Internal Audit of AIS Care Assessments 2014/15A

Annex A

Audit	Background to review	Key findings	Audit opinion (1)	Recommendations for improvement (Priority) (2)
AIS Care Assessments	The council provides residents with access to social care advice, assessment and local support. There are a number of ways in which a resident with potential social care needs can be brought to the attention of the council including a self- referral; a referral from a carer, friend or family member; or from a professional such as a GP. Once the council is aware that the resident may have needs, it has a duty to provide an assessment. Adults Information System (AIS) is the software used by the council to manage adult social care. The system records service users' needs assessments; care packages; and, provides management information.	Inconsistencies exist between guidance documents The quality of information recording varies across the Locality Teams. Exception reporting identifies some data recording omissions; however, the report format is inconsistent across the IQ Team. Furthermore, no clear process or deadlines for error correction exists. AIS has inherent system limitations including the absence of forced entry field functionality; management or caseload reporting; and limited hazard flagging capability. Audit testing identified that 34% of individuals do not have a care review planned. A third of individuals do not have progress recorded against outcomes.	Significant Improvement Needed	Guidance notes should be refreshed and consolidated to ensure information is both consistent and up to date. (M) The service should agree specific timescales for data error corrections. (M) The service must review the essential information fields in light of service wide impact and previous audit recommendations. (H) The service must ensure that information collected is appropriately recorded. All consents to share information must be recorded under the appropriate tab in AIS including refusal to provide consent. (M) The service should review AIS records to ensure all cases have an appropriate review date. Team Managers should conduct periodic checks on the review status of service users. (M)

Audit	Background to review	Key findings	Audit opinion (1)	Recommendations for improvement (Priority) (2)
AIS Care Assessments cont'd		The majority of fields in AIS default to "no" or "unknown" it is difficult to assess if an officer has actively selected "no" or whether the system has defaulted to this entry. .	Significant Improvement Needed	The service should ensure that the recording of progress against an individual's target outcomes is evident in their records. (M) Management should consider arranging refresher training on the specifics of AIS recording. (M) The service should explore the capacity for the system to hold responses of 'undisclosed' this would clarify that the individuals were asked the relevant question and have actively responded by refusing to share the information. (L)