

## Recent Internal Audit Reports

Audit Report	Audit Opinion	Issues Raised			Comments
		Critical Risk (Red)	Major Risk (Amber)	Moderate Risk (Yellow)	
Adult Services - Residential Care Homes	Medium	0	0	13	
Public conveniences	Medium	0	0	4	

***Denbighshire Internal Audit Services***  
*Caledfryn, Smithfield Road, Denbigh, LL16 3RJ*

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## **Residential Care Homes**

December 2013



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## Purpose & Scope of Review

We carried out a review of the Council-managed residential care homes in August 2013, having not audited them for several years.

We visited the following homes:





- Awelon, Ruthin
- Cysgod y Gaer, Corwen
- Dolwen, Denbigh

The scope of our work focused on general management issues at all three sites, i.e. we did not look at any social care elements. We reviewed the following:

- Income / asset records and procedures
- Petty cash accounts & procurement
- Health & safety, fire safety, building management and general security

## Assurance Rating

(Based on areas reviewed)

	High Assurance	Risks and controls well managed
	Medium Assurance	Risks identified but are containable at service level
	Low Assurance	Risks identified that require meeting with Corporate Director/Lead Member
	No Assurance	Significant risks identified that require member / officer case conference

## Audit Opinion

Overall, our review of the three homes found that they manage financial tasks well and, in general, there is good record keeping for residents' monies. They administer petty cash accounts well but use them excessively, so need to review their procurement practices. Each home has a culture of incurring expenditure through the petty cash accounts to the extent that it is unreasonable. Wherever possible, framework agreements should be used to procure goods and services and better use of the Proactis system will introduce added controls and more efficient ways of working.

Training is a predominant feature for employees to help ensure that they are sufficiently skilled to carry out their role safely and efficiently. The supply of courses to meet the demand can be problematic in some subject areas but this issue needs to be looked at from a service perspective.

The majority of health and safety requirements are in place but some lapses in fire management records and evacuation drills leave the homes vulnerable in the event of an emergency. The fundamental elements of health and safety are widely embedded throughout the home environment and routine tasks connected with water management, portable appliance (PAT) testing of electrical goods, food hygiene and others are carried out regularly. A lot of work has gone into setting up a fire management file at each site and Awelon and Cysgod y Gaer would do well to replicate the system in place at Dolwen, which is of a high standard. This would help to address the issues raised in respect of fire equipment and site location maps.

Our main area of concern is around the relaxed approach to general building security. Procedures and activities need to be far more robust than they currently are to maximise the safety of the residents and employees. There are no panic alarms or call buttons to protect employees should they feel threatened by a difficult personal situation and there needs to be more vigilance when visitors or contractors are on site, with signing in and out logs always completed. Raising awareness of the implications of security lapses should encourage employees to be more proactive in maintaining a safer working environment and home for the residents.

We have raised several issues, which are all achievable at service level; however, given the nature of some of the issues, we held an escalation meeting with the Corporate Director – Modernisation & Wellbeing and the Lead Member for Social Care & Children's Services to seek assurance that the action plan to address the issues is robust. As we received this assurance, we have given a medium assurance rating for the areas reviewed.

# Action Plan

**Audit Review of:** Residential Care Homes  
**Date:** December 2013  
**Action Plan Owner:** Phil Gilroy (Head of Adult & Business Services)

Corporate Risk/Issue Severity Key	
	<b>Critical</b> – Significant CET and Cabinet intervention
	<b>Major</b> – intervention by SLT and/or CET with Cabinet involvement
	<b>Moderate</b> – Containable at service level. Senior management and SLT may need to be kept informed

Risk/Issue No.	Risk/Issue	Action	Who	When
1.	<p>There is no overarching policy at any of the homes for managing people’s finances, e.g. stipulating how much the service is prepared to hold for residents.</p> <p>Additionally, linked to the above, there are no written procedures in place to guide members of staff on how to deal with income and residents’ monies, particularly if received outside of normal office hours.</p>	<ul style="list-style-type: none"> <li>The Admission Agreement letter issued to all new residents has been amended to ensure that new residents are advised that the home can only hold a maximum of £100 per individual resident and a record held of the fact that this information has been given.</li> </ul>	Home Managers	1 December 2013
		<ul style="list-style-type: none"> <li>Work is already underway to develop a procedure to guide members of staff in the receipt of money out of hours.</li> </ul>	Home Managers	1 December 2013
		<ul style="list-style-type: none"> <li>General everyday procedures i.e. operated during normal hours, to be developed as well as the above.</li> </ul>	Home Managers	1 January 2014

Risk/ Issue No.	Risk/Issue	Action	Who	When
2.	<p>Despite having a number of supplier framework agreements, there is still a large amount of expenditure incurred via the petty cash account, to the extent that it is being over-used at all three homes.</p> <p>We have highlighted several risks linked to this method in our report and, through better communication with the Strategic Procurement unit, the number of ad-hoc purchases made from supermarkets can be reduced.</p>	<ul style="list-style-type: none"> <li>Petty cash account to be reviewed with support from Finance and Procurement colleagues to make better use of the framework agreement, while at the same time enabling managers to continue to support residents accessing the community and making choices for themselves in certain areas.</li> <li>Develop an action plan with the Finance and Procurement Officers to look at specific products and to review on-going spend through the petty cash accounts.</li> </ul>	<p>Team Manager /Procurement &amp; Finance Officers. Home managers will be involved in these discussions.</p> <p>As above</p>	31 March 2014
3.	<p>All three homes are processing an excessive number of standalone invoices through Proactis. This poses financial risks and circumvents expected controls.</p> <p>Additionally, activity in respect of purchasing could be modernised, making better use of IT, leading to more efficient ways of working.</p>	<ul style="list-style-type: none"> <li>Discussions with Finance and Proactis colleagues to provide additional training for relevant members of staff to make better use of the Proactis system. (Training courses to begin in January 2014 focusing on refresher training and key areas for improvement)</li> <li>With specific reference to orders made by the cooks, in all three homes cooks and other kitchen staff have now been instructed that all orders must go through the office. Home Managers will monitor this to ensure compliance.</li> </ul>	<p>Team Manager</p> <p>Home Managers</p>	<p>31 March 2014</p> <p>1 November 2013 &amp; on-going</p>

Risk/ Issue No.	Risk/Issue	Action	Who	When
4.	<p>Training courses are provided in-house but the terms and conditions of the Welsh Government funding arrangements make it difficult for members of staff in the homes to access courses, due to them being offered to all other sectors at the same time.</p>	<ul style="list-style-type: none"> <li>• Workforce Development team to continue working with Provider Managers to identify critical training needs affecting Provider staff, e.g. prioritising first aid and refresher training where applicable.</li> <li>• Increased use of CYG training room in the south of the county as appropriate</li> <li>• Earlier identification of training needs for new staff joining the service.</li> </ul>	<p>Team Manager – Workforce Development MS</p>	<p>1 March 2014</p>
5.	<p>Management is not always proactive in delivering refresher training in health and safety (this mainly applies to Awelon &amp; Cysgod y Gaer).</p> <p>Also, for consistency with the other homes, employees at Cysgod y Gaer would benefit from training in personal safety &amp; conflict resolution</p>	<ul style="list-style-type: none"> <li>• Health and safety training for members of staff in both the north and south of the county has been arranged to include building security and personal safety. <i>These arrangements were made in September 2013 and the training is scheduled to be delivered in January and February 2014. Home Managers will ensure that all relevant members of staff attend.</i></li> <li>• Also consider scope to provide conflict training if available.</li> </ul>	<p>Home Managers</p>	<p>1 March 2014</p>

Risk/ Issue No.	Risk/Issue	Action	Who	When
6.	First aid notices and signage for the location of equipment are not displayed at Awelon and Cysgod y Gaer.	<p><i>Captured within the work done with corporate colleagues in respect of the implementation of the new Fire Safety Procedures. Work was undertaken and the procedure implemented initially in Dolwen and is now being rolled out to both Awelon and Cysgod y Gaer.</i></p> <ul style="list-style-type: none"> <li>Managers on these sites were already required to ensure that this work was completed by 1 February 2014. Work is still on-going and progressing well at this time.</li> </ul>	Team/Home Managers	1 February 2014
7.	Asbestos surveys are provided in a prime location at all homes but management needs to be more proactive in raising awareness and prompting contractors to read the survey and sign the register before they start work on site (this mainly applies to Dolwen and Cysgod y Gaer).	<p><i>Home Managers are already required to ensure that all contractors read the survey information and sign the register to indicate that they have done so.</i></p> <ul style="list-style-type: none"> <li>Managers will now review the arrangements in place for this and look to develop a more robust system.</li> </ul>	Home Managers	1 December 2013
8.	For consistency and to avoid confusion, it would be advisable to replicate Dolwen's fire management file at all three locations and remove the need for additional files to be maintained, which could lead to confusion and information not being up to date.	See action in response to Risk/Issue 6 above	Team/Home Managers	1 February 2014

Risk/ Issue No.	Risk/Issue	Action	Who	When
9.	<p>Fire equipment records at Awelon and Cysgod y Gaer are not up to date. Additionally, location maps at both these sites are out of date. Both factors could be critical in the event of a fire.</p> <p>As part of this housekeeping exercise, all emergency plans would benefit from a check to ensure that all information held is accurate.</p>	<p>See action in response to Risk/Issue 6 above.</p> <ul style="list-style-type: none"> <li>Emergency plans to be reviewed in line with the above on-going work.</li> </ul>	<p>Team/Home Managers</p> <p>Team/Home Managers</p>	<p>1 February 2014</p> <p>1 March 2014</p>
10.	<p>Procedures and the frequency of fire drills and evacuations should be improved through some discussion with the Corporate Health &amp; Safety Advisor, who specialises in this area.</p> <p>Records are not always maintained when fire drills and evacuations occur.</p>	<ul style="list-style-type: none"> <li>Team Manager met with Corporate Health &amp; Safety Officer in September 2013 to confirm the introduction of the new style fire training.</li> <li>New fire training process implemented by Home Managers in November 2013 and reviewed by Team Manager during December. Records of all events to be retained.</li> </ul> <p>See action in response to Risk/Action 6 above</p> <ul style="list-style-type: none"> <li>Develop a schedule of all health and safety and property related activities to ensure they are carried out simultaneously at all three homes throughout the year to enable lessons learnt to be shared between management.</li> </ul>	<p>Team Manager/H &amp; S Officer</p> <p>Home Managers</p> <p>Home Managers</p>	<p>Completed</p> <p>31.12.2013</p> <p>31.01.14</p>



Risk/ Issue No.	Risk/Issue	Action	Who	When
11.	<p>In line with health and safety requirements, management needs to be more vigilant in ensuring that all visitors to the homes sign in on arrival and out when leaving the building.</p> <p>Additionally, options to raise awareness of visitors arriving, such as the use of doorbells, should be considered.</p>	<p><i>During the hours of darkness it has always been the practice to lock the front door of all three homes. During daytime the door is unlocked to enable residents who are able to come and go. In acknowledging the concerns raised in this audit report the need to enable residents to continue with this practice in some way needs to be maintained.</i></p> <ul style="list-style-type: none"> <li>• Raise the matter for discussion with the residents to seek their views and consider potential solutions. Following consultation, communicate the new process to all parties.</li> <li>• In the meantime, be more vigilant in ensuring that all visitors to the building sign in on arrival and out on departure.</li> <li>• In addition, consider the feasibility of locking the door and visitors being required to ring the bell. Appropriate notices will be put in place to this effect.</li> </ul>	<p>Home Managers</p> <p>Home Managers</p> <p>Team Manager</p>	<p>31 December 2013</p> <p>01 November 2013</p> <p>31 January 2014</p>

Risk/ Issue No.	Risk/Issue	Action	Who	When
12.	Members of staff may be at risk of personal attack, particularly in the manager's office areas, and currently there are no panic alarms or call buttons to raise awareness to other employees if an incident occurs.	<ul style="list-style-type: none"> <li>Carry out a review of activity undertaken in the manager's office area (most of these are adjacent to the front door) to determine which activities need to happen in that area with a view to reducing the amount of time individuals work alone in the area.</li> <li>Clearly not all activity can take place elsewhere but alongside this review, the Team Manager will explore the options in respect of the provision of panic / personal alarms to be used by individuals working in these areas.</li> <li>Personal alarms have now been obtained and circulated to Home Managers for use by individuals in the office areas. Training to be provided.</li> </ul>	<p>Home Managers</p> <p>Team Manager</p> <p>Home Managers</p>	<p>1 December 2013</p> <p>1 December 2013</p> <p>25 November 2013</p>
13.	Our walk-through checks at the homes alerted us to some security risks (as detailed in our report) and an overall review of security arrangements may help to instil an awareness of the potential risks of these actions and to consider where improvements can be made.	<ul style="list-style-type: none"> <li>Each Home Manager will be instructed to carry out a review in this area and this will be overseen by the Team manager.</li> <li>Include awareness raising for members of staff in respect of overall security in forthcoming staff meetings. Reinforce this message at subsequent meetings and more generally with members of staff in daily handover meetings.</li> </ul> <p>In the meantime managers have been instructed to take the following actions:</p>	<p>Home Managers</p> <p>Team Manager</p> <p>Home Managers</p> <p>Team Manager</p>	<p>18 November 2013</p> <p>25 November 2013</p> <p>1 November 2013</p> <p>25 November 2013</p>

Risk/ Issue No.	Risk/Issue	Action	Who	When
		<ul style="list-style-type: none"> <li>• Not to use door wedges and to remove them all.</li> <li>• Ensure that where there are external doors (with the exception of the front door) these can only be left open when there is a member of staff in the room/area.</li> <li>• Where rooms are locked (including those marked Dangerous Substances) and keys left in the lock, on the doorframe or hooks, all keys are to be removed and managers have been instructed to locate these in a safe but accessible place for staff use.</li> </ul> <p>In relation to Awelon and the neighbouring Llys Awelon unit. The Home Manager has advised her own staffing team and those in Llys Awelon of the security issues raised in the report and reminded them of the arrangements for securing both units.</p> <p>The Team Manager will review compliance on all of these areas during January 2014.</p>	Team Manager	31 January 2014

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# **Public Conveniences**

December 2013



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**Ivan Butler CMIIA, MBA, Head of Internal Audit Services**

## Purpose & Scope of Review





We reviewed the public conveniences services as we have had not reviewed this area for several years and the Head of Service had requested some assurance over income collection processes.

As part of the review we looked at the following areas:

- income collection and controls
- staffing arrangements
- running costs
- customer service
- safety and security

## Assurance Rating

(Based on areas reviewed)

	High Assurance	Risks and controls well managed
	Medium Assurance	Risks identified but are containable at service level
	Low Assurance	Risks identified that require meeting with Corporate Director/Lead Member
	No Assurance	Significant risks identified that require member / officer case conference

## Audit Opinion

Overall, the day-to-day running of the public conveniences services provides a good service to the public. The Service Manager, who is currently on secondment in the role, plays a key role in ensuring that the services provided are clean and safe to use.

Income controls are good overall but could be strengthened by monitoring trends over time to identify any unusual fluctuations in income levels that may be an indicator of fraud. There are also some problems with meter readings that need to be addressed to ensure that readings are accurate to assist income reconciliations.

The service has reviewed its staffing capacity in an attempt to put the most cost-effective and efficient arrangements in place. Although there has been an increase in overtime and relief staff expenditure, this has been more than offset by a reduction in the use of agency employees, reducing staffing costs overall. Other running costs are also well-managed and have reduced over recent years.

The service needs to ensure that it has openness and transparency in its recruitment processes, particularly where relatives apply for posts. We found two cases where relatives of managers within the service were working as relief staff and there was no evidence that the managers had cleared this with senior management.

The service responds promptly and positively to customer feedback but needs to make sure that it consults relevant equalities groups and carries out Equality Impact Assessments when making key decisions on service delivery or refurbishing sites where necessary.

Sites are well maintained and regularly cleaned, including inspections for syringes etc. Other safety and security processes are good, including income collection and handling, CCTV coverage and stock controls.

# Action Plan

**Audit Review of:** Public Conveniences

**Date:** December 2013

**Action Plan Owner:** Head of Highways & Environment

Corporate Risk/Issue Severity Key	
	<b>Critical</b> – Significant CET and Cabinet intervention
	<b>Major</b> – intervention by SLT and/or CET with Cabinet involvement
	<b>Moderate</b> – Containable at service level. Senior management and SLT may need to be kept informed

Risk/ Issue No.	Risk/Issue	Action	Who	When
1.	<p>Although overall income controls are good, there are weaknesses relating to:</p> <ul style="list-style-type: none"> <li>monitoring of income trends to identify fluctuations;</li> <li>meter readings relating to income from the pods do not agree to actual income collected. The income is always more than the income recorded; and</li> <li>sales and reconciliations of radar keys</li> </ul>	<ul style="list-style-type: none"> <li>Set up comparison spreadsheet for year on year comparison of income to identify trends</li> <li>Compare income trends against other trends (where possible) i.e. car parks and tourism figures</li> <li>Investigate whether this is a 'common' problem in other local authorities that charge for unmanned toilets and will investigate whether there is a solution</li> <li>Create a 'stock control' sheet for RADAR keys</li> <li>Investigate alternative 'purchase' arrangements of keys by one stop shops from us</li> </ul>	<p>Cleaning Services &amp; Public Toilet Manager/ Client Officer - Catering Services/ Performance Officer - Business Support</p> <p>Performance Officer - Business Support</p> <p>Performance Officer - Business Support</p> <p>Client Officer - Catering Services/ Performance Officer - Business Support</p> <p>Client Officer - Catering Services/ Senior Finance &amp; Assurance Officer</p>	<p>31 March 2014</p> <p>Annually after end of financial year</p> <p>31 March 2014</p> <p>31 March 2014</p> <p>31 March 2014</p>

Risk/ Issue No.	Risk/Issue	Action	Who	When
2.	The recruitment process for employing relatives of current employees within the service is not always transparent. Written approval has not been provided when appointing relatives to officers within the service.	<ul style="list-style-type: none"> <li>• Ensure that any family members relationship is disclosed on application form</li> <li>• Obtain written agreement from Cleaning Service Manager or Head of Service (if required)</li> </ul>	Performance Officer - Business Support	Immediate
3.	The service needs to ensure that Equality Impact Assessments are carried out where necessary where the service will provided will be affected.	EQIA will be carried out for all further service adjustments that may affect access as necessary	Performance Officer - Business Support	Immediate