

**Wiltshire Council**

**Audit and Governance Committee**

**21 July 2022**

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**Subject: Good Lives Alliance Internal Audit Response**

**Cabinet Member: Councillor Jane Davies Cabinet Member for Adult Social Care, SEND, Transition and Inclusion**

**Decision:** The Committee is asked to note the actions taken in response to the Good Lives Alliance internal audit report which was finalised in November 2021.

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**Executive Summary**

This report presents an update about actions taken following a 'no assurance' internal audit of the Good Lives Alliance tender process. The report identified 3 key areas for improvement:

- Business Care
- Provider Performance Monitoring
- Providers and The Council Work in Partnership

The report concluded that several actions needed to be taken between March and September 2022.

This report provides a further update and assurance to the Committee of the actions taken by management to mitigate and rectify the weaknesses identified.

Significant work has been undertaken to address the areas of concern and all actions have been completed. Officers have also held an internal learning review which will be used to inform the governance, risk management and control of future commissioning exercises.

**Proposal(s)**

It is recommended that the Audit and Governance Committee note the actions taken in response to the internal audit.

**Reason for Proposal(s)**

The Director of Procurement and Commissioning is required to update the Committee on actions taken in response to the internal audit.

**Helen Jones**  
**Director of Procurement and Commissioning**

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#### **Purpose of Report**




1. This report presents an update about actions taken following a 'no assurance' internal audit of the Good Lives Alliance (GLA) tender which was finalised in November 2021.

#### **Relevance to the Council's Business Plan**

2. The Director of Procurement and Commissioning is required to update the Committee on actions taken in response to the internal audit.

#### **Background**

3. A review to assess the GLA tender process was carried out in October 2021, with a 'no assurance' report completed in November 2021. The Director of Procurement and Commissioning requested that the audit was undertaken to inform future commissioning.
4. In 2018 a tender was issued for the purchase of supported living and residential care services under the GLA. It was important to maintain services, whilst transferring providers onto a single standard contract and to streamline the various hourly rates and used.
5. An audit has been undertaken of the GLA. The aim was to determine if the GLA is delivering the outcomes and benefits that were expected at the start of the project.
6. The main risk highlighted was poor planning resulting in the procurement exercise not delivering the required outcomes. Other areas included: potential failure of second tendering exercise; significant gaps, weaknesses or non-compliance. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.

<b>Key Findings</b>	
	A formal business case was not produced at the start of the GLA framework project, it is therefore not possible to reliably measure if the project has achieved its expected outcomes.
	An effective and consistency approach to monitor providers has not yet been fully established.
	There are several weaknesses across the GLA governance structure; the providers and the council are not always working in partnership.

The following suggestions were made to the Council:

- *From our sample testing we found there was not always evidence to support due diligence performed. However, as the responsibility for due diligence has only recently moved to Commissioning, a suggestion rather than recommendation has been raised. Commissioning should ensure all due diligence checks are carried out and can be appropriately evidenced.*
- *No findings were noted for Off Framework Placements.*

Actions have been agreed with the Director of Procurement & Commissioning, with all due to be implemented by 30<sup>th</sup> September 2022.

### **Main Considerations for the Council**

The following actions have been taken in response to the audit:

<p><b>Business Case</b></p> <p>A formal business case was not produced at the start of the GLA framework project. Whilst high level benefits can be cited in the 2016 Residential Care buying cost models paper and the GLA Specification paper, these are not measurable and target dates were not set against them. The overarching aim seemed to be to reduce the level of cost, have a more standardised efficient process and improved level of care. However, as it was not stated what the expected reduction in cost was and how many spot providers, they wanted to join the GLA, by when and how, it is not possible to determine if the GLA framework project has delivered the expected outcomes.</p>
<p><b>Action taken:</b></p> <p>Future projects will include a formal business case setting out the aims and objectives of the project, the timescale, and criteria for measuring the outcomes and benefits derived from the project.</p> <p>The change to the GLA provided some consistency in costing, reducing the number of hourly rates from 100 to 2. Although this did not reduce the overall cost and</p>

achieve a saving, time and resource has been saved in back-office costs for all stakeholders.

This continues to move in the right direction as we target spot providers each quarter, see the KPI data below.

Performance Indicator	Jan-22	Feb-22	Mar-22	Apr-22
Number of SL packages of care GLA & Spot In & Out	1272	1257	1245	1239
Number of RCH packages of care GLA & Spot In & Out	837	832	835	832
Number of Providers on GLA at end of month	72	72	73	73
Number of passive providers	52	52	47	48
% of Packages on Alliance with Active Providers	65.70	66.20	67.30	67.60
% of Packages not on Alliance	34.30	33.80	32.70	32.40
Weekly GLA spend	£829,767.38	£818,255.83	£821,595.64	£850,297.65
Weekly non-GLA spend (Spot)	£590,665.01	£579,021.01	£556,302.26	£566,061.15
GLA spend as % of total	58.42	58.56	59.63	60.03

### Provider Performance Monitoring

An effective and consistency approach to monitor providers has not yet been fully established. There is a risk that providers are not meeting expected performance and care standards. The KPIs collated are not benchmarked against an expected criteria to measure performance.

#### Action taken:

Regular contract monitoring is now in place and officers collate key performance indicators.

Officers have worked with the GLA provider group to streamline the KPI reporting and improve the contract monitoring process.

We are working with stakeholders across the southwest, to align with other frameworks and reporting mechanisms, such as the Learning Disability Residential Framework Agreement.

The council, along with other local authorities in the South-west have purchased a market oversight tool, Provider Assessment & Market Management Solution (PAMMS) which we intend on implementing collaboratively across the sector in 2022.

This will further reduce duplication and make better use of live systems for capturing data.

We have reviewed our internal KPI reporting to capture trends in data and to improve our benchmarking.

We are also reviewing providers who are not actively engaging with Wiltshire and will be removing them from the GLA.

### Providers and The Council Work in Partnership

There are several weaknesses across the GLA governance structure, and the providers and the Council are not always working in partnership.

A GLA forum is held every 2 months where members of the council meet with GLA providers to share feedback on the GLA framework performance. However, whilst there is a draft Terms of Reference (ToR) in place for the GLA forum, it does not define the forum's decision-making powers or reporting lines and although the forum has been operational for 2 years, a final ToR has not been suitably approved.

The GLA forum has a pattern of limited attendance and feedback is not being obtained from non-attending members.

Internally in the Council several functions must work collaboratively for the framework to work effectively. Whilst there is a forum with providers, the Council's Commissioning, Operations, Brokerage and Finance teams do not regularly meet to discuss internal performance and issues.

The following operational weaknesses were identified:

- Not all providers on the GLA actively bid for work and the pool of providers available does not always meet the quality of care required. However, the data to support the extent of this problem has not yet been produced by the Brokerage team.
- Service Agreements are sometimes issued after a provider has commenced work. This means there can be delays in payments due to providers as the data does not always appear in the Controc System until after a provider invoice falls due.
- Concern was raised regarding the fees paid for the level of care being provided. There are currently 2 pricing bands which can't clearly be distinguished from one another. The care bands need to be clearer and potentially expanded so that the level of care provided meets the needs required and providers are paid proportionately to the level of care given.
- A mini search email is sent to all providers on a weekly basis, which is a log of all open placements. Improvements could be made to the weekly mini search email so providers stay engaged and can more easily keep track of what they could bid for. For example, it would be beneficial if the mini search had a date added column and more detail than 'ASAP or Urgent' in the 'date placement is required' field so providers can manage their availability better.

**Action taken:**

Officers reviewed the GLA forum earlier this year, as the provider volunteer stepped back from this role. We are now actively working with a committee of 6 providers who are supporting the wider GLA provider group. We also agreed

and signed off the Terms of Reference in February 2022. The Committee of providers regularly engage with their allocated group of GLA providers for feedback. This approach appears to be working well.

At each forum officers ask for feedback on the structure of the meeting and members have confirmed that this format works well for them and that they find the forums informative. We are using these forums to invite other stakeholders for further information sharing.

We have also had smaller workshop sessions with providers around specific areas, such as finance, support planning and accommodation.

The number of non-engaging providers, that do not have business in Wiltshire, is still a concern and we have been working with our procurement colleagues to write to these providers to remove them from the framework.

The Council's key internal functions do meet regularly to discuss performance and issues. Internal relationships between commissioning and operations have improved and we continue to build on our positive relationships with GLA providers. We have an alert policy in place to support with the quality assurance process. We have also introduced multi-disciplinary team meetings with our Provider Oversight and Support Team for providers of concern.

The Commissioning and brokerage relationship has improved in the last 6 months, with daily communications, a clear escalation plan and easy access to information and data.

The issuing of Confirmation of Service Agreements still requires some improvement to ensure they are issued prior to a package commencing, Brokerage are working on this, and this should improve as vacant posts are recruited to.

We have been engaging with the GLA providers about the two bands and the fee levels for these. There is some challenge from providers about the minimum training requirement for band 2 providers and the discrepancy between some organisations. Officers will be addressing this through the re-tender of the GLA as we are unable to change the current framework.

We have a small cohort of people that we have had to go off framework for to find a provider and use spot provision, which has meant a higher hourly rate. We are engaging with these providers to try and get them to sign up to the GLA.

The brokerage team has been engaging with providers to alter the way in which the mini search takes place. The gaps in data have been rectified, e.g., priority and start date. We have also discussed and used pen pictures as a starting point and we have been using a targeted approach to providers and vacancies, where possible. This is also highlighting where we consistently do not get a response from providers.

We have had some providers handing back multiple packages of care and have successfully transferred to other GLA providers, ensuring that we maintain costs.

Any actions that arise in the meetings will be monitored, action owners and deadlines will be assigned.

The Brokerage team will gather data to assess how many providers are actively bidding for work and determine if the GLA providers available meets the quality of care required.

We will review the GLA pricing bands so they can clearly be distinguished from one another and consider if other pricing bands should be added in the future.

### **Next Steps**

7. The lessons learned from this tender will be shared for future tender processes. There are some 'quick wins' as well as some longer-term actions we plan to take to ensure lessons are implemented for the benefit of the Council, particularly as we start to plan for the replacement of the GLA in 2023. Consultations with other local authorities in relation to how they deliver their banding structures are underway.
8. A Wiltshire Living Well Strategy has been developed with key partners and will go to Cabinet in October 2022.

### **Developing and sharing good practice**

9. The team used several templates, both procurement and project management related. These templates can be adapted and used by other tenders. The project plan template for example will provide a good basic set of tasks to consider as well as indicative resource required. Other templates such as risk management, decision logs etc can be adapted from core Council ones developed by the Programme and Systems-Thinking team. We will encourage use of these templates in future tenders through the development of a toolkit.
10. We have also utilised SharePoint by using a collaboration space that multiple teams can access the information and data.
11. We undertook a review of due diligence across the directorate when placing with out of county providers, building on the existing good practice in the learning disability area.

### **Co-Production**

12. Engagement with providers continues to work well as well as having designated officers as main contacts for providers.
13. Officers have engaged with Wiltshire Care Partnership to ensure that specialist providers are kept informed.



14. We also continue to engage with Wiltshire Centre for Independent living who have supported our user engagement and provided various reports to support how we commission future services.

15. We still have some progress to make in having an outcome based, fully person-centred approach, however we can evidence co-production; working with providers to consider solutions to issues around service delivery.

### **Overview and Scrutiny Engagement**

16. No overview and scrutiny engagement has taken place. The Audit and Governance Committee are responsible for the review and approval of internal audits.

### **Safeguarding Implications**

17. There are no safeguarding implications associated with this report.

### **Public Health Implications**

18. There are no public health implications associated with this report.

### **Procurement Implications**

19. There are no procurement implications associated with this report.

### **Equalities Impact of the Proposal**

20. There are no equalities impacts arising from this report.

### **Environmental and Climate Change Considerations**

21. There are no environmental and climate change considerations arising from this report.

### **Risks that may arise if the proposed decision and related work is not taken**

22. The paper being presented does not require a decision to be made

### **Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks**

23. The paper being presented does not require a decision to be made.

### **Financial Implications**

24. There are no financial implications to this report. A Cabinet report will be submitted in January 2023 for the replacement of the GLA framework.

### **Legal Implications**

25. There are no legal implications associated with this report.

### **Workforce Implications**

26. There are no workforce implications associated with this report.

### **Options Considered**

27. The Director of Procurement and Commissioning is required to address the issues raised in the audit of the GLA tender as soon as reasonably practicable.

### **Conclusions**

28. It is recommended that the Audit and Governance Committee note the action taken following the internal audit of the GLA tender and the progress made.

**Helen Jones**

**Director of Procurement and Commissioning**

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**Appendices – None**

**Background Papers**

Audit Action Plan