

**Committee Name and Date of Committee Meeting:**

Audit Committee – 26th November 2019

**Report title:**

External inspections, reviews and audits update

**Is this a Key Decision and has it been included in the Forward Plan?**

No

**Strategic Director Approving Submission of the Report:**

Shokat Lal – Assistant Chief Executive

**Report Author(s):**

Tanya Palmowski, Corporate Performance Officer

Simon Dennis, Corporate Risk Manager

**Ward(s) Affected:**

All

**Report Summary:**

In line with the Audit Committee terms of reference, the purpose of this report is to provide details of recent and current external inspections, reviews and audits.

The report provides a summary of progress against recommendations from across all key external inspections, reviews and audits and sets out the details of arrangements that are in place regarding the accountability and governance for implementing these.

**Recommendations:**

That Audit Committee:

- Notes the governance arrangements that are currently in place for monitoring and managing the recommendations from external inspections, reviews and audits
- Continues to receive regular reports in relation to external inspections, reviews and audits and progress made in implementing recommendations.

**List of Appendices Included:**

None

**Background Papers**

External audit and inspection recommendations report to Audit Committee on 18<sup>th</sup> June 2019.

**Consideration by any other Council Committee, Scrutiny or Advisory Panel**

None

**Council Approval Required**

No

**Exempt from the Press and Public**

No

## **External audits, inspections and reviews update**

### **1. Background**

- 1.1 In line with the Audit Committee terms of reference, the purpose of this report is to provide details of recent and current external inspections, reviews and audits both corporate and those relating to other functions of the Council.
- 1.2 External inspection, review and audit activity was previously reported to Audit Committee by Children and Young People's Services, however responsibility transferred to the Corporate Performance, Intelligence and Improvement Service in April 2019.
- 1.3 The last report was presented to Audit Committee on 18<sup>th</sup> June 2019. The report referred to 28 recommendations from 9 external inspections, reviews and audits. At the time of the report 17 recommendations had been implemented and 11 recommendations were outstanding.

### **2. Key issues**

- 2.1 This report provides an overview of key areas of concern relating to external inspections, reviews and audits, including action taken/to be taken and the governance arrangements to provide Audit Committee with assurance that appropriate arrangements are in place for responding, in line with Audit Committee's responsibilities.
- 2.2 Since 18<sup>th</sup> June 2019 eight external inspections, reviews and audits have taken place and 11 recommendations made.
- 2.3 In relation to external inspections, reviews and audits that took place prior to June 2019, five recommendations have been implemented since the last report and six remain ongoing.

### **3. Children and Young People's Services**

- 3.1 Two formal external inspections/reviews have taken place since the last report and no recommendations have been made. These include Liberty House Ofsted inspection and the Troubled Families Programme Payment by Results claims validation process. Further details are provided below.
- 3.2 In relation to external inspections, reviews and audits that took place prior to June 2019, four recommendations have been implemented since the last report and three remain outstanding.
- 3.3 The four recommendations implemented since the last report relate to the previous Children's Services Inspection conducted by Ofsted in November 2017. Significant progress had been made and all recommendations have now been fully implemented and formally signed off at the CYPS Performance Board on the 23<sup>rd</sup> October 2019.
- 3.4 The three outstanding recommendations relate to the Ofsted Focused Visit - focus on permanence planning and achieving permanence conducted in

March 2019. Progress against the recommendations is managed in the CYPS Improvement Plan and overseen by the CYPS Performance Board. Progress will be discussed with Ofsted at the Annual Conversation on the 6<sup>th</sup> November 2019.

### **3.5 Liberty House Ofsted inspection**

3.5.1 Liberty House is for daytime or overnight residential stays for young people aged 8-18 years who have a severe physical or learning disability and/or sensory impairment.

3.5.2 An inspection took place on 23<sup>rd</sup> and 24<sup>th</sup> October 2019 and although the final report has not yet been received, initial feedback indicated that the home has successfully improved in all areas.

3.5.3 A further update will be available once the final report is published.

### **3.6 Troubled Families Programme Payment by Results claims validation process**

3.6.1 The Ministry of Housing, Communications and Local Government conducts a validation process of claims to ensure they are compliant with the terms of the programme's financial framework, which is known as the 'spot check' process.

3.6.2 The 'spot check' was conducted in July 2019. Feedback was positive and signed off the Council's processes for making Payment by Result Claims.

3.6.3 There are no recommendations in relation to the 'spot check'.

3.6.4 A regional lead from the Ministry of Housing, Communications and Local Government also conducted an informal visit in June 2019. Feedback was positive and areas for improvement have been embedded within the CYPS Improvement Plan.

## **4. Adult Care and Housing**

4.1 Two formal external inspections/reviews have taken place since the last report and no recommendations have been made. These include Lord Hardy Court and the Public Health Peer Review. Further details are provided below.

4.2 In relation to external inspections, reviews and audits that took place prior to June 2019, one recommendation has been implemented since the last report and two remain outstanding.

4.3 The recommendation implemented since the last report is in relation to the previous inspection of Lord Hardy Court, see update below.

4.4 The two outstanding recommendations relate to:

- CQC inspection of Parkhill Lodge and the medium-term plan to look for alternative premises

- Fire Risk Assessments of Housings Hampstead Green, Doncaster Road and Eastwood View flats by South Yorkshire Fire and Rescue Service a Fire Risk Assessment Audit. Work to expand the alarm system, reconfiguring the sounders and installing a sprinkler system at Hampstead Green flats has been delayed due to agreeing the design and will now commence in November 2019 and be completed by December 2019.

#### **4.5 Lord Hardy Court**

4.5.1 Lord Hardy Court was re-inspected by CQC in July 2019 and retained its status as a “Good” service. The provision is rated “Good” across all 5 domains.

4.5.2 The recommendation in relation to Lord Hardy Court having no structured activities programme or dedicated activity staff in the last CQC report has now been satisfied. Staff and voluntary groups are running interactive group and one-to-one activities and using external entertainers.

4.5.3 There are no outstanding recommendations.

#### **4.6 Public Health Peer Review**

4.6.1 The peer review conducted on 15<sup>th</sup> and 16<sup>th</sup> October 2019 was based on a tool developed by the Yorkshire and Humber Directors of Public Health which aligns with the Public Health England Public Health Knowledge and Skills Framework (2016).

4.6.2 Feedback from the visit was extremely positive and there were no recommendations.

### **5. Regeneration and Environment Services**

5.1 Three formal external inspections/reviews have taken place since the last report and nine recommendations have been made. These include DVLA audit - review of enquiries to Keeper at Date of Event, (KADOE), AA Inspection of Waleswood Caravan and Camping Park and Library Services Peer Review. The 9 recommendations relate to the Library Peer review. Further details are provided below.

5.2 In relation to external inspections, reviews and audits that took place prior to June 2019, there is one recommendation outstanding. This relates to the ground source heat/cooling system at Riverside House which was inspected by the Environment Agency in January 2017. The recommendation was for a new volume meter to be installed if there are any future upgrades to the system. When an upgrade or replacement becomes due then this recommendation will be considered.

### **5.3 DVLA audit - review of enquiries to Keeper at Date of Event, (KADOE)**

5.3.1 The purpose of the audit conducted by the DVLA was to confirm the reason for each vehicle keeper request made by the enforcement service, identify what evidence was available to support these requests and to see how the vehicle keeper data had been used.

5.3.2 The audit was carried out in October 2018 which confirmed that the overall audit rating was 'Green'.

5.3.3 There are no recommendations relating to the review.

### **5.4 AA Campsite National Inspection Scheme for Campsites for Waleswood Caravan and Camping Park**

5.4.1 Waleswood Caravan and Camping Park was inspected by AA Hotel and Hospitality Services on 19<sup>th</sup> July 2019 and awarded 5 Pennants Gold Award Merit score of 92%. The Council is aiming to maintain the rating of 5 Pennants Gold Award in 2020 and will aim for 5 pennants platinum award in the future as the landscaping of the new development matures.

### **5.5 Library Services Peer Challenge**

5.5.1 The Local Government Association conducted a peer review of Library Services on 19<sup>th</sup> and 20<sup>th</sup> June 2019 focussed around:

- Is the Council getting best value from its library assets?
- How effective is the service's contribution to cross cutting agendas of other services?
- What is the role of the service and Council in the local community?

5.5.2 The review report was positive overall. Nine recommendations were made which are currently being implemented.

## **6. Finance and Customer Services**

6.1 One audit has taken place since the last report and two recommendations have been made. Further details are provided below.

### **6.2 The External Auditor's Report on the Accounts 2018/2019**

6.2.1 The External Auditor's Report on the Accounts is a statutory audit report of the Council and the preparations of the Council's financial statements. The purpose is to view the financial position of the Council's income and expenditure for the year and ensure financial statements have been properly prepared in accordance with the CIPFA/LASAAC code of practice on local authority accounting and prepared in accordance with the Local Audit and Accountability Act 2014.

6.2.2 An unqualified (clean) opinion was issued and two recommendations were made. These were:

- Delivery of 2019-20 budget, savings plan and achievement of Medium-Term Financial Strategy (MTFS):
  - Management should continue to assess its financial performance and monitoring procedures regularly to ensure the savings plans for 2019-20 and resulting achievement of the budget and MTFS are on track.
  - This should include continuing assessment of the demand for key services and address the funding gaps to ensure the Council continues to be financially resilient and sustainably delivering services against its key priorities.
- Dedicated Schools Grant reserve deficit and Recovery Plan:
  - Discuss the recovery plan with ESFA and agree a clear action plan on how the deficit can be recovered
  - Monitor the recovery plan to ensure correct actions are taken as necessary with the involvement of senior management
  - Continue to report the DSG deficit issues to the Cabinet to keep the members informed of actions undertaken
  - Continue to discuss relevant matters with the School Forum so key stakeholders are involved and kept up to date of Council's actions.

6.2.3 Work is currently ongoing to ensure that both recommendations are implemented.

## **7. Options considered and recommended proposal**

7.1 Audit Committee to note the governance arrangements that are currently in place for monitoring and managing the recommendations from external inspections, reviews and audits

7.2 Audit Committee to continue to receive regular reports in relation to external inspections, reviews and audits and progress made in implementing recommendations.

## **8. Consultation on proposal**

8.1 Not applicable to this report.

## **9. Timetable and Accountability for Implementing this Decision**

9.1 The timescales for each recommendation varies and further details are included within the report above.

## **10. Financial and Procurement Advice and Implications**

10.1 There are no financial and procurement implications.

## **11. Legal Advice and Implications**

11.1 There are no direct legal implications arising from the recommendations within this report.

## **12. Human Resources Advice and Implications**

12.1 There are no Human Resources implications.

## **13. Implications for Children and Young People and Vulnerable Adults**

13.1 The recommendations in relation to inspections in both Children and Young People's Services and Adult Social Care have direct implications on the quality of services provided to children, young people and vulnerable adults. Completing the recommendations will improve outcomes for these groups.

## **14. Equalities and Human Rights Advice and Implications**

14.1 Equality Analyses are undertaken in relation to any new policies or strategies that are developed as a result of the work being undertaken to improve services.

## **15. Implications for Partners**

15.1 Partnership approaches are key to improving services and the improvements need to be of a multi-agency nature and owned cross the partnership.

## **16. Risks and Mitigation**

16.1 There is a risk that actions are reported as completed without substance, it is important that arrangements are in place as part of the respective quality assurance regimes and monitored through performance management, evidencing not just completion of actions, but the associated outcomes. As governance arrangements are strengthened, these risks become mitigated.

## **17. Accountable Officer(s)**

Shokat Lal, Assistant Chief Executive

### **Approvals Obtained from:-**

Shokat Lal, Assistant Chief Executive

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