



Children, Education and Housing Overview and Scrutiny Committee

A meeting of the Children, Education and Housing Overview and Scrutiny Committee will be held at the Maybin Room, One Angel Square, Angel Street, Northampton NN1 1ED on Wednesday 3 April 2024 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.	Minutes (Pages 5 - 14) To confirm the Minutes of the meeting of the Committee held on 5 February 2024.
4.	Chair's Announcements To receive communications from the Chair.
5.	Homelessness and Rough Sleeping Strategy To receive a presentation outlining the delivery plan and the key milestones for Year 1 implementation of the Strategy.
6.	Severe Weather Emergency Protocol (Pages 15 - 20) To receive an update on the recent operation of the SWEPP.

7.	<p>0-19 Health Visiting and School Nursing Service (Pages 21 - 26) To scrutinise potential options for future delivery of the service.</p>
8.	<p>Review of Committee Work Programme (Pages 27 - 32) To review and note the Committee Work Programme.</p>
9.	<p>Urgent Business The Chair to advise whether they have agreed to any items of urgent business being admitted to the agenda.</p>
10.	<p>Exclusion of Press and Public Exempt Items In respect of the following items the Chairman may move the resolution set out below, on the grounds that if the public were present it would be likely that exempt information (information regarded as private for the purposes of the Local Government Act 1972) would be disclosed to them: The Committee is requested to resolve: "That under Section 100A of the Local Government Act 1972, the public be excluded from the meeting for the following item(s) of business on the grounds that if the public were present it would be likely that exempt information under Part 1 of Schedule 12A to the Act of the descriptions against each item would be disclosed to them"</p>

Catherine Whitehead
Proper Officer
22 March 2024

Children, Education and Housing Overview and Scrutiny Committee Members:

Councillor Andrew Grant (Chair)	Councillor Stephen Hibbert (Vice-Chair)
Councillor Harry Barrett	Councillor Sally Beardsworth
Councillor Imran Ahmed Chowdhury BEM	Councillor Louisa Fowler
Councillor Cheryl Hawes	Councillor Azizur Rahman
Councillor Zoe Smith	Councillor Nick Sturges-Alex
Councillor Mike Warren	

Information about this Agenda

Apologies for Absence

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 / Kathryn Holton, Democratic Services, via the following:

Email: democraticservices@westnorthants.gov.uk

Or by writing to:

West Northamptonshire Council
The Guildhall
St Giles Street
Northampton
NN1 1DE

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Children, Education and Housing Overview and Scrutiny Committee

Minutes of a meeting of the Children, Education and Housing Overview and Scrutiny Committee held at Jeffrey Room, The Guildhall, St Giles Street, Northampton, NN1 1DE on Monday 5 February 2024 at 6.00 pm.

Present:

Councillor Andrew Grant (Chair)
 Councillor Harry Barrett
 Councillor Sally Beardsworth
 Councillor Imran Ahmed Chowdhury BEM
 Councillor Louisa Fowler
 Councillor Azizur Rahman
 Councillor Zoe Smith
 Councillor Nick Sturges-Alex
 Councillor Mike Warren

Apologies for Absence:

Councillor Stephen Hibbert
 Councillor Cheryl Hawes

Officers:

Stuart Lackenby, Executive Director - People Services & Deputy Chief Executive
 Ben Pearson, Assistant Director - Education
 Jacqueline Brooks, Housing Services Manager
 Sarah Credland, Strategic Housing Officer
 Jo Barrett, Head of Housing Strategy and Partnerships
 Sally Burns, Director of Public Health
 Racha Fayad, Public Health Principal
 Katie Morlidge, Head of School Effectiveness
 James Edmunds, Democratic Services Assistant Manager
 Kathryn Holton, Committee Officer

1. Apologies for Absence and Notification of Substitute Members

Apologies were received from Councillors Hibbert and Hawes. Apologies were also received from the Cabinet Member for Children, Families and Education and from the Director of Children's Services.

2. Declarations of Interest

Councillor Aziz declared a pecuniary interest in Item 5 (Homelessness and Rough Sleeping Strategy). He left the room for the duration of this item and did not take part in the discussion.

3. **Minutes**

The minutes of the meeting held on 25 September 2023 were agreed as an accurate record.

4. **Homelessness and Rough Sleeping Strategy**

The Housing Services Manager outlined the collaboratively-produced West Northants Homelessness and Rough Sleeping Strategy. Members were invited to input to the strategy before it was presented to Cabinet for adoption by April 2024. Key aims were increasing activity around prevention of homelessness, reducing numbers in temporary accommodation, which required working with partners to source and deliver suitable accommodation and reducing rough sleeping. There were four themes: improved collaboration between partnerships to make homelessness everyone's business; early joined up intervention and prevention of homelessness; increased provision of and access to suitable and sustainable settled housing solutions; and ensuring that rough sleeping was rare, brief and non-recurring.

Councillors made the following comments:

- Concerns were expressed regarding help for people with protected characteristics.
- Hidden homelessness needed to be considered.
- The strategy was a credit to the housing team and public health. It was good to see collaboration.
- There needed to be collaboration with WN charities around homelessness and rough sleeping – historically relationships had been difficult.
- How would the acquisition of new homes be implemented?
- Were modular homes being considered? There were garages waiting for demolition which could be replaced with modular homes.

The Housing Services Manager responded as follows:

- Those with protected characteristics were a definite focus in the priorities and the particular needs of women were addressed in the strategy.
- There would be a 12 month delivery plan for the strategy. It would then be reviewed every 12 months to take account of government policy and other changes.
- A session on rough sleeping had been attended by voluntary agencies and there was an impetus to work collaboratively and provide ongoing support.
- An acquisition programme for new homes was being delivered with a plan coming to Cabinet in May.
- There had been discussions about modular construction and a plan to visit Milton Keynes where the council had recently delivered modular housing.

The Cabinet Member for Housing made the following comments:

- Work had been done to look at best practice of other local authorities.
- The draft document to Cabinet would have an acknowledgement of women and survival sex in relation to homelessness and rough sleeping.
- Collaboration and partnership working was important and had been very impressive. A focus was starting on preventative work.

- Any potential site for modular homes would be looked at. It was important to get the right site where residents would be safe, for example on their walk to the town centre.

The Chair thanked those who had produced the thorough strategy and welcomed the work that had been done.

RESOLVED: that the Committee:

- a) welcomed the work that had been done on the Homelessness and Rough Sleeping Strategy and looked forward to the Strategy producing outcomes;
- b) agreed to receive a further update on the Homelessness and Rough Sleeping Strategy delivery plan at the Committee meeting on 3 April 2024 following presentation of the Strategy to Cabinet in March.

5. **0-19 Health Visiting and School Nursing Service**

The Director of Public Health noted that the budget for this service was almost half of the entire public health budget. This was an opportunity to deliver against the ambition to provide the best start in life for people in West Northants.

The Public Health Principal presented the report and stated that there was a public health duty to provide a health visiting and school nursing service. The service was currently provided jointly with North Northamptonshire but from 2025 separate contracts would be in place. The draft commissioning timeline as outlined in the report was shared. There had been widespread consultation and roundtable workshops to inform the process.

Councillors made the following comments:

- School nursing teams were expressing concern over their jobs. How was communication with staff and messaging to services being managed? Support would need to be provided where needed.
- Was consultation with families with children aged 0-5 with all families or a selection? How would the selection process and consultation take place?
- What sort of organisations might be looking to tender? Could an in-house bid be requested?
- It needed to be ensured that people did not slip through the net during the process of change.
- Was the aim of offering a single contact number/booking for the REACH service too complicated?
- How would children who were at risk in their own home from the effects of smoking/drug abuse be protected?
- A staff voice was needed on the consultation – a people-first mindset.
- The challenge of the relatively lesser need of the South Northants area affecting funding for the greater need in Northampton town needed to be addressed.

The Director of Public Health and Public Health Principal responded as follows:

- Work would be done with the provider from the start regarding appropriate communication with staff. The roundtable would start that sort of consultation and inform the process going forward.
- A consultation with surveys to parents and carers received more than 2500 responses and those groups would be engaged with to establish what was working well now, what were the challenges as service users and how the service could be designed to work well for them.
- The majority of authorities had services provided by a health trust. Some were in-house. The most common would be through a health body, particularly for provision of clinical services.
- Work was being done to ensure all services worked together and transitions were covered.
- The specification for procurement was being looked at and all options would be considered.
- There was an opportunity to understand need, and those who did not take up services which were offered. Another challenge was the need to deliver services for a year whilst the new service was being designed and commissioned.
- A service improvement plan was being looked at for REACH to consider how the service could be optimised in the best way for children not meeting the CAMHS threshold.
- There would be high expectations on the provider to make a difference. This was one of a number of big programmes of work orientated around having the best start in life.

RESOLVED: that the Committee agreed to receive a further update on the 0-19 Health Visiting and School Nursing Service at the Committee meeting on 3 April 2024 before the procurement process commenced.

6. **School exclusions**

The Assistant Director Education advised that the three distinct areas of work being considered were all covered by the Head of School Effectiveness. There had been key developments in the service with increased staff, together with systems and processes to develop effective practice. The Department for Education were preparing a statutory document to inform LA processes which would set out responsibilities, but this was not yet in place.

Elective Home Education (EHE)

The Head of School Effectiveness stated that every parent had the right to choose EHE. The council had a responsibility to ensure children were safe and receiving an effective education – a term which had not been defined. There were 1013 children in WN educated at home, 49 with EHCP, 16 were children in need and 376 were eligible for free school meals (FSM).

Councillors made the following comments:

- Were children in need getting vaccines etc?
- Were children still entitled to FSM if they were EHE?

- There were significant safeguarding concerns for EHE children. Yearly assessments were done for all children. How many were flagged on the risk register? More resources were needed.
- Data was requested regarding numbers on school attendance orders.
- The lack of clarity around what constituted effective education needed to be tackled.
- Home school pupils found it difficult to find an exam centre to do GCSEs because schools feared a negative impact on their statistics.
- It was unfair to penalise EHE children by not facilitating access to exams where possible.
- The emphasis should be on getting EHE children back to school rather than facilitating exams.
- It was worrying that the largest numbers of EHE children were at the most critical stage of their education and also had the most mental health issues. There was no consistency in schools to manage mental health and some parents considered EHE to be the only way forward.
- How many year 11 Fair Access Placements had there been? These did not contribute to outcomes but often came with issues.
- Why did the council not intervene and police parents who were not providing an effective education?
- What percentage of the school population was EHE? How did WN compare to peers? Was EHE increasing and if so, why?
- Schools were a safe place for vulnerable children. Referrals to care were increasingly from EHE. Could there have been intervention earlier?
- One of the concerns with EHE was socialisation of children.

The Assistant Director Education and the Head of School Effectiveness responded as follows:

- Children in Need (CIN) meetings took place regularly which would pick up issues such as vaccination.
- Those responsible for FSM would implement it for EHE children.
- Vulnerable children were RAG-rated when they came out of school. Those who were red would be monitored half-termly and more frequently if there were concerns. Checks were made in respect of safeguarding and the quality of education. Those who were vulnerable were linked to social workers.
- It had been hoped that the DfE would require a register for EHE but this had not happened.
- Some data, including on school attendance orders, had not been collected historically. With new leadership and tighter rigour this was now being addressed.
- The reasons for EHE were complicated. It could be around mental health stresses, SEND needs not being met or lifestyle choice.
- Schools were often not keen to re-admit year 11 EHE children.
- The definition of 'effective education' was so loose that it could not be enforced. The focus needed to be on safeguarding.
- Some EHE was very good and if a child wanted to take GCSEs in year 11 help should be provided.
- The EHE community often distrusted the LA for many reasons. Work was being done to engage with the community. There were EHE forums to discuss

and hear challenges and incentives such as museum passes. New team members were full of enthusiasm and ideas.

- There were communities where EHE children could come together and socialise.

Children missing from education (CME)

The Head of School Effectiveness defined Children missing from education (CME) as those children who had been allocated a school place but did not turn up at school. There were currently 260 CME. The numbers fluctuated and were slightly higher than other authorities. However there was no standard way of data reporting so some figures could be skewed. CME posed more of a risk than EHE. There were 186 schools with CME and engagement with the council varied considerably with some not reporting to the LA. Ideally intervention would take place early but in many cases the LA was not aware of CME at an early enough stage.

Councillors made the following comments:

- One issue was that absence of a child with a social worker had been treated as an attendance issue rather than CME.
- What was the closure rate on CME within 5 days of cases being opened? What links were there between the CME teams and safeguarding?
- Were there problems with non-cooperation from academies which were outside LA control?
- Could numbers of BAME community students who were categorised as CME be provided?

The Head of School Effectiveness and the Assistant Director Education responded as follows:

- The team were working with school admissions to establish where responsibilities lay for CME.
- The most common time for children to be missing from school was 3-6 months. This was a challenge for the team and there were links with social care.
- The legal team now had in-house education lawyers. Prosecutions had been paused while processes were reviewed but would be re-instigated as soon as possible.
- There were clear procedures for schools around starters and leavers. This was an area looked at by Ofsted.
- All schools had a school attendance support officer who would be asking about missing pupils. This would be picked up by Ofsted as a safeguarding concern, resulting in an inadequate rating. The LA met with Ofsted each half term and flagged issues.
- School attendance generally was declining. There had been many more children absent from school since Covid, although attendance in WN was much higher than average.

Exclusions

The Head of School Effectiveness outlined the data on permanent exclusions. There were more children excluded from secondary schools than primary schools. Fixed term exclusions were most common for physical assault against an adult.

Councillors made the following comments:

- Counsellors were needed in schools because teachers did not have time to deal with issues.
- How could the barriers to change in culture in Multi-Academy Trusts be overcome?

The Head of School Effectiveness and the Assistant Director Education responded as follows:

- A large proportion of suspended or excluded pupils had undiagnosed needs. An investment had been made in therapeutic thinking for all schools.
- Additional needs were under-identified. Training around early identification and assessment was being encouraged. Teachers needed to be equipped to manage behaviour.
- Changing culture was challenging and would be underpinned by the alternative provision draft proposal. Models in other LAs were being looked at.

RESOLVED: that the Committee:

- a) Requested further information on the following:
 - The number of yearly assessments for the 1013 EHE children in West Northants.
 - The number of school attendance orders which had been made.
 - The 1013 EHE pupils as a percentage of all pupils and how WNC compared to its peers.
 - The number of cases where a child subject to a care referral was in EHE.
 - The number of closure rates of CME cases within 5 days of them being opened.
 - The percentage of CME cases in the BAME community.
- b) Requested that representations be made to the DfE regarding a register of EHE children.
- c) Requested to receive an update on school exclusions at the Committee meeting on 4 June 2024.

7. **Provision of free broadband to young people leaving local authority care**

The Chair advised that the item had been brought to the Committee to enable it to consider the matter and determine what action, if any, it wished to take. Councillor Danielle Stone who had proposed the original motion to Council in September 2021 addressed the Committee.

Councillors made the following comments:

- It was disappointing that the report did not give much context and no comparative work had been done with other local authorities. For example, a group of councils in Greater Manchester had run a pilot looking at digital inclusion and were now rolling it out.
- A digital inclusion strategy was needed. Many young people did not know how to use computers.
- Not all young people leaving care would need the support, so costs would not be as high as estimated.

- Care leavers have needs and are over-represented in the justice system.
- Digital exclusion is not just lack of a computer but not knowing how to use it. A digital club could be offered for training in digital skills, particularly focused on job applications. Pay as you go (PAYG) SIM cards could be provided.
- Broadband providers could be approached to negotiate a cost-effective deal. Most providers had a social tariff. WNC had a transformation budget which could be used.
- A one year pilot scheme could be introduced.
- It was not easy to manage everything digitally on a phone. Application forms, for example, were difficult to complete on a small screen. It was possible to access computers in libraries, but opening hours were limited.
- Some children were provided with technology through schools. Data to access this technology could also be provided for those that needed it.
- A potential task panel on care leavers/digital exclusion could be considered.

The Executive Director People responded as follows:

- The passion evident around this subject was appreciated.
- The discussion had widened from the original suggestion to provide free broadband to care leavers to include supporting digital access.
- The Manchester model had buddied with Virgin/O2 who had accessed government money to support the scheme.
- Existing support was available. A PA was allocated to each care leaver and they had the responsibility of maximising funding to help the young person.
- The complexity around administration and cost were factors in why the original motion was not being recommended. However, digital empowerment needed to be focussed upon and more targeted work for those who were digitally excluded.

RESOLVED: that the Committee supported action by WNC in the following areas:

- a) To ensure providers such as supported lodgings have accessible Wi-Fi for those who live there;
- b) To ensure foster homes have accessible Wi-Fi for those living there;
- c) To work with employers around social values and encouraging the recruitment and support of care leavers;
- d) To continue the ongoing review of the local offer for care leavers and for PAs to be tasked with ensuring that care leavers have access to free broadband.

8. **Review of Committee Work Programme**

The Committee reviewed its current work programme and considered prospective business for coming meetings, including additional topics identified at the current meeting. The Committee also considered a request from Councillor Barrett to extend the time allocated to the scrutiny review of support for children with SEND to enable it to complete its work effectively.

RESOLVED: that the Committee:

- a) Agreed that an extension of time be given to the SEND Task and Finish panel to complete its work. A report would be brought to the Committee meeting on 4 June 2024.

- b) Agreed that a task panel on care leavers/digital exclusion could be considered in future.
- c) Agreed to include the following topics as agenda items for the Committee meeting on 3 April 2024:
 - Update on the operation of the Severe Weather Emergency Protocol (SWEP)
 - Update on action being taken to address issues raised by scrutiny review of child and adolescent mental health and the risk of self-harm
 - Review of the specification for the 0-19 Health Visiting and School Nursing Service contract
 - Review of the draft delivery plan for homelessness and rough sleeping.
- d) Agreed to include the following topics as agenda items for the Committee meeting on 4 June 2024:
 - Update on School Exclusions
 - Reports from Task and Finish Panels (SEND and Foster Carers)

The meeting closed at 8.45 pm

Chair: _____

Date: _____

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**West
Northamptonshire
Council**

SWEP 2023/24 Analysis



Introduction

- This is an overview on the operation of SWEP (Severe Weather Emergency Protocol) during the 2023/24 winter, specifically to review:
 - Number of times SWEP was called
 - How many people looked after
 - How long they stayed under SWEP
 - Whether SWEP operated as intended

Weather monitoring

- The Met office website was monitored both morning and evening every day 21 November 2023 - 31 March 2024
- Both our rural and urban areas were analysed, with the lowest temperature recorded, together with wind and rain forecast

Activation

- The unusually warm weather has seen SWEP activated only twice:
 - 29 November to 03 December – 5 nights
 - 14 January to 19 January – 6 nights
 - Activated for a total of 11 nights

SWEP – number of people looked after

The number of people looked after during SWEP was:

Locality	Male	Female	Total	%
Daventry	4	0	4	7.55%
Northampton	37	9	46	86.79%
South Northants	3	0	3	5.66%
Total	44	9	53	

SWEP – how long people stayed

The length of time people stayed in SWEP

- Period 1: SWEP operational for 5 nights, average length of stay was 3.5 nights
- Period 2: SWEP operational for 6 nights, average length of stay was 3.2 nights

SWEP – did it operate as intended?

SWEP operated in a similar way to previous years

- Communal accommodation, this winter in Oasis House, with specific individuals in TA where needs required it
- Good collaboration with partners
- No specific problems

Outcomes

- The nature of the temporary accommodation through SWEP provides little additional opportunity for housing work with the SWEP residents:
 - 1 person transitioned into the HOPE night shelter
 - 1 person began sofa surfing with a friend
 - 51 people remained in the homeless situation they were in prior to SWEP



**Options for Contracting Arrangements and Service Delivery model for
0-19 Health Visiting and School Nursing Service**

Lead Director: Sally Burns – Director of Public Health

1. Summary

The 0-19 Healthy Child Programme (0-19HCP) is delivered locally by Northamptonshire Healthcare NHS Foundation Trust (NHFT). The service is currently delivered as a county-wide offer for children, young people and families living across West Northamptonshire Council (WNC) and North Northamptonshire Council (NNC).

The 0-19 Healthy Child Programme provides a framework to support collaborative work and more integrated delivery and aims to:

- help parents develop and sustain a strong bond with children
- encourage care that keeps children healthy and safe
- protect children from serious disease, through screening and immunisation
- reduce childhood obesity by promoting healthy eating and physical activity
- identify health issues early, so support can be provided in a timely manner
- make sure children are prepared for and supported in all childcare, early years and education settings and especially are supported to be 'ready for to learn at two and ready for school by five'

The Healthy Child Programme is led by qualified public health nurses, including health visitors and school nurses, who with their professional teams (the 0-19 Service) provide the vast majority of Healthy Child Programme. The Programme does, however, rely on effective partnership working and collaboration with a wide range of other health and social care professionals.

The Healthy Child Programme (HCP) requires all families with babies to be offered 5 mandated health visitor reviews before their child reaches 2 and a half years old.

Public health services commissioned by local authorities form part of the 'whole system' of support for children and young people's health and wellbeing. Local authorities are well placed to ensure integrated commissioning and delivery with a wide range of stakeholders who provide support for physical and mental health and wellbeing, including the NHS and the voluntary and community sector, schools, and colleges

The core public health offer for all children includes:

- child health surveillance (including infant physical examination) and development reviews
- child health protection and screening
- information, advice and support for children, young people and families or carers
- early intervention and targeted support for families with additional needs
- health promotion and prevention by the multidisciplinary team
- defined support in early years and education settings for children with additional and complex health needs

- additional or targeted public health nursing support as identified in the joint strategic needs assessment, for example, support for children in care, young carers, or children of military families

There is no set content of 0-19 Healthy Child Programme specification and so many local authorities commission different packages; some include Integrated Care Board (ICB), and NHS England commissioned services in 0-19 service, and others deliver some elements in house.

On 17th January 2024, WNC and NNC decided to contract separately and disaggregate the 0-19 Health Visiting and School Nursing service from March 2025. In this report, Public Health is presenting the range of options on the future contractual arrangements and delivery model of 0-19 service.

- **Option 1:** Re-procure and commission a revised 0-19 HCP service with a new service specification that reflects the health needs assessment recommendations and consultation feedback from WNC children, young people, and their families.
- **Option 2:** In house provision of 0-19 HCP service to be delivered by WNC and this covers 2 sub-options:
 - 2.1** Full in-house provision of 0-19 HCP delivered by the local authority
 - 2.2** The 0-19 service to be integrated with clinical staff (e.g. NHFT or any other clinical provider) and staff from WNC working together in a team. This will enable greater collaboration and will demonstrate the benefits and challenges of more integrated ways of working that will help align health and social care services for CYP and families across WNC.
- **Option 3:** Hybrid Approach - 'Break up' single contract and consider options to commission or bring in house some elements of the 0-19 HCP service.

Whichever option is chosen, it is predicted that the new contract will commence 1st April 2025. The length of the contract is yet to be agreed by procurement.

2. Recommendations

- The Children, Education and Housing Overview and Scrutiny Committee to note and consider options available for the 0-19 service contractual arrangement from 1st April 2025.
- The Children, Education and Housing Overview and Scrutiny Committee to provide its views on which option/s it recommends for further development to secure the provision of 0-19 services from 1st April 2025.

Work to assess the different options available in this report and their pros and cons is ongoing, and further information will be brought to the Committee meeting.

3. Supporting Information:

I. Background and Context

In 2009, the Department of Health set out an evidence-based programme of best practice, the Healthy Child Programme (HCP), with the ambition of making everywhere as good as the best by developing improvements in health and wellbeing for children and young people. The HCP offers every family a programme of screening tests, immunisations, developmental reviews, and information and guidance to support parenting and healthy choices – all services that children and families need to receive if they are to achieve their optimum health and wellbeing. The responsibility for the delivery of the HCP lies across a range of services, with Health Visiting and School Nursing having a key lead role. The services include the delivery of nationally mandated public health functions including the Five Universal Mandated Health Reviews (before a child is 3 years old) and the National Child Measurement Programme. The annual oral health surveys are a statutory requirement.

II. Contractual Arrangement

WNC is determined to work with key partners in a more integrated way ensuring all services are collaborative, complimentary and make best use of the council's resources. This paper looks at the different options for delivering the 0-19 Health visiting and School Nursing contract after 31st March 2025, which is when the service will disaggregate into West service and North service.

The options considered are detailed below. All models shown allow WNC to meet its statutory requirements with regards the public health mandated services. All models would also involve the remodelling of school nursing with an increased emphasis on mental health,

wellbeing, resilience, and safeguarding/risk-taking in young people. This work will be informed by an ongoing evidence review and consultation with stakeholders, children, young people and their families.

❖ **Option 1: Re-procure and commission a revised 0-19 HCP service with a new service specification that reflects the health needs assessment recommendations and consultation feedback from WNC children, young people, and their families.**

Key Feature: Review services, endeavour to integrate and recommission 0-19 service exploring opportunity to compliment service provision with council services that contribute to Public Health outcomes (e.g. REACH, Strong Start, Flourishing Babies). Competitive negotiated tender process beginning April 2024 with service being provided from 1st April 2025. Contract length is yet to be agreed by procurement.

Additional Information: WNC is due to complete its Soft Market Test and Engagement in April 2024. Pending how many bids we get and the quality of the bids, we will be able to assess whether the providers meet all aspects of the 0-19 service specification or not and make decision upon that.

While there may be other potential providers who come on board later in the tender process the initial market testing will give us an indication of the pool of potential providers available in the market.

Integration with Children's Services: Co-location and co-working would be a key component of the new WNC 0-19 service spec to align with family hubs programme. The contract would be clear on the need to further develop integration opportunities beyond just co-location.

❖ **Option 2: In house provision of 0-19 HCP service to be delivered by WNC**

2.1 Full in-house provision of 0-19 HCP delivered by the local authority

Key Feature: All staff currently employed by NHFT to be TUPE'ed into WNC.

Case Study: Lincolnshire- an in-house service has struggled to retain/recruit staff and has resulted in a reduction in performance. A dispute between PH Nurses and the local authority over pay and conditions, including their professional support led to strike action.

Integration: The service is integrated with Children's Services under one management structure and one integrated team that sits under Children Services (not Public Health). Children's Service performance team are responsible for reporting and monitoring on KPIs. Public Health is involved and has assurance through a Clinical Governance Board chaired by the Director of Public Health.

2.2 The 0-19 service to be integrated with clinical staff (e.g. NHFT or any other clinical provider) and staff from WNC working together in a team. This will enable greater collaboration and will demonstrate the benefits and challenges of more integrated ways of working that will help align health and social care services for CYP and families across WNC.

Key Feature: An agreement between the clinical host organisation and WNC is required to cover ways of working, staffing arrangements, and any issues for e.g. clinical governance and liability. The clinical host will be the lead provider of the work and so the default position would be ways of working, yet this requires further development and staff consultation as we progress forward.

❖ **Option 3: 'Break up' single contract and consider options to commission or bring in house some elements**

Key Feature: Review services and consider which, if any, elements could be effectively delivered by WNC and explore further the potential for improved outcomes for children, young people, and families. Possibility includes, school nursing service, weight management work (NCMP) all being integrated into WNC children services as a newly developed Wellbeing service for 6-19 and up to 25 for SEND children.

Precedent: There is no set content of 0-19 Healthy Child Programme specification and so many local authorities commission different packages; some include ICB and NHS England commissioned services in 0-19 service, and others deliver some elements in house.

Integration with Children's Services: Potential for WNC staff, potentially those in children's services and Education, to deliver some elements of the service.

West Northamptonshire Council

Children, Education and Housing Overview and Scrutiny Committee – Work Programme 2023/24

	Topic identified and scheduled
	Topic identified but not yet scheduled
	Topic completed

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Severe Weather Emergency Protocol – operation during winter 2023/24	The Committee to receive an update on the recent operation of the SWEPE, including any trends or changes in demand.	3 April 2024	Committee meeting item	Director of Communities and Opportunities	
Homelessness and Rough Sleeping Strategy – Delivery Plan	The Committee to provide scrutiny input in the development of the Delivery Plan.	3 April 2024	Committee meeting item	Housing Services Manager	
0-19 Health Visiting and School Nursing Service	The Committee to carry out pre-decision scrutiny of potential options for future delivery of the service.	3 April 2024	Committee meeting item	Executive Director People Services Director of Public Health	
Educational attainment in West Northamptonshire	The Committee to consider an overview of attainment and related factors, including data on elective home education, children missing from education and suspensions and exclusions.	4 June 2024	Committee meeting item	Executive Director People Services Assistant Director Education	

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Child and adolescent mental health and the risk of self-harm – impact	The Committee to receive an update on action being taken to address issues raised by the scrutiny review following on from the response to its recommendations given in September 2023.	4 June 2024 – subject to confirmation	Committee meeting item	Representatives from the Northamptonshire Integrated Care Board and Northamptonshire Healthcare NHS Foundation Trust	
Task and finish scrutiny review: SEND support	The Committee to receive the final draft report from the task and finish panel.	4 June 2024	Committee meeting item	NA	
Task and finish scrutiny review: support for foster carers	The Committee to receive the final draft report from the task and finish panel.	4 June 2024	Committee meeting item	NA	
Forthcoming service contracts	The Committee to be advised of any opportunities to provide scrutiny input in developing the requirements for significant service contracts relating to its remit.	10 July 2023 4 January 2024 29 February 2024	Standing item at agenda planning meetings	Executive Director People Services	
Care leavers and digital exclusion	The Committee to consider carrying out a scrutiny review of the support provided to care leavers to prevent digital exclusion.	To be confirmed	Task and Finish Panel	NA	
Housing Allocation Scheme	The Committee to provide scrutiny input into the development of the new Housing Allocation Scheme.	19 June 2023	Committee meeting item	Cabinet Member for Housing, Culture and Leisure Housing Services Manager	

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Task and finish scrutiny review: special educational needs and disability (SEND) support	The Committee to agree the updated plan for a scrutiny review of support for children with SEND in West Northamptonshire.	19 June 2023	Task and Finish Panel	NA	The scrutiny review was begun in 2022/23 under the former People Overview and Scrutiny Committee
Task and finish scrutiny review: support for foster carers	The Committee to consider a proposal form for a scrutiny review of opportunities to improve support for foster carers in West Northamptonshire.	19 June 2023	Task and Finish Panel	NA	
Severe Weather Emergency Protocol	The Committee to scrutinise the aims and use of the SWEP in West Northamptonshire.	25 September 2023	Committee meeting item	Cabinet Member for Housing, Culture and Leisure Assistant Director Housing and Communities	
Child and adolescent mental health and the risk of self-harm	The Committee to consider an overview of the latest position concerning the provision and development of support in West Northamptonshire for children and young people's mental health.	25 September 2023	Committee meeting item	Cabinet Member for Children, Families and Education Cabinet Member for Adult Care, Wellbeing and Health Integration Executive Director People Services	The item would follow on from the scrutiny review of this topic carried out by the former People Overview and Scrutiny Committee in 2022/23.
Short break services for children with disabilities	The Committee to provide input and challenge on developing proposals for future service provision.	25 September 2023	Committee meeting item	Assistant Director Quality Assurance and Commissioning, Northamptonshire Children's Trust	

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Task and finish scrutiny review: support for foster carers	The Committee to agree the detailed plan for the in-depth scrutiny review of support for foster carers in West Northamptonshire.	25 September 2023	Committee meeting item	NA	
Provision of free broadband to young people leaving local authority care	The Committee to receive information about support provided to care leavers.	10 July 2023 4 January 2024	Briefing paper to agenda planning meeting	Executive Director People Services	
Short break services for children with disabilities	The Committee to receive information on progress with the proposed redesign of short breaks and respite services.	4 January 2024	Briefing paper to agenda planning meeting	NA	
Homelessness and Rough Sleeping Strategy	The Committee to carry out pre-decision scrutiny of the draft Strategy following public consultation.	5 February 2024	Committee meeting item	Housing Services Manager	
Early help offer and 0-19 services	The Committee to consider an overview of the provision and development of services supporting children and families to prevent needs from escalating.	5 February 2024	Committee meeting item	Cabinet Member for Children, Families and Education Executive Director People Services	
School exclusions	The Committee to scrutinise issues connected to an increasing trend in school exclusions in West Northamptonshire.	5 February 2024	Committee meeting item	Cabinet Member for Children, Families and Education Executive Director People Services Assistant Director Education	

Topic	Proposed purpose	Date	Approach	Cabinet Member / Executive Director / other senior leader	Comments
Provision of free broadband to young people leaving local authority care.	The Committee to consider the current support provided to care leavers and the scope to offer free broadband.	5 February 2024	Committee meeting item	Executive Director People Services	

Children, Education and Housing Overview and Scrutiny Committee meeting dates in 2023/24

Agenda planning meeting	Committee meeting
25 May 2023	19 June 2023
10 July 2023	25 September 2023
4 January 2024	5 February 2024
29 February 2024	3 April 2024

Children, Education and Housing Overview and Scrutiny Committee meeting dates in 2024/25 (subject to confirmation by the Annual Council meeting)

Agenda planning meeting	Committee meeting
20 May 2024	4 June 2024
30 July 2024	24 September 2024
16 December 2024	28 January 2025
10 February 2025	10 March 2025

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