Argyll and Bute Council

Internal Audit Report

February 2019

Final

CareFirst

Audit Opinion: Reasonable

	High	Medium	Low
Number of Findings	0	8	3

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Contents

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1. Executive Summary

Introduction

1. As part of the 2018/19 internal audit plan, approved by the Audit & Scrutiny Committee in March 2018, we have undertaken an audit of Argyll and Bute Council's (the Council) system of internal control and governance in relation to the CareFirst system.

2. The audit was conducted in accordance with the Public Sector Internal Audit Standards (PSIAS) with our conclusions based on discussions with council officers and the information available at the time the fieldwork was performed.

3. The contents of this report have been agreed with the appropriate council officers to confirm factual accuracy and appreciation is due for the cooperation and assistance received from all officers over the course of the audit.

Background

4. CareFirst is a web based, case management system comprising a suite of integrated modules covering the full spectrum of children and adult services client groups. It is commonly used by local authorities for recording care arrangements, statutory interventions and related events pertaining to social care service users. The Council has used CareFirst since 2000.

5. The Argyll & Bute Health & Social Care Partnership (HSCP) has a strategic objective to adopt CareFirst as a single community IT system to electronically capture and share information between social work and community-based health nursing staff to support integrated working. To support this a project is underway to deliver CareFirst to community based health staff in two stages. The first, scheduled for completion by 31 March 2019, will provide CareFirst access to approximately 300 health staff. The second will deliver CareFirst to other community based health staff not currently using an information system.

6. CareFirst's supplier, OLM, is introducing a system called Eclipse to replace CareFirst. The HSCP are not intending to replace CareFirst with Eclipse during 2018/19 however there is a desire to embark on a programme of replacement in the future.

Scope

7. The scope of the audit was to review the governance and procedures in relation to CareFirst to support the delivery of the HSCP's strategic objective of adopting a single community IT system as outlined in the Terms of Reference issued to the HSCP Head of Strategic Planning and Performance on 21 November 2018 and agreed by the HSCP Information and Projects Manager on the 27 November 2018.

Risks

8. The risks considered throughout the audit were:

- **SRR07: Health and Social Care Partnership -** Failure to deliver strategic objectives and integrate health and social care services in an efficient and effective manner exposes the Council, as a key partner, to unacceptable financial and reputational risk.
- **SRR11: Service Delivery - Cyber Security -** Unable to deliver services to customers because of failure of ICT systems following major cyber security breach.

- **Audit Risk 1:** Reputational damage to the Council due to a failure to hold client records securely.
- **Audit Risk 2:** Negative impact on service delivery due to a failure to maintain client records in a timely and accurate manner.

Audit Opinion

9. We provide an overall audit opinion for all the audits we conduct. This is based on our judgement on the level of assurance which we can take over the established internal controls, governance and management of risk as evidenced by our audit work. Full details of the five possible categories of audit opinion is provided in Appendix 2 to this report.

10. Our overall audit opinion for this audit is that we can take a reasonable level of assurance. This means that internal control, governance and the management of risk are broadly reliable. However, whilst not displaying a general trend, there are a number of areas of concern which have been identified where elements of residual risk or weakness may put some of the system objectives at risk.

Key Findings

11. We have highlighted eight medium priority and three low priority recommendations where we believe there is scope to strengthen the control and governance environment. These are summarised below:

- the CareFirst roles and responsibilities procedural document should be updated to reflect the adoption of CareFirst by health staff in March 2019
- consideration should be given to whether existing social work record management procedures are appropriate for health staff or whether specific health procedures are required
- staff should be reminded that client records should only be maintained in CareFirst and of the risk associated with keeping manual records or saving them on the Council's network drives
- a policy/procedure document should be established which outlines roles and responsibilities for managing CareFirst records
- CareFirst password controls should be strengthened
- CareFirst new user requests should be subject to appropriate authorisation
- procedures for managing CareFirst access should be strengthened to ensure access rights are commensurate to job roles and inactive accounts are suspended timeously
- consideration should be given to alternative methods to deliver CareFirst training to health staff and how procedural documents can be shared with health staff
- recurring errors identified by the CareFirst support team during case file reviews should be used to identify training needs
- the annual CareFirst enterprise licence fee should be apportioned between the Council and NHS Highland
- an assessment should be made of the capacity of the CareFirst team to support the increasing the number of CareFirst users.

12. Full details of the audit findings, recommendations and management responses can be found in Section 3 of this report and in the action plan at Appendix 1.

2. Objectives and Summary Assessment

13. Exhibit 1 sets out the control objectives identified during the planning phase of the audit and our assessment against each objective.

Exhibit 1 – Summary Assessment of Control Objectives

	Control Objective	Link to Risk	Assessment	Summary Conclusion
1	Personal and sensitive data is maintained and held securely and in accordance with GDPR requirements.	SRR11 Audit Risk 1 Audit Risk 2	Reasonable	Procedures are in place to ensure client records on CareFirst are maintained however they need revised to ensure they reflect health staff who will be adopting CareFirst in March 2019. The Council has a Records Management Plan which sets out requirements for archiving and destruction of records based on legislative requirements and guidance provided by the Scottish Council on Archived Record Retention Schedules. However there is no formal policy, for relevant Council officers and NHS Highland staff, which details the roles, responsibilities and procedures for the archiving, closing and destruction of CareFirst records.
2	CareFirst access is restricted to ensure service user and provider data is only accessible to appropriate officers.	SRR07 SRR11 Audit Risk 1	Reasonable	Access to CareFirst is password protected with this enhanced by the need for a user to first access the Council network before logging into CareFirst. Access rights are established by existing security groups aligned to job roles however there are a number of areas where logical access controls could be strengthened including ensuring user access levels are commensurate to their responsibilities and the management of inactive user accounts.
3	Appropriate data security has been established including backups, contingency planning and disaster recovery.	SRR11	Reasonable	Appropriate procedures are in place to ensure CareFirst data is secure and backed up on a regular basis. A CareFirst Disaster Recovery Plan is currently in draft form and requires to be finalised and the social work Critical Activity Recovery Plan requires to be updated to reflect changes in staffing.
4	CareFirst training has been provided	Audit Risk 1 Audit Risk 2	Reasonable	CareFirst training and support is provided by the CareFirst support team. A training plan for NHS Highland staff, in advance of

	Control Objective	Link to Risk	Assessment	Summary Conclusion
	to all relevant staff.			them adopting CareFirst in March 2019, has been produced however, due to the numbers requiring training and a lack of available resource to deliver sessions it is not anticipated that classroom training sessions will be run. A SharePoint site has been created which includes guidance documents however Council security settings mean health staff cannot access the site. Alternative arrangements are currently being considered.

14. Further details of our conclusions against each control objective can be found in Section 3 of this report.

3. Detailed Findings

Personal and sensitive data is maintained and held securely and in accordance with GDPR requirements.

15. The Council, as data controller and as required by the Data Protection Act 2018 (DPA), is registered with the Information Commissioner's Office (ICO).

16. CareFirst user roles and responsibilities are detailed in a document called 'Roles and Responsibilities' which is available on the Community Services SharePoint site. It hasn't been reviewed for three years and will require updating to reflect the roles and responsibilities of the health users adopting CareFirst in March 2019.

Action Plan 1

17. The Case Recording procedure note to ensure social work staff maintain client records accurately is available on the social work SharePoint site. From March 2019 health staff will access and update client records within CareFirst. Consideration should be given to whether the existing social work procedures are appropriate for health staff or whether specific health procedures will need to be created.

Action Plan 2

18. There is a process for client case file review which relies on the CareFirst support team who are key to ensuring that the client case files are accurately recorded with no missing or duplicate information. Daily reports are run which are used to correct errors, fill in gaps and identify where records are not up to date. In addition, where time allows, "caseload tidies" are performed by CareFirst support staff working with practitioners. Action taken to correct issues is logged however resource constraints have prevented the team being able to identify recurring errors which may highlight training needs.

Action Plan 9

19. In a 2012/13 internal audit report we highlighted that social work client records were being filed in multiple locations including the Council's network drive and paper records instead of just

being recorded on CareFirst. During this audit we obtained corroborated verbal evidence this is still occurring.

Action Plan 3

20. The Public Records (Scotland) Act 2011 requires every public authority in Scotland to prepare and follow a Records Management Plan (RMP). The Council has a RMP which is available on the HUB. Archiving and destruction of social work client records is based on legislative requirements and guidance provided by the Scottish Council on Archived Record Retention Schedules. The social work information asset register refers to document owners and users and provides information on the retention periods and destruction of records. However there is no formal policy, for relevant Council officers and NHS Highland staff, which details the roles, responsibilities and procedures for the archiving, closing and destruction of CareFirst records.

Action Plan 4

21. A protocol for sharing information between the Council and NHS Highland exists. It is currently being reviewed and updated to reflect changes within the HSCP and General Data Protection Regulation (GDPR). The protocol is based on the requirements of the DPA and GDPR and is available for all health and social work staff to view.

22. A Data Protection Impact Assessment (DPIA) must be carried out whenever you are implementing or making a change to a process or system where those changes could impact upon the privacy of individuals in relation to data protection. A draft DPIA for the single community IT System (CareFirst) was available to review and is in the process of being finalised.

23. The Council pay an annual CareFirst 'enterprise licence' fee of £92,000 which allows an unlimited number of users to access the system. There are currently 556 CareFirst users with this projected to double with the introduction of health staff in 2019. The enterprise licence is due for renewal in March 2019 and there is an expectation it will increase. NHS Highland pay support and maintenance costs of around £44,000 per year for their current arrangement. Adopting CareFirst has allowed NHS Highland to identify this £44,000 as a recurring saving. Consideration should be given to asking NHS Highland to contribute towards the annual CareFirst license fee.

Action Plan 10

CareFirst access is restricted to ensure service user and provider data is only accessible to appropriate officers

24. To access CareFirst a user must first log on to the Council network before logging on to CareFirst. Both logon processes are password protected however CareFirst passwords do not require to be changed on a regular basis and a user can make an unlimited attempts to access CareFirst using an incorrect password.

Action Plan 5

25. CareFirst access rights are governed by allocating users to established Security User Groups which are aligned to job roles. Staff are required to complete a 'new user form' to request CareFirst access however there is no requirement for this to be authorised by a line manager.

Action Plan 6

26. Health staff are required to complete a Council Acceptable Use Policy (AUP) form to gain access to the Council network. Thereafter they will be required to complete a CareFirst user access

form. During the audit we identified that the AUP did not make reference to health staff. This needed immediate correction as the process for health staff completing the forms had commenced. The Council's IT department were informed and the AUP has been updated.

27. A procedure has been established to ensure health staff only have CareFirst access commensurate to social work roles as it is proposed to align health staff roles to the existing social work roles outlined in the CareFirst 'Roles and Responsibilities' document. However it is not always possible to match health roles to social work roles. Furthermore user access rights and permissions are not reviewed on a regular basis to ensure they are still commensurate to their current job role and there is no procedure to notify CareFirst support staff when an officer changes roles or moves to another department. Procedures are in place to ensure system administrators are notified when an officer leaves the Council. This allows the CareFirst support staff to remove the leaver's CareFirst access rights. In addition, CareFirst support staff run monthly reports to identify inactive accounts. If an officer has not logged in to CareFirst for a period of six months their account is suspended. Consideration should be given to reducing this to three months.

Action Plan 7

28. There are currently four members of the CareFirst support team who are responsible for setting up, amending and deleting CareFirst users. The number of CareFirst users is projected to double during 2019 with a temporary member of staff being appointed to assist this process. There has been no consideration given to whether the CareFirst support team will require additional resource on a longer term basis.

Action Plan 11

Appropriate data security has been established including backups, contingency planning and disaster recovery

29. CareFirst is backed up to a server on a daily basis by the Council's IT department. There is an Oracle Database Backup and Recovery Strategy (Draft) being produced which incorporates CareFirst. The strategy establishes that, biannually, the ICT department will perform a disaster recovery test on two key applications, one of which may include the CareFirst application. Internal Audit are scheduled to perform an audit of business continuity planning in 2019/20.

30. A CareFirst Disaster Recovery Plan is currently in draft form. This document outlines the backup procedures in place. Social work have a Critical Activity Recovery Plan (CARP) which makes reference to CareFirst however it makes reference to officers who are no longer employed by the Council. Internal Audit are scheduled to perform an audit of business continuity planning in 2019/20. This issue will be further explored during that audit. No issue has been raised in this report.

CareFirst training has been provided to all relevant staff

31. CareFirst training and support is provided by the CareFirst support team. There is a log of staff support and training maintained. In addition there is a suite of procedural manuals stored on the social work SharePoint site which officers can view at any time.

32. A procedure has been considered to provide training to NHS Highland staff in advance of them starting to use CareFirst in March 2019 and a draft training plan has been produced. Due to the numbers requiring training within a short time frame and lack of available resource to deliver sessions it is not anticipated that classroom training sessions will be run. A SharePoint site has

been created which includes guidance documents. However, due to Council security settings, health staff cannot access this site. Alternative arrangements are currently being considered.

Action Plan 8

Appendix 1 – Action Plan

Medium	1	**CareFirst Roles and Responsibilities** CareFirst user roles and responsibilities are formally defined in a 'Roles and Responsibilities' document which has not been updated for three years. It should be revised to reflect the roles and responsibilities of the health users adopting CareFirst in 2019.	Staff may be unclear of their roles and responsibilities in terms of accessing and updating CareFirst.	An update of the Roles and Responsibilities document will be completed through the CareFirst User /Steering Group that will be implemented after 31 March 2019.	Information & Projects Manager/System Support Officer 30 June 2019
Medium	2	**Record Management Procedures** There are procedures for social work staff to follow to ensure client records in CareFirst are properly maintained and updated. From March 2019, health staff will access and update client records within CareFirst. Consideration should be given to whether the existing social work procedures are appropriate for health staff or whether specific health procedures will need to be created.	CareFirst client records may not be maintained appropriately.	An update of separate procedures, in particular the use of the CareFirst 'Observations' screen will be completed through the Carefirst User/Steering Group that will be implemented after 31 March 2019	Information & Projects Manager/System Support Officer 30 June 2019
Medium	3	**Storage of Client Records** Some social work client records are being filed in multiple locations including the Council's network drive and paper records. All client information should be recorded in CareFirst and CareFirst only.	Increased risk of information security breaches.	All staff will be advised of correct procedure by their appropriate manager. This applies to NHS and Social Work recording.	Information & Projects Manager/System Support Officer to facilitate 1 April 2019

Medium	4	**Procedures for Managing CareFirst Records** The social work information asset register refers to document owners and users and provides information on retention periods and record destruction. However there is no formal document which details the roles, responsibilities and procedures for the archiving, closing and destruction of CareFirst records.	The Council may not comply with GDPR requirements which could result in financial penalties.	We will agree a File Retention Policy which applies to all records, including paper and electronic and not just CareFirst records. Noting current differences in retention policies between NHS and Council and within NHS.	Information & Projects Manager/System Support Officer to facilitate in conjunction with A&B Council and NHS administrative staff 1 April 2020
Medium	5	**CareFirst Password Security** CareFirst passwords do not require to be changed on a regular basis and a user can make an unlimited number of attempts to gain access to CareFirst using an incorrect password.	Users may be granted inappropriate access to CareFirst and the data records stored within it.	We will agree requirements with IT and agree on a position as to whether password validation, number of password fails locking out and password expiry are required. These will be implemented by the IT Departments across both Local Authority and NHS Highland.	Information & Projects Manager, System Support Officer and A&B Council IT Department 1 April 2019
Medium	6	**Authorisation of CareFirst Access Requests** Staff are required to complete a 'new user form' to request CareFirst access however there is no requirement for this to be authorised by a line manager.	Users may be granted inappropriate access to CareFirst and the data records stored within it.	CareFirst Project Board to determine the level of authorisation that is required.	Information & Projects Manager, System Support Officer and Project Board to confirm 1 April 2019

Medium	7	**Managing Access to CareFirst** Our review of arrangements for managing access to the CareFirst system identified a number of areas which could be strengthened. In particular: • A procedure has been established to ensure health staff only have CareFirst access commensurate to social work roles and it is proposed to align health staff roles to the existing social work roles. However this may not be possible as there have been issues identified whereby certain health roles cannot be aligned to existing social work roles. • CareFirst user access rights and permissions are not reviewed on a regular basis to ensure they are still commensurate to their current job role and there is no procedure to notify CareFirst support staff when an officer changes roles or moves to another department. • If a user has not logged in to CareFirst for a period of six months their account is suspended. Consideration should be given to reducing this to three months.	Users may have inappropriate access to sensitive client files stored in CareFirst.	NHS members of staff who cannot be aligned to a role as defined in the revised Roles and Responsibilities (see Action Point 1 above) will not be given access to CareFirst. The Carefirst User/Steering Group will develop a procedure for checking user access levels. Inactive account suspension will be reduced to three months.	Information & Projects Manager and System Support Officer 30 June 2019 30 June 2019 1 April 2019

Medium	8	**CareFirst Training** A procedure been considered to provide training to NHS Highland staff in advance of them starting to use CareFirst in March 2019 and a draft training plan has been produced. Due to the numbers requiring training within a short time frame and a lack of available resource to it is not anticipated that classroom training sessions will be run. A SharePoint site has been created which includes guidance documents however health staff cannot access this site and alternative arrangements are currently being considered.	Failure to provide sufficient training to staff increases the risk of errors and omissions when processing client records.	User guide and a comprehensive suite of flowcharts have been created and posted on the NHS Intranet. Work is ongoing to compile basic e-learning modules. An IT trainer has been identified as a resource available to the project and there are a planned series of "roadshows" to demonstrate CareFirst to NHS staff as well as identifying superusers who can cascade out further training as required**.**	Information & Projects Manager, IT Trainer (Health) & System Support Officer 1 April 2019
Low	9	**Identifying Training Needs** There is a process for client case file review whereby the CareFirst support team run daily reports to help identify and correct errors in client records. Corrective action to correct issues is logged however, due to resource constraints, the support team have not been able to review this to identify recurring errors which may highlight training needs.	Case file maintenance might not be being conducted in the most efficient manner.	The Carefirst User/Steering Group will revise key team performance indicators to include identification of potential additional training requirement.	System Support Officer 1 April 2019

Low	10	**CareFirst License Fee** The annual CareFirst licence fee of £92,000 is due for renewal in March 2019 with an expectation it will increase. Given that approximately 500 NHS Highland employees will be using CareFirst in 2019, and that NHS Highland have identified recurring savings of approximately £44,000 per annum by adopting CareFirst, consideration should be given to asking NHS Highland to contribute towards the annual license.	The Council may not get the full benefit of the partnership working arrangement.	The increase in users across CareFirst will be considered as part of the wider Planning & Performance Senior Management Team meetings and budget review process.	Senior Performance & Improvement Manager and senior management team. , 30 June 2019
Low	11	**CareFirst Support** The number of CareFirst users is projected to double during 2019 with a temporary member of staff being appointed to assist the CareFirst support team with this process. There has been no consideration given to whether the CareFirst support team will require additional resource on a longer term basis.	The CareFirst support team may not be able to cope with the support requirements of the expanded user base.	A process to monitor the work load of the support team over the next six months will be implemented. Following this a business case will be compiled and presented to the HSCP Senior Management Team on the possible need to increase capacity, particularly with additional NHS users anticipated.	Information & Projects Manager 30 September 2019

In order to assist management in using our reports a system of grading audit findings has been adopted to allow the significance of findings to be ascertained. The definitions of each classification are as follows:

Grading	Definition
High	A major observation on high level controls and other important internal controls or a significant matter relating to the critical success of the objectives of the system. The weakness may therefore give rise to loss or error.
Medium	Observations on less significant internal controls and/or improvements to the efficiency and effectiveness of controls which will assist in meeting the objectives of the system. The weakness is not necessarily substantial however the risk of error would be significantly reduced if corrective action was taken.
Low	Minor recommendations to improve the efficiency and effectiveness of controls or an isolated issue subsequently corrected. The weakness does not appear to significantly affect the ability of the system to meet its objectives.

Appendix 2 – Audit Opinion

Level of Assurance	Definition
High	Internal control, governance and the management of risk are at a high standard. Only marginal elements of residual risk have been identified with these either being accepted or dealt with. A sound system of control designed to achieve the system objectives is in place and being applied consistently.
Substantial	Internal control, governance and the management of risk is sound. However, there are minor areas of weakness which put some system objectives at risk and specific elements of residual risk that are slightly above an acceptable level and need to be addressed within a reasonable timescale.
Reasonable	Internal control, governance and the management of risk are broadly reliable. However, whilst not displaying a general trend, there are a number of areas of concern which have been identified where elements of residual risk or weakness may put some of the system objectives at risk.
Limited	Internal control, governance and the management of risk are displaying a general trend of unacceptable residual risk above an acceptable level and placing system objectives are at risk. Weakness must be addressed with a reasonable timescale with management allocating appropriate resources to the issues raised.
No Assurance	Internal control, governance and the management of risk is poor. Significant residual risk and/or significant non-compliance with basic controls exists leaving the system open to error, loss or abuse. Residual risk must be addressed immediately with management allocating appropriate resources to the issues.