the set-up of payments in two cases. **(Issue 3)**

There were no Priority 3 issues.

3. Actions and Key Findings/Rationale

Audit Area 4: Needs Assessments

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 1
2	<p>The completion of C&F assessments, for new referrals and update assessments is monitored via weekly performance dashboard and daily checks on Power BI dashboard.</p> <p>There have been longstanding issues with timeliness of completions of assessments, these have been resolved and assessments are now completed within 45 days statutory timescale.</p> <p>Monthly performance practice meeting lead by the Head of Service and Director provides oversight of performance in this area.</p> <p>Team Managers and Service Managers report weekly on assessments completion and progress. Services for children can be provided during the assessment, therefore children and families should not have to wait to receive a service if they are entitled to receive this .</p> <p>C&F Assessments must be completed within 45 days from referral or when any changes of children circumstances might require, for those children who receive an ongoing service.</p>	<p>Review of a sample of 25 cases referred to the CWD Team between April 2020 and February 2021 found that, although Child & Family Assessments were completed in all instances, there were two instances with prolonged delays in finalising the Child & Family Assessments and receiving sign off from a CWD Team Manager. These were:</p> <ul style="list-style-type: none"> Case number 2*****: The referral was made in December 2020, but the assessment was not finalised until June 2021; and Case number 2*****: The referral was made in December 2020, but the assessment remained in draft as of June 2021. Internal audit was informed that this was because the Social Worker had not completed the analysis section of the assessment to fully explain the recommendations. <p>Where delays occur in finalising the assessments, there is a risk that potential changes in the needs of a child or young person are not identified and acted upon in a timely manner.</p>

End to End Placements – Children with Disabilities 2020-21

Responsible Officer	Deadline	
Head of Social Work with Families and CWD / Service Manager CWD / Service Manager	BAU Current performance (last 6months) 100%	

Audit Area 6: Client Reviews

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 2
2	<p>All children open in CWD are children in need (or need of protection) and have a plan that details the support and changes required. These plans need to be updated and reviewed in accordance with the service policy and procedures. Some CIN have a 3 month review frequency some have a 6 month review frequency.</p> <p>The service target for 22/23 completion of Reviews is 95% and the performance is now at 94%.</p> <p>Performance against target is monitored through performance meetings by HoS and Service Managers on monthly basis.</p>	<p>From sample testing of 25 cases referred to the CWD team between April 2020 and February 2021, there were 14 cases which had passed the assessment stage and required subsequent client monitoring review (Child in Need) meetings to be undertaken between the Social Worker and the child or young person's family.</p> <p>Three instances were observed where the required reviews were not undertaken at the end of three months:</p> <ul style="list-style-type: none"> Case number 2***** – Internal audit completed a walkthrough review of the file with the Service Manager over Microsoft Teams in August 2021. It was found that this file did not have a review meeting recorded since September 2020; a delay of nine months. The September 2020 assessment recorded a next meeting due date of 28 December 2020; however, the next meeting did not occur until 27 September 2021; Case number 2***** – Notes of review meeting held 3 December 2020 stated that the next review meeting should be held in March 2021. However, the next meeting occurred on 19 May 2021 and the assessment was not finalised until 10 August 2021; and Case number 2***** – The assessment was completed on 1 June 2020, however, there was no record of a follow up review meeting until six months later, on 8 December 2020. The assessment records a previous review date of 10 September 2020, however there was no record of this within Liquid Logic. <p>Not completing reviews of a child or young person's needs in a timely manner could result in changes in needs not being identified and the required service not being provided.</p>
Responsible Officer		Deadline
Head of Social Work with Families and CWD		BAU

Audit Area 7: Care, Support and other Payments

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 3
2	<p>There is a very well established process of requesting and approving support packages for children who meet our eligibility criteria, this has been in place for over 18 months. The issues identified predate the Access to Resource Panel and the current PRF form and system, including payments to providers via ContrOCC enables a much better way of recording, monitoring spend and forecasting.</p> <p>Support can be requested in advance, which might mean the new payment will be set up to coincide with the ending of an old package as two packages can't run in parallel.</p> <p>All new packages are set up within 7 days, our as soon as compliance (agreements by parties are sometimes required to set up direct payments and in the absence of these payments can't start) is completed and documentation can be uploaded into CRS.</p>	<p>A child or young person will sometimes require closer attention from a carer for an agreed number of hours per week. This will be set out in the initial assessment or subsequent Child in Need meetings. The social worker is required to complete a Payment Request Form to set out the requirements of the care package and costs. The Resource Panel discusses the proposed care and agree the payment to be made to provide the care.</p> <p>Five cases within the sample of 25 cases tested required care package payments to be made. For each of these five cases we confirmed that Resource Panel approval was documented, Payment Request Forms were completed and authorised and that payments had been set up in Liquid Logic.</p> <p>We noted that there were no defined timeframes for payments to be set up within Liquid Logic. Whilst we confirmed that three payments had been set up within seven days of the Resource Panel decision, there were two instances with extended delays in adding these payment provisions to Liquid Logic:</p> <ul style="list-style-type: none"> Case number 2***** – Care package payment was approved by the Resource Panel on 26 March 2021 but was not added to the Liquid Logic system until 20 May 2021 due to delays in finalising the assessment (as per Issue 1); and Case number 2***** – The Resource Panel approved the care package on 27 November 2020, however, the payment form was not completed and authorised until 25 January 2021. It was then subsequently set up in Liquid Logic on 12 February 2021. <p>Whilst we were able to confirm that delayed payments had been appropriately backdated to their intended start date, delayed request or set up of payment can lead to payments being missed and/or loss of care provider due to dissatisfaction with time taken to receive the payment.</p>
Responsible Officer		Deadline
Head of Social Work with Families and CWD / Business and Financial Operations Manager		BAU

AUDIT TERMS OF REFERENCE

End to End Placements

1. INTRODUCTION

- 1.1 Croydon's Children with Disabilities Team (CWD) provides support for children and young people aged 0-18 years who have a permanent and substantial disability, and their families. The service supports children and young people who have a permanent and substantial physical and/or learning disability, this includes profound multiple disabilities, disability associated with complex health problems, severe sensory disabilities and severe social communication difficulties.
- 1.2 Taking into consideration all relevant available information a decision will be made by the CWD Team Manager, in conjunction with the Contact Centre and SPOC (Single Point of Contact for Early Help & Children's Social Care), as to whether the eligibility criteria are likely to be met. If it is likely that the eligibility criteria will be satisfied, a needs assessment (under section 17 of the Children Act 1989) will be undertaken by the CWD Team. Once the child/young person's needs have been assessed and the eligibility criteria applied, a decision will be made as to the most appropriate team to support the child/young person and their family.
- 1.3 Children and young people will usually be reviewed every 6 months to determine if the eligibility criteria continue to be met and if services are meeting assessed needs. Children and young people who have an allocated social worker will be visited every 6 weeks and more frequently if this is deemed necessary by the Social Worker and Team Manager. These visits will be undertaken at home and in other settings which the child or young person attends.
- 1.4 This audit was undertaken as part of the agreed Internal Audit Plan for 2020/21.

2. OBJECTIVES AND METHOD

- 2.1 The overall audit objective was to provide an objective independent opinion on the adequacy and effectiveness of controls / processes.
- 2.2 The audit will for each controls / process being considered:
 - Walkthrough the processes to consider the key controls;
 - Conduct sample testing of the identified key controls, and
 - Report on these accordingly.

3. SCOPE





- 3.1 This audit included the following areas (and issues raised):

Control Areas/Risks	Issues Raised		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Regulatory, Organisational and Management Requirements	-	-	-
Referrals to the CWD Team	-	-	-
CWD Eligibility Assessments	-	-	-
Needs Assessments	-	1	-
Care Planning and Support	-	-	-
Client Reviews	-	1	-
Care, Support and other Payments	-	1	-
Total	-	3	-

Definitions for Audit Opinions and Identified Issues

In order to assist management in using our reports:

We categorise our **audit assurance opinion** according to our overall assessment of the risk management system, effectiveness of the controls in place and the level of compliance with these controls and the action being taken to remedy significant findings or weaknesses.

	Full Assurance	There is a sound system of control designed to achieve the system objectives and the controls are constantly applied.
	Substantial Assurance	While there is basically a sound system of control to achieve the system objectives, there are weaknesses in the design or level of non-compliance of the controls which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or extremely weak, leaving the system open to the high risk of error, abuse and reputational damage.

Priorities assigned to identified issues are based on the following criteria:

Priority 1 (High)	Fundamental control weaknesses that require immediate attention by management to action and mitigate significant exposure to risk.
Priority 2 (Medium)	Control weakness that still represent an exposure to risk and need to be addressed within a reasonable period.
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, still provides an opportunity for improvement. May also apply to areas considered to be of best practice that can improve for example the value for money of the review area.

Statement of Responsibility

We take responsibility to the London Borough of Croydon for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

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