



REPORT TO: MORAY INTEGRATION JOINT BOARD AUDIT,
PERFORMANCE AND RISK COMMITTEE ON 26 OCTOBER
2023

SUBJECT: UPDATE ON IMPROVEMENT PLAN FOR ADULT SOCIAL
CARE COMMISSIONING

BY: HEAD OF SERVICE / CHIEF SOCIAL WORK OFFICER

1. REASON FOR REPORT

1.1 To update the Committee of progress regarding the Improvement Plan for Adult Social Care Commissioning in line with the external review conducted by KPMG, finalised in February 2023 since the last Committee meeting on 31 August 2023.

2. RECOMMENDATION

2.1 It is recommended that the Audit, Performance and Risk Committee:

- i) considers and approves the updated Improvement Plan attached at Appendix 1; and**
- ii) notes the progress within this report as at the end of September 2023 in relation to the recommendations detailed in the improvement plan.**

3. BACKGROUND

3.1 An external review of the adult commissioning service was undertaken by KPMG and this was completed in February 2023 with a number of recommendations for improvement. These recommendations were approved by Moray Integration Joint Board (MIJB) Audit, Performance and Risk (APR) Committee on 30 March 2023 (para 11 of the minute refers). The Committee requested a quarterly update on progress.

3.2 At the MIJB APR Committee on 29 June 2023 (para 11 of the minute refers), the Committee approved an Improvement Plan for the service.

- 3.3 The Committee received an update regarding progress on 31 August 2023 (para 9 of the minute refers) with an agreement to receive an updated Improvement Plan at the next committee.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

Internal Improvement Action Plan Development

- 4.1 Since the meeting of the APR Committee on 31 August 2023, a detailed Improvement Action Plan has been developed, taking into consideration the KPMG findings and the Improvement Plan agreed at Committee.
- 4.2 This detailed Improvement Action Plan ensures that the recommendations are meaningful and can be measured and monitored to enable the reporting of progress to be made at each meeting cycle (see Appendix 1).
- 4.3 The Improvement Action Plan was collated throughout August 2023 and collaboration was sought with colleagues from Internal Audit, Community Care Finance, Procurement and Finance. This ensures collective understanding has been reached in agreeing the recommendations and the intended progress against these recommendations.

Areas of Progress

- 4.4 The Governance Structure that the Commissioning Team sits within is confirmed via the Terms of Reference (ToR) for the Managers Commissioning Meeting. This has raised the profile of commissioning activities with attendance increasing from operational colleagues and invitations to attend other governance meetings to confirm the role of this meeting being forthcoming. This ensures that the importance of good commissioning processes is shared with colleagues.
- 4.5 One of the important roles of the Commissioning Team is to ensure that colleagues within Health and Social Care Moray understand the direction of commissioning in Scotland. The action to undertake a presentation programme for colleagues has elevated in importance by incorporating a section about ensuring all contracts are current, appropriate and signed. Once the timeline has been agreed for the contracts, this will be added to the presentation and delivered to colleagues. This is a priority for the third quarter of the year.
- 4.6 The Commissioning Team have a clear current workload in respect of Contracting and Monitoring work. The individual responsibilities are managed through a weekly team meeting and recorded through a work tracker. This demonstrates progression and ensures accountability. Moreover, each member of the Commissioning Team is able to cover workload and tasks as required due to the cohesive nature that is nurtured within the team through these meetings.
- 4.7 A Commissioning Procedure has been completed and authorised with a review date for 6 months' time to ensure it is fit for purpose. This will be regularly discussed at the Commissioning Team Meeting. In order to underpin this Procedure, a number of process maps have been created to support Health and Social Care Moray in the commissioning and monitoring work that is undertaken. This supports the agreed process for pro-active and reactive

support and monitoring of providers that is detailed in recently completed contracts.

- 4.8 The progression of bringing out of date contracts into date continues at a good pace. Since the last Committee Meeting in August 2023 there has been one contract awarded and one contract is with the provider for signature. There are currently four contracts in the live competitive tender process with a further contract due to be published in the month of October. As described earlier in this report, it is a priority for quarter 3 of this year to agree a process and timeline for the remaining contracts.
- 4.9 The process of managing new pieces of commissioning work identified by gaps in the market has started to be addressed. The referral form that was created so that the commissioning team can allocate work now serves to populate a 'commissioning opportunity' register that is held within the Managers Commissioning Meeting. This will then be escalated through the Health and Social Care Moray governance structure as described in the ToR. Once this is embedded in practice, a process will underpin this that is linked into the Commissioning Procedure.
- 4.10 In order to support and ensure consistency, the commissioning and invoicing processes will introduce a quality check system. This is currently being explored and a pilot will be trialled for both processes.
- 4.11 A representative for the Commissioning Team attends and is an active member of the Strategic Planning and Commissioning Group. This is a quarterly meeting and provides a forum for the Commissioning Team to share national updates and initiatives as well as inform regarding progress against the work plan. Commissioning will become a standing item on the agenda in the form of a summarised update from the Managers Commissioning Meeting.
- 4.12 A Standard Operating Procedure has been completed regarding the invoicing and approval process and has been authorised by Health and Social Care Moray's Chief Financial Officer. This has served to address issues with variances (when a Care First Service Agreement does not match the invoice) and has detailed the process for an audit trail. Budget Managers have engaged in a workshop regarding their budgetary responsibilities with a second session booked for later in 2023.
- 4.13 The Contract Management Process within Commissioning has been strengthened considerably. The team report active monitoring activities on a weekly basis to the Collaborative Care Support Team Meeting. This has served to create closer links to the Care Inspectorate in order to maintain good quality service provision for the people of Moray who access commissioned services. Pro-active monitoring is detailed in all new contracts with standardised requirements as well as contract specific Key Performance Indicators. This includes Annual Contract Meetings and a six month Budget Meeting with every provider that is contracted through the commissioning team. The Budget Meeting is then reported to Chief Finance Officer as required.

Areas for Attention and Next Steps

- 4.14 The Improvement Plan demonstrates the progress that has been made regarding the KPMG recommendations. A significant amount of time has been

taken to ensure that the governance structure surrounding commissioning is operating effectively.

- 4.15 In the next reporting quarter, progress must be made on the delivery of the presentation as well as the process for ensuring the remaining contracts are current, appropriate and signed.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Partners in Care 2022 – 2032”

In order to fulfil the MIJB strategic aims, it is essential that services are operating with optimum efficiency to ensure the needs of the Moray population can be met, that services are fit for purpose and that processes and accountability is clear.

(b) Policy and Legal

The Chief Social Work Officer (CSWO)/Head of Service must ensure that services delegated by their work within the legal and policy framework related to commissioning and delivery of services.

(c) Financial implications

There are no financial implications arising from this report.

(d) Risk Implications and Mitigation

The Improvement Plan implements robust systems and processes in response to the KPMG reports and findings. Regular monitoring and reviewing of the Improvement Plan takes place to ensure actions are progressed. It is noted that the current resource of the team may mean that timescales and outcomes could be delayed. However any risk or emerging risk will be escalated to Committee as part of the regular reporting schedule.

(e) Staffing Implications

There are no staffing implications.

(f) Property

There are no property implications.

(g) Equalities/Socio Economic Impact

This report does not require an EIA.

(h) Climate Change and Biodiversity Impacts

None.

(i) Directions

None.

(j) Consultations

Chief Finance Officer
Procurement
Community Care Finance

Head of Service/CSWO
Service Manager, Children Families and Justice Services

6. CONCLUSION

6.1. The committee is requested to note this report and approve the updated Improvement Action Plan.

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Report Presented by: Lizette Van Zyl, Service Manager

Background Papers:

Ref: