Adult Social Care and Health Overview and Scrutiny Committee

A meeting of the Adult Social Care and Health Overview and Scrutiny Committee will be held at the Council Chamber, The Forum, Towcester, NN12 6AD on Tuesday 27 June 2023 at 6.00 pm

Agenda

1.	Apologies for Absence and Notification of Substitute Members				
2.	Declarations of Interest				
	Members are asked to declare any interest and the nature of that interest which they may have in any of the items under consideration at this meeting.				
3.	Chair's Announcements				
4.	Minutes from People Overview & Scrutiny Committee (Pages 5 - 16)				
	To approve the minutes from the final People Overview & Scrutiny meeting on 3 May 2023.				
5.	Integrated Care Across Northamptonshire (iCAN) (Pages 17 - 26)				
	The Committee to consider: a) An update from the Task and Finish Panel formed to scrutinise progress with the iCAN programme				
	b) Future direction of iCAN				
6.	CQC Inspection of Adult Social Care - Preparation (Pages 27 - 64)				
	The Committee to provide scrutiny input and constructive challenge regarding West Northamptonshire Council's self-assessment for the CQC inspection.				
7.	People Overview and Scrutiny Committee Annual Report 2022/23 (Pages 65 - 74)				

	To consider and approve the Annual Report on activity by the Committee in 2022/23 to be presented to Full Council.				
8.	Draft Committee Work Programme 2023/24 (Pages 75 - 88)				
	To review and approve the Committee Work Programme for 2023/24.				
9.	Urgent Business				
	The Chair to advise whether they have agreed to any items of urgent business being admitted to the agenda.				

Catherine Whitehead Proper Officer 19 June 2023

Adult Social Care and Health Overview and Scrutiny Committee Members:

Councillor Rosie Herring (Chair) Councillor Nick Sturges-Alex (Vice-Chair)

Councillor Rufia Ashraf

Councillor Raymond Connolly

Councillor Raymond Connolly

Councillor Daniel Cribbin

Councillor Greg Lunn

Councillor Wendy Randall

Councillor Emma Roberts

Information about this Agenda

Apologies for absence and the appointment of substitute Members should be notified to democraticservices@westnorthants.gov.uk prior to the start of the meeting.

Declarations of Interest

Members are asked to declare interests at item 2 on the agenda or if arriving after the start of the meeting, at the start of the relevant agenda item

Local Government and Finance Act 1992 – Budget Setting, Contracts & Supplementary Estimates

Members are reminded that any member who is two months in arrears with Council Tax must declare that fact and may speak but not vote on any decision which involves budget setting, extending or agreeing contracts or incurring expenditure not provided for in the agreed budget for a given year and could affect calculations on the level of Council Tax.

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If you have any queries about this agenda please contact James Edmunds / Maisie McInnes, Democratic Services via the following:

Tel: 07500 605276

Email: democraticservices@westnorthants.gov.uk

Or by writing to:

West Northamptonshire Council
One Angel Square
Angel Street
Northampton
NN1 1ED





People Overview and Scrutiny Committee

Minutes of a meeting of the People Overview and Scrutiny Committee held at the Jeffrey Room, The Guildhall, St Giles Street, Northampton NN1 1DE on Wednesday 3 May 2023 at 6.00pm.

Present:

Councillor Rosie Herring (Chair)

Councillor Harry Barrett

Councillor Imran Ahmed Chowdhury BEM

Councillor Raymond Connolly

Councillor Greg Lunn

Councillor Emma Roberts

Councillor Janice Duffy

Councillor Sue Sharps

Councillor Nick Sturges-Alex

Councillor Mike Warren

Apologies for Absence:

Councillor Rufia Ashraf

Councillor Fiona Baker, Cabinet Member for Children, Families and Education

Officers:

Jo Barrett, Assistant Director Housing and Communities Stuart Lackenby, Executive Director People Services Dawn Eckersley, Interim Head of Housing Strategy and Partnerships Neil Morland, Consultant, Neil Morland & Co. Housing Consultants Rebecca Wilshire, Deputy Director of Children's Services James Edmunds, Democratic Services Assistant Manager Diana Davies, Democratic Services Officer

One member of the public was also in attendance.

100. Apologies for Absence and Notification of Substitute Members

Apologies for absence were received from Councillor Ashraf and from the Cabinet Member for Children, Families and Education. Apologies for lateness were received from Councillor Barrett.

101. **Declarations of Interest**

The Chair declared in relation to the agenda item on the West Northamptonshire Anti-Poverty Strategy that she was appointed by West Northamptonshire Council (WNC) as a board member of the South Northants Volunteer Bureau.

Councillor Roberts declared in relation to the agenda item on the West Northamptonshire Anti-Poverty Strategy that she was:

- Chair of Food Aid Far Cotton
- A board member of Food Aid Alliance West
- Due to become a board member for the Community Training Partnership contract to be delivered by the Community Law Service.

102. Notification of requests from Members of the Public to address the Meeting

A request to address the meeting on the agenda item on Fostering Services in West Northamptonshire had been received from Mrs Jean Lineker.

At the Chair's invitation Mrs Lineker addressed the meeting and made the following points:

- She was speaking both as a former looked after child who had been abused by a family member and as a former foster carer.
- Children who had been taken into care should not be returned to their birth parents if they were abusive.
- Foster parents needed to be given appropriate access to a child's health records.
- There needed to be enough social workers to support children in foster care.
 Their care was also affected if the social worker supporting a child changed repeatedly.

The Chair noted that Mrs Lineker had highlighted some important issues. WNC was committed to ensuring that services were informed by the voice of the child and was also working to address matters such as continuity of social worker support and access to health records.

103. Minutes

RESOLVED: That the People Overview and Scrutiny Committee agreed the minutes of the meeting on 21 February 2023 as an accurate record.

104. Chair's Announcements

The Chair welcomed all those present and made the following points:

- Committee members were thanked for accommodating the change of meeting date from 24 April 2023, when the Chair would not have been able to attend.
- This was the final meeting of the current Committee after two years that seemed to have passed very quickly. Committee members were thanked for all their hard work during this period.
- The report of the scrutiny review on child and adolescent mental health and the risk of self-harm had been presented to the Cabinet meeting on 7 March 2023. The Cabinet had welcomed the recommendations and undertook to review them and respond with proposals at a future meeting. The Chair hoped that the new Children, Education and Housing Overview and Scrutiny Committee would ensure that work on this issue was progressed.

105. West Northamptonshire Council Housing Allocations Policy

The Assistant Director Housing and Communities advised that WNC was currently working to develop a single Housing Allocations Policy to replace those of the predecessor authorities. The Consultant supporting this work then presented an overview of the legal requirements and local considerations, highlighting the following points:

- The Housing and Regeneration Act 2008 defined social rented housing as homes for rent, sale and shared ownership at sub market rates for people whose needs could not be met by the commercial housing market.
- All local authorities were required to operate a scheme for the allocation of social rented housing regardless of whether they still owned and managed housing stock. WNC was in the position of having transferred stock in some parts of the authority but not in others.
- Social rented housing could only be allocated to people who had a permanent right to reside in the UK. Local authorities were also required to give priority to specified circumstances, including people who were homeless or who needed to move on medical or welfare grounds.
- Beyond the specified requirements local authorities had the flexibility to
 determine qualification criteria and arrangements for allocating housing that best
 suited the area. Arrangements should reflect the priorities of local homelessness
 and tenancy policies and also provide a seamless service covering both the local
 authority and social landlords.
- WNC still owned around 11,500 social rented homes, which were managed by Northamptonshire Partnership Homes (NPH). NPH had previously administered housing allocation functions in the former Northampton Borough area, whereas they had been administered in-house in Daventry and South Northamptonshire. South Northamptonshire Council had used a direct matching model whereas the other two predecessor authorities had used a choice-based lettings approach.
- WNC now needed to develop and implement a common authority-wide model that used common processes and IT systems.
- Demand for social rented housing from 1987 to 2022 showed peaks and troughs reflecting changes in national requirements. There was a steady upward trend over recent years but still below the peak level reached in 2008.
- There were around 26,000 social rented homes in West Northamptonshire of which 56 per cent were owned by housing associations. Two providers owned the majority of these.
- There were around 5,000 applicants on the housing register. Just under 50 per cent of these waited under a year to be allocated social rented housing.
- WNC needed to have new Housing Allocations Policy in place by 1 April 2024. Current work should result in the production of a draft scheme that could be scrutinised in June 2023 before seeking Cabinet approval in July for public consultation ahead of a final decision in November 2023.

The Committee considered the presentation. The Consultant provided additional information in response to points raised by members during the course of discussion as follows:

• Members of HM Forces and veterans were given specific additional priority regarding housing allocations by law, whilst local authorities could also choose to

- add to this. In practice, this involved a relatively small percentage of people on the housing register.
- The full draft pre-consultation Housing Allocations Policy should be available for consideration by Overview and Scrutiny in June 2023.
- Modern social rent housing consisted of general needs housing and supported housing for specific clients such as older people. There were two rates of rent, which were set by a national regulator: social rent at approximately 50 per cent of the market rate and affordable rent at approximately 80 per cent of the market rate. The new WNC Housing Allocations Policy would set out these differences clearly.
- The role of councillors in relation to housing allocations was to set the overall policy and to advocate for their constituents. Councillors were legally prohibited from having a more direct role in decisions or reviews relating to individual allocations. The process was subject to various oversight and complaints processes that should help to support its effectiveness.
- WNC would need to make arrangements for service officers to have access to professional advice on health conditions that could affect priority for housing allocations.

The Assistant Director Housing and Communities provided additional information in response to points raised by members during the course of discussion as follows:

- WNC was using external expertise to provide an independent third-party view about how best to deliver the housing allocations function in future. The Consultant had been engaged through a formal procurement process and offered the best value option.
- When new social housing was built the rent rate was generally set at a level that
 would pay back the capital cost over a certain period of time. It could be very
 challenging to change the rate at a later time. West Northamptonshire could
 benefit from having more properties available at social rent rates but this was
 challenging to achieve. WNC could consider these kind of issues as part of
 prospective work on its future tenancy strategy.
- Work on the development of the Housing Allocations Policy would include modelling the impact of different local choices and scenarios.
- WNC was currently operating two different legacy IT systems supporting housing allocation functions. Pragmatically, it was likely that the current work would result in one of these being adopted as the common system. WNC could then consider the best system to meet its overall needs in the longer term.
- The current work by WNC was informed by a good knowledge base, including knowledge of the experience of other local authorities that had made similar changes in the past.
- Service officers would liaise with Democratic Services concerning potential
 arrangements for scrutiny of the draft Policy ahead of the Cabinet meeting in
 July. The Cabinet Member for Housing, Culture and Leisure had also proposed
 that workshop sessions for all councillors on the development of the new Policy
 could be useful.

Members made the following points during the course of discussion:

• The development of the new Housing Allocations Policy represented a complex piece of work to a relatively tight timescale.

- Overview and Scrutiny should have the opportunity to carry out pre-decision scrutiny of the full draft Policy before it was agreed for public consultation.
- There was a significant issue in Northampton with homes that were occupied at a level that represented overcrowding in practice but was below the statutory definition of overcrowding. The Committee should recommend that work to develop the new Policy should explore the opportunity for WNC to apply a broader definition of overcrowding.
- WNC should adopt systems that would meet both its short- and long term needs as far as possible, to minimise the amount of change experienced by service-users. It was important to recognise that this was a function involving people.
- Councillors would benefit from having clear information about how the new Policy operated to use when helping constituents as part of the communications strategy supporting its implementation.

The Committee considered any recommendations regarding the development of the new Housing Allocations Policy that it wished to make at this point. The Committee was also invited to consider the opportunity to recommend to its successor that it agreed to carry out further scrutiny of this topic.

RESOLVED: That the People Overview and Scrutiny Committee:

- a) Recommended that work to develop the new Housing Allocations Policy explores the potential for West Northamptonshire Council to apply a broader definition of overcrowding than the statutory definition.
- b) Recommended that the relevant successor Overview and Scrutiny committee agrees to carry out pre-decision scrutiny of the draft Housing Allocations Policy.

106. Fostering services in West Northamptonshire

The Executive Director People Services advised that the agenda item was intended to set out the latest position on fostering services from WNC's perspective following the recent Ofsted inspection. Ofsted had done further work since that had not yet been published, although the item would give a sense of it.

The Deputy Director of Children's Services then presented an overview of the outcomes of the inspection and subsequent action, highlighting the following points:

- Fostering was subject to a separate inspection in Northamptonshire as there was an independent fostering agency (IFA). In the past fostering was included in general Ofsted inspections.
- The inadequate judgements by Ofsted in the 2023 inspection were clearly concerning.
- Ofsted had identified some areas of strength, including the progress being made by some children, the commitment shown by foster carers and supervising social workers, and good initiatives such as carer celebration days and the introduction of virtual reality training. However, there were issues with variability and consistency overall.
- A key area for development identified by Ofsted concerned the need for the IFA
 to have a standalone information and recording system, such as CHARMS. This
 would support better oversight of its effectiveness. This was now being
 addressed.

- Practice within the IFA needed to be more child-led and to focus more on the needs and progress of children rather than on those of carers.
- Children were seen by social workers but not by supervising social workers at the same time as they saw foster carers. This was now being addressed.
- Other areas for development identified by Ofsted included the information about a child's medical needs provided to foster carers; better safeguarding training; and better management of caseloads.
- Two improvement plans had been developed since the inspection and would be subject to robust oversight by a new West Northamptonshire Corporate Parenting Board. Action had been taken to improve IFA performance monitoring, review key policies and practice guidance and implement an audit programme.
- All children had been seen by a supervising social worker and were all safe.
- Most social workers in the IFA had undertaken safeguarding training and this was in-place for foster carers. There would be better tracking of training for both groups.
- Staff recruitment was continuing, including for supervising social workers.
- Ofsted had carried out a monitoring visit in April 2023 to check actions taken since the inspection. The findings had not yet been published but Ofsted had indicated that it had seen some improvements. Compliance notices would remain in place until a further visit in July 2023, which was not unusual.
- The key focus now needed to be on maintaining the focus on child-led practice and on regular oversight and assurance of overall progress. As recruitment progressed there could be more focus on retention existing staff.

The Executive Director People Services made the following points:

- WNC, North Northamptonshire Council and Northamptonshire Children's Trust (NCT) all agreed that it was not acceptable to have an IFA that was rated as inadequate. This was not a reflection of what social workers were doing on a daily basis but on the overall service.
- Fostering needed to be valued more in Northamptonshire than it had been previously, which would also contribute to reducing expenditure on out-of-county placements.
- The new West Northamptonshire Corporate Parenting Board would play a key role in overseeing the effectiveness of services and targeting improvement action.

The Committee considered the presentation. Members made the following points during the course of discussion:

- The IFA needed to be able to offer foster carers a good experience or they would take up the option of moving to an agency.
- NCT did not operate a traditional IFA-style model.
- There had been a significant change in information-recording requirements for foster carers in Northamptonshire. This was unreasonable as it could affect their legal protection.
- NCT was focussing on the Signs of Safety model but no training on this focussed on foster carers was available.
- The size of caseloads was a key issue as this would affect capacity to deal effectively with individual cases.

- Other local authorities were able to provide foster carers with a more bespoke training package that helped to attract them and enabled training to be pitched differently for the recipient's particular situation.
- Councillors needed to be able to take more confidence that current actions would achieve necessary outcomes and to know more about the timescales and costs involved. There should be a clear 'you said; we did approach' to responding to the Ofsted inspection.
- It was questioned why NCT had not been in a better position at the time of the Ofsted inspection: whether it had not anticipated the negative conclusions or had but thought performance would be rated higher.
- Overview and Scrutiny should play a part in ensuring that areas for development were being addressed effectively. Processes needed to ensure, for example, that the issue of children not being seen by supervising social workers did not reoccur.
- Consideration should be given to using resources spent on out-of-county placements for more residential provision if this would be beneficial.
- It was very concerning that some looked after children saw residential care as preferable to being in a family environment. This needed to be rebalanced.
- The number of young people now coming into care under section 20 of the Children Act 1989, because their parents could not cope or the young person requested it, was a concern and added to overall demand on the care system. There should be more support to prevent a situation reaching this point.
- The presentation showed a good understanding of the current situation and commitment to improve that could give councillors confidence.

The Executive Director People Services and the Deputy Director of Children's Services provided additional information in response to points raised by members during the course of discussion as follows:

- There were no plans at this point to have separate fostering services in the west and the north: it was oversight of the service that was being separated.
- There were 480 children in in-house foster placements and 346 children in agency placements in Northamptonshire. The average weekly cost of these placements was £328 and £945 respectively, which demonstrated the importance of maximising in-house capacity.
- Foster carers often received similar recompense from an agency as from an inhouse service. Agency overheads were what increased the cost.
- 16 fostering households was a typical average caseload for a supervising social worker. The IFA was currently above this but recruitment would help to address the situation.
- The organisation of the IFA was subject to the statutory direction that established NCT. The model could not be changed until services had achieved a 'good' rating from Ofsted. Even then, a decision to split up NCT would have a massive impact. It would be helpful to have a continuing dialogue with the Department for Education about the direction and long term vision for the children's trust model to reflect this.
- The way in which NCT had been created had tended to create barriers between it and the local authorities in the county. These were now being broken down again and there was a much stronger sense that the two local authorities needed to work with NCT to improve performance.

- Points raised concerning Signs of Safety training and information-recording for foster carers would be raised with NCT. The introduction of a CHARMS system would assist foster carers.
- Caseloads were sometimes lower for agencies than for in-house fostering as agencies covered a larger geographical area and so had to allow for more travel time.
- NCT had been anticipating a critical outcome from the 2023 Ofsted inspection but not to the degree that occurred. However, the need for better oversight of effectiveness had been addressed since the moment that Ofsted had left.
- WNC operated the Valuing Care project to look opportunities to step down care placements. It also worked actively with NCT on options for future residential care provision.
- There were currently approximately 1,200 children from Northamptonshire in residential care placements. The total had recently been at the lowest level seen for some time.
- NCT had a good education service that worked with young people to help them
 not to reach the point where they need to come into care. Decisions about taking
 a young person into care and when they could leave again should be subject to
 robust consideration. Young people remaining in care was more of an issue in
 Northamptonshire and was the focus of current work by NCT.
- Placements with wider family members were considered at an early stage. There
 could be more use of this approach in Northamptonshire but it was certainly
 used.

The Executive Director People Services highlighted the knowledge and influence that the Deputy Director of Children's Services had brought to WNC since taking up the role, which added to the oversight of children's services performance and development.

The Committee considered potential conclusions and further action on the item. The Committee was advised that any recommendations concerning future scrutiny of this topic could be made directly to the relevant Overview and Scrutiny committee. It was also highlighted that councillors who were not appointed to the new committee responsible for scrutinising children's services were still likely to have some opportunities to contribute to its work.

RESOLVED: That the People Overview and Scrutiny Committee recommended that the relevant successor Overview and Scrutiny committee should seek to consider the following matters relating to provision for children in care:

- The quality assurance framework and processes put in place to support effective operation of fostering services in future
- The outcomes delivered by the Valuing Care project on opportunities to step down care placements
- An overview of the operation of the multi-agency referral panel and of the decision-making panel for children entering local authority care, to include data on caseloads, decisions and the outcomes for young people
- Data on the number of children in care from West Northamptonshire, broken down by relevant factors

 An outline of any discussions between the Northamptonshire local authorities and the Department for Education about the long term future direction for the Northamptonshire Children's Trust organisational model.

107. West Northamptonshire Anti-Poverty Strategy

The Executive Director People Services presented an overview of progress with the delivery of the Anti-Poverty Strategy in the year following its adoption, highlighting the following points:

- The experience so far of implementing the Strategy validated the cross-party, multi-agency approach that had been used to develop it. However, there were further opportunities to broaden engagement that still needed to be taken.
- The Strategy identified three priorities: supporting people who were already in poverty; preventing people from falling into poverty; and influencing the government and national bodies to get a better deal for communities in West Northamptonshire. Performance so far against the first priority had been good but was not matched by that against the second. Work in the first year had been more reactive than proactive.
- The principle of establishing a true partnership between WNC, voluntary and community sector (VCS) organisations and other relevant bodies had been key to the progress made in the past year. So far the resources supporting the Strategy had come from the Household Support Fund, Public Health grant and VCS goodwill. This needed to be augmented in future to reduce reliance on WNC.
- Supporting people to get out of poverty was a long term process but work under the Strategy still needed to move to a more proactive approach. The provision of immigration support and advice would be one of the first areas of proactive work that should make a difference.
- The Household Support Fund (HSF) had worked well in West Northamptonshire, with good engagement in shaping schemes before decisions on implementation were taken. The relatively short previous schemes had been challenging and it was positive that the latest scheme HSF-4 allocated funding for a year.
- More work needed to be done to analysis previous HSF schemes to understand, for example, why people who had received food vouchers from VCS organisations under HSF-3 had needed them.
- The change to an annual funding allocation for HSF-4 would require a more sophisticated approach to communications and marketing, including to ensure that funding was not all used before the winter. This would be supported by the Community Training Partnership to provide training for frontline workers and volunteers on the key social welfare issues in West Northamptonshire.
- The 52,932 attendances at Warm Welcoming Spaces provided during January –
 March 2023 represented a massive number. This data needed to be properly
 understood and used to inform future work. However, it should also be
 recognised that this provision had enabled 3,371 people who might otherwise
 have been missed to be referred on to wrap around services.
- The implementation of an emergency debt and money advice service from early summer 2023 was another example of more proactive work under the Strategy.
- The development of immigration support and advice was a key area for the future, as people with no recourse to public funds were at higher risk of experiencing poverty. A hub and spoke delivery model would be used to

- enhance capacity. There would also be a focus on maximising resources available to the local area, for example, by addressing the situation that undocumented children did not receive the pupil premium.
- The Strategy now required a revised action plan setting out how partners could better deliver the priority to prevent people from falling into poverty. Overview and Scrutiny could contribute to this by providing constructive challenge about whether the collective resources of West Northamptonshire were being mobilised as fully as possible.

The Committee considered the presentation and members made the following points during the course of discussion:

- The Executive Director was thanked for the honest picture given. WNC had so
 far been able to support the Strategy using significant funding received from the
 government, although the WNC staff and VCS partners involved deserved credit
 for the way this had been deployed.
- Consideration should be given to staggering the use of HSF-4 funding. This
 could also be the last scheme to provide holiday food support and WNC might
 need to build funding into the base budget in future.
- It would be useful to have more information breaking down the 52,932 attendances at Warm Welcoming Spaces and whether any of these Spaces had evolved from an emergency provision into more permanent community hubs or facilities.
- The size and purpose of the Anti-Poverty Strategy oversight group could be reviewed with a view to maximising its effectiveness.
- The work done so far under the Anti-Poverty Strategy and the approach taken by the WNC Cabinet Member for Adult Care, Wellbeing and Health Integration were generally welcome.

In response to a question the Executive Director People Services advised that the distribution of HSF-4 funding would be the subject of an individual decision by the Leader of the Council due to the cancellation of the Cabinet meeting in May. Members expressed concern at this approach, given that £5.19m funding was involved.

RESOLVED: That the People Overview and Scrutiny Committee requested a response to the question of why the distribution of Household Support Fund 4 funding needed to be determined by an individual decision by the Leader of the Council rather than by the Cabinet.

108. Review of Committee Work Programme

The Chair introduced the report setting out the Committee's current work programme and highlighted the following points:

- The Committee had already made various recommendations at the current meeting about potential topics for scrutiny by the new Overview and Scrutiny committees that WNC was establishing for 2023/24. The Committee could consider doing the same with any matters included in its work programme.
- Northamptonshire Healthcare NHS Foundation Trust (NHFT) had just sent its draft Quality Report 2022/23 for comment by the Committee. The Chair proposed that the draft be circulated to Committee members so that any

comments could be fed back and incorporated into a response from the Chair. The Chair intended to highlight issues about access to CAMHS services identified during the scrutiny review of child and adolescent mental health and the risk of self-harm.

• The Chair had also been alerted to current consultation on local services providing short breaks for children and young people with disabilities as a potential area of interest for the Committee. In the current circumstances, councillors would need to respond to this individually.

The Democratic Services Assistant Manager provided further information about the purpose of Quality Reports, the opportunity for the local authority health Overview and Scrutiny functions to comment on them, and the timescale for doing this.

The Executive Director People Services advised that short break services were delivered by NHFT using quite a medical model that worked better for some service users than others. The current consultation was on the potential future approach to service delivery.

Councillor Roberts, as Chair of the Integrated Care across Northamptonshire (iCAN) Task and Finish Panel, advised that recent changes to the iCAN delivery model meant it was logical for the Panel to report back on its work so far. As part of this Councillor Roberts wished to comment on the information that had been made available to the Panel. It would be for the relevant successor Overview and Scrutiny Committee to consider whether iCAN should be a topic for any further scrutiny.

The Chair invited the Committee to identify any specific topics included in its work programme that it wished to recommend for consideration by its successors. Alternatively, it was open to the Committee to recommend the work programme as a whole be considered by the relevant successor committees when setting their new work programmes.

RESOLVED: That the People Overview and Scrutiny Committee:

- a) Agreed that draft 2022/23 Quality Accounts received from local NHS organisations would be circulated to all Committee members to feed back any comments for inclusion in responses to be sent by the Chair.
- b) Recommended that successor Overview and Scrutiny committees should consider the People Overview and Scrutiny Committee's work programme when setting their work programmes for 2023/24.

109. Urgent Business

There were no items of urgent business.

3	The meeting closed at 9.00 pm	
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Chair:		 	
Date:			

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3 Targeted Areas for Transformation



Our vision is to support more people to choose well, stay well and age well at home resulting in reduced unnecessary admissions to hospitals and better outcomes for people.

1. Community Resilience

- Maximise independence by helping more people remain at home
- Provide holistic planned care in community to help people age well
- Reduce unplanned primary and community care demand.

2. Frailty, escalation and front door

- Enable people with frailty to access the services they need
- Prevent avoidable admissions into the acute setting
- Give people input into the care they receive.

3. Flow and grip

- Reduce unnecessary time in hospital beds
- Maximise independence by helping more people return home
- Improve the experience of people in our care.

ICAN Improvements to date



New IV antibiotics review process and monitoring system reducing length of course by 4 days KGH frailty model delivering an 57 avoided admissions Over 65 NEL Admissions

per month

Virtual wards supporting over 250 people in the community daily

best practice rolled out to all medical wards across acutes – planned for surgery rollout next . Pre MOFD LOS reduction of 2 days - reducing length of course by 4 days

> Diagnostics flow improvement reducing time to report x-ray by 2 days, increased the number of MRIs by 40 per month, and 75 CTs per month

New IV antibiotics review Board round

Complex discharge hub in place. Improvements to SBAR processes and onward flow management reduced from 7.2 to 3.5 days delay



are c. 183 per month

and 390 per month

lower than 2019,

lower than 2019

Growth Forecast

Hospital Flow

Community Hospital LOS improvement

1200 days), MDT reviews and a flow

store (saving between 800 and

dashboard

Improvements to date

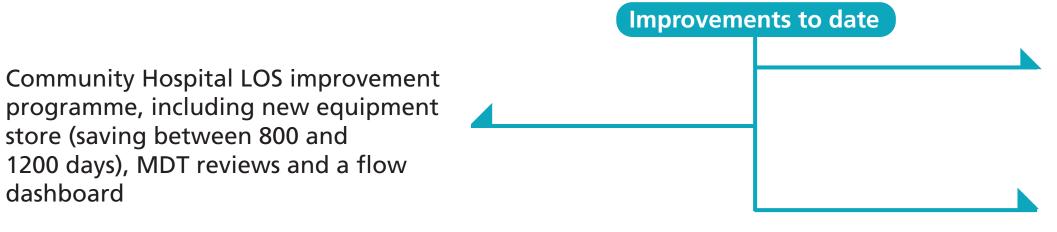


Improvements to date

Frailty reviews now held in 12 PCNs. ~110 frail patients stratified and reviewed each month with an MDT approach

EMAS & 111 stack shared directly with Rapid Response ~ 100 referrals per month resulting direct RR visit instead of an ambulance

Intermediate care, bedded and at home

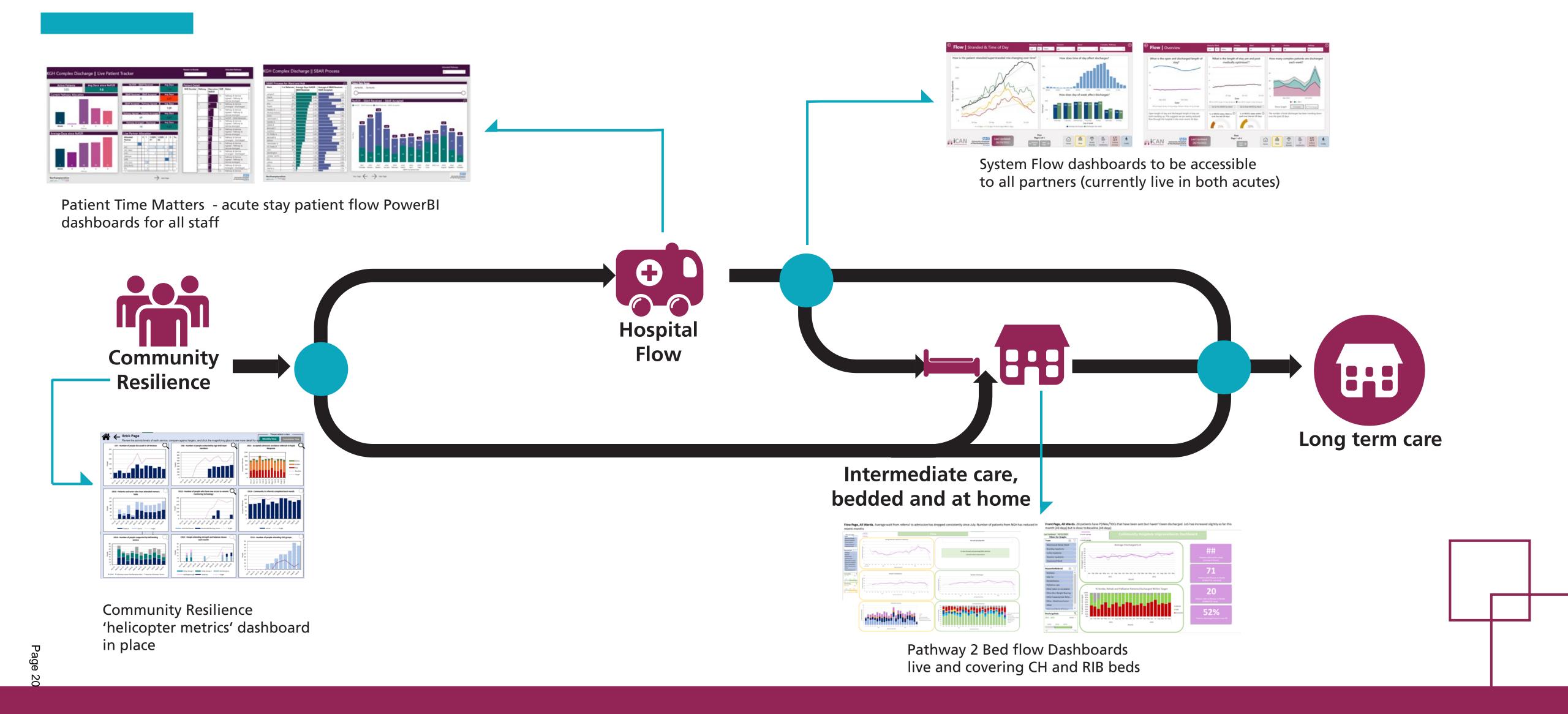


51 truly integrated 'Recovering Independence Beds' – model now live, and will be at full capacity in Jan. Expected to deliver a 10day LOS improvement

Redesigned Pathway 1 Services – with 1500 additional hours of provision planned to be in place by February

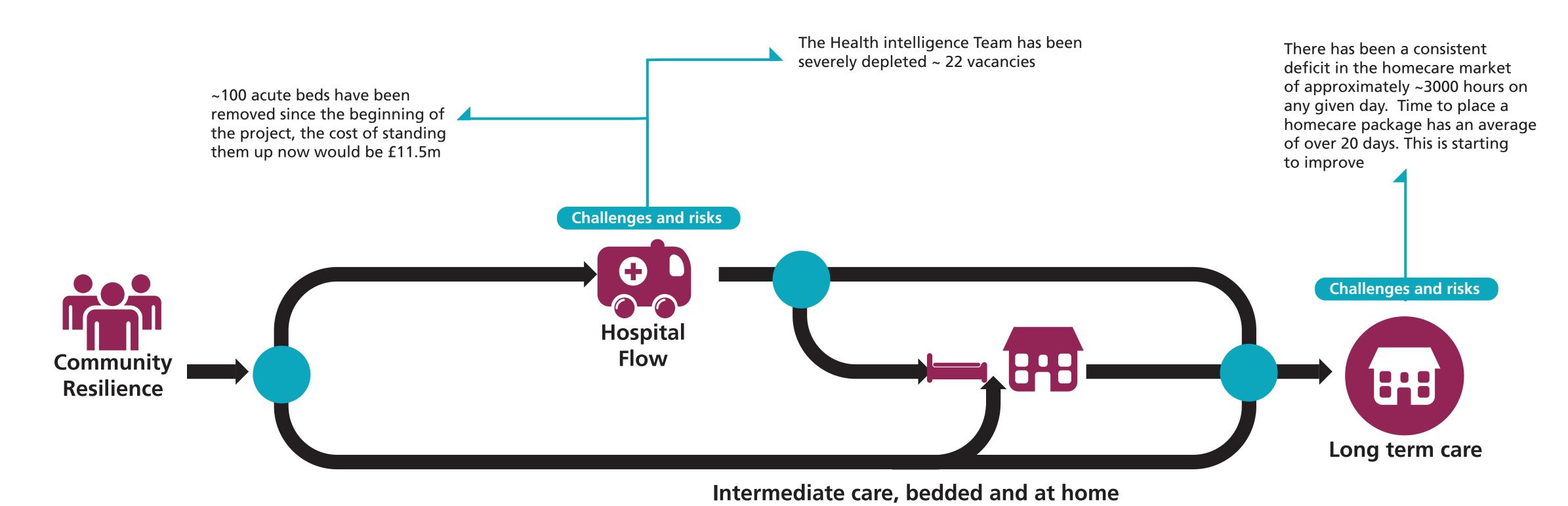
ICAN Phase 2 Digital Implementation





ICAN Phase 2 the Challenges and Risks to Continued Improvement

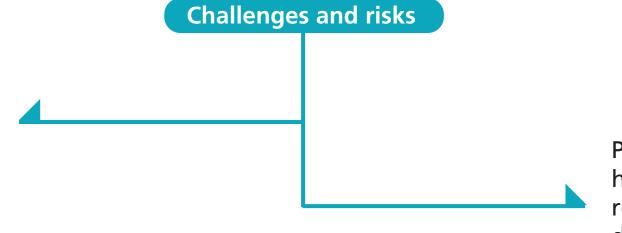




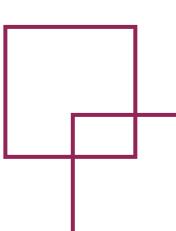
Challenges and risks

All Partners have a severe budget deficit. This programme was designed to mitigate pressure to avoid cost, not save cash

The new RIB beds will not be fully online until Jan 2023. Spot beds are costing an average of approx. £1000 per week



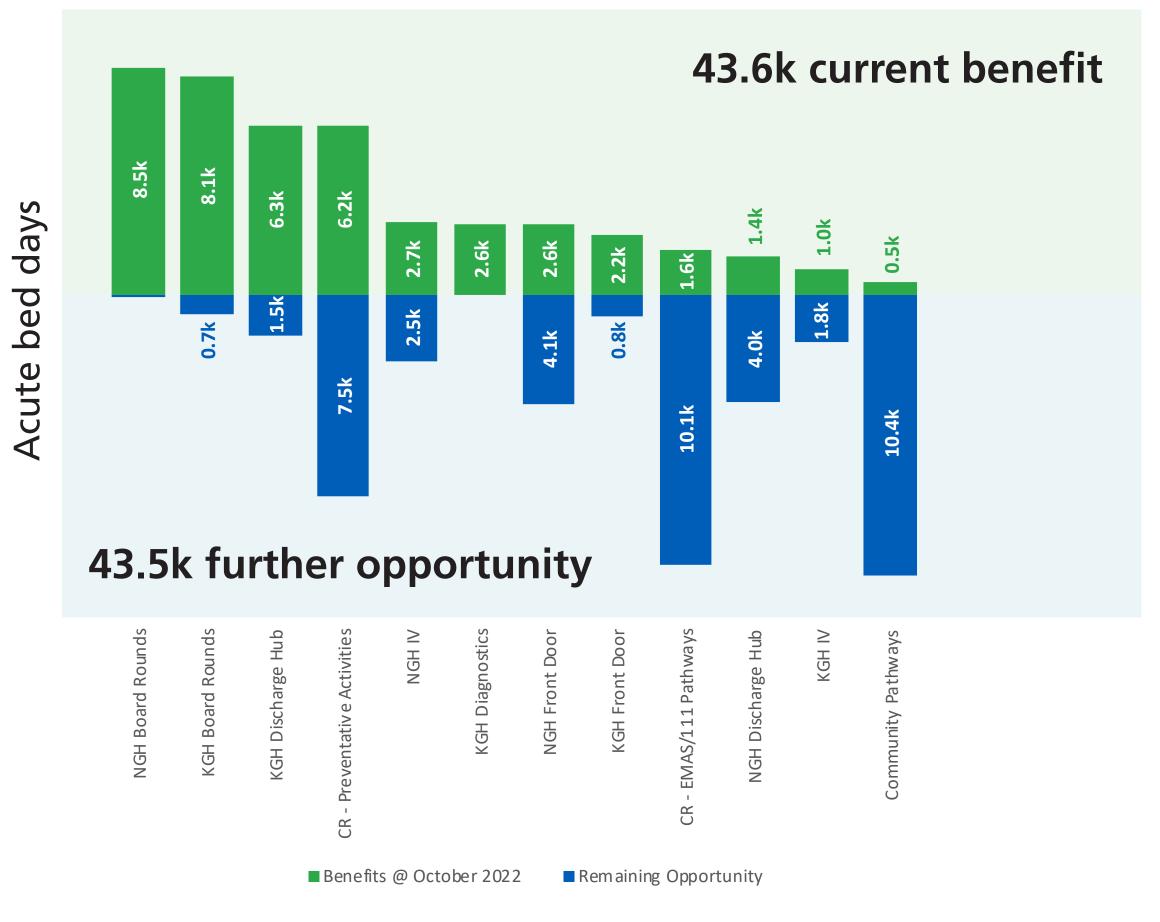
Pathway 1 services need to recover having lost 17 FTE due to a necessary re-contracting - recruitment is proving difficult



Benefits position is half way to Total Opportunity, and 2/3rds of the way to Programme Target



Bed days impact by workstream: current achieved vs further opportunity



- The acute productivity and frailty improvements make up c. 80% of the benefits to date, are well embedded in BAU and well monitored.
- The community-based work still has significant further opportunity, which is based on a combination of rolling change out countywide, and the new work on new Pathways and EMAS/111 Referral routes which started later and is expecting to realise benefits over the coming months.
- There is also further opportunity to be realised by the hospitals – particularly in NGH Frailty service and Discharge Hub.
- Realising all of these would far exceed the targeted iCAN benefit of 62.5k.

What Next



Our journey continues in 2022-23 ...



Expansion Virtual Health Environments



Continued
Co-production



Expansion Age Well teams & GP led Reviews



Northamptonshire
Analytics and
Repository
Platform live



Frailty Unit –
Acute Front Door
with
community support



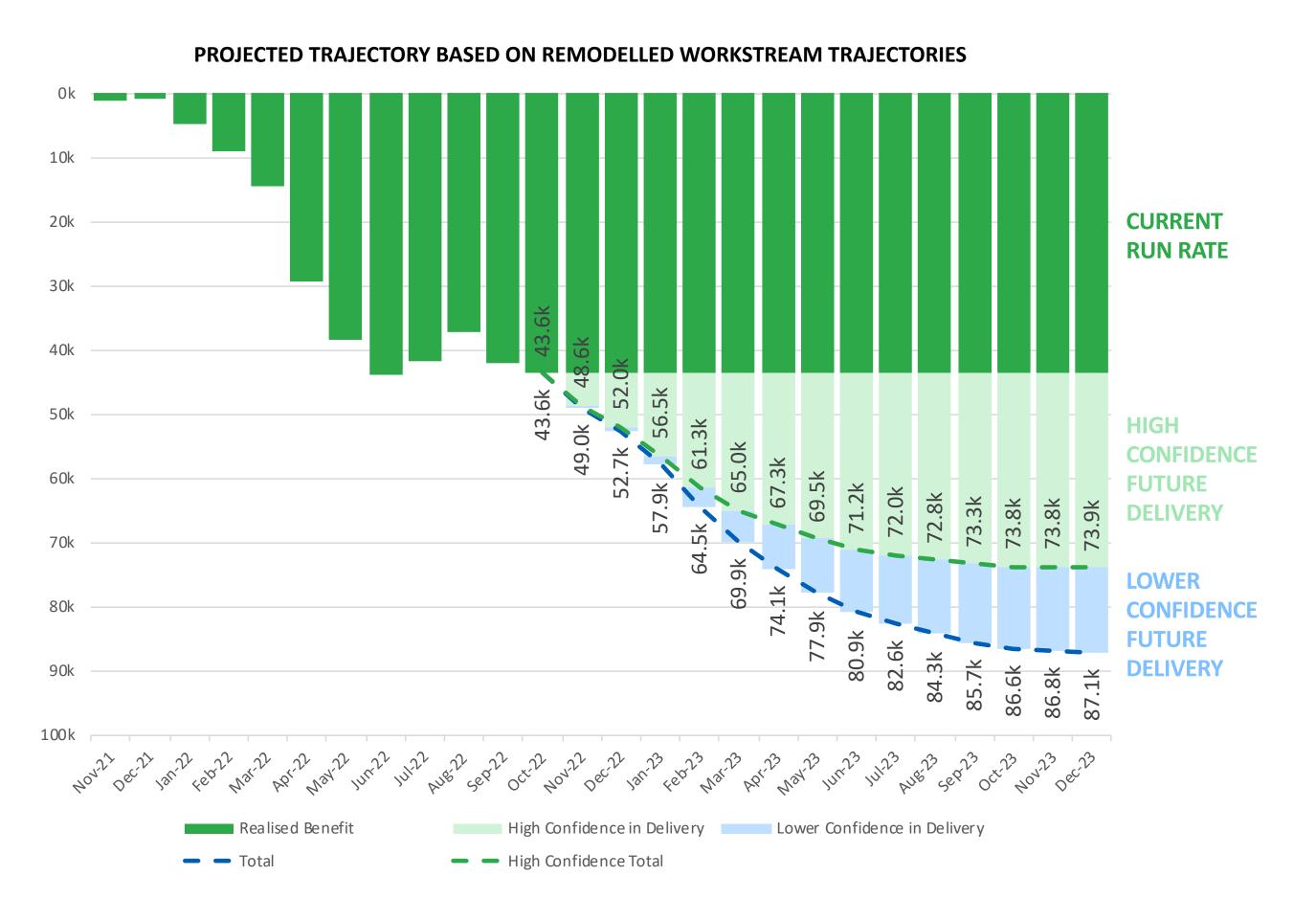
Real Time – all Pathway System Dashboards live



Integrated Same Day Access Development

Programme Trajectory





- The programme trajectory has been remodelled, taking into account workstream plans, with a confidence weighting taking into account some of the challenges of delivering in full
- The additional Community Pathways and EMAS/111
 Referral Pathways work are both key to achieving the
 targeted 62.5k bed day efficiency within the original
 programme timescales of 62.5k bed days by June
 2023
- Total delivery would be forecast to land somewhere between 73k and 87k bed days depending on the success of the delivery which has been weighted as lower confidence

What Staff Say



"At the beginning I thought this was going to be a huge mountain to climb but now I'm quite excited. And I'm getting a massive kick out of it because the patients are getting the benefit."

Acute Divisional Director

"This is the first time in my career that we have had the whole county engaged in one initiative that combines multiple services into one. There has been nothing like it before."

- Dr John Harrison GP - Clinical lead for ICAN Community Resillience

Partner Staff Testimonials

EMAS Medical Director stated that the implementation of the pathway was "Fantastic news" and "Really positive progress"

"If our board rounds were 30% good before, I'd say we're 95% good now" – Therapist

"I'm loving the Daily Hub metrics that I have got. It is really clear now if we are on track and what I need to do to drive the team's performance"

Complex Discharge Lead

"This visibility allows us to make sure we are challenging the right wards, but also gives them the tools to take their own responsibility"

– Deputy Chief of Pharmacy

"I've noticed a massive improvement, I went to a board round this week and it ran so smoothly! Everyone knew what they were doing, I was so impressed" – Louise, Medicine Matron

"we have never seen so many inpatients in one afternoon session before!" – CT scanner team member

What People Say





Patient Testimonials

"My mum would have ended up in a care home if it wasn't for her extended GP review"

Daughter of person who had a GP-led review

"I feel confident to go out in my garden on my own" & "I feel like I am learning new things each week and I can understand why I need to do the exercises to keep me healthy"

Attendees at a strength and balance class

"Dad is usually a quiet man but he is really enjoying the group and talking about you by name at home" – Attendee at a memory hub meeting



CQC Single Assessment Framework: Local Authority Assurance

May 2023





Part 1 Background

Care Act 2014 regulated a number of care functions delivered by Local Authorities which include:

- Wellbeing principle
- Assessment of an adult or carers needs for care and support, eligibility criteria
- Charging and financial assessment
- Duty to meet needs
- Next steps after assessment
- Direct Payments
- Deferred Payments
- Independent advocacy support

Health & Care Act 2022 gave CQC new regulatory powers to undertake independent assessment of these functions

Regional self assessment exercise prior to commencement of assessments



August!



CQC Single Assessment Framework

5 Key questions Quality **Statements** Evidence Specific evidence & quality indicators

Based on what people expect and need and as a basis for gathering structured feedback (not applicable to LA's and ICS's)

Expressed as 'We' statements; the standards against which they hold providers, LA's and ICS's to account

People's experience, feedback from staff and leaders, feedback from partners, observation, processes, outcomes

Data & information specific to the scope of the assessment, delivery model or population group



Client Level Data Return Background

- Is a new quarterly statutory return that is mandatory for Local Authorities from 1st April 2023 with a first submission during July 2023
- A decision will be made in autumn 2023 to determine when/if SALT will cease, following parallel running in 2023-24
- Requires the production of listings containing core person information and events that have occurred during the reporting period
- Will broadly follow the same data definition/collection sources that are currently used in the SALT return (with the addition of Financial Assessment events)
- There are 50 fields described in the Release 1 specification, of which 33 are mandatory
- There are four types of Events are being collected: Requests, Assessments, Services and Reviews
- Local Authorities have been asked to provide a part or full voluntary submission for 2022-23 and the Business Intelligence Team plan to submit 2022-23 Service Event careFirst dataset in April 2023
- East midlands data



Quality Statements

Theme 1: Working with People

Assessing Needs
Supporting People To Live Healthier Lives
Equity in experiences and outcomes

Theme 2: Providing Support

Care provision, integration and continuity
Partnerships and Communities

Quality Statements

Theme 3: Ensuring Safety

Safe systems, pathways and transitions
Safeguarding

Theme 4: Leadership

Governance, management and sustainability

Learning, improvement and innovation



Self Assessment Document

- Corporate Narrative
 - Key facts
 - ASC strategic direction
 - Partnership
 - Strengths, Risks, Challenges
- Narrative on each section
 - Ambition
 - Performance
 - Challenges for improvement
- Evidence Library





Current Self Assessment and actions so far.

2

Customer Access

We will ensure that information and advice about health, care and support is accessible and available to people at all times

3 Objectives:

- Review and improve current front door processes to ensure they support efficient use of ASC resource
- Increase the availability of self-serve options, including the availability of information on the website
- Review information that is provided to people to ensure that it is accessible to people with protected characteristics

Quality Assurance

We will consistently review and challenge how we work to make sure that our residents receive support and assistance of the highest quality

Objectives:

- Embed appropriate governance structures which focus on overseeing the quality of service delivery
- Complete a full review of all strategies, processes, and procedures to ensure their effectiveness
- Ensure an effective programme of case auditing and feedback is established and embedded

Engagement & Feedback

We will ensure the people we support are central to everything we do, we will involve them in the design of our services, and use their feedback to address challenges when they arise

Objectives:

- Implement a consistent approach to gathering and understanding people's feedback on the support they receive from all of our services
- Develop an approach to ensuring co-production as a key feature of our work
- Understand the underlying causes of complaints and embed a robust approach to addressing these.

Equity & Inclusion

We will seek out and listen to information about people who are most likely to experience inequality in experience or autcomes and tailor the care and support we provide in response to this

Objectives:

- Identify and utilise information which identifies the inequalities in experience and outcomes, along with the barriers to care people may experience
- Design a clear plan and approach to addressing the needs of people with protected characteristics
- Review the support we provide to children transitioning into ASC to ensure that it is responsive to their needs.

4

Processes to review:

- Assessment, care planning and review, including processes and pathways from first contact with the local authority
- Arrangements for ensuring timely assessments, care planning and care reviews
- Arrangements for offering, allocating and overseeing the use of Direct payments
- Arrangements for determining Care Act eligibility and care funding decisions
- % of carers who receive selfdirected support
- % of people who use services who receive self-directed support
- Prevention strategy and associated delivery plans
- Arrangements for access to equipment and home adaptations
- Arrangements for providing accessible information and advice
- Equality objectives and delivery plans, annual reporting for the Public Sector Equality Duty
- Arrangements for engaging with people to understand their experience relating to Care Act duties
- Inclusion and accessibility arrangements, for example BSL or interpreter services
- Health Inequalities Dashboard

Theme 2: Providing Support

Care Provision, Integration & Continuity

Partnerships & Communities

Strategic Partnerships

We will develop effective strategic partnerships at a local level to ensure that we take a holistic approach to how we support people with the health and care needs

Objectives:

- Embed and deliver Local Area Partnership working
- Work with partners to develop effective joined up strategies and plans to ensure the co-ordinated and effective use of our collective resources
- Continue to explore further opportunities to work with local partners particularly in relation to Mental Health Services, Continuing Health Care and Housing and Homelessness

Market Management

We will work in partnership with our local care market to ensure that it meets the needs of our residents both now and in the future

Objectives:

- A clear approach to our existing market, including an understanding of any gaps, how we will work with the market to ensure it is sustainable and a clear set of strategic intentions.
- Implement an effective and robust processes to drive the improvement of quality across our care market
- Implement appropriate mechanisms for engaging with providers as equal partners and supporting them to be effective as a sector

Information Sharing

We will utilise both the information we hold as a council and the information held by our partners to support the design and delivery of services to ensure they consistently meet people's needs

Objectives:

- A clear approach to utilising information and data in our service planning and decision making processes
- Implement information sharing protocols with our partners and use these effectively
- Outline a clear local approach to a shared health and care record

Processes to review:

- Joint Strategic Needs Assessment
- · Market Position Statement and market shaping plans
- Market Sustainability Plan
- · LA outputs from cost of care exercise
- · Commissioning strategies (including joint & specialist commissioning) and arrangements for monitoring and evaluating their impact
- Use of out-of-area placements and trends over time (up to 3 years)
- · Arrangements for quality monitoring and improvement of commissioned services. including out-of-area services
- Workforce strategy to support the workforce capability and capability of the LA
- · ASC workforce pressure metric (capacity tracker)
- · Bed occupancy (residential) and spare hours (community) (capacity tracker)
- Use of the Better Care Fund
- Partnership working and arrangements to deliver shared local and national objectives. For example, hospital discharge, tackling inequalities, Transforming Care
- Enabling mechanisms, including information sharing, roles and responsibilities

Quality of Care

we will ensure that people within our area receive safe and effective care from providers and that we have processes in place to respond to concerns

Objectives:

- Work with local partners to ensure that we are able to act on and address concerns in relation to the quality of care we commission
- Implement an effective and robust processes to drive the improvement of quality across our care market

Processes to review:

- Pathways when people move between services and agencies: design, evaluation and review
- Contingency planning and emergency preparedness for provider failure and service continuity
- · Information sharing protocols
- Safeguarding Adult Board annual strategic plan
- Safeguarding Adult Board annual report
- Safeguarding Adult Reviews & records of subsequent learning & actions taken
- Processes and pathways for managing safeguarding alerts, enquiries and investigations
- Tracking, oversight and quality assurance of safeguarding cases
- Strategic governance of safeguarding themes, trends and outcomes
- Processes for responding to reports and reviews that feature SG responsibilities, including:
- Regulation 28 reports (report to prevent future deaths)
- Domestic homicide reviews
- Mental health reviews and serious incident reviews
- NHS Digital Safeguarding Adults Collection - number of SG referrals made
- NHS Digital Safeguarding Adults Collection - proportion of SG referrals that meet Section 42 threshold (to view trends over time)
- NHS Digital Safeguarding Adults Collection - proportion of individuals lacking capacity who were support by an advocate, family member or friend

2

Strategic Direction

We will establish a clear vision and strategy which supports the delivery of both our corporate plan and ICS strategic ambitions Objectives:

- Ensure the direction for ASC is aligned to the Joint Strategic Needs Assessment and delivery of the 10 'Live your Best Life Outcomes'
- Outline the strategic direction for key areas of work including prevention, support to carers and mental health support
- Embed a consistent approach to driving improvement, supporting innovation and research

Governance

We will ensure we have effective governance arrangements in place which provide effective oversight and support robust decision making

Objectives:

- Embed a governance framework across ASC which enables quality of analysis, risk management and enables good decision making
- Develop a clear reporting structure with clear and approved terms of reference for all management, leadership and decision making.

Data focus

We will increase our focus on using data to support our decision making at all levels and supporting us to understand the needs of our residents both now and in the future

Objectives:

- Develop and embed dashboards for key KPI's to enable greater and more timely oversight in relation to team activity, timescales and waiting lists
- Upgrade the core ASC system to assist in generating better quality and more timely data and information
- Develop an understanding of, and communicate, community assets across the locality to support the development of a <u>strengths based</u> approach

Workforce

We will embed a clear approach to ensuring that we support our workforce to deliver the highest quality of advice and support to our residents

Objectives:

- Develop a clear training and development offer to all roles to support the progression of internal staff and the delivery of their roles
- Embed a clear approach to recruitment and retention to ensure service continuity
- Create appropriate mechanisms to engage staff and create the opportunity for feedback and service improvement suggestions to be received

4

Processes to review:

- Adult social care vision and strategic plan(s)
- Governance arrangements for delivering Care Act duties including quality assurance
- Governance arrangements for delivering Care Act duties including risks to delivery
- Governance arrangements for delivering Care Act duties including impact on people's experience and outcomes
- Adult social care risk register and arrangements for internal and external escalation
- Arrangements for the LA's compliance with UK data protection legislation
- If available, a strategy for supporting unpaid carers
- Learning from feedback & events, e.g. people's experiences, whistleblowing information, serious incidents and serious case reviews
- Coroner Regulation 28 reports
- Accreditations with external organisations
- If available, innovation policy or strategy



Engagement – Peoples Experiences

	Working with People			Providing	g Support	Ensuring Safety		Leadership	
	Assessing Needs	Supporting people to live healthier lives	Equity in experience and outcomes	Care Provision, integration and continuity		Safe systems, pathways and transitions	Safeguarding	Governance, management and sustainability	Learning, improvement and innovation
Direct feedback from people with care and support needs, unpaid carers, people who fund or arrange their own care, those close to them and their advocates	✓	√	√	V	√	√	V		√
Feedback from community & voluntary groups, e.g. advocacy groups, adult and YP carer groups, faith gropus, groups representing people who are more likely to have a poorer experience of care and poorer outcomes, people with protected equality characteristics	√	√	√	√	√	√	√		√
Feedback that people have sent to the LA and feedback it has gathered itself through surveys or focus groups	✓	✓	✓	✓	✓	✓	✓	✓	✓
Feedback from CQC's Give feedback on care facility (if availabile)	✓	✓	✓	✓	✓	✓	✓		✓
Compliments and complaints	✓	✓	✓	✓	✓	✓	✓	✓	✓
Healthwatch	✓	✓	✓	✓	✓	✓	✓	✓	✓
Adult Carers Survey (SACE)	✓	✓					✓		
Adult Social Care Survey (ASCS)	✓	✓		✓			✓		
Case tracking	✓	✓	✓	✓	✓	✓	✓		✓



Engagement – Staff & Leaders

	Working with People			Providing	Support	Ensuring Safety		Leadership	
	Assessing Needs	Supporting people to live healthier lives	Equity in experience and outcomes	Care Provision, integration and continuity	Partnerships and communities	Safe systems, pathways and transitions	Safeguarding	Governance, management and sustainability	Learning, improvement and innovation
Principal social worker	✓	✓	✓	✓	✓	✓	✓	✓	✓
Principal occupational therapist	✓	✓	✓		✓				
Social work teams						✓	✓		✓
Local authority initial contact teams or frontline triage team	✓								
Assessment & care management staff, social workers and any specialist teams	✓	✓	✓	✓	✓				
Hospital discharge team, intermediate care, reablement team					✓				
Out-of-hours duty teams	✓					✓	✓		
LA designated officer (LADO), designated safeguarding officer or multi-agency							<		
safeguarding adults team							•		
Commissioners	✓	✓	✓		~			✓	✓
Commissioning teams				✓					
Care provision: Quality monitoring team				✓		✓			
Council adult social care portfolio holder	✓	✓	✓	✓	~	✓	<	✓	✓
Overview and scrutiny committee	✓	✓		✓	~	✓	~	✓	✓
Council leader								✓	✓
Director of adult social services (DASS)	✓	✓	✓	✓	✓	✓	✓	✓	✓
The local authority's self-assessment of its performance for the quality statement	✓	✓	✓	✓	~	✓	~	✓	✓
If available, feedback from the local authority's staff carers network	✓								
If available, staff forum								✓	✓
If available, feedback from the local authority's staff (from surveys)	✓	✓	✓	✓	~	✓	~	✓	✓
If availabile, feedback from the local autority's equality, diversity & inclusion lead(s)	✓	✓	✓						
If available, Equality Framework for Local Government self-assessment			✓						
If availage, independent mental capacity advocates							~		
If availage, information from whistleblowing									✓
Chief executive								✓	
Director G children's services						✓			
Director of public health		✓	✓	✓				✓	✓
Housing team		✓							



Engagement – Partners

	w	orking with Peop	ole	Providing	g Support	Ensurin	g Safety	Leadership	
	Assessing Needs	Supporting People	Equity in experience and outcomes	Care Provision, integration and continuity	Partnerships and communities	Safe systems, pathways and transitions	Safeguarding	Governance, management and sustainability	Learning, improvement and innovation
Community & voluntary groups, including those representing people									
who are more likely to have a poorer experience of care and poorer	✓	√			√	✓ ·	1		
outcomes, people with protected equality characteristics and unpaid	•	•	•	•	•	•	•	•	•
carers.									
Care providers	✓	✓	✓	✓	✓	✓	✓	✓	✓
Local provider forums				✓	✓				
Information and advice providers		✓							
Community equipment providers		✓							
Advocacy providers		✓	✓		✓	✓	✓		
Advocacy professionals	✓								
Healthwatch								✓	✓
Safeguarding Adults Board						✓	✓		
Independent Domestic violence Advisors (IDVA)							✓		
Coroner Regulation 28 reports							✓		
Local health partners	✓	✓	✓	✓	✓	✓	✓	✓	✓
Allied health professionals	✓	✓	✓	✓					
Ambulance and paramedics						✓			
Health and wellbeing board	✓	✓	✓	✓	✓	✓		✓	✓
Health commissioners				✓	✓				
Integrated care partnership, intergrated care system		✓		✓	✓			✓	✓
Local Government Social Care Ombudsman annual letter								✓	✓
If available, Local Government Social Care Ombudsman feedback	✓	✓	✓	✓	✓	✓	✓		
If available, SEND reviews	✓					✓		✓	✓
If available, Ofsted reports for inspecting LA children's services	✓					✓		✓	✓
If availate, feedback from other regulators						✓	✓	✓	✓
If availane, British Association of Social Workers	✓								
If availabe, peer review				✓			✓	✓	
If available, police safeguarding lead							✓		
If available, specialist domestic abuse services							✓		



Adult Social Care Self-Assessment



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Our Self-Assessment

Ambition

The focus of the People Directorate at West Northamptonshire Council to support Children, Young People and Adults to "live their best lives". We are committed to working together with local people and partners through our shared vision: We want to work better together in West Northamptonshire to create a place where people and their loved ones are active, confident, and take personal responsibility to enjoy good health and wellbeing, reaching out to quality integrated support and services if, and when they need help.

We are collectively committed to delivering this vision through our shared ten ambitions and outcomes shown below.

The purpose of this self-assessment is to provide an overview of how this vision is delivered in the context of West Northamptonshire Councils Adult Social Care Services. The self-assessment provides an insight into the effectiveness of our services, areas of strengths and areas for

development. The effectiveness of our services is considered in relation to key performance information and the outcomes and impact we have on people's lives and their communities. The self-assessment has been constructed around the following themes;

- Theme 1: Working with People
- Theme 2: Providing Support
- Theme 3: Ensuring Safety
- Theme 4: Leadership

Each of the themes provides an honest and transparent depiction of local services and is the starting point for our 3-year Directorate strategy. The self-assessment is a live document which will evolve and change through the delivery of this strategy. We need to get to a point where the selfassessment is owned and recognised by our workforce, partners and local people as an accurate depiction of our services today so to support a commonalty of expectation around we support people to live their best lives.

Ambition	Outcome
•	Women are healthy and well during and after pregnancy.
The best start in life	All children grow and develop well so they are ready and equipped to start school.
Access to the best available	Education settings are good and inclusive and children and young people, including those with special needs, perform well.
education and learning	Adults have access to learning opportunities which support them with work and life skills.
Opportunity to be fit, well	Children and adults are healthy and active and enjoy good mental health.
and independent	People experience less ill-health and disability due to lung and heart diseases.
Employment that keeps them and their families out of poverty	More adults are employed and receive a 'living wage'. Adults and families take up benefits they are entitled to.
	· · · ·
Good housing in places	Good access to affordable, safe, quality accommodation and security of tenure.
which are clean and green	The local environment is clean and green with lower carbon emissions.
To feel safe in their homes and when out and about	People are safe in their homes, on public transport and in public places.
when out and about	Children and young people are safe and protected from harm.
Connected to their families	People feel well connected to family, friends and their community.
and friends	Connections are helped by public transport and technology.
The chance for a fresh start,	Ex-offenders and homeless people are helped back into society.
when things go wrong	People have good access to support for addictive behaviour and take it up.
	Deeple can access NHS consists and personal and carial accessing
	People can access NHS services and personal and social care when they need to.
Access to health and social care when they need it	People are supported to live at home for as long as possible and only spend time in hospital to meet medical needs.
	Services to prevent illness (e.g. health checks, screening and vaccines) are good, easy to access and well used.
•	People are treated with dignity and respect, especially at times of greatest need like at the end of their lives.
To be accepted and valued	Diversity is celebrated.
simply for who they are	People feel they are a valued part of their community and are not isolated or lonely.

Executive summary and context

West Northamptonshire Council was created on the 1st April 2021. The creation of the Council followed government intervention around the financial position of Northamptonshire County Council. There is a long legacy of issues which continue to have an impact on local people and local services, however we are committed to changing the experience of local people through the delivery of our vision.

All our Executive leadership team are permanent appointments and a culture of stability alongside organisational knowledge is developing.

As a unitary Council we provide a wide range of services to residents and businesses across Northampton, South Northamptonshire and Daventry, including the provision of care to vulnerable adults and children, education, leisure and community wellbeing, housing support and waste services.

The council's employs 2,725 staff whose key characteristics can be summarised as follows:

- 30% are employed on a part time basis
- The average age of employees is 45.4years
- 72% of employees live in the local authority
- 72% are female
- 57% are white British
- 6% have declared a disability

Corporate Plan

Our corporate plan outlines 6 key areas we want to focus on to make West Northants a place to thrive, they are...

- Green and Clean
- Improved Life Chances
- Connected Communities
- Thriving Villages and Towns
- Economic Development
- Robust Resource Management

We recognise that we can only achieve our vision through strong relationships with our local partners and in collaboration within local communities and with this in mind we take an active and leading role within our local integrated care system, Integrated Care Northamptonshire, and are excited about our role in supporting and delivering the 10 year strategy for the system 'Live your Best Life'

¹ Census21

Demographics

The population of West Northamptonshire is currently 425,725¹, which has increased by 13.5% since 2011; this makes us one of the fastest growing areas in the country. More specifically within our overall population growth we have seen a growth in our over 65's which is at a higher rate than the national average.

Employment

The employment rate in West Northamptonshire was 78.3% for the year ending June 2022, and over the last year the area has performed well in this regard moving up to 10th (from 14th) in the economic comparator rankings. 5% of the working age population are unemployed and claiming out of work benefits, in the Northampton local area this rises to 6%, which is above the national average of 4.7%.

Housing

In West Northamptonshire the previous Northampton Borough area has the lowest homeownership levels and consequently the highest private rented and social housing levels across our area. 10% of households are economically inactive, meaning nobody within the household is in employment; there can be a number of reasons for this including being of working age but unable to work due to study, retirement, sickness or disability, or because of caring responsibilities.

Health Inequalities

Developed in partnership with Integrated Care System partners The Northamptonshire Health Inequalities Plan describes how we plan to work with communities so that everyone in the county has the chance to thrive and to access quality services providing excellent experiences and the best outcomes for all.

The long-term ambition set out in the Northamptonshire Health Inequalities Plan is to see:

- An increase in people's healthy life expectancies
- A reduction in health inequalities
- A reduction in early death
- Improved community cohesion

To achieve these ambitions, the plan outlines a set of guiding principles for how we need to work together as an integrated care system to understand and address health inequalities. These principles will be embedded across all health and care organisations working across Integrated Care Northamptonshire.

Our Strategy for Adult Social Care

Since being established in April 2021 our council's immediate focus for our Adult Social Care services has had to be on ensuring citizens have access to support and services which are safe and compliant with our statutory duties, including ensuring we are safeguarding people effectively.

Our Adult Social Care budget for 2022/23 was £113.8 million, within which we have had to respond to significant pressures due to rising demand, inflationary pressures and dealing with the legacy of the previous financial challenges which resulted in the creation of the two new unitary authorities.

In responding to these pressures we have placed a strong emphasis on supporting residents and communities to live well, age well and stay independent. In doing so, to remove unnecessary bureaucracy and spend longer with people face to face, we have embedded the '3 conversations model' to utilise the strengths and assets of both the individuals and communities we deal with before considering ongoing support.

We have also had to invest significant time in working with our provider market to ensure that the people we support, and self-funders, continue to receive care and support which is high quality and sustainable.

As we become more mature as an organisation, and as an Adult Social Care service, we recognise that we need to bring our focus to reviewing and updating the previous strategies we worked to as a county council, so that we can provide a clear vision and focus for the future delivery of Adult Social Care services in West Northants, to achieve positive outcomes for our residents through effective joint working with our local partners and communities.

Our Key Strengths

Whilst being a new unitary authority brings with it some clear challenges, we also recognize that it



has presented us with opportunities to create strengths in the way that we work, which includes the appetite to be more innovative and creative as we are not weighed down by the legacy of historical practices.

The creation of the new council and its contribution to the geography of the ICS means the council and the system is uniquely placed to have both economies of scale associated with a countywide footprint alongside a strong place based model. This geography enables the local partnership to be better equipped to understand and deliver against local need.

Through the relationships that Integrated Care Northamptonshire (ICN) embodies, where partners work together to tackle the wider determinants of health inequalities, we are utilising the collective local assets available to support us in the delivery of our statutory prevention duties, and making the most of the strengths of our residents and communities, enabling them to live their best life.

As an ICS our single ICN strategy has been adopted and embedded as the delivery model for how we deliver best outcomes for children, young people and adults. This means from a practical sense that the council is supported through the ICS partnership to deliver its statutory duties to adult care and support needs. This includes system led quality interventions, workforce development and outside of traditional ASC a significant relationship with interventions that focus on the wider determinants of health, such as our community safety partnership, combatting drugs partnership and development of our Local Area Partnerships.

From the inception of the council we have formed the People Directorate structure, bringing Adult Social Care, Children's Services and Public Health into one overall management structure. This has enabled us to align the approaches of these specialist areas more effectively which has underpinned our ability to quickly develop relationships across the Integrated Care Partnership and Integrated Care System.

An example of this partnership is our 3 year locality based prevention strategy that brings together our 3 conversations model in ASC, with social prescribing and GP based wellbeing interventions that are commissioned by Public Health. This approach will provide significantly increased reach to enable proactive preventative interventions that reduce crisis and reliance on services.

Risks and Challenges

However, we can't ignore the challenges that being a new council presents, most notably the residual consequences of our previous financial history and the challenges the former county council faced. Previous financial challenges resulted in a disinvestment in prevention services to ensure statutory duties and responsibilities could be maintained, which has resulted in our new unitary authority inheriting the position of having some of the highest unit costs for care in the country for the provision of care and having the lowest spend of unitary authorities nationally on adult social care services per 100,000 of the population.

These financial challenges also reduced the ability to invest in back office functions such as upgrading systems and infrastructure, which has consequently resulted in the new council being unable to exploit the efficiencies that new technology can deliver. The quality of the data we hold and not having the tools to use this data effectively when making decisions about the shape and design of future services is therefore a key challenge for us moving forward.

Like many other areas we also have workforce challenges both in recruiting suitably qualified and experienced staff and retaining staff in key frontline positions as we are unable to provide a level of renumeration that reflects either the level of demand people in these roles face or the commitment required to undertake such roles.

Our track record of improvement

Even though we don't have a long history we can highlight examples already of where we have been able to improve the delivery of our services. The creation of the council took place during the pandemic, this however, did not stop the delivery of safe and legal services to people with care and support needs. During this period of change we implemented the 3 conversations model, a new social care record system, established a new workforce and senior leadership team, whilst dealing with significant financial challenges. Through this period we have supported over 700 more people than the council resources were designed to support, without impacting on the quality of care we have commissioned or delivered.

Through this we have a number of examples of improvement which we continue to drive on a day-to-day basis:

- Through the 2022 Christmas period and into January 2023 we were one of the few local authorities nationally to reduce the length of stay in hospital for our residents, which was in large part due to the introduction of our RIBU (Recovering Independence Bedded Unit)
- LD & Autism trajectories for inpatients Integrated TCP team is in place that is working collaboratively to support discharge planning for all inpatients
- Improving Ratings in our care homes due to our monitoring approach which has seen the number of inadequate providers reduce to just a single organisation due to our investment in our quality improvement programme and robust governance arrangements.
- We have developed a buoyant home care market that has meant a reduction in delayed transfers of care alongside a reduction in the number of 18–65-year-olds needing to go into residential care.



Theme 1: Working with People

Supporting people to live healthier lives	Assessing needs	Equity in experiences and outcomes
I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally.	I have care and support that is coordinated, and everyone works well together and with me. I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.	I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.
We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.	We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, well-being and communication needs with them.	We actively seek out and listen to information about people who are most likely to experience inequality in experience o outcomes. We tailor the care, support and treatment in response to this.

In West Northamptonshire our vision and aspirations for Adult Social Care are aligned to the 'Live Your Best Life Strategy' which was developed in partnership with our Integrated Care System partners and launched in early 2023.

Many of the process and procedures we have in place have been inherited from our previous incarnation as Northamptonshire County Council; they have enabled us to operate in a safe and legal manner so that we are able to provide support and care for residents and their families however, we recognise the need to review and update them so that they reflect and respond to the needs of our local population. We have therefore commenced a programme of work to address this.

Assessing needs

We assess needs using the three conversations model across which enables us to utilise a strengths based approach through working with people to connect them to their communities and control their own support. Our community teams are based in local areas and are a central feature of our developing Local Area Partnerships. The teams are supported to make links to services and facilities to enable them to provide advice and signpost people to support services effectively. In addition to this the 'My Care

Directory' enables staff and members of the public to access information about local services offering support.

All the activity delivered by our community teams is recorded with our electronic social care record system, Eclipse, and whilst the system provides a single point of case recording the system is inefficient in enabling workers to make best use of people's data, to address this we are currently in the process of procuring a new core system, with planned implementation for March 2025.

All contacts go straight to the community teams where urgent requests are responded to immediately, whether this is in relation to short term formal support, immediate advice and support or the need for a protection plan. However, our move to 3 conversations removed the role of the Council's contact centre in triaging initial enquiries to our teams and this has created significant demand that does not enable the optimal use of ASC workforce, a review of this first point of contact is currently underway.

The ability to respond to urgent enquiries is enhanced by Community Teams being based within the community they serve. Similarly our LD and DART Discharge and Review Team teams operate a daily duty function to enable them to respond to any urgent requests. However, we recognise that being unable to report on the

timeliness of the assessment and support planning process limits our ability to manage the performance and effectiveness of our processes which sit behind our 'front door' as efficiently as we would like.

Where we have a level of demand that exceeds our capacity to respond in a timely manner we prioritise urgent and safeguarding requests. Excess demand is monitored, risk assessed and reviewed on a daily basis. Waiting lists performance is included in a scorecard of measures which is discussed in monthly performance meetings where it is a key focus for improvement, over the course of the financial year our waiting list was on average 125 cases, which represents on average 5% of our rolling case load.

The assessment paperwork we use supports staff to undertake strengths-based assessments that have a person's wellbeing at their heart and enable support planning to take place in a person centred way. In addition to this the assessment tools we use ensure that the views of carers are taken into consideration and prompts staff to consider the support needs of carers during the assessment process.

As part of the implementation of our 3 conversations model we introduced assurance mechanisms that support quality interventions for local people.

- On track chats, recorded through supervision, allow us to demonstrate management oversight.
- Ideal Outcome meetings bring staff together to collaborate and make best use of reflective practice.
- Market Oversight meetings provide opportunities to bring together community staff with a wider a multi-disciplinary teams, including commissioners to ensure we make best use of local resources and have positive relationships with our external provider market.

In 2022 we created two additional Assurance Social Workers (also known as Practice Educators) to support our PSW to take forward the development and implementation of our Quality Assurance Framework. The implementation of this framework will be overseen by our Performance and Assurance Board and will improve the maturity of our approach to both support our journey of continuous improvement and embed quality into our day to day work. This

The 3 conversations model

- Conversation 1 is utilised to understand what is important to people and their families so that we are able to work with them to make connections and build relationships which support them to retain their independence. During 2022/23 we completed 4343 conversation 1's.
- Conversation 2 takes place when we meet people who need something to happen urgently to help them regain stability and control in their life, we use this conversation to understand what's causing the crisis, put together an 'emergency plan' and we make sure that the changes required happen quickly, and that the plan works for them. During 2022/23 we carried out 1955 conversation 2's.
- Conversation 3 is about understanding the longer term care and support that someone needs to help them lead their best life and in doing so we aim to understand what someone's best life looks like to them and their family and help them to get the support organised that enables this during 2022/23 we completed 1366 assessments and reassessments using conversation 3.

work is overseen through our monthly Performance and Assurance Board.

The creation of the new council alongside the Children's Trust has meant that partnership

approaches to the transition of young people with care and support needs/parent carers/young carers to ASC continues to develop to be proactive and informed by the needs of our young people. Whilst we have a stronger relationship with the children's disability team we need to use our SEND accountability board to improve how we work with the Children's Trust around Looked After Children.

The council commissions Northamptonshire Carers to provide independent carers assessment and support. Whilst feedback from carers evidences how this service is valued work is required to ensure there is better oversight and understanding of the assessments being completed and appropriate mechanisms are in place to ensure this informs the strategic direction of Adult Social Care.

Working with partners we have adopted the 'Discharge to Assess' model to support people who no longer have a right to reside in hospital. The effective management of hospital discharges is supported through an integrated discharge

dashboard and a digital social care record system within our Reablement West service which provides real time data on demand, capacity, effectiveness of service and outcomes. Our partnership work has recently enabled us to remodel our reablement service to increase its capacity and support higher acuity patients.

Financial assessments are undertaken for all people who have an eligible care and support need. The assessments are undertaken via a recorded telephone conversation however, WNC will be introducing an online self-assessment tool from 1st April 2023.

Supporting People to Live Healthier Lives

The Council, and its ICS partners have a large range of interventions which focus on prevention and wellbeing. These interventions have a significant impact on reducing the number of non-elective presentations to hospital and in supporting local people to remain independent within their own communities. This prevention offer has evolved over time, through the creation of the unitary Councils and the iCAN programme, and we recognise that these interventions now need to be orientated into an overarching prevention strategy that enables us to better articulate the support available to local people and monitor the impact and outcomes, which needs to be developed in co-production with our key stakeholders.

Our Therapy team supports approximately 3000 people a year to access equipment and adaptations that will support them to retain their independence and remain in their own home. 54% of the people the team supported were given access to community equipment, with 20% accessing minor adaptations and 26% being supported with major adaptations. Further work needs to be put in place to understand the outcomes this support has helped people to achieve in more detail.

Through our single-handed care programme we undertake person centred assessments of an individual's moving and handling needs to ensure they are able to receive the right amount of care and treatment in the correct environment, whilst at the same time creating capacity across our care system. We have specialist workers designated to work with our hospital and reablement teams to support with the utilization of single handed care, as well as supporting our community teams to review long standing care packages to identify opportunities for more

efficient and effective support. During 2022/23 our Specialist Moving and Handling Team completed 822 assessments to support people to access single handed care solutions, moving in 2023/24 this is an area we continue to prioritise.

Working in partnership with our ICS colleagues we deliver the Ageing Well programme which is aimed at giving more proactive support to people at high risk of health deterioration / hospital admission. This multi-disciplinary approach emphasises to both patients and professionals that health is more than treating health concerns and also looks at social issues, including housing, social isolation, equipment and access. Meetings take place at the patient's home, facilitated by a support worker, placing the patient and their carers at the centre of the consultation. The programme has supported an increase in referrals to new community initiatives, a decrease in unplanned hospital admissions and a reduction in the number of people needing to access support from Community Nurses.

Our approach to harnessing the potential and benefits that Assistive Technology provides to support our residents to live healthier lives is an area of real strength for us. The Assistive Technology Team was created in 2012 and has built an extensive range of solutions throughout the years. The team also benefits from a problemsolving approach meaning that if a solution to a problem cannot be found, their members have the ability and are encouraged to consider any other products in the market that would meet the person's needs.

This approach has led to many new innovations and new ways of working including:

- Canary a monitoring device which provides information about resident activity, in house temperature, as well as light and door activity and now provides evidence to social workers and health practitioners about resident needs.
- Remote monitoring a new project delivered in partnership with NHFT building on preventative models such as the "Barcelona Model" and "Airedale" with the main aim of using technology, including virtual health devices, to monitor people in their place of residence and provide clinical support through a virtual clinical hub.

Both of these interventions, along with other support provided through our Therapy service are evidence of the work we undertake to help reduce avoidable hospital and care home admissions. Our 'Commissioning for a good life' strategy reinforces a strength-based approach for people with a learning disability, with a strong emphasis on outcome focused support planning and progression.

Equity in Experience and Outcomes

The formation of West Northamptonshire Council is seen as an exciting opportunity for a fresh start and the opportunity to really ensure that we are providing excellent services, supporting communities and celebrating everything that is wonderful about West Northamptonshire.

We are firmly committed to the principles of equality and inclusion in both employment and the delivery of services. Our communities and our workforce are made up of a diverse range of individuals and groups with differing needs.

West Northamptonshire Council is committed to advancing equality of opportunity, fostering good relations, and eliminating discrimination, harassment and victimisation through its roles as an employer, service provider, commissioner of services, educator, partner and community leader.

Our Equality, Diversity and Inclusion policy demonstrates the Council's commitment to continued action in tackling inequality and promoting inclusive communities in West Northamptonshire. The policy and associated Equality, Diversity and Inclusion Strategy operates in accordance with statutory requirements.

In addition to this our joint strategic needs assessment is in place and has supported us to identify at a Council wide level the health inequalities encountered within our communities. The use of data has been taken further through the development of our nine Local Area Partnerships (LAP's). Each LAP has a detailed profile that allows us to understand the make-up of each local community and enable us to ensure that service delivery reflects that make up. Our strengths and assets-based prevention programme will see our Adult Social Care services allocated on a proportionate basis to each one of our LAP's.

We recognise that ensuring our residents have access to the appropriate information and advice is key to making sure that they can access help and support that is available to them locally. Further work is required to update the information available via our website and to ensure it is accessible to all. We will also be working alongside our digital colleagues to understand the opportunities available to use technological solutions more effectively to enable our residents to 'self-serve'.

We need to review how we engage with our residents, people who use services and their families/carers and are committed to embedding co-production into our everyday practice. As a new council we understand that we still have much to do in both documenting and fomalising key strategic documents which provide a clear direction of travel for our services over the coming years. We will do this in co-production with our residents, partners and key stakeholders and ensure that the strategies, policies and approaches we produce are robustly tested and scrutinised to ensure that our support and services are accessible to all and that we have a clear understanding the impact of our decisions will have on people with protected characteristics.

In addition to reviewing performance information Service Managers complete on track chats, supervisions, monitor waiting lists and utilise learning from complaints to understand and improve the quality of service being delivered. However, we have identified the need to implement a robust quality assurance framework to enable all of this information to be triangulated and provide a richer understanding of our performance and support our ongoing improvement.



Plans to maintain and improve performance

Theme 2: Providing Support

Associated Quality Statements	
Care provision, integration and continuity	Partnerships and communities
I have care and support that is coordinated, and everyone works well together and with me.	Leaders work proactively to support staff and collaborate with partners to deliver safe, integrated, person-centred and sustainable care and to reduce inequalities.
We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.	We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

Working Effectively in Partnership

A key focus of our initial year as West Northamptonshire Council was on developing strong and productive relationships with local partners; on the 1st July 2022 our new integrated care system, Integrated Care Northamptonshire (ICN) was created and brought together health, care and wellbeing organisations from across the county to deliver and commission services in partnership, whilst ensuring our communities are involved and at the heart of all we do. The image below shows the structure of our local system;

Our ICP strategy describes how our shared vision and aims will be delivered through our 10 ambitions which are underpinned by an outcome and community engagement framework. This has been informed by our Northamptonshire Health Inequalities Strategy and is supporting the development of the ICB 5-year plan.

West Northamptonshire Health and Wellbeing Board is well established and supported by two health and wellbeing forums. The health and wellbeing strategy for West Northamptonshire is currently being coproduced with system partners but requires greater involvement from local people. The board has been successful in the development of our anti-poverty strategy which

Northamptonshire **Integrated Care System** Improve the health and well-Contribute to the economic Integrated Care Partner and social wellbeing being of the population Mental Health & LDA Collaborative Children & Young of Northamptonshire Reduce inequalities in health Health & Care Collaborations and wellbeing outcomes **Ensure value for money** Access to health & social care when needed Good housing in places which are clean and green Locality/Community To feel safe in their homes & when out and about Kettering Area Community Wellbeing Best start in life Connected to their families To be accepted & valued simply for who they are Access to the best available Employment that keeps them & their family out of poverty Access to health &

has enabled considerable support around the cost-of-living crisis.

At a neighbourhood level we have created nine local area partnerships that have populations of between 30,000 to 55,000 people. The partnerships each have local area profiles and are in the process of developing their key priorities. Early success has been the focus on COPD in one of our LAPS where there are twice the national average number of non-elective admissions as a result of COPD.

The Council's cabinet has approved the alignment of its corporate plan to the ICP strategy which will mean that the Council will adopt our nine local area partnerships as its target operating model. This will mean integrated teams are created across not just health and social care but wider delivery of public services. For example, the Police have adopted the LAP geography for their policing wards meaning Police officers will be allocated to each of our local integrated teams.

Four collaboratives are established within our ICS to support the integration of Health and Social Care services.

- Children and Young People
- Mental Health Learning Disability and Autism
- Elective Care
- Integrated Care across Northamptonshire

We have an established Better Care fund, supported by a section 75 agreement; however, we need to move our BCF from a financial arrangement to a partnership which better supports the integration of services. Early success on this has been the development and mobilisation of our integrated Recovering Independence Beds (RIBU). These intermediate care type beds are delivered under dual CQC registration between the Council and NHFT and support pathway 2 discharges. Locally there is also active progress towards integrated commissioning, brokerage and quality monitoring.

Market Sustainability Plans

In March 2023 we published our Market Sustainability Plan for Older Peoples Care homes and Homecare. The purpose of the plan is to provide our understanding of sustainability issues in the Independent Care Sector and to set out the Council's intentions to address sustainability issues. Older People Care Homes - The Council funds 857 people in a Care Home setting. This is split by 632 in a residential care home and 225 in a nursing care home. In addition, our analysis indicates that there are approximately 1,495 self-funders who are accessing care homes across West Northamptonshire through individually and directly arranged support packages. Increasing our understanding of the self under market is a priority of us through 2023/2024.

Occupancy in West Northamptonshire has been affected by both the Covid 19 pandemic and the national policy to support more people in their own homes. The latest analysis shows that this has now recovered to around 80% however, this is much lower than the longer-term average occupancy levels. This presents a significant risk to provider sustainability and the local market is likely to shrink based on levels of demand.

Care quality for care homes in West Northamptonshire is an outlier in comparison to national averages. Please see summary below.

OP Residential Care Homes	OUTSTANDING	3
	GOOD	21
39 services	REQUIRES	11
	IMPROVEMENT	11
	INADEQUATE	2
	NOT YET INSPECTED	2

OP Nursing Homes	OUTSTANDING	1
	GOOD	6
23 services	REQUIRES	16
	IMPROVEMENT	10
	INADEQUATE	0
	NOT YET INSPECTED	0

29 care homes have been rated as inadequate or requires improvement, which is a sizable proportion of the West Northamptonshire Care Home market. While we believe that the Covid 19 pandemic has impacted on care quality, many of the concerns are in relation to the workforce and difficulties in recruiting staff alongside vacancy levels. In addition, Care Homes have reported to us that following the pandemic, staff burnout has increased, which we believe has led to poor practices in care homes, requiring increased

support from the Council to mitigate the impact on residents. Quality concerns combined with suspensions and termination of contracts are making it more difficult to make placements in West Northamptonshire.

The home Workforce West care in Northamptonshire has been significantly impacted because of the pandemic and due to national low rates of pay, particularly for front line care workers. Providers have informed us that although their occupancy status shows vacancy, low levels of staffing numbers have meant that they are unable to accept further placements without compromising the ability to deliver safe levels of care. Skills for Care data indicates that the current front line workforce levels are declining by 0.25% - 0.6% every month and that there are currently 13,000 frontline iob vacancies Northamptonshire. This difficulty to recruit front line staff is also a feature in the Councils own care home provision even though rates of pay are higher than those within the independent sector.

Older Peoples Home care - Is commissioned through a tiered framework arrangement made up of lead providers expected to meet 70-80% of the demand and secondary providers that should deliver the remaining 20-30% of demand. The actual position in September 2022 is that lead providers are delivering around 20% of hours, secondary providers are delivering 67% of hours and off framework/spot providers are delivering 13% of total commissioned hours. It is clear we have too many providers and activity planned for June 2023 will significantly reduce this number to increase efficiency and economy of scale. This activity is paramount in achieving both affordable and sustainable home care.

The recruitment and retention of care workers is overwhelmingly stated by both lead and secondary providers as the primary reason for reduced or insufficient capacity to deliver the full requirements of the Council. The recent increase in fuel prices has further perpetuated the cost of travel time particularly in our rural communities, further reduced provider capacity in these areas.

West Northamptonshire Council is funding home care for approximately 940 people through 16,000 commissioned home care hours per week. The total spend on home care is £294k per week.

Supply in rural areas, particularly Daventry and South Northampton, is increasingly difficult to broker.

Our 'Commissioning for a Good Life' strategy, supporting service users with a learning disability and/or autism, was developed in partnership with health colleagues and people with a Learning Disability in Northamptonshire.

In support of the work of the Learning Disability and Autism pillar which forms part of our local Mental Health, Learning Disabilities and Autism (MHLDA) collaborative workshops have taken place with people who have a lived experience of Autism to review the Autism strategy and develop an updated action plan to underpin strategic delivery. The MHLDA collaborative is also leading on the delivery of a 3 year Learning Disabilities and Autism plan, in partnership with people who have a lived experience, engagement with people is a key part of the plan.

Partnerships and communities

We have a strong relationship with our Integrated Care System partners with whom we have developed a countywide place-based health inequalities plan and strategy. Our Health and Wellbeing strategy is currently being developed and will be aligned to support and enhance the delivery of recently developed approaches.

We have agreed roles and responsibilities in place with partner agencies for delivering shared priorities; a Continuing Health Care (CHC) dispute policy is in place with our ICB partners, but it is acknowledged that there needs to be a wider local CHC policy to ensure everyone is clear of their roles and responsibilities within this process. Transforming Care sits within the LDA pillar of the MHLDA collaborative, which oversees an integrated team who support discharges and minimise admissions. Further to this we have protocols in place with Northamptonshire Healthcare NHS Foundation Trust (NHFT) which outline a joint approach to funding of Mental Health support packages.

iCAN

Integrated Care Across Northamptonshire (iCAN) is about improving the quality of care on offer for older people in our county. It aims to achieve the best possible health and wellbeing outcomes for older people and support them to stay independent for as long as possible.

To meet the needs of adults over the age of 65, the elderly and those who are frail, the three core aims of the iCAN programme are to:

- ensure we choose well: no one is in hospital without a need to be there
- · ensure people can stay well
- ensure people can live well: by staying at home if that is right for them.

The three key areas that make up the iCAN programme are:

- Community resilience: be fully supported to live independently within my community as an older person
- Frailty escalation and front door: be assessed swiftly and treated effectively when I need to be so I can remain independent
- Flow and grip: be fully aware of when I will leave hospital and what support will be given to me once I'm back home.

Local Area Partnerships (LAP's)

LAP's will represent local areas and give a voice to residents, translating strategy into local action.

The aim is that they empower residents to coproduce new services and solutions for their local area and that they contribute to the formation of system-wide priorities by utilising strong evidence-based information and deep local insight from frontline services and communities.

Local leaders will be empowered to take accountability for local action and LAP's will be the mechanism for consolidating the views of residents and local providers.



In addition to this:

- they will unblock challenges and identify at scale opportunities for their areas.
- robust oversight will ensure their priorities are represented throughout the system.
- Local leaders will be able to influence policy to access the right resource and capabilities to deliver their functions.
- They will support our collaboratives by identifying and coordinating community assets across health, care and wider determinant of health partners to coproduce services and pathway (re-) design.

MHLDA Collaborative

Our Mental Health, Learning Disabilities and Autism (MHLDA) collaborative have re-structured their governance, leadership, commissioning and coproduction processes in order to scope and plan improved pathways for individuals that feel:

- meaningful
- person-centred
- agile/ responsive
- integrated
- intelligent

In doing so, the MHLDA collaborative seeks to ensure improved outcomes for patients, service users, carers, and residents of Northamptonshire.

The collaborative also seeks to ensure the delivery of both known and emerging requirements (including the NHS Long-Term Plan, our Outcomes Framework, responsibilities under the Care Act, as well as the 35 Service User generated 'I' Statements).

The structures in place are utilised to make the best use of limited resources, by addressing duplications and gaps within pathways and reinvesting savings into preventative initiatives.

As a group of partners we seek to enable longer term transformation, via cross-system partnerships and integrated commissioning principles that resolve longstanding barriers to good health and care.

Working in this way allows us to reframe relationships in support of Integrated Care System aspirations, as well as place-based aspirations, to drive service user satisfaction, sustainability, transparency, and accountability.

VCS

We also recognise the key role our Community and Voluntary Sector partners play in supporting our resident's health and wellbeing and our Adult Services teams are based in local communities so that they can develop strong links with local community groups and voluntary sector organisations. This approach will be further strengthened through introduction of our Local Area Partnership model.

Plans to maintain and improve performance

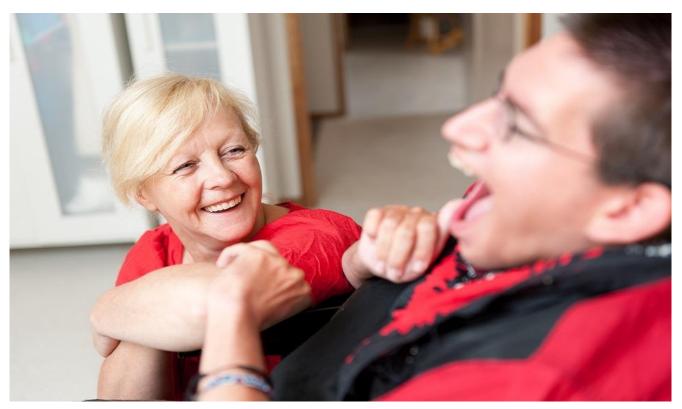
We need to review and develop our Market Position Statement and commissioning strategies to identify any current gaps in them and consequently put plans in place to address these.

Our Autism Strategy and Learning Disabilities Strategy both need to go through the process of review to ensure that they are up to date and reflect the needs of our population and that they align to and support the delivery of the of Integrated Care System's three year Learning Disabilities and Autism plan.

To reduce the waiting times people experience, and increase the availability of support we need to improve the alignment between our brokerage function and operational teams, as well as embedding new commissioning frameworks which enable us to respond quickly to the needs of our residents.

The successful roll out of Local Area Partnership working will be a key feature of how we improve our performance in this regard over coming years.

The formalisation of key policies, including a local Continuing Health Care Policy and joint section 117 policy, is integral to strengthening our joint governance arrangements with local partners



Theme 3: Ensuring Safety

Safe systems, pathways and transitions	Safeguarding
When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. I feel safe and am supported to understand and manage any risks.	I feel safe and am supported to understand and manage any risks.
We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.	We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect, We make sure we share concerns quickly and appropriately.

Safe Systems, pathways and transitions

We promote a culture which recognises that safety is everyone's priority and in doing so we ensure we take the opportunity to learn from adverse events along with our partners, this includes our involvement in LeDeR Reviews, Safeguarding Adult Reviews, Domestic Homicide Reviews, and Northamptonshire Safeguarding Adults Board learning events. Actions from these events are collated into an action plan to address any areas for improvement and the delivery of this is monitored by our directorate management team within our existing governance structure.

Within our geographical footprint we know that we have areas with greater risks for people's safety. such as the mental health hospitals at St. Andrews and St. Mathews. To manage the increased risks presented in these settings we have specific officers who take a proactive approach to providing support and guidance. We have invested time in ensuring we have a close working relationship with the providers concerned to improve practice and accountability, work collaboratively on problem solving and gain assurance in relation to risk management. However, we recognize that to strengthen our approach in future we need to extend this proactive approach to how we work with partners in our communities where data and intelligence identifies there is the greatest risk to people's safety and well being

We operate an Adult Risk Management (ARM) process with partners and communities to ensure that the care and support people receive is safe and where required improvements to safety are addressed.

We have seen improvements from partners in their engagement with this process through the increase in referrals that have been received, which saw 71 adults referred during 2022/23. But we know that wp1e need to strengthen this approach moving forward, particularly in relation to the practice and the application of the risk management process. Whilst we have a safeguarding team that supports organisational safeguarding across agencies, we recognise that there are still gaps to address in ensuring there is seamless support between agencies.

Strong and collaborative arrangements are in place to address risks to the continuity of support people receive with a particular focus on ensuring people's safety is maintained. This is particularly evident in the work we do supporting people moving between Children's Services and Adult Social Care and supporting people being discharged from hospital.

To support young people transitioning into adulthood we have specialist Moving into Adulthood workers who support with the development of Education Health and Care plans and ensuring the right pathways are in place to support children moving through this process. All children going through this route are identified at

the earliest opportunity and our Moving into Adulthood Manager ensures the appropriate links with Adult Social Care teams are in place, during the 2021/22 and 2022/23 financial years we supported 14 children through the transition from Children's Social Care and Adult Social Care.

Supporting people being discharged from hospital, where we have staff working within the hospital discharge hub to inform the discharge planning process and ensure there is a continuity of support provided to the person being discharged.

We have specific policies and protocols in place which enable us to respond to unplanned events and emergencies when required which ensure that any potential risks to people's safety and wellbeing are minimised. This is evidenced through our recent work to support people following the closure of a number of residential care homes in our area.

Our quality assurance process within our commissioning approach ensures that our providers recognise the accountability they hold for providing a safe environment and the appropriate level of support that people in their care require. Locally, with partners, we have formed a joint quality board which is attended by ourselves and representatives from both the ICB and CQC to oversee the quality of care delivered across the local health and care system along with identifying any areas for concern.

Safeguarding

The Northamptonshire Safeguarding Adults Board (NSAB) has a clear understanding of the key safeguarding risks and issues within the area and has used this information to inform the development its strategy. The board has a clear plan in place for delivering this strategy and strategic delivery is supported through the work of various sub committees which all have a clear set of key priorities they are working towards. However, the board recognises that further work needs to undertake in relation to partner accountability and the quality of the performance data that the board receives to support its future delivery.

The NSAB multi-agency framework provides clarity on roles and responsibilities and the processes that should be followed when a safeguarding concern is raised, this framework has been developed by all partners and reviews of the framework and the policies and

procedures within it are undertaken by the multiagency quality and performance sub group. In addition to the multi-agency framework we have aligned our own internal policies and procedures, which are clearly documented, and provide an additional level of guidance for our staff on their roles and responsibilities in relation to safeguarding.

All concerns are allocated and given a priority within 24 hours of being received; this process is undertaken by our Safeguarding Team and audits are carried out to quality check the timeliness and priority being attached to concerns based on risk identification at the point of referral. In addition to this our Assurance Team undertake audits to identify themes and trends within the concerns being submitted. During 2022/23 we dealt with 6360 safeguarding concerns, and saw a 57% increase on the rate of referrals between the beginning and the end of the year. Of these referrals 2,264 (35%) progressed to a section 42 enquiry, with risk either being removed or reduced in 91% of completed enquiries.

To ensure that concerns are raised quickly and investigated without delay a multi-agency information sharing agreement is in place across the NSAB's member agencies.

Key performance indicators which provide an overview of how safeguarding concerns are being managed and responded to are scrutinised by the directorate senior leadership team and through our directorate governance structure, this has previously identified variations between teams in terms of the completion of investigations into





concerns, for which remedial action was implemented.

During 2022/23 we received 1416 DOL's applications whilst simultaneously reducing the number of outstanding applications.

Our decision-making thresholds are set at a level that is in line with best practice guidance and are outlined within the decision-making framework which is captured within the policies of NSAB. This framework has recently been reviewed and is being monitored for consistency of application. Modern slavery and human trafficking are captured within the framework however, there are gaps in relation to links with Community Safety Partnerships and the Police which we recognise need to be addressed to enable a more joined up working.

Across our teams there is clarity on what constitutes a safeguarding concern and concerns arising from the quality of services, this understanding is supported by our 'notification of a concern process' which supports officers to differentiate between a safeguarding concern and a quality concern. Regular meetings take place between the safeguarding team and quality team to identify themes and trends from the concerns that both teams are looking into and where appropriate patterns of concerns are escalated to our internal Quality Board.

The council's Safeguarding Policy, Procedure and Practice Guidance outlines how we embed the principles of Making Safeguarding Personal into our approach to carrying out our enquiries ensuring that the wishes and best interests of the person concerned are central to our work. We enable people at the centre of concerns to determine the extent to which they wish to be

involved in the process and this is captured within

the relevant case file notes. At the conclusion of a safeguarding enquiry we work with people to understand if their outcomes have been achieved successfully. We do acknowledge though that more work needs to be done to make the information we provide people in respect of safeguarding more accessible and to ensure that the principles of Making Safeguarding Personal are being applied consistently and that everyone who wishes to express the outcomes they would like to achieve is given the opportunity to do SO.

Based on 2022/23 data, when Section 42 enquiries asked for desired outcomes, these were achieved in 91% cases, which is reflective of how colleagues work with people to understand risks and manage these.

Through our enquiry outcome letters relevant agencies are informed of the outcomes of safeguarding enquiries to ensure the ongoing safety of the person concerned and any risks related to their ongoing care and support are managed effectively. We use Safeguarding Plans to identify actions which can implemented to reduce future risks for individuals and monitor the delivery of these plans against agreed timelines.

Our participation in Safeguarding Adult Reviews (SAR's) where adults with care and support needs have experienced serious abuse and neglect is used to identify opportunities to learn and improve the systems and practices we have in place. The delivery of actions that are identified for us through the course of reviews that take place is monitored through our safeguarding action plan. We recognise the importance of having a learning culture in place but also recognise that we need to develop this even further so that all opportunities to learn and improve are exploited and that the understanding of safeguarding across all of our staff group is as robust as possible.

Plans to maintain and improve performance

Whilst we have good partnership relationships in place across NSAB we need to broaden these relationships even further so that we are able to take a pro-active approach to ensuring the safety of people living within the area who are at the greatest risk. This includes creating stronger links with our Community Safety Partnerships, Housing Partners and community support for people experiencing a mental health crisis.

Our ARM process needs to be reviewed to ensure it continues to be fit for purpose and the process and its role needs to be promoted to ensure it is utilised effectively. Aligned to this we need to ensure that our new quality assurance framework and audit processes ensure that we have a consistent approach to applying processes right across ASC.

We need to build on the delivery of our composite action plan to make sure that any learning opportunities that arise through the delivery of actions are both identified and embedded into our processes and programme of learning and development.

We would like our process for the dissemination of learning and updates from SARs to be more consistent and robust, as we recognise the importance of utilising the learning that is generated from these reviews, and we also want to ensure there is greater consistency in the information sharing that takes place between the NSAB and our operational teams.

Improvements need to be made to our case recording system to enable us to create a better infrastructure of reports and dashboards so that our key performance metrics can be managed more effectively and where appropriate in real time. A more robust approach to use of data will also support a longer term objective of being able to implement and intelligence led model towards identify and reducing potential risk. Changes to the case recording system are also required to enable workers to move through the safeguarding process more efficiently and escalate concerns where appropriate.

Work is taking place to ensure this is identified within individual forms but work is needed to enable this to be reported on and more engagement is required with people we support (website and information)

A review of our front door triaging process will take place shortly to ensure that this is being managed appropriately and strategic conversations are required to address the volume of PPN's we are receiving given that at present a very low percentage of these are resulting in safeguarding enquiries being undertaken.

Theme 4: Leadership

Associated Quality Statements

Governance, management and sustainability

We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

Learning, improvement and innovation

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

In August 2022 we created our People Directorate which brings together Public Health, Children's Services (Including responsibility for the Children's Trust) and Adult Social Care, led by a single Executive Director as both DASS (Director of Adult Social Services) and DCS (Director of Children's Services). We are also fortunate to have an ex-DASS as our Chief Executive which ensures that the directorate has a strong voice at the corporate table. Our services are led by an experienced group of assistant directors, all permanent appointments, who come together to make up the directorate's senior leadership team.

Governance, management and sustainability

To provide visibility and assurance that we are delivering our Care Act duties, understand the risks to operational delivery and ensure that the quality of care and support our residents receive meets required expectations we have a clear governance structure in place. Within this structure performance management arrangements are embedded and this is articulated within our operating framework.

The key performance indicators we focus on, include measures from ASCOF and SALT, and are overseen and monitored by our directorate Senior Leadership Team. A more detailed review of operational performance takes place at monthly Divisional Management Team meetings where each of the Assistant Directors focus on their respective areas.

In addition to this we operate a Quality Board to address issues and concerns in relation to the provision of care and support people receive and we are strengthening our oversight of assurance work which will include incorporating feedback we receive from people via our complaints and compliments process.

At a Team level staff are offered fortnightly 'On Track Chats' about 'casework and are able to use our 'Ideal Outcome' meetings that are available as a quality and equity check.

On a daily basis we use information about risks, performance and outcomes to allocate and prioritise resources to ensure that our front line teams are able to deliver the actions needed to improve care and support outcomes for local people and communities. The allocation of

resources is also reviewed on a monthly basis within Team Manager Meetings and DMT's to ensure that we are able to deliver the actions required of us.

We have a good level of stability across the Adult Social Care leadership team and all roles and responsibilities are clearly understood and documented.

A risk register for the directorate is maintained and links directly to the corporate risk register so that any risks in the local authority operating environment are identified as early as possible, assessed, and appropriate mitigating actions are put in place to manage them effectively. Through the corporate governance arrangements that are in place the local authority's political and executive leaders are informed about potential risks and challenges facing adult social care both nationally and locally and are therefore able to

take account of these in their decision making processes.

Given the financial challenges of the previous county council and the position inherited by the new unitary authority we have in place a robust approach to budget oversight, accountability and governance. The directorates Senior Leadership Team meet weekly with finance colleagues to discuss all elements of the directorate budget, this includes discussions around the need to mitigate any overspends and consideration of regional and national benchmarking data to understand local trends and inform actions that may need to be taken.

Discussions via this forum also facilitate a collective understanding of the impact of any proposed budget reductions and whether the level of savings required will affect our ability to meet statutory duties. At an operational level we also have a Market Oversight Meeting which scrutinises the amount of money we spend across the independent care sector.

There is a clear alignment of governance arrangements flowing from the political and executive leadership levels of the council through our directorate management structures which is supported by clear processes which outline how and where decisions are made.

Learning, Improvement and Innovation

The local authority designs the system and services around people who need care and support and unpaid carers and the outcomes that are important to them. Services are developed by working with people and their communities. Individuals and communities are involved in decisions at all levels of the system.

Further work needs to be done to develop our approach to support improvement, innovation and research, our Principle Social Worker delivers 'Listen and Learn' sessions but we recognise that this needs to be supported by a more co-ordinated and formalised approach to improvement across the directorate.

Having only recently disaggregated our Learning and Development budget we still have a significant amount of work to do strengthen our focus on how we support the continuous learning and improvement of our workforce, in support of this we recognise the need to develop a workforce strategy for the directorate which clearly articulates our learning and development offer and is aligned to the ASYE and Social Work Apprentice programmes that we already operate.

In addition to this we know that we need to develop plans to ensure that co-production is a key feature of how we design future models for the delivery of care and support, so that we both actively seek and utilise the feedback people, staff and partners have about the care and support we provide.

Innovation and new ways of working, including technology, are encouraged and supported to improve people's health and well-being outcomes.

We have structures and processes in place that oversee performance, but we would like to strengthen our approach internally to be more challenging our own performance and are in the process of reviewing this.

We do however invite external challenge of our performance from via regional ADASS colleagues via the sector led improvement activity they co-ordinate, which has included participation in the Annual Conversation process they operate and hosting a peer review in early March 2023, as well as making our staff available to participate in peer review activities for other councils within the region.

Plans to maintain and improve performance

- Completion and sharing of the operating framework document
- Need to develop a clear strategy and approach to embedding co-production into our work
- Finalise and embed the quality assurance framework
- Continue to strengthen our approach to performance management with a particular focus on the internal challenge we provide



Our Self-Assessment Library

Overarching Documents

Plan name	Link (internal or external)
Corporate Plan and MTFS	Corporate Plan West Northamptonshire Council (westnorthants.gov.uk)
ASC Strategy/s	NASS Strategy 2019-22 (PDF 1.06MB).pdf (northamptonshire.gov.uk)
Market Position Statement(s)	Strategies and plans - Adult social services - West Northamptonshire
Market Sustainability Plan	Add link
JSNA	Adults with Disabilities (northamptonshire.gov.uk) Joint Strategic Needs Assessment (JSNA) West Northamptonshire Council (west-northants.gov.uk)
Improvement Plans for ASC	Service plans 2023
The workforce development strategy for ASC (this could be joint doc with health)	People Strategy (sharepoint.com)
The ICS and ICP plans for the council - including hospital discharge	Integrated Care Partnership Integrated Care Northamptonshire (icnorthamptonshire.org.uk)
Workforce development plan for ASC	Attached
Risk register for ASC	Risk Register

ASC Reports

ASC Reports	Link (internal or external)
Routine ASC performance reports as presented to departmental leadership and the corporate leadership team	5. b) People Scorecard SLT Dec 2022.xlsm
	WNC Corporate Plan Report (moderngov.co.uk)
ASC Annual Reports – e.g., complaints and compliments annual report and SAB annual report	Review of Local Government Complaints 2021-22 (moderngov.co.uk)
Routine ASC financial reports – including savings	Attached
Surveys – with people with lived experience, staff etc – with any accompanying action plans	Attached
Minutes of routine meetings (e.g., the SAB; the ICP)	Both attached
Papers and minutes of a typical departmental leadership team meeting	3. March
Executive summaries from any SAR(s) – together with action plans and progress reports	Safeguarding Adult Reviews (northamptonshiresab.org.uk)

ASC Policies

	Policy name	Link (internal or external)
	Care Act Assessment and Review procedures	13 - Adult Social Care Pathways & 3 Conversations Practitioners Guidance
		https://www.northamptonshire.gov.uk/councilservices/adult-social-care/policies/Documents/Assessment%20and%20Eligibility%20Policy%20%20v1%20Final%2011%2003%2015.pdf)
70	Case allocation, recording and management sign off procedures	09 - Recording with Care Policy
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Policy name	Link (internal or external)
Financial charging procedures	04 - Fees and Charges Policy
DPA procedures	03 - Deferred Payment Policy
Audit policy and procedures	08 - Quality Assurance and Audit
Complaints procedure	16 - Complaints Policy
	17 - Appeals Policy
Panel procedures	20 - Funding Process and Budget Oversight Guidance
HR procedures – e.g., Whistleblowing, Grievance, recruitment; learning and development (mandatory and array of other availa-	11 - Supervision Policy
ble), working from home, wellbeing, supervision and appraisal	https://wnugov.sharepoint.com/sites/WNC-HR
praisar	https://wnugov.sharepoint.com/sites/WNC-Wellbeing
	FWW strategyfinal (004).pdf
MCA procedures	Guidance 01 Mental Capacity Act 2005 (MCA).pdf



West Northamptonshire Council

People Overview and Scrutiny Committee

Annual Report 2022/23

Introduction from the Chair

I am pleased to present this Annual Report on the work of the People Overview and Scrutiny Committee during 2022/23. This is the second such report and will also be the final one after the Council's decision to reorganise its Overview and Scrutiny committee structure from May 2023.

The Annual Report shows that the Committee has dealt with a range of topics from the different areas within its remit: the operation and effectiveness of social care for adults and children; action to address and prevent poverty; the design of new housing services; and the development of new priorities and partnerships associated with the Integrated Care System in the county. The Committee has not been able to look at everything that councillors might have wanted. However, I hope the topics that the Committee has dealt with show that it has recognised the need to prioritise and to do work that contributes to making West Northamptonshire a great place to live, work, visit and thrive.

From all of the work done by the Committee in the past year I would most like to highlight the scrutiny review of support for children and young people's mental health. This dealt with an important current issue relating to a complex service area involving many different partners. Councillors gathered extensive information and used this to make strategic and constructive recommendations. It was an interesting and instructive piece of work to do and one that sought to make a real difference in West Northamptonshire.

I would like to thank the councillors who have contributed to the Committee's work during the past year, through its formal meetings, task and finish panels and other activities. I would also like to thank the Cabinet Members, Council officers and partners who have engaged with its scrutiny and the Democratic Services officers who have helped the Committee to carry out its role.

Finally, I offer best wishes to the new Overview and Scrutiny committees that are now succeeding the People Overview and Scrutiny Committee. I hope that they can continue to build on what the Committee has done over the past two years as they respond to the tasks and challenges of the future.



Councillor Rosie Herring Chair, People Overview and Scrutiny Committee

Purpose of Overview and Scrutiny

The Overview and Scrutiny function at West Northamptonshire Council helps to improve the quality of services provided to local residents and supports and challenges the work of the Council's Cabinet. Overview and Scrutiny carries out a number of roles, including:

- (a) monitoring the decisions of the Cabinet
- (b) advising the Council on forthcoming decisions
- (c) contributing to the development and review of Council policy
- (d) reviewing decisions that have been taken by the Cabinet but not yet implemented that are 'called in' for further consideration

At West Northamptonshire Council these roles are carried out by three Overview and Scrutiny committees: the People, Place and Corporate Overview and Scrutiny committees. These committees are made up of councillors from different political groups and who are not part of the Cabinet.

The Centre for Governance and Scrutiny is a national organisation that promotes effective governance in the public, private and voluntary sectors. The Centre for Governance and Scrutiny states that good scrutiny involves four fundamental principles:

- (a) it provides constructive 'critical friend' challenge
- (b) it amplifies the voice and concerns of the public
- (c) it is led by independent people who take responsibility for their role
- (d) it drives improvement in public services

Remit of the People Overview and Scrutiny Committee

The People Overview and Scrutiny Committee is responsible for scrutinising issues and services in the following areas:

- Adult social care, public health and wellbeing
- Housing and communities
- Children, families and education
- Health services

People Overview and Scrutiny Committee membership

The People Overview and Scrutiny Committee has been made up of the following councillors during 2022/23:

- Councillor Rosie Herring (Chair)
- Councillor Karen Cooper (Vice-Chair)
- Councillor Rufia Ashraf
- Councillor Azizur Rahman
- Councillor Harry Barrett
- Councillor Imran Ahmed Chowdhury BEM
- Councillor Raymond Connolly
- Councillor Janice Duffy
- Councillor Penelope Flavell
- Councillor Cheryl Hawes

- Councillor Greg Lunn
- Councillor Emma Roberts
- Councillor Sue Sharps
- Councillor Nick Sturges-Alex
- Councillor Mike Warren

What has the People Overview and Scrutiny Committee achieved and influenced

The Committee held six formal meetings during 2022/23. Two task-and-finish scrutiny panels have operated during the year.

Some key areas of work by the Committee and the outcomes resulting from them are highlighted below. The Committee's full work programme and agenda papers are available on the West Northamptonshire Council website at Committee - West Northamptonshire Council (moderngov.co.uk).

1. Children and Young People's Mental Health

The Committee completed a significant in-depth scrutiny review on the support available in West Northamptonshire for children and young people with mental health needs who may be at risk of self-harm. Evidence-gathering for the scrutiny review eventually ran for the majority of 2022 - reflecting the complexity of the topic - and took information and views from a range of different perspectives. Information providers included representatives from NHS and voluntary organisations providing local services; from West Northamptonshire Council and Northamptonshire Children's Trust; from a range of local schools; and some impressive young people who gave councillors the benefit of their own and their peers' views and experiences on the subject that were absolutely essential to hear. The task and finish panel that carried out the scrutiny review gained a picture of a substantial increase in mental health needs amongst children and young people, particularly during and after the COVID-19 pandemic, with shrinking resources to meet them. In particular, the panel heard that support from core CAMHS was nearing a two year waiting list. In combination with changes to the criteria for referral over time this made it seem that the waiting list was effectively closed. The panel also heard about the range of agencies providing services and support at different levels of need, which was positive but seemed to result in a complex overall offer. The panel thought that the establishment of the new Integrated Care System in Northamptonshire gave a unique opportunity to take action, for agencies to work more closely together to support need at lower tiers and therefore help to control the demand on more specialist services. The scrutiny review resulted in a range of recommendations for the Council and partners, including calling for a better long-term, whole-system strategy for meeting needs across West Northamptonshire; action to maximise the capacity of CAMHS; and consideration of other opportunities to improve support for children and young people's mental health in schools and in the community. The Cabinet welcomed the recommendations and agreed to come back with proposals responding to them.

2. Integrated care across Northamptonshire (iCAN)

The Committee has continued to monitor the progress and outcomes being delivered by the iCAN programme, a joint health and social care transformation programme intended to help frail older people to remain living independently for longer, producing better health outcomes for them and helping to manage demand on acute hospital care in the county. The Committee established a task and finish panel to carry out this role on its behalf, which met quarterly during 2022 aligned with key points in the iCAN programme contract. The panel reviewed changes and trends in key performance data presented by the lead officer for the programme and representatives from the external transformation partner commissioner to support its delivery. The panel also took information and views from patient representatives about the practical impact of iCAN initiatives on patients' experience of services. The panel has sought to understand and test the situation behind headline level performance, highlighting, for example, that reductions in patients' length of stay in acute care should not result in worse individual outcomes and that patient readmission rates should be considered in judging the effect of iCAN initiatives. The panel also raised the need to review demographic projections informing work on independent living for older people in light of the clearer picture produced by Census 2021 information. Following changes to the delivery model for the original iCAN programme whilst the scrutiny review was in progress, coupled with the reorganisation of the Overview and Scrutiny function for 2023/24, the panel is now in the process of reporting back on its work to date.

3. Debt and money advice service

The Committee has provided Overview and Scrutiny input in the development of future services to provide West Northamptonshire residents with advice on debt issues and money management, at an early stage in the transformation project and later when potential service models had been identified. The Committee gave early views about key principles that should inform future service arrangements. This included highlighting the need for the Council to take a realistic view of capacity available in the voluntary and community sector, given other pressures on these organisations; the risk of people who needed support giving up if services were not easily accessible; and the potential advantages of providing advice services through a partner, or under different branding, given that people seeking support might have debts owing to the Council. The Committee was subsequently able to consider possible service models resulting from further development work and related consultation with stakeholders. The four options identified were to continue the existing mixed approach inherited from predecessor authorities; move to a wholly in-house or wholly commissioned service; or adopt a hybrid approach, delivered both by the Council and some external providers. The Committee supported the proposed hybrid model as its preference from the options presented to it. At the same time, it raised the need for the final proposals to provide a good standard of service across the authority that also addressed more specific issues, such as deprivation in some parts of Northampton or limited access to services in smaller communities in South Northamptonshire.

4. Outpatient renal dialysis services in Northampton

The Committee scrutinised proposals for changes to the provision of NHS outpatient renal dialysis services in Northampton, reflecting its remit for carrying out the Council's statutory responsibilities for scrutinising the planning, provision and operation of the health service in the local authority area. The proposed change involved the relocation of an existing dialysis unit from Riverside House to a new site in the town. The Committee considered the requirements relating to dialysis services and the case for moving the existing unit, which included issues resulting from the redevelopment of Riverside House from office space to housing. The Committee also sought assurances about the suitability of the proposed new location for the dialysis unit, raising questions about its accessibility to patients, transport links, staffing levels and the availability of additional medical support in the event of an emergency. The Committee was ultimately satisfied that the proposed change would support an effective future service and resolved to support it. The dialysis unit reopened at its new site on 1 May 2023. The Committee also recommended that the Cabinet looked into the issues arising from the change of use of Riverside House to identify if there were any lessons that could be learnt relating to partnership working. The Cabinet agreed to follow up this matter.

5. Children's services performance

The Committee scrutinised the overall performance of children's services in West Northamptonshire at the start of 2022/23, meeting with the Chief Executive and directors of Northamptonshire Children's Trust. The Committee was told that the Trust continued to make progress in improving outcomes for children; in ensuring the consistency of professional practice; and in developing a stable, well-led workforce. As a result, the challenges that Northamptonshire faced in these areas were now similar to those affecting other local authority areas, whereas two years before it had been an outlier compared to its counterparts. The Committee provided challenge in various areas relevant to current and future progress, including the scope to develop in-house provision; social worker recruitment and retention; and how well the Trust understood young people's experiences, practice strengths and areas for improvement through its quality assurance framework. Committee members highlighted that the situation had been steadied and improvements made. However, it was questioned what plans were in place to achieve significant change where this was necessary. An area of performance that was particularly highlighted in this regard concerned the completion of initial health assessments for children entering care. The Committee was concerned to note that only 47 per cent of children in care in Northamptonshire had an initial assessment within 28 days of entering care in 2021/22. The Committee recognised that this matter was not within the Trust's sole control as health checks were carried out by health partners. The Committee was advised that this was a priority area and was the subject of work by the Trust and health partners. However, the Committee resolved to highlight this matter to the Cabinet. The Cabinet subsequently recognised the need to improve performance.

6. Adult social care social worker recruitment and retention

The Committee considered the Council's performance on recruitment and retention of social workers supporting the delivery of statutory adult social care services towards the end of 2022, including how it had used additional resources from the national Workforce Recruitment and Retention Funding (WRRF) scheme to help to manage pressures over the previous winter. The Committee was generally satisfied that the Council had delivered the WRRF scheme effectively and that additional payments for staff members had made a real difference. In relation to regular recruitment and retention, the Committee was advised that the number of vacancies in in-house provided care settings had reduced through 2022. The Council had operated targeted recruitment campaigns in preparation for additional pressures over the winter. The process for screening and interviewing applicants and making job offers had also been speeded up, although there needed to be continuing focus on this area. The Committee heard that interest in care and support roles had increased since the introduction of the £10 per hour minimum pay rate by the Council for 2022/23 but there were still challenges in converting this interest to posts filled. This included continuing negative perceptions of care work, which Council recruitment activity sought to counter by highlighting the range of skills involved in care work and the career opportunities that it offered. The Committee looked at additional ways to raise the profile of opportunities in care work amongst different demographic groups. The Committee recommended that more promotional activity focussed on black, Asian and minority ethnic communities and on young people, working with relevant community groups, should be considered. The potential benefit of introducing a local 'heroes' scheme was also highlighted.

7. Homelessness and housing solutions service

The Committee considered work towards the creation of a single homelessness and housing solutions service offer for West Northamptonshire to replace legacy services. The Committee was advised of the methodology, timescales and focus areas for the transformation project and plans to consult with staff members, partners and other relevant stakeholders. The Committee encouraged that the integration of existing services did not take a levelling down approach and emphasised that housing options was a specialist function that could benefit from retaining local knowledge. Reassurance was also sought about arrangements to introduce new IT systems intended to support the housing options function in future. The Committee ultimately endorsed the direction being taken on the transformation project. The Committee also sought reassurance about how effectively the Council was responding to more general challenges relating to housing and homelessness, including the number of people in temporary accommodation in West Northamptonshire, accommodation for refugees, the approach on rough sleeping and the response to issues connected with houses in multiple accommodation.

8. Support for children with special educational needs and/or disabilities

The Committee held a single-issue meeting to scrutinise the planned development of services supporting children with SEND in West Northamptonshire. Committee members represented their own experience of the difficulties experienced by children and parents with the previous service offer in the county, in addition to hearing directly from a

representative from a local parents' group on this. The Committee was advised of the significant challenges facing all local authorities when trying to deliver national requirements relating to SEND provision in the context of a significant increase in the number of children with additional needs, and in the complexity of those needs, over the past 10 years. Associated challenges in West Northamptonshire included a 25 per cent increase in requests for assessment in the past year; pressures on staffing capacity; and a shortfall in specialist educational provision. The Committee then considered an overview of action being taken by the Council to address these practical pressures and to develop a new SEND Delivery Plan for the longer term, which would be co-produced with partners. The Committee provided constructive challenge in areas including the effectiveness of arrangements to oversee the development and implementation of the Delivery Plan and future communication and engagement with parents. The Committee ultimately agreed to set up a task and finish panel to scrutinise the assessment of local needs relating to SEND and plans to meet them. The Panel began its work in 2022/23 but will need to continue into the next year.

9. Development of Integrated Care Northamptonshire

The Committee reviewed progress with the development of the Integrated Care System in Northamptonshire and the practical impact of new priorities and groups resulting from it at the end of 2022. The Committee heard that the Cabinet had endorsed Integrated Care Northamptonshire (ICN)'s 10 year strategy, which set out 10 shared ambitions underpinning the overall aim for residents to 'Live Your Best Life'. The Council would now refresh its Corporate Plan where necessary to support these ambitions and partners would apply them to their own services, reflecting the wide range of services that contributed to good health outcomes. Two pioneer Local Area Partnerships (LAPs) were operating: N4 in Northampton and DSN4 in the south of the authority. These were identifying issues affecting health and wellbeing in their respective areas as well as building experience of operating LAPs. The Committee provided constructive challenge about the timetable for establishing all 9 LAPs in the authority; the resources and expertise that would be available to support them, for example, in bidding for external funding; and the balance between enabling LAPs to operate in different ways and being able to judge their effectiveness as a whole. The Committee raised the need for all LAPs to operate within a common outcomes framework to assist in assessing the results that they produced. The Committee also received a positive response from the Chief Constable of Northamptonshire Police to a request, arising from this topic, for the force to update its crime data reporting processes so that they reflected West Northamptonshire Council's ward boundaries.

10. Fostering services

The Committee considered West Northamptonshire Council's response to the Ofsted inspection of Northamptonshire Children's Trust fostering services reported in March 2023, which resulted in an overall rating of 'inadequate'. The Committee was advised of immediate action being taken by the Trust and the Northamptonshire local authorities to support necessary improvements in areas including introducing a better information recording and case management system; enhancing child-led practice; and arranging more effective safeguarding training for social workers and foster carers. The Committee

highlighted some practical areas where support for foster carers could be improved, such as better access to training on the Signs of Safety care model, and the need to offer training comparable to more bespoke packages provided to foster carers by other authorities. The Committee also sought confirmation of arrangements to ensure that children would be seen consistently by supervising social workers in future. The Committee took some reassurance that senior leaders at West Northamptonshire Council seemed to have a clear view of current areas for development and were committed to working with the Trust to address these. However, the Committee identified new systems and improvement projects that it recommended should be subject to further scrutiny by its successor in 2023/24. The Committee also recommended that Overview and Scrutiny should be kept in touch with any future discussion between the Northamptonshire local authorities and the Department for Education about the long term direction for the children's trust organisational model.

11. Anti-Poverty Strategy

The Committee scrutinised the outcomes of work done under the West Northamptonshire Anti-Poverty Strategy during its first year in operation. The Committee was advised that experience gained so far had validated the multi-agency approach used to develop the Strategy, although there was the potential to broaden engagement still further. Work in the first year had been stronger on supporting people already in poverty than on preventing people from falling into it. Moving forward, there needed to be a shift to a more proactive approach. The implementation of an emergency debt and money advice service from summer 2023, and the development of immigration support and advice hubs represented examples of this approach. The Committee was further advised that the Household Support Fund (HSF) had worked well in West Northamptonshire, although more analytical work needed to be done into the circumstances that had led people to claim food vouchers distributed under HSF-3. Similarly, data on attendances at the Warm Welcoming Spaces provided in winter 2023 needed to be properly understood and used to inform the future, whilst also recognising that this provision had enabled 3,371 people who might otherwise have been missed to be referred on to wrap around services. Ensuring that the collective resources of West Northamptonshire were being mobilised as effectively as possible to prevent people from falling into poverty would be a key challenge regarding the future implementation of the Strategy. The Committee welcomed the honest picture given to it and highlighted that the Council had effectively been able to support the Strategy so far using significant funding from the government, although the Council staff members and Voluntary and Community Sector partners involved deserved credit for the way this had been deployed. The Committee sought assurance that a decision on the distribution of HSF-4 funding would be taken by the Cabinet and subsequently received confirmation that this would be the case.

12. Housing allocations

The Committee considered plans to develop a new Housing Allocations Scheme for West Northamptonshire to replace the different approaches inherited from predecessor authorities by the end of 2023/24. The Committee was advised of the statutory requirements relating to the allocation of social rented housing and areas where there is local choice. The Committee sought reassurance about how the new Scheme would deal with different issues, including provision for members of HM Forces and veterans; the

difference between social rents and affordable rents; and how overcrowding would be defined, given examples in Northampton of homes that were occupied at a level that represented overcrowding in practice but was below the statutory definition. The Committee encouraged that the Council should seek to minimise the amount of change experienced by service-users when selecting and implementing IT systems to support the new Scheme. The importance of providing councillors with clear information about how the new Scheme would operate as part of implanting it was also highlighted. The Committee supported further pre-decision scrutiny of the developing Scheme. The Committee also recommended that development work should explore the potential for the Council to apply a broader definition of overcrowding than the statutory definition.



WEST NORTHAMPTONSHIRE COUNCIL ADULT CARE AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

27 JUNE 2023

Report Title	Adult Care and Health Overview and Scrutiny Committee
	Work Programme 2023/24
Report Author	James Edmunds, Democratic Services Assistant Manager,
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and joint papers)				
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and joint papers)				

List of Appendices

Appendix A – Scrutiny topics identified by the former People Overview and Scrutiny Committee Appendix B – Draft Committee Work Programme 2023/24

1. Purpose of Report

1.1. The report is intended to enable the Adult Care and Health Overview and Scrutiny Committee to consider and agree its work programme for 2023/24.

2. Executive Summary

2.1. The report invites the Adult Care and Health Overview and Scrutiny to consider and agree its work programme for 2023/24. The report presents a draft work programme resulting from discussion at the Committee pre-meeting on 23 May 2023. The Committee in formal session should confirm the items of business to be included in its work programme.

3. Recommendations

3.1 It is recommended that the Adult Care and Health Overview and Scrutiny Committee agrees the topics to be included in its work programme for 2023/24 and the timing and working methods to be used for addressing them; and

4. Reasons for Recommendations

4.1 The recommendation is intended to support the effective operation of the Committee and assist it in carrying out productive scrutiny work during 2023/24.

5. Report Background

- 5.1 West Northamptonshire Council (WNC) has established the Adult Care and Health Overview and Scrutiny Committee for 2023/24 with a remit consisting of the following areas:
 - Adult care, public health and wellbeing
 - Mental Health
 - Statutory health scrutiny
- 5.2 The work of the Committee should reflect and support the mission statement set out in the WNC Overview and Scrutiny Framework: "Effective scrutiny supports the work of the Council in achieving its objectives and priorities through constructive challenge and the promotion of best practice. It makes a positive contribution to the lives of citizens in West Northamptonshire."
- 5.3 The WNC Constitution specifies that Overview and Scrutiny committees will draw up a work programme, which should be informed by consultation with other parts of the Council, including the Cabinet, as appropriate and should also take account of the resources, both officer and financial, available to support it. The WNC Overview and Scrutiny Framework sets out the following requirements relating to the development of work programmes:

"It is vital that each committee sets a work programme in order that it can prioritise its work and ensure there is a clear emphasis on key issues. Work programmes must be focussed as there is strong evidence that when scrutiny focuses on fewer things of greater importance, more is achieved.

"Work planning ensures scrutiny stays focussed on strategic issues where it can make an impact, whilst making the best use of time and resources. Work planning is not a one-off activity. Although a workshop at the beginning of the year may be helpful in identifying priorities and providing structure, each work programme will need to retain flexibility, which means each committee should set aside time to review its work programme to ensure it remains relevant.

"In agreeing items for their work programmes, Overview and Scrutiny Committees should take account of suggestions from members, as well as partners and the public but must also be directed by the Council's corporate plan, plans for policy development and risks and challenges identified through corporate performance reporting. Work planning should be a committee-based activity but must also be forward-looking and strategic in nature."

6. Issues and Choices

6.1 Committee members were able to give initial consideration to possible topics for scrutiny in 2023/24 at the Committee pre-meeting on 23 May 2023. Discussion took account of relevant topics in the work programme of the former People Overview and Scrutiny Committee, which is included with this report (at Appendix A); topics suggested by Committee members; and topics suggested at the Triangulation meeting on 22 May 2023 involving Overview and Scrutiny Committee Chairs and Vice Chairs, Cabinet Members and the Executive Leadership Team. A draft work programme intended to reflect the outcomes of the Committee pre-meeting is included with this report (at Appendix B). This is presented to the current meeting for the Committee to consider and discuss, in order to agree its work programme. It is intended that the resulting work programme will then be reported to each regular Committee meeting so that it can be monitored and updated as necessary.

7. Implications (including financial implications)

7.1 Resources and Financial

7.1.1 There are no specific resources or financial implications associated with this report. The Committee should set a work programme that is realistically deliverable within the resources available to support it.

7.2 Legal

- 7.2.1 Overview and Scrutiny operates within the provisions of the Local Government Act 2000, the National Health Service Act 2006 and the Local Government and Public Involvement in Health Act 2007. It has had specific powers relating to health services since 2001 and crime and disorder since 2006.
- 7.2.2 The Overview and Scrutiny Arrangements in Part 7.1 of the WNC Constitution state: "The Overview and Scrutiny function will develop a work plan as well as supporting policy development, providing pre-decision scrutiny where appropriate, holding decision-makers to account and exercising the formal call-in of executive decisions to review any concerns about the making of the decision."
- 7.2.3 The Overview and Scrutiny Procedure Rules in Part 7.2 of the WNC Constitution state:
 - 1.2 The Overview and Scrutiny committees will consult with other parts of the Council as appropriate, including the Cabinet, on the preparation of any work programme.

- 1.3 The Overview and Scrutiny committees will take into account any views expressed following consultation under Rule 1.2 above in drawing-up any work programme. They should also take into account the resources, both officer and financial, available to support its proposals.
- 1.4 An Overview and Scrutiny Triangulation Group, composed of the Chairs and Vice Chairs of the Overview and Scrutiny committees, members of the Cabinet and Directors, shall be responsible for supporting the work of the scrutiny function and ensuring scrutiny has the opportunity to input into matters of strategic importance.

7.3 **Risk**

7.3.1 The Committee should ensure that its work programme enables it to carry out effective scrutiny work that produces worthwhile outcomes. Risks that could affect this could include setting a work programme that included too much work to be realistically deliverable or that focussed on topics that were not sufficiently strategic. These risks should be mitigated by the Committee giving appropriate regard to the priorities and requirements set out in the WNC Overview and Scrutiny Framework when developing its work programme and using the tools that the Framework provides for planning scrutiny reviews.

8. Background Papers

WNC Overview and Scrutiny Framework

West Northamptonshire Council

People Overview and Scrutiny Committee Work Programme – Potential disaggregation between Overview and Scrutiny committees for 2023/24

West Northamptonshire Council will operate Overview and Scrutiny committees with the following remits in 2023/24:

Corporate Overview and Scrutiny Committee	Adult Care and Health Overview and Scrutiny Committee	Children, Education and Housing Overview and Scrutiny Committee	Place Overview and Scrutiny Committee
Finance and resources	Adult care, public health and wellbeing	Children Social Care	Built and natural environment
Corporate services	Mental Health	Early Years and Family Support	Transport and highways
Shared services under the WNC and NNC Shared Services Joint Committee	Statutory health scrutiny	Education	Community safety and regulatory services (including statutory crime and disorder scrutiny)
Corporate strategy and priorities		Child Mental Health	Economic development, regeneration and growth
		Housing	Statutory scrutiny of flood risk management
			Culture, Leisure and Communities

The new Overview and Scrutiny committees will need to consider their work programmes at the start of 2023/24. This could include considering whether they will take on any topics from the People Overview and Scrutiny Committee's previous work programme. Topics listed in the People Overview and Scrutiny Committee's work programme could be divided between the new committees as follows:

Adult Care and Health Overview and Scrutiny Committee

Topic	Proposed purpose	Task and Finish Panel	Comments
Integrated Care across Northamptonshire (iCAN)	The Committee to scrutinise progress made with the development of iCAN and the position on key risk factors.	Yes	The task and finish panel will meet 6 times from January 2022 to April 2023, aligned to iCAN contract gateway review points, to scrutinise delivery of iCAN programme outcomes.
Debt and Money Advice Transformation Project [NOTE – It is open to discussion whether debt represents a 'wellbeing' topic that should be dealt with by the Adult Care and Health OSC, or a 'communities' topic that should be dealt with by the Place OSC].	The Committee to provide scrutiny input into the development and delivery of the transformation project.	No	The Committee agreed at its meeting on 21 February 2023 to request that more detailed plans for the future Debt and Money Advice service to be developed be presented to the Committee at an appropriate future meeting.
Individual debt and West Northamptonshire Council's approach to debt recovery [NOTE – It is open to discussion whether debt represents a 'wellbeing' topic that should be dealt with by the Adult Care and Health OSC, or a 'communities' topic that should be dealt with by the Place OSC].	The Committee to consider an overview of issues relating to individual debt in West Northamptonshire and the Council's approach to debt recovery.	No	The Committee agreed at its meeting on 21 February 2023 to add this topic to its work programme.
West Northamptonshire Council homecare framework	The Committee to consider an update on progress with the proposed new framework.	No	The Committee agreed at its meeting on 8 December 2022 to request that a progress update be brought to an appropriate future meeting.
Integrated Care Northamptonshire Strategy 2022-32 outcomes framework	The Committee to consider the outcomes framework intended to measure progress with the delivery of key outcomes in the ICN Strategy.	No	The Committee agreed at its meeting on 8 December 2022 to scrutinise the developing outcomes framework for the ICN Strategy.

Topic	Proposed purpose	Task and Finish Panel	Comments
Healthwatch West Northamptonshire work	The Committee to invite Healthwatch West Northamptonshire to give an overview of issues identified through its work.	No	Healthwatch Northamptonshire (HWN) has previously suggested that an item on this topic could be best scheduled following publication of HWN's Annual Report in the summer. The Committee may wish to schedule an item early in 2023/24 on HWN's Annual Report for 2022/23.
Support for people living with dementia	The Committee to scrutinise how well people living with dementia are supported in West Northamptonshire.	To be confirmed	The Committee has identified that work on this topic might take as a starting point the response to the Northampton Borough Council scrutiny review on dementia-friendly communities.

Children, Education and Housing Overview and Scrutiny Committee

Topic	Proposed purpose	Task and Finish Panel	Comments
Task and finish scrutiny review: Special educational needs and disability (SEND) support	To approve the scope for a scrutiny review on this topic, as agreed by the Committee at its meeting on 21 November 2022.	Yes	
Housing Allocations Policy	The Committee to consider the development of a Housing Allocation policy for West Northamptonshire.	No	The Committee agreed at its meeting on 3 May 2023 to recommend that its successor should carry out pre-decision scrutiny of the draft Housing Allocations Policy. At this meeting the Committee also recommended that work to develop the new Policy should explore the potential for West Northamptonshire Council to apply a broader definition of overcrowding than the statutory definition.
School performance	The Committee to invite the Regional Director to discuss school performance in relation to academy schools in West Northamptonshire.	No	The Committee sought to schedule this topic in the first half of 2022 but the-then Regional Director was not able to attend on scheduled meeting dates. This matter was pursued again in September 2022. It initially appeared that the Regional Director would be able to attend the meeting on 21 February 2023 but their attendance ultimately could not be secured. The Committee resolved to write to the Department for Education concerning engagement with the Regional Director.
Provision of free broadband to young people leaving local authority care.	The Committee to provide scrutiny input into the potential development of proposals by West Northamptonshire Council.	To be confirmed	The Full Council meeting on 23 September 2021 referred a motion on this topic to the Committee, to consider the issues involved.
Rough sleeping Page 82	The Committee to provide scrutiny input on responses to rough sleeping in West Northamptonshire.	To be confirmed	 The Committee has identified the following potential focus areas for scrutiny: the potential to continue to apply the principles of the 'everyone in' approach used during the COVID-19 pandemic severe weather shelter provision.

Topic	Proposed purpose	Task and Finish Panel	Comments
Provision of housing support for refugees	The Committee to consider an update on the provision of housing support for people coming into West Northamptonshire as refugees.	No	The Committee agreed at its meeting on 25 October 2022 that it should seek to maintain oversight of this issue.
Fostering services	The Committee to scrutinise actions to support the improvement of services provided by the Northamptonshire Children's Trust Independent Fostering Agency following the Ofsted inspection reported in March 2023.	No	 The Committee agreed at its meeting on 3 May 2023 to recommend that its successor should seek to consider various areas relevant to the programme of improvement: The quality assurance framework and processes put in place to support effective operation of fostering services in future The outcomes delivered by the Valuing Care project on opportunities to step down care placements An overview of the operation of the multiagency referral panel and of the decision-making panel for children entering local authority care, to include data on caseloads, decisions and the outcomes for young people Data on the number of children in care from West Northamptonshire, broken down by relevant factors An outline of any discussions between the Northamptonshire local authorities and the Department for Education about the long term future direction for the Northamptonshire Children's Trust organisational model.

Place Overview and Scrutiny Committee

Topic	Proposed purpose	Task and Finish Panel	Comments
Sports and Leisure needs assessment	The Committee to consider the needs assessment for sports and leisure provision in West Northamptonshire.	To be confirmed.	This item was originally scheduled for late-2022 but the time required for the corporate work has since changed and late-2023 is now more likely.
Sports and leisure provision	Scrutiny of how West Northamptonshire Council works together with other service providers and community groups to provide the best overall offer to residents from all parts of the community.	To be confirmed.	The Committee considers that this work could be an example of scrutiny on the wider theme of the community impact of Council services: looking at how the Council identifies needs, other support available in the community that helps to meet those needs, and therefore how the Council can focus resources to have the most impact.

West Northamptonshire Council

Adult Care and Health Overview and Scrutiny Committee – Draft Work Programme 2023/24

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Integrated care across Northamptonshire (iCAN) – supporting independent living for frail older people	The Committee to consider: a) An update from the Task and Finish Panel formed to scrutinise progress with the iCAN programme b) Future direction of iCAN	27 June 2023	Committee meeting item	Executive Director People Services	The scrutiny work was carried out in 2022 under the former People Overview and Scrutiny Committee.
Care Quality Commission inspection of adult social care – preparation	The Committee to provide scrutiny input and constructive challenge regarding West Northamptonshire Council's self-assessment for the CQC inspection.	27 June 2023	Committee meeting item	Executive Director People Services and Adult Social Care Assistant Directors Cabinet Member for Adult Care, Wellbeing and Health Integration	
Care Quality Commission inspection of adult social care – outcomes	The Committee to provide scrutiny input and constructive challenge regarding West Northamptonshire Council's action plan to address the outcomes of the CQC inspection.	To be confirmed	Committee meeting item	Executive Director People Services and Adult Social Care Assistant Directors Cabinet Member for Adult Care, Wellbeing and Health Integration	
Debt and Money Advice Transformation Project	The Committee to provide scrutiny input into the development and delivery of the transformation project.	To be confirmed	Committee meeting item	Assistant Director Revenues and Benefits	The People Overview and Scrutiny Committee agreed at its meeting on 21 February 2023 to request that more detailed plans for the future Debt and Money Advice service to be developed be presented to the Committee at an appropriate future meeting.

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Individual debt and West Northamptonshire Council's approach to debt recovery	The Committee to consider an overview of issues relating to individual debt in West Northamptonshire and the Council's approach to debt recovery.	To be confirmed	Committee meeting item	Assistant Director Revenues and Benefits	The People Overview and Scrutiny Committee agreed at its meeting on 21 February 2023 to add this topic to its work programme.
Establishment and operation of Local Area Partnerships	The Committee to scrutinise progress being made with LAPs after a year of operation.	To be confirmed, although the logical timing is in 2024	Committee meeting item	Executive Director People Services Cabinet Member for Adult Care, Wellbeing and Health Integration	
Provision of blue badges	The Committee to scrutinise the effectiveness of arrangements for providing blue badge parking permits to people with reduced mobility in West Northamptonshire.	To be confirmed	Spotlight review	NA	
Support for people living with dementia	The Committee to scrutinise how well people living with dementia are supported in West Northamptonshire	To be confirmed	To be confirmed	Executive Director People Services	
Healthwatch West Northamptonshire Annual Report 2022/23	The Committee to consider the Annual Report to identify any topics for scrutiny that it may suggest.	24 July 2023	Preliminary discussion at a pre-meeting	NA	
Forthcoming service confects	The Committee to be advised of any opportunities to	24 July 2023 6 December 2023	Standing item at pre- meetings	Executive Director People Services	

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
	provide scrutiny input in developing the requirements for significant service contracts relating to its remit.	6 March 2024			

Adult Care and Health Overview and Scrutiny Committee meeting dates in 2023/24

Pre-meeting	Committee meeting
23 May 2023	27 June 2023
24 July 2023	14 September 2023
6 December 2023	17 January 2024
6 March 2024	17 April 2024

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