

Public Report

Audit Committee

Committee Name and Date of Committee Meeting:

Audit Committee – 19th January 2021

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:

Jo Brown – Assistant Chief Executive

Report Author(s):

Tanya Lound, Corporate Improvement and Risk Officer
Simon Dennis, Corporate Improvement and 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 the recent external inspections, reviews and audits and assurance that outstanding recommendations, relating to those that have taken place previously, are being progressed.

The report provides a summary of progress against recommendations from across all 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:

- Note the recent external inspections, reviews and audits which have taken place and the progress made in implementing the recommendations since the last report in August 2020
- Note the governance arrangements that are currently in place for monitoring and managing the recommendations
- Continue to receive regular reports.

List of Appendices Included:

None

Background Papers

External audit and inspection recommendations report to Audit Committee on 18th June 2019, 26th November 2019 and 18th August 2020.

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 the recent external inspections, reviews and audits across the Council and assurance that outstanding recommendations, relating to those that have taken place previously, are being progressed.
- 1.2 The last report was presented to Audit Committee on 18th August 2020. The report was originally scheduled to be presented to Audit Committee in June 2020 however, this was delayed due to the reallocation of resources to respond to the Covid-19 crisis. The report referred to:
- Seven external inspections, reviews and audits that had taken place since 26th November 2019 resulting in three recommendations, all of which had been implemented
 - Seven ongoing recommendations in relation to external inspections, reviews and audits that took place prior to November 2019 which had been implemented, 15 which remained outstanding/ongoing and one which did not require implementation.

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 associated governance arrangements. This is intended to provide the Audit Committee with assurance that appropriate arrangements are in place for managing the Council's response, in line with the Audit Committee's responsibilities.
- 2.2 Since 18th August 2020 five external inspections, reviews and audits have taken place and 11 recommendations made, two of which have been implemented and nine which remain outstanding/ongoing. The outcome is not yet known for two of the external audits conducted.
- 2.3 In addition, three of the ongoing recommendations relating to external inspections, reviews and audits that took place prior to August 2020 have now been implemented, 11 remain outstanding/ongoing and one is still awaiting the final report.
- 2.4 An update from each Directorate is provided below.

3. Children and Young People's Services

- 3.1 Two inspections have taken place since the last report and 11 recommendations have been made. Further details are provided below, see paragraph 3.5 and 3.6.
- 3.2 In relation to outstanding recommendations concerning external inspections, reviews and audits that took place prior to August 2020, none of the

recommendations have been implemented since the last report and five remain outstanding.

3.3 The five outstanding recommendations relate to the Ofsted Focused Visit (focussed on permanence planning and achieving permanence) conducted in March 2019 and the Troubled Families review in June 2019.

3.4 The table below provides a summary of new external inspections, reviews and audits.

New external inspections reviews and audits					
Title	Date	Outcome	Number of recommendations	Number implemented	Status
Focused visit to Rotherham children's services (<i>Ofsted</i>)	20 – 22 nd October 2020	No formal overall outcome from the inspection. A letter providing 4 recommendations has been published. It was however noted that Rotherham children's services have reacted rapidly and effectively to the COVID-19 pandemic in the early months of 2020.	4, these included: <ul style="list-style-type: none"> The quality and monitoring of children's plans Placement sufficiency to reduce the need for children to be placed out of authority and in unregistered provision The timeliness of children in care accessing education The timely return to full-time education for children with SEND. 	0	4 recs ongoing Actions to address findings are in progress and being incorporated into the CYPS Service Development Plan. Progress will be discussed and challenged as part of the arrangements for the CYPS quality assurance process and discussed with Ofsted as part of Annual Conversations.
Youth Offending Service Inspection (<i>HMIP</i>)	14 – 17 th September 2020	The RMBC YOT (Youth Offending Team) received an overall rating of 'Requires Improvement'. A report, detailing the findings and recommendations was published on the 17 th December 2020.	5, these included: <ul style="list-style-type: none"> Board members to understand the specific needs of children known to the YOT and advocate on their behalf in their own agencies Partnership to understand the reasons for the significant number of Looked After Children known to the YOT and review policies and practices of all agencies to minimise the possibility of children entering the criminal justice system unnecessarily Undertake comprehensive health needs 	0	5 recs outstanding (action planning is in progress) Draft inspection action plan developed by the partners at the YOT Board on 14th December 2020 and there is a YOT Board scheduled for the 20th January 2021 to progress the actions. Required to submit action plan to the HMIP on the 11th January 2021. In addition, actions to address findings will be incorporated into the CYPS Service

			<p>analysis of YOT children to better understand the health provision being delivered and what needs to be developed</p> <ul style="list-style-type: none"> • Review the quality and accessibility of education, training and employment provision for post-16-year-old children known to the service • Review the quality of risk of harm work and improve the effectiveness of management oversight in all cases. 		<p>Development Plan.</p> <p>Progress will be discussed and challenged as part of the arrangements for the CYPS quality assurance process and discussed with Ofsted as part of Annual Conversations.</p>
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3.5 Focused visit to Rotherham children’s services (*Ofsted*)

3.5.1 A virtual focussed visit was conducted by Ofsted between 20th and 22nd October. The visit looked at the quality and impact of key decision-making across help and protection, children in care and services for care leavers, together with the impact of leadership on service development.

3.5.2 The findings were published on 4th December [Ofsted | Rotherham Metropolitan Borough Council](#).

3.5.3 The report overview stated:

- Children’ services had reacted rapidly and effectively during the pandemic in the early months of 2020.
- Strong effective, multi-agency partnerships enabled early identification of vulnerable children.
- Dynamic assessments of covid risks enabled children to be seen when safe to do so. Detailed children’s assessments enabled proportionate decisions to be reached, ensuring that families receive an appropriate level of support and the voice of the child a strength. However, quality of plans not always consistent.
- Effective pre-proceedings planning enables children to remain living with brothers, sisters or extended family where possible.
- Shortage of local authority placements for children in care which means significant proportion of children live out of authority. In addition, some live-in unregistered placements. Recognised by senior leaders and sufficiency strategy in place to extend placements.
- Good partnership working with schools has supported children’s learning when they have not been in school due to the pandemic. However, some delays in children accessing education when they move placements. In addition, some children with special educational needs and/or disabilities (SEND) remain on part-time timetables for too long. This is recognised by senior leaders, and a specialist post has been crated to support these children back into full-time education.

3.5.4 Within the report four recommendations were made regarding areas which required improvement, these included:

- The quality and monitoring of children's plans.
- Placement sufficiency to reduce the need for children to be placed out of authority and in unregistered provision.
- The timeliness of children in care accessing education.
- The timely return to full-time education for children with SEND.

3.5.5 Actions to address each of the findings are in progress and are being incorporated into the CYPS Service Development Plan. Progress will be discussed and challenged as part of the arrangements for the CYPS quality assurance process and discussed with Ofsted as part of the annual conversations.

3.6 Youth Services Inspection (HMIP)

3.6.1 A virtual inspection was conducted by HMIP between 14th and 17th September. The visit looked at the quality and impact of key decision-making across 3 domains: organisational delivery of services; the planning and delivery of court disposals; and the planning and delivery of out-of-court disposals.

3.6.2 The findings were published on 17th December. The inspectorate found that the service, overall 'requires improvement'.
<https://www.justiceinspectors.gov.uk/hmiprobation/inspections/rotherhamyot/>

3.6.3 The report overview stated:

- The team needs to do much more in terms of their leadership, service provision, and joint working.
- In post-court cases the quality of desistance work and child safety was outstanding. The staffing of the team, their information sharing, and facilities are rated as 'Good'. There is a commitment to arrangements between the YOT (Youth Offending Team) and adult probation services, as well as encouraging work in developing the services they offer to children.
- In addressing the specific needs of each child, the service is losing ground. For example, there is a lack of understanding around the trauma a child may have experienced.
- Staff are motivated and engage well with the children under their supervision.

3.5.4 Within the report five recommendations were made regarding areas which required improvement, these included:

- Ensure that Board members understand the specific needs of children known to the YOT and advocate on their behalf in their own agencies.
- Ensure the partnership understands the reasons for the significant number of Looked After Children known to the YOT and reviews the

policies and practices of all agencies to minimise the possibility of children entering the criminal justice system unnecessarily.

- Undertake a comprehensive health needs analysis of YOT children to better understand the health provision being delivered and what needs to be developed.
- Review the quality and accessibility of education, training and employment provision for post-16-year-old children known to the service.
- Review the quality of risk of harm work and improve the effectiveness of management oversight in all cases.

3.5.5 Actions to address each of the findings are in progress and are being incorporated into the CYPS Service Development Plan. Progress will be discussed and challenged as part of the arrangements for the CYPS quality assurance process and discussed with Ofsted as part of the annual conversations.

3.7 The table below provides a summary of ongoing recommendations in relation to external inspections, reviews and audits that took place prior to August 2020.

Ongoing external inspections reviews and audits <i>(those reported previously which had outstanding recommendations)</i>						
Title	Date	Outcome	Recommendations	Implemented:		Status
				At last report	Since last report	
Inspection of Local Authority Children's Services (ILACS) Framework - Focus on permanence planning and achieving permanence (Ofsted)	March 2019	Looked after children in Rotherham are receiving a "strong" service that has significantly improved	<p>3, these include:</p> <ul style="list-style-type: none"> • The quality and consistency of written planning, so that it matches up to social workers' verbal accounts of their plans • Sufficiency of in-house options, to avoid the use of unregulated placements when finding places for children in care to live • Quality of Risk assessments, where risk has potential implications for stability in the lives of children in care. 	0	0	<p>3 reccs outstanding</p> <p>Actions progressed to address the recommendations, however work paused due to Covid-19 to enable key staff to focus on safeguarding and supporting our families.</p> <p>Planning to complete the work in the final quarter of 2020/21.</p> <p>Progress is managed via the CYPS Service Development Plan and challenged as part of the CYPS quality assurance process. Discussions also take place with Ofsted as part of Annual Conversations.</p>

<p>Troubled Families (Ministry of Housing, Communities and Local Government)</p>	<p>July 2019</p>	<p>Feedback extremely positive and 6 recommendations made, which included a recommendation to enhance systems.</p>	<p>6, these include:</p> <ul style="list-style-type: none"> • Reference (hyperlink) our key plans STMM in the EH maturity matrix and action plan • Align better Troubled Families data with the Corporate Context • Review how quality assurance and family feedback data feeds informs commissioning • Case study of positive employment outcome as a direct result of Troubled Families engagement. • Review the strategic engagement with the Job Centre Plus • Re-instate the attachment of families. 	<p>4</p>	<p>0</p>	<p>Partially complete (4 complete and 2 outgoing)</p> <p>Ongoing recommendations include:</p> <ul style="list-style-type: none"> • Align better Troubled Families data with the Corporate Context • Review the strategic engagement with the Job Centre Plus <p>See update below (paragraph 3.8) re the progress made in relation to the outstanding recommendations.</p>
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3.8 Troubled Families (Ministry of Housing, Communities and Local Government)

3.8.1 Some progress has been made in relation to the ongoing Troubled Families spot check recommendations, including:

- Align better Troubled Families data with the Corporate Context.

Early Help System Guide and Data Maturity Matrix developed. Final versions will be submitted to Ministry of Housing, Communities and Local Government (MHCLG) in December 2020.

In addition, a dataset and associated reports are being developed to bring together partnership data to provide a single view of a child/family for use by practitioners. Relevant reports from this data will be incorporated in the JSNA.

- Review the strategic engagement with the Job Centre Plus.

Following the Spending Review in November 2020 Department for Work and Pensions confirmed plans to continue to fund the Troubled Families Employment Advisor role as part of MHCLG's wider Troubled Families programme until at least March 2022. Development of the legacy role now needs to be incorporated into the partnership work of the Early Help Steering Group, informed by the Early Help System Guide.

4. Adult Care, Housing and Public Health

- 4.1 No new external inspections have taken place since the last report.
- 4.2 In relation to outstanding recommendations concerning external inspections, reviews and audits that took place prior to August 2020, one has now been fully implemented and one remains outstanding.
- 4.3 The recommendation implemented related to South Yorkshire Fire and Rescue Service - Fire Risk Assessment Audit regarding Hampstead Green. All works now complete, signed off and certified. Alarm and sounders expanded, and reconfigured March 2020 and sprinklers and tanks fitted August 2020.
- 4.4 The one outstanding recommendation relates to the CQC inspection of Parkhill Lodge (Adult Social Care) and the medium-term plan to look for alternative premises.
- 4.5 The table below provides a summary of the ongoing recommendations in relation to external inspections, reviews and audits that took place prior to August 2020.

Ongoing external inspections reviews and audits reported previously <i>(those reported previously which had outstanding recommendations)</i>						
Title	Date	Outcome	Recommendations	Implemented:		Status
				At last report	Since last report	
Rotherham Adult Social Care Peer Review Self-assessment (Yorkshire and Humber ADASS)	12 th – 14 th February 2020	Awaiting final report. Evident to the Peer Review Team that much careful work has been done in co-producing the new model with staff and partners, and that this has paid off in the effective engagement with the new model.	No recommendations made but identified 3 areas for consideration focussed around: <ul style="list-style-type: none"> • Confidence of staff and managers (Sustainability, capacity and conscious competence) • Culture change (Success, customise culture change and dynamic learning) • Practice Assurance (Culture, carers and eligibility and hand offs) 	n/a	n/a	<p>Awaiting final report.</p> <p>3 areas for consideration included in draft feedback.</p> <p>Considerations pulled into an action plan in August and fed into a formal Pathway Review exercise.</p> <p>Governed via the Perform+ Framework owned by the Senior Management Team of Adult Care and integration.</p> <p>See further update below, paragraph 4.6.</p>

Adult Social Care – Inspection of Parkhill Lodge (CQC)	24 th January 2018	Good overall rating, with good individual ratings within all sub-categories of Safe; Effective; Caring; Responsive. Well-led category - requires improvement	2	1	0	<p>Partially complete (1 complete and 1 outstanding)</p> <p>The outstanding recommendation relates to external works to the building.</p> <p>Medium term plan for Parkhill Lodge is to look for alternative premises. - Consultation not yet finalised and residents temporarily moved location to Lord Hardy Court due to impact of Covid. Longer term decision to be made January 2021.</p> <p>See further update below, paragraph 4.7.</p>
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4.6 Rotherham Adult Social Care Peer Review Self-assessment

4.6.1 The self-assessment took place on 12th – 14th February 2020 conducted by Yorkshire and Humber ADASS. The purpose of the peer review was to review the new Adult Social Care Pathway which has been in place since October 2019 and stimulate a discussion about how Adult Social Care and its partners can become more effective in improving outcomes.

4.6.2 A draft report has been received, initial feedback was positive and identified some areas to reflect on over the next 12 months. Feedback included:

- Careful work has been done in co-producing the new model with staff and partners, and that this has paid off in the effective engagement with the new model.
- Still early days, but the ‘green shoots’ of new ways of working are definitely showing.
- ASC are in the enviable position of having already implemented huge changes and having a good understanding of the next steps to further embed these.

4.6.3 There were no recommendations made, however three areas for consideration were identified:

- Confidence of staff and managers (Sustainability, capacity and conscious competence).
- Culture change (Success, customise culture change and dynamic learning).
- Practice Assurance (Culture, carers and eligibility and hand offs).

4.6.4 The final report is still awaited and has been delayed due to the COVID-19 outbreak.

4.6.5 An action plan was produced in August and fed into a formal Pathway Review exercise. Progress is governed via the Perform+ Framework owned by the Senior Management Team of Adult Care and integration.

4.7 Adult Social Care – Inspection of Parkhill Lodge (CQC)

4.7.1 Work continues to resolve long term plans for Parkhill Lodge and residents but have not yet reached the consultation phase. However, the residents of Parkhill were temporarily moved on 22nd October 2020 to Lord Hardy Court due to a Covid outbreak. The layout of the Parkhill building and lack of en-suite facilities was not supporting infection control and compounded with staff absence due to either being Covid positive or self-isolating. A decision was made for residents to be temporarily moved. The residents will remain at Lord Hardy Court until after the new year, at which point further decisions regarding the support of residents and the longer-term plans for Parkhill Lodge will be made. The Adult Social Care Directorate Leadership Team are responsible for overseeing implementation.

5. Regeneration and Environment Services

5.1 There are no new external inspections, reviews or audits relating to Regeneration and Environment Services to report.

5.2 In relation to outstanding recommendations concerning external inspections, reviews and audits that took place prior to August 2020, three recommendations have been implemented since the last report and five remain outstanding. These all relate to the Libraries Peer Challenge.

5.3 The table below provides a summary of ongoing recommendations in relation to external inspections, reviews and audits that took place prior to August 2020.

Ongoing external inspections reviews and audits (those reported previously which had outstanding recommendations)						
Title	Date	Outcome	Recommendations	Implemented:		Status
				At last report	Since last report	
Libraries Peer Challenge (Local Government Association)	19th-20th June 2019	<ul style="list-style-type: none"> Libraries in Rotherham valued asset Enthusiasm and recognition of the role libraries could play in delivering the wider council objectives within community Strong political commitment Impressed by the managers, staff and volunteers met with Vision but not a shared vision and was not always clearly visible to staff and wider partners 	9, these include: <ul style="list-style-type: none"> Library strategy; service review Internal review of what is taking place at each location; its success Resolve where staff time is split between customer service roles and library service roles Engage staff on the development of the vision New challenging targets Opportunities to work more with partners locally, regionally and nationally More effective use of volunteers Engage young people in volunteering Potential for different, innovative library asset designs 	1	3	Partially complete (4 rec implemented; 2 in progress; 3 recs outstanding) 4 complete: <ul style="list-style-type: none"> Library strategy approved Engaged with staff to develop a new vision Set new targets Looked at opportunities to work more with partners locally, regionally and nationally. Actions linked to recommendations 8 and 9 are in progress; the outcome of a funding bid to support library redevelopment is awaited. Action plan developed for all remaining recommendations. Implementation has been delayed due to the Covid-19 response.

6. Finance and Customer Services

- 6.1 Three new audits have taken place since the last report and two recommendations have been made and completed.
- 6.2 There were no ongoing recommendations relating to external inspections, reviews and audits that took place prior to August 2020.
- 6.3 The table below provides an overall summary of new external inspections, reviews and audits.

New external inspections reviews and audits					
Title	Date	Outcome	Recommendations	Number Implemented	Status
External Auditor's Report on the Accounts 2019/2020 (Grant Thornton)	August - November 2020	Clean audit	2, these include: <ul style="list-style-type: none"> Closely monitor DSG deficit reduction Plan Continue to update budget setting/projections 	2	Complete Both recommendations complete, although continuous assessment and monitoring in relation to the recommendations will remain ongoing. See further details below, paragraph 6.4.
External Audit of Teachers Pensions (KPMG)	November	Awaiting report	Unknown	Unknown	Awaiting final report
External Audit of Housing Benefits (Grant Thornton)	November – December	Ongoing audit	Unknown	Unknown	Ongoing audit, awaiting final report

6.4 External Auditor's Report on the Accounts 2019/2020 (Grant Thornton)

6.4.1 Authorities are required to prepare financial statements in accordance with the relevant accounting standards and the Code of Practice on Local Authority Accounting.

6.4.2 Grant Thornton were provided with the Council's draft 2019-20 statement of accounts on 31 July 2020, ahead of the revised 31 August 2020 deadline and the audit work was completed remotely throughout the period from September to December 2020.

6.4.3 The feedback provided on 4th December stated that the auditors were satisfied that the authority put in place proper arrangements for securing economy, efficiency and effectiveness in its use of resources for the year ended 31 March 2020.

6.4.4 Within the report two recommendations were made and have been completed, these included:

- Closely monitor Dedicated Schools Grant deficit reduction plan.
- Continue to update budget setting/projections.

7. Assistant Chief Executive

7.1 There are no new external inspections, reviews or audits relating to the Assistant Chief Executive's Directorate to report.

7.2 In relation to outstanding recommendations concerning external inspections, reviews and audits that took place prior to August 2020, feedback has now been received regarding the review of the Big Hearts, Big Changes programme.

7.3 The table below provides a summary of ongoing recommendations in relation to external inspections, reviews and audits that took place prior to August 2020.

Ongoing external inspections reviews and audits (those reported previously which had outstanding recommendations)						
Title	Date	Outcome	Recommendations	Implemented:		Status
				At last report	Since last report	
Review of the Big Hearts, Big Changes Programme (LGA)	21 st – 22 nd July 2020	This was a remote peer support review, rather than an inspection and there were no recommendations made.	None, however the key reflections report included 16 areas for consideration and five early next steps.	n/a	n/a	<p>No formal recommendations.</p> <p>This was a remote peer support review, rather than an inspection and there were no recommendations made.</p> <p>See further update below, paragraph 7.4.</p>

7.4 Review of the Big Hearts, Big Changes Programme (LGA)

7.4.1 A review of the Big Hearts, Big Changes programme took place on 21st – 22nd July, conducted by the LGA. The purpose of the review was to assess the progress made to date and provide an external perspective on the direction of the programme.

7.4.2 This was a remote peer support review, rather than an inspection and there were no recommendations made. The key reflections report provided did however include 16 areas for consideration and five early next steps. These included:

- Follow this with an initial discussion with senior members to start to explore the strategic questions posed above about the next 3 years.
- Explore the learning from other places which have taken a similar outcome based approach and have applied comparable transformation principles. The LGA can assist in both identifying these places and brokering this support (some early potential examples discussed on site include North Lincolnshire, Oldham and Southend-on-Sea).

- Use these insights to have further, wider internal then external discussions about the strategic questions posed above and any implications of this.
- The LGA can then offer a follow-up discussion with the Council and Principal Adviser to map out other support the Council can draw on in making the changes you have started to identify.
- An opportunity (as requested by the CEX on site) to then have a 6 month follow up, to feedback on the progress made.

7.4.3 Following the review, it has been agreed that the Council should align the strategic vision (The Year Ahead Plan), the Medium Term Financial Strategy and commissioning intentions and that the role of the Big Hearts, Big Changes board should become less about processes and more about the outcomes the Council is seeking to achieve for residents.

7.4.4 Big Hearts, Big Changes board meetings will resume in the New Year when the new Assistant Chief Executive assumes their post. This board will be responsible for overseeing the areas of consideration outlined within the report.

8. Options considered and recommended proposal

8.1 Audit Committee to note the recent external inspections, reviews and audits which have taken place and the progress made in implementing the recommendations since the last report in August 2020.

8.2 Audit Committee to note the governance arrangements that are currently in place for monitoring and managing the recommendations.

8.2 Audit Committee to continue to receive regular reports in relation to external inspections, reviews and audits and the progress made.

9. Consultation on proposal

9.1 Not applicable to this report.

10. Timetable and Accountability for Implementing this Decision

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

10.2 The next report will be presented to Audit Committee in June 2021.

11. Financial and Procurement Advice and Implications

11.1 There are no financial and procurement implications.

12. Legal Advice and Implications

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

13. Human Resources Advice and Implications

13.1 There are no Human Resources implications.

14. Implications for Children and Young People and Vulnerable Adults

14.1 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.

15. Equalities and Human Rights Advice and Implications

15.1 Equality Analyses are undertaken in relation to any new policies or strategies that are developed and work is being undertaken to improve services.

16. Implications for Partners

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

17. Risks and Mitigation

17.1 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.

18. Accountable Officer(s)

Jo Brown, Assistant Chief Executive

Approvals Obtained from:-

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