

Committee Name and Date of Committee Meeting

Health Select Commission – 31 July 2025

Report Title

Adult Social Care Peer Review – January 2025

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

No

Strategic Director Approving Submission of the Report

Ian Spicer, Strategic Director of Adult Care, Housing and Public Health

Report Author(s)

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Ward(s) Affected

Borough-Wide

Report Summary

Rotherham Council's Adult Social Care (ASC) Service commissioned the Association of Directors of Adult Social Services (ADASS) to carry out a Peer Review in January 2025. This report details the findings from the Peer Review Team and provides assurance on the recommendations being implemented to improve the delivery of adult social care for people in Rotherham.

Recommendations

That the Health Select Commission:

1. Note the findings of the Peer Review of Adult Social Care and the subsequent improvement programme.

List of Appendices Included

Appendix 1 ADASS Peer Challenge Report

Appendix 2 Adult Social Care Peer Review Improvement Plan

Background Papers

[Care Quality Commission \(CQC\) Assessment Framework for Local Authorities](#)

Consideration by any other Council Committee, Scrutiny or Advisory Panel

No

Council Approval Required

No

Exempt from the Press and Public

No

Adult Social Care Peer Review – January 2025

1. Background

1.1 From April 2023, The Health and Care Act 2022 gave the Care Quality Commission (CQC) new regulatory powers to undertake independent assessment of local authorities' delivery of regulated care functions as set out in Part 1 of the Care Act 2014. Local authorities will be assessed against four domains:

- i.) Working with people
- ii.) Proving support
- iii.) How the local authority ensures safety
- iv.) Leadership

1.2 The CQC Assessment Framework focuses on:

- Delivering and commissioning high-quality services which enables individuals to achieve their outcomes and live their best life
- Working effectively with partners in an integrated way
- Making a positive impact on the lives of people with care and support needs and their carers
- Delivering services which are compliant with legislation.

1.3 Each local authority receives a rating of their assurance ranging from inadequate, through to requires improvement, good or outstanding.

1.4 The CQC has committed to inspecting all 152 Local Authorities by December 2025. The outcome reports of these inspections are published on their website.

1.5 To ensure that the Council and Adult Social Care are appropriately prepared for assurance, the Association of Directors of Adult Social Services (ADASS) were commissioned to conduct a peer review in January 2025.

1.6 The ADASS Peer Review, followed on from the LGA Peer Review in December 2023 to evidence and understand how well Adult Social Care was delivering on its improvement journey.

1.7 Since the Peer Review, the Council received CQC notification and the inspection took place week commencing 14 July 2025. The Council is not yet aware of the outcome and is awaiting the inspection report.

2. Key Issues

2.1 The ADASS Peer Review took place from 22 – 24 January 2025 and focussed on the following key lines of enquiry (KLOEs):

Theme 1: How Rotherham Council Works with People. *This theme covers Assessing needs, Supporting People to Live Healthier Lives, Equity in Experience and Outcomes.*

The peer team were asked to explore:

- how the council actively seeks feedback and listens to people about their experience or outcomes, with a focus on those most likely to experience inequality
- whether the council tailors support to ensure the person can be fully engaged in the social care process with systemic barriers removed to enable full participation / lead their support
- if there are further areas of improvement the council can make in how it ensures accessibility to its services – from information, web and the assessment process through to the provision and review of care and support arrangements

Theme 2: How Rotherham Council Provides Support. *This theme covers Care Provision, Integration and Continuity, and Partnerships and Communities.*

The peer team were asked to explore the extent to which the council can evidence that it responds to the needs of communities within its commissioning and procurement activities including:

- the robustness of the council's Market Position Statements
- the council's assessment of sufficiency within the market – does it reflect the level of need (market management)
- whether the council is harnessing strategic insights which enable the peer team to drill down into the following specific areas –learning disability micro enterprises, carers services, the Voluntary and Community Sector
- the council's use of strategic commissioning to inform tactical commissioning activities.

Theme 4 Leadership. *This theme covers Governance Management and Sustainability and Learning, Improvement and Innovation.*

The leadership theme focussed predominantly, although not exclusively, to the quality statements outlined in Theme 1 and Theme 2.

2.2 The peer team identified 10 key messages during the review period (Appendix 1):

1. There is strong political and corporate support for adult social care and confidence in the adult social care leadership team to deliver.
2. Relationships with partners remain strong and are demonstrated through the work of the Safeguarding Adults Board, the shared commitment to

continued investment in prevention, and health partnerships (amongst many examples).

3. There is evidence that a person-centred and strengths-based approach is becoming increasingly embedded.
4. Colleagues spoke positively about access to learning and development opportunities and the investment in the learning and development team.
5. There is a robust approach to quality and risk management, with providers appreciating the benefit of high challenge, high support.
6. You recently achieved zero delays for home care. There is good capacity for supported living for some people.
7. You should be celebrating more, the good work that is happening.
8. There is a robust assurance and performance system in place. More focus needs to be given to articulating the outcomes and experience of people.
9. There is further work to do to ensure the voice of people with lived experience is embedded in the day-to-day work of the department as well as change initiatives.
10. Recruitment and retention continues to be a challenge with high agency use in some teams and across provider services. There are however efforts to reduce the use of agency staff and the people who work here are committed and proud to work in Rotherham.

2.3 The peer team identified the following areas for improvement (Appendix 1):

- There was minimal evidence in some cases of conversations that explored a range of options with the person.
- Support for carers mainly involved signposting and some assessments were more focussed on the cared for person.
- The safeguarding triage process was not applied effectively in one case i.e. it was identified late in the process that the person had no care and support needs.
- In one case there was a question about whether the Mental Capacity Act had been appropriately applied
- Availability of support for people with complex needs and carers.
- Better understanding of co-production vs consultation and of the impact on people when there are changes to services or support.
- More work is needed to develop tactical commissioning approaches to ensure personalised care and support needs can be met.
- Direct payments is limiting options for support and more work is needed to commission a more diverse range of options.

- There is more work to do to map and understand the full range of preventative support available. It was acknowledged that this was being progressed.
- Ensure consistent application of the three-stage test within safeguarding concerns.
- Embed the voice of the person in the work of the Safeguarding Adults Board and to articulate the connection between the work of the board and impact and outcomes for people.
- Referrals for transition cases should be processed earlier.
- The service should consider ways to further understand barriers and challenges to recruitment by engaging with the existing and potential workforce.
- More work was needed to better understand and address reasons where there is a lack of staff engagement, such as in staff surveys.
- The service should further consider ways to allow and enable changes to fully embed and be evaluated in terms of impact.
- There should be a greater focus on celebrating and articulating the great work that is happening and the positive impact and outcomes for people.

2.4 The peer team identified the following areas of strength (Appendix 1):

- There was a good sense of the person and their voice in cases relating to older people and learning disability.
- A strengths-based approach was evident across most of the cases reviewed.
- There was evidence of outcomes and risk being considered at the beginning of the safeguarding process
- A whole market approach is promoted through the market position statement, which is regularly updated and market shaping activity, including the annual cost of care exercise, was reported to be stabilising gaps in the market.
- Commissioners work closely with housing and operational social care teams, and there are integrated commissioning arrangements with health through the Better Care Fund including joint posts.
- Greater flexibility in the use of home care provision has helped to stabilise the home care market and achieve zero waits for service.
- There is robust quality and risk monitoring and market management, and a strong relationship between commissioning and quality team.
- The peer team met with several people with lived experience who provided positive feedback about the impact of support and services on their lives. Services such as, Wellgate, Rotherham Sight and Sound, and Direct Payments offering choice and control. Similarly older people were positive about the care and support they received at Bakers Field (extra care facility) and Davies court (respite and intermediate care facility).
- There is evidence of strong partnerships at all levels and across all sectors.
- The occupational therapy service is a great example of an integrated team.
- The Safeguarding Adults Board is working effectively in partnership to safeguard people.

- There is a very robust system of assurance with oversight at a very senior level and shared accountability and responsibility.
- Practitioners feel well supported with risk management processes by senior managers; and each other.
- There is strong partnership working between practitioners to safeguard people.
- There are particularly strong links with housing who provide a timely response to risk.
- There are good outcomes for some people with complex lives
- There is a timely and coordinated response to organisational safeguarding.
- Adult social care continues to be well led with a strong and committed leader, chief executive officer and lead cabinet member who understand and support adult social care. The adult social care senior leadership team continue to be valued for their visibility and stability of leadership
- There is a good line of sight from the principal social worker to the director of adult social services and the principal social worker feels heard and able to influence change.
- There is good access to learning and development opportunities across all services along with a range of career development opportunities such as advanced practitioner, apprenticeships, and support for newly qualified social workers.
- A willingness to try new things and continuously develop and learn provides confidence in the direction of travel.

2.5 Adult Social Care have developed an improvement plan to ensure it celebrates its areas of strength and address the areas for improvement so that residents continue to have an improved customer experience (Appendix 2).

2.6 The improvement plan is themed by the domains within the CQC Assurance Framework:

- **Working with People**

This theme includes six recommendations covering areas such as improvements to pathways, more timely decision making, clarity on our duty function and ensuring face-to-face support is the default approach to delivering services.

- **Providing Support**

This theme includes four recommendations covering areas such as tactical commissioning, ensuring a true focus on co-production and exploring further opportunities to address gaps within the care sector.

- **Ensuring Safety**

This theme includes three recommendations relating to consistent application of the 3-stage test in safeguarding, earlier referral for transition

assessments and strengthening the voice of the person within the work of the Safeguarding Adults Board.

- **Leadership**

This theme includes four recommendations relating to strengthening the engagement of the workforce, managing the level and frequency of change, understanding the barriers and challenges to recruitment and developing a greater focus on celebrating the great work that is happening.

- 2.7 The improvement plan will be assured through the Adult Social Care Regulatory Assurance Board which meets monthly.

3. Options considered and recommended proposal

- 3.1 Health Select Commission note the outcome of the ADASS Peer Review.
- 3.2 Health Select Commission offer any further recommendations for addressing the areas for improvement within the improvement plan.

4. Consultation on proposal

- 4.1 The peer team were then onsite for three days holding interviews, focus groups, and discussions to understand the adult social care department and to develop feedback and recommendations through triangulating the evidence presented. All information collected as part of the onsite activity was done so on a non-attributable basis to promote an open and honest dialogue.
- 4.2 The peer team:
- completed twelve case file audits
 - held interviews and discussions with around 150 people across adult social care, partners and people with lived experience
 - spent around 200 hours with the council and as part of reviewing the submitted evidence file.

5. Timetable and Accountability for Implementing this Decision

- 5.1 It is anticipated that the Adult Social Care Improvement Plan will be delivered in full by April 2026.

6. Financial and Procurement Advice and Implications

- 6.1 There are no immediate financial implications from this report.

7. Legal Advice and Implications

- 7.1 There are no direct legal implications to this report.

8. Human Resources Advice and Implications

8.1 There are no HR implications associated with this report.

9. Implications for Children and Young People and Vulnerable Adults

9.1 The Peer Review was inclusive of young people preparing for adulthood, to ensure that all young people:

- Grow up prepared for the future.
- Have improved health and wellbeing.
- Are able to exercise control over the support they receive.
- Are able to receive support locally from a range of services that everyone values.
- Have an opportunity to have their own 'front door'.
- Can access the right support in the right place, based on where the young person lives.

10. Equalities and Human Rights Advice and Implications

10.1 The proposals in this report support the Council to comply with legal obligations encompassed in the:

- Human Rights Act (1998), to treat everyone equally with fairness dignity and respect with a focus on those who are disadvantaged as a result of disability and;
- Equality Act (2010) to legally protect people from discrimination in the wider society.

10.2 All developments identified within the improvement plan will be subject to a full and detailed Equality Impact Analysis where required.

11. Implications for CO₂ Emissions and Climate Change

11.1 There are no implications for CO₂ emissions or climate change directly arising from this report.

12. Implications for Partners

12.1 All relevant partners and key stakeholders including health, voluntary sector and other internal council departments, are actively engaged in delivery of the improvement plan and ensuring the service is ready for assurance.

13. Risks and Mitigation

13.1 **Risk:** Non-delivery of the improvement plan for Adult Social Care could present reputational, financial, regulatory and safeguarding risks.

13.2 **Mitigation:** Delivery of the improvement plan will be monitored and assured at the Adult Social Care Regulatory Assurance Board monthly.

Accountable Officer(s)

Ian Spicer, Strategic Director, Adult Care, Housing and Public Health

Approvals obtained on behalf of:

	Name	Date
The Strategic Director with responsibility for this report	Ian Spicer, Strategic Director of Adult Care, Housing and Public Health	09/07/25
Consultation undertaken with the relevant Cabinet Member	Cabinet Member for Adult Social Care and Health – Councillor Baker- Rogers	02/07/25

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