

<b>Report to:</b>	<b>Audit Committee</b>
<b>Date of meeting:</b>	<b>21 November 2025</b>
<b>By:</b>	<b>Director of Adult Social Care and Health</b>
<b>Title:</b>	<b>Response to Internal Audit Report and Actions - Home Care Contract Management</b>
<b>Purpose:</b>	<b>Audit Committee is asked to note the proposals and actions to respond to the Home Care Contract Management Audit</b>

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**RECOMMENDATION:** Audit Committee is recommended to note the actions within the report.

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## **1. Background**

1.1 The Home Care Contract Management Internal Audit Report was completed in March 2025. The audit opinion provided was partial assurance, with the report detailing one high-risk finding and 2 medium-risk findings.

1.2 The Audit report rates Provider Data Integrity as a Red Risk, concluding that where reliance cannot be placed on the accuracy of the data required in order to make accurate and timely payments to providers, and bill clients for their contributions, there is an increased risk of overpayments occurring resulting in financial loss to the Council and/or clients not receiving the care commissioned, resulting in reputational damage.

1.3 Payments are made to Home Care providers for the activity they undertake or commit (roster) to undertake, under contract with East Sussex County Council (ESCC), based on data they submit via the Visits Module. The data relates to the visits that Home Care providers have undertaken to support individuals in their own homes and equates to approximately 150,000 lines of data for every 4-week period.

1.4 The Home Care Contract Management audit found that the Visits module data *‘exhibits data integrity issues’ and that the ‘Visits Module does not currently have the functionality to support payment to providers on a rostered basis, and that due to development restrictions communicated by the software provider, it has been necessary for the service to develop a number of manual workarounds. However, due to the significance of the associated risks stemming from the functionality and manual workarounds, data integrity, overpayment, and oversight have been raised as findings in the report and have been considered when forming our opinion.’*

1.5 The data that feeds the Visits Module is provided from the Electronic Call Monitoring System, or eCMS, and rostering systems that the provider uses. Providers record their home care visits data for their private and local authority customers on their eCMS system.

1.6 The Adult Social Care and Health (ASCH) Department was aware of the data integrity issues prior to the audit and had been working to address these. For example, options appraisals had been undertaken, including identifying whether any other suitable alternative systems are available on the market and the option of building an in-house system. There are currently no suitable alternative systems on the market and building an in-house system is cost prohibitive, not least because it would require external ICT consultants to build such a system.

## **2. Supporting Information**

2.1 The ASCH Departmental Management Team has considered the findings and recommendations of the audit. A number of actions are in-train to address the risks identified in the 2 medium risk areas, including development of a contract management plan for home care.

2.2 A clear set of actions were agreed by the Department team in relation to the high-risk data integrity audit findings.

2.3 An audit of eCMS suppliers has been completed to establish their compliance across the 4 data fields identified in the Homecare Audit, these being:

- Edited data – to evidence where data has been changed from that recorded by the eCMS
- Visit type – to code the visit type e.g. delivered, cancelled
- Time stamp – to provide the precise start and end time of a call to the second as a 6-digit time stamp
- Multiple contracts – to highlight where there are multiple service levels associated with one person

2.4 The development of a robust and comprehensive reporting structure set out at Appendix 1, supported by a dashboard, to enable responsive mitigating action with regard to data issues identified.

2.5 Longer term, the payment methodology for Home Care will be reviewed as part of the recommissioning of the contract. This work will commence in 2026.

## **3 Conclusion and recommendations**

3.1 Clear actions have been identified to mitigate the risks identified in the audit. The ASCH Department will monitor and ensure delivery of these actions and Internal Audit will review their effectiveness.

3.2 It is therefore recommended that Audit Committee note the action within this report and commitment by the department to undertake all possible actions to manage the risks identified within the report.

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## **BACKGROUND DOCUMENTS**

None