East Lothian
Council

REPORT TO: Audit and Governance Committee

MEETING DATE: 22 January 2013

BY: Executive Director (Support Services)

SUBJECT: Internal Audit Report – Frameworki

1 PURPOSE

1.1 To inform the Audit and Governance Committee of the recently issued audit report on Frameworki.

2 RECOMMENDATION

2.1 That the Audit and Governance Committee note the contents of the Executive Summary and Action Plan for Frameworki.

3 BACKGROUND

3.1 A review of the Frameworki case management system used by Adult Wellbeing was undertaken as part of the audit plan for 2012/13.

3.2 The objective of the audit was to ensure that the internal controls in place in respect of Frameworki were operating effectively.

3.3 The main findings from our audit work are outlined in the attached report.

4 POLICY IMPLICATIONS

4.1 None

5 EQUALITIES IMPACT ASSESSMENT

5.1 This report is not applicable to the well being of equalities groups and Equality Impact Assessment is not required.

6   RESOURCE IMPLICATIONS

6.1   Financial - None

6.2   Personnel - None

6.3   Other - None

7   BACKGROUND PAPERS

7.1   None

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DATE	11 January 2013

EAST LOTHIAN COUNCIL – INTERNAL AUDIT
Frameworki

1.   EXECUTIVE SUMMARY

1.1   Introduction

As part of the Audit Plan for 2012/13, a review was undertaken of the internal controls surrounding the Frameworki case management system used by Adult Wellbeing. A summary of our main findings is outlined below.

1.2   Areas where Expected Controls were Met

- An adequate audit trail of client records exists within the Frameworki case management system.
- Records are maintained of users who have received training on the Frameworki case management system.

1.3   Areas with Scope for Improvement

- There is a lack of adequate procedures in place to ensure that data quality checks are performed at the initial referral stage when data is input to Frameworki. *Risk – inaccurate or incomplete information.*
- The existing practice for recording the completion of adaptation requests on Frameworki requires review. *Risk – information recorded on Frameworki may be misleading.*
- There is a lack of procedures in place to ensure that Frameworki access rights are removed for staff changing jobs within the Council. *Risk – inappropriate access to Frameworki.*
- The current level of access to Frameworki for non-Adult Wellbeing staff requires review. *Risk – access levels may be inappropriate for the specific roles and tasks being undertaken.*
- In some cases, there were delays in ensuring that case files are promptly closed following notification of death being received. *Risk – information held may be inaccurate.*
- The existing access arrangements in place for the use of Frameworki by external users require review. *Risk – lack of an effective audit trail.*

1.4   Summary

Our review of the internal controls surrounding the Frameworki system identified a number of areas with scope for improvement. Detailed recommendations and opportunities for improvement are contained in our main Audit Report.

Mala Garden
Internal Audit Manager   **January 2013**

ACTION PLAN

PARA REF	RECOMMENDATION	RESPONSIBLE OFFICER	AGREED ACTION	RISK ACCEPTED/ MANAGED	AGREED DATE OF COMPLETION
3.1.1	Management should review the guidance documentation in place to ensure that it accurately reflects the procedures to be followed when using Frameworki.	Information Systems Manager	Agreed		September 2013
3.2.1	Management should review the appropriateness of access levels currently given to non-Adult Wellbeing users of Frameworki.	Information Systems Manager	Agreed		April 2013
3.2.2	Procedures should be put in place to ensure that the Information Systems Team are informed of internal staff changes to enable access rights to be removed.	Information Systems Manager	Agreed		April 2013
3.2.3	Procedures should be established to ensure that access to Frameworki by external users is properly monitored and controlled. Procedures should be established to ensure that the Information Systems Team are informed of all changes to ESWS staff.	Information Systems Manager	Agreed		June 2013

PARA REF	RECOMMENDATION	RESPONSIBLE OFFICER	AGREED ACTION	RISK ACCEPTED/ MANAGED	AGREED DATE OF COMPLETION
3.3.1	Management should review the possibility of incorporating a system prompt within Frameworki to highlight the importance of data confidentiality.	Information Systems Manager	Agreed		June 2013
3.4.1	Procedures should be established to ensure that data quality checks are performed at the initial referral stage when data is input to Frameworki.	Contact Centre Manager	Agreed		June 2013
3.6.1	Management should ensure that the existing Frameworki procedures in place are followed when a service user dies or is admitted to hospital.	Information Systems Manager	Agreed		February 2013
3.6.2	Management should review the existing practice in respect of adaptations to ensure that Frameworki accurately records when adaptations are complete.	Information Systems Manager	Agreed		June 2013