

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

Audit Committee – 18<sup>th</sup> August 2020

**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:**

Judith Hurcombe – Interim 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 November 2019
- 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 18<sup>th</sup> June 2019 and 26<sup>th</sup> November 2019.

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

None

**Council Approval Required**

No

**Exempt from the Press and Public**

No

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

### **1. Background**

- 1.1 In line with the Audit Committee terms of reference, the purpose of this report is to provide details of 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 26<sup>th</sup> November 2019. The report referred to:
- Eight external inspections, reviews and audits that had taken place since 18<sup>th</sup> June 2019 resulting in 11 recommendations
  - Six ongoing recommendations in relation to external inspections, reviews and audits that took place prior to June 2019.
- 1.3 This 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.

### **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 26<sup>th</sup> November 2019 seven external inspections, reviews and audits have taken place and three recommendations made which have all been implemented.
- 2.3 In addition, seven of the ongoing recommendations relating to external inspections, reviews and audits that took place prior to November 2019 have now been implemented, 15 remain outstanding/ongoing and one does not require implementation.
- 2.4 An update from each Directorate is provided below.

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

- 3.1 One peer review has taken place since the last report and no recommendations were made. Further details are provided below, see paragraph 3.7.
- 3.2 In relation to outstanding recommendations concerning external inspections, reviews and audits that took place prior to November 2019, four recommendations have been implemented since the last report and five remain outstanding.

- 3.3 The four recommendations implemented since the last report relate to the troubled families visit in June 2019 conducted by the MHCLG.
- 3.4 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. Progress against the recommendations is managed through the CYPS Improvement Plan and overseen by the CYPS Performance Board.
- 3.5 In addition to the above, in the November 2019 report it was reported that an inspection of Liberty House had taken place in October 2019. Although initial feedback indicated that the home had successfully improved in all areas, the Council was awaiting the final report. This has since been received with an overall outcome of “outstanding” with no recommendations.
- 3.6 The table below provides a summary of new external inspections, reviews and audits and those reported previously which had outstanding/ongoing recommendations.

<b>New</b> external inspections reviews and audits					
Title	Date	Outcome	Number of recommendations	Number implemented	Status
SEND Association of Directors of Children's Services (ADCS) Peer Review	March 2020	This was not a formal inspection and there was no formal published outcome. Feedback was provided in a letter which highlighted over 200 strengths, along with 23 areas for consideration.	0	n/a	<b>No formal recommendations</b>  Further update available below, see paragraph 3.7

<b>Ongoing</b> 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	3, these include:  1. The quality and consistency of written planning, so that it matches up to social workers' verbal accounts of their plans  2. Sufficiency of in-house options, to avoid the use of unregulated	0	0	<b>3 recs outstanding</b>  Actions progressed to address the recommendations , however work paused due to Covid-19 to enable key staff to focus on safeguarding and

			placements when finding places for children in care to live  3. Quality of Risk assessments, where risk has potential implications for stability in the lives of children in care.			supporting our families.  Planning to complete the work in the final quarter of 2020/21.
Troubled Families <i>(Ministry of Housing, Communities and Local Government)</i>	July 2019	Feedback extremely positive and 6 recommendations made, which included a recommendation to enhance systems.	6	0	4	<b>Partially complete (4 complete and 2 outstanding)</b>  Outstanding recommendations include: <ul style="list-style-type: none"> <li>• Align better Troubled Families data with the Corporate Context</li> <li>• Review the strategic engagement with the Job Centre Plus.</li> </ul>

### 3.7 SEND ADCS Peer Review

3.7.1 A peer review took place in March 2020 conducted by The Association of Directors of Children's Services.

3.7.2 Although there were no formal recommendations, 23 areas for consideration were identified. The key headline areas for consideration included:

- More links to the broader system including public health, early help, adult service and social care
- Ensure that the needs of children with neuro-developmental difficulties are met
- Develop a clearer exposition of the impact of activity.

3.7.3 The areas identified for consideration will be actioned through three key action plans – the SEND Service Plan, the Neuro-Developmental Pathway Action Plan, and the Social, Emotional and Mental Health Strategy Action Plan.

3.7.4 The SEND Strategic Board oversees the development on all key actions. In addition, the Place Board receives spotlight updates and provide system oversight, support and challenge.

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

4.1 One external peer review and one audit has taken place since the last report and three recommendations were made which have been implemented.

4.2 In relation to outstanding recommendations concerning external inspections, reviews and audits that took place prior to November 2019, no recommendations have been implemented since the last report and two remain outstanding.

4.3 The two outstanding recommendations relate to:

- CQC inspection of Parkhill Lodge and the medium-term plan to look for alternative premises. The Adult Social Care Directorate Leadership Team are responsible for overseeing implementation.
- Fire Risk Assessments of Housings Hampstead Green, Doncaster Road and Eastwood View flats by South Yorkshire Fire and Rescue Service a Fire Risk Assessment Audit. Work to expand the alarm system and reconfigure the sounders was completed in March 2020. The sprinklers and tanks are to be fitted from 21<sup>st</sup> July 2020 and it estimated that this work will be completed by August 2020. The Housing Service’s Contracts, Investments and Compliance (CIC) Management Team are responsible for overseeing implementation.

4.4 The table below provides a summary of new external inspections, reviews and audits and those reported previously which had outstanding/ongoing recommendations.

New external inspections reviews and audits					
Title	Date	Outcome	Number of Recommendations	Number Implemented	Status
Rotherham Adult Social Care Peer Review Self-assessment (Yorkshire and Humber ADASS)	12 <sup>th</sup> – 14 <sup>th</sup> February 2020	Awaiting final report	Not yet known	n/a	Awaiting final report  See paragraph 4.5 below.
Repairs & Maintenance Cost Collection Workbook Audits (Docte Consulting)	2nd - 13th March 2020	Direct costs are being robustly allocated to the contract.	3	3	<b>Recommendations implemented</b>  All recommendations incorporated into the new Repairs and Maintenance contract which went live in April 2020.

<b>Ongoing</b> 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	
Adult Social Care – Inspection of Parkhill Lodge (CQC)	24 <sup>th</sup> 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	<b>Partially complete</b> (1 complete and 1 outstanding)  Medium term plan for Parkhill Lodge is to look for alternative premises.
Housing - Fire Risk Assessment Audit ( <i>South Yorkshire Fire and Rescue Service</i> )	August 2017	Standards for fire safety are met at Doncaster Road and Eastwood view flats.  Work underway at Hampstead Green	4	3	0	<b>Partially complete</b> (3 complete and 1 outstanding)  The alarm system has been expanded and sounders reconfigured - March 2020.  Sprinklers and tanks to be fitted from 21 <sup>st</sup> July 2020 - August 2020.

#### 4.5 Rotherham Adult Social Care Peer Review Self-assessment

4.5.1 The Adult Social Care Peer Review Self-assessment took place on 12<sup>th</sup> – 14<sup>th</sup> 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 for adults who use our services. A draft report has been received, initial feedback was positive and identified some areas to reflect on over the next 12 months. The final report is expected later in the summer and has been delayed due to the COVID-19 outbreak. A further update will be provided to Audit Committee in the next report.

#### 4.6 Repairs & Maintenance Cost Collection Workbook Audit

4.6.1 An audit of the repairs and maintenance costs collection workbook took place between 2<sup>nd</sup> – 13<sup>th</sup> March, conducted by Docte Consulting. The outcome of the

audit stated direct costs were being robustly allocated to the contract and 3 recommendations were made, these included:

- Address the allocation of central overheads
- Address the lack of credits for remedial/ defective work
- Develop an audit plan incorporating more regular audits.

4.6.2 All recommendations are complete and were incorporated into the new repairs and maintenance contract which went live in April 2020.

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

5.1 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 November 2019, one recommendation has been implemented since the last report, eight remain outstanding and one does not require implementation.

5.3 The recommendation implemented related to the Libraries Peer Challenge and engaging with staff to develop a new vision for the service and future.

5.4 The eight outstanding recommendations relate to the Libraries Peer Challenge and an action plan has been completed for all outstanding recommendations, although progress has been impacted due to the Covid-19 crisis. Implementation will be overseen by the Culture, Sport and Tourism Senior Management Team.

5.5 One recommendation which no longer requires implementation related to the Environment Agency compliance audit of the heat/cooling system at Riverside House, inspected by the Environment Agency in January 2017. The recommendation suggested that a replacement meter was fitted with a combined flow rate and totaliser display. However, decision was made not to replace the meter as the volume is calculated using a formula and the work would not be cost effective.

5.6 The table below provides a summary of new external inspections, reviews and audits and those reported previously which had outstanding/ongoing recommendations.



<b>Ongoing</b> 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	19th-20th June 2019	<ul style="list-style-type: none"> <li>Libraries in Rotherham valued asset</li> <li>Enthusiasm and recognition of the role libraries could play in delivering the wider council objectives within community</li> <li>Strong political commitment</li> <li>Impressed by the managers, staff and volunteers met with</li> <li>Vision but not a shared vision and was not always clearly visible to staff and wider partners</li> </ul>	9	0	1	<p><b>Partially complete</b> (1 rec implemented; 8 recs outstanding)</p> <p>1 complete – engaged with staff to develop a new vision.</p> <p>8 outstanding - action plan developed; implementation delayed due to the Covid-19 response.</p>
Compliance audit against environmental permit Licence – Ground source heat/cooling system Riverside House (Environment Agency)	January 2017	Recommended that when a replacement meter was required, one with a combined flow rate and totaliser display was fitted.	1	0	0	<p><b>0 outstanding</b></p> <p>Decision made not to replace the metre - not required as a formula used to calculate the volume and therefore upgrade would not be cost effective.</p>

## 6. Finance and Customer Services

- 6.1 Three new audits have taken place since the last report and no recommendations have been made.
- 6.2 In addition, 2 recommendations have been completed since the last report which relate to an audit of the accounts for 2018/2019 which took place previously. Although complete continuous assessment and monitoring in relation to the recommendations will remain ongoing. There are no outstanding recommendations.
- 6.3 The table below provides an overall summary of new external inspections, reviews and audits and those reported previously which had outstanding/ongoing recommendations.

New external inspections reviews and audits					
Title	Date	Outcome	Recommendations	Number Implemented	Status
External Audit of Teachers Pensions (KPMG)	November 2019	Clean audit	0	N/A	No recommendations
External Audit of Pooling of Housing Capital Receipts (Grant Thornton)	Jan/Feb 2020	Clean audit	0	N/A	No recommendations
External Audit of Housing Benefits (Grant Thornton)	Jan/Feb 2020	Clean audit	0	N/A	No recommendations

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	
External Auditor's Report on the Accounts 2018/2019 (Grant Thornton)	June – July 2019	Unqualified (clean) opinion issued	2, these included: <ul style="list-style-type: none"> <li>• Delivery of 2019-20 budget, savings plan and achievement of Medium-Term Financial Strategy (MTFS)</li> <li>• Dedicated Schools Grant reserve deficit and Recovery Plan.</li> </ul>	0	2	Complete – although continuous assessment and monitoring in relation to the recommendations will remain ongoing.

## 7. Assistance Chief Executive

- 7.1 A review of the Big Hearts, Big Changes programme took place on 21<sup>st</sup> – 22<sup>nd</sup> 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. The findings are expected to be received shortly and an update will be provided in the next report.
- 7.2 There are no outstanding recommendations which related to external inspections, reviews and audits which took place previously.

7.3 The table below provides an overall summary of new external inspections, reviews and audits.

<b>New external inspections reviews and audits</b>					
<b>Title</b>	<b>Date</b>	<b>Outcome</b>	<b>Recommendations</b>	<b>Number implemented</b>	<b>Status</b>
Review of the Big Hearts, Big Changes Programme (LGA)	21 <sup>st</sup> – 22 <sup>nd</sup> July 2020	Awaiting feedback	Awaiting feedback at time of writing	n/a	Awaiting final 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 November 2019
- 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.

## **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 as a result of the work 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)**

Judith Hurcombe, Interim Assistant Chief Executive

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

Judith Hurcombe, Assistant Chief Executive

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