

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

Audit Committee – 9 January 2024

**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*)

Assistant Chief Executive's Department

[tanya.lound@rotherham.gov.uk](mailto:tanya.lound@rotherham.gov.uk)

Simon Dennis (*Corporate Improvement and Risk Manager*)

Assistant Chief Executive's Department

[simon.dennis@rotherham.gov.uk](mailto:simon.dennis@rotherham.gov.uk)

**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 as well as to provide assurance that outgoing and outstanding recommendations from earlier inspections, audits and reviews, are being progressed.

The report provides a summary of progress against the recommendations from all external inspections, reviews and audits and sets out the details of arrangements for ensuring the accountability and governance around their implementation.

**Recommendations:**

That Audit Committee:

- Note the recent external inspections, reviews and audits which have taken place and the progress made relating to ongoing recommendations
- Note the governance arrangements 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 reports to Audit Committee on 11 January 2022, 28 July 2022, 10 January 2023, and 27 July 2023.

**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 ongoing and outstanding recommendations, relating to those that have taken place previously, are being progressed.
- 1.2 The last report was presented to Audit Committee on 27 July 2023. The report referred to external inspections, reviews and audits that had taken place since January 2023, which included nine new external inspections, reviews and audits that had taken place since January 2023, resulting in fourteen recommendations and areas for improvement. Of these six had been implemented and were complete, eight remained ongoing and were in progress and the outcome was not yet known for one of the audit reviews conducted.
- 1.3 Ongoing recommendations/areas for improvement relating to external inspections, reviews and audits that took place prior to January 2023 included twenty-nine that had been implemented and were complete, forty-seven remained ongoing and were in progress, five of which were delayed and four required no further action.

### **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 or 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 Governance arrangements are in place for monitoring and managing external inspection, review, and audit recommendations within each directorate. Regular progress against the recommendations is also reported and considered by the Strategic Leadership Team.
- 2.3 Seven new inspections, reviews, and audits have taken place since July 2023. These resulted in six recommendations or areas for improvement. Of these, one is complete; two are in progress and three are not yet scheduled to start.
- 2.4 Fourteen ongoing recommendations/areas for improvement relating to external inspections from reviews and audits that took place prior to July 2023 have been completed since the last report. Forty-eight remain in progress, five of which are delayed (1 of which is delayed more than 12 months).
- 2.5 The status ratings applied to demonstrate the current position for each inspection, review, and audit include:

Complete	All recommendations/areas for improvement are fully complete
In progress and on track	All recommendations/areas for improvement are on track to be delivered by the original agreed deadline
In progress and partly delayed	Recommendations/areas for improvement progressing, however target date for one or more area is behind the original agreed deadline
Significant delay	All recommendations/areas for improvement delayed or one area delayed more than twelve months past the original agreed deadline
No action required	There are no recommendations/areas for improvement, or the outcome is not yet known

2.6 An update for each directorate is provided below.

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

3.1 The outcome of two new inspections of the RMBC children's residential homes have been received since the last report. Further details are provided below.

3.2 Of the recommendations from external inspections, reviews and audits that took place prior to July 2023, six recommendations/areas for improvement have been completed since the last report and three recommendations are in progress but delayed.

3.3 The tables below provide a summary of new and ongoing external inspections, reviews, and audits.

<b><u>New</u> external inspections reviews and audits</b>		
<b>Title</b>	<b>Date</b>	<b>Outcome</b>
<i>Pegasus House Children's Residential Home (Ofsted)</i>	30 May 2023	<b>Good rating</b>
Beech Tree Lodge Children's Residential Home (Ofsted)	30 October 2023	<b>Good rating</b>

#### 3.4 Inspections of RMBC Children's Residential Homes (Ofsted)

3.4.1 Residential children's homes are inspected by HMI Ofsted under the Social Care Common Inspection Framework (SCCIF) to evaluate the impact of care and support on the experiences and progress of children.

3.4.2 Following inspection, the children's home receives an overall judgement based on the experiences and progress of children and young people, of outstanding, good, requires improvement or inadequate.

3.4.3 There are two new residential home inspections to report, which are included in the table above.

3.4.4 The outcome of the inspections is confidential and not in the public domain. Therefore, the recommendations and progress against these are not included within this report.

<b>Ongoing external inspections reviews and audits (those reported previously which had ongoing recommendations)</b>						
Title	Date	Outcome	No recs	Implemented:		Status
				At last report	Since last report	
Joint Area SEND Inspection (Ofsted and CQC)	5-9 July 2021	No formal overall outcome from the inspection. A letter providing four recommendations has been published.	4	0	4	<b>Complete</b> (4 recs complete)
Inspection of Local Authority Children's Services (ILACS) Short Inspection (Ofsted)	June 2022	Services provided to children and families by the Council rated as 'good' across the board.	4	0	2	<b>Significant delay</b> (2 areas for improvement complete; 2 in progress but delayed. 1 of the actions delayed, is delayed more than 12 months past original target date)
Child Sexual Exploitation review (Rotherham Safeguarding Children Partnership)	March - May 2022	The review team were assured that the concerns in the briefing paper provided regarding Child Sexual Exploitation (CSE) were taken seriously, acted upon, and dealt with appropriately.	7 areas for improvement	6	0	<b>In progress and partly delayed</b> (6 areas for improvement complete and 1 area delayed)

### 3.5 Joint Area Special Educational Needs and/or Disabilities (SEND) inspection (Ofsted and CQC)

3.5.1 Between 5–9 July 2021 Ofsted and the Care Quality Commission conducted a joint inspection of the local area of Rotherham to judge the effectiveness of the area in implementing the Special Educational Needs and/or Disabilities (SEND) reforms as set out in the Children and Families Act 2014.

3.5.2 A letter detailing the findings was published on 19 October 2021.

3.5.3 A formal Written Statement of Action (WSOA) was jointly developed with the Clinical Commissioning Group (CCG) which set out the key actions and timelines to address the following areas of improvement:

- The variability in the quality of Education, Health and Care plans, including the contribution of health and social care partners

- The effectiveness of the graduated response to identify and meet children and young people's needs, especially in key stages one and two
- The quality of provision for children and young people's preparation for, and transition to, adulthood
- Communication with all parents and carers of children and young people with SEND about the local offer, and the accessibility of the very valuable information included within the local offer.

3.5.4 The final Support and Challenge meeting took place with the Department for Education (DfE) on the 20 June 2023. This focused on Rotherham Local Area's Written Statement of Action (WSOA).

3.5.5 The DfE signed off the Local Area's WSoA and noted the considerable progress the Local Area has made in its focus on the impact relating to the day-to-day lived experiences of children, and young people with SEND and their families.

3.5.6 The Council is now awaiting a full inspection, under the new SEND inspection framework.

### **3.6 Inspecting local authority services for children (ILACS) Short Inspection (Ofsted)**

3.6.1 Every three years Ofsted conduct an inspection to review the effectiveness of local authority services and arrangements for Children and Young People. The inspection was conducted in June 2022.

3.6.2 The review findings were published in August 2022 and services provided to children and families by the Council were rated as 'good' across the board.

3.6.3 There were four areas for improvement and two have been completed since the last report:

- **Area for improvement:** Assessment of the identity needs of children when planning for their future. **Progress:** development and training session commissioned; a whole service event focused on children's identity will be an annual event; the Practice Standards have been reviewed and are now available on the Rotherham Learning Academy; a benchmarking exercise took place.
- **Area for improvement:** The quality of individual case audits to inform wider service learning. **Progress:** A Learning Leadership Group has been established to drive quality; regular assurance meetings established; monthly meetings in place to review the outcomes from audits; new audit data tool in place; enhanced quality assurance report; revised quality assurance framework.

3.6.4 Two areas remain in progress, one of which is delayed more than 12 months past original target date:

- **Area for improvement:** Consideration of previous history and current circumstances when responding to 'Front Door' contacts and child protection concerns. **Progress:** New audit and moderation tools have been implemented and audit findings are presented at the CYPS Performance Assurance Board. Dip sampling of cases has taken place as well as revised processes. The target date has changed from November 2022 to February 2024 to allow for audits to be undertaken to assure that practice is embedded prior to closure of this action.
- **Area for improvement:** The level of ambition for individual care leavers, the support for them to achieve their aspirations and the detailing of this in pathway plans. **Progress:** Joint development sessions and quality assurance sessions have taken place across the service, as well as monthly deep dives. Benchmarking is also being undertaken. The target end date for this action has been extended from June 2023 to January 2024 to enable inclusion of a commitment in the care leavers covenant and care leavers improvement plan.

3.6.5 Actions are monitored through the Children and Young People's Services Improvement Plan and reported for review and challenge to the Directorate Leadership Team.

### **3.7 CSE review (*Rotherham Safeguarding Children Partnership*)**

- 3.7.1 An Independent Review was commissioned by the Chief Officers from Rotherham Metropolitan Borough Council (RMBC), South Yorkshire Police (SYP), and The Clinical Commissioning group (CCG, now Integrated Care Systems ICSs) following concerns raised in a Conservative Briefing paper dated 3 November 2021. The briefing suggested that Child Sexual Exploitation (CSE) was a continuing problem in Rotherham and that the response from the police and Council was not effective enough.
- 3.7.2 The review was approved by Council Motion on 10 November 2021 and undertaken by an Independent Review Project Team.
- 3.7.3 The review was split into two stages and conducted between March – May 2022.
- 3.7.4 The review team were assured that the concerns regarding Child Sexual Exploitation (CSE) were taken seriously, acted upon, and dealt with appropriately. The review also concluded that services in Rotherham have strong leadership, accountability and locally developed multi-agency relationships which take a robust approach to addressing CSE in Rotherham. The review team found no evidence that CSE may be occurring on the same scale as in the past as detailed in the Jay report in 2014.
- 3.7.5 The review did not make any recommendations, and instead made seven suggestions in recognition that there is always room for improvement.
- 3.7.6 Six areas of improvement are complete, and one remains in progress which relates to:

- Area for improvement:** Keeping children and young people safe (further training and awareness that recognises the changing landscape of CE/CSE to more online abuse to keep children and young people and adults at risk, including those with Special Educational Needs and Disability (SEND) safe).
 **Progress:** Work is ongoing to address this area for improvement and a training package for frontline staff is being developed through a multi-agency steering group. Awareness raising is also ongoing, including the sharing of messages across the partnership on spotting the signs of exploitation through social media and other channels. As reported in the last report, despite the progress made, the target date for this action has changed from March 2023 to March 2024 due to a change in the executive group membership that allocated the funding and staffing changes.

3.7.7 The Rotherham Safeguarding Children’s Partnership are responsible for monitoring progress.

#### 4. Adult Care, Housing and Public Health

4.1 One peer review has taken place since the last report and six recommendations were made. Further details are provided below.

4.2 Of the recommendations from external inspections, reviews and audits that took place prior to July 2023, three areas for improvement have been completed since the last report and twelve remain in progress.

4.3 The tables below provide a summary of new and ongoing external inspections, reviews, and audits.

<b><u>New</u> external inspections reviews and audits</b>				
<b>Title</b>	<b>Date</b>	<b>Outcome</b>	<b>Number of recs</b>	<b>Status</b>
Safeguarding Peer Review (LGA)	11-13 July 2023	Key Messages overall included: <ul style="list-style-type: none"> <li>• Pride and commitment in Rotherham</li> <li>• Voices are listened to, but not yet heard at the RSAB</li> <li>• You can go much further on collaboration and constructive challenge</li> <li>• To be an outstanding SAB you need sufficient resources to support it and robust processes to plan and deliver on your strategy</li> <li>• Mainstream the pockets of excellent practice</li> <li>• Celebrate your good work!</li> </ul>	6	<b>In progress and on track</b>  1 recommendation complete, 2 in progress and 3 will commence January 2024.



#### **4.4 Safeguarding Peer Review (LGA)**

- 4.4.1 The Rotherham Safeguarding Adults Board (the RSAB) requested that a peer challenge be undertaken by the Local Government Association (LGA). The work was commissioned by the Independent Chair on behalf of the RSAB. The Board was seeking an external view on the effectiveness of the RSAB which included the relationships with the three statutory partners. The RSAB will use the findings of this peer challenge as a marker on its journey of improvement.
- 4.4.2 The team were on-site for three days from 11 July to 13 July 2023.
- 4.4.3 Key Messages within the feedback report included: pride and commitment in Rotherham; voices are listened to in Rotherham, but not yet heard at the RSAB; can go much further on collaboration and constructive challenge; to be an outstanding SAB you need sufficient resources to support it and robust processes to plan and deliver on your strategy; mainstream the pockets of excellent practice; celebrate your good work!
- 4.4.4 To support RSAB on its improvement journey the peer team made the following recommendations:
1. Use the groups and mechanisms which already exist in your partner organisations to start the work to increase voice in the work of the Board. Take time to think what questions you would want to ask these groups
  2. Set aside some time for a development session to better understand the relevance of the various meetings, who attends them and why. We recommend reconsideration of the best way to include representation of the independent care provider market
  3. Review how the SAB sets its agendas to encourage oversight of broader safeguarding related matters arising from partnership working
  4. Ensure you have robust SMART plans which you can track and monitor. Look to other Boards for good practice and templates in this area
  5. Explore how best you can use the data and information to identify areas for improvement, celebrate successes and answer the 'so what' questions
  6. Consider whether partners' understanding regarding the safeguarding pathways and expectations around these is sufficiently clear and shared and whether there are strategic or operational changes which can ensure better alignment.
- 4.4.5 All recommendations have been grouped into three discussion points/themes; these include:

- Theme 1 – Strengthening the User Voice. This theme includes recommendation 1 and a working group will be established in January 2024
- Theme 2 – Governance, strengthening board arrangements. This theme covers recommendations 2,3 and 4. Improvement action 2 is complete and a development day was held with all partners on 3 November 2023. Furthermore, work has begun in changing the structure of the Board and its subgroups and the Executive Group has been redesigned. Further work will continue in January 2024
- Theme 3 – Making the best use of data and information. This theme covers recommendations 5 and 6 and a working group will be established in January 2024.

4.4.5 The RSAB are responsible for monitoring progress.

<b>Ongoing</b> external inspections reviews and audits <i>(those reported previously which had ongoing recommendations)</i>						
Title	Date	Outcome	No recs	Implemented:		Status
				At last report	Since last report	
Exemplar accreditation of housing tenancy engagement (Tpas)	October 2022	Excellent outcome.  Exemplar accreditation achieved with All 7 themes achieving an individual PASS status.	16 Improvements/ comment received, relating to 6 areas of good practice.	1	3	<b>In progress and on track</b>  (4 areas for improvement complete and 12 are in progress)

## 4.5 Exemplar accreditation of housing tenancy engagement (Tpas)

- 4.5.1 In October 2022 the Council achieved the standard to achieve Tpas ‘Exemplar’ status which will run until 2024. Tpas Exemplar is for organisations who have been awarded the Tpas PRO accreditation three times and have consistently demonstrated their exemplar approach to engagement. It is comprehensive, visionary and time focused, ensuring organisations remain a beacon of excellent practice for engagement.
- 4.5.2 The Council received an excellent outcome and exemplar accreditation was achieved with all seven themes achieving an individual ‘pass’ status.
- 4.5.3 Six of the themes had a total of sixteen areas for improvement/comments and there were also six areas of good practice identified.
- 4.5.4 Since the last report, a further three areas for improvement/comment have been completed and four are now complete in total. Those completed since the last include:

- Area that sets out key staff and their responsibilities on the website
- Widened how wider tenants can put forward their ideas for a review either via the framework activities or an on-going survey on the website
- Considered adding to the website the Tenant Scrutiny Panel minutes and who is on the panel as well as how people could contribute/join the group.

4.5.5 The remaining twelve outstanding areas for improvement/comments are scheduled to be completed between December 2023 – June 2024.

4.5.6 Detailed timelines for each recommendation and progress will be performance managed as agreed via the new Tenant Engagement Framework 2022-25 Action Plan and reported to the Housing Involvement Panel.

## 5. Regeneration and Environment Services

5.1 Two inspections/reviews have taken place since the last report and no recommendations/areas for improvement were made. Further details are provided below.

5.2 Of the recommendations from external inspections, reviews and audits that took place prior to July 2023, three recommendations are now complete, and one area for improvement remains in progress and is slightly delayed.

5.3 The tables below provide a summary of new and ongoing external inspections, reviews, and audits.

<b><u>New</u> external inspections reviews and audits</b>				
<b>Title</b>	<b>Date</b>	<b>Outcome</b>	<b>Number of recs</b>	<b>Status</b>
DVLA Assurance Report (DVLA)	August 2023	DVLA's audit opinion is that RMBC handle DVLA registered keeper data in a strong, controlled environment, ensuring that the data is secure at all times and is only accessible to those with a demonstrable business need.  Due to the internal controls that are in place, RMBC present as a low risk to the agency, in how they process and store the personal data received from DVLA.	0	<b>No action required.</b>  There were no recommendations made.
Changing Places Fund – Statement of Grant Assurance (Department for Levelling Up, Housing and Communities)	October 2023	Full assurance received based on statement of assurance. The level of assurance dictated the grant determination received; the Council was in the first tranche of the grant determination, showing strong practice.	0	<b>No action required.</b>  There were no recommendations made.

<b>Ongoing</b> external inspections reviews and audits (those reported previously which had ongoing recommendations)						
Title	Date	Outcome	Number of recs	Implemented:		Status
				At last report	Since last report	
Quest Foundation Review (Quest)	January 2023	Learning from the review included consideration of website information, answering of phones and social media information due to this being corporate and not specific to individuals.	3 areas for improvement.	0	2	<b>In progress and partly delayed</b>  (2 areas for improvement complete and 1 in progress and slightly delayed)
Tree Management Protocol & Guidance Independent Review (Treeconomics)	March 2023	Protocol found to be in line with industry standards, however capacity to deliver within the service lacking and levels of inspections were felt to be above what is required nationally.	7	6	1	<b>Complete</b>  (7 recommendations complete)

## 5.4 Quest Foundation Review (Quest)

5.4.1 The Quest Foundation Review (QFR) provides a scored and benchmarked insight into real-life, 'live' customer service experiences from people who have traditionally been excluded from physical activity opportunities, including people from lower socio-economic groups, culturally diverse communities, disabled people and people with long-term health conditions.

5.4.2 The Council received a Quest Foundation Review in January 2023 and the finding received in February 2023 included three areas for improvement.

5.4.3 Two areas for improvement are now complete including:

- **Area for improvement:** Work to ensure the phone is answered in a timely manner. **Progress:** All front of house staff have undertaken customer service essential training refresher and there are now online signups for swimming lessons and sports activities. These methods will continue to be monitored.
- **Area for improvement:** The need for site specific posts targeting socially excluded groups on Twitter. **Progress:** All sites are being encouraged to ensure that activities are promoted via social media with a focus on priority groups.

5.4.4 One area for improvement remains in progress and is slightly delayed:

- **Area for improvement:** The need for information on Places Leisure website relating to transgender use of changing facilities. **Progress:** The Places Leisure policy is being assessed to ascertain what elements can be displayed on the soon to be revamped website. To be reviewed March 2024.

5.4.5 Learning from the review included consideration of website information, answering of phones and social media information due to this being corporate and not specific to individuals.

5.4.6 Places Leisure are acting upon findings and progress will be reviewed in March 2023.

## **5.5 Tree Management Protocol & Guidance Independent Review (*Treconomics*)**

5.5.1 The independent review was conducted in March 2023 to review and benchmark the Council's Tree Management Protocol & Guidance document against four similar sized authorities, assess its practicality and feasibility and propose amendments for improvement and strengthening.

5.5.2 The protocol was found to be in line with industry standards, however capacity to deliver within the service was lacking and levels of inspections were felt to be above what is required nationally. Seven recommendations were made, and the one remaining recommendation is now complete:

- **Recommendation:** Annual Ash Dieback surveys are not required for all ash trees. For ash in high use/high risk areas, annual inspections may be necessary, however in lower risk areas, inspections should consider the level of risk, stage of dieback and the capacity to carry out remedial action. **Progress:** The Tree Management Protocol and Guidance has been updated to clarify that only ash trees in high-risk locations will be inspected on an annual basis. For additional reassurance, the Council's insurers are reviewing the protocol. In addition, an Ash Dieback Plan has now been produced which sets out the Council's approach to managing Ash Dieback across the borough, along with a detailed action plan for delivery.

5.5.3 All recommendations have been documented in the Tree Service Action Plan and overseen by the Tree Service Task & Finish Group.

5.5.4 Lessons learned include conducting benchmarking exercises when undertaking new policy development.

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

6.1 Two audits have taken place since the last report and no recommendations were made. Further details are included below.

6.2 Of the external inspections, reviews and audits that took place prior to July 2023, two recommendations are now complete and three remain in progress, one of which are delayed. Further details are provided below.

6.3 The tables below provide a summary of new and ongoing external inspections, reviews, and audits.

<b><u>New</u> external inspections reviews and audits</b>				
<b>Title</b>	<b>Date</b>	<b>Outcome</b>	<b>Recommendations</b>	<b>Status</b>
Teachers Pension Audit 2022/23 (KPMG)	July – November 2023	Clean report	0	<b>No action required.</b> There were no recommendations made.
Statement of Accounts Audit 2022/23 (Grant Thornton)	August – December 2023	Clean report	0	<b>No action required.</b> There were no recommendations made.

<b><u>Ongoing</u> external inspections reviews and audits (those reported previously which had ongoing recommendations)</b>						
<b>Title</b>	<b>Date</b>	<b>Outcome</b>	<b>Recommendations</b>	<b>Implemented:</b>		<b>Status</b>
				<b>At last report</b>	<b>Since last report</b>	
Customer Service Peer Review (LGA)	June 2022.  Findings received November 2022.	The Council has a vision to provide improved customer access and experience. However, there is more work to do to ensure that everyone is bought into the improved customer access and experience approach.	27 actions relating to six recommendations.	26	0	<b>In progress and partly delayed</b>  (26 improvement actions complete and 1 in progress but slightly delayed)
2021/22 VFM arrangements (Grant Thornton)	March 2023	Council's financial position is strengthening.  Identified small number of improvement recommendations to further enhance finance, governance, and performance arrangements.	3 new recommendations.  1 follow up recommendation which is ongoing.	0	2	<b>In progress and on track</b>  (1 recommendation and 1 follow up recommendation complete. 2 remain in progress and on track)

## **6.4 Customer Service Peer Review (LGA)**

- 6.4.1 In June 2022 the LGA conducted a peer review of Customer Services. The Council requested the review to assess progress against the outcomes set out in the Council Plan and suggest any improvement opportunities based on experience and knowledge of best practice in other authorities. The review looked at the current position and performance of customer service across the Council.

6.4.2 The findings received in November 2022 stated that overall 'Rotherham Council has a vision to provide improved customer access and experience. The aim is that whatever part of the Council a resident or customer contacts, they receive the same standard of service. There have been some corporate changes to working patterns, systems, and processes to achieve this vision. It appears to the peer team that it is heading in the right direction, but that there is more work to do to ensure that everyone is bought into the improved customer access and experience approach.'

6.4.3 The report included twenty-seven areas for improvement focussed around six recommendations. These included:

- Ensure that there is a corporate approach to improved customer access and experience
- Improve internal communication and co-ordination
- Consider greater involvement of councillors in corporate priority programme and project management
- Improve co-ordination of corporate strategies, services and teams
- Explore ways to use technology to improve customer experience
- Involve key stakeholders to help service improvements.

6.4.4 Only one of the twenty-seven areas for improvement remains ongoing relating to the second recommendation. The action is to create a shared post calendar to enable a better understanding of when services are contacting residents and businesses on mass and enable customer service to support. This activity has been delayed from June 2023 to December 2023.

6.4.5 The Strategic Customer Experience Board oversees implementation of the improvement actions.

## **6.5 2021/22 VFM arrangements (Grant Thornton)**

6.5.1 Grant Thornton conducted the annual audit of the 2021-2022 Value for Money Arrangements and the findings were received on 6 March 2023.

6.5.2 The audit findings noted the Council's improvement journey and commented that the Council's financial position is strengthening, albeit the level of useable reserves in proportion to the Council's spend being lower than most peer authorities. The report identified a small number of improvement recommendations to further enhance finance, governance, and performance arrangements.

6.5.3 Two recommendations are now complete, these include:

- **Recommendation:** In line with the Council's Risk Management Guide, recommended the Council draws out the Corporate Strategic Risk Register and associated public risk reporting, the degree of risk appetite and the possible upside of taking on a degree of managed risk. **Progress:** The detailed Risk Register was presented to Audit Committee in September 2023 which included further mitigating actions and target score, which addresses the degree of risk appetite the Council is willing to take. Work will continue to

raise awareness and understanding of risk appetite through training and the Risk Management Guide refresh.

- **Follow up recommendation:** Following on from the Ofsted and CQC SEND inspection, the Council should have a clear Written Statement of Action (WSOA), a clear action plan for implementation and formal monitoring and challenge by the Improving Lives Select Committee. **Progress:** The final Support and Challenge meeting took place with the Department for Education (DfE) on the 20 June 2023. See update under Children and Young Peoples Services section above.

6.5.4 Two recommendations remain in progress, these include:

- **Recommendation:** Refine existing arrangements for monitoring the capital programme to ensure the spend programme and timing of capital expenditure remains accurate and supports delivery of the programme and Council Plan. **Progress:** The Council is continuing to embed the Capital Governance Principles including reporting and escalation via the Capital Programme, Monitoring and Delivery Board. The review into delivery of Regeneration and Environment capital schemes is progressing. This action is ongoing.
- **Recommendation:** Consider streamlining KPI performance report to provide a more summarised and integrated performance, finance, and risk reporting. **Progress:** The suite of KPIs will be considered when the new plan for 2025 is developed.

6.5.5 Implementation of the recommendations is overseen by the Finance and Customer Services Directorate.

## 7. Assistant Chief Executive Directorate

7.1 No new external peer review has taken place since the last report.

7.2 Of the external inspections, reviews and audits that took place prior to July 2023, the findings from the LGA Corporate Peer Challenge have now been received and seven recommendations were made. Suggestions from the Equality Framework informal peer challenge remain in progress. Further details are provided below.

7.3 The table below provides a summary of ongoing external inspections, reviews, and audits.



**Ongoing** external inspections reviews and audits (those reported previously which had ongoing recommendations)

Title	Date	Outcome	Recommendations	Implemented:		Status
				At last report	Since last report	
Equality Framework for Local Government - Rotherham Council Informal Peer Challenge (Doncaster Council)	March – April 2022.  Findings received May 2022.	Peer team agreed with the Council's Self-assessment (Suggested developing level) and acknowledged that the Council provided the required level of information and documentation to evidence this.  Stated the Council appear to be aware of their current position and have detailed activity planned to gain an 'Excellent' rating.	22 suggestions for consideration around focused around 4 themes.	0	0	<b>In progress and on track</b>  (All 22 suggestions have been embedded and progressed within the Council's Equality Framework Action Plan).
Corporate Peer Challenge (LGA)	5 – 8 June 2023	The feedback was very positive, and included: <ul style="list-style-type: none"> <li>• The Council serves the town well and is today an impressive organisation</li> <li>• Ample evidence that the Council is now in a very good place. Ambitious, well-established, and robust foundations, along with notable and commendable practices that others can learn from</li> <li>• Strong and visible political and managerial leadership at borough and sub regional level</li> <li>• Excellent and effective Member and officer relationships built on mutual trust</li> <li>• Staff are motivated, dedicated and determined to deliver the best outcomes for residents.</li> </ul>	7 recommendations	Outcome unknown at the last report.	0	<b>In progress and on track</b>  (All 7 recommendations are in progress)

## 7.4 Equality Framework for Local Government - Rotherham Council Peer Challenge (*Doncaster Council*)

7.4.1 Between March – April 2022 the Council received an informal, desktop peer assessment of the Council's progress judged against the KLOEs of the Equality Framework for Local Government by Doncaster Council.

7.4.2 The findings were received in May 2022 and twenty-two suggestions were made for consideration around the four themes from the Equality Framework for Local Government (EFLG). All are on track for completion in June 2025:

- **Suggestion:** Understanding and Working with your Communities (three actions). **Progress:** Consultation and engagement toolkit updated, and two training sessions delivered schedule for staff; a new model of equalities engagement is being implemented; recruitment for a dedicated officer to drive equalities; data from the Census has been used to update ward profiles and the Rotherham Data Hub; Strength based-working approach e-learning module rolled out; Community Reference Group reviewed.
- **Suggestion:** Leadership and Organisational Commitment (four actions). **Progress:** Corporate EDI Steering Group has been formed; EDI Operational Group formed to drive activity; Equalities Annual Report outlines learning from case studies of equalities outcomes; member development process being refreshed which will include raising awareness of equalities.
- **Suggestion:** Responsive Services and Customer Care (five actions). **Progress:** Commissioning toolkit launched, which includes EDI; a package of measures being developed to assist contract managers to secure social value outcomes from contracts including around equalities and the real living wage; customer service management systems now includes equality questions; Service Plan templates updated to further embed EDI; Equalities Annual Report outlines learning from case studies of equalities outcomes.
- **Suggestion:** Diverse and Engaged Workforce (ten actions). **Progress:** The Workforce Plan is being implemented including eight internal staff representative groups formed - mentoring scheme introduced, networks forward plan designed and update provided to EDI Steering Group; the Hybrid Working Policy has been reviewed and replaced with the Working Location Policy; Discover Well-being offer refreshed and communicated.

7.4.3 The comments from the peer challenge have been shared with the Corporate Equality, Diversity, and Inclusion Steering Group and are being progressed via the Council's Equality Framework Action Plan. This has been developed to deliver the Council Equality, Diversity and Inclusion Strategy, including our ambition to achieve 'excellent' in the Equality Framework for Local Government in 2025.

7.4.4 Implementation of the Equality Framework Action Plan is overseen by the Equality, Diversity, and Inclusion Steering Group.

## **7.5 Corporate Peer Challenge (*Local Government Association*)**

- 7.5.1 There is an expectation that councils receive a peer review every five years to provide robust, strategic, and credible challenge, whilst also enhancing capacity and helping to avoid insularity.
- 7.5.2 The Local Government Association (LGA) conducted the Council's Corporate Peer Challenge in June 2023, focused on ensuring that the Council has the capacity, governance, leadership, and finances to deliver its ambition. There was also a particular focus on the work the Council is doing to create an inclusive economy.
- 7.5.3 The Corporate Peer Challenge Team was made up of six experienced and skilled peers and they were on site for 3.5 days, between the 5<sup>th</sup> and 8<sup>th</sup> June 2023.
- 7.5.4 The feedback report was received and presented to Cabinet in September 2023, along with an action plan in response. The report included seven recommendations in total and all remain in progress:
- Celebrate the Council's achievements!
  - Develop an externally facing compelling and positive narrative of place
  - Use the investments underway to expand and attract private sector investment
  - Develop effective pathways and mechanisms for local people
  - Review performance management with a focus on impact and improvement in outcome
  - Develop a clearer and shared understanding of integrated locality working; increase the pace of digital transformation to improve the customer experience
  - Continue to keep the MTFs under review and continue to report to Members on a regular basis.
- 7.5.5 A detailed action plan has been developed and is monitored internally, overseen by the Strategic Leadership Team.
- 7.5.6 The LGA are conducting a progress review visit on 21 December 2023 and the finding will be publicised on the Council and LGA website.

## **8. Lessons learnt**

- 8.1 The Council will continue to share learning from external inspections, reviews and audits across services and other directorates, where appropriate, to prevent future concerns/problems arising and enhance service delivery.
- 8.2 See paragraphs 5.4.3 and 5.5.4 regarding examples of learning being considered.

- 8.3 Furthermore, the LGA Corporate Peer Challenge report noted that the Council had *'opened itself to a range of peer reviews to support a learning culture'*. The report also stated, *'The council has undergone an impressive transformation and has many exemplary and commendable practices that other councils can learn from'*.

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

- 9.1 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 July 2023.
- 9.2 Audit Committee to note the governance arrangements that are currently in place for monitoring and managing the recommendations.
- 9.2 Audit Committee to continue to receive regular reports in relation to external inspections, reviews and audits and the progress made.

## **10. Consultation on proposal**

- 10.1 Not applicable to this report.

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

- 11.1 The timescale for each recommendation varies depending on the individual inspection or audit.
- 11.2 The next report will be presented to Audit Committee in July 2024.

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

- 12.1 There are no direct financial and procurement implications as a result of this report.
- 12.2 Audits relating to finance and procurement and any related recommendations are outlined in the main body of the report.

## **13. Legal Advice and Implications**

- 13.1 There are no direct legal implications arising from the recommendations within this report.
- 13.2 Audits relating to legal services and any recommendations are outlined above.

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

- 14.1 There are no Human Resources implications.

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

- 15.1 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.

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

- 16.1 When implementing changes/improvements services are to consider the impacts on services users and communities, including an individual or group with a protected characteristic. This may require the completion of an equality analysis to advance and maximise equality as well as eliminate discrimination and negative consequences.
- 16.2 As outlined in paragraph 7.4 an Informal Peer Challenge took place in March – April 2022 and actions are being progress via the existing Council's Equality Framework Action Plan.

## **17. Implications for CO2 Emissions and Climate Change**

- 17.1 There are no direct CO2 emissions and climate change implications.

## **17. Implications for Partners**

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

## **18. Risks and Mitigation**

- 18.1 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.

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

Simon Dennis, Corporate Improvement and Risk Manager

Tanya Lound, Corporate Improvement and Risk Officer

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

Jo Brown, Assistant Chief Executive

**This report is published on the Council's website or can be found at:**

<http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories>