



# Cabinet

**A meeting of the Cabinet will be held at The Forum, Towcester, NN12 6AF on Tuesday 6 December 2022 at 6.00 pm**

## Agenda

<b>Public Session</b>	
<b>1.</b>	<b>Apologies for Absence and Notification of Substitute Members</b>
<b>2.</b>	<b>Declarations of Interest</b> 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.
<b>3.</b>	<b>Minutes</b> (Pages 5 - 12) To confirm the minutes of the meeting of Cabinet held on 8 <sup>th</sup> November 2022.
<b>4.</b>	<b>Chair's Announcements</b> To receive communications from the Chair.
<b>5.</b>	<b>Urgent Business</b> The Chair to advise whether they have agreed to any items of urgent business being admitted to the agenda.
<b>6.</b>	<b>Report of Place Overview and Scrutiny Committee - Tree Policy and Strategy</b> (Pages 13 - 26)
<b>7.</b>	<b>Corporate Plan Performance Report - 2022-23 Q2</b> (Pages 27 - 52)
<b>8.</b>	<b>Draft Integrated Care Northamptonshire Live Your Best Life Strategy</b> (Pages 53 - 106)

9.	<b>Procurement of a WNC Fleet management contract</b> (Pages 107 - 112)
10.	<b>Homecare Services Commissioning Intentions including extension to existing framework</b> (Pages 113 - 128)
11.	<b>Extended photovoltaic system for One Angel Square</b> (Pages 129 - 134)
12.	<b>Procurement and implementation of Children's Social Care Case Management System</b> (Pages 135 - 142)
13.	<b>Revenues and Benefits Single Software System</b> (Pages 143 - 150)
14.	<b>Northamptonshire Safeguarding Adults Board (NSAB) - Annual Report 2021 - 2022</b> (Pages 151 - 174)
15.	<p><b>Exclusion of the Press and Public</b></p> <p>The following report(s) contain exempt information as defined in the following paragraph(s) of Part 1, Schedule 12A of Local Government Act 1972.</p> <p>Paragraph 3 – Information relating to the financial or business affairs of any particular person (including the authority holding that information).</p> <p>-</p> <p>Members are reminded that whilst the following item(s) have been marked as exempt, it is for the meeting to decide whether or not to consider each of them in private or in public. In making the decision, members should balance the interests of individuals or the Council itself in having access to the information. In considering their discretion members should also be mindful of the advice of Council Officers.</p> <p>Should Members decide not to make a decision in public, they are recommended to resolve as follows:</p> <p>“That under Section 100A of the Local Government Act 1972, the public and press be excluded from the meeting for the following item(s) of business on the grounds that, if the public and press were present, it would be likely that exempt information falling under the provisions of Schedule 12A, Part I, Paragraph(s) 3 would be disclosed to them, and that in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.”</p>
<b>Private Session</b>	
16.	<b>Old Black Lion Lease Arrangements</b>



Proper Officer  
28 November 2022

### **Cabinet Members:**

Councillor Jonathan Nunn (Chair)	Councillor Adam Brown (Vice-Chair)
Councillor Fiona Baker	Councillor Rebecca Breese
Councillor Matt Golby	Councillor Mike Hallam
Councillor Phil Larratt	Councillor Daniel Lister
Councillor Malcolm Longley	Councillor David Smith

## **Information about this Agenda**

### **Apologies for Absence**

Apologies for absence and the appointment of substitute Members should be notified to [democraticservices@westnorthants.gov.uk](mailto: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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### **Queries Regarding this Agenda**

If you have any queries about this agenda please contact Sofia Neal-Gonzalez, Democratic Services via the following:

Email: [democraticservices@westnorthants.gov.uk](mailto:democraticservices@westnorthants.gov.uk)

Or by writing to:

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**West  
Northamptonshire  
Council**

**Cabinet**

Minutes of a meeting of the Cabinet held at The Forum, Towcester, NN12 6AF on Tuesday 8 November 2022 at 6.00 pm.

Present	<p>Councillor Jonathan Nunn (Chair)  Councillor Adam Brown (Vice-Chair)  Councillor Fiona Baker  Councillor Rebecca Breese  Councillor Matt Golby  Councillor Mike Hallam  Councillor Phil Larratt  Councillor Daniel Lister  Councillor Malcolm Longley  Councillor David Smith</p>
Also Present:	<p>Councillor Jamal Alwahabi  Councillor Dermot Bambridge  Councillor Sally Beardsworth  Councillor Nigel Hinch  Councillor Mark Hughes  Councillor Rosie Humphreys  Councillor Ian McCord  Councillor Bob Purser  Councillor Wendy Randall  Councillor Emma Roberts  Councillor Danielle Stone</p>
Apologies for Absence:	<p>None</p>
Officers	<p>Anna Earnshaw, Chief Executive  Rebecca Peck, Assistant Chief Executive  Catherine Whitehead, Director of Legal and Democratic (Monitoring Officer)  Audra Statham, Assistant Director - Finance (Accountancy)  Stuart Lackenby, Executive Director - People Services  Sarah Reed, Executive Director - Corporate Services  Stuart Timmiss, Executive Director - Place  Ashley Leduc, Assistant Director - Commissioning and Performance  Ben Pearson, Assistant Director - Education  Jed Scoles, Political Assistant to the Labour Group  Paul Hanson, Democratic Services Manager  Kathryn Holton, Committee Officer</p>

90. **Declarations of Interest**

None

91. **Chair's Announcements**

None

92. **Minutes of the meeting of 23 September 2022**

The minutes from the Cabinet meetings on 23 September 2022 and 11 October 2022 were approved and signed as a true and accurate record.

93. **Reports from O&S: Place Overview and Scrutiny Committee - Tree Policy and Strategy for West Northamptonshire Council**

The Chair explained that due to a family emergency Cllr Chauhan was unable to be present, so the item would be deferred to the next meeting.

RESOLVED:

This item was deferred to the next meeting of Cabinet in December 2022

94. **Any other items from Overview and Scrutiny (including call-ins)**

**a) Corporate Overview and Scrutiny Committee and Place Overview and Scrutiny Committee – recommendations in respect of the Highways and Transport Contract**

At the Chair's invitation Councillor Bambridge as Chair of the Place Overview and Scrutiny Committee outlined the report and highlighted the importance of pre-scrutiny in respect of major contracts.

Councillor Larratt thanked the Overview and Scrutiny Committees for the work done. A report would be brought for consideration in due course.

RESOLVED:

That Cabinet noted the recommendations of the Corporate Overview and Scrutiny Committee and Place Overview and Scrutiny Committee and undertook to consider a report on the issue at a future meeting.

**b) Outcome of the Call-In of the Cabinet Decision of 11 October 2022 – Item 13 Office Optimisation Stage 1 building adaptations budget and disposal**

At the Chair's invitation, Councillor McCord as Chair of the Corporate Overview and Scrutiny Committee outlined the report.

Councillors made the following comments:

- Clarification was needed regarding the CCTV system which was linked to Lodge Road.
- Communication was key – members had felt uninformed.

- Concern had been raised about the number of desks in the Abbey and members requested to see a floor plan.
- Staff morale at Daventry was low, due in part to poor communication.
- Would the Lodge Road car park be sold/leased with the building? The car park was also used by visitors to the Leisure Centre.
- Did any staff or public attend the meeting in Daventry at which the call-in was discussed?

Councillor McCord advised that he did not believe any staff or members of the public attended the meeting on 7 November 2022.

Councillor Longley advised that WNC had an excess of property and selling or leasing Lodge Road would result in a serious financial saving. The situation regarding the car park would depend on what happened to the building.

Councillor Smith and the Executive Director, Place assured members that plans would not adversely impact the CCTV network.

Councillor Lister challenged the assertion that staff morale was low and advised that all staff had been met with individually. Councillor Hallam offered to meet with affected staff.

Councillor Nunn advised that a floor plan for the Abbey would be issued to members and a briefing could be arranged if necessary. It would not have been appropriate to issue the plan during the thinking process.

The Chief Executive advised that issues around travel and DSE equipment had been addressed with relevant staff.

RESOLVED: That Cabinet:

- a) Decided to proceed with the decision on the basis that the matters highlighted by Scrutiny did not require further consideration and to proceed on the basis of the original decision.
- b) Accepted the recommendation requiring all councillors to be provided with the desk plans for the Abbey.
- c) Noted the comments relating to CCTV and confirmed the wish of Cabinet to secure the best possible outcome for residents of Daventry.

## 95. **Rural England Prosperity Fund**

At the Chair's invitation councillors made the following comments:

- WNC had many transport 'deserts'.
- Support for a single project should be considered.
- Rural transport connectivity was in crisis. Community buses were a good step forward.
- Designated quiet lanes would be both beneficial and inexpensive.
- Cabinet needed to ensure projects met Council objectives as well as the funding requirements.
- Projects should be generated locally, benefit locals and add social value.

Councillor Larratt advised that the funding was for capital projects only. Connectivity needed to be improved particularly for young people needing access to education and social activities and older people needing access to healthcare. Rural areas were already experiencing problems and these were beginning to impact urban areas too.

Councillor Brown noted that with £1.4m only a limited amount could be achieved. Projects needed to have lasting impact.

RESOLVED: that Cabinet:

- a) Noted UK Government had advised WNC as the Lead Authority for REPF (£1,367,953.00 for a two-year provisional maximum allocation and the requirement to develop a REPF addendum to the UKSPF Investment Plan
- b) Endorsed the approach to develop the REPF Investment Plan by sourcing evidence and liaising with internal and external stakeholders, as well as Councillors
- c) Noted WNC must submit the Rural Fund addendum by 30 November 2022

## 96. **SEND Strategy Development**

At the Chair's invitation councillors made the following comments:

- Did the needs assessment for the SEND delivery plan factor in schools and teachers? Were staff adequately trained to meet SEND provision and were there suitable spaces in mainstream schools for delivery of provision?
- When looking at stakeholders, were the police being considered?
- Section 6.5 referred to school-based staff – what type of staff were they?
- A consistent guidance document for providers would be helpful. Was everything provided by the Department for Education to support these providers in the long term?
- Why were Educational Psychologist assessments not being completed on time?
- Were WNC meeting the demands and obligations of EHCPs?
- The admissions at 6.1 were welcomed by many families.
- Transparency and accountability were not evident. The SEND Accountability Board minutes could not be accessed and it did not function in the interests of co-production.
- There was a lack of provision for certain SEND profiles; lack of data on children and their needs risked failing to meet them.
- People Overview and Scrutiny Committee should scrutinise SEND delivery. Mistakes should be learned from in order to move forward.
- It was encouraging to see steps being taken to listen to SEND parents and their children. This had been a very difficult time with shortage of school places, a collapse in respite, issues with transport etc.
- An equalities impact assessment would be helpful.
- Was there any mother tongue provision for SEND families?
- Was there any after school and holiday provision?
- Disposal of assets should not be undertaken without local mapping of need. Provision needed to be local.

- Suitable provision was needed for all children.

Councillor Baker outlined the report and advised that this was being brought to Cabinet for information. The three main reasons for delayed response had been lack of capacity in the team (which had now been addressed); a significant increase in demand for statutory assessments and a lack of capacity to complete statutory assessments – particularly Educational Psychology, Speech and Language Therapy and Occupational Therapy. All children were being assessed in respect of the provision of new school places to ensure the provision would be appropriate for their needs. The Board would be made up of school representatives, parents and officers. It was planned that the vice-chair would be a parent, ensuring scrutiny at the highest level.

RESOLVED: That Cabinet:

- a) Supported the development of a three year SEND Delivery Plan as outlined in this report in paragraph 6.3.
- b) Supported the new governance structure highlighted in this report in paragraph 5.8.
- c) Agreed to receive timely updates about progress in relation to the development of a new SEND Delivery Plan and Co-production Charter as outlined in the report.

#### 97. **Abington Park Facilities**

At the Chair's invitation councillors made the following comments:

- It was important to recognise that there were other parks which should not be neglected.
- It was hoped that the new facilities would be vandal-proofed.

Councillor Longley introduced the report and noted that the facilities would be fully funded from CIL money.

Councillor Brown advised that it was important that the final design met the needs of residents and had separate female changing rooms to encourage women's and girl's sport.

RESOLVED: That Cabinet

- a) Approved a capital budget of £1.2m in 2023/24, funded from CIL, to remove the existing and provide replacement public welfare facilities at Abington Park East, and recommended to Council that the budget be amended accordingly.
- b) Authorised the procurement of services and works, award and completion of contracts to facilitate the works subject to consultation with and the approval of the Cabinet Member for Housing, Culture & Leisure, and the Cabinet Member for Environment, Transport, Highways & Waste.

#### 98. **Social Care Charging Reform Update**

At the Chair's invitation councillors made the following comments:

- Concerns were expressed about whether reforms would be sufficient to meet the needs of a rapidly ageing population.
- Reform of social care was desperately needed but many of the changes have made it more difficult for public sector delivery.
- How would the fee be calculated? It was a blanket fee which penalised those who needed support the most.
- Were the public being consulted on the level of the fee, or whether it should be implemented at all?
- Was the fee payable once or would it be charged each time a person approached WNC to arrange care?
- Clarity was requested because the fee was stated to cover only administrative costs but a financial benefit was also referred to.

Councillor Golby introduced the report which provided an update on social care reform. The changes would require WNC to arrange care for self-funders if they so wished. This would result in significant extra work for WNC.

The Assistant Director, Commissioning and Performance confirmed that the £141 charge was a one-off fee based on officer time, which would be applied each time care was accessed. The consultation was not related to the level of the fee, but as to whether or not it should be applied. The £28k referred to in Section 7.1.3 was not actually a benefit, it would be covering costs.

The Executive Director, People Services advised that there would be a benefit to self-funders of WNC brokering care on their behalf. Capital would be eroded more quickly for those who arranged care directly as WNC could secure a better deal.

RESOLVED: That Cabinet

- a) Agreed to the Council consulting with the public for 28 days in respect of the new Self-funder Arrangement Fee. Feedback obtained from the consultation period will be provided to cabinet for decision making in February 2023.
- b) Acknowledged the changes required to the Fees and Charges Policy because of social care reform and the impact these reforms will have to the Council and the residents of West Northamptonshire.
- c) Noted the utilisation of the 2022/23 DHSC Fair Cost of Care and Market Sustainability fund.

## 99. **Director of Public Health Annual Report**

At the Chair's invitation councillors made the following comments:

- The report was commended as excellent and well-written.
- How did obesity levels outlined in the report compare with other areas?
- Hospital admissions for trips and falls could be reduced by repairing pavements. Clarification was requested as to whether falls were inside or outside the home.
- In addition to the impact of Covid, children's development was hindered by lack of interaction due to parental mobile phone use.
- Early intervention was needed to reduce hospitalisation from intentional self-harm.



Councillor Golby introduced the report which documented the journey over the pandemic and was for noting ahead of publication. The WNC team were focussing on the increased levels of self-harm and falls. Obesity had been an issue and the Joint Strategic Needs Assessment would help inform future policy.

Councillor Brown noted that it might be more appropriate to report suicide attempts rather than suicides.

The Executive Director, People Services advised that the next iteration of the ICS Strategy would be coming to Cabinet in December. This would explain how all were collaborating against health inequalities. There would also be a new outcomes framework providing better monitoring.

RESOLVED: That Cabinet

- a) Noted the contents of the report and recommendations made.
- b) Also noted the progress made with regard to the recommendations in the previous annual report.

100. **Northamptonshire Safeguarding Children Partnership Annual Report**

At the Chair's invitation councillors made the following comments:

- The report was comprehensive and the 'Dad pad' was a brilliant idea.
- Gun crime was becoming a big problem and help was needed for hard to reach youths.
- The report did not reflect lessons learned from serious case reviews
  - Staff dealing with poverty become inured
  - Has staff turnover in health visiting been resolved?
  - The threshold at which MASH became involved needed to be lower
  - Case work needed to keep up when families moved
  - Training was needed in parental alcohol abuse.
- Were children safe? Seven serious case reviews indicated a problem.
- Was the safeguarding policy being implemented? Benchmarking of referrals against other authorities would be useful.
- Would a briefing on contextual safeguarding be useful?
- Domestic abuse made no reference to children.
- Were there enough frontline staff?
- Concerns were expressed around home educated children.
- What support was provided for gypsy and traveller families?

Councillor Baker introduced the report and noted that the partnership had focused on taking positive action early enough to protect children, supporting those at risk of exploitation and working to support staff.

Councillor Baker and the Executive Director, People Services made the following comments:

- The Police Fire and Crime Commissioner was supporting a project to work with hard-to-reach young people.

- Some of the points arising from serious case reviews would be put forward to the independent scrutineer.
- There was a national shortage of Health Visitors, although the situation was improving.
- There was significant audit activity around thresholds of decision making in respect of referrals to MASH.
- Early help services were involved in cases which did not get referred to MASH.
- A protocol was in place for transfers from one authority to another.
- Alcohol misuse was a significant factor which frontline staff needed to recognise and deal with.
- As corporate parents WNC aimed to ensure children were as safe as possible. There had been significant assurance work with NCT which was beginning to generate positive results.

RESOLVED: That Cabinet

- a) Received the Northamptonshire Safeguarding Children Partnership's Annual Report 2021-22 (Appendix A) and noted the findings.

101. **Economising on mobile telephony**

At the Chair's invitation councillors made the following comments:

- Would a penalty be payable?
- It was suggested that the contract be looked at by Overview and Scrutiny.

Councillor Hallam outlined the report which provided an opportunity to renegotiate the existing telecoms contract with an estimated 56% reduction in price. In the circumstances he considered that there would be no particular value from additional scrutiny.

RESOLVED: That Cabinet

- a) Delegated authority to the Executive Director of Corporate Services in consultation with the Cabinet Member for HR & Corporate Services to award and enter into a renegotiated contract with our existing supplier.

The meeting closed at 8.25 pm

Chair: \_\_\_\_\_

Date: \_\_\_\_\_



# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6 DECEMBER 2022

## CABINET MEMBER RESPONSIBLE FOR ENVIRONMENT, TRANSPORT, HIGHWAYS AND WASTE: COUNCILLOR PHIL LARRATT

<b>Report Title</b>	<b>Report of Place Overview and Scrutiny Committee – Tree Policy and Strategy</b>
<b>Report Author</b>	<b>Tracy Tiff, Deputy Democratic Services Manager, tracy.tiff@westnorthants.gov.uk 01604 837408</b>

Contributors/Checkers/Approvers		
<b>MO</b>	Catherine Whitehead	31/10/2022
<b>S151</b>	Martin Henry	26/10/2022
<b>Other Director/SME</b>	Stuart Timmiss	20/10/2022
<b>Head of Communications</b>	Becky Hutson	18/11/2022

### List of Appendices

**Appendix A - Report of the Overview and Scrutiny Tree Policy and Strategy Task and Finish Group.**  
Appendix has previously been published and is available from Democratic Services

#### **1. Purpose of Report**

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- 1.1 To present to Cabinet for consideration, the findings and recommendations of the Place Overview and Scrutiny Committee on the findings of the Scrutiny Review – Tree Policy and Strategy.

#### **2. Executive Summary**

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- 2.1 Place Overview and Scrutiny Committee established the Tree Policy and Strategy Task and Finish Group (the Task and Finish Group) with the purpose of making informed and evidenced based recommendations to Cabinet to achieve a harmonised current Tree Policy and Strategy which includes initiatives which support the goals of the Council's Corporate Plan.

- 2.2 The Task and Finish Group undertook a comprehensive Scrutiny review over a period of ten months and presented its final report to Place Overview and Scrutiny Committee which was approved at its meeting on 18 October 2022.
- 2.3 Both written and spoken evidence was received from expert advisors and desktop research was undertaken. Representatives of the Task and Finish Group undertook site visits to various places within West Northamptonshire. All of which produced a wealth of information that informed the evidence base of this Scrutiny review.
- 2.4 Following the collation of a wealth of evidence, the Task and Finish Group drew various conclusions and recommendations that are detailed within the report. **(Appendix A)**

### **3 Recommendations**

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- 3.1 Place Overview and Scrutiny Committee recommends to Cabinet that:
  - 3.1.1 A Tree Policy and Strategy for West Northants Council is prepared no later than March 2023.
  - 3.1.2 A review of historic issues in relation to tree maintenance is undertaken and the cost of maintaining current stock to a suitable standard considered when reviewing the budget.
  - 3.1.3 The Tree Policy and Strategy should be concise but clear. The use of diagrams and illustrations to aid understanding was encouraged.
  - 3.1.4 The Tree Policy and Strategy should include:
    - The purpose of the Policy - to empower officers and encourage collaboration and communication between all relevant departments to apply the Policy and setting out a clear case for the importance of trees and woods and their value for both people and wildlife
    - Trees planted are appropriate to their location
    - A requirement for replacement of any non-woodland trees in situ or in close proximity that unavoidably have to be removed
    - A plan stating the approach to tree and woodland preservation orders
    - Details that encourage woodland creation by natural regeneration, where practical
    - Prioritisation of planned as opposed to reactive works
    - Direction and guidance on how to protect trees
    - A canopy cover target

- Details of relevant statutory obligations.
- Frequently asked questions/topics to aid officers with their work in the area.
- A section regarding the planting and re-planting of trees, together with the species of trees that should be planted. This would include an Urban Tree List
- Identification of ancient woods
- An audit of Council land for potential woodland

### 3.1.5 The Tree Policy & Strategy should address:

- Promotion of the Policy and community grants available
- Trees on both private and public land
- Woodland and standard trees in parks, streets, housing areas and the countryside
- How it aligns with the Council's wider strategy and targets, to give clear focus and direction
- Eliminates ambiguity and gives clear direction on how the Council would handle matters in relation to tree strategy and maintenance.
- How to hold contractors to account.
- Specify how issues will be resolved
- Differentiate between the terms – urban, rural, open areas and built-up areas.
- Reflect the needs of residents
- Trees which are lost to be replanted immediately where it is safe and appropriate to do so and where it is not appropriate, suitable local alternatives are found

3.1.5 Working with other organisations and communities is incorporated in the Tree Policy and Strategy.

3.1.6 The Tree Policy and Strategy should be based on a sound understanding of the different places within West Northamptonshire, and the types of trees which are most suitable for each of those places and

- Identifies key opportunities to secure benefits from tree planting, including public enjoyment, food provision, biodiversity, carbon capture and flood mitigation.
- Understands and responds to community desires and concerns.

- Provides a clear framework for both strategic and operational decision-making.
- Sufficiently resourced to enable ongoing implementation, monitoring, and future updating.

3.1.7 Valuable urban trees are replaced in situ when taken out. The right tree for the right place is important.

3.1.8 The Tree Policy and Strategy must be applied consistently.

3.1.9 The Council should seek to allocate sufficient funding to achieve the 'gold' service level detailed above. Indicatively this would cost an additional £1.6m pa across West Northamptonshire.

3.1.10 Pollarding is used as a solution to manage trees in specific areas only when absolutely necessary.

3.1.11 Where bulk planting takes place, a full maintenance, protection, and viability programme is implemented, and environmental measures are followed.

3.1.12 The CAVAT tool is introduced, publicised, and applied.

3.1.13 A canopy project is undertaken for the Council at an early stage as this will be able to give accurate figures in terms of trees both on public and private land, and also more importantly be able to show what potential there is for planting.

3.1.14 There is collaborative working across all services in respect of trees and tree maintenance.

3.1.15 In development proposals, mature trees in situ are by default considered for retention, then removal only when unavoidable.

3.1.16 When planning applications are received the assumption should be that important trees are subject to Tree Protection Orders (TPOs), rather than relying on planning conditions alone.

3.1.17 WNC offers developers a paid-for service to plant and water trees on their sites.

3.1.18 A variety of template letters that supports parish councils when dealing with issues of tree planting, removal and maintenance are devised.

3.1.19 Consideration is given to the implementation of Community Orchards, food jungles and parklets with a clear plan and marketing strategy to take this forward.

3.1.20 The Tree Policy and Strategy Task and Finish Group supports the recruitment of a Tree Strategy and Projects Officer. The salary should be investigated if it continues to prove difficult to recruit to this post.

3.1.21 A consultant is employed to help build the policy for the Council whilst ongoing recruitment takes place for the post of Tree Strategy and Projects Officer

- 3.1.22 Relevant contracts are examined to see if their contractors' performance and cost is satisfactory in line with delivering the Council's objectives for the new Tree Policy & Strategy, for example with the amount of tree planting for those lost.
- 3.1.23 A separate landscaping contract that would give better cost and focus on delivering the service is implemented as the existing arrangements come to an end, or earlier if the opportunity arises.
- 3.1.24 Parishes/Community projects are encouraged to register them for inclusion within the 'Queens Green Canopy' initiative.

### **3.2 Reason for Recommendations**

- 3.2.1 Place Overview and Scrutiny Committee established a Task and Finish Group with the purpose of making recommendations to Cabinet to achieve a harmonised current Tree Policy and Strategy which includes initiatives which support the goals of the Council's Corporate Plan.
- 3.2.2 Place Overview and Scrutiny Committee at its meeting on 18 October 2022 approved the report of the Tree Policy and Strategy Task and Finish Group (Task and Finish Group) for submission to Cabinet for its consideration at its meeting on 8 November 2022.

## **4 Report Background**

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4.1 The objective of this in-depth Scrutiny Review was to achieve a harmonised current Tree Policy and Strategy which includes initiatives which support the goals of the Council's Corporate Plan.

### **Key lines of enquiry**

- To identify public perspectives and priorities on tree management in West Northamptonshire, identifying issues which are important in different areas
- To examine the Council's current tree maintenance policy/practices to ensure they are robust, including the choice of tree species and the set criteria for the planting, removal and works to trees
- To review the arrangements for tree maintenance and potential tree planting programmes and the level of tree planting within West Northamptonshire
- To examine how the draft Tree Policy & Strategy can be utilised to enhance the emerging West Northants Strategic Plan and other policy documents of the Council and its delivery agents, in particular, climate change and improving air quality
- To identify the number of trees planted and removed each year and the reasons for this; and to understand the impact of this on the Council's organisational goals

- To examine tree planting within new developments, focussing on how planning commitments can be enforced.
- To consider whether available funding for tree maintenance and management is being used in the most effective and efficient ways
- To examine how the Tree Policy and Strategy can support good infrastructure design and avoid conflict.
- To explore if and how the CAVAT tool should be implemented in West Northamptonshire.
- To explore how there can best be cohesive working between all stakeholders, the voluntary sector, managed agencies, and service areas regarding the responsibilities in relation to trees

4.2 The required outcome of the Scrutiny Review was to make evidenced based recommendations to inform the Council's Tree Policy & Strategy.

4.3 Following approval of its work programme for 2021/2022, Place Overview and Scrutiny Committee, at its meeting on 31 August 2021 commissioned the Task and Finish Group to undertake the review – Tree Policy and Strategy. An in-depth review commenced in October 2021 and concluded in July 2022. A Task and Finish Group was therefore established comprising seven Councillors.

4.4 This review links to the Council's corporate priorities, particularly corporate priority - Green and Clean.

4.5 A significant amount of evidence was received, which is detailed within the report. After gathering evidence, the Task and Finish Group established its key findings and conclusions:

**Public perspectives and priorities on tree management in West Northamptonshire, identifying issues which are important in different areas**

4.6 There is a need for a holistic policy and strategy should be formulated to derive a way forward for West Northamptonshire and felt there was a shift in people's perceptions of tree maintenance and towards the importance of the planting of trees. There is real understanding of the health and wellbeing benefits provided by trees and the benefits to climate. Schools could be involved to plant fruit trees for the students to eat which would be beneficial as a good community project and environmentally sound, uneaten fruit would be consumed by wildlife.

4.7 Should Parishes and Community projects be forthcoming they should be encouraged to register them for inclusion within the 'Queens Green Canopy' initiative.

4.8 The opinions of residents often differed depending on the proximity of the residents to the tree, as one resident may live next to a tree causing issues whereas another would admire the tree and not want it to be removed. Ideally the policy should specify how issues such as this should be resolved. From the consultation process, the consensus was that residents were for the planting of trees but emphasised that there was a need for the Council to be better at maintaining and coordinating the planting of trees. The survey results showed a very strong view among respondents in favor of



retaining street trees in almost all circumstances, even where they were causing problems of some form. The feedback from the consultation highlighted that more people in Northampton were seeing the green and wellbeing benefits from trees and green spaces. Evidence gathered supported the idea of creating a communal green space and encouraging communities to become part of a community orchard.

- 4.9 It should be recognised that the Tree Policy and Strategy is a journey and Cabinet should look to engage the community and voluntary groups to help with projects and inform the tree strategy. The need for the Council to continue to work with organisations and the community going forward was recognised. It was welcomed that Moulton College was interested in working with the Council on projects to help educate students and provide skills for younger generations.

**Ensure they are robust, including the choice of tree species and the set criteria for the planting, removal and works of trees**

- 4.10 The Tree Policy and Strategy should contain general principles for Council trees and prescribe circumstances where trees would not be cut down unless they cause serious issues to the health and wellbeing of a resident. From the survey results, the majority of respondents wanted trees to remain or be replanted. The Task and Finish Group agreed that people wanted trees to be planted, specific trees to be in the right place and the Group supported the list of recommended trees provided by Save our Street Trees. The criteria for the removal and work surrounding tree maintenance should be robust, clear, and transparent and that there needed to be a focus on replacing trees that had been removed, either in situ or with a plan to plant elsewhere before the tree is removed.

**Review the contracts for tree maintenance and potential tree planting programmes and the level of tree planting within West Northamptonshire**

- 4.11 The new Tree Policy and Strategy should have more stringent restrictions for developers and who was responsible for checking trees and landscaping. It was acknowledged that this could only be the case if the land was adopted as highway. If so, a commuted sum would be provided by the developer and this was used to fund future maintenance. If not, the case would be managed by planning enforcement. WNC could also offer developers a service to plant and water the trees for a fee so land gets adopted quicker. Some developers could like this option and so do some local authorities as they receive commuted sums quicker. This could make the implementation of planning conditions more effective.

- 4.12 The Council should aspire, whether through income or grants, or both, to a high standard of provision of maintenance. It noted the likely costs of the desired level of service, described as gold' below:

Service Level	Description	Annual Cost, £k
Bronze (current)	<ul style="list-style-type: none"> <li>Reactive works which fall into P1 and P2 classification only</li> <li>Contract wide epicormic growth (sign a tree is functioning properly) program.</li> </ul>	450
Silver	<ul style="list-style-type: none"> <li>As above, plus:</li> <li>Further planned survey works</li> <li>Deal with all P1, P2, P3 and some P4 classification enquiries.</li> <li>An increase in the management, supervision, surveyors, and operational teams.</li> <li>This level of service would over a period of time provide a good planned and reactive service for the Council and its residents</li> </ul>	1,200  (increase of 750)
Gold	<ul style="list-style-type: none"> <li>As above, plus:</li> <li>Large amount of the surveyed work to be planned in line with the surveyors' recommendations.</li> <li>Managing the stock as assets to the Council's portfolio.</li> <li>'Nice to have' items that most residents expect Council to be able to provide.</li> <li>Provide data and information on: <ul style="list-style-type: none"> <li>Tree stock and health</li> <li>Biodiversity benefits</li> </ul> </li> </ul>	1,700  (increase of 1,250)

Key	
P1	Priority 1
P2	Priority 2
P3	Priority 3
P4	Priority 4

These costs are for Northampton. Given the intensity of work required in Northampton compared to other parts of West Northamptonshire, it would probably be reasonable to add 25% to the increase in costs above the baseline to achieve a similar level of service across the area. This would mean the additional cost to achieve Silver or Gold levels of service would be:

- Silver: £938k
- Gold: £1,563k

4.13 The Policy needs to look at “the how” and it should be ensured that the Council’s Tree Policy and Strategy would eliminate ambiguity and give clear direction on how the Council would handle matters in relation to tree strategy and maintenance. The Council’s Tree Policy must create a framework in which Parish Councils can get in touch with landowners and encourage them to monitor the state of trees which are on private land, and could cause detrimental effect to a village due to road closures etc. Integral to this is ensuring that WNC will take enforcement action if private landlords do not act in a timely manner, suggesting that dealing with the trees themselves but billing the landowner. They further suggest that there is a need to work with the Wildlife Trust to see if it would offer landowners trees to replace areas of Ash which have to be felled.

4.14 Evidence gathered suggested that it could take up to 2 years for the Council to implement a Tree Policy and Strategy and the Task and Finish Group felt that it would be beneficial for the Council’s

Tree policy to align with the Council's wider strategy and targets to give clear focus and direction. It would be useful for the Policy to comprise frequently asked questions/topics to aid officers with their work in the area.

**Examine how the draft Tree Policy & Strategy can be utilised to enhance the emerging West Northants Strategic Plan, other Planning Policy documents of the Council and its delivery agents**

- 4.15 The Tree Policy should be accessible to all stakeholders. The urban woodland areas should be within a short walking distance of all residents. Information should be provided to encourage residents to forage.
- 4.16 Evidence gathered highlighted the benefit of incorporating the emergency tree plan into the Tree Policy and Strategy, rather than having two separate policies. The Council should be more proactive in using all legislation and planning policy tools available to the Council to reach appropriate agreement with developers and followed up with appropriate enforcement.
- 4.17 Pollarding is sometimes useful but needs to be started when the tree was young, and that topping was not a good method. Pollarding is a short-term solution but in the longer-term the Council could seek to plant trees that would not need pollarding and should set out pruning expectations in their policy. Historically, trees were planted that needed pollarding as the Victorians found that no other trees would grow with the amount of pollution that existed. This was no longer the case. A canopy cover target would probably be sensible. It would better reflect the impact of trees than a count of tree numbers, because a large mature tree has much greater impact than a new whip. Such an approach, might include, for instance, redressing the canopy cover on highways, where trees are rarely replaced. The closer trees are to people's homes, the more benefits they bring to the health and wellbeing of residents, and the local economy and wildlife.

**Identify the number of trees planted and removed each year and the reasons for this; and to understand the impact on the Council's organisational goals**

- 4.18 Evidence gathered highlighted that it is essential that trees planted are appropriate to their location – some trees flourish in their environment, e.g., roadside, parks, etc. and some do not, some will grow to become a maintenance liability requiring frequent works and other do not. It is also essential that trees are planted in appropriate locations so as not to damage infrastructure due to root growth damaging footways or removing water from the ground resulting in subsidence to highway or properties. What little budget is currently available is prioritised against routine and reactive works.

**Consider whether available funding for tree maintenance and management is being used in the most effective and efficient ways**

- 4.19 There is a need for officers to review existing contracts and see the cost breakdown for tree management and for tree planting as most work was accounted for with day rates which would inflate the cost. As well as parish council rates being too high for maintaining trees as they would be charged higher rates, and parks and open spaces would be contractor managed. It was further

recognised that there is a need for a review of historic issues in relation to tree maintenance is undertaken and the cost of maintaining current stock considered when reviewing the budget. Current contracts should be reviewed in the future to see if the Council were obligated to use the contract and align the predecessor councils' contracts under a harmonised West Northamptonshire Council contract in the future and the potential for this to be separate from the wider waste contract. A detailed policy is needed to ensure there are no grey areas when dealing with tree maintenance to support officers. The Task and Finish Group compared Birmingham and Bristol Councils' policy documents and Epping Council's which was photographic. A summarised policy would be useful but one that was clear and concise.

4.20 Council management contracts should be examined to see if their contractors' performance and cost was satisfactory in line with delivering the Council's objectives for the new Tree Policy and Strategy, for example with the amount of tree planting for those lost and replanted. Evidence gathered highlighted that there is a need for the Council to hold contractors to account, for example with Delapré park maintenance work had not been done. The Council needs to review the work undertaken by contractors. The current contract deems that the contractors will deal with problematic trees and the provision for this took precedent over the general maintenance of trees and the service was driven by the cost.

#### **Examine how the Tree Policy and Strategy can enforce infrastructure design and avoid conflict.**

4.21 The Task and Finish Group emphasised the importance of working closely with highways and planning departments. The Council could save on cost by making use of larger planning developments and influencing the planting and species of trees at the earlier stages as the developer usually leads on landscape planning and would select the cheapest species to plant and may not maintain the trees properly. If the Council had a tree policy and strategy that could identify the species required and other relevant information, it could help the Council meet its environmental targets and other performance targets. The Council can not specify numbers but the role and purpose of trees, as the national model design code stated that new streets should be lined with trees. In development proposals, mature trees in situ should by default be considered for retention, then removal only when unavoidable. The right tree for the right place is important. More appropriate, compact species of urban trees are chosen for urban areas – and more research is done on the kind of trees that can cope well with our increasingly warm urban climate.

#### **Explore how there can best be cohesive working between all stakeholders, the voluntary sector, managed agencies, and service areas regarding the responsibilities in relation to trees**

4.22 The impacts of trees varied in different places, such that, for example, a tree in a rural setting would have different impacts to one planted on an urban street close to houses. However, there were places in towns and villages where the impacts of a tree were more like those in a rural area. It was recognised that tree planting within areas such as school grounds are beneficial as they can provide much needed shade for children, and education with healthy eating and fruit picking. With the community, the Council needs to manage expectations particularly with residents and Parish Councils, that the tree policy would be an ongoing process and may take some time for longstanding issues to be resolved.

- 4.23 There is increasing interest in the environmental and wellbeing benefits from trees and green spaces. It felt that it would be desirable for the Council to work more with community groups, such as on projects developing community orchards. It would be beneficial for the project team currently working on the Queen's Green Canopy project to take this forward once their current project finishes and that the Sustainability Group is approached for consideration and assistance with community projects. Any Parishes/Community projects planted for the Jubilee should be encouraged to register the trees for inclusion within the 'Queens Green Canopy' initiative.
- 4.24 Working with other organisations and communities should be incorporated in the tree policy and strategy. The documentation submitted by the resident highlighted the need for trees to be planted in the right way and with the right tree in place and emphasised the need for trees to be maintained properly. A template letter for Parish Councils would be useful to help with enforcement matters.

### **Explore how the CAVAT tool can be implemented**

- 4.25 Evidence gathered suggested that it would be beneficial for the Council to adopt the Capital Asset Value for Amenity Trees (CAVAT) method for creating a monetary value for trees to help ringfence funding for trees. By CAVAT introducing and enforcement it would hopefully stop – or significantly reduce - this type of premeditated, and other incidents of damage to trees.

### **Tree Strategy and Projects Officer**

- 4.26 The Task and Finish Group supports the role of Tree Strategy and Projects Officer but was concerned that the first round of recruitment had not ended with someone in post. It was felt the salary and the grading process for this post should be investigated as it has proved difficult to recruit to this post. The Council should be proactive in looking for opportunities to create areas such as urban food jungles and parklets which can support residents and are beneficial to wildlife. The Council should rigorously enforce planning requirements related to the planting and maintenance of trees as part of development, including replacement and care of trees which fail within five years of planting.

### **Site visits**

- 4.27 The site visits had been very informative and valuable, as they gave the Task and Group an insight into the challenges and positives of maintaining trees across West Northamptonshire. The impact on residents' homes was seen, and how tree placement affected the number of light homes received and where lack of maintenance had negatively impacted residents and for they helped the Task and Finish Group to understand the separate rural and urban needs and the need for integrated management, for example there were examples of street sweepers not cleaning leaves away properly.

## **5 Issues and Choices**

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- 5.1 Cabinet is asked to consider the recommendations of Place Overview and Scrutiny and provide a response to the Committee to the recommendations.

## **6 Implications (including financial implications)**

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### **Resources and Financial**

- 6.1 The recommendations of Place Overview and Scrutiny Committee may have manpower and financial implications in relation to the production of a Tree Policy and Strategy for West Northamptonshire Council.

### **Legal**

- 6.2 The role of Overview and Scrutiny Committee is to make recommendations to Cabinet. Cabinet will need to reach decisions based on the usual public decision-making criteria including that members consider relevant considerations and no irrelevant considerations. The views of a relevant Scrutiny Committee supported by evidence can be decided upon but Cabinet's responsibility remains to ensure that It has sufficient information to make a decision including the financial and legal implications of the specific proposals presented.

### **Risk**

- 6.3 Place Overview and Scrutiny Committee had regard to any risks and mitigation factors associated with a Tree Policy and Strategy for West Northamptonshire Council and have made recommendations accordingly.

### **Climate Impact**

- 6.4 These proposals have direct positive impact on the climate and sustainability as trees provide climate benefits and contribute to the landscape of West Northamptonshire.

### **Consultation**

- 6.5 The Task and Finish Group received evidence from a variety of sources as detailed in paragraph 3.9 of the report of the Tree Policy and Strategy Task and Group.

### **Consideration by Overview and Scrutiny**

- 6.6 Place Overview and Scrutiny Committee considered and approved the report of the Tree Policy and Strategy Task and Finish Group at its meeting on 19 October 2022.

## **Community Impact**

6.7 The Tree Policy and Strategy will be for the whole of West Northamptonshire with a positive impact on communities.

## **7 Background Papers**

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Place Overview and Scrutiny Committee – agenda and minutes - 18 October 2022

Place Overview and Scrutiny Work Programme 2021 -2022

Tree Policy and Strategy Task and Finish Group Agendas and minutes – October 2021 – July 2022

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# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6 DECEMBER 2022

LEADER OF THE COUNCIL - COUNCILLOR JONATHAN NUNN

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**Report Title** Corporate Plan Performance Report – 2022-23 Q2

**Report Author** Richard Corless  
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## Contributors/Checkers/Approvers

<b>West MO</b>	Catherine Whitehead	21/11/2022
<b>West S151</b>	Martin Henry	22/11/22
<b>Other Director/SME</b>	Chief Executive, Assistant Chief Executive and All Directors via ELT and EPB.	21/11/22
<b>Communications</b>	Becky Hutson	21/11/22

## List of Appendices

### Appendix A – Corporate Plan Report – 2022-23 Q2

#### 1. Purpose of Report

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- 1.1. The attached appendix provides an update for Quarter 2 to Cabinet on West Northamptonshire Council's performance metrics for the current year and set against the priorities set out in the Corporate Plan.

#### 2. Executive Summary

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- 1.2. This report provides an overview of performance for West Northamptonshire Council for the period of July to September 2022 (Quarter 2). Full details of that performance for this quarter can be found enclosed within the appendix.
- 1.3. The performance indicators included in the report have been subject to review, challenge and approval by both the Cabinet and the Executive Leadership Team (ELT) in the previous quarter with our aim being to create a meaningful dashboard of measures that provides members and officers with good insight into the councils performance.
- 1.4. There have been many changes to teams, services and systems as part of creating the new council and therefore some indicators will need to be developed in order to provide a complete unitary view and move away from the old district and borough boundaries. This is also exacerbated where we have different delivery vehicles or contracts for services, for example in Revenues and Benefits where the services are run in three different contracts and models.

### **3. Recommendations**

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3.1 It is recommended that Cabinet:

- a) Note the content of the appendix covering the second quarter of 2022-23.

### **4. Reasons for recommendations:**

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- To comply with the requirements of the Local Government Act 1972 to report Council performance to members

This report is for information purposes and discussion only, there are no direct decisions to be made following the report

### **5. Report Background**

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- 5.1 It is important that the Council is clear and transparent on its performance and that there are clear action plans where our performance falls below target or that of other benchmark authorities.
- 5.2 The Council monitors performance across all services areas and against hundreds of national and contract metrics to ensure that services are performing well and identified priorities are monitored and delivered against. These are monitored within services and reported in line with national cycles or as required to Overview and Scrutiny, and other committees.
- 5.3 This performance report provides an overall high-level summary of the key metrics that underpin our stated corporate priorities and sets out proposed metrics that we will be

developing and monitoring for this quarterly report in addition to the wider overall performance framework we have in place.

## **6. Issues and Choices**

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6.1 This is a report for information and discussion and therefore there are no choices to be made.

## **7. Implications**

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### **7.1 Resources and Financial**

7.1.1 There are no direct financial implications from the report. However, services need to consider the implications of under or over-performance and identify what resources may need to be reallocated to address these.

7.1.2 Financial indicators included within the performance report can be found in greater detail within the finance reports that are presented to Cabinet.

### **7.2 Legal**

7.2.1 There are no legal implications arising from this report or recommendations.

### **7.3 Risk**

7.3.1 There are no significant risks arising from the proposed recommendations in this report.

### **7.4 Communication and Consultation**

7.4.1 The metrics included in this report have been chosen based upon the priorities identified within the Corporate Plan and in consultation with Cabinet and the Executive Leadership Team. The Corporate Plan priorities and wider service objectives are underpinned by the Council's communications and consultation activities to keep the public, staff and stakeholders informed and engaged on what the council is doing and how it is performing.

### **7.5 Consideration by Overview and Scrutiny**

7.5.1 Relevant performance data will be provided to Overview and Scrutiny Committees as required to support their agreed work plans.

### **7.6 Climate Impact**

7.6.1 There are no direct implications on climate/environmental impact from this report, it does however provide an update on the delivery of the Corporate Plan which includes commitments to be net zero by 2030. This quarterly report will provide updates on the council's progress to this aim as appropriate.

## 7.7 **Community Impact**

7.7.1 Managing our performance is key to ensuring we are making a positive impact on our communities, celebrating our successes and addressing our challenges.

## 8. **Background Papers**

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8.1 The West Northamptonshire Council Corporate Plan 2021-25 provides the basis for the data and project updates that are provided within this quarterly report.



# Corporate Plan 2022-23 Quarter 2 Report

July to September 2022

Last Updated: 23<sup>rd</sup> November 2022



Welcome to the latest update on delivery of the West Northamptonshire Council Corporate Plan with data and project updates covering the second quarter of 2022-23 broken down into monthly information where that is available. The metrics included in this report have been chosen based upon the priorities identified within the corporate plan and consultation with both the Executive Leadership Team (ELT) and Cabinet members.

## Quarterly Update content

The data elements that are provided in this report include a monthly breakdown of the current quarter, where the information is available to that level, as well as an overall quarterly position. In addition to this there is trend information for the current year and last year. Where there is externally published information available we have begun to add in benchmark data, covering national (normally England), regional (East Midlands) and where appropriate statistical neighbour groups (for Children's Services).

The report contains two main elements - a summary 'dashboard' type information on each page alongside a short narrative and also at the end of the report all indicators are available in a detailed scorecard view. Some of these areas are long term projects and therefore there will not always be an update to that narrative each quarter, we will provide an update each quarter assuming that there has been progress or something has changed since the previous report.

### 1 Green and Clean Environment & Wellbeing

- Carbon neutral by 2030
- Climate summit in first few months
- Increased wildlife species & more trees
- Increased electric charging & energy efficiency
- Vibrant towns & villages
- High quality parks
- Accessible green space for all

### 4 Thriving Villages & Towns Place shaping & Homes

- Regeneration of our core town centres
- Safer communities with less anti social behaviour
- Flourishing and supported small business
- Sustainable planning for growth
- Increased affordable housing & Council homes
- Raised standards of privately rented homes

### 2 Improved Life Chances Health, Social Care & Families

- Healthy, safe and protected Children
- Increased aspirations in young people
- Investment in new schools & provision
- Adults supported to live independently
- Care provided for those that need it
- Reduced hospital stays and delays
- Joined up and local services with health
- Safe and secure accommodation for all

### 5 Economic Development Growth & Prosperity

- Published west strategic infrastructure plan
- Framework for long term economic growth
- Increased inward investment
- Building on our rich heritage
- Increased visitors to our attractions
- Infrastructure benefits and investment through our role in regional forums and plans

### 3 Connected Communities Transport & Connectivity

- Improved road, rail and bus networks
- Completion of major roads projects
- Improved road quality
- Increased use of electric vehicles & charging points
- Enhanced broadband and mobile connectivity

### 6 Robust Resource Management Transparency & financial probity

- Council tax rises capped at £99 a year
- Stable finances and rainy day reserves
- Robust scrutiny of spending
- Open and transparent decision making
- Financial prudence underpinning long term decisions and plans
- Optimised debt management



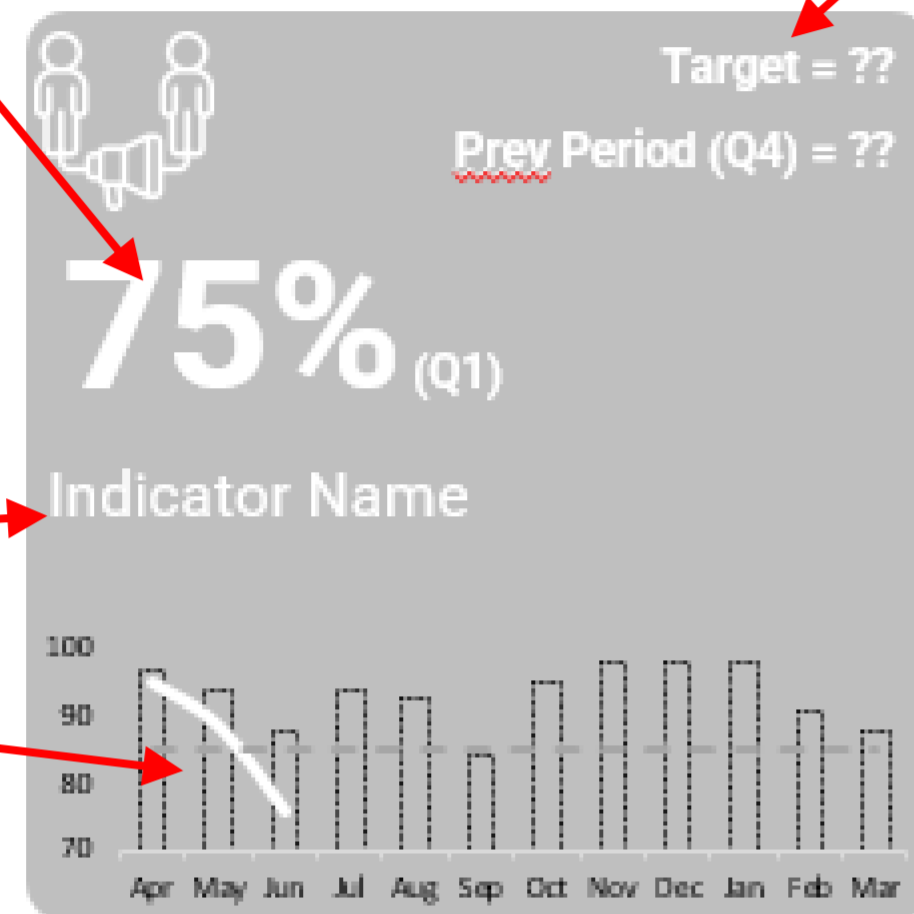
The below diagrams for the indicator dashboard pages and the detailed scorecards outline the data elements within them and how to interpret what is being shown.

### The current performance.

This will be the period for the current report, unless otherwise stated next to it. The current period can always be found in the bottom left corner of each page.

### The previous period's performance

The last period, will be stated if that is a quarter or a specific month.



### Indicator Name

### Trend Chart

White Line: This will show the recent trend, either by month (if available) or by quarter

Dotted Line – this is the target

Bar chart – this is last years performance

### Indicator details

This section includes the indicator name, the priority it is relevant to in the corporate plan, the lead directorate plus if it is better for the performance to be higher or lower.

### Performance Data

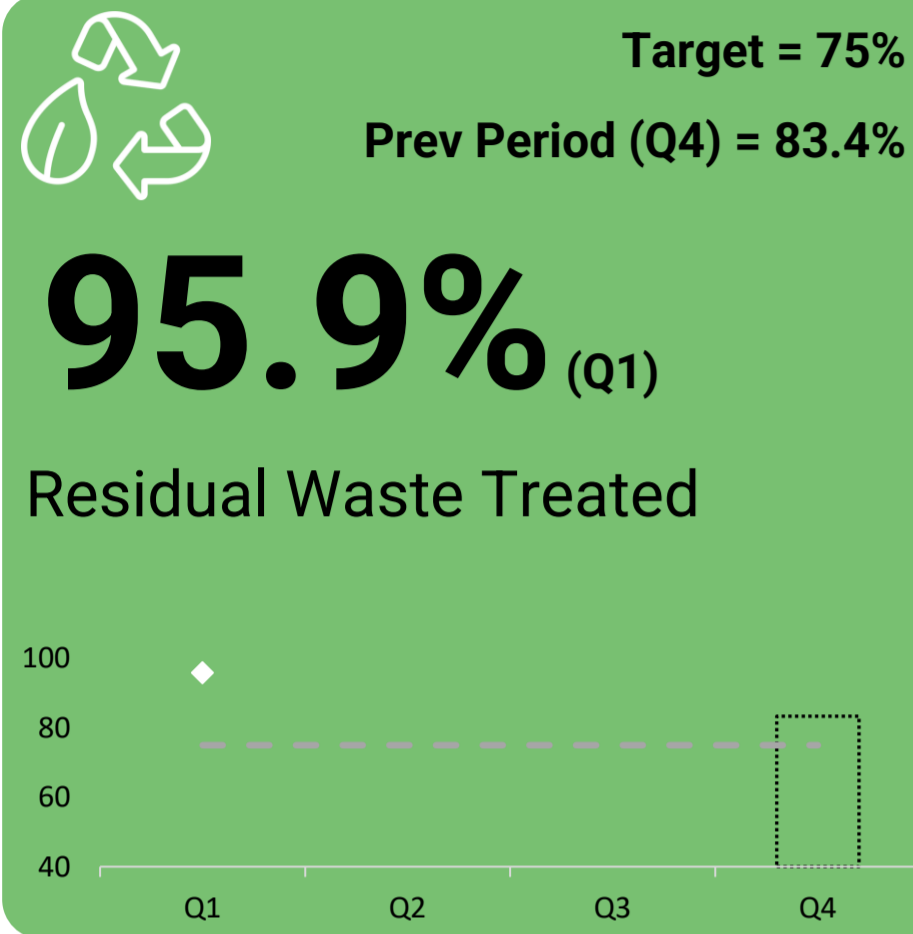
This section includes the target and current performance data broken down to month where available, quarterly and year to date (YTD).

In addition benchmarking information is included on the right hand side covering regional, national and statistical neighbour groups. There are and will continue to be a number of indicators that have no published data in order to benchmark against.

Corp Ref:	Metrics (Number / Rates / Financial)	Priority	Directorate	Better to be?	Target	Apr	May	Jun	Q1	Jul	Aug	Sep	Q2	YTD	Regional	National
1.2	Percentage of household waste sent for re-use, recycling or composting	1. Green & Clean	Place & Economy	Higher		50.85%	52.32%	56.42%	53.33%					53.33%		
1.3	Percentage of waste from HWRCs diverted from landfill								71.50%							
1.4a	Net trees planted this year												-140	-91	n/a	n/a
1.5	Council vehicles that are electric or hybrid	1. Green & Clean	Place & Economy	Higher									22			
1.6	Council owned parks and green spaces that have Green Flag accreditation	1. Green & Clean	Place & Economy	Higher	10 in 5 years				5				5	5		

Temporary image as an example only

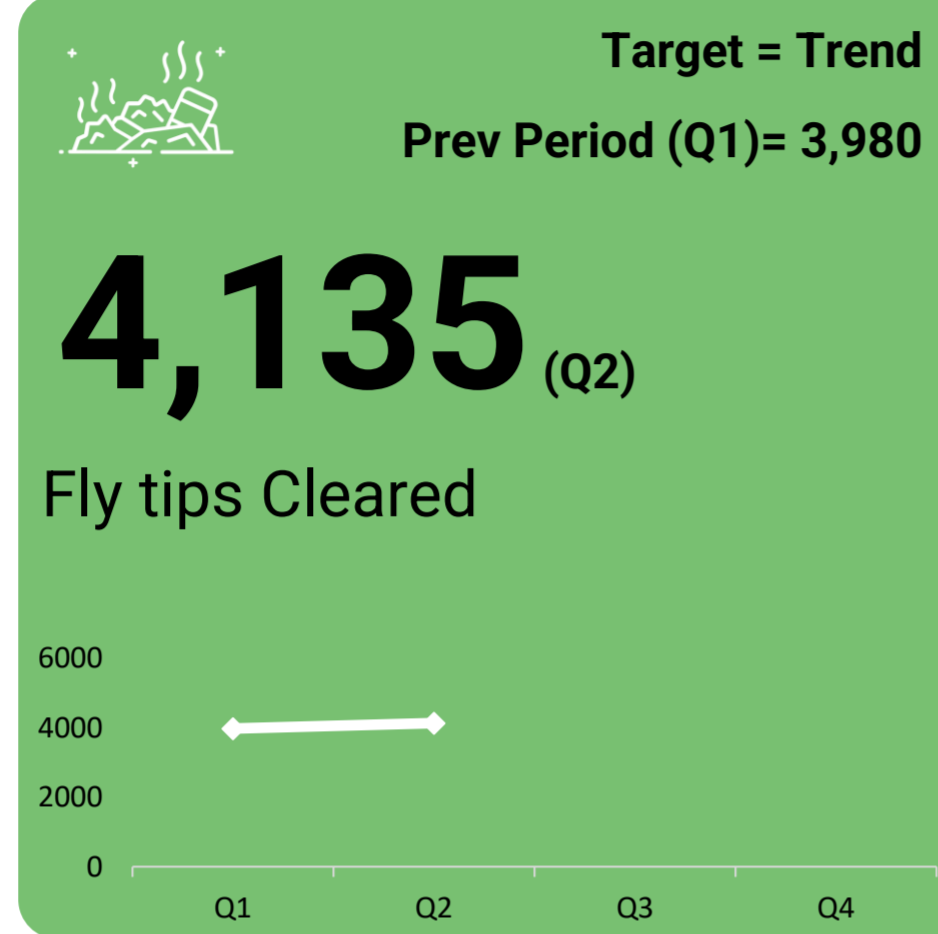
# Priority 1 – Green and Clean Environment & Wellbeing



This indicator measures a combination of all waste types which go through some form of treatment process (i.e. do not go to landfill) and provides an overview of how waste is treated in West Northamptonshire.

This indicator replaces the two recycling measures previously included in this report. This is because those two measures form part of the Residual Waste metric, but also combine other elements which would otherwise be absent from reporting.

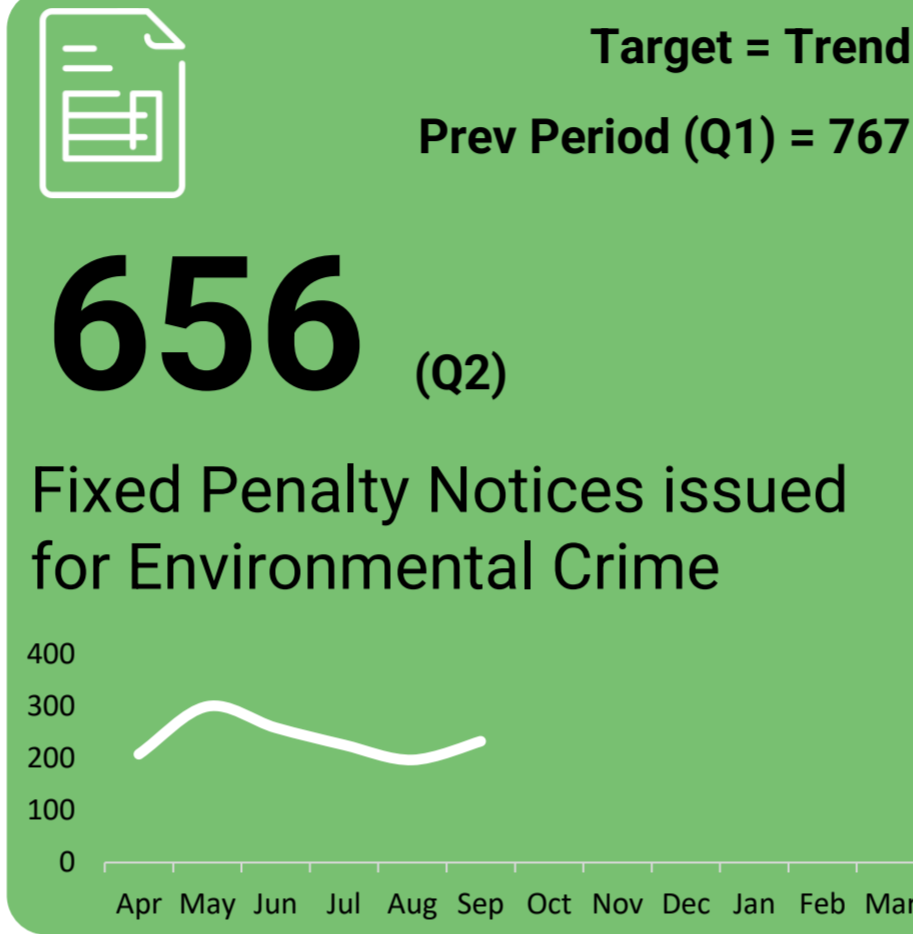
This measure is reported a quarter in arrears due to reporting processes via WasteDataFlow and therefore this report shows the performance for Q1 of 2021-22.



Fly-tipping is illegal dumping of liquid or solid waste on land or in water. The waste is usually dumped to avoid disposal costs. Should the fly-tipping occur on public land it falls to the Local Authority to clear the rubbish away, the cost of disposal then falls on the LA.

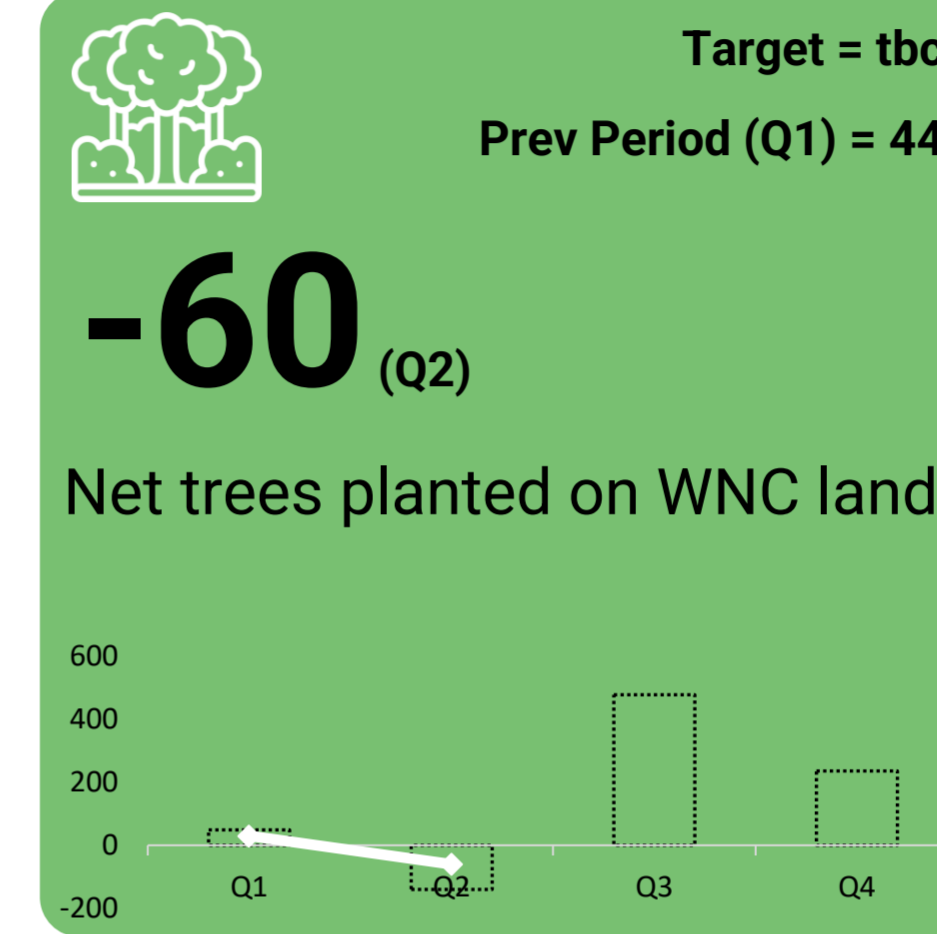
This is a new measure in the corporate scorecard this year and is a trend based measure, whilst there is no target against this measure we have a responsibility to clear all fly-tips in relevant land.

The second quarter this year has seen WNC needing to clear 4,135 fly-tipping incidents, an increase from 3,980 reported in quarter one.



This measure reports against those fixed penalty notices (FPNs) which have been issued on behalf of WNC for environmental crime, this would include those fines issued for fly-tipping.

This measure is a new collection for the authority this year (although fines were issued last year). Across the second quarter this year 656 FPNs have been issued, a reduction of 111 in the volume issued in the previous quarter.



Normal planting season for trees is in the months between October and April which means that any removals of tree's outside this period due to planned works or developments are likely to result in a negative net trees planted position.

This quarter, which is out of normal planting season has seen 60 tree's removed. In addition to this as part of the Queen's Garden Canopy project to mark the jubilee the council is working with Parish Councils and community groups to plant tree's across 2022 through to March 2023. So far there are 3,306 tree's planted or planned by Town/ Parish Councils, 2,416 in Parks, 380 in schools and a further 3,402 through community groups or private parties.



# Priority 1 – Green and Clean Environment & Wellbeing

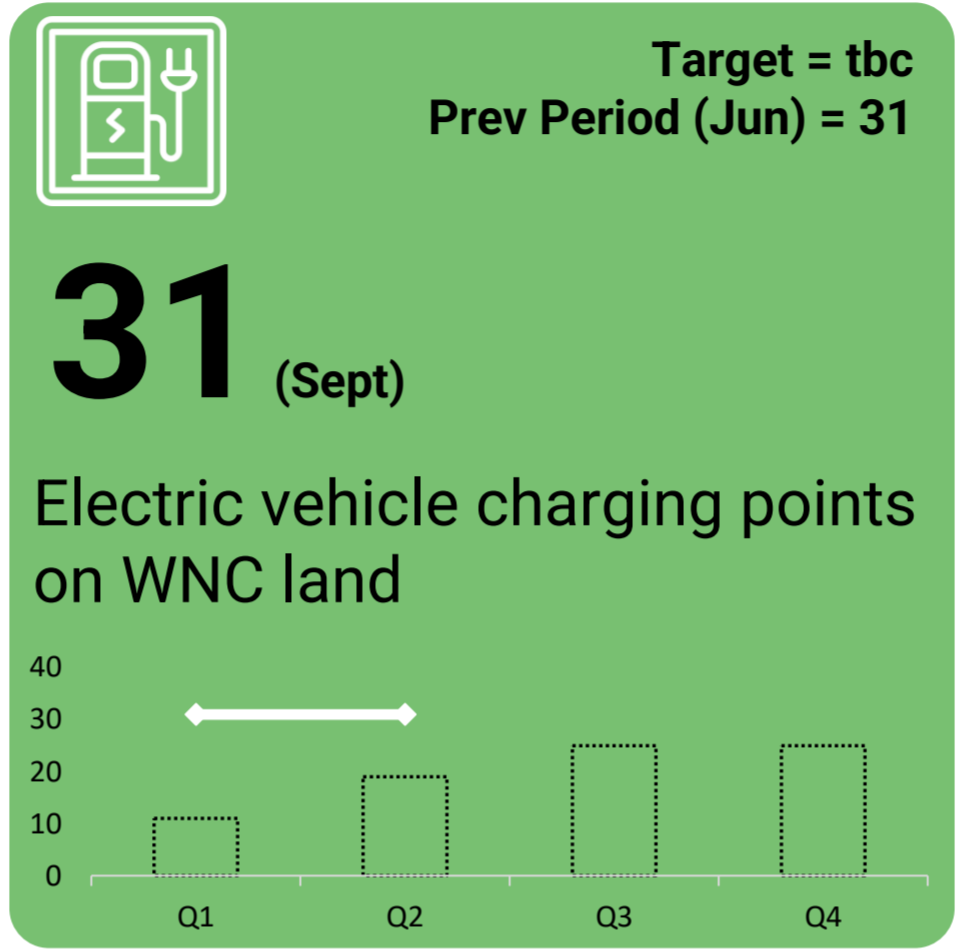


This measure counts the number of visitors to leisure centres that are ran by West Northamptonshire Council.

Overall numbers each month remain consistently above the forecast target but some classes / sessions remain below pre-covid levels at the current time.

The first two quarters of the current year have each seen over 0.5million visitors into the leisure's centres with a total year to date of 1,096,833 visitors.

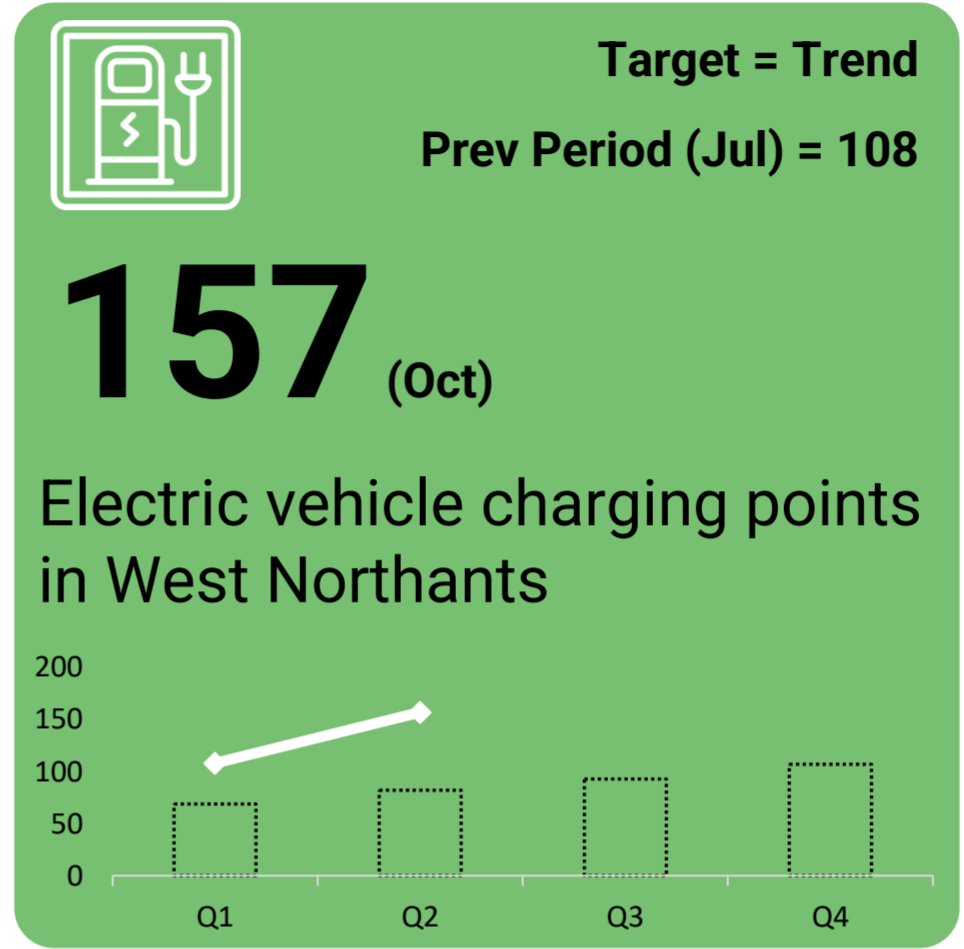
Leisure centres overall have benefitted from the summer holidays, with high throughput figures over the six weeks from end July to start of September.

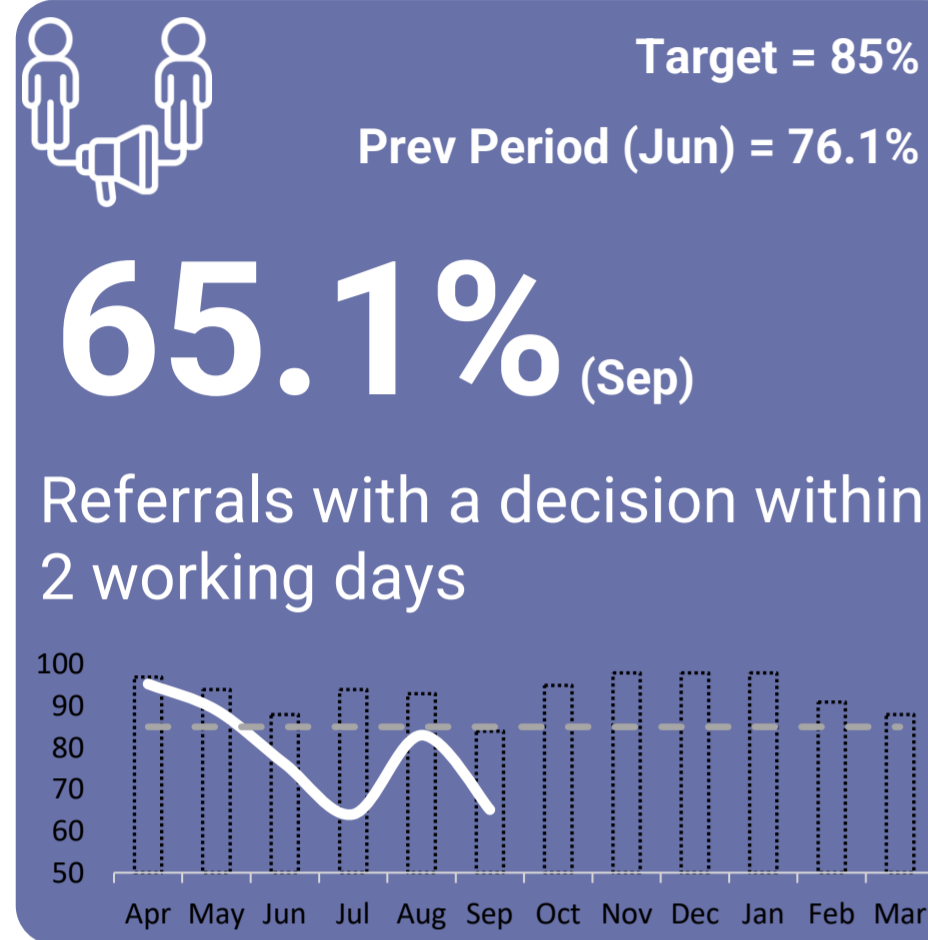


WNC has 31 electric vehicle charge points in place on either the highway or within WNC car parks or property that are available for electric vehicles, this is no change from the position at the end of June.

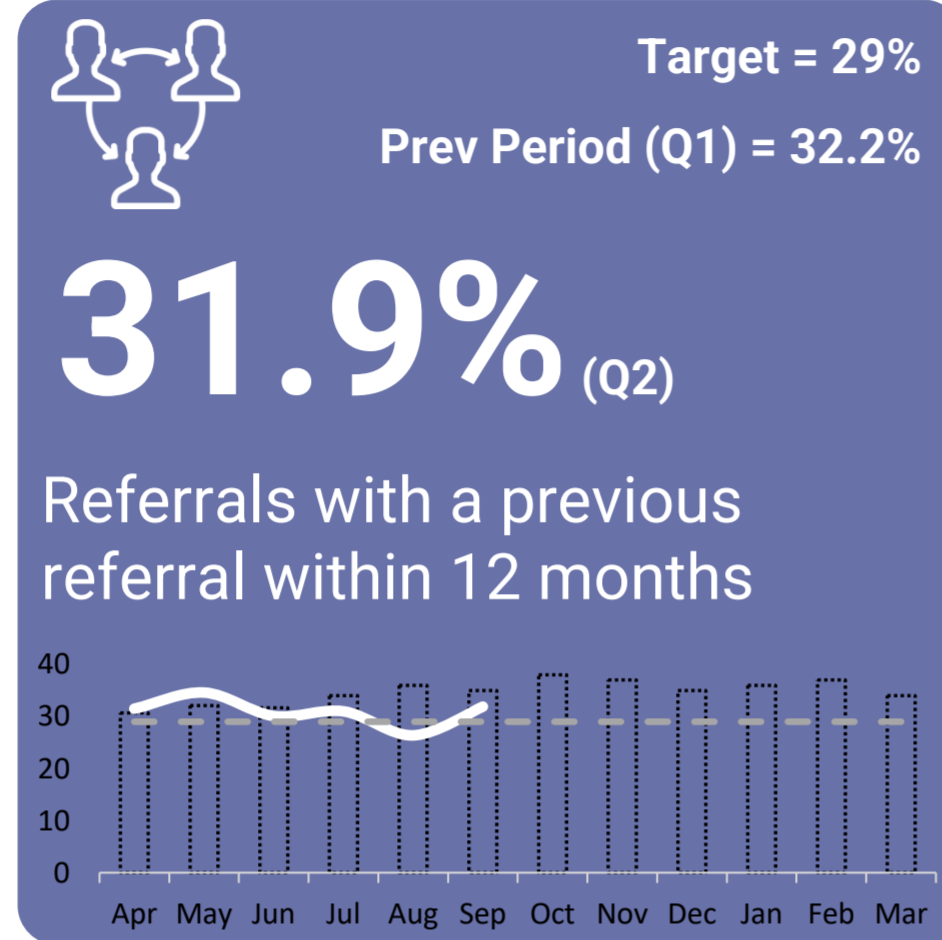
Additionally the total charging point access for West Northamptonshire as at October 2022 shows that there are 157 public charging devices, an increase of 49 since July 2022, of these 50 are rapid charging devices (an increase of 13 from July).

The West Northamptonshire area has 38.6 charging points per 100,000 population (up from 26.6 at July 2022). This is higher than lower than the East Midlands (37.9), but lower than the England (52.7) averages.

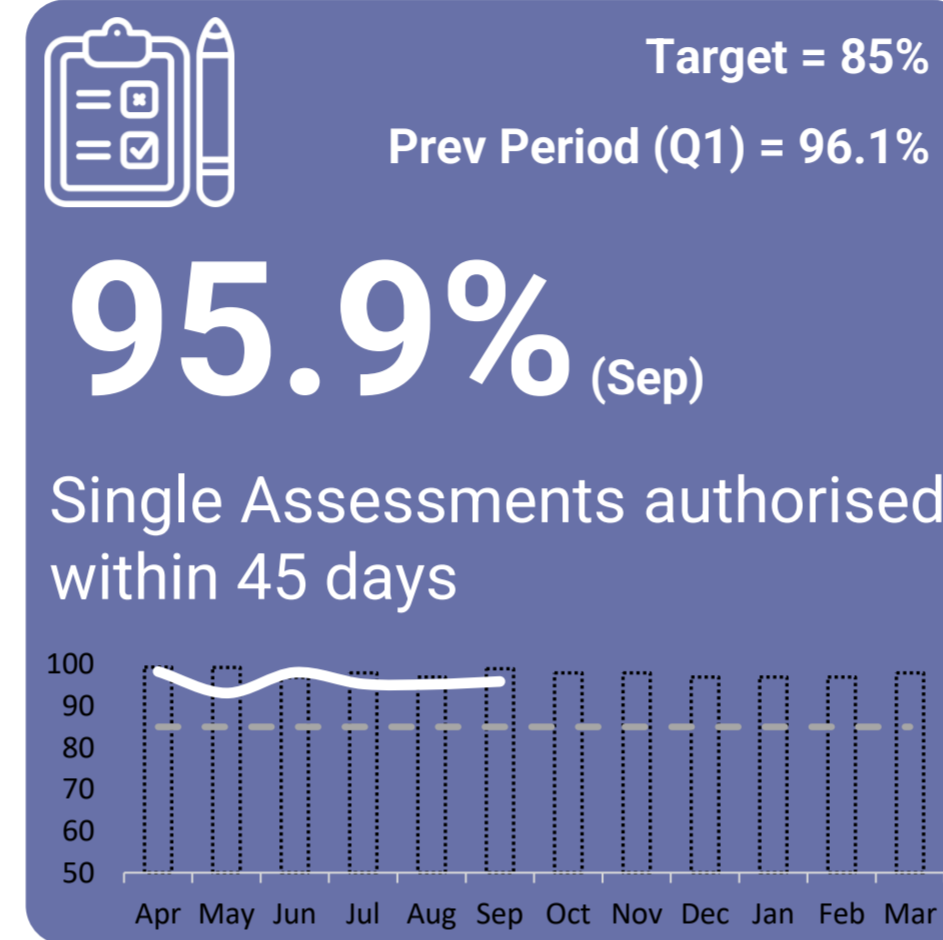




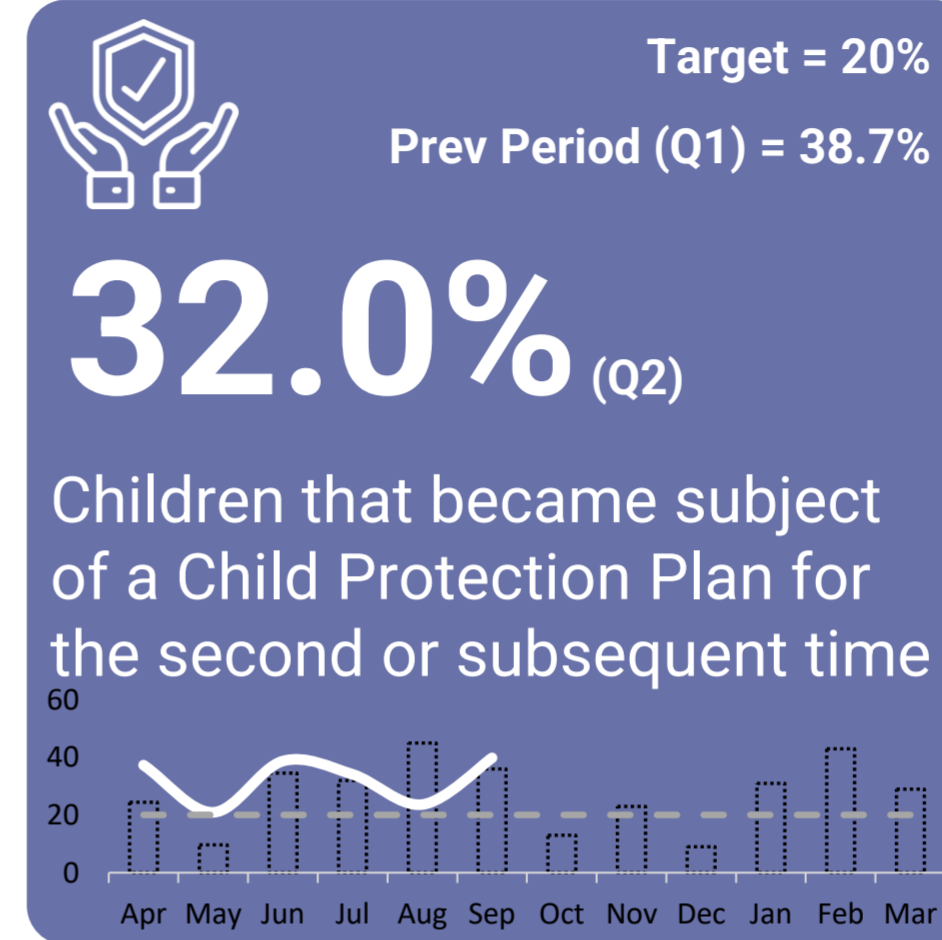
A referral is defined as a request for a social care intervention/assessment, and a contact is information given to social care about a situation which does not meet the threshold for referral, for example notifying that the child has gone missing or domestic violence notifications from police if a child was present. Contacts are logged to give a complete history for the child but only count as a referral where they have resulted in an assessment. Performance has declined this month due to IT breakdown, PPN challenges and increase in business. The service continues to work hard on ensuring timely decision making is maintained. Cases that are rag rated RED are prioritised and decisions made within 1 day.



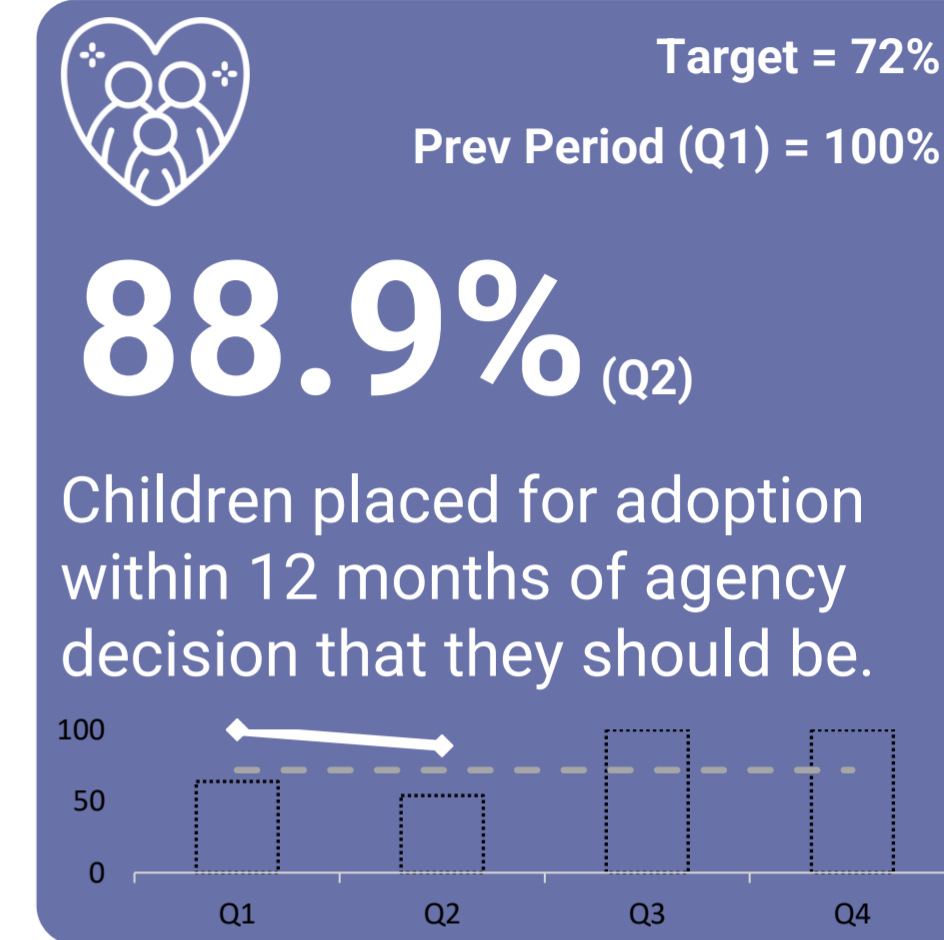
This is 3% above target this month whilst remaining an area of ongoing focus with audit and review for learning. It is anticipated that the strengthened model in MASH and developments in CFSS/Early Help will continue to support appropriate reduction going forward. Steps have been taken to strengthen the Early Help partnerships with Partnership Support Team (Early Help MASH) being placed in the MASH pods and a leaner step down process. The high number of cases stepping down is presenting challenges in regards to capacity in Family Support/Early help partnership.



Assessment timescales remain consistently above target. All managers monitor this very closely via daily reports. A narrative is provided for cases that go beyond 45 days and this remains a very small minority. In addition to timeliness, we work on increasing the quality of assessments and more effective use of SofS in our interventions. PIP peer review has identified improvements in the quality of assessments

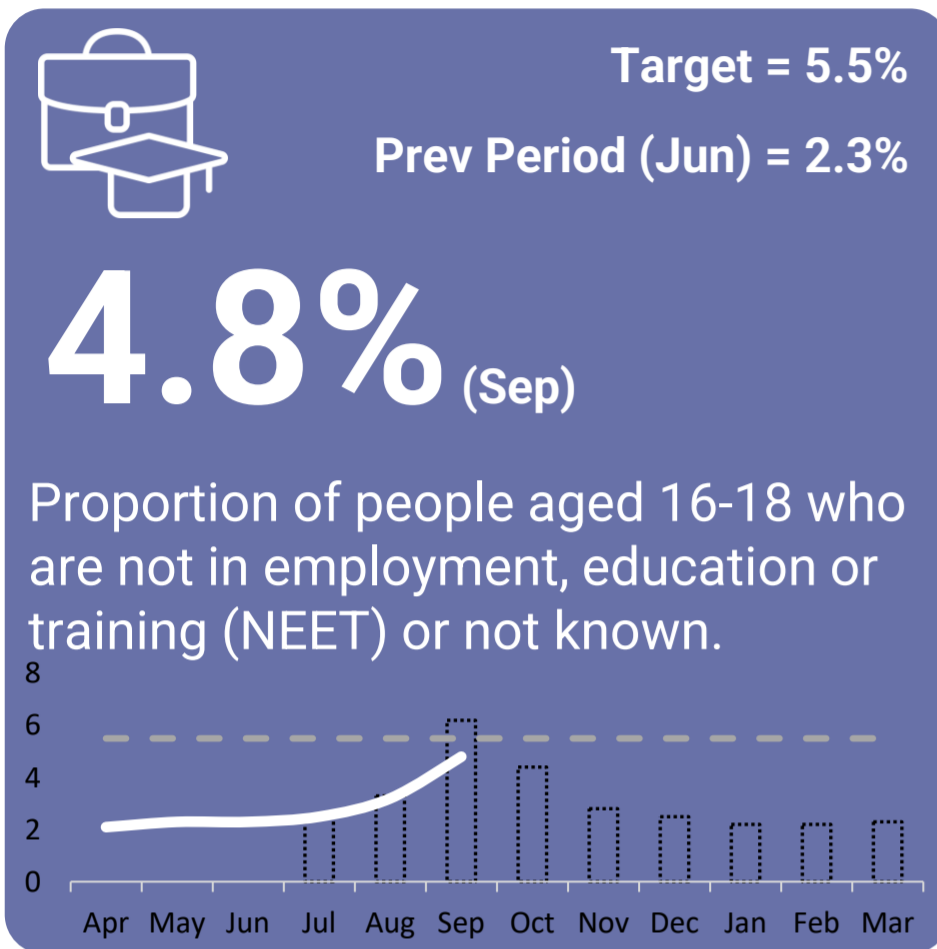


This measure continues to be variable and, on occasion, too high. 33 of 83 plans starting in September are for children who had been on a plan before (17 families). 5 families ended plans within the last 1-2 years and 12 ended 2 or more years ago. If looking at those repeating within 2 years, the figure is 13%. 10 of the families returned with the need 'neglect' (5 of those had neglect for the previous plan as well). Cases are regularly reviewed and findings so far indicate that the pandemic and rising cost of living may have contributed to increased stresses and pressure for families, consequently escalating their needs.



Strengthened family finding and matching processes have been implemented which alongside improved permanency tracking arrangements have supported timely decision making process and ability to progress adoption placements. The use of foster to adopt placements have also positively influenced this performance indicator. This quarters performance relates to 9 children who have been placed for adoption.

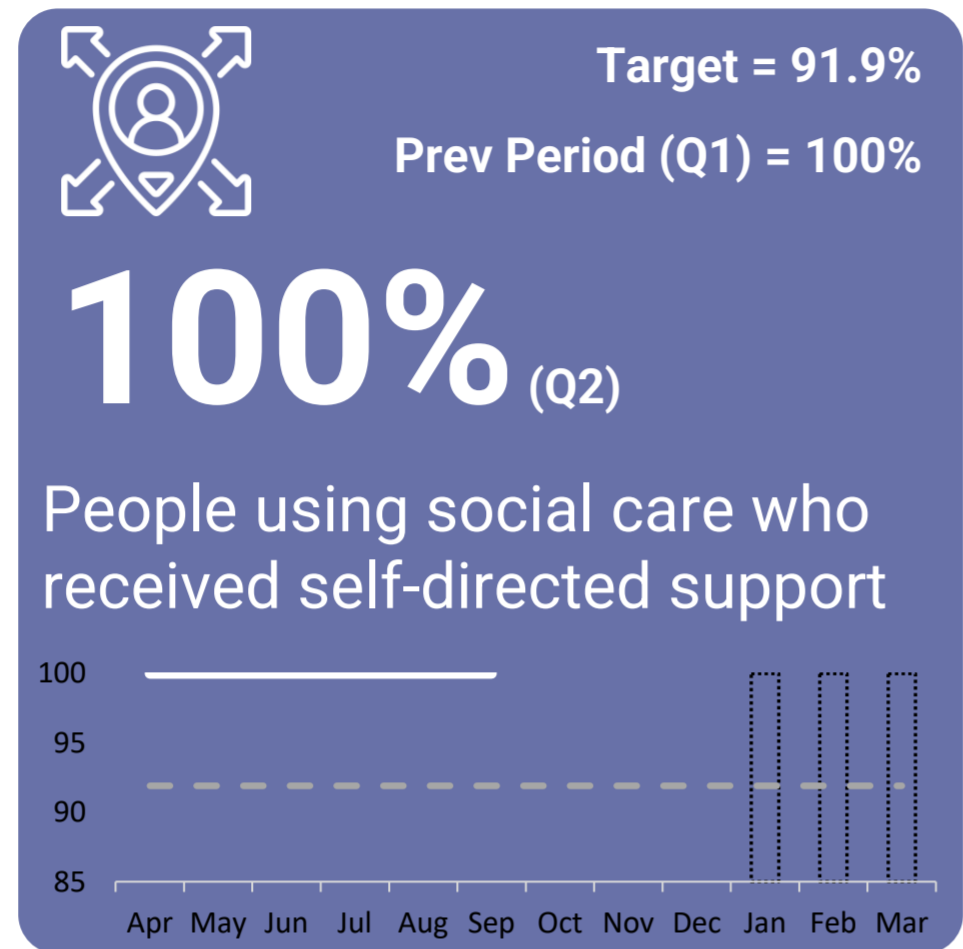




This indicator is showing the proportion of young people (aged 16-18) who are not in employment, education or training (NEET) or their status is 'not known'.

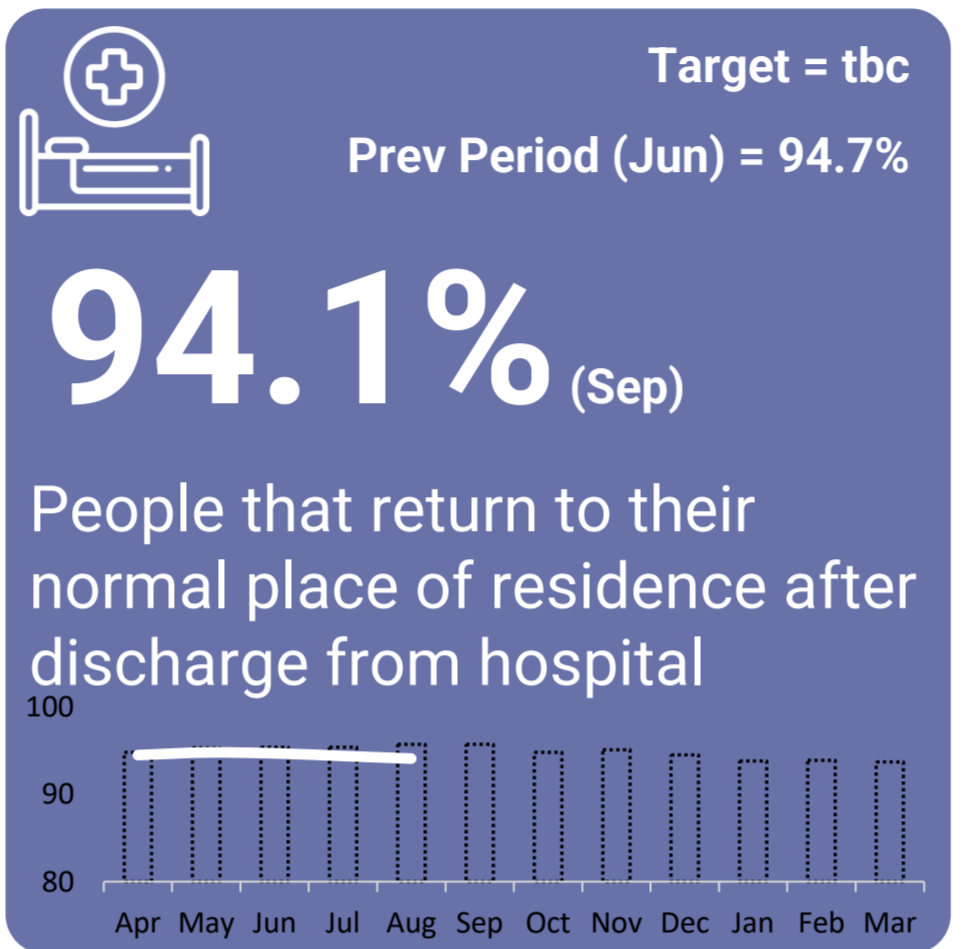
Whilst there is data going back prior to April 2021, that data is not split to the unitary council area in a way that enables comparison's to previous years.

The latest position at the end of September shows that 4.8% of young people are either NEET or not known, this is an increase since the end of the previous quarter. This is an expected increase as is seen each year in Q2 shows a large increase due to a brand new cohort and initial reporting having to be collected from schools in Sept.



A statutory reported measures in the Adult Social Care Outcomes Framework (ASCOF), it measures of those in receipt of social care that have a direct payment or a personal budget which results in the outcome of people managing their own support as much as they wish, so that they are in control of what, how and when support is delivered to match their Needs.

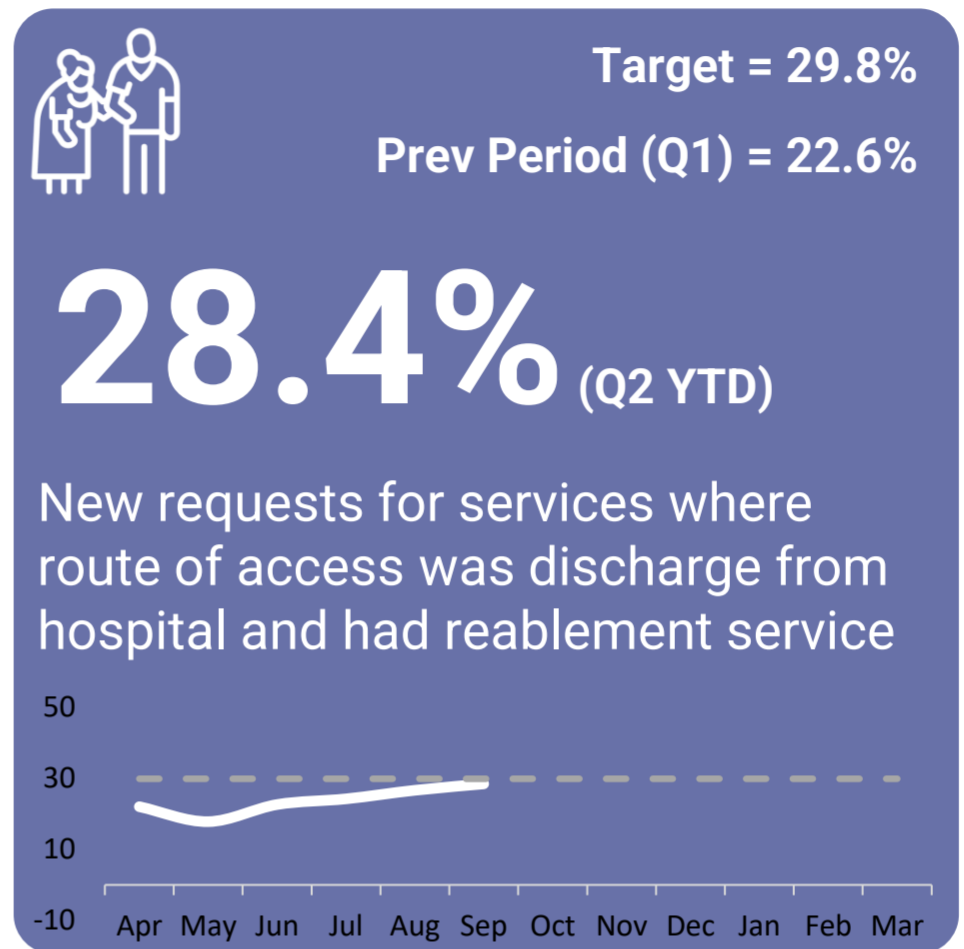
Currently the performance on this metric is showing that 100% of those in receipt of social care are managing their own support as much as they wish, this has been the case across the entire first half of the current year.



This indicator looks to measure the proportion of people that return home after a discharge from hospital.

Date for this indicator at local authority level is available from the NHS Digital Secondary Uses Service (SUS) database. The SUS database is a repository for healthcare data in England which supports the NHS in the delivery of healthcare services.

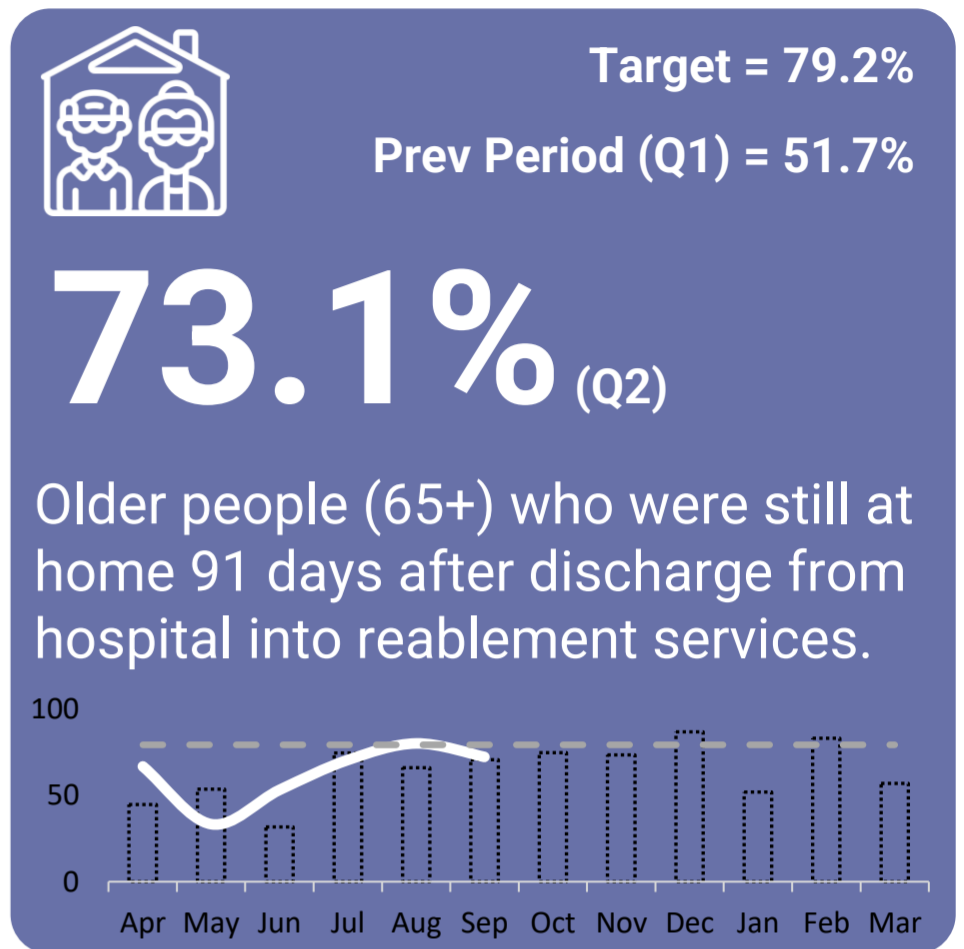
Performance has been broadly consistent across the second quarter of the year with July at 94.% and August/September both at 94.1%. This is a small reduction when compared to last year of c0.5% each month. The target for this measure is in the process of being set through the Better Care Fund (BCF) work.



This measure is one from the SALT return and focuses on new requests for service that directly follow a period of stay and discharge from hospital that had resulted in some form of reablement services.

Performance in the second quarter of the year has improved after action taken earlier in the year and this shows that 34.2% (up from 22.6% in Q1) of those new requests for service have had a reablement service, taking the combined year to date position at end of Q2 to 28.4%.

This takes local performance close to the latest regional average and our target for the current year of 29.8% for this indicator.

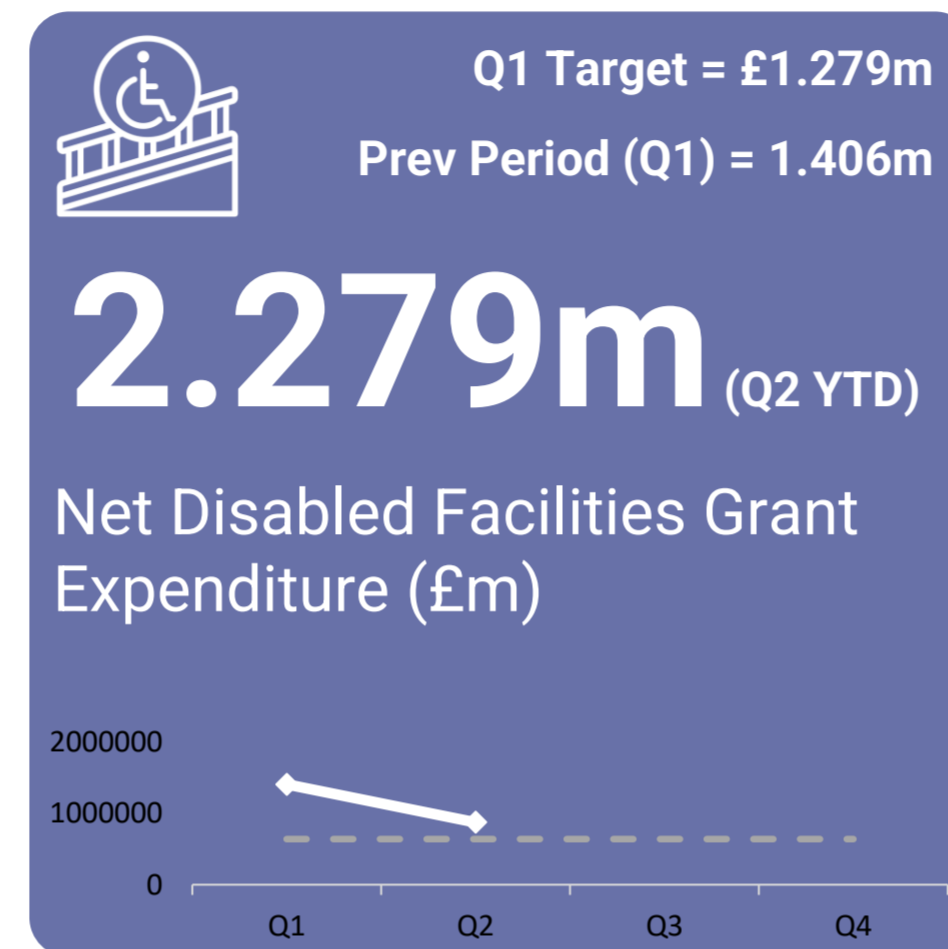


This indicator is one of the measures from the Better Care Fund (BCF) in the current year and measures those people (aged 65+) who were still at home 91 days after left hospital and had some form of reablement service.

Performance for this indicator has improved this quarter, up by more than 20%, from 51.7% to 73.1%, this also takes the overall year to date position to 61.7% of people still at home 91 days after discharge from hospital.

The national comparison for this indicator looks at the discharges in the 3 months between October and December only, so whilst not directly comparable due to the time of year the national average last year was 79.2% and the WNC outturn for that period was 76.2%.

# Priority 2 – Improved Life Chances Health, Social Care & Families



The council has a duty to support people and families from becoming homeless.

During the Prevention Duty we must take reasonable steps to prevent any eligible applicant from becoming homeless, regardless of priority need status, intentionality and whether they have a local connection. This can involve assisting you to stay in your current accommodation or helping you to find a new place to live. Under this part of our duty we have prevented 118 households from becoming homeless in the first quarter of the year, this is above our target for this period.

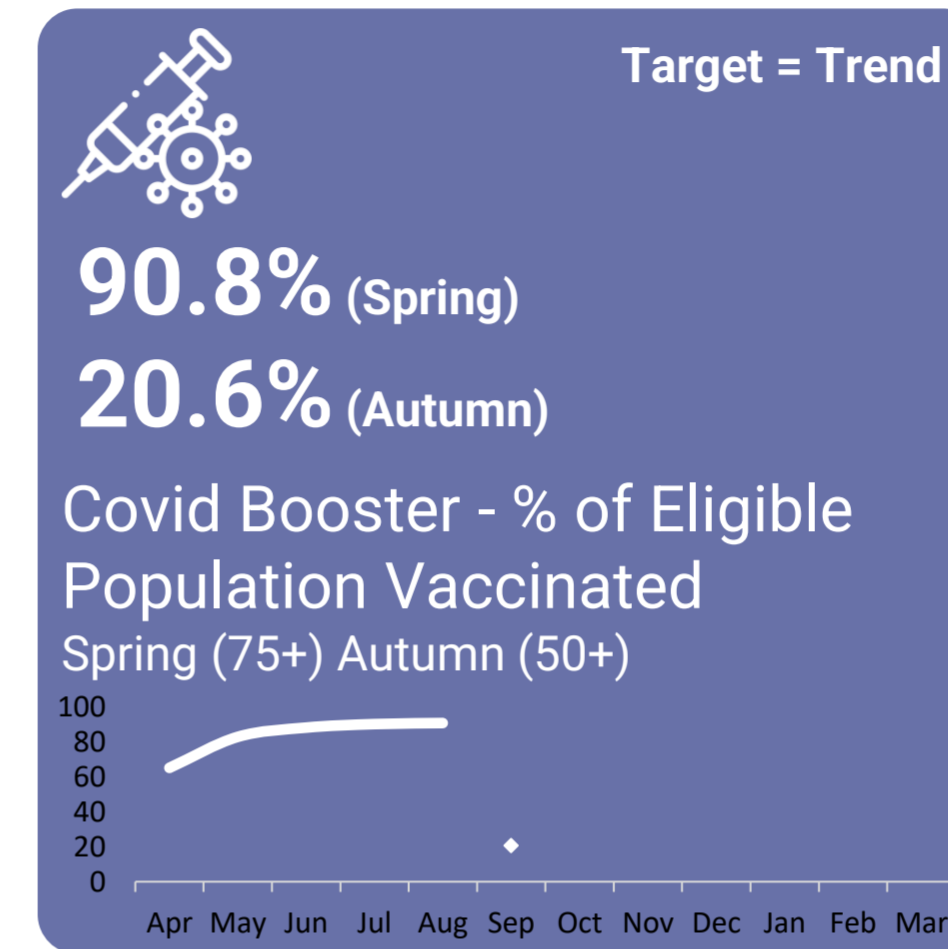
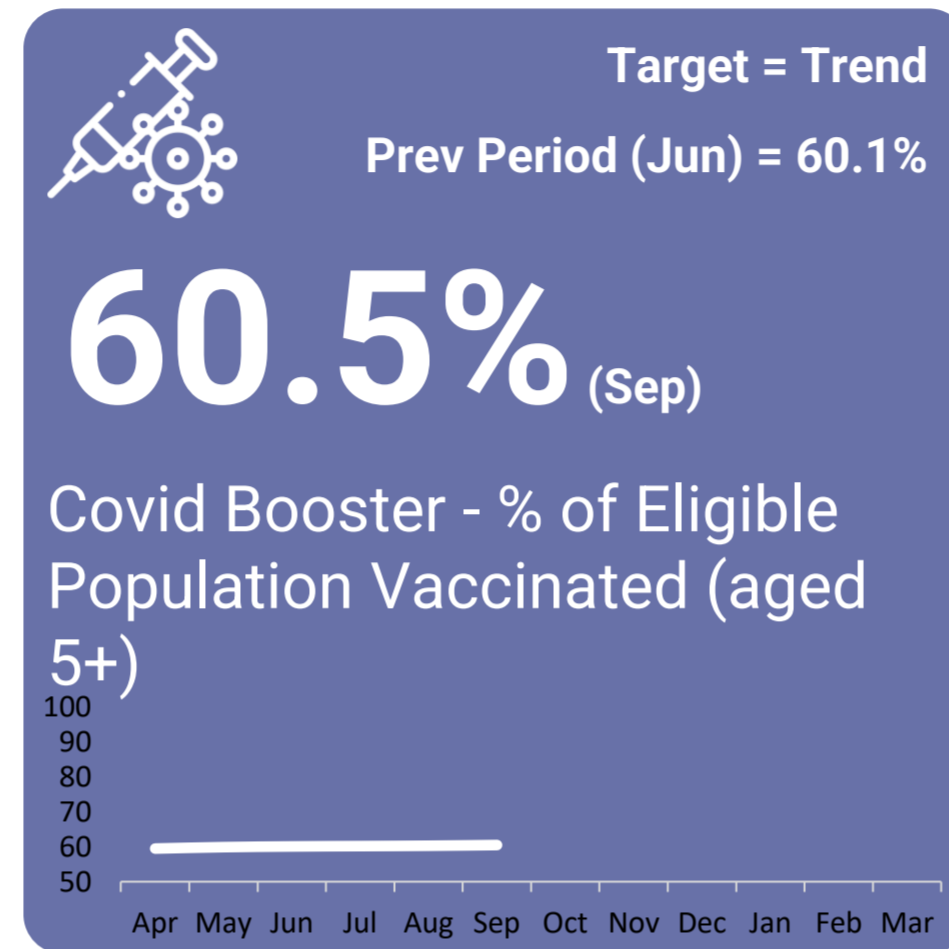
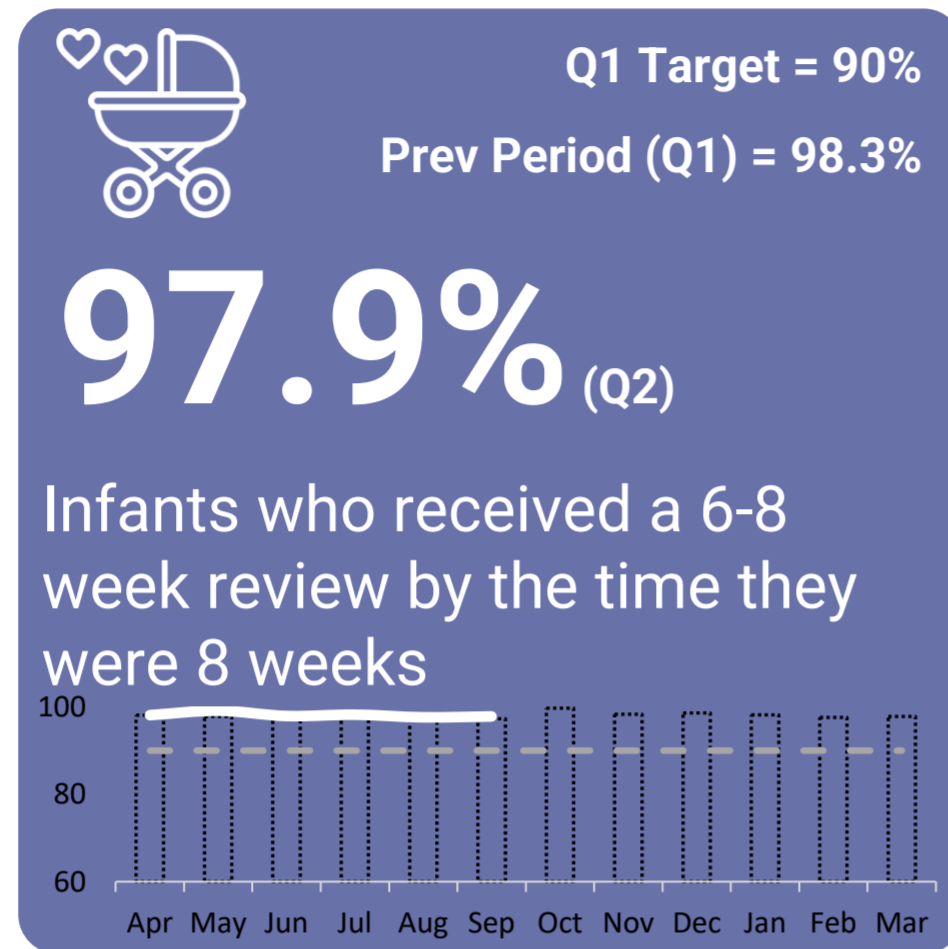
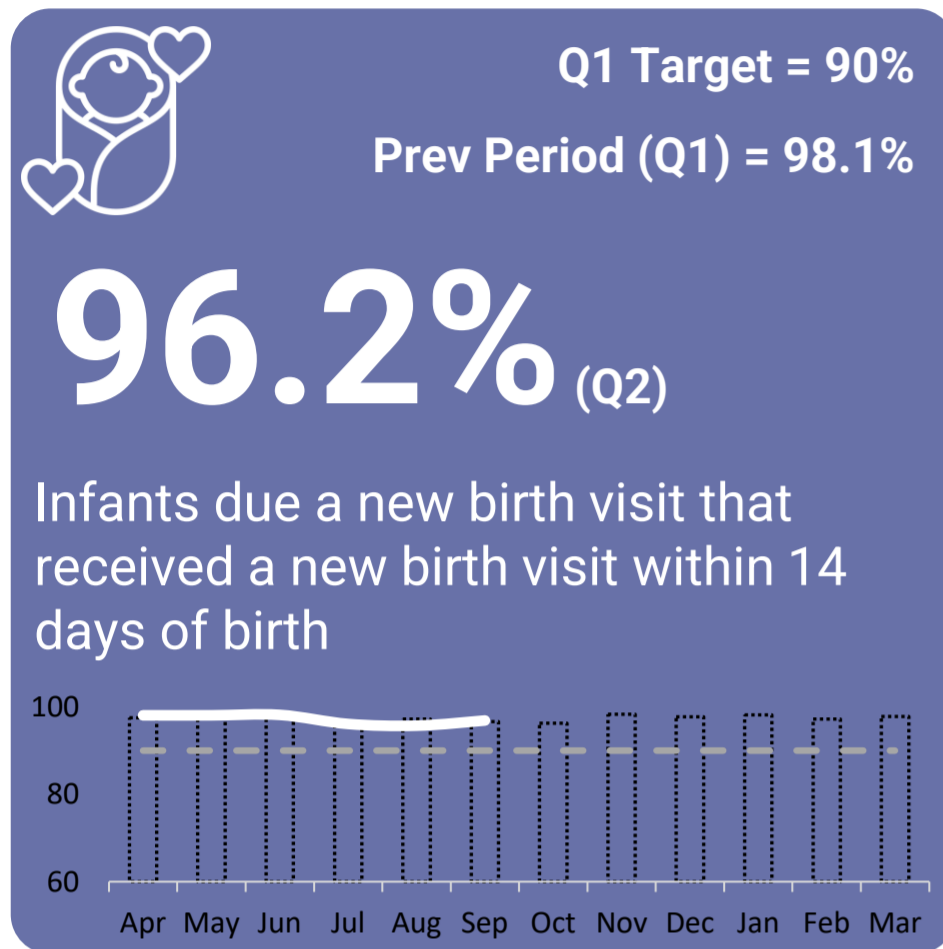
If we have not been able to prevent you from becoming homeless under the Prevention Duty, you will be owed the Relief Duty. During the Relief Duty we must take reasonable steps to help you to secure suitable accommodation. The Relief Duty lasts for up to 56 days and is available to all households who are homeless and eligible, regardless of whether they have a priority need. Under this part of our duties we have had 112 cases where homelessness was successfully relieved in quarter 2, as with the first indicator this is above our target for this period.

Combined under the two duties we have supported 230 households across the authority area from becoming homeless in the second quarter of the current year.

A Disabled Facilities Grant (DFG) is a grant administered by the local council available to fund a range of work that will help a disabled person remain in their home. It has to be supported by an occupational therapist recommendation. The maximum amount per grant is £30,000.

This measure seeks to monitor the expenditure against the DFG sum that the authority has to spend in the current year, this total is £2.558m for 2022-22. The Q2 year to date position shows the total amount which includes £1.279m of committed spend, some of this may not be realised.





The health visiting service leads on the delivery of the Healthy Child Programme (HCP), which was set up to improve the health and wellbeing of children aged 0 to 5 years. This is achieved through health and development reviews, health promotion, parenting support, and screening and immunisation programmes.

The health visiting service consists of specialist community public health nurses and teams who provide expert information, assessments and interventions for babies, children and families, including first time mothers and fathers with complex needs. The indicators included here are for both new birth assessments and the check at 6-8 weeks.

There is good performance in both of the measures reported here, despite decreases in the latest quarter, with the new birth visits completed within 14 days reporting at 96.2% for quarter 2, a decrease from the 98.1% reported in the first quarter. Similarly an increase in the 8 week reviews completed, from 98.3% in quarter 1 to 97.9% in the second quarter this year.

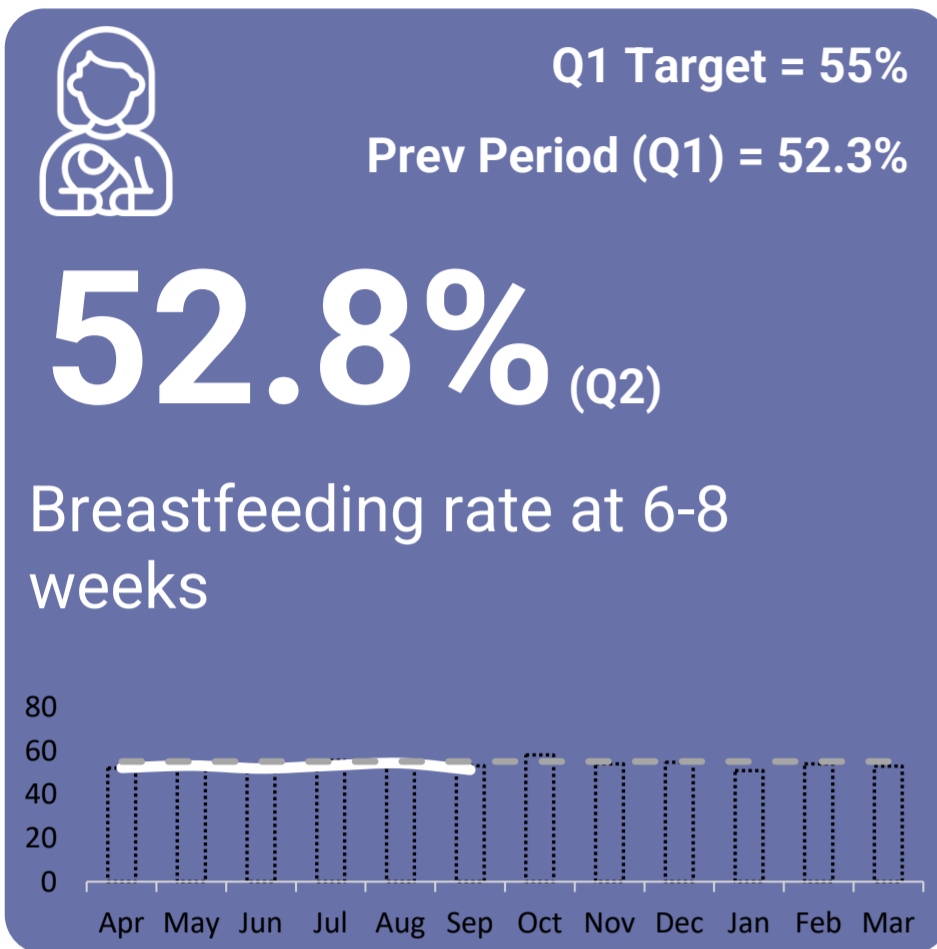
Both of these indicators perform well in comparison to national averages of 88% for 14 day visits and 80.2% for the 8 week visits and are above our local target of 90% for each indicator.

These two metrics are in place to monitor the progress of boosters for the Covid19 vaccination programme. The Booster is eligible to those who have received their 1<sup>st</sup> and 2<sup>nd</sup> doses and are aged over 5 years.

The first of the above metrics monitors the take-up of the 1<sup>st</sup> booster, sometimes referred to as the 3<sup>rd</sup> dose, this shows that 60.5% of those aged 5+ have received at least 3 doses of the Covid19 vaccine. The second metric monitors the booster programmes for this year, the 'Spring Booster' (previously referred to as the 2<sup>nd</sup> booster) ended in August and at that time 90.8% of the eligible (those aged over 75) had received this booster. The current programme, the 'Autumn Booster' commenced in September and continues this booster programme for those aged 50+. The first months reporting shows that 20.6% of those aged 50+ have received this booster.

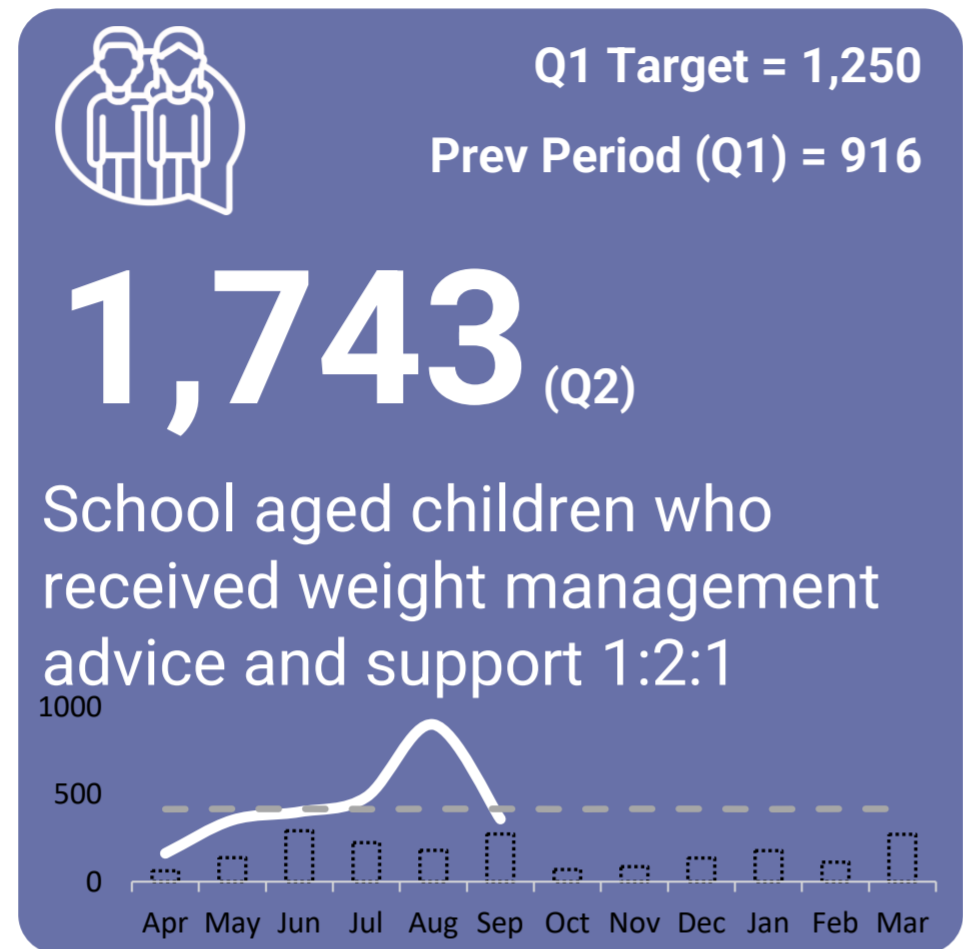
Contributory factors to the performance of both of these measures are the take-up of the 1<sup>st</sup> and 2<sup>nd</sup> doses (i.e. there cannot be more 1<sup>st</sup> boosters than there are 2<sup>nd</sup> dose take-ups) As at the end of September there have been;

1<sup>st</sup> Dose – 78.8% with 458 1<sup>st</sup> doses administered in Q2  
2<sup>nd</sup> Dose – 75.5% with 1,986 2<sup>nd</sup> doses administered in Q2



Increases in breastfeeding are expected to reduce illness in young children, have health benefits for the infant and the mother and result in cost savings to the NHS through reduced hospital admission for the treatment of infection in infants (Quigley et al 2007.) Breast milk provides the ideal nutrition for infants in the first stages of life.

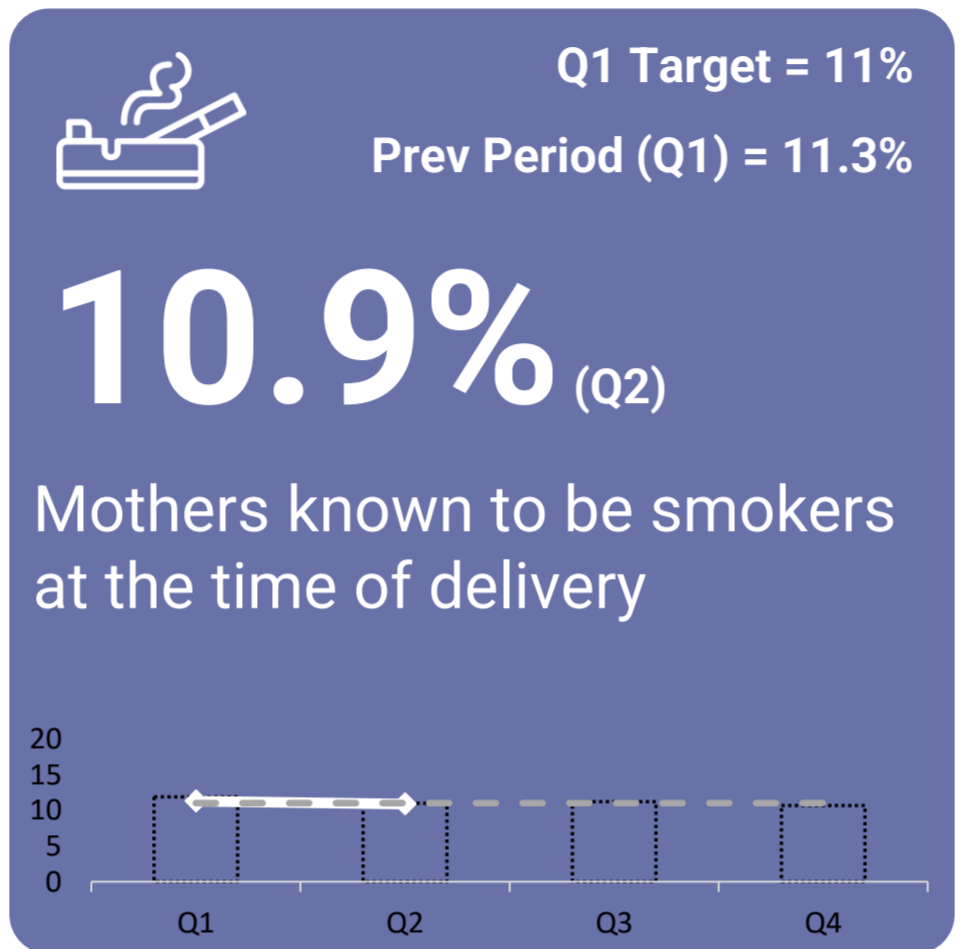
In West Northamptonshire there were 52.8% of babies are breastfed at 6-8 weeks in the second quarter this year, a similar level to the previous period (52.3%). The performance of this measure has been relatively consistent over the past year (52-57%), this compares favourable with the latest national average of 47.6%.



Though not part of the Public Health statutory services, this measure looks at the support that is provided to school age children with weight management advice and support, this is delivered through the Health Child Programme – a series of public health interventions for children and families from birth to age 19.

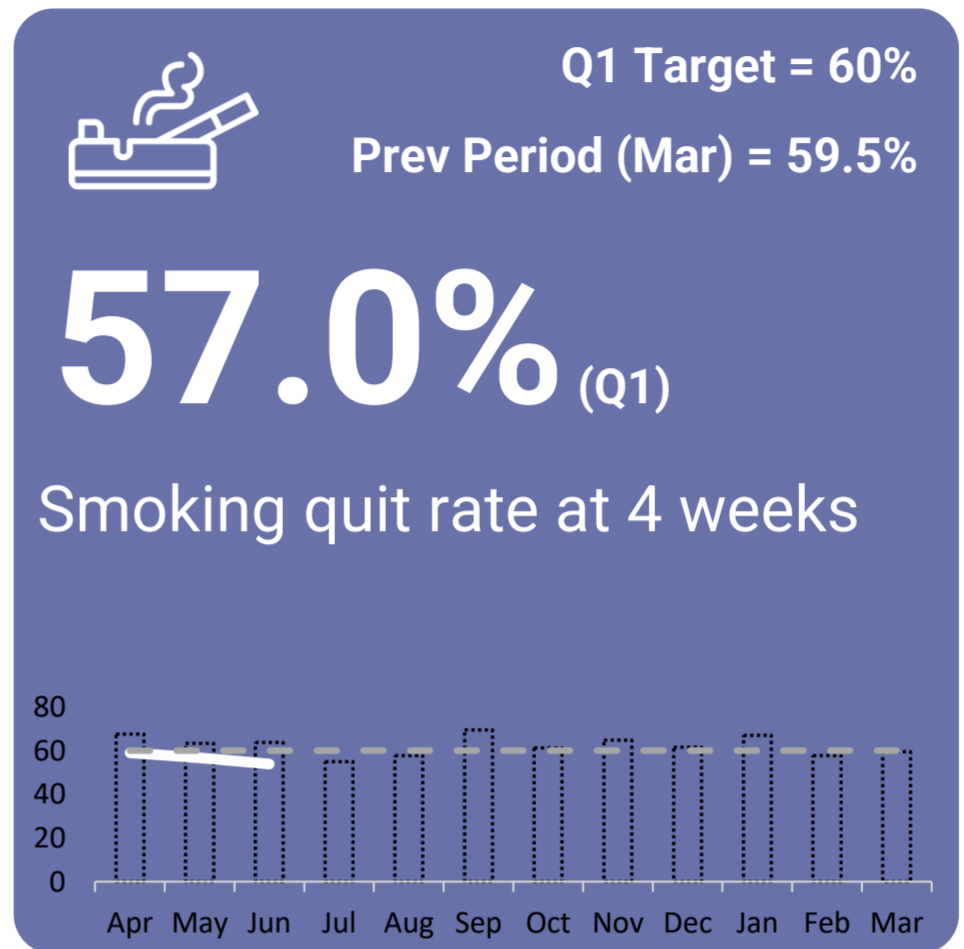
This quarter the service has supported 1,743 school aged children through this service offer which is an improvement on the 916 children supported in the previous quarter and also an increase in comparison with the same period last year when 675 children were supported.

The total number of children supported this year is 2,659.



Smoking in pregnancy has well known detrimental effects for the growth and development of the baby and health of the mother. On average, smokers have more complications during pregnancy and labour, including bleeding during pregnancy, placental abruption and premature rupture of membranes.

Of the births this quarter 10.9% of mothers are known to be smokers at the time of birth, this is 0.4% lower than the number in the previous quarter and compares with a latest (2020-21) regional average of 11.4% and England average of 9.6%.



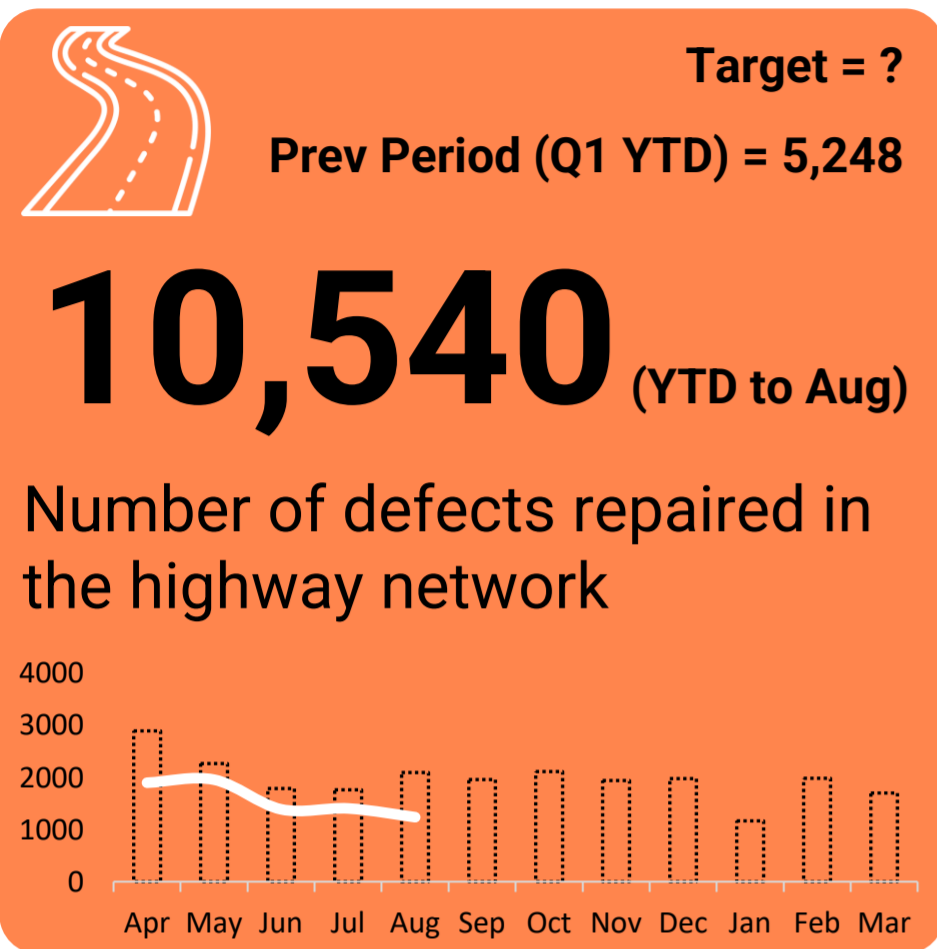
We are not currently able to report the Q2 performance for this indicator. This is due to discrepancies in the figures that occurred after the disaggregation of the system. This is being worked through and the Q2 data will be reported alongside Q3 in the next report.

There is an update to the previous data and the future Q1 outturn is 57% against a target of 60% and in comparison to the national quit rate for 2019-20 of 51% (latest available) West Northamptonshire is above the national average for those that quit smoking through the local service offer at that time.



# Priority 3 – Connected Communities

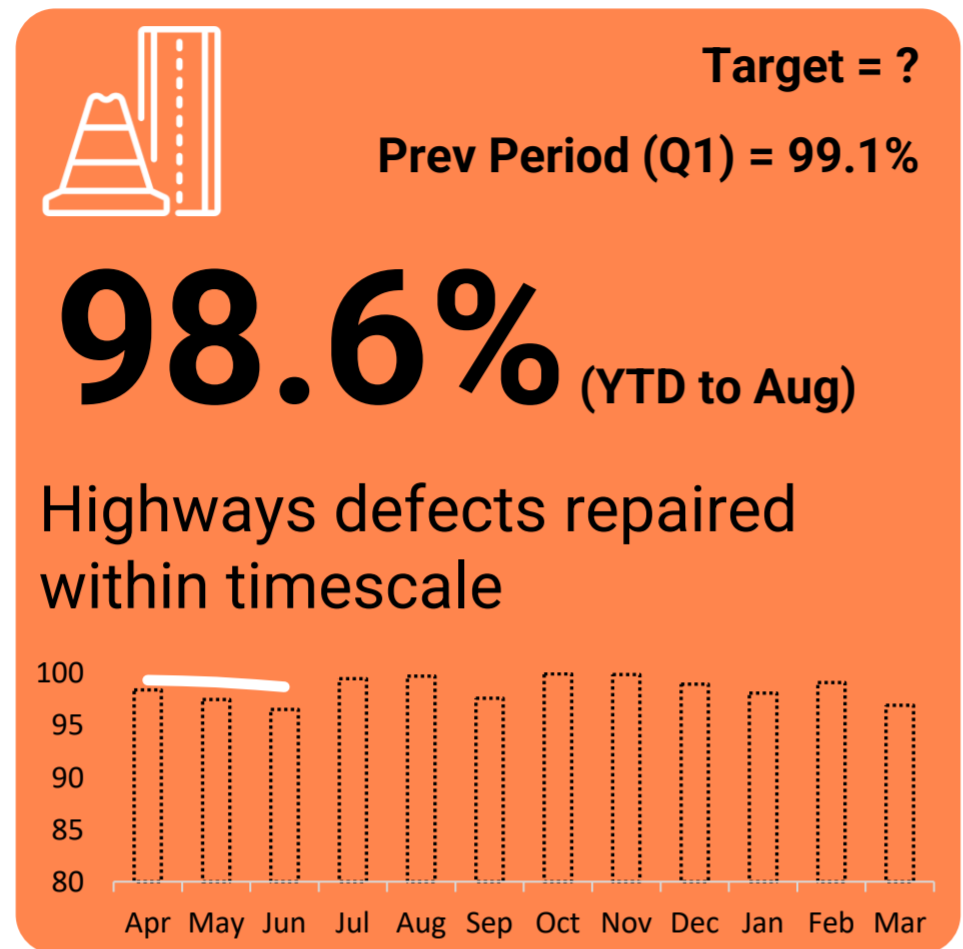
## Transport & Connectivity



Repairs to the highways network are always needed, nationally there is a backlog of outstanding repairs with increasing traffic volume and changeable weather conditions, of which both contribute to the deterioration of the road network.

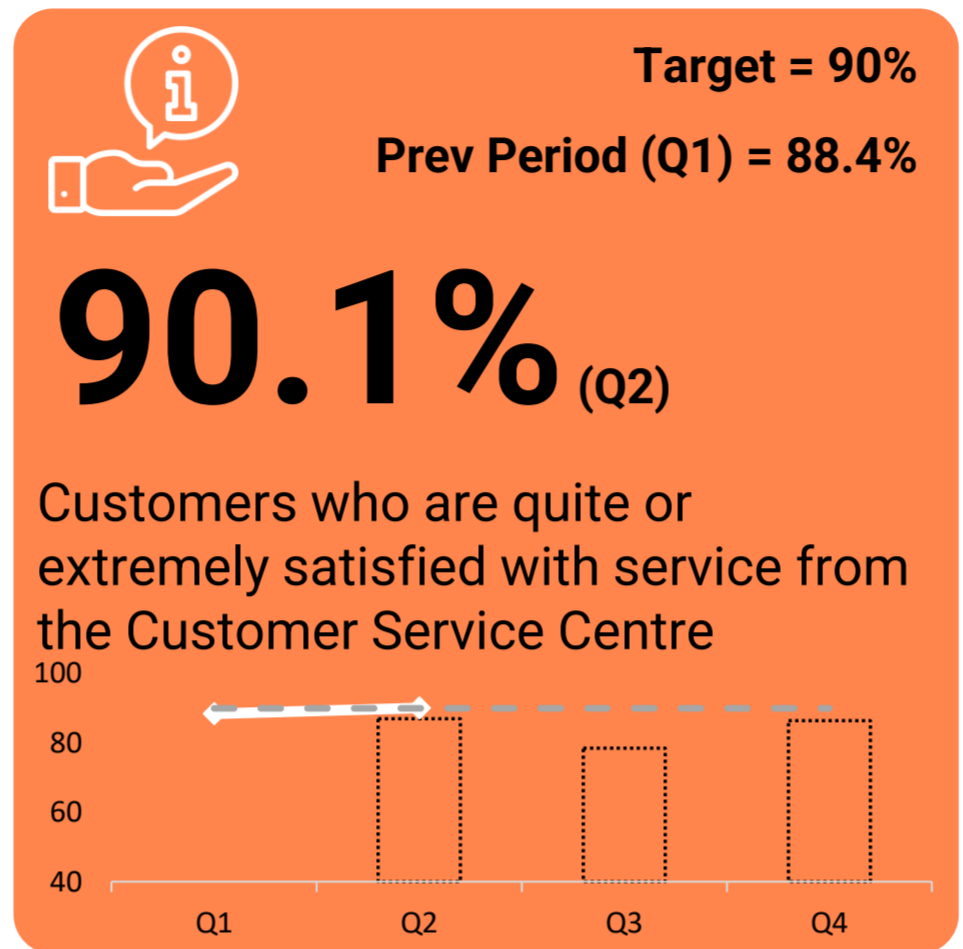
The number of repairs undertaken has seasonal fluctuations due to different programmes of work that highways undertake.

The indicators for the new highways contract that commenced in Sept will be reported for Q3 onwards.



Highways defects are split into 4 separate categories, depending on their severity, each of these categories has a different timescale for repair from the most severe (P1) repairs that are required to be completed within 24hours to the least severe (P4) which have a 28 week repair timeframe. The vast majority of repairs that are completed fall within the P3 (28 days) or P4 (28 Week) categories.

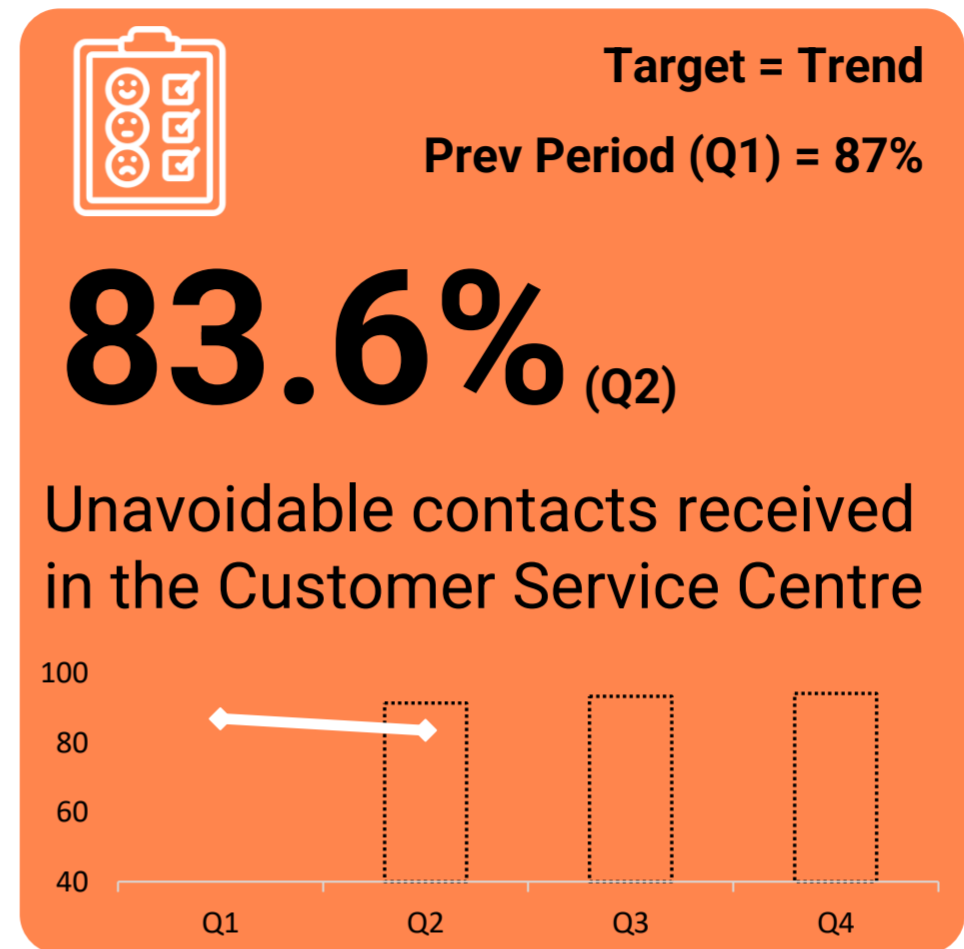
The indicators for the new highways contract that commenced in Sept will be reported for Q3 onwards.



This indicator being reported within the Customer Service Centre that seeks to gather feedback from customers on their satisfaction with the service received.

The second quarter of the year has resulted in a small increase in the satisfaction level in the Customer Service Centre – up 1.7% to 90.1% when compared to the previous quarter, in addition is an improvement on the 87% reported at the same point last year.

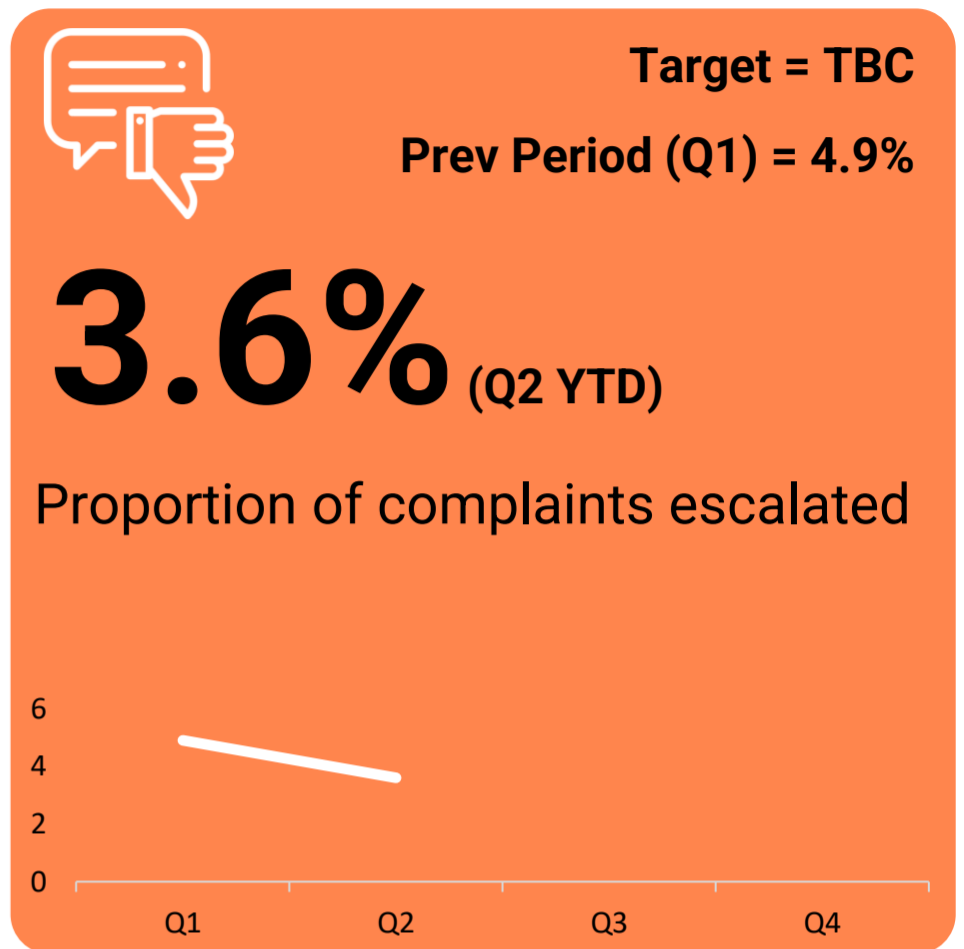
In total 374 customers took part (Q1 was 561) in the survey and of those asked 90.1% of those were either quite or extremely satisfied with the overall service.



This indicator shows the percentage of unavoidable contacts received, essentially first time that contact has been made with the council. The remaining proportion are repeat contacts, for example following-up on a previous request made to the council.

This measure is a trend based measure and we'd like to see that the vast majority of calls into the Customer Service Centre are unavoidable.

The current period shows 83.6% of unavoidable contacts in quarter 2, this is a decrease from the 87% reported in the previous quarter and is lower than the 91.5% reported in the same period last year.

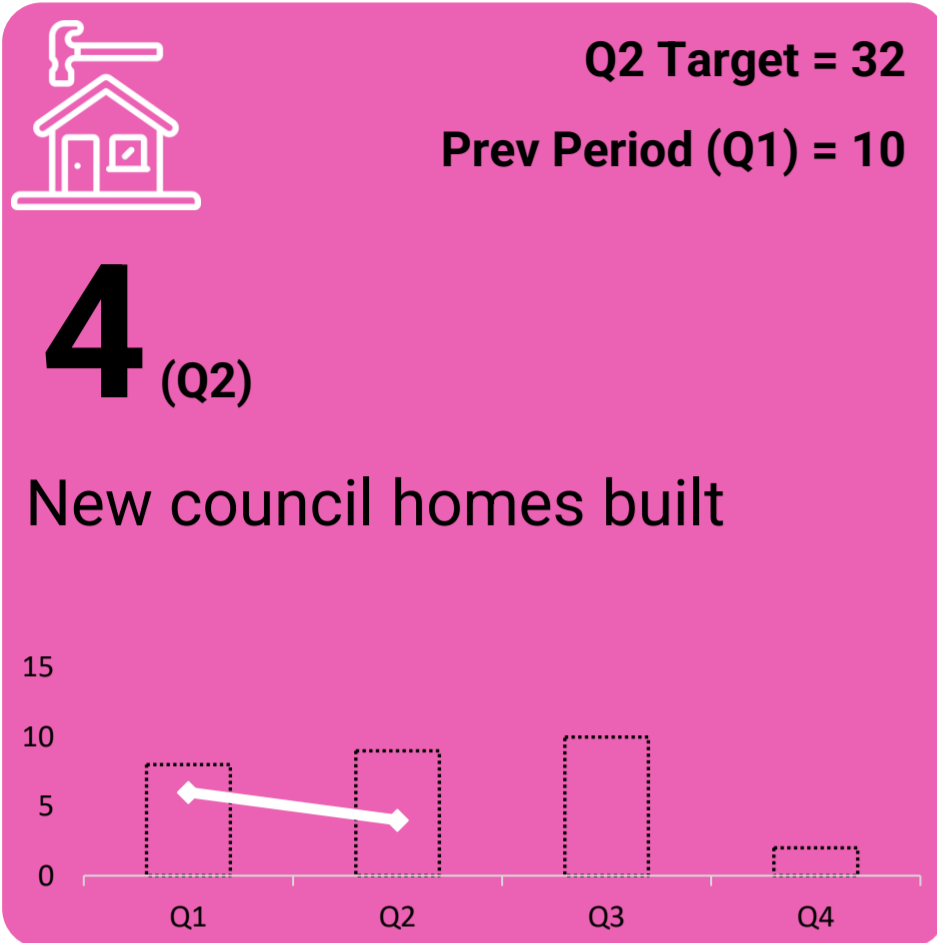


This is a new indicator included in the corporate scorecard and this shows the complaints that have been escalated as a proportion of all complaints received. This data includes all complaints across the council where the complaints has been logged and recorded within the corporate complaints team.

A total of 28 complaints have been escalated in the year to end of September, resulting in 3.6% off all complaints that have been formally escalated through to stage 2 of the complaints process, this is a reduction in the proportion escalated from the end of June.

# Priority 4 – Thriving Villages & Towns

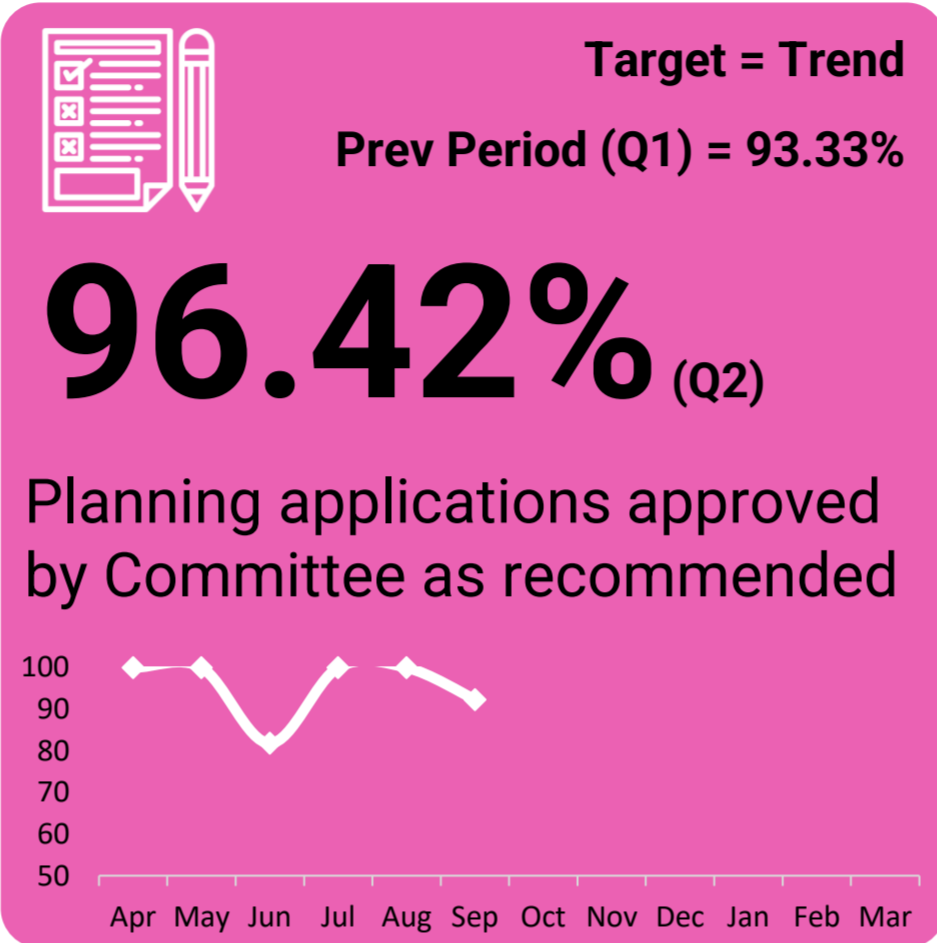
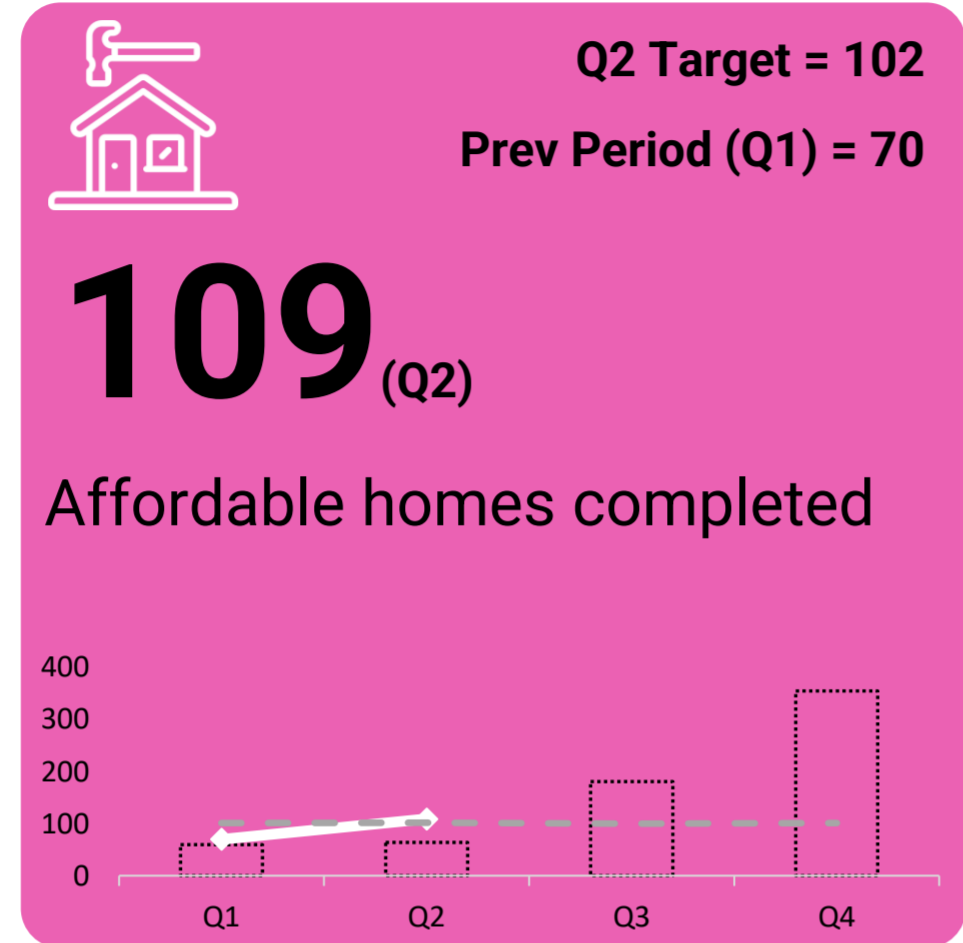
## Place Shaping & Homes



The West Northamptonshire Council corporate plan commits to build 500 council homes over the lifespan of the current corporate plan. Currently in West Northamptonshire only Northamptonshire Partnership Homes (NPH) are the only builder of council homes that is contributing to this indicator.

The most recent quarter has seen 4 council homes completed a decrease from the 6 completed in the previous quarter and taking the completions since the inception of West Northamptonshire Council to 51 homes. A further 60 properties were expected in the quarter but have been delayed until October due to snagging issues.

In addition to council homes we have also seen 109 affordable homes completed in the quarter and a year to date figure of 179 for the 2021-22 year.



This measure monitors the relationship between recommendations that officers make on planning applications versus the decisions that the committee make on those applications. This is a trend based measure and not appropriate to have a target in place.

This quarter has had 27 planning applications that have been considered by the planning committee with 26 of these applications have had the decision made by the committee as recommended by Planning Officers.

### Supporting the Local Visitor Economy

On top of the Explore West Northants App which is showcasing local businesses, attractions and events to residents and visitors, the Economy Team are involved in delivering initiatives and events to generate increased physical footfall and engagement with the local area.

Heritage Open Days in September was a widespread opportunity for local attractions, museums and more to partake in a national initiative to showcase cultural and heritage offerings to the local area. This is an entirely free campaign to raise awareness of the local offer, increase engagement with residents and visitors, but most importantly to celebrate and showcase the vibrant local heritage, history and culture.

The Economy Team also worked with partners, North Northamptonshire Council and Nenescape, to deliver a robust number of events taking place across the River Nene with pro-active marketing to showcase the natural beauty of the area. Unfortunately due to the passing of HRH Queen Elizabeth II, these events were cancelled, but a strong foundation has been established for next year.



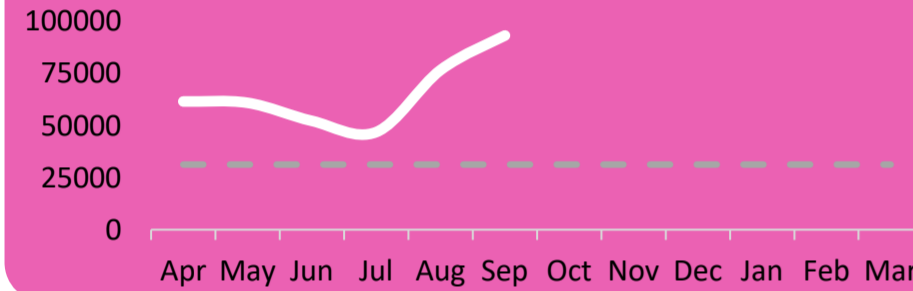
# Priority 4 – Thriving Villages & Towns

## Place Shaping & Homes

Q2 Target = 125,000  
Prev Period (Q1) = 174,893

**216,924** (Q2)

Visitors to Libraries



This measure counts the number of visitors into our libraries across West Northamptonshire.

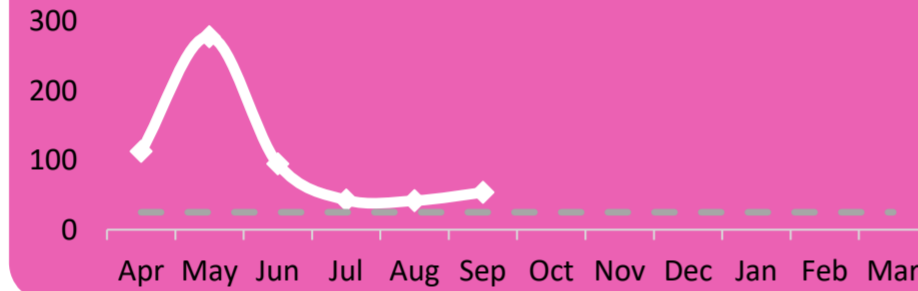
The first quarter of the year has resulted in 216,924 visitors which is above the quarterly target of 125,000 (based upon an annual aspiration for 0.5million visitors this year).

Visitors were highest in August (76,726) and September (93,230) with much of this increased visitors attributed to Summer Reading Challenge. Visits remained high in September despite the return to schools.

Q2 Target = 75  
Prev Period (Q1) = 486

**139** (Q2)

People resettled



West Northamptonshire Council have been supporting people from the Ukraine and Afghan countries via hotel accommodation and also placing in households who are able to support. here have been 139 people resettled in the second quarter of the current year (104 Ukrainians and 35 Afghans), taking the total this year to 625.

The council is carrying out, on behalf of the government a number of activities under these schemes, including

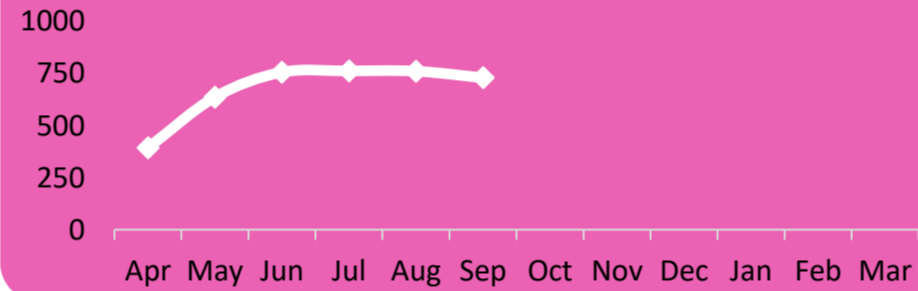
- Assessing the host properties
- Carrying out Disclosure and Barring Service (DBS) checks on hosts – enhanced checks will be required for homes which will be hosting children or vulnerable adults
- Providing immediate financial assistance, potentially until access to benefits and work entitlement is arranged
- Continuing to support the household over the first 12 months and help with access to services and integration into UK systems and processes

In addition to providing accommodation we are also providing ongoing wrap-around support 475 Ukrainians across West Northants and 255 Afghans currently placed in bridging accommodation since these two schemes commenced.

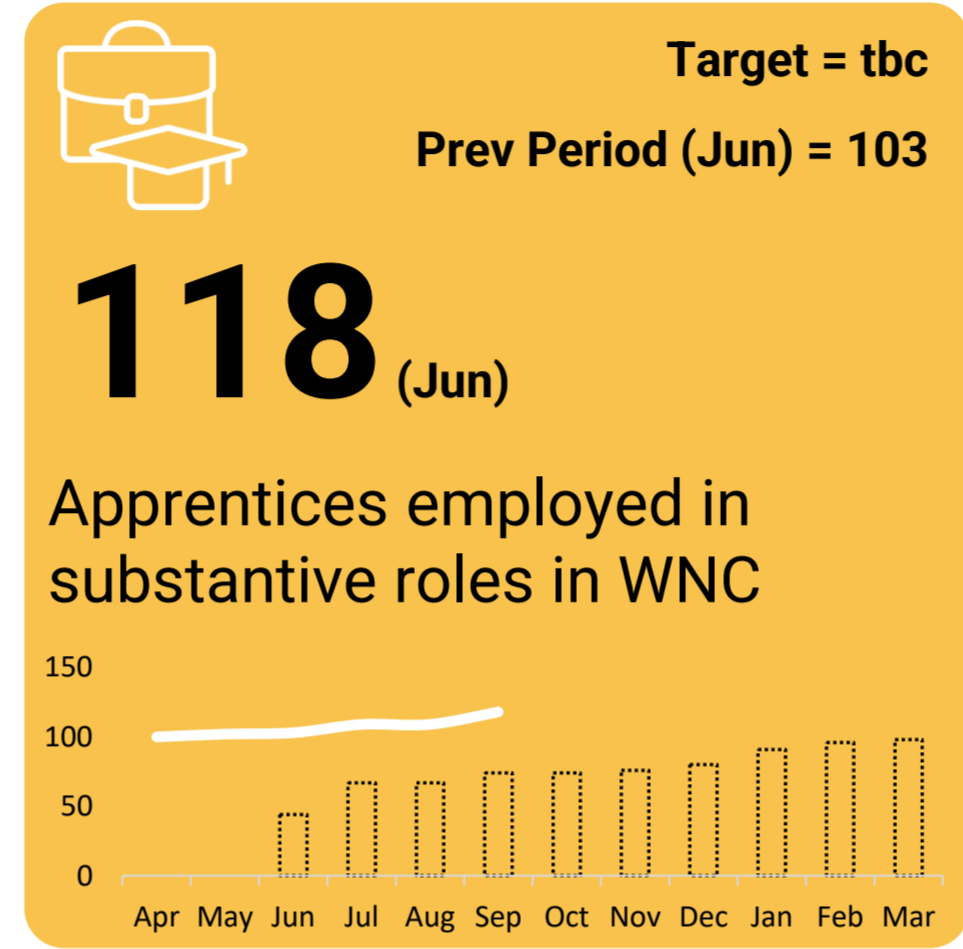
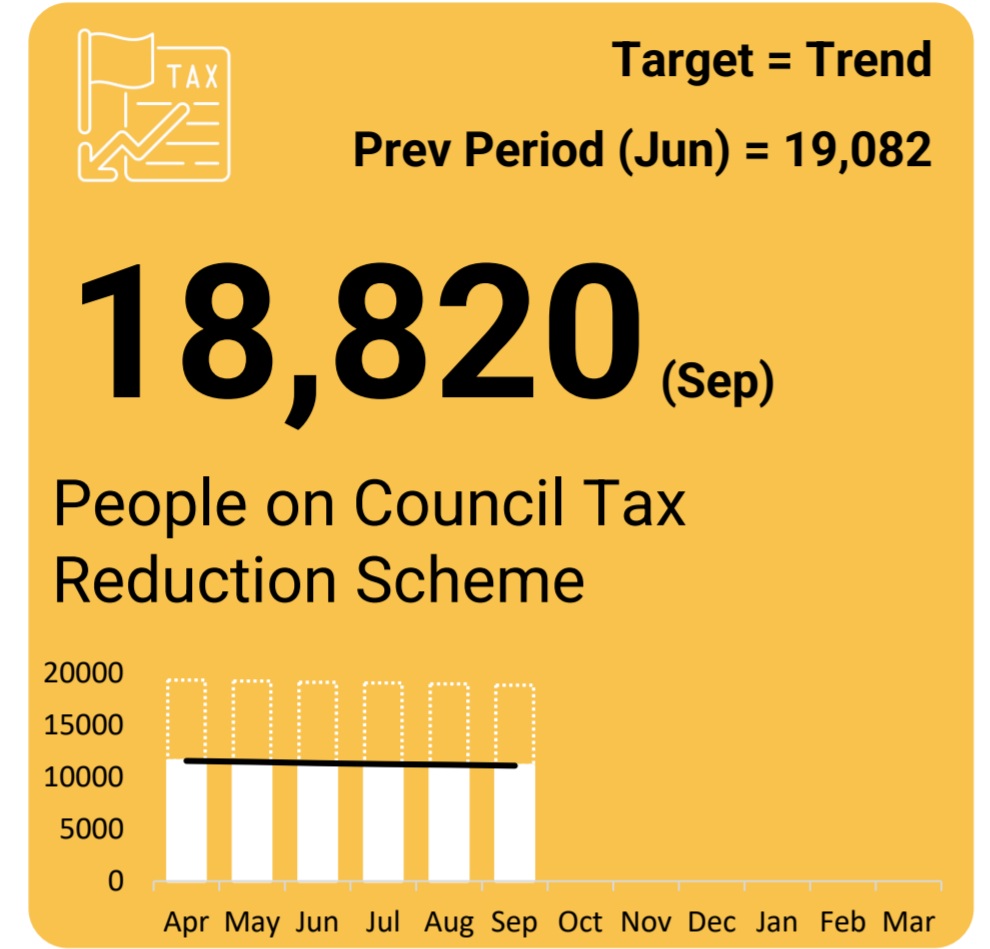
Prev Period (Jun) = 757

**730** (Total at Sept\*22)

People currently supported with wrap around care



# Priority 5 – Economic Development Growth & Prosperity



This metric covers two sites, the Northampton Museum & Art Gallery and the Abington Park Museum.

August was our busiest month, with the 'Star Wars' and 'Tiger that Came to Tea' exhibitions continuing to attract good audiences. Abington Park Museum hosted its annual Heritage Fete, which generated a large number of visitors.

Both sites saw a drop in projected visitors during September, being 31% under target for the month. This was due to the cumulative effect of the Queens passing decreasing numbers and changeover of both the temporary exhibition gallery and the art gallery during the first weeks of September.

**Chart Key:**

Working Age (solid bar) | Pensioners (dotted bar)

Each Local Authority is required to agree a Council Tax Reduction Scheme each year. The scheme applies only to working age claimants as the government provides a prescribed scheme for those of pension age. As the scheme is a local one there is a financial impact to the authority and moving forward, we plan to report on the number of both working age and pension claims to enable us to forecast any possible impact.

As of 30 Sept 2022 the number of LCTRS working age claimants was 11,080 which is a decrease from 11,316 at the end of June 2022. There are currently 7,740 pensioner claims and again this figure has reduced from the end of June (7,766). The reductions may be due in part to the peak in caseload figures we saw during the pandemic as we now move out of Covid.

The government introduced a number of changes to encourage employers to offer more apprenticeship opportunities to both their current employees and to new staff joining their organisations.

The council currently supports a variety of different apprenticeship schemes in order to offer opportunity and development to new and existing members of staff. At the end of September West Northamptonshire Council had 118 apprentices employed in substantive roles.

In addition to this there have been 2,050 new apprenticeship starts since April 2022 and 630 people have completed their apprenticeship

## Rural England Prosperity Fund

West Northamptonshire has been allocated £1.3m of rural funding to develop “pride in place”, focusing on two priorities: Communities & Place and Supporting Local Business. This fund is a capital top-up of the UK Shared Prosperity Fund (UKSPF) and requires local authorities to develop an addendum to the UKSPF Investment Plan outlining which interventions have the greatest need and will have the greatest impact within eligible rural areas.

The Economy Team will mirror their approach to the UKSPF and re-engage with local stakeholders, partners and community groups, including MPs and Councillors. Once a robust database has been developed, alongside the results of existing policies, strategies and the WNC Big Conversation and the input of the consultation, an addendum will be developed and submitted by the deadline of 30 November 2022. The first-year funding is expected to be paid in April 2023 ending alongside UKSPF in March 2025.

## UK Shared Prosperity Fund (UKSPF)

An Investment Plan has been submitted to the Department for Levelling Up, Housing and Communities on 1 August to draw down the £5.4m allocation. This included funding split between the three investment priorities as follows:

- Communities and place: 27 per cent = £1,467,082
- Supporting local business: 40 per cent = £2,159,532
- People and skills: 33 per cent = £1,799,610

A partnership forum of external stakeholders has been established to review and input into how each of the chosen interventions are delivered. Once approval of the investment plan has been received, any interventions to be delivered by external organisations will be tendered through a procurement process.

## Supporting West Northamptonshire Businesses

The Economy Team submitted an application to the inaugural FSB Local Government Awards and were named regional champions of the All-Round Small Business Friendly Award category. This award was to recognise the ongoing support delivered by the Economy Team throughout the Covid-19 pandemic which included business support, widespread marketing campaigns and the development of the e-commerce/tourism app, Explore West Northants.

The Team showcased the wide range of free business support at the Northants Chamber Expo in September, promoting West Northamptonshire as the best place to do business. The finalists of the Northants Business Awards were announced at the expo, for which we have sponsored the “West Northants Business of the Year” category. Businesses were eager to find out about upcoming funding opportunities from the UK Shared Prosperity Fund and to register on the Explore West Northants platform.

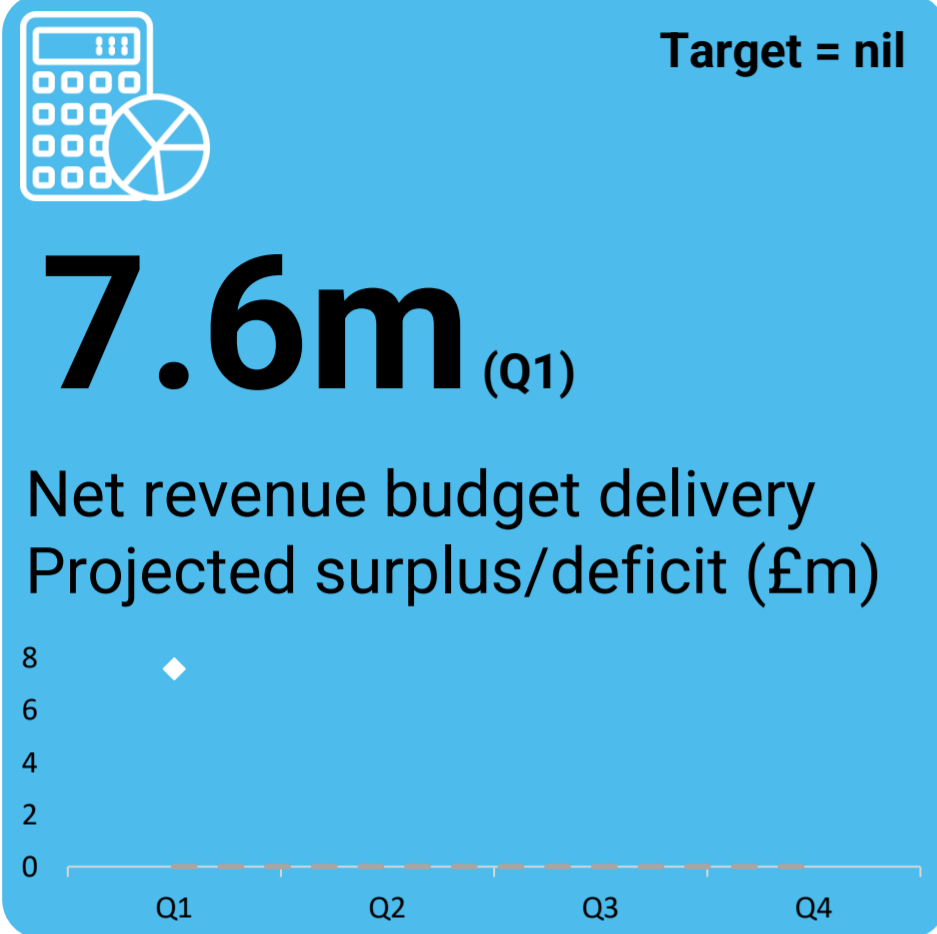
## WNC Employment Support Activities

The Economy Team continue to receive regular enquiries for employment support from residents across all of West Northamptonshire, promoting the offer in every local library with literature and a banner on display.

In partnership with the Department for Working Pensions, the Economy Team ran a refugee employment support event to provide dedicated support to those from other countries, including Afghanistan and Ukraine. Translators were on hand along with a variety of partners at Northampton Central Library and the Economy Team were able to connect many people with help to allow them to access local, sustainable employment.

The Team continue to work with local employers to raise awareness of their employment opportunities so that they utilise the local labour market and residents secure local employment. Recent employers that have worked with the Economy Team to fill vacancies include Silverstone Park, the NHS, Whittlebury Hall, Hilton hotels and more.

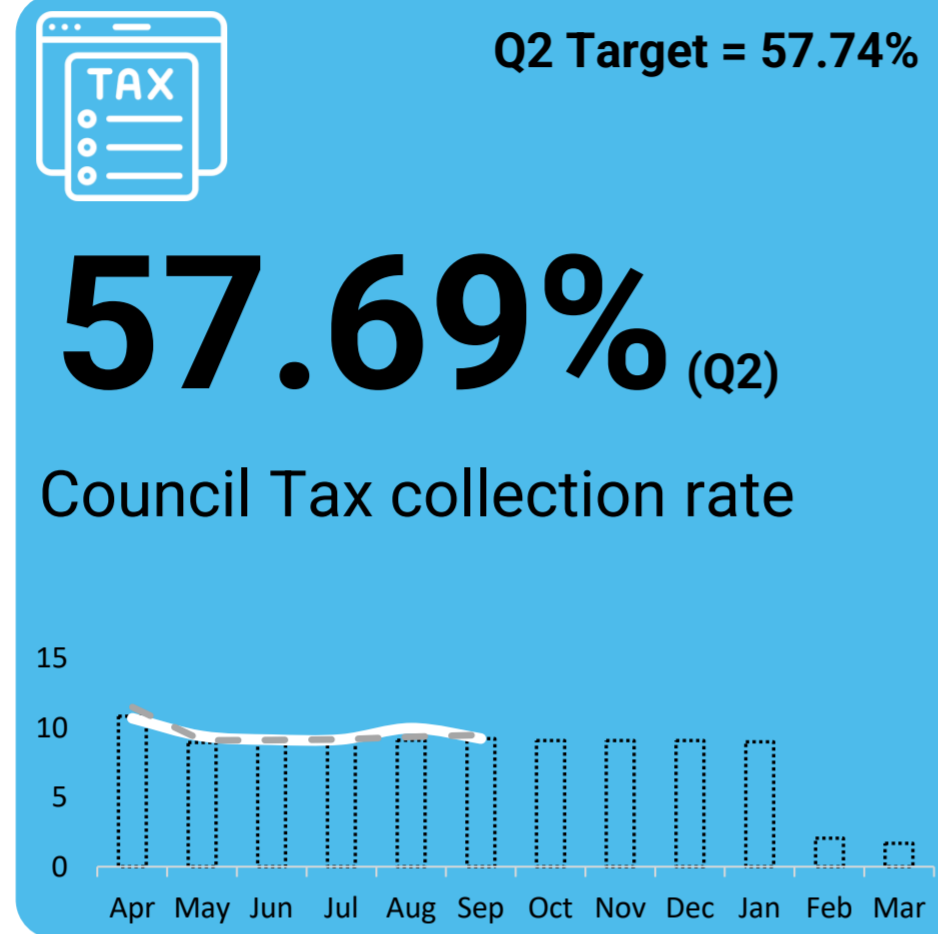




The forecast outturn position for 2022-23 quarter one is an overspend of £7.6m.

Full details of the current position on the councils budget can be found in the Revenue Monitoring report, this outlines the main reasons for the pressures and how the council is going about addressing the gap. The Q1 revenue monitoring report was presented to Cabinet on the 23<sup>rd</sup> September 2022.

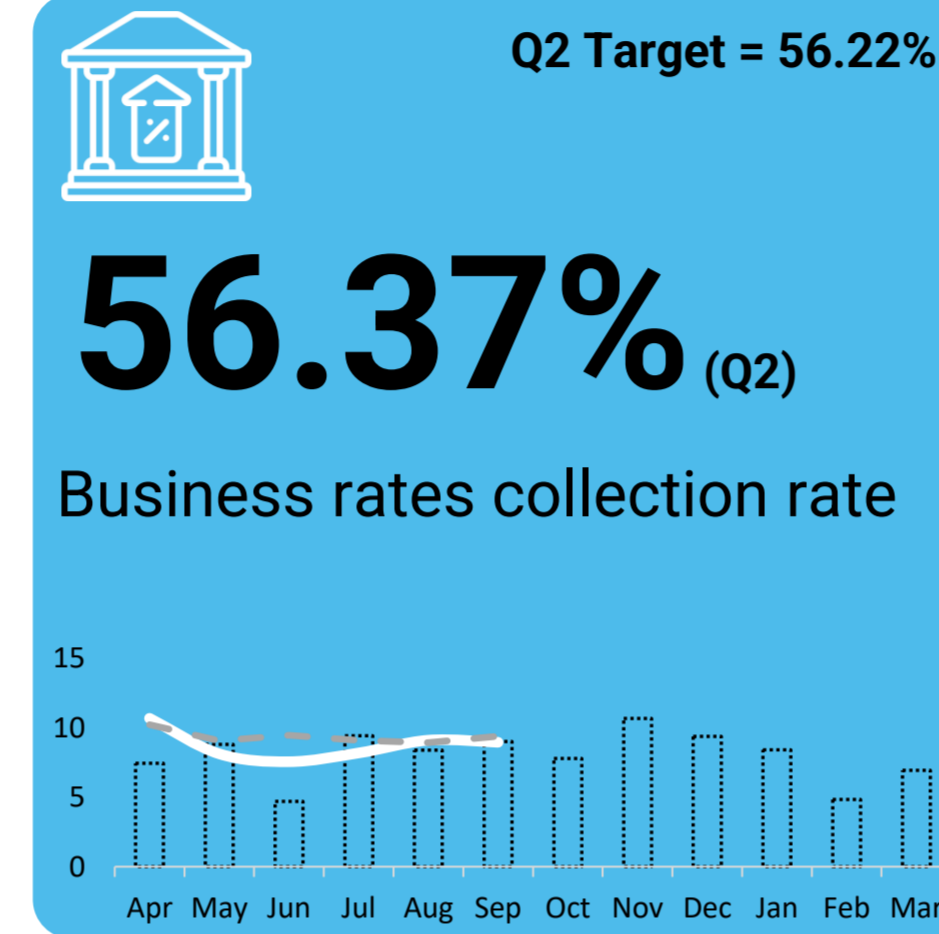
The quarter 2 position for this indicator will be included as part of the revenue outturn update being provided to Cabinet on 20<sup>th</sup> December 2022 and is therefore not available to be included in this paper.



Collection rates continue to be very strong despite the current challenges from the cost-of-living crisis with a collection rate of 57.69% against the profiled monthly target of 57.74%. This is 0.05% below target which equates to £142,122.22.

The collection rate, when compared to the same period last year has improved, up from 56.46% reported at the end of September 2021.

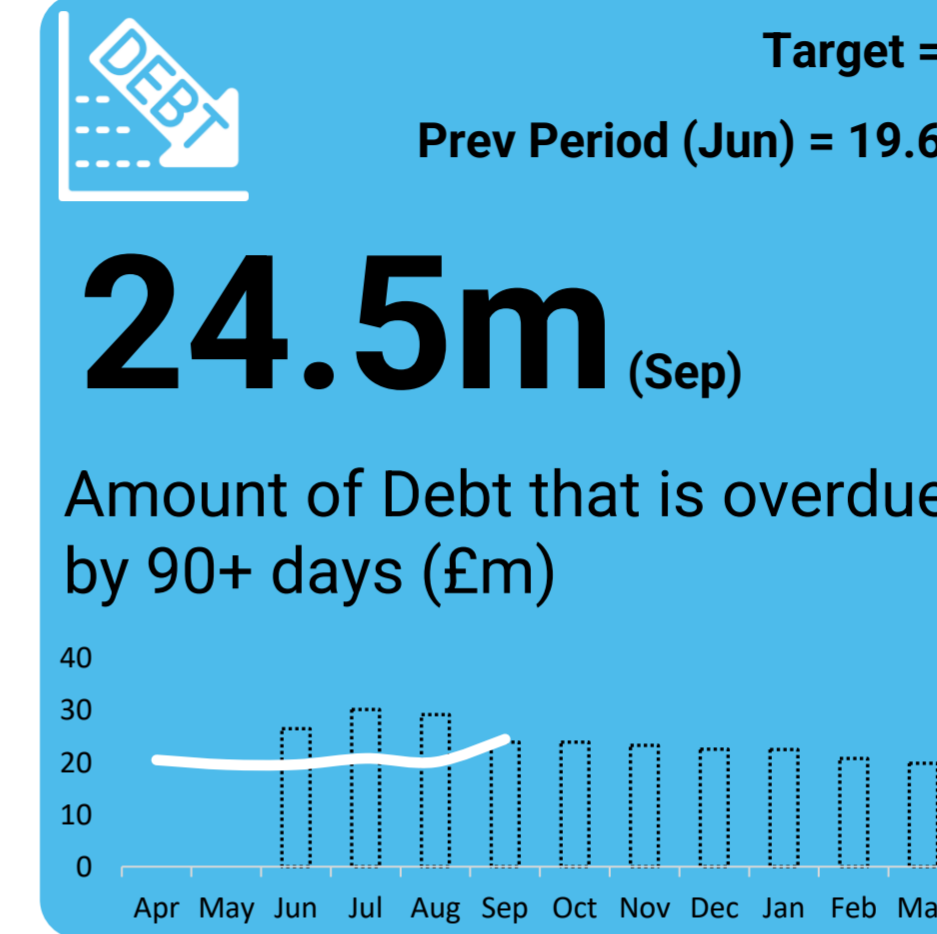
We are continuing to take a pro-active approach to collection and are working with the Magistrates Courts to increase the recovery action we are able to take post Covid.



Performance on collection of business rates is excellent at 56.37% against a target of 56.22% at the end of September 2022.

This equates to £300k in monetary terms. This is an excellent performance and the team have consistently performed above target across the year to date, collecting a total of £104.2m of business rates.

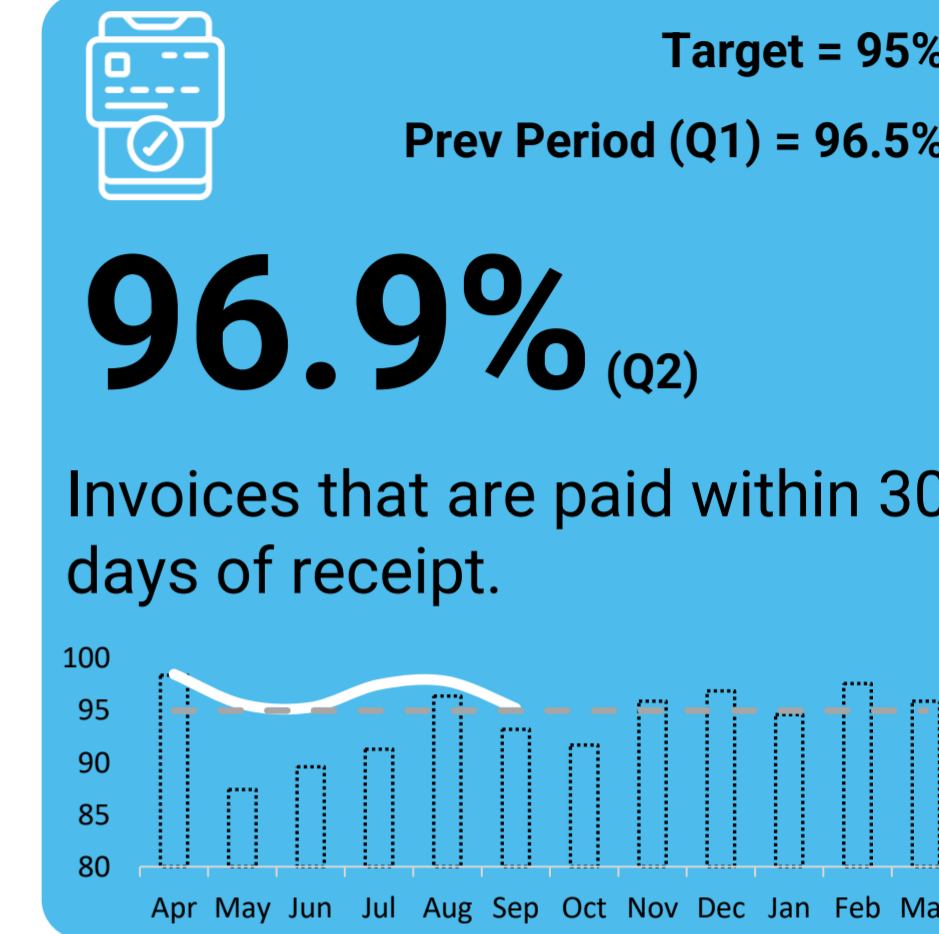
At the same point last year 47.84% of business rate debt had been collected, demonstrating the improvement in the team in collecting debt.



There has been an increase in the aged debt (90+ days) over the past year with the latest performance showing that £24.5m of debt owed to the authority is overdue by at least 90 days.

This represents an increase from the £19.6m reported at the end of June. To provide context against previous year, end the end of Sept 2021 the aged debt outstanding stood at £23.9m, a lower position to the figure reported above.

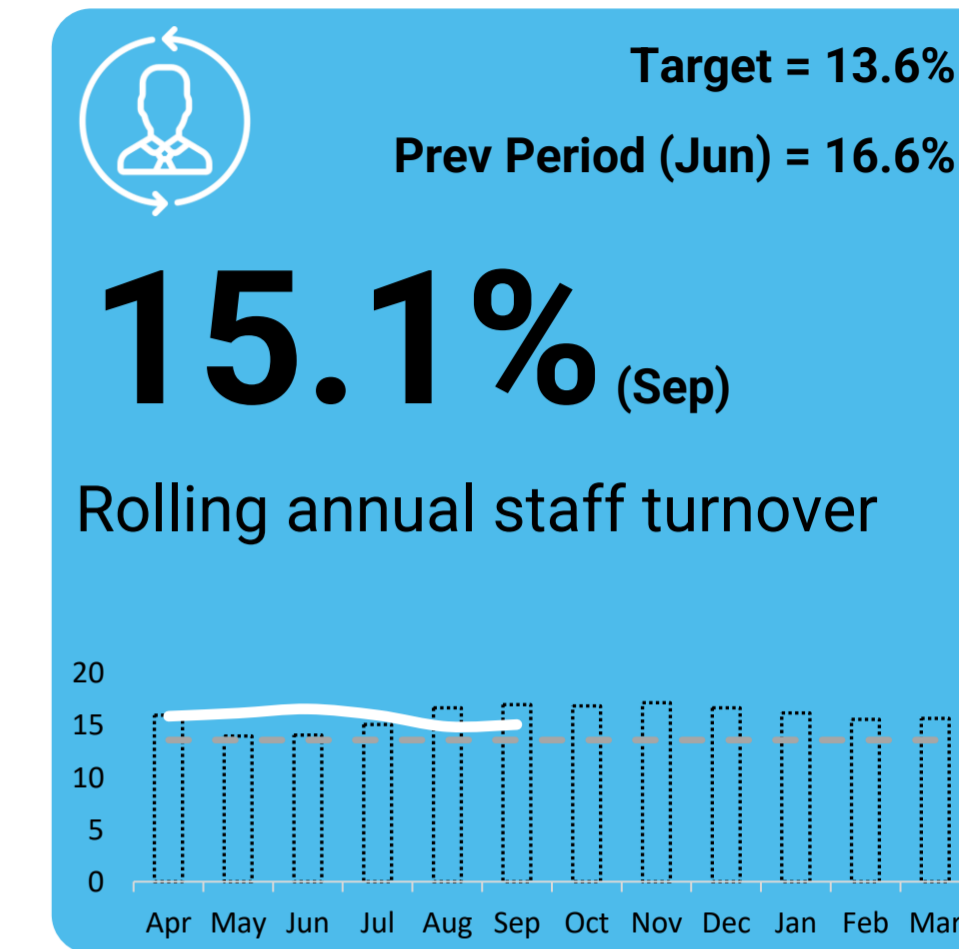
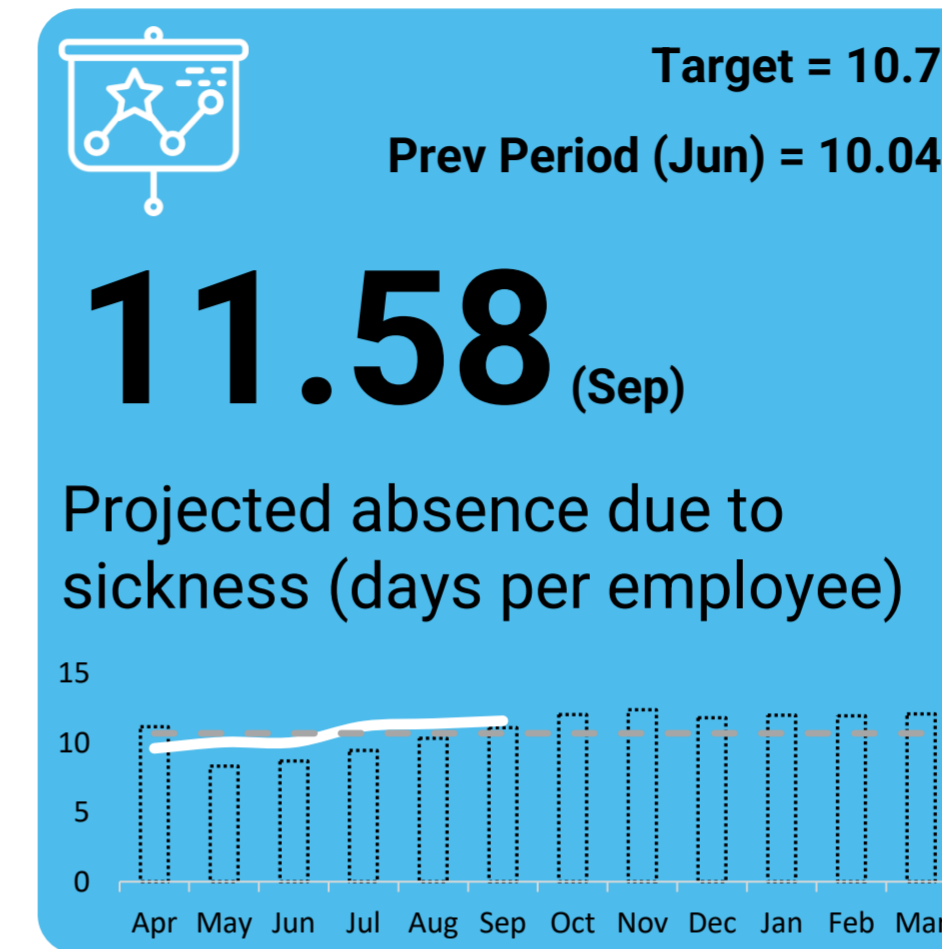
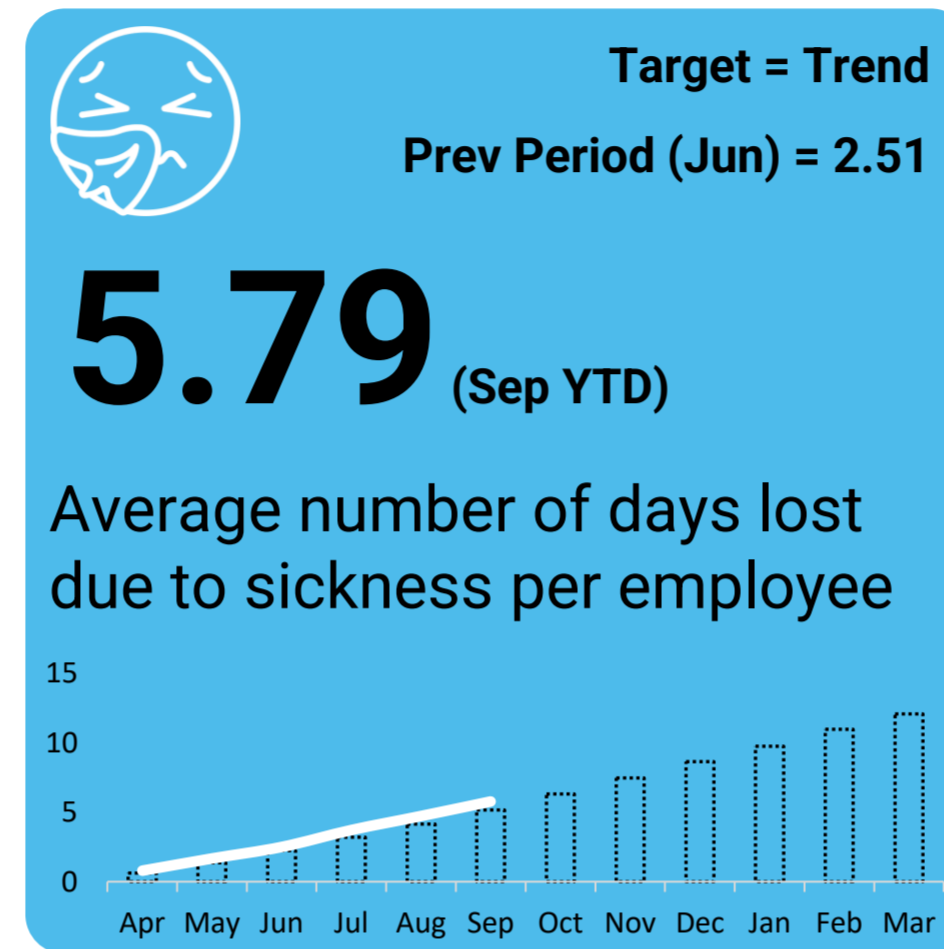
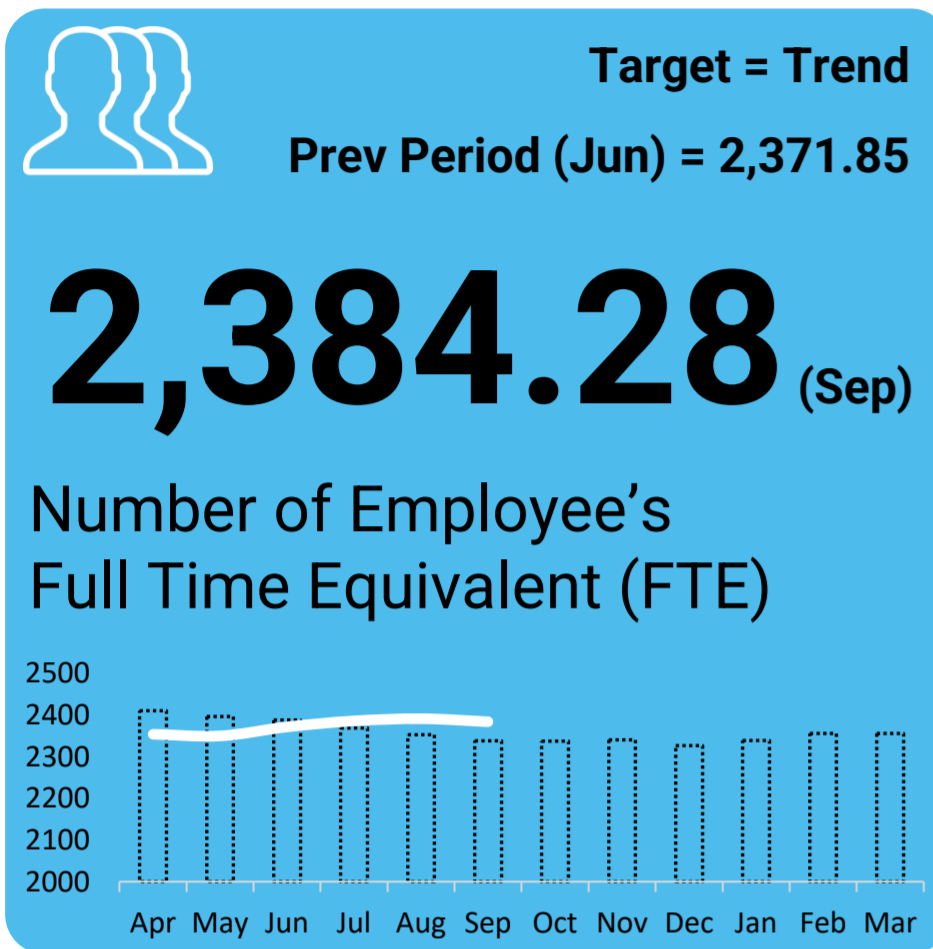
Invoices raised in April/ May (which would hit 90+ days in Q2) were significantly higher than the average across the year (£62.5m vs £31m average) which has contributed to the increase this year.



5,768 of the 5,954 invoices paid during Q2 were processed within 30 days resulting in an outturn of 96.9% for the quarter, this is above the target of 95%.

The performance this quarter compares favourable to the same period last year in which 93.5% of invoices were paid within 30 days of receipt.

Performance has generally improved since the turn of the year as staff are now more used to a new system in which to raise Purchase Orders and pay invoices. This is evident with 8 of the 9 months this calendar year exceeding target.



These two indicators provide detail on the number of employee's within the council, both individual people (headcount) and the full time equivalent, which for West Northamptonshire Council refers to 37 hours per week.

The current establishment shows 2,663 employee's at the end of September 2022, an increase of 10 when compared to the position reported at the end of June (2,653), there is a similar trend in the number of FTEs with an increase to 2,384.28 at the end of September 2022

Due to the unitary transition and there are no trends available prior to the 1<sup>st</sup> April 2021 this year specifically for West Northamptonshire, this information is now available and we are able to compare those levels showing this quarter with that of 2021, this shows that the headcount and the FTE has increased from the same point last year (2,620 & 2338.15).

These two indicators provide both an actual absence average per month across the year and the second indicator is the projected absence due to sickness by the end of the year, each of these indicators is an average per employee.

Current sickness absence from work continue to be impacted by Covid-19 which will be directly impacting ability to attend work in parts of the organisation, typically those front line services. But also the current working arrangements with office based staff continuing to work from home for at least part of the week is likely to be resulting in less staff absence in parts of the organisation.

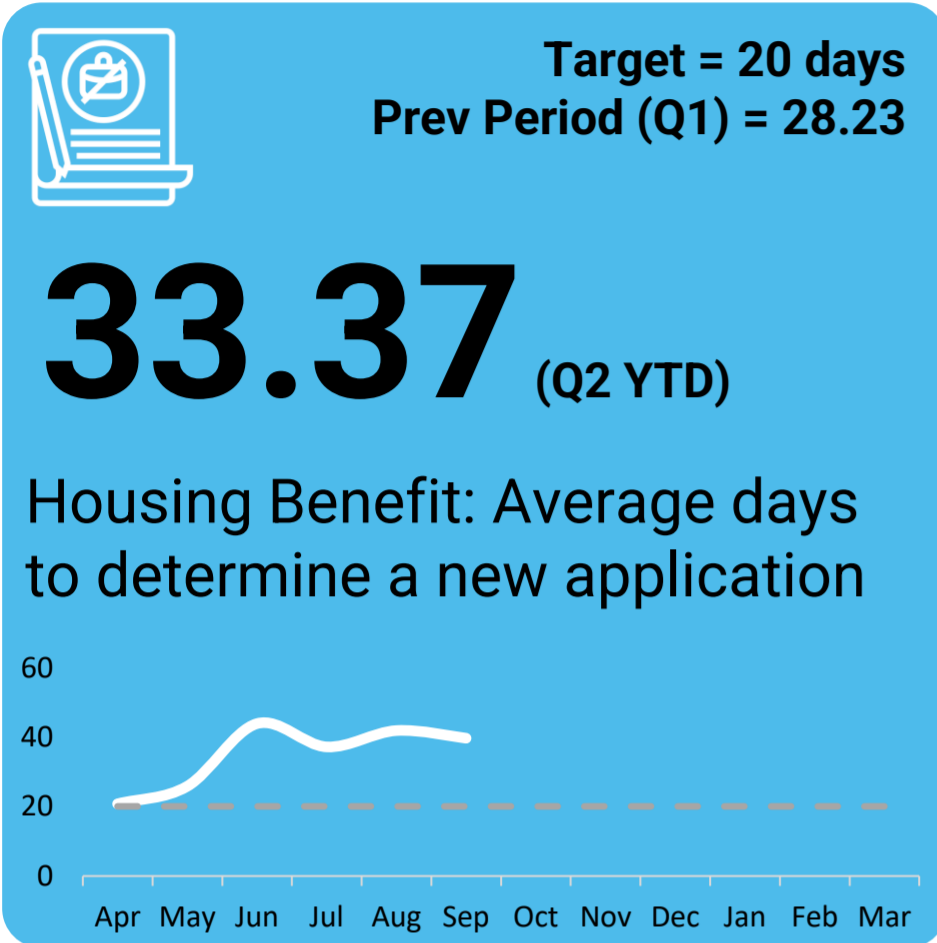
The average number of days lost due to sickness in the first 6 months of the year is 5.79 days per employee, which represents as small rise from the same period last year (5.16). Currently we are projecting that sickness per employee for the full year will be 11.58 days, should this occur it will be a reduction of 0.5 days per employee when compared to last years outturn of 12.08 days absent per employee

It is healthy for any organisation to have a level of staff turnover through staff moving on to other organisation and the council attracting new staff into the organisation.

The annual staff turnover level typically fluctuates between 14% and 18%. The Majority of this turnover is voluntary turnover, part of a normal flow of staff in and out of the organisation.

The latest figures show that in the past 12 months there has been a turnover figure of 15.1%, a decrease of 1.5% from the position at the end of June.

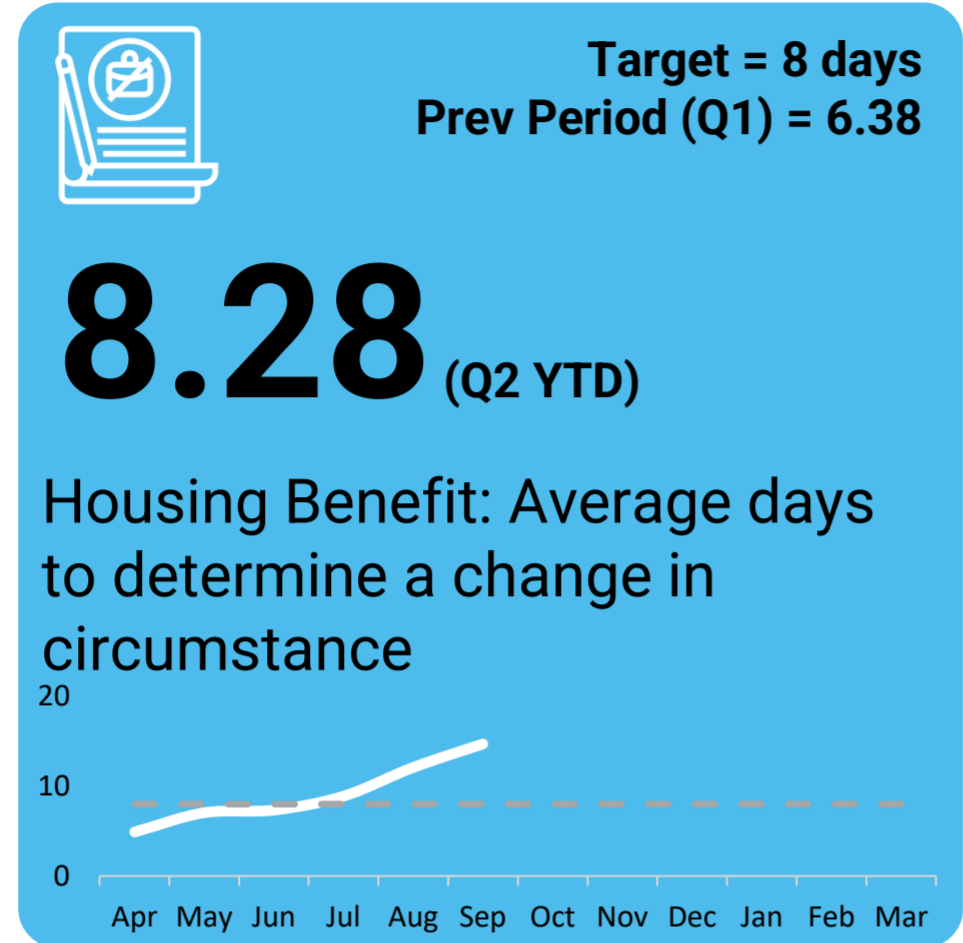




The average time taken to assess new claims for Housing Benefit for the second quarter this year is 39.56 days, an increase from the performance in the first quarter of 28.23 days and resulting in an increase in the year to date position to 33.37 days on average to determine a new application,

There are some challenges for the Benefits team including an increase in the more complex claims across temporary accommodation.

A new plan has just been launched to help to improve the current performance and this will be monitored each week.



The average time taken to assess changes in the second quarter this year is 11.85 days, an increase from the 6.38 days on average reported in the first quarter of the year.

As at the end of September the overall year to date average time taken to assess changes was 8.28 days against a target of 8 days.

Whilst slightly out of our target this continues to be a good performance in view of the current workloads.

# Detailed Scorecard Appendix

Corp Ref:	Metric Title	Priority	Lead Directorate	Better to be?	2022-23 Target	Q1	Jul	Aug	Sep	Q2	Q3	Q4	YTD	Stat Neighbour	Regional	National
1.7	Residual waste treated	1. Green & Clean	Place & Economy	Higher	75.0%	95.9%										
1.8	Number of flytips cleared	1. Green & Clean	Place & Economy	Lower	Trend	3,980				4,135			8,115			
1.9	FPNs Issued for Environmental Crime	1. Green & Clean	Place & Economy	Trend	Trend	767	226	197	233	656			1,423			
1.4c	Net trees planted this year	1. Green & Clean	Place & Economy	Higher	no target	44	-16	-19	-25	-60			-16			
1.12	Number of visitors to leisure centres	1. Green & Clean	Communities & Opportunities	Higher	1,562,829	542,576	185,170	196,510	172,577	554,257			1,096,833			
3.5a	Number of charging points - WNC Land	1. Green & Clean	Place & Economy	Higher	no target	31	31	31	31	31			31	-	-	-
3.5b	Number of charging points - WN area	1. Green & Clean	Place & Economy	Higher	-		108								1,842	29,774
3.5c	Charging Points per 100,000 population - WN area	1. Green & Clean	Place & Economy	Higher	-		26.6								37.9	52.7
2.1a	Percentage of all referrals with a decision within 2 working days	2. Improved Life Chances	People	Higher	85%		64%	83%	65%					-	-	-
2.1b	Percentage of referrals with a previous referral within 12 months	2. Improved Life Chances	People	Lower	29.0%		31.0%	26.4%	31.9%				31.1%	20.9%	23.3%	21.3%
2.1c	Percentage of Single Assessments authorised within 45 days	2. Improved Life Chances	People	Higher	85.0%		95.3%	95.2%	95.9%				95.9%	90.7%	92.9%	87.6%
2.1d	Percentage of children that became the subject of a Child Protection Plan for the second or subsequent	2. Improved Life Chances	People	Lower	20.0%		34.1%	23.7%	39.8%				32.0%	20.7%	24.0%	22.1%
2.1e	Percentage of children in care who were placed for adoption within 12 months of an agency decision that	2. Improved Life Chances	People	Higher	72%	100%				89%			93%	73%	-	74%
2.9	Proportion of young people (aged 16-18) who are not in employment, education or training (NEET) or Not	2. Improved Life Chances	People	Lower	5.5%		2.5%	3.2%	4.8%					-	6.2%	5.5%
2.4	Proportion of people using social care who receive self-directed support	2. Improved Life Chances	People	Higher	91.9%	100.0%	100.0%	100.0%	100.0%	100.0%				-	94.0%	92.2%
2.5	Proportion of people that return to their normal place of residence after discharge	2. Improved Life Chances	People	Higher			94.4%	94.1%	94.1%					-	-	-
2.7	Proportion of older people (65+) who were still at home 91 days after discharge from hospital into	2. Improved Life Chances	People	Higher	79.2%	51.7%	70.4%	80.0%	72.2%	73.1%			61.7%	-	82.3%	79.1%
2.6a	New requests for services where route of access was discharge from hospital that had a reablement service	2. Improved Life Chances	People	Higher	29.8%	22.6%	24.2%	26.6%	28.4%	34.2%			28.4%	-	29.8%	34.6%
2.8a	Number of homeless preventions	2. Improved Life Chances	Communities & Opportunities	Higher	400	114	39	31	48	118			232	-	-	-
2.8b	Number of cases where homelessness was successfully relieved	2. Improved Life Chances	Communities & Opportunities	Higher	400	124	38	39	35	112			236	-	-	-
2.17	Net Disabled Facilities Grant Expenditure	2. Improved Life Chances	Communities & Opportunities	Higher	2,558,938	1,406,555	487,132	227,209	159,079	873,420			2,279,975	-	-	-
2.11	Percentage Smoking quit rate at 4 weeks	2. Improved Life Chances	People	Higher	60.0%	57.0%								-	-	51.0%

# Detailed Scorecard Appendix

Corp Ref:	Metric Title	Priority	Lead Directorate	Better to be?	2022-23 Target	Q1	Jul	Aug	Sep	Q2	Q3	Q4	YTD	Stat Neighbour	Regional	National
2.12	Breastfeeding rate at 6-8 weeks	2. Improved Life Chances	People	Higher	55.0%	52.3%	53.1%	54.2%	51.2%	52.8%				-	n/a	47.6%
2.13	Number of school aged children who receive weight management advice and support 1:1	2. Improved Life Chances	People	Higher	5,000	916	485	899	359	1,743			2,659	-	-	-
2.14	Percentage of mothers known to be smokers at the time of delivery	2. Improved Life Chances	People	Lower	11.0%	11.3%				10.9%				-	11.4%	9.6%
2.15a	Infants due a new birth visit that received a new birth visit within 14 days of birth	2. Improved Life Chances	People	Higher	90.0%	98.1%	96.1%	95.7%	96.9%	96.2%				-	91.8%	88.0%
2.15b	Infants who received a 6-8 week review by the time they were 8 weeks	2. Improved Life Chances	People	Higher	90.0%	98.3%	98.2%	97.6%	97.8%	97.9%				-	85.8%	80.2%
2.16a	Covid Spring Booster - % of Eligible Population Vaccinated (aged 75+)	2. Improved Life Chances	People	Higher	Trend		90.2%	90.8%					90.8%	-	-	62.3%
2.16b	Covid Autumn Booster - % of Eligible Population Vaccinated (aged 50+)	2. Improved Life Chances	People	Higher	Trend				20.6%				20.6%	-	-	76.2%
3.1	Number of defects repaired in the highway network	3. Connected Communities	Place & Economy	Higher	-	7,894	1,407	1,239		2,646			10,540	-	-	-
3.2	Percentage of defects repaired within timescale (P1-P4)	3. Connected Communities	Place & Economy	Higher			97.37%	98.47%						-	-	-
3.6	Percentage of customers who are quite satisfied and extremely satisfied with the service received from the	3. Connected Communities	Corporate Services	Higher	90.0%	88.4%				90.1%			88.4%	-	-	-
3.7	Percentage of contacts received within Customer Services for the first time (unavoidable contacts)	3. Connected Communities	Corporate Services	Higher	Trend	87.0%	83.5%	86.1%	81.3%	83.6%				-	-	-
3.8	Proportion of complaints escalated	3. Connected Communities	Corporate Services	Lower	TBC	17				28			45	-	-	-
3.9	Proportion of complaints that are upheld	3. Connected Communities	Corporate Services	Lower	Trend									-	-	-
4.1	Number of new council homes built	4. Thriving Villages & Towns	Communities & Opportunities	Higher	126	6				4			10	-	-	-
4.5	Number of affordable homes completed	4. Thriving Villages & Towns	Communities & Opportunities	Higher	404	76				109			185	-	-	-
4.6	Planning applications approved by Committee as recommended	4. Thriving Villages & Towns	Place & Economy	Higher		93.33%	100.00%	100.00%	92.31%	96.42%						
4.2	Number of visitors to libraries	4. Thriving Villages & Towns	Communities & Opportunities	Higher	500,000	175,631	46,968	76,726	93,230	216,924			392,555			
4.7a	Number of people resettled	4. Thriving Villages & Towns	Communities & Opportunities	Higher	300	486	43	42	54	139			625			
4.7b	Number of people currently supported through wrap around care	4. Thriving Villages & Towns	Communities & Opportunities	Higher	300		763	762	730				730			
5.3	Visitors to Museums	5. Economic Development	Communities & Opportunities	Higher	137,000	42,666	11,335	17,738	8,378	37,451			80,117			



# Detailed Scorecard Appendix

Corp Ref:	Metric Title	Priority	Lead Directorate	Better to be?	2022-23 Target	Q1	Jul	Aug	Sep	Q2	Q3	Q4	YTD	Stat Neighbour	Regional	National
5.4a	Total number of people on Council Tax Reduction Scheme	5. Economic Development	Finance	Lower	Trend		19,024	18,935	18,820				18,820			
5.4b	Pensioners on Council Tax Reduction Scheme	5. Economic Development	Finance	Lower	Trend		7,786	7,759	7,740				7,740			
5.4c	Working age people on Council Tax Reduction Scheme	5. Economic Development	Finance	Lower	Trend		11,238	11,176	11,080				11,080			
5.5a	Number of apprentices employed in substantive roles	5. Economic Development	Corporate Services	Higher		103	109	109	118	118			118	-	-	-
5.5b	Number of apprenticeships starts in West Northants	5. Economic Development	Corporate Services	Higher	-	2,050										
6.7a	Number of Employee's - Full Time Equivalent (FTE)	6. Robust Resource Management	Corporate Services	No Tolerance	-		2,386.30	2,391.58	2,384.28				2,384.28	-	-	-
6.7b	Number of Employee's - Headcount	6. Robust Resource Management	Corporate Services	No Tolerance	-		2,666	2,670	2,663				2,663	-	-	-
6.7c	Average number of days lost due to sickness	6. Robust Resource Management	Corporate Services	Lower			3.73	4.74	5.79				5.79	-	-	-
6.7d	Projected sickness	6. Robust Resource Management	Corporate Services	Lower	10.70		11.19	11.38	11.58				11.58	-	-	tbc
6.7e	Rolling Annual Staff Turnover	6. Robust Resource Management	Corporate Services	No Tolerance	1360.0%		16.0%	14.9%	15.1%				15.1%	-	-	tbc
6.1	Net Revenue budget delivery - Projected surplus/ deficit (£m)	6. Robust Resource Management	Finance	Lower	0.0	7.6							7.6	-	-	-
6.2	Council Tax collection rate	6. Robust Resource Management	Finance	Higher	-	29.28%	38.46%	48.45%	57.69%	57.69%			57.69%	-	-	-
6.3	Business Rates collection rate	6. Robust Resource Management	Finance	Higher	-	30.07%	38.28%	47.40%	56.37%	56.37%			56.37%	-	-	-
6.4	Amount of debt owed to the council that is overdue by at least 90 days (£m)	6. Robust Resource Management	Finance	Lower			20.8	20.1	24.5				24.5	-	-	-
6.5	Percentage of invoices that are paid within 30 days of receipt	6. Robust Resource Management	Finance	Higher	95.0%	96.5%	97.5%	97.8%	95.2%	96.9%			96.7%	-	-	-
6.6a	Housing Benefit - time to determine new applications	6. Robust Resource Management	Finance	Lower	20.00	28.23	37.20	41.91	39.70	39.56			33.37			
6.6b	Housing Benefit - time to determine change in circumstances	6. Robust Resource Management	Finance	Lower	8.00	6.38	8.89	12.09	14.71	11.85			8.28			

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# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6 DECEMBER 2022

## CABINET MEMBER RESPONSIBLE FOR ADULT SOCIAL CARE & PUBLIC HEALTH: COUNCILLOR MATT GOLBY

<b>Report Title</b>	<b>Draft Integrated Care Northamptonshire Live Your Best Life Strategy</b>
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<b>Report Author</b>	<b>Katie Brown, Assistant Director Safeguarding &amp; Wellbeing Katie.brown@westnorthants.gov.uk</b>
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### Contributors/Checkers/Approvers

<b>West MO</b>	Catherine Whitehead	28/11/2022
<b>West S151</b>	Martin Henry	22/11/2022
<b>Other Director/SME</b>	Stuart Lackenby	20/11/2022
<b>Communications Lead/Head of Communications</b>	Becky Hutson	20/11/2022

### List of Appendices

#### Appendix A – Draft Integrated Care Northamptonshire Live Your Best Life Strategy

#### 1. Purpose of Report

- 1.1 In July 2022 the system-wide Strategy Development Board adopted the responsibility to produce the draft Integrated Care Northamptonshire (ICN) Strategy. The Strategy Development Board recommend the draft ICN Strategy to the Cabinet

- 1.2 To note the new Draft 10-year Integrated Care Northamptonshire Live Your Best Life Strategy with Cabinet Members for review, endorsement and recommendation to the Integrated Care Partnership (ICP).
- 1.3 For Cabinet to support the further alignment of West Northamptonshire Council's (WNC) Corporate Strategic Plan with that of the ICN Strategy and outcomes framework particularly in relation to how WNC works with partners in Local Area Partnerships.
- 1.4 For Cabinet to agree to receive an annual report on the progress of the ICN strategy and outcomes framework.

## **2. Executive Summary**

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- 2.1 On 29<sup>th</sup> July 2022 the Department of Health and Social Care (DHSC) published statutory guidance on the preparation of integrated care strategies: *Guidance for Integrated Care Partnerships on Integrated Care Strategies*. The guidance states that Integrated Care Partnerships will be expected to publish an initial interim strategy by December 2022 which will align and influence Integrated Care Board (ICB) five-year joint forward plans and local health and wellbeing strategies in April 2023.
- 2.2 The high-level draft ICN Strategy is the initial interim part one of the local strategy development work which will continue to iterate throughout 2023.
- 2.3 The draft ICN Strategy provides details of the following:
  - 2.3.1 Introduction to the draft ICN Strategy
  - 2.3.2 Identification of the system partners committed to the delivery of the ambitions and outcomes included in the draft ICN Strategy
  - 2.3.3 Shared vision, ambitions and outcomes underpinned by the Outcomes Framework, Community Engagement Framework and the ICN Operating Model
  - 2.3.4 Case for change
  - 2.3.5 What we plan to do together; where we are now, our approach, what we want to achieve and public feedback (where available at this point) for each of the 10 ambitions
  - 2.3.6 Our delivery approach through the system operating model; System, Place, Localities, Local Area Partnerships and Collaboratives.
- 2.4 Throughout November 2022, the draft ICN Strategy is being taken through the appropriate governance channels in all partner organisations to secure commitment and endorsement.
- 2.5 The Integrated Care Partnership (ICP) is where the ultimate approval will be made and will receive the final version of the ICN Strategy at the meeting on 1<sup>st</sup> December 2022 for review, approval and adoption.

### **3. Recommendations**

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It is recommended that Cabinet:

- 3.1 Review and consider the draft ICN Strategy and endorse the system direction of travel, vision, ambitions and outcomes.
- 3.2 Provide comments and feedback to the Place Director (People Directorate) on fundamental points of difference.
- 3.3 Endorse plans to build upon the West Northants Health & Wellbeing Strategy and ensure alignment with the approved ICN Strategy going forward.
- 3.4 Recommend the adoption of the ICN Strategy to the Integrated Care Partnership on 1<sup>st</sup> December 2022
- 3.5.1 Support the further alignment of the WNC Corporate Strategic Plan with that of the ICN strategy and outcomes framework particularly in relation to how WNC work with partners in Local Area Partnerships
- 3.5.2 Agree to receive an annual report on the progress of the ICN strategy and outcomes framework.

### **4 Reason for Recommendations**

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- 4.5.1 In June 2022 Members agreed the Live Your Best Life ambitions and the new ICN Operating Model which are the fundamental building blocks of the draft ICN Strategy.
- 4.5.2 In July 2022 the systemwide Strategy Development Board (SDB) took on the responsibility to produce the draft ICN Strategy. The members of the SDB include representatives from both West and North Local Authorities, Northamptonshire Healthcare Foundation Trust, University Hospitals Northamptonshire, Integrated Care Board, Voluntary Community and Social Enterprise, General Practice, Pharmacy, Healthwatch, Public Health and supported by communications and engagement colleagues. Given the range of stakeholder involvement in the development of the draft ICN Strategy throughout the production period, all partners should endorse and commit to the 10 ambitions and delivery of their associated outcomes described in the document.
- 4.5.3 The draft ICN Strategy sets out the long-term vision, ambitions, outcomes framework and the ICN Operating Model and how they all interconnect to support successful integrated working.
- 4.5.4 Metrics in the form of a scorecard for each ambition are currently in development and although don't form part of the final ICN Strategy will help inform the delivery plans included in the Health & Wellbeing Strategy and the ICB 5 Year Joint Forward Plan. Measurement and reporting against the agreed metrics will demonstrate whether delivery of the outcomes included in the ICN Strategy are achieving success or whether activities and resources need to be refocused. An annual report will be presented to cabinet to evidence the progress against the strategy and the associated outcomes.

4.5.5 The WNC Corporate Strategy should be further enhanced in its delivery by WNC's commitment to the delivery of the ICN strategy. There are opportunities in relation to WNC services working to the Local Area Partnership (LAP) footprints.

## **5 Report Background**

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5.1 The DHSC statutory guidance requires all Integrated Care Systems (ICSs) to publish an initial interim strategy by December 2022 which will align and influence integrated care board (ICB) five-year joint forward plans and local health and wellbeing strategies in April 2023.

5.2 The draft ICN Strategy has been developed and coproduced through the Strategy Development Board and as a result in partnership with a wide variety of stakeholders. All views have taken into consideration as part of the draft ICN Strategy production process.

5.3.1 The system ambitions and outcomes set out in the draft ICN Strategy are being recommended to all major partners in the NHS and Local Authorities across Northamptonshire. Engagement will continue throughout November to support final approval by the Integrated Care Partnership on 1<sup>st</sup> November 2022.

## **6 Issues and Choices**

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6.3.1 The DHSC statutory guidance requires all ICSs to publish an initial interim strategy by December 2022 which will align and influence the integrated care board (ICB) five-year joint forward plans and local health and wellbeing strategies in April 2023.

6.3.2 The draft ICN Strategy has been developed and coproduced through the Strategy Development Board and as a result in partnership with a wide variety of stakeholders. All views have taken into consideration as part of the draft ICN Strategy production process.

6.3.3 The system ambitions and outcomes set out in the draft ICN Strategy are being recommended to all major partners in the NHS and Local Authorities across Northamptonshire. Engagement will continue throughout November to support final approval by the Integrated Care Partnership on 1<sup>st</sup> November 2022.

## **7 Implications (including financial implications)**

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### **7.1 Resources and Financial**

7.11 There are no direct financial implications as a result of this report but looking ahead clearly the strategy will help the system to prioritise future investment approaches.

### **7.2 Legal**

7.21 There are no legal implications arising from the proposal.

### **7.3 Risk**

7.31 There are no significant risks arising from the proposed recommendations in this report.

### **7.4 Communications & Consultation**

The DHSC guidance published in June 2022 includes a very comprehensive list of stakeholders that are expected to be engaged with. Although some of this work has commenced, the Community Engagement Framework included in the draft ICN Strategy (page 33) sets out the approach that will be taken to ensure engagement and feedback is undertaken throughout 2023. This is being led by the ICP Communication and Engagement group which has been established to develop the ongoing engagement and communication activities relating to the ICN Strategy.

7.42 There is no requirement for statutory consultation on the draft or final ICN Strategy.

### **7.5 Consideration by Overview and Scrutiny**

7.5.1 It is anticipated that the progress of ICN, the strategy and outcomes framework will be part of the People Overview and Scrutiny work programme

### **7.6 Climate Impact**

7.6.1 There is no climate/environmental impact.

### **7.7 Community Impact**

7.4.1 As set out in the legislation the implementation of ICS and particularly ICPs is to positively impact on the health and wellbeing of local communities.

7.4.2 The approach outlined in the strategy ensures that health inequalities and issues relevant to local area partnerships are the focus of how services work with local communities to improve outcomes as set out in the outcomes framework .

## **8 Background Papers**

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DHSC Policy paper February 2021: Integration and innovation: working together to improve health and social care for all

8.1.1 DHSC Police paper updated 10 March 2022: Health and Care Bill: Integrated Care Boards and local health and care systems

8.1.2 DHSC Policy paper June 2022: Guidance on the preparation of integrated care strategies: Guidance for integrated care partnerships on integrated care strategies

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# Integrated Care Northamptonshire Strategy Live Your Best Life

A 10 year strategy 2022-2032

**Please Note**

This draft strategy still requires further accessibility checks.

Version control: V4 22/2022



# Contents

<b>Contents</b>	<b>02</b>
<b>Foreword</b>	<b>03</b>
<b>Executive summary</b>	<b>04</b>
<b>Introduction</b>	<b>07</b>
<b>Partners working together</b>	<b>09</b>
<b>Shared vision, aims and ambitions</b>	<b>13</b>
<b>Our case for change</b>	<b>16</b>
<b>What we plan to do together</b>	<b>22</b>
<b>Outcomes Framework</b>	<b>24</b>
<b>Our ten ambitions</b>	<b>25</b>
<b>Community Engagement Framework</b>	<b>35</b>
<b>Our delivery approach</b>	<b>36</b>
<b>Northamptonshire's future</b>	<b>44</b>

# Foreword

## Live Your Best Life

**We are pleased to introduce our Integrated Care Northamptonshire Strategy: Live Your Best Life. This 10-year strategy sets out our plan to help people benefit from equitable opportunities to live their best life, wherever they are and wherever they live in Northamptonshire.**

Our ambition is for residents to 'live their best life' in all aspects: health and wellbeing, education, housing and employment. It sets out a collaborative direction of travel for the people of Northamptonshire to achieve our shared vision and ambitions to deliver better outcomes.

We know the impact partnership working can have and the positive difference it can make for both communities and service delivery. We saw this from the county's response to COVID-19. This strategy aims to continue to build on this work, ensuring joined up working at county-wide and local level.

Having a shared strategy that sets out our direction for the next 10 years can make a positive difference to people's lives. It can bring better outcomes throughout their lifetime; from pregnancy to newborns, to improved education and employment opportunities, to social connection and better access to health and care services.

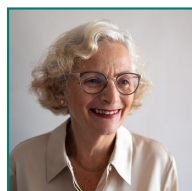
Like many areas, Northamptonshire faces a number of challenges that continue to place pressure on our county's local authorities, health and care services. We face significant demand from our growing older population and working age adults, as well as our children population. These are happening at a time when operating cost pressures are high, with utility costs rising and people feeling the impact of the rising cost of living. It is clear that organisations, and their services, must adapt to ensure that they meet the challenges ahead. We know that through shared working and community involvement, we have the best opportunity to respond to these challenges.

We hope that by reading our strategy, you feel better informed and assured about the work that is being carried out to help everyone live their best life wherever they are and wherever they live in Northamptonshire. As joint signatories we are committed to ensuring that all partner organisations play their full part in realising the ambitions set out in this strategy.

We very much welcome your feedback.



**Councilor Matt Golby**  
Cabinet Member for Adult Social Care and Public Health,  
West Northamptonshire Council



**Naomi Eisenstadt**  
Chair of Northamptonshire Integrated Care Board



**Councilor Helen Harrison**  
Executive Member for Adults, Health and Wellbeing,  
North Northamptonshire Council



# Executive summary

On the 1st July 2022 our new Integrated Care System (ICS) was created across Northamptonshire. Our name is Integrated Care Northamptonshire (ICN) and brings together health, care and wellbeing organisations from across the county to deliver and commission services in partnership, ensuring our communities are involved and at the heart of all we do. Historically, we have been striving to work better together to improve outcomes and reduce inequalities for people. However, now through our long term ICN strategy we have the ideal opportunity to build, expand and deliver our ambitions over the next five to ten years. You will see the wide range of organisations, structures and partners who are involved and committed to working together to make a real difference to people.

This strategy focuses on improving a set of outcomes for the health, care and wellbeing of local people which will realise these ambitions. These are identified because:

- It is these outcomes that really matter to people
- It is these outcomes that we are collectively responsible for
- It is these outcomes that we can only change by aligning our ambitions
- It is these outcomes that we can only change by aligning our resources and how we do this together.

**We are committed to working together through our shared vision: We want to work better together in 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 have a set of shared aims that will:**

- Improve the health and wellbeing of the population
- Reduce inequalities in health and wellbeing outcomes
- Ensure value for money
- Contribute to the economic and social wellbeing of Northamptonshire

**Our shared vision and aims will be delivered through our ambitions which are underpinned by:**

**The Outcomes Framework** where the outcomes are bold, ambitious and exciting and provide a focus for the forthcoming years.

**The Community Engagement Framework** is for everyone – it is our call to action for staff, practitioners, people and communities across Northamptonshire to work together to deliver the changes we have all said we want to see.

**The Integrated Care System Operating Model** shows where and how we will work in partnership to deliver the aspirations and outcomes through a new way of working together.



# Executive Summary

We are collectively committed to delivering our shared ten ambitions and outcomes:

## Ambition

## Outcome

The best start in life



Women are healthy and well during and after pregnancy.  
All children grow and develop well so they are ready and equipped to start school.

Access to the best available education and learning



Education settings are good and inclusive and children and young people, including those with special needs perform well.  
Adults have access to learning opportunities which support them with work and life skills.

Opportunity to be fit, well and independent



Children and adults are healthy and active and enjoy good mental health.  
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 which are clean and green



Good access to affordable, safe, quality accommodation and security of tenure.  
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.  
Children and young people are safe and protected from harm.

Connected to their families and friends



People feel well connected to family, friends and their community.  
Connections are helped by public transport and technology.

The chance for a fresh start, when things go wrong



Ex-offenders and homeless people are helped back into society.  
People have good access to support for addictive behaviour and take it up.

Access to health and social care when they need it



People can access NHS services and personal and social care when they need to.  
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.

To be accepted and valued simply for who they are

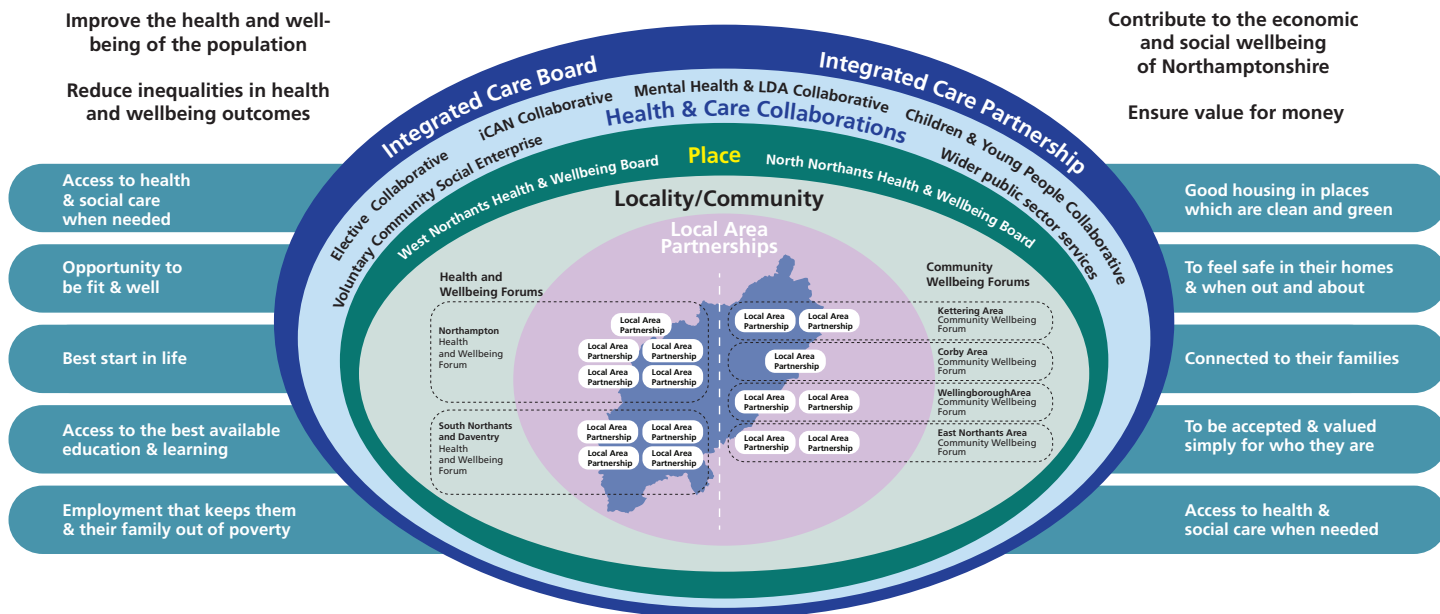


People are treated with dignity and respect, especially at times of greatest need like at the end of their lives.  
Diversity is celebrated.  
People feel they are a valued part of their community and are not isolated or lonely.

# Executive summary

To enable us to achieve our collective ambitions and outcomes we are committed to working together through our new delivery approach:

## Northamptonshire Integrated Care System



### Systemwide:

- Integrated Care Partnership
- Integrated Care Board

### Collaboratives:

- Mental Health, Learning Disabilities and Autism
- Children and Young People
- Integrated Care Across Northamptonshire for people over 65 years old
- Elective Care

### Health and Care Collaborations:

- **West Northamptonshire**  
2 Health and Wellbeing Forums  
9 Local Area Partnerships
- **North Northamptonshire**  
4 Community Wellbeing Forums  
7 Local Area Partnerships

To support people with our ten ambitions we must collaborate, not just with our partners and local business, but also with local people to ensure we understand the uniqueness of each of our communities and the people who live in them. Understanding this enables us to make sure the right support, environment and interventions are in place to help people to live their best life.

# Introduction

## We are delighted to launch our 10 year Live Your Best Life Strategy for the people and communities of Northamptonshire.

Our strategy for us means people have equity of opportunity to be the best version of themselves and the best outcomes for everyone. We want you to have as healthy a life as possible. Every child should have the best start in life. We all want a good experience of ageing and at the end of life. None of us can achieve these things alone.

**Our strategy outlines ten core ambitions key for the people of Northamptonshire to live their best life.**

**These are:**

- **The best start in life**
- **Access to the best available education and learning**
- **Opportunity to be fit, well and independent**
- **Employment that keeps people and families out of poverty**
- **Good housing in places which are clean and green**
- **Feel safe in homes and when out and about**
- **Connected to family and friends**
- **Chance for a fresh start**
- **Access to health and social care when they need it**
- **Valued for who they are.**



Our strategy focuses on improving a set of outcomes for the health, care and wellbeing of local people which will meet these ambitions.

These are identified because:

- It is these outcomes that really matter to people
- It is these outcomes that we are collectively responsible for
- It is these outcomes that we can only change by aligning our ambitions
- It is these outcomes that we can only change by aligning our resources and how we do this together.





This diagram shows:

Source: Dahlgren and Whitehead (1991)

Personal characteristics occupy the core of the model and include sex, age, ethnic group, and hereditary factors. Individual 'lifestyle' factors include behaviours such as smoking, alcohol use, and physical activity. Social and community networks include family and wider social

circles. Living and working conditions include access and opportunities in relation to jobs, housing, education and welfare services. General socioeconomic, cultural and environmental conditions include factors such as disposable income, taxation, and availability of work.

**It is only by working together with our communities across Northamptonshire, whilst recognising their distinct characteristics - that we can make a real and lasting difference to the health, care and wellbeing of over 800,000 people that we serve, who face different challenges and have different opportunities.**

Our shared vision and aims will be delivered through our ambitions and strategic outcomes framework. As we deliver our 10 ambitions we will need to focus on prevention and wellbeing if we are to reduce inequalities and boost the economic and social wellbeing of Northamptonshire.

This builds upon the aims and priorities set out in many local health, wellbeing and care strategies already in existence across Northamptonshire providers and commissioners and outlines our intentions as an Integrated Care System moving forward. It is based on the available data and evidence locally, nationally, and internationally. We have taken into consideration our refreshed Joint

Strategic Needs Assessment, and health and wellbeing trends in Northamptonshire.

We recognise that the health, care and wellbeing of our population is proportionally impacted by the following estimates:

- The health and care received 20%
- Lifestyle choice 30%
- Population genetics and wider economic, physical and social environments 50%.

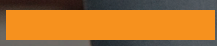
Although estimates vary, it is the wider determinants of health that have the largest impact.

**To enable our communities and residents to truly flourish, we need to understand what drives our health and wellbeing. The circumstances in which people are born, grow, live, work and age provide the foundations for people to live healthy.**





# Partners working together





# In partnership with all our voluntary sector and social enterprises



Northampton General Practices

# Partners working together



## Who we are

We're working together. An Integrated Care System is where community, local government, VCSE, universities, anchor institutions and NHS organisations work together to improve your health and wellbeing. You've told us how important this is and we are now committed to work together in this way.

## Why we need to work together

We've been listening and will continue to do so. A variety of different engagement exercises have taken place over the recent past by a range of public services. We have used all the data from these engagements to build a picture of your views. You've told us you want quicker and easier access to GP appointments, hospital, community and mental health services. You want joined up services that are easy to navigate and continuity of care. You have also told us that you want access to local activities and tidier green spaces. However, the biggest message by far was easy access to information about services, support and community activity.

We will continue to listen to your views with an ongoing programme of community engagement to make sure we are responding to the issues which matter most to you.

This is OUR strategy. Every area in the country now has a strategy and ours is AMBITIOUS. We want to support you to live your best life by having the best health and care system in the country. We will do this by helping you to avoid ill health whilst also having access to excellent care when you need it.

Our local population is changing. We are increasingly affected by significant population growth. Clearly, it's a good thing that we're all living longer – however more of us are living with multiple long-term conditions and dementia. We are also increasingly affected by deprivation.

We're 'Thinking Differently'. New advances in digital and medical technology offer opportunities to radically change the ways we think and work. We will focus on research, development, innovation and evaluation so we can also make a difference by building better networks and relationships, opening access to services and information, and developing the potential in our local communities.





## Anchor institutions

We have already said that socio-economic factors play a huge role in determining people's long-term health, and contribute significantly to health inequalities. Anchor institutions are large organisations that are unlikely to relocate and have a significant stake in our local area. They have sizeable assets that can be used to potentially support our local communities health and wellbeing and tackle health inequalities, for example, through training, employment, professional development, buildings and land use.

Anchor institutions are defined more by their link to a place than their sector. We will continue to explore the opportunities with the many private and voluntary sector organisations across Northamptonshire that hold a significant interest in the long-term development and health of our local areas.

Northamptonshire Anchor Network bringing communities, businesses and public sector together to commit to the following:

- Empowering the next generation
- Employment opportunities
- Social value gained from local investment
- Improving health and wellbeing outcomes for our local communities.

## Health protection

Our local authorities, Public Health and UKHSA will work closely together as a single public health system through joint working, with clarity on roles and responsibilities, which is crucial for the safe delivery of health protection. The DPH will work with local NHS and non-NHS partners to ensure that threats to health are understood and appropriately addressed.

## ICN research

Research and innovation are central to improving the delivery of health and care services and interventions in community settings and, informing future delivery of health and care. Our approach to research and innovation is underpinned by effective research governance, strong leadership and partnerships with academia and industry across the healthcare and wider system. We will include research in commissioning and contracting discussions and embed evaluation of new and existing services and interventions so we can be assured they deliver the benefits and outcomes we desire for the population of Northamptonshire.

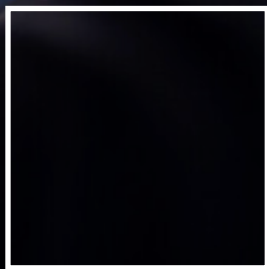
Strong patient and public involvement and engagement is central to our approach to research. We will ensure that we will work proactively to ensure participation reflects the diversity of our population and includes the individuals and communities most at risk of poor health outcomes.





# Shared vision, aims and ambitions

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**Our shared vision and aims will be delivered through our ambitions which are underpinned by the:**

- a. Outcomes Framework**
- b. Community Engagement Framework**
- c. Integrated Care System Operating Model**





# Shared vision, aims and ambitions

## Shared vision

We want to work better together in 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.

## Shared aims

- Improve the health and wellbeing of the population
- Reduce inequalities in health and wellbeing outcomes
- Ensure value for money
- Contribute to the economic and social wellbeing of Northamptonshire.

## Shared ambitions

We want the people of Northamptonshire to have:

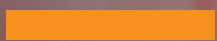
- The best start in life
- Access to the best available education and learning
- Opportunity to be fit, well and independent
- Employment that keeps them and their families out of poverty
- Good housing in places which are clean and green
- Safety in their homes and when out and about
- Feel connected to their families and friends
- The chance for a fresh start when things go wrong
- Access to health and social care when they need it
- To be accepted and valued simply for who they are.

Each ambition is further explained from page 25 of this document and sets out what good looks like for our population.





# Our case for change







# Our case for change

## Population growth

Northamptonshire's location and setting makes it an attractive county to settle in. Over the last decade our population has grown at a faster rate than most local authorities, not just in the region but in England.

While the population that has grown the most over that time is those aged over 70, we have also locally seen a big increase in the numbers of children aged 5 to 15. Conversely, the numbers of babies born in the county has been slowly decreasing over the last ten years.

This change in population presents real challenges for our integrated care system in terms of the likely continuing increase in demand for public services, at the same time as a pull in our workforce being attracted to nearby commutable cities of London, Leicester and Birmingham.

If we are to meet these needs, we need to change how we work as a system.

In 2021 the population of West Northamptonshire was 425,700 and North Northamptonshire 359,500.

In the last 10 years the population has increased by over 42,000 in North Northamptonshire and over 50,000 in West Northamptonshire (an increase of 13.5%).

This is higher than the overall increase for England (6.6%), where the population grew by nearly 3.5 million and is among the highest population growth in the region.

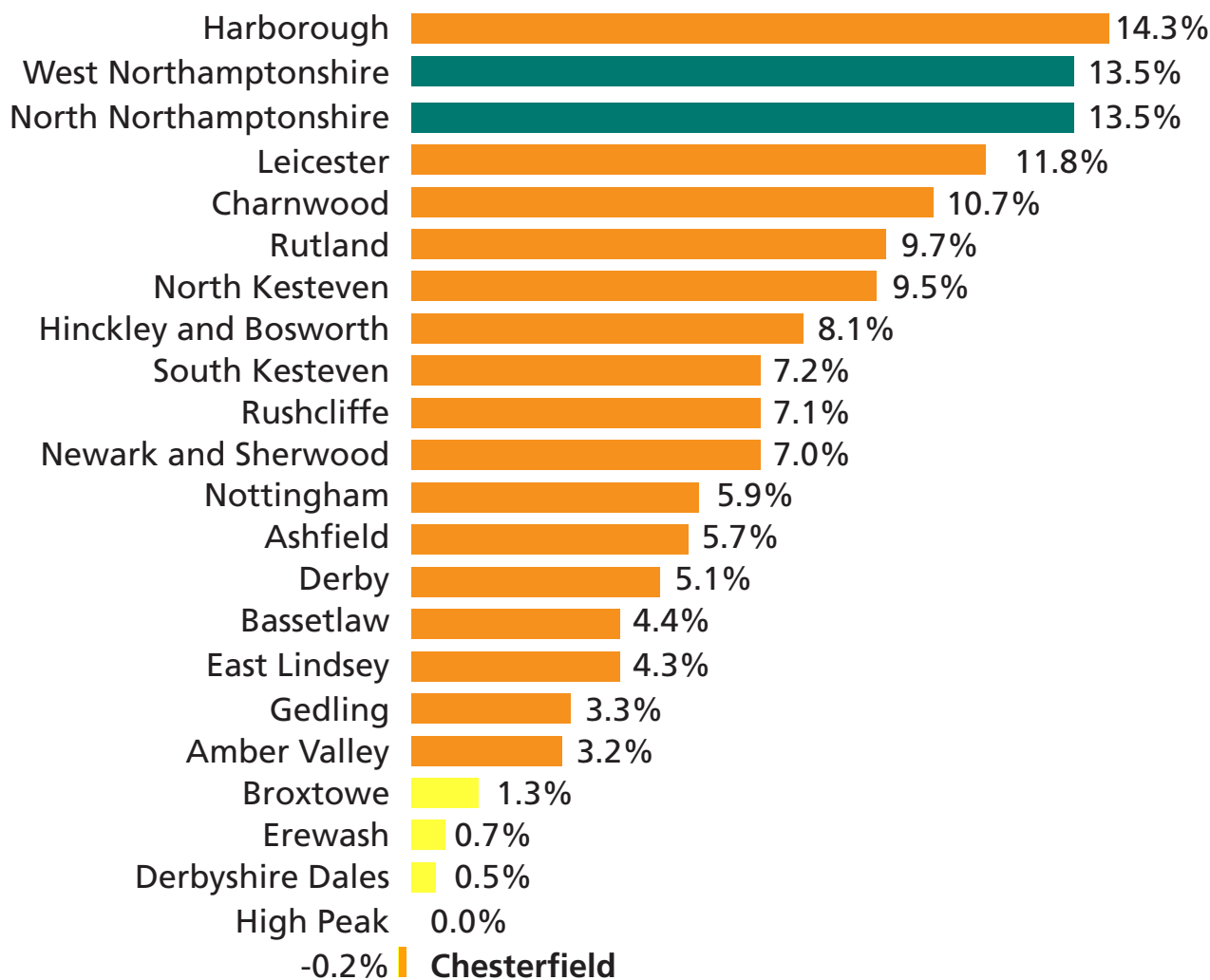
West Northamptonshire is now the 13th and North Northamptonshire the 21st largest local authority, out of 128 local authorities in England.

## Economic environment

To create a Northamptonshire where everybody's health and wellbeing can thrive we need all of the right building blocks in place including stable jobs, good pay, and quality housing. Right now, in too many of our communities, the national economic downturn means that these building blocks are not in place. There is strong evidence that economic crises have a significant impact on population mental health. As was the case during the COVID pandemic, those most vulnerable residents in our county are likely to be hit hardest by this – thereby widening the health gap.

In response to this situation, we are likely to see continued real-terms reduction in public sector funding meaning that we will again have to do more with less. The power of working together as an Integrated Care System is that resources can be pooled to be used more efficiently and effectively.

## Population change of local authorities in the East Midlands between 2011 and 2021 (Percentage change)

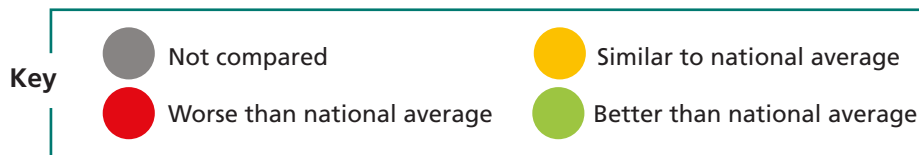


### Demographics

We know that while the county as a whole is less diverse than the England population, there is huge variation in the shapes of our communities. This can very broadly be divided into much less diverse rural communities and much more diverse towns and urban areas. Understanding our communities better and how they differ will be key to ensuring that our integrated care system delivers better outcomes for all.

# Health and Wellbeing in North Northamptonshire

## August 2022



### Start Well

- 3,789 babies were born in 2021.
- 12.2% of mothers smoked at the time of birth in 2020/21. This is worse than the England average.
- The population of North Northamptonshire was 359,500 in 2021.
- 70% of children achieved a good level of development at the end of reception class in 2019.
- 14% of children aged under 16 lived in low income families in 2020/21. This is better than the England average.
- 24% of children in reception class were overweight or obese in 2019/20. This is similar to the England average.\*
- 34% of children in Year 6 were overweight or obese in 2019/20. This is similar to the England average.\*
- 69% of young people gained a standard pass (4) in English and Maths GCSEs in 2021.
- The Chlamydia detection rate was 1,330 per 100,000 in 15 to 24 year olds in 2020. This is below the national target range.
- There were 14 pregnancies in females aged under 18 per 1,000 girls aged 15 to 17 in 2020. This is similar to the England average.

### Live Well

- A 2018 based projection estimated there were 150,136 households in North Northamptonshire in 2021.
- The average salary (persons) in 2020 was £30,189. This was an increase of 9% compared to 2019.
- 79.6% of adults were employed in 2020/21. This is better than the England average.
- 10% of households experienced fuel poverty in 2018.
- There were 323 new sexually transmitted infections per 100,000 population in 2020. This is lower than the England average.
- 62.6% of adults were physically active in 2020/21. This is worse than the England average.
- 53% of the population aged 16+ ate their "5-a-day" in 2019/20. This is worse than the England average.
- 70% of adults were overweight or obese in 2020/21. This is worse than the England average.
- There were 431 alcohol related hospital admissions per 100,000 population in 2020/21. This is better than the England average.
- 18% of adults smoked in 2019. This is worse than the England average.
- There were 11 suicides per 100,000 population in 2018-2020. This is similar to the England average.

- There were 196 hospital admissions for self-harm per 100,000 population in 2020/21. This is worse than the England average.
- There were 4 deaths from drug misuse per 100,000 population in 2018-2020. This is similar to the England average.
- 38 people were killed or seriously injured on roads per 100,000 population in the 2016-2018. This is better than the England average.
- There were 28 deaths in under 75s from preventable cardiovascular diseases per 100,000 population in 2017-2019. This is similar to the England average.
- There were 24 deaths in under 75s from preventable respiratory diseases per 100,000 population in 2017-2019. This is worse than the England average.
- There were 60 deaths from preventable cancers per 100,000 population in 2017-2019. This is worse than the England average.

### Age Well

- There were 1,893 hospital admissions due to falls in people aged 65+ per 100,000 65+ population in 2020/21. This is better than the England average.
- The average male life expectancy was 79.2 in 2018-2020. This is similar to the England average.
- The average female life expectancy was 82.4 in 2018-2020. This is worse than the England average.

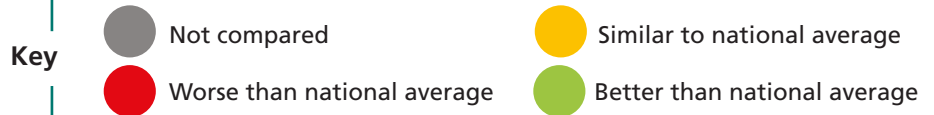
\* Please note that figures on childhood excess weight should be interpreted with caution due to low 2019/20 NCMP participation.

Produced by Public Health Intelligence, North Northamptonshire Council. All figures have been calculated using the latest district level data available in August 2022 and rounded to whole numbers. Icons by Freepik from flaticon.com. **Page 77**



# Health and Wellbeing in West Northamptonshire

## August 2022



### Start Well

- 4,647 babies were born in 2021.
- 12.3% of mothers smoked at the time of birth in 2020/21. This is worse than the England average.
- The population of West Northamptonshire was 425,700 in 2021.
- 72% of children achieved a good level of development at the end of reception class in 2019.
- 14% of children aged under 16 lived in low income families in 2020/21. This is better than the England average.
- 21% of children in reception class were overweight or obese in 2019/20. This is better than the England average.\*
- 30% of children in Year 6 were overweight or obese in 2019/20. This is better than the England average.\*
- 73% of young people gained a standard pass (4) in English and Maths GCSEs in 2021.
- The Chlamydia detection rate was 1,417 per 100,000 in 15 to 24 year olds in 2020 This is below the national target range.
- There were 10 pregnancies in females aged under 18 per 1,000 girls aged 15 to 17, in 2020. This is lower than the England average.

### Live Well

- A 2018 based projection estimated there were 170,103 households in West Northamptonshire in 2021.
- The average salary (persons) in 2020 was £32,467. This was an increase of 2% compared to 2019.
- 78% of adults were employed in 2020/21. This is similar to the England average.
- 9% of households experienced fuel poverty in 2018.
- There were 374 new sexually transmitted infections per 100,000 population in 2020. This is lower than the England average.
- 63% of adults were physically active in 2020/21. This is worse than the England average.
- 52% of the population aged 16+ ate their "5-a-day" in 2019/20. This is worse than the England average.
- 69% of adults were overweight or obese in 2020/21. This is worse than the England average.
- There were 467 alcohol related hospital admissions per 100,000 population in 2020/21. This is similar to the England average.
- 15% of adults smoked in 2019. This is similar to the England average.
- There were 8 suicides per 100,000 population in 2018-2020. This is lower than the England average.

- There were 297 hospital admissions for self-harm per 100,000 population in 2020/21. This is worse than the England average.
- There were 3 deaths from drug misuse per 100,000 population in 2018-2020. This is lower than the England average.
- 42 people were killed or seriously injured on roads per 100,000 population in the 2016-2018. This is similar to the England average.
- There were 26 deaths from preventable cardiovascular diseases per 100,000 population in 2017-2019. This is similar to the England average.
- There were 20 deaths in under 75s from preventable respiratory diseases per 100,000 population in 2017-2019. This is similar to the England average.
- There were 54 deaths from preventable cancers per 100,000 population in 2017-2019. This is similar to the England average.

### Age Well

- There were 2,727 hospital admissions due to falls in people aged 65+ per 100,000 65+ population in 2020/21. This is worse than the England average.
- The average male life expectancy was 79.8 in 2018-2020. This is better than the England average.
- The average female life expectancy was 82.8 in 2018-2020. This is worse than the England average.

\* Please note that figures on childhood excess weight should be interpreted with caution due to low 2019/20 NCMP participation.

# Case for change

## Starting Well

It is in early childhood (and even earlier during pregnancy) that the foundations for future health and wellbeing are built. While for many of our children in Northamptonshire there are good opportunities for healthy development, for some more vulnerable, particularly those children who need support from health and care services (including looked after children, children with disabilities), those building blocks for healthy development (such as access to play and leisure activities, a supportive education environment) might be harder to come by. It is only by working together as a system that we can make sure all children in Northamptonshire have all they need to thrive.

## Living Well

Our living and working conditions, the environment we live in and our relationships and social networks continue to shape our health and wellbeing through adulthood. The diseases that are responsible for most of the ill health and early deaths in Northamptonshire - cancers, heart disease, chronic lung disease, musculoskeletal diseases and poor mental health – are all hugely shaped by these social, economic and environmental factors. While rate of death and disability due to these conditions may be similar in scale to the national average in Northamptonshire, the volume of hospital care required is significantly higher than the national average suggesting that the county is much better at treating these conditions when they cause problems, than preventing them.

## Ageing Well

In Northamptonshire, too many older people get admitted to hospital and stay too long, resulting in a greater chance of them losing their independence and not being able to return to their home or needing long term care and support. While the foundations for healthy ageing are laid in middle age, there are things that we can continue to do throughout older age to stay fit, well and resilient. There are huge opportunities in working together as an integrated care system to ensure that Northamptonshire provide the right condition for older people to avoid having to stay in hospital and leave their homes.

## Resource utilisation

We recognise as a system that the way we utilise our collective resources and assets needs to change and this is our opportunity to do that more effectively to support delivering our ambitions. We are committed to working together to understand how we can further consolidate and strengthen the way we deliver financial sustainability and value for money for Northamptonshire.

## Inequalities

Northamptonshire benefits from high employment levels and a beautiful rural setting. However, many in our communities face the same challenges affecting people nationally around poverty (including food and fuel poverty), a lack of affordable housing, crime and safety in our neighbourhoods as well as issues such as a lack of access to green space. These all have a significant impact on the health of our children, young people and adults alike and affect our ability to be able to engage in healthy behaviours like eating well, moving more, sleeping well, drinking less alcohol and stopping smoking.



Health inequalities are the **preventable, unfair and unjust differences** in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental and economic conditions.

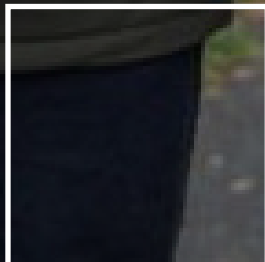
Some of our local communities and specific groups for example; travellers, migrants, carers are among the most disadvantaged in England. It is unacceptable that life expectancy on average can be as much as 8.25 years less depending on where you live. The top 3 broad causes of death that contribute the most to the gap in life expectancy between the most and least deprived areas in Northamptonshire are Cardiovascular disease, Cancer and Respiratory disease. This is why we are committed to working together to tackle the health inequalities caused by deprivation.

You can find the strategy here:

[www.icnorthamptonshire.org.uk/health-inequalities](http://www.icnorthamptonshire.org.uk/health-inequalities)



# What we plan to do together







## Our strategy is focused on

- Our ten ambitions that all partners across our system have collectively committed to delivering over the next 5 to 10 years.
- Our ten ambitions are underpinned by our Strategic Outcomes Framework where the outcomes are bold, ambitious and exciting and provide a focus for the forthcoming years.

To support our residents with these ten ambitions we have to collaborate, not just with our partners and local business but also with local people to ensure we understand the uniqueness of each of our communities and the people who live in them. Understanding this enables us to make sure the right support, environment and interventions are in place to help people to live their best life.

**Our shared vision and aims will be delivered through our ambitions which are underpinned by the:**

- a. Outcomes Framework**
- b. Community Engagement Framework**
- c. Integrated Care System Operating Model**

## Our ten ambitions

- Best start in life
- Access to the best available education and learning
- Opportunity to be fit, well and independent
- Employment that keeps them and their families out of poverty
- Good housing in places which are clean and green
- To feel safe in their homes and when out and about
- Connected to their families and friends
- The chance for a fresh start when things go wrong
- Access to health and social care when they need it
- To be accepted and valued simply for who they are

## Outcomes Framework

We have developed the Outcomes Framework and its purpose is to outline priority outcomes, based on the needs identified in the joint strategic needs assessments (JSNA). The Outcomes Framework provides a mechanism by which we can measure joint efforts in driving progress on the most important outcomes for our local population.

The Outcomes Framework has been shaped around the ten "Live Your Best Life" ambitions and fundamentally underpins this strategy. It sets out the short, medium and long term outcomes ICS will work together to achieve, and supports strategic planning by ensuring system improvement priorities and investment enable achievement of the outcomes. Our framework reflects a commitment that everyone should have the opportunity to make choices that support independence and wellbeing.

We will be developing measures throughout our new operating model described in the next section. These will be at System, Place and Local Area Partnership (LAP) levels based on JSNA data, local insights data and what local people agree are priorities. This will allow us to measure and report whether we are successfully delivering our outcomes or whether we need to reorganise and refocus our resources.

Through this framework we will show:

- How outcomes for residents are being achieved across the system
- Focus plans and inform priorities on an annual basis through clearly articulated measures; and
- Support organisations to work as one system to deliver impact and continually improve.

The framework describes for each of our ambitions:

- Where we are now
- Our approach to achieving our ambition
- The outcomes we want to achieve.

# The best start in life

## Where we are now

Our population aged 5-15 has grown by nearly 20% in the last 10 years but this is likely to slow in future as birth rates fall.

Risks of birth complications and poor health in newborns is higher than it ought to be due to high levels of smoking and obesity in pregnancy.

Looked After Children (LAC) in Northamptonshire get poorer access to regular health and dental checks than LAC in other areas.

Not enough children are starting school with the skills they need to succeed.

Organisational boundaries continues to be a barrier to better care for children and young people.

## Our approach

Everyone will recognise their role in our collective responsibility to improve children and young people's health and wellbeing, including parents, families, friends and schools.

Our communities will raise children to become healthy adults, who themselves raise healthy families and are net contributors to a healthy society.

Young people want to make healthy choices and will seek support for their needs before they reach crisis.

Our children and young people will have a voice in the decisions that affect them, supporting them to be involved in the identification of problems and creation of positive solutions.

The services and support systems available to children and young people will be consistent and stable.



## Outcomes we want to achieve

Women are healthy and well during and after pregnancy.

All children grow and develop well so they are ready and equipped to start school.

## You've said...

There needs to be better support for parents and children such as training and mentoring to support parents in dealing with life pressures.

Advice and care should be provided as close to home as possible and for care to be received at the right place, at the right time.

Waiting times need to be reduced and for services to be equitable for all who access them.



# Access to the best available education and learning

## Where we are now

Too many young people are not reaching their educational potential, which limits their future options.

We have an increasing gap in attainment between the least and most disadvantaged children.

Northamptonshire has a higher rate of permanent exclusions from school than the England rate.

There are a large number of children in county electively home educated.

Too many children with special educational needs or disabilities are being educated outside of the county or at home.

## Our approach

Schools in the county will be places that encourage not just academic achievement for all but also healthy social and emotional development.

Families of all children, regardless of need, will be confident in the quality of the education they receive at schools within the county.

Education settings will be trauma-informed environments so that those with challenging home lives and histories will not have their trauma compounded by school exclusions.

Further and higher education settings will provide the skills training that local employers are looking for in employees.



## Outcomes we want to achieve

Education settings are good and inclusive and children and young people, including those with special needs perform well.

Adults have access to learning opportunities which support them with work and life skills.

## You've said...

Access to special educational needs (SEN) support and education needs to improve.

There needs to be better support for parents and children such as training and mentoring to support parents in dealing with life pressures.



# Opportunity to be fit, well and independent

## Where we are now

Over one in four adults in the county are classified as physically inactive and almost two thirds are classified as overweight or obese.

Smoking is the single greatest risk factor for death and disability in the county with 16.4% of adults in the county being current smokers.

Around 90,000 adults in the county are estimated to be experiencing a common mental health disorder.

Too many young people have poor mental wellbeing and this is increasing.

The severity of poor mental health in adolescence is also increasing resulting in high rates of admission to hospital for self-harm and eating disorders.

## Our approach

The county's built environment and infrastructure will support people to be more active and make healthier food choices easier to make.

Taking up smoking will not be an easy or attractive choice for young people and adults who smoke will be supported with treatment to help overcome the addiction.

Long term conditions and their risk-factors will be spotted early and treated appropriately.

People recognise and have opportunities for all of the factors that promote mental wellbeing including: parenting and early years support, good relationships, good education, stable, secure, good quality and affordable housing, good quality work, a healthy standard of living, accessible safe and green outdoor space, arts and cultural activities.



## Outcomes we want to achieve

Children and adults are healthy and active and enjoy good mental health.

People experience less ill-health and disability due to lung and heart diseases.

## You've said...

Bring people together by offering local activities and events to support healthier lifestyles and to support those in inclusion groups to connect with others.

The opportunity to receive care in your own homes to support independence is something that is important to you.

You would like to see better communication, so you can stay informed and up to date on what is going on, as well as having a clear understanding of where to go for support on grants, benefits and opportunities.

# Employment that keeps people and families out of poverty

## Where we are now

We have relatively high rates of employment in the county but a large proportion of work available is very low paid.

Many people and families are not claiming financial support they are eligible for.

There are large gaps in employment for vulnerable communities such as those with serious and enduring mental illness and those with learning disabilities.

## Our approach

Training and education settings, employers and recruiters as well as the job centres will work more effectively in collaboration to ensure that skills match.

The economy of Northamptonshire grows in a way that is sustainable not just environmentally, but also socially; meaning that the increase in the county's revenue doesn't increase inequalities or create more environmental damage.

The right support will be given for those in groups who are under-employed to access jobs and remain in employment.

People, especially in under-served communities, get good information and advice on financial and other support available to them.



## Outcomes we want to achieve

More adults are employed and receive a 'living wage'.

Adults and families take up benefits they are entitled to.

## You've said...

You would like to see better communication, so you stay informed and up to date on what is going on, as well as having a clear understanding of where to go for support on grants, benefits and opportunities.

# Good housing in places that are clean and green

## Where we are now

The population of Northamptonshire has grown by over 13% in the last decade which represents among the highest growth in the country.

We have among the least affordable housing in the East Midlands with over 9,000 people on a waiting list for social housing in the county.

While the county is largely green and rural, with much of land usage in the county agricultural, access to green spaces for people who live in our urban centres is poor.

Air quality in our largest towns is particularly poor and contributing to poor heart and lung health.

## Our approach

Our built environment will support and encourage more people to walk and cycle.

As well as more active travel, more transport via electric vehicles will ensure that air quality, particularly in our urban areas, is improved.

Our local housing market and social housing offer will ensure that all people and their families (but in particular vulnerable groups such as care leavers) have access to affordable safe and good quality accommodation.

While new homes are being built across the county, priority will be given to ensuring that these new developments are green, with plenty of access to open green spaces, urban trees and other green and blue infrastructure.



## Outcomes we want to achieve

Good access to affordable, safe, quality, accommodation and security of tenure.

The local environment is clean and green with lower carbon emissions.

## You've said...

Investment is needed in local public green spaces as well as a focus on reducing litter and fly tipping to increase civic pride in residential areas.

# Feel safe in their homes and when out and about

## Where we are now

Though the rate has been gradually reducing over the past ten years there are still over 130 young people (under 17) entering the youth justice system each year.

Twice as many entrants to the criminal justice system in the most deprived communities compared with the least deprived communities.

The rate of violent offences is higher than the national average, and has increased significantly in recent years; A significant proportion of violent crime in Northamptonshire is domestic abuse and the rate of incidents is increasing year on year.

Too many young people are ending up in hospital due to injuries including deliberate injuries; the rate is increasing in contrast with national patterns.

## Our approach

People will feel safer walking around their communities and feel confident in being out and about in their local neighbourhoods.

Young people will grow up in families, communities and environments that are supported to be safe and nurturing, with plenty of opportunities for personal development and to have fun and enjoy.

Organisations will work together more effectively to ensure children and young people at risk of harm are identified at the earliest opportunity and protected.

Those who experience abuse at home and in their intimate relationships will be supported to have stability in their lives while being protected from perpetrators.



## Outcomes we want to achieve

People are safe in their homes, on public transport and in public places.

Children and young people are safe and protected from harm.

## You've said...

That community safety needs to be a focus and this includes improving the quality and safety of public spaces with improved safer footpaths, reducing anti-social behaviour as well as preventing gangs and grooming.



# Connected to family and friends

## Where we are now

Many of our neighbourhoods score poorly compared with the national average in measures of connectivity to key services, digital infrastructure and isolation.

There is huge variation in digital exclusion across the county with high rates of exclusion both in our most deprived communities as well as less deprived rural communities.

While lots of learning and positive action has been taken from the COVID-19 pandemic, social isolation remains an issue including for younger people in deprived urban centres.

## Our approach

Not only will digital infrastructure and technology be available to the most vulnerable groups, people will have the knowledge and skills to be able to confidently use it.

As well as being better connected digitally, transport will be sustainable and affordable to connect those at greatest need.

People who care for friends and family will be connected so that they have social contact as well as access to support and services for their own mental and physical health.

People will have stronger relationship networks within their communities so that they can share knowledge, experience and give each other support.



## Outcomes we want to achieve

People feel well connected to family, friends and their community

Connections are helped by public transport and technology

## You've said...

**You would like to see better communication, so you stay informed and up to date on what is going on, as well as have a clear understanding of where to go for support on grants, benefits and opportunities.**

**Bring people together by offering local activities and events to support healthier lifestyles and to support those in inclusion groups to connect with others.**

# Chance for a fresh start

## Where we are now

To many people in the county have experiences associated with 'deep social exclusion' – namely, homelessness, substance misuse, history of offending and 'street culture' activities (such as begging and street drinking).

Too many preventable and early deaths happen due to drug use or in people experiencing rough sleeping.

## Our approach

Rough sleeping in the county is prevented wherever possible, and where it does occur it is rare, brief and non-recurrent.

People with addictions have access not only to effective treatment and support but also stable accommodation and environments that support recovery.

Employers, landlords and community groups are inclusive so that people with experience of any features of social exclusion may be offered opportunities to thrive.



## Outcomes we want to achieve

Ex-offenders and homeless people are helped back into society.

People have good access to support for addictive behaviour and take it up.

## You've said...

We know we need to talk to you more about areas of focus to improve the 'chance for a fresh start'. We look forward to talking to you and hearing your feedback about this soon.

# Access to health and social care when they need it

## Where we are now

We are missing opportunities to prevent disability and early deaths through screening and vaccination.

Groups such as adults with serious and enduring mental illness, adults with a learning disability and looked after children are missing out on opportunities for more focused preventative health and care services through regular health checks.

The demand for some services (e.g. adolescent mental health services) is such that there are long waiting times.

Older and frail people are staying longer in hospital than necessary and as a result are leaving in poorer physical condition.



## Our approach

Organisations will be more health literate and recognise and address the barriers that people face in accessing preventative health services.

We will prevent chronic mental and physical conditions but also support those already diagnosed to have the skills and confidence to manage their own conditions.

People will be confident in managing minor illness at home but when acute care is needed, appropriate services will be staffed at a level to allow timely response.

Hospital stays will be avoided where possible for those who are frail and be as short as possible for those who cannot avoid it.

## Outcomes we want to achieve

People can access NHS services, personal and social care when they need to.

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.

## You've said...

**Communications with patients' needs to be improved to enable an open dialogue about care available.**

**The opportunity to receive care in your own homes to support independence is something that is important to you.**

**Improving access to services including GP's, mental health support services for children and young people, bereavement support and those with dementia is needed.**

**Waiting times for services needs to be reduced.**

# Valued for who they are

## Where we are now

Early conversations with people about what it means to them, to “be valued”, tells us that:

- **Belonging**  
People talked about wanting to feel connected, to feel like they had roots and a network in their community.
- **Being yourself**  
People talked about being respectful and celebrating differences and being comfortable to just “be who you are.”
- **Being considered**  
People talked about wanting their voice to be heard and to know that they are “thought of” in every decision.
- **Being needed**  
People talked about wanting to help and support each other and feel helpful and needed.

## Our approach

People living and working in Northamptonshire will feel connected to their communities, respected and considered in decisions.

Stronger networks and relationships within our communities will mean that people are in a better position to be able to support each other.



## Outcomes we want to achieve

People are treated with dignity and respect, especially at times of greatest need like at the end of their lives.

Diversity is celebrated.

People feel they are a valued part of their community and are not isolated or lonely.

## You've said...

**Services need to be equitable for all who access them.**

**Bring people together by offering local activities and events to support healthier lifestyles and to support those in inclusion groups to connect with others.**



# Working together to include the voice of people and communities in all we do

Collaborating as Integrated Care Northamptonshire (ICN) offers a great opportunity for health and care to work together more effectively.

- We have developed a Community Engagement Framework to shape our shared approaches for involving and working with people and communities.
- Our framework is for everyone – it is our call to action for staff, practitioners, people and communities across Northamptonshire to work together to deliver the changes we have all said we want to see. Through having a framework, we have clarity on our direction of travel, accountability for our actions and agreement on our communication and engagement priorities.
- Shaped together through co-design, and in the true essence of co-production we will continue to shape and evolve our approach. It is ambitious, but together so are we.
- It sets out our expected ways of working, our shared vision and our highest priority projects to help us to work together with people and communities, not just in pockets or on an ad-hoc basis, but across all we do in better and more authentic ways.

This framework and our approach was developed by and for members of Integrated Care Northamptonshire, in partnership with Traverse – an independent social purpose consultancy – and with a wide range of local partners and people through a co-design and co-production process. We co-produced our vision, ambitions and values for working together with people and communities below:

## Community Engagement Framework Our co-produced vision, ambitions and values

Our vision	Our ambitions	Our values
<p>“We work in partnership with people and communities in Northamptonshire, especially those affected by inequalities, on issues that are important to them. Everyone will know how their contribution has made a difference.”</p>	We build trusting relationships and effective partnerships by embedding as consistent approach to co-production	Trusted
	We are all committed to genuinely hearing what people say, and feeding back the influence on our decisions and actions	Transparent
	We have genuine diversity and inclusion at all levels in the system, involving people according to their needs and preferences	Authentic
	We prioritise the needs and issues that are important to people in communities	Accountable
	We evaluate what we do, share learning and celebrate our successes	Accessible

You can read and find out more about the full Community Engagement Framework here: [icnorthamptonshire.org.uk/involvement](http://icnorthamptonshire.org.uk/involvement)

# Our delivery approach

We will work in partnership to deliver the aspirations and outcomes through a new way of working together. As Integrated Care Northamptonshire we have new opportunities to bring together services and staff on a systemwide, place and local community level relating to the needs of the population.

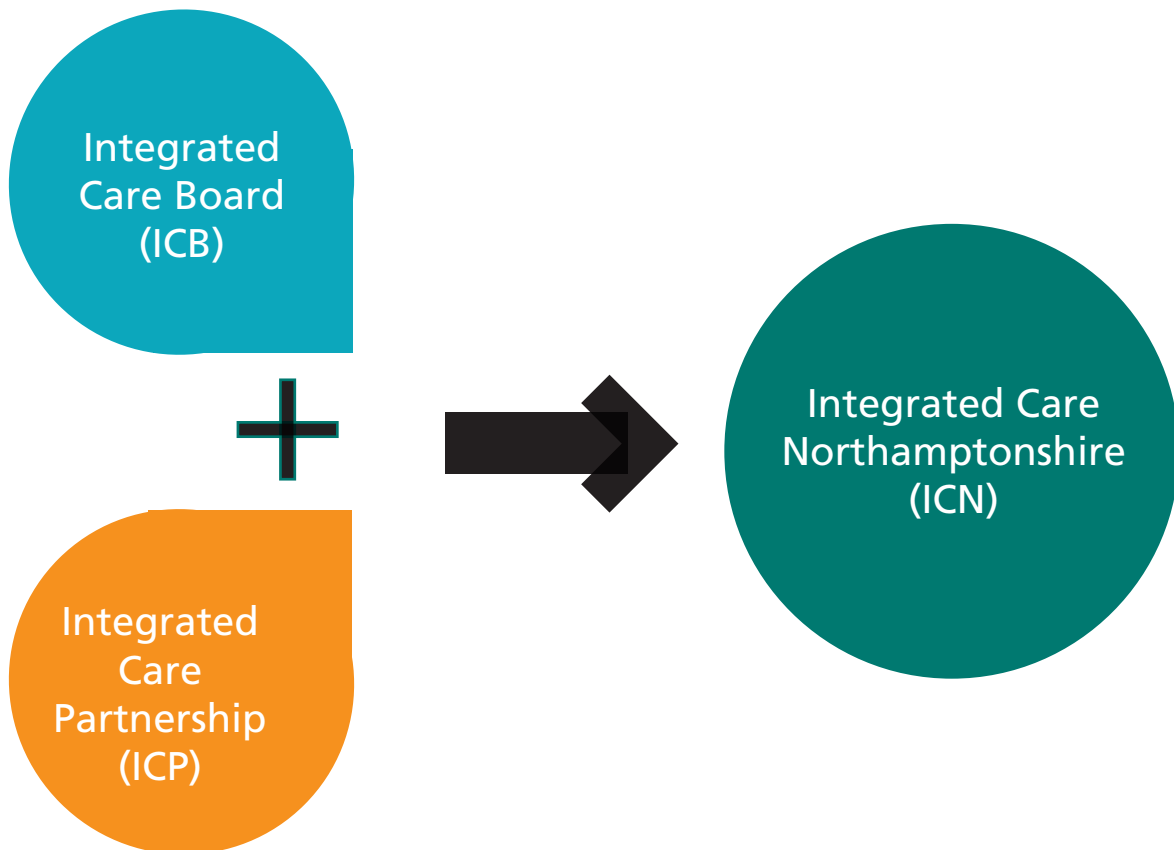
We will combine skills, knowledge and expertise from across communities, commissioners and providers and based on intelligence and insights will identify where resources should be focused to deliver our ambitions and reduce inequalities. We will deliver improved outcomes by ensuring services are integrated at the right place that make sense to our population.

Our Integrated Care System is in a privileged position in that we had the launch of our two new Unitary Authorities in 2021. In addition we had the introduction of the new Integrated Care Board and Integrated Care Partnership in 2022 providing us with opportunities to work together differently and focus on improving outcomes for the population we serve.

## Our Integrated Care Northamptonshire high level structure is illustrated below

The diagram below shows:

The Integrated Care Board works together with the Integrated Care partnership to make up Integrated Care Northamptonshire, which is also known as the ICN.



You can read and find out more about the full Community Engagement Framework here: [icnorthamptonshire.org.uk/involvement](https://icnorthamptonshire.org.uk/involvement)

# Our delivery approach

Our System Operating Model consists of the following components:

## An Integrated Care Partnership (ICP)

- Members of the ICP include a wide range of key players from the two local authorities, the voluntary sector, the NHS, and other public bodies that are key to delivering our aims.
- The partnership is responsible for agreeing this strategy to improve health and wellbeing across the whole of Northamptonshire. It will use the best insights from data available, built bottom-up from local assessments of needs and assets identified at place level and Local Area Partnership level.
- Our Health and Wellbeing Boards will also use this strategy as the basis of their Health and Wellbeing strategy and delivery planning.

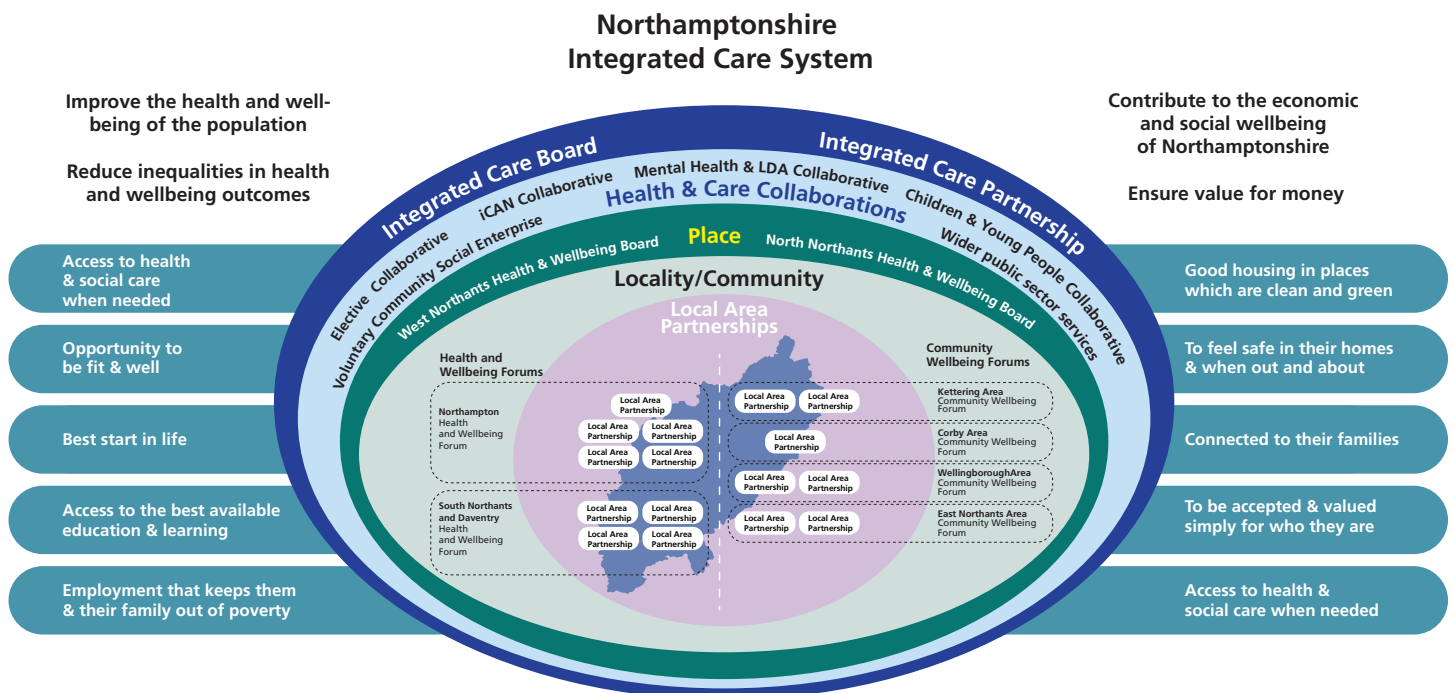
## An Integrated Care Board (ICB)

- Members of the ICB include a Chief Executive and Chair, senior representation from each local authority, senior representation from NHS provider organisations (the Hospital Group, Northants Healthcare NHS Foundation Trust, and primary care) and four non-executive directors.
- The ICB is responsible for commissioning healthcare services for the population. This includes hospitals, GP practices and wider primary care, mental health, community services, ambulance services and some specialised services.
- As our system further matures the functions and budgets associated with commissioning healthcare services could be delegated to our Collaboratives and Places. As we integrate services and blur organisational boundaries, we will ensure we will use pooled budgets under s75 agreements where it seems sensible and where evidence shows it provides additional benefit.

Both the ICP and the ICB work together to:

- Improve health and care outcomes
- Reduce inequalities in health and wellbeing outcomes
- Make best use of public funds
- Contribute to the social and economic wellbeing of our county.

Service design and delivery is organised across the geography of the county:



# Our delivery approach

## Through our places

### Two places - North and West Northamptonshire

- Six communities / localities: geographically smaller than the places, but are larger than the Local Area Partnerships (LAPs)
- Sixteen Local Area Partnerships.

We aim to deliver our ten ambitions through a joined-up approach across all the organisations and services involved in supporting our population and communities.

This will be through a new very local approach with our communities central to our operating model – our Local Area Partnerships (LAPs).

### Local Area Partnerships:

- They represent local areas and give a voice to residents, translating strategy into local action.
- They empower residents to co-produce new services and solutions for their local area.
- They contribute to system-wide priorities by utilising strong evidence-based information and deep local insight from frontline services and communities.
- They empower local leaders to take accountability for local action.

### Localities/Communities:

- They consolidate the views of residents, local providers and local area partnerships.
- They unblock challenges and identify at scale opportunities for their areas.
- Through oversight of the Local Area Partnerships, they ensure their priorities are represented throughout the system.
- Local leaders influence policy to access the right resource and capabilities to deliver their functions.
- They support our collaboratives by identifying and co-ordinating community assets across health, care and wider determinant of health partners to co-produce services and pathway (re-) design.

### Places:

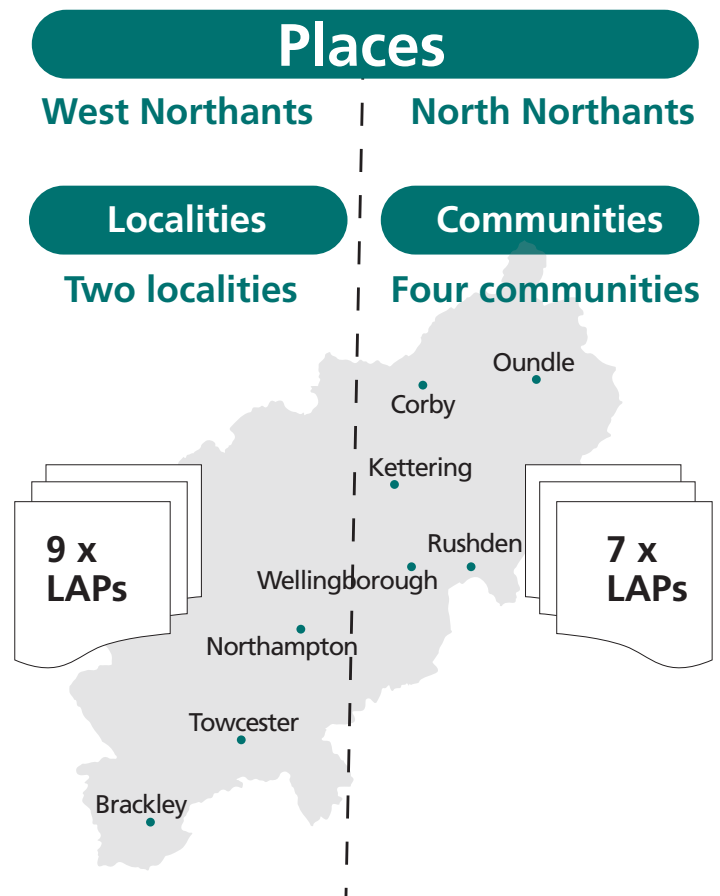
- The North and West Places in Northamptonshire mirror the two unitary population footprints and boundaries.

### Our Places:

- Initiate and encourage the integrated delivery of health, social care and other services with health and wellbeing related responsibilities such as housing, policing, education, leisure, planning, community activities.
- Understand and work with communities by joining up and coordinating services around the needs of people.

We will actively and collectively engage, involve and co-produce with local people and communities to understand needs and priorities. This will be supported by local intelligence and local profiles to assist with identifying needs, priorities and actions.

## Northamptonshire's approach to place development



- Our two Health and Wellbeing Boards enable key leaders from across North and West Northamptonshire to secure better health and wellbeing outcomes for the local population, better quality of care for all patients and care users, better value for the taxpayer and reduce health inequalities by shaping the future of services through a more integrated approach to commissioning health and wellbeing related services.



# Our delivery approach

## Through our collaboratives that operate countywide

Collaboratives are partnerships of organisations working together to plan and deliver services for the people of Northamptonshire. They bring together, voluntary and community organisations, the NHS, local authorities and other organisations. Through partnerships, collaboratives will join up services. Connected care, delivered in partnership will improve the delivery of the ten core ambitions for people living in Northamptonshire.

There is recognition that each of our four collaboratives; Children’s and Young People, Elective Care, iCan (Integrated Care Across Northamptonshire) and Mental Health, Learning Disability and Autism are at different stages of maturity and there are different planned approaches to delivery. However, their visions clearly demonstrate how, by working in collaboration across identified populations they align and contribute to the delivery of our ten ambitions and underpinning outcomes framework.

## Mental Health, Learning Disabilities and Autism vision

Mental Health, Learning Disabilities and Autism (MHLDA) 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. Secondly, the collaborative 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). We also seek to use collaborative structures to make the best use of limited resources, by addressing duplications and gaps within pathways and reinvesting savings into preventative initiatives. We seek to enable longer term transformation, via cross-system partnerships and integrated commissioning principles that resolve long-standing barriers to good health and care. Lastly, the collaborative 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.



## Children and Young People Transformation Programme Vision;



The Children and Young People collaboration has been set up to bring our organisations together to collaborate and work together to improve outcomes for children and the wider population of Northamptonshire.

Our vision is that:

Together we will help and support children, young people and their families.

We will do this through our THRIVE framework. The framework ensures that all needs for children and young people are considered at every level of the program and throughout the decision making process which may affect them. The THRIVE framework is an evidence-based approach that is used globally across sectors working with children and young people and their families and was chosen as a check and balance system to ensure that the child remains at the centre of everything we do.



# Our delivery approach



## Through our collaboratives that operate countywide

### iCAN (Integrated Care Across Northamptonshire) vision:

Integrated Care Across Northamptonshire (iCAN) is about improving the quality of care on offer for older people in our county. We want 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.



### Elective Care vision:

Elective care is care that is planned in advance. It involves specialist clinical care or surgery, generally following a referral from a GP or community health professional.

We recognise that we have the opportunity to make the experience of care better for our population by supporting communities to stay well, reducing duplication and fragmentation in delivery of care and reducing inefficiencies of working as separate organisations.

The vision:

To improve health outcomes, inequalities and quality of life through all partners working together in a patient-centred approach, across the whole elective pathway. We will do this by transforming delivery of services to enable patients to be supported to keep well, but where required to ensure equitable access to timely treatment for patients across the county.

The collaborative will need to include places and local government to ensure services are designed to meet the needs of the different communities across Northamptonshire and achieve our vision.



# Our workforce

## National approach

PP pillars	People functions	Intended outcomes
Looking after our people	1. Supporting the health and wellbeing of all our people	People working and learning in the ICS feel safe and supported in their physical and mental health and wellbeing, and therefore are better able to provide high-quality, compassionate care to patients.
Growing for the future	2. Growing the workforce for the future and enabling adequate workforce supply	The system is retaining, recruiting and where required, growing its workforce to meet future need. The 'one workforce' across the ICS is representative of the local communities served.
Belonging in the NHS	3. Supporting inclusion and belonging for all, and creating a great experience for our people	People working and learning in the ICS can develop and thrive in a compassionate and inclusive environment. Issues of inequality and inequity are identified and addressed for all people working in the system. The workforce and leaders in the ICS are representative of the diverse population they serve.
	4. Valuing and supporting leadership at all levels, and lifelong learning	Leaders at every level live the behaviours and values set out in the People, and make strides so that this is the experience of work for all of their 'one workforce'.
New ways of working	5. Leading workforce transformation and new ways of working	Service redesign is enabled through new ways of working, which make the most of staff skills, use of technology and wider innovation – to both meet population health needs and drive efficiencies and value for money.
Growing for the future	6. Educating, training and developing our people and managing talent	Education and training plans and opportunities are aligned and fit for the needs of our people, patients and citizens, including to enable new ways of working and support meaningful and personalised career journeys.
Cross cutting	7. Driving and supporting broader social and economic development	Leaders ensure that their organisations leverage their role as anchor institutions and networks to create a vibrant local labour market, promote local social and economic growth in the wider community, support all ICS partners to 'level up', address wider health determinants and inequalities at the heart of poor health.
	8. Transforming people services and supporting our people profession	High-quality people services are delivery by a highly skilled people profession to meet the future needs of the 'one workforce', enabled by technology infrastructure and digital tools.
	9. Leading coordinated workforce planning and using actionable intelligence and analysis	Integrated and dynamic workforce, activity and finance planning meets current and future population, service and workforce needs, across programme, pathway and place.
	10. Supporting system design and development	The system uses organisational and cultural system design and development principals to support the establishment and development of the ICB, and the ICP. The organisational development approach creates a system-wide culture that is; driven by purpose; enables people, places and the system to fulfil their potential; is connected to the people served by the system and those delivering services; harnesses the best of behavioural, relational and structural approaches; and nurtures collaboration.



# Our workforce

## Local approach



## System workforce responsibilities to be considered in the future operating model

- System-wide workforce strategy as a guiding framework support transformation.
- System wide organisational development.
- Investment and funding.
- Single and consistent employment approach.
- Development of leadership.
- Greater ownership of education and training and partnerships with Universities.
- Developing new roles and ways of working aligned to local models of care.
- Detailed workforce planning to establish local capacity requirements.
- Enabling staff to work across organisational boundaries.
- Implementation of new roles and ways of working.
- Alignment and co-location of staff.
- Multi professional working.
- Closer links with voluntary sector.
- Northamptonshire Training Hub.



# Digital transformation across Northamptonshire

## Our vision for digital transformation across Northamptonshire is to:

- Empower: our population and workforce with access to digital solutions that are inclusive, integrated and high quality to revolutionise overall health, wellbeing and care.
- Inclusive: access to digital services that are easy to use and understand; supporting active management of health, care and wellbeing across diverse communities.
- Integrated: access to digital tools that provide joined up health and care details; facilitating access to holistic information across care pathways.
- High Quality: access to digital tools that are safe, reliable and efficient; enabling enhanced health, care and wellbeing experiences across our communities.

We have developed a digital transformation strategy to deliver our vision and meet digitisation requirements over the next three years and enable the effective delivery of integrated care.

For Northamptonshire, these ambitions were also considered in the context of:

- The 800,000 people that live in our county, all with different and distinct health and care needs.
- High level and complexity of demands on our services that we are currently challenged to meet.
- The desire to provide our population and workforce with the tools to proactively prevent and manage ill health.
- The ability for digital solutions to enable a collaborative and seamless health and care experience.
- How data can be utilised to best assess and identify ways to improve health and care outcomes.
- The digital transformation programmes that have been implemented to date across ICS organisations.



There are a number of core health, care and social drivers that have informed the need for transformation. These drivers reflect the key reasons why we need to transform and become more digital in order to provide the right care in the right setting across our communities and improve health and care outcomes for all. These transformation drivers include:

- Joining up health and care data.
- Addressing impacts of Covid-19.
- Connecting health and care pathways.
- Developing local insights to transform care.

With the possibilities of digital transformation in mind, it is the improved health, care and wellbeing outcomes for our population and workforce that remain at the heart of our continued transformation.



# Northamptonshire's future

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Over the next to five to ten years we want children, young people and adults

live your best life


We have ambitions to empower and support healthy local communities, so that local people have the best start in life and can live and age well and we will do that because:

- We are focussing on factors that really matter to people
- We have aligned our shared vision, aims, ambitions and outcomes for the first time
- We are collectively responsible for the delivery of these ambitions and outcomes
- We know that we can only make a positive difference by aligning our commitment, our resources and our strengths.

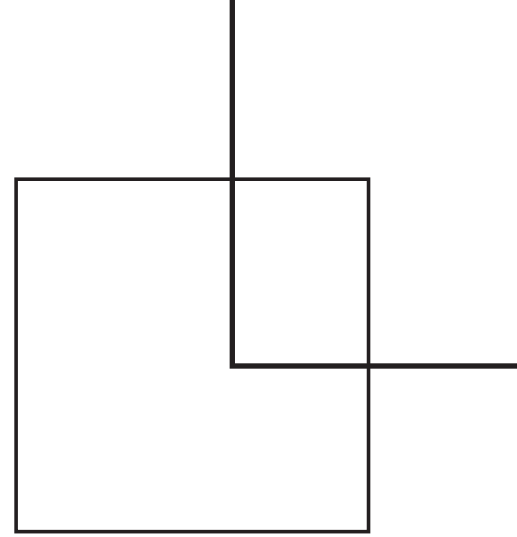
We have far reaching and ambitious plans and a clear focus on where we will start. We have a relentless focus on tackling inequalities and improving outcomes and together we will deliver positive change.



**We hope that by reading this strategy you feel our commitment and excitement about our approach to make sure that people in Northamptonshire have the best possible health, care and wellbeing outcomes. We recognise the challenges ahead and we are working together with our partners, anchor institutions and VCSE colleagues in a way that's different to ever before to achieve these outcomes, to help people of Northamptonshire 'live their best life' like everyone deserves.**



**A huge thank you to those involved in creating this strategy and to those who have helped shaped our areas of focus and we look forward to working with you as we move into how we deliver our strategy together.**



**A signatory sign off page  
will be included here  
before final submission**





Web: [icnorthamptonshire.org.uk](http://icnorthamptonshire.org.uk)



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Integrated Care Northamptonshire



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# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6 DECEMBER 2022

**CABINET MEMBER RESPONSIBLE FOR FINANCE: COUNCILLOR  
MALCOLM LONGLEY**

<b>Report Title</b>	<b>Procurement of a WNC Fleet management contract</b>
<b>Report Author</b>	<b>Jason Chambers, Head of Facilities, Public Realm &amp; Heritage</b> <a href="mailto:Jason.Chambers@westnorthants.gov.uk">Jason.Chambers@westnorthants.gov.uk</a>

## Contributors/Checkers/Approvers

<b>MO</b>	Catherine Whitehead	28/11/2022
<b>S151</b>	Martin Henry	25/11/2022
<b>Other Director</b>	Stuart Timmiss – Executive Director Place, Environment and Economy Simon Bowers – Assistant Director Assets and Environment	15/11/2022
<b>Communications</b>	Becky Hutson – Head of Communications	25/11/2022

## List of Appendices

None.

### 1. Purpose of Report

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1.1 To seek authority to procure a fleet management contract.

## **2. Executive Summary**

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- 2.1 WNC inherited from its predecessor councils a range of arrangements for provision of fleet vehicles. The Council's vehicles are typically cars, vans, and minibuses with additional ad hoc requirements for vehicles specific to a task. The inherited contracts are expiring and replacement arrangements for service provision are needed. There are separate arrangements for the South Northamptonshire waste fleet, so this is not covered in this report.
- 2.2 Whilst the Council has options including insourcing and use of entities controlled by the Council (either alone or with others), with high purchase costs, depreciating values, and ongoing maintenance costs of vehicles, the logical option is for the Council to outsource this requirement. Whilst many vehicles are 'off the shelf' some, such as minibuses for adult social care, are specialist and require adaptations to meet the service users' needs. This requires investment by the contractor. On this basis it is suggested a pragmatic approach would be to let three-year contracts with an optional one-year extension.
- 2.3 This contract would replace the currently disaggregated approach into one aggregated arrangement for the Council. A three- plus one-year option would enable the Council to secure efficient pricing whilst working towards its net zero 2030 objectives by maximising the opportunities to reduce carbon emissions from vehicles used on Council business.
- 2.4 At the end of the initial term it would be determined, based on technological advancements, if re-procurement or continuation best meet the needs of the Council. This is considered to represent the best mix of scale and scope, and should maximise value for money achieved, whilst also supporting social value.
- 2.5 The contract would, where applicable, include an option to incorporate services currently provided by other contractors or in-house. Decisions on whether to use those options would be taken separately.

## **3. Recommendations**

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- 3.1 It is recommended that approval is given to procure a new fleet management contract.

## **4. Reason for Recommendations**

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- 4.1 To ensure that the Council complies with statutory and regulatory duties.
- 4.2 To ensure that the Council vehicles are safe and fit for use.
- 4.3 To maximising cost-effectiveness.



- 4.4 To provide customers and staff of the Council with vehicles which are fit for purpose and welcoming.

## 5. Report Background

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- 5.1 The Council currently provides fleet management services via predecessor councils' contracts. Some of these contracts have been extended to allow for the procurement of activity to cover all WNC's requirements. The current contracts are with a range of providers including Enterprise, Longmarsh, SFS, Torton Bodies, TCH, NHS England, Alphabet, Northgate, and Days Fleet. There are 45 leased vehicles and 15 owned.
- 5.2 The Council also has a fleet of waste vehicles which operate in South Northamptonshire. Due to their specialist nature these are not addressed in this report. The nature of the vehicles does not permit meaningful aggregation with the wider fleet operation.
- 5.3 These arrangements will expire soon and should not be extended further, or where extensions are essential these should be minimised.
- 5.4 The requirement for the procurement of a fleet management service contracts is shown in the tables below. Table 1 shows the current number of vehicles used by Directorate and service area. Table 2 uses the current spend to demonstrate maximum use of a three-year contract with an optional one-year extension. Inevitably inflation will affect these prices, especially given its current rate.

<b>Table 1: Leased vehicles by type and service area</b>					
<b>Service area</b>	<b>Vehicle Type</b>				<b>Totals</b>
	<b>Cars</b>	<b>Vans</b>	<b>Nine seat accessible</b>	<b>Misc.</b>	
<i>People Directorate</i>					
ACS Management		1			<b>1</b>
Adult Services	5				<b>5</b>
Safeguarding and Wellbeing	3	9	7	1	<b>20</b>
<i>Place, Economy &amp; Environment Directorate</i>					
Assets & Environment		3		1	<b>4</b>
Highways & Waste	1	9			<b>10</b>
Regulatory Services		1			<b>1</b>
Housing and Communities		2			<b>2</b>
<i>Corporate Directorate</i>					
DTI		2			<b>2</b>
<b>Totals</b>	<b>9</b>	<b>27</b>	<b>7</b>	<b>2</b>	<b>45</b>

<b>Table 2: Type and values of vehicle contracts</b>			
<b>Vehicle type</b>	<b>No of vehicles</b>	<b>Estimated annual value, £k</b>	<b>Estimated total value (3 + 1), £k</b>
Cars	9	47	188
Vans	27	120	480
Nine seat accessible	7	71	284
Miscellaneous vehicles	2	11	44
<b>Total</b>	<b>45</b>	<b>249</b>	<b>996</b>

- 5.5 The predecessor councils delivered their fleet requirements via contracted and owned vehicles. Having reviewed the vehicle requirements, it is practical to continue with this arrangement and aggregate all contracted requirements together in a single contract. The contract would provide the option to replace owned vehicles with contracted vehicles when they reach the end of their life where this would maximise value for money. This would increase the contract value.
- 5.6 A three year contract with a one year optional extension is proposed. This should achieve the right balance between offering providers sufficient value to make competitive offers worthwhile and retaining flexibility for the Council. In particular, it would allow flexibility to take further steps towards a net zero fleet as the Council's 2030 target approaches and vehicle technology evolves. This contract should make progress towards that goal by substantially reducing the Council's CO<sub>2</sub> emissions through using new vehicles which utilise the latest technologies. These may include greater vehicle battery capabilities, higher efficiency, or new alternative fuel technologies.

## **6. Issues and Choices**

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- 6.1 The Council has a range of options in the provision of this service. At present there is a need to promptly secure a provision of services and in that context the approach set out above is recommended. Options which could be considered include the following:
- 6.1.1 Insourcing of the service. Insourcing can make sense in some cases, notably where the Council has sufficient demand to sustain a level of staffing and expertise in the services in question, and when quality of outsourced provision is hard to control. However, the existing contracts for these services have operated well, and insourcing would also create significant new costs associated with vehicle investment.
- 6.1.2 Disaggregation of the contract into small lots. A disaggregation would increase the time and processes requirement for administration of the contracts and is likely to increase the contract costs too.

- 6.1.3 Single outsourced contract. This is considered most likely to deliver value for money both in terms of the price secured and in terms of resource required to manage the contract.
- 6.2 It is therefore proposed to proceed on the basis of a single outsourced contract. Of course, if a specialist need arose which could not be delivered effectively within that contract a separate procurement would be undertaken.

## **7. Implications (including financial implications)**

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### **Resources and Financial**

- 7.1 Inflationary increases are likely to have an impact on the spending commitment of the contract at the point of award. There is no other foreseen increasing in spending commitments throughout the term of the contract. The services are ones the Council requires, and the approach is intended to secure value for money in receiving them.
- 7.2 Where it is not possible to align all current services e.g., service managed arrangements and owned vehicles, there may be future opportunities for savings through economies of scale by bringing the full West Northamptonshire service requirement into this contract during the term of the contract awarded.
- 7.3 The spending requirements for this contract are dictated by the service needs. The Fleet Management team provides assurance and compliance for the requirement but does not dictate the spend. This is held, and funded by, the services, based on their requirement to fulfil the needs of their service users.

### **Legal**

- 7.4 Maintaining vehicles in a fit state assists the Council in complying with its duties under the Road Traffic Act 1988, the Health and Safety at Work etc. Act 1974, and other relevant legislation.
- 7.5 Due to the value of the contract, the procurement will generally be subject to the Public Contracts Regulations 2015 (or potentially the UK Procurement Act if the bill is passed by Parliament and brought into force in time).
- 7.6 It may be necessary to extend, by variation, some existing contracts to bring them into alignment with the start date which can be achieved for the new contract. If required, waivers of the procurement rules would be sought under the applicable Constitutional provisions to enable this.

## **Risk**

- 7.7 The risks associated with this procurement appear to be low. It is mature market with established operators.
- 7.8 The risk of locking-in high-carbon vehicles will be minimised by the planned contract duration and the inclusion of social value, which includes carbon considerations, in award criteria.

## **Consultation**

- 7.9 No consultation has been undertaken.

## **Consideration by Overview and Scrutiny**

- 7.10 The issue has not been considered by an Overview and Scrutiny Committee.

## **Climate Impact**

- 7.11 Road vehicles are still typically fuelled by petrol or diesel, although increasing numbers are electric vehicles (EVs) or hybrid vehicles. Where practical EV or hybrid vehicles would be chosen under the contract.
- 7.12 As noted above, the risk of locking-in high-carbon vehicles will be minimised by the planned contract duration and the inclusion of social value, which includes carbon considerations, in award criteria.
- 7.13 Within and outside of this contract, the Fleet service would continue to work with services to find the best solutions for their mobility needs. In addition to cars and vans, this may include electric cycles, drones, or other technologies as these become available.

## **Community Impact**

- 7.14 There is limited likely direct community impact. Social value considerations will be included in assessment of proposals.

## **Communications**

- 7.15 No specific communications issues are expected.

## **8. Background Papers**

- 8.1 None.





# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6 DECEMBER 2022

## CABINET MEMBER RESPONSIBLE FOR ADULT SOCIAL CARE & PUBLIC HEALTH: COUNCILLOR MATT GOLBY

<b>Report Title</b>	Homecare Services Commissioning Intentions including extension to existing framework.
<b>Report Author</b>	Paul Smith, Commissioning Lead - Older People, <a href="mailto:paul.smith@westnorthants.gov.uk">paul.smith@westnorthants.gov.uk</a>

### Contributors/Checkers/Approvers

<b>Director of Legal and Democratic</b>	Catherine Whitehead	28/11/2022
<b>Executive Director Finance and S151</b>	Martin Henry	22/11/2022
<b>Executive Director Adults, Communities and Wellbeing</b>	Stuart Lackenby	09/11/2022
<b>Communications</b>	Becky Hutson	25/11/2022

### List of Appendices

#### Appendix A- Map of West Northamptonshire's Homecare Zones

#### 1. Purpose of Report

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- 1.1. To outline Adult Social Care intentions to commission and procure contractual arrangements for a sustainable and affordable supply of Care Quality Commission (CQC) registered homecare services for people aged 65+, people with a physical disability and for individuals with a diagnosed Mental Health condition.

- 1.2. To seek Cabinet approval for the Executive Director of People Services in conjunction with the Cabinet Member for Adult Social Care and Public Health to have delegated authority to tender, procure and award a new framework for CQC registered homecare to commence in July 2023.
- 1.3. To seek Cabinet approval for the Executive Director of People Services in conjunction with the Cabinet Member for Adult Social Care and Public Health to have delegated authority to extend the current framework for CQC homecare services until 30 September 2023 (at the latest) acknowledging that this framework may cease to be operational prior to this date due to the commencement of the new framework.

## **2. Executive Summary**

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- 2.1 West Northamptonshire Council (WNC) currently accesses a supply of CQC registered homecare services via a framework of 44 care providers. The existing contracts are due to expire on 31 March 2023.
- 2.2 During the covid pandemic, WNC, along with most other councils, paid for homecare on a planned hours basis and supported the homecare sector with covid grant funding including the workforce development fund. Post pandemic, the enhanced levels of demand linked to the NHS recovery plan, and the associated high hospital discharge activity combined with a slowdown in ability to recruit care workers, has led to an unstable homecare market in many parts of the UK including West Northamptonshire.
- 2.3 The current framework does not support the market (post covid), or the future conditions required to commission homecare services in a sustainable, collaborative and people focused manner.
- 2.4 A recommissioning project is underway to plan, design and procure a new framework for homecare which meets the needs of individuals and recognises the post covid market conditions. As well as changes to National Strategies i.e., Home First.
- 2.5 The project has involved undertaking substantial engagement and design work during the past four months seeking the views and input of key stakeholders. This has helped shape the model and future contract requirements within an outcome-based delivery model which is the basis for procuring new homecare arrangements ready for July 23.

The stakeholders have included:

- individuals who receive care
- Healthwatch
- local (and national) provider markets
- Adult Social Care colleagues including Reablement West
- Corporate Services colleagues
- NHS colleagues.

- 2.6 Recommissioning of a new framework to the required levels of compliance and quality will take a further seven months and it is therefore requested that the existing framework is extended to

accommodate the time required to successfully complete this, plus a prudent contingency period of two months.

### **3 Recommendations**

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3.1 It is recommended Cabinet approve that:

- a) A new framework for the purchasing of commissioned home care services be introduced from July 2023.
- b) duration of the framework will be four years with an inclusive option to extend for a further period of 12 months; resulting in a framework for a maximum duration of 5 years
- c) Applicants' admission to the framework will be determined via competitive tender
- d) The existing homecare framework is extended until 01 October 2023 (with a recognition that it will cease before 01 October 2023 to coincide with the commencement of the new framework)
- e) The Executive Director for People Services in conjunction with the Cabinet Member for Adult Social Care and Public Health is authorised to take all operational decisions necessary to implement the above recommendations.

#### **Alternative options**

- 3.2 Entirely insourcing the provision of home care; this is not recommended due to the anticipated significant additional costs.
- 3.3 Partially insourcing the provision of home care for rural packages. This could address the challenge of providing commissioned care in rural areas. This is not recommended; insourcing rural packages would increase the cost of home care. It would also reduce the amount of commissioned care by around 25%. This could undermine the operational and financial viability of providers.
- 3.4 An open approved list could be introduced as an alternative to a closed framework. This is not recommended because this could increase the number of providers with an associated increase in competition for home care packages which would further erode providers' operational and financial viability.
- 3.5 With the relevant approvals and consent of service providers the current notice period under the existing home care agreement could be extended for a further specified period. This is not recommended: commissioners have been working with providers for a considerable time on the co-produced proposal.

### **4 Report Background**

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- 4.1 The Care Act 2014 places a statutory duty on West Northamptonshire Council to provide care and support to people that have assessed and eligible social care needs

- 4.2 The Council's strategic objective, through the existing Adult Social Care Transformation Programme, is to support people to live independently within the community for as long as possible.
- 4.3 The primary aim of the new arrangements will be to improve the customer experience of commissioned home care by ensuring the timely availability of quality care throughout the West Northamptonshire area.
- 4.4 WNC, along with most other local authorities, paid on planned hours during the covid pandemic and supported the homecare sector with covid grant funding including the workforce development fund. Despite increased levels of demand the additional grant funding during the pandemic did support short term sustainability in the homecare sector. Post pandemic the enhanced levels of demand linked to the NHS recovery plan and the associated high Discharge to Assess (D2A) activity combined with a slowdown in ability to recruit care workers has led to a more unstable homecare market in many parts of the UK including West Northamptonshire.
- 4.5 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 as of September 2022 is that lead providers are delivering around 20% of hours, secondary providers are delivering 67% of hours and off framework providers – commonly referred to as spot providers - are delivering 13% of total commissioned hours.
- 4.6 WNC has 44 providers on its framework but also has packages of care provided by a varying number of, spot providers. Commissioning from such a large and fragmented volume of providers is undesirable and leads to inefficiency, additional quality risks and costs. The volume of providers from which WNC commission also leads to a loss of the opportunity from economies of scale.
- 4.7 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.
- 4.8 The rapid increases in the National Living Wage during the past few years and the expected continued rise of this is very welcome, particularly in a sector which has traditionally been undervalued and under rewarded. However, when combined with the large increases in general inflation and rising vehicle fuel costs it is very difficult for local authorities to pay a sustainable rate for care and to maintain relationships and partnerships with care providers.
- 4.9 The impact of covid, vehicle fuel costs, the general increased costs of living and a lack of parity for care workers with NHS colleagues cannot be underestimated. Along with all local authorities, WNC is seeing a gradual reduction in care worker capacity and to simply keep pace with current demand it is estimated that additional 40/50 care workers are required.

#### 4.10 **Demand for Homecare**

Based on a snapshot taken w/c 23rd October 2022 :

4.10.1 WNC is providing home care to around 1,000 people through approximately 17,750 hours per week, split between 15,200 framework hours (86%) and 2,550 spot hours (14%) per week.

4.10.2 The total spend on homecare is c.£350,000 per week or c.£18 million per annum.

#### 4.11 Supply Chain

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

Table 1

Homecare hours awaiting allocation placement 13/10/22							
Daventry 1	Daventry 2	Northampton 1	Northampton 2	Northampton 3	South Northampton 1	South Northampton 2	Total hours waiting
224	99.25	147	54.75	33.25	104.75	122.65	785.65

4.11.2 Providers across WNC are predominantly local SMEs with smaller numbers of regional or national providers. In WNC's area some national providers deliver predominantly "self-funder" care and are unwilling or unable to deliver on behalf of the Council.

Table 2

Providers by zone						
Zone	Towns and villages	Rate £'s	No. of providers	Local SME's	Regional	National
Daventry 1	Daventry, Braunston	19.39	12	11	0	1
Daventry 2	Long Buckby, Rugby, Kilsby	20.32	13	1	0	2
South Northampton 1	Brackley, Middleton, Cheney, Silverstone	20.32	10	7	1	2
South Northampton 2	Bugbrook, Towcester, Old Stratford, Tiffield	20.32	8	6	1	1
Northampton 1	Kingsthorpe, Duston	18	10	5	0	5
Northampton 2	Town Centre, Hardingstone, Wooton, Far Cotton	18	10	7	1	2
Northampton 3	Billing Weston, Favel, Thorpeland, Lumertubs	18	11	6	1	4
Total	West Northamptonshire		74	43	4	17

4.11.3 In WNC there are 55 Homecare Providers registered with CQC.

Table 3

CQC Ratings of WNC Registered Homecare Providers					
Outstanding	Good	Requires Improvement	Inadequate	Note yet inspected	Total
2	31	15	0	7	55



## 4.12 Fair Cost of Care (FCoC)

4.12.1 In recognition of the imminent Adult Social Care Reforms ([Proposed reforms to adult social care \(including cap on care costs\) - House of Commons Library \(parliament.uk\)](#) ) WNC, alongside several other East Midlands local authorities, commissioned the services of Care Analytics , a specialist in the financial analysis of care markets and the cost of care, to undertake a 'Fair Cost of Care' (FCoC) detailed cost analysis exercise.

4.12.2 All providers operating in the domiciliary home care market within the area of the local authority were sent a detailed survey designed to capture the necessary operational and contextual detail to draw out the inherent costs of delivering care in the local market.

4.12.3 In compliance with the latest language contained within the guidance and resulting grant conditions for additional funding, WNC is committed only to "moving towards" the calculated FCoC rates (including any future inflationary uplift as negotiated). Guidance is published on the Government website: <https://www.gov.uk/government/publications/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance>

## 5. Proposed approach

5.1 The current Care Home Services Framework and Dynamic Purchasing System contracts are due to end on the 31 March 2023. The proposed extension until a maximum date of September 2023 will create sufficient time including a prudent short contingency to recommission a new framework by July 2023.

5.2 In recognition of the incoming reforms, post covid market turbulence, impact of the cost of living on the cost of delivering care and the low wages of care workers WNC has embarked on a bold, multi-faceted and strategic review of its model and approach to homecare. Much more than simply a "tendering exercise", the Home Care Recommissioning Project (HRP) is a total overhaul, rethink, and co-design of the homecare sector in West Northamptonshire.

5.3 The new model and service specification along with the intention to recommission in 2023 will be an opportunity to decisively advance WNC's move towards provider consolidation and more concise geographic/place based and demographic commissioning.

5.4 Amongst several key deliverables, the new model will support an additional focus on the following outcomes:

- a. supporting people to remain independent for longer in their own homes
- b. increasing the available capacity of services and support
- c. making it easier for people to find support and participate in their communities
- d. helping people to manage their own conditions for example, through peer support, using digital solutions for assistive technology.

5.5 Commissioning of homecare will also integrate closely with WNC's successful 3 Conversations Model and seek to achieve strengths based commissioning and progressive delivery.

5.6 Within the specification workstream work has been undertaken with WNC's Reablement West, providers, service users, Adult Social Care teams and Brokerage to ensure that the ethos of home first and strengths based reablement are embedded within ongoing service delivery by independent providers.

### **5.7 Specific Deliverables of the Homecare Recommissioning Project (HRP)**

- a. A compliant procurement exercise via competitive tender
- b. New approach and model for commissioned home care services
- c. New Service Specification for commissioned home care services
- d. New Contract for commissioned home care services
- e. New approach to quality assurance including the use of Electronic Call Monitoring (ECM) and outcome focused KPIs
- f. Revised internal systems and processes to support the new model including the potential for a digital provider portal
- g. Increased support and imperatives for providers to build capacity
- h. Improved customer experience including a potential requirement for only providers rated GOOD by CQC being eligible to join the framework
- i. Technology as standard throughout the end-to-end homecare process
- j. Improved availability of quality homecare throughout West Northants
- k. Better pay and terms and conditions for care workers
- l. Increased support for providers on recruitment and retention
- m. A reduction in the environmental impact of service delivery via an increase in walking runs and electric vehicles
- n. The introduction of the mandatory use of Electronic Rostering and digitised Care Planning systems
- o. New opportunity for providers to embrace the 3-conversation model and deliver strengths-based services
- p. New opportunity for community assets and the community themselves to become part of delivery
- q. Increased individualised outcomes linked to 3 conversations, increase in satisfaction with the service. and a subsequent reduction in demand
- r. New approach to rate setting which will lead to better margins
- s. A more resilient and sustainable home care sector
- t. Improved efficiency of service delivery including reduced travel time
- u. Increased collaboration between providers and WNC at a strategic and operational level
- v. Need to describe fit to local area partnerships
- w. Increased economy of scale
- x. Single handed care requirement

## **6 Contribution to the Corporate Strategy/Service Plans**

6.2 The overarching project and the products it delivers (including a redesigned service specification and contract for homecare) will place particular emphasis on linked priorities within the Corporate Plan:

#### 6.2.1 *Priority 1: Green and Clean*

In recognition of the environmental impact of homecare (particularly in the rural zones, via travel by care workers), the specification will include performance measures linked to reduced mileage, efficiency of rotas, progression towards the use of electric vehicles and an increase in the use of walking and cycling care rounds.

#### 6.2.2 *Priority 2: Improved Life Chances*

In recognition of the prominence of homecare in the daily lives of some of our most vulnerable residents, the redesigned approach will deliver improved outcomes using community assets and creating strengths based and technology led care located at the geographic centre of communities to ensure delivery with localised context.

#### 6.2.3 *Priority 3: Connected Communities*

The project will deliver an improved use of transport networks, increase the use of electric vehicles, and encourage geographic, zone-based recruitment to minimise travel. The increased use of technology (mobile and fixed) in both the frontline delivery of care and the operational aspects of care delivery such as rostering and call monitoring will connect communities more closely with the service, build resilience and increase access to support networks.

#### 6.2.4 *Priority 4: Thriving Villages and Towns*

High quality care often derives from being localised geographically and by recognising the cultural and demographic conditions of an area. A care worker who lives in the area that aligns with the zone in which they work can make a huge difference to the quality of care and empathy that an individual receives. Simple things such as a care worker being able to speak in the individual's first language which may not be English and being able to chat about local news issues whilst in the customer's home can make the individual feel a continued connection to their community. Villages and smaller towns benefit greatly from a cluster of care workers who concentrate their delivery within the area and the new contract will encourage local recruitment bringing employment and revenue to communities.

#### 6.2.5 *Priority 5: Economic Development*

Health and Social Care are often one of the largest employers in a local authority area and contributes hugely to GDP in West Northants. The homecare project has an estimated value of c.£17 million per annum (c.£85 million overall) and sustains and creates employment for 1000's of people. The homecare sector currently has recruitment and retention issues, and the project will deliver increased numbers of care workers and increased revenue in all areas of West Northants.

#### 6.2.6 *Priority 6: Robust Resource Management*

The project will seek to reduce the number of care providers that WNC contract manages, quality assures and commissions with. Creating economy of scale and efficiency from both increased volumes with less providers and reducing overheads of operating care the new contract will utilise council resources more effectively and proactively.

Creating a more sustainable footing for the care sector with long term, robust but fair contracts will allow providers to confidently invest in technology and work collaboratively with the Council and each other.

A fragile homecare sector such as West Northants has (along with many other English LA's) is expensive, resource hungry and difficult to manage. This results in unplanned costs and demand failure for WNC, and the project will seek to bring this under control.

6.3 The project will also link to the objectives and outcomes of the Council's Anti-Poverty Strategy; good, high-quality, sustainable homecare can be an enabler to help support people out of poverty, for example:-

6.3.1 The Anti-Poverty Strategy states: *"There is still a strong association between unemployment and poverty, along with a significant rise of in-work poverty.*

*Some people living in higher working households comprised 17% of people living in poverty in 2018/19, compared to 14% 10 years earlier and 9% in 1996/97.*

*People living in lower work intensity households comprised 47% of people living in poverty in 2018/19, compared to 42% 10 years earlier and 35% in 1996/97."*

6.3.2 Better employment conditions and an increase in employment opportunities for care workers can support people to move out of the position of living in poverty whilst in work.

6.3.3 The Anti-Poverty Strategy also states:

*"Lone parents, large families, carers and care leavers are more likely to experience poverty than people without children or caring responsibilities."*

6.3.4 A deliverable of the project is that good, high-quality, sustainable homecare will support family carers to enjoy more fulfilled and active lives in the knowledge that their relative is safely supported at home.

## **7 Financial Implications**

7.1 It is not anticipated that the proposed framework will have any impact on the current resources available. The new arrangements should reduce any delay in the provision of home care. This will also ensure the resources of the Home First service are focussed on reablement and hospital discharge.

7.2 The Council's annual gross expenditure on commissioned home care during the 2022/23 financial year was £18 m. The expenditure will continue the strength-based ethos to ensure people receive the right amount of care at the right time in the right place.

7.3 A detailed business case was produced, and this has been fully supported by the Council's Programme Management Office and Corporate Procurement Unit.

## **8 Legal Implications**

8.1 The Council has a statutory duty to provide care and support for people who meet the eligibility criteria as set out in the Care Act 2014 and supporting legislative framework. The Council has a duty to provide or arrange services that help prevent people developing needs for care and support or delay people deteriorating such that they would need ongoing care and support. The Council may meet that duty by providing the care and support itself or by arranging for a person other than it to provide a

service. The legislation anticipates that needs for care and support can be met in a variety of ways, including the provision of homecare.

8.2 It is anticipated that the proposed procurement exercise will enable the Council to continue to provide a diversity of service that will continue to meet these requirements.

8.3 Under the Public Contract Regulations (PCR 2015), provision of homecare services for people age 65 and over is covered by the Light Touch Regime. The estimated value of the framework is in excess of the Light Touch Regime threshold and therefore governed by PCR 2015. Regulation 33 of the Public Contracts Regulations PCR 2015 sets out the procedure for establishing and awarding contracts under a framework. It states that a framework agreement 'shall not exceed 4 years, save in exceptional cases duly justified, by the subject-matter of the framework agreement.

8.4 The award of the new framework is subject to the Council's Contract Procedure Rules in that Cabinet approval to award the framework would be required. This report is requesting that Cabinet delegate authority to award the framework to the Executive Director of Adults, Communities and Wellbeing.

8.5 The procurement and contractual provisions for the implementation of the recommended option will be undertaken with the advice and support provided by the Council's Legal and Procurement services.

## 9 Risk management

9.1 If the recommendations described in the report are not approved, it will result in the Council not having appropriate arrangements in place to purchase homecare services. This means without the recommended extension the council could fail to meet its statutory duties under the Care Act 2014 when the current framework expires in March 2023.

9.2 The introduction of a framework will enhance the customers experience by improving providers' operational and financial viability linked to an improved service specification and suitable contract.

9.3 Providers may choose not to apply, or their application may be unsuccessful. However, extensive and ongoing engagement has indicated that the majority will wish to continue to deliver to current commissioned customers if successful and until review if they are unsuccessful. Many providers, if unsuccessful, have indicated that they will realign their businesses to focus on providing home care services to people that fund their own care. Therefore, it is doubtful that any significant discontinuity of service provision will occur directly because of the introduction of the framework.

9.4 It should be acknowledged that all recommissioning of homecare exercises come with the risk of some potential disruption to individuals and the Council. The risks associated with this project are acknowledged and detailed within an ongoing Risk Register which has been/will be reviewed regularly throughout the project.

*Table 4*

### 9.5 Risk Register

Risk	Score	Proposed Mitigation	Score
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Destabilising the market	<b>MED</b>	The proposal will be co-produced with council-approved providers during the next 6 months. A Provider Reference Group has been created to inform the new approach and model. Ongoing market engagement indicates significant levels of interest in the opportunity both from current suppliers and prospective providers wishing to deliver commissioned home care on behalf of the council.	<b>LOW</b>
Lack of interest from current providers in the new arrangements	<b>MED</b>	<p>Providers may discontinue the delivery of commissioned care and focus their activity on self-funders. It is estimated that provision to people who purchase their own care equates to a large percentage of the care delivered by many approved providers.</p> <p>However, as stated in the previous mitigation, there is currently no indication that there will be insufficient interest in this opportunity.</p> <p>Incumbent suppliers who choose not to apply or are unsuccessful in the tender will have the option to continue to deliver commissioned care to current individuals (until annual review at the latest). Should providers decide to exit the market, support will be offered to ensure a timely and seamless transition of provision.</p>	<b>LOW</b>
Disruption to continuity of service provision for customers	<b>MED</b>	A communications plan is being developed which will ensure individuals who receive care and stakeholders are aware of the process and outcome of the tender, along with key timescales. All measures to minimise any disruption will be taken.	<b>LOW</b>
Damage to the Council's reputation as a result of enforced changes of service provision to individuals who receive care as a result of the tender	<b>MED</b>	The communications plan will provide timely, accurate and transparent messaging that explains the process and outcome of the tender to customers and stakeholders. All measures to minimise any reputational impact will be taken.	<b>LOW</b>

Delay in awarding the contract as a result of challenge from applicants regarding the delivery and /or outcome of the tender process	<b>MED</b>	The tender process will be compliant with legislation and council processes. In the event of delay it has been recommended that the current contract is extended until September 2023 to create a 2/3 months contingency.	<b>MED</b>

<b>Low</b>	Monitor as necessary
<b>Medium</b>	Medium Likely to cause the project some difficulties – regular monitoring needed
<b>High</b>	High Excess of likely project risk appetite – action needed to redress; very regular monitoring needed

## 10 Consultees discussion point and suggested consultees

10.1 Healthwatch are to be requested to seek the views of people who receive care and families

10.2 Care at Home Approved Providers – A Provider Reference Group was established in October 2022 for providers to inform the design of the approach and model.

10.3 All Member Briefing Sessions will be arranged early in 2023 to ensure councillors are kept informed and engaged on the process

10.4 Adult Social Care Operations have been actively involved in all project workstreams

10.5 The New Arrangements for Commissioned Home Care report can be reviewed by the appropriate Scrutiny Committee.

## 11 Equality implications

11.1 An Equalities Impact Assessment (EIA) will be undertaken if the tender is approved to progress

11.2 Under section 149 of the Equality Act 2010, the ‘general duty’ on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to:

- a) eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under this Act.
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

11.3 The Council is committed to equality and diversity using the Public Sector Equality Duty (Equality Act 2010) to eliminate unlawful discrimination, advance equality of opportunity and foster good relations.

11.4 The Public Sector Equality Duty (specific duty) requires us to consider how the Council can positively contribute to the advancement of equality and good relations and demonstrate that it is paying 'due regard' in its decision making in the design of policies and in the delivery of services. Providers will be made aware of their contractual requirements regarding equality legislation.

11.5 The decision does not discontinue any service and has no detrimental impact to eligible service users.

## **12 Communications and engagement**

12.1 Communications activities must effectively inform all those affected by the recommissioning and support and serve to increase further engagement with providers. To achieve this a robust communications and engagement plan is being developed.

12.2 The communications and engagement plan aligns with key project milestones with a focus on targeted messaging and activities to identified audiences, including current and prospective providers, stakeholders, members of the public, service users and stakeholders.

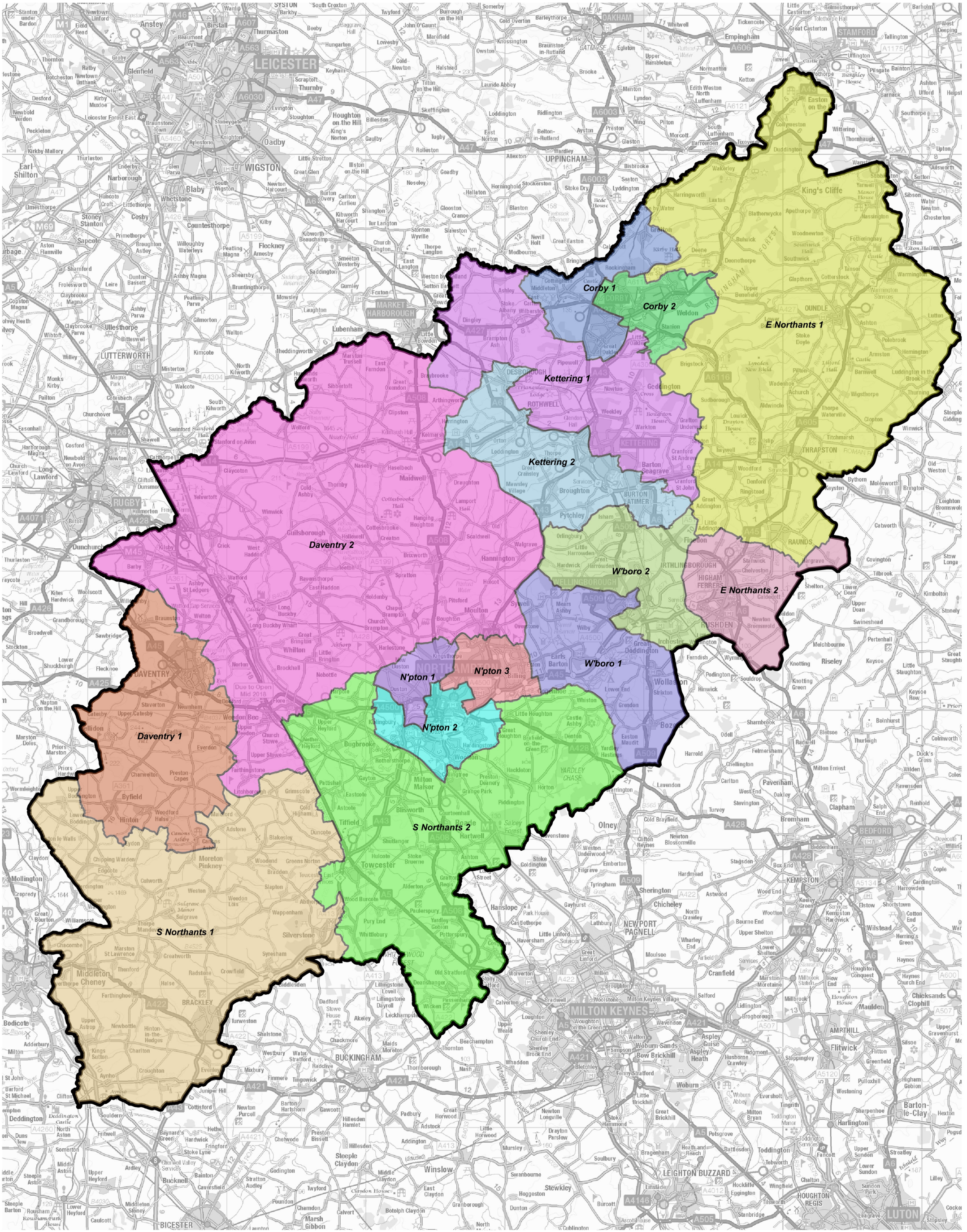
### **Appendix A- Map of West Northamptonshire's Homecare Zones**



Home Care Zones  
Northamptonshire Co









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# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6<sup>TH</sup> DECEMBER 2022

**CABINET MEMBER RESPONSIBLE FOR FINANCE – COUNCILLOR  
MALCOLM LONGLEY**

<b>Report Title</b>	<b>Extended photovoltaic system for One Angel Square</b>
<b>Report Author</b>	<b>Colin Barrett, Head of Works</b> <a href="mailto:Colin.Barrett@westnorthants.gov.uk">Colin.Barrett@westnorthants.gov.uk</a>

## Contributors/Checkers/Approvers

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<b>S151</b>	<b>Martin Henry</b>	22/11/22
<b>Other Director</b>	<b>Stuart Timmiss</b> – Executive Director Place, Environment & Economy <b>Simon Bowers</b> – Assistant Director Assets & Environment	17/11/22
<b>Communications</b>	<b>Becky Hutson</b> – Head of Communications	25/11/22

## List of Appendices

None

## **1. Purpose of Report**

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- 1.1 To seek approval for capital budget of £102k in 2022/23 to extend the photovoltaic (PV) array and install a green roof at One Angel Square, Northampton.

## **2. Executive Summary**

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- 2.1 One Angel Square ('Angel') was built with a range of sustainability measures. One of these, pebble roofs, became a problem with crow attacks. The pebbles were therefore removed.
- 2.2 It is proposed to use the space freed up by extending the PV system on the roof. This offers an excellent financial return as well as contributing to the Council's net zero goals.
- 2.3 A green roof is also proposed to be installed to help retain Angel's contribution to sustainability.
- 2.4 The system would cost £102k to install, including a green roof. Payback should be in four years.

## **3. Recommendations**

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- 3.1 It is recommended that Cabinet:
- 3.1.1 Approve a capital budget of £102k in 2022/23 to extend the photovoltaic array and install a green roof at One Angel Square.
- 3.1.2 Authorise the procurement of services and works and entering of contracts to facilitate the works.

## **4. Reason for Recommendations**

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- 4.1 To help with mitigating the electricity costs of the building.
- 4.2 To support the Council's efforts in meeting the net zero target for 2030 by increasing the generation capacity from renewable resources.
- 4.3 To assist in keep the building in good repair.

## **5. Report Background**

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- 5.1 The Council holds a long lease on its offices at One Angel Square, Northampton, and has a right to repurchase the building at a discounted rate at the end of the lease. It thus has

most of the interests of a freeholder. It is also obliged under the lease to keep the building in good repair.

- 5.2 The building was constructed with a range of sustainability measures including solar (photovoltaic, PV) panels and a pebble roof, designed to slow run-off. However, crows have taken to using the pebbles to attack what they perceive as threats, typically reflections in the glazing of the building. This has resulted in a need for expensive repairs.
- 5.3 Accordingly, the pebbles from the lower roof elevation have been removed. This has left parts of the roof with no positive use and insulation materials without protection which can lead to its deterioration. Given the Council's need to save money, the high price of energy, and the Council's net zero goal, the option of further solar panels was explored. This would enable the Council to increase its electricity generation capacity from renewable sources.
- 5.4 An outline design has been prepared which extends the Angel PV system to the largest practicable extent. Extending the PV system in this way would lead to an additional electricity generation of around 89,000 kWh per year. The annual electricity consumption for Angel is around 1,000,000 kWh and the annual generation from the existing PV system is just under 100,000 kWh. The half hourly electricity data for Angel has been reviewed and the building can consume most if not all the electricity generated by the proposed PV System. This offers the highest financial benefits. The cost for the proposed PV system is £77k.
- 5.5 The potential for increasing the size of the array has been reviewed from a planning perspective. Since the installation is less than one megawatt (MW) it would be permitted development.
- 5.6 It is also proposed to extend existing green roof system to further mitigate the risks of pebble damage to the building's glazing. This will also help with the building maintain its sustainability performing including mitigating runoff from the building. This would cost around £25k.
- 5.7 The annual financial savings based on current electricity rates are £24k. This means that the payback would be around 4.2 years for the whole cost, or 3.2 years considering the PV element only.

## **6. Issues and Choices**

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- 6.1 The choices available to the Council are as follows.
  - A. Do nothing and leave the building as it is. This would not enable the Council to mitigate against increasing energy costs or carbon emissions. The area from where

the pebble was removed will still need to be covered to avoid damaging the roof insulation.

B. Carry out the proposed installation.

C. It would also be possible to omit the green roof improvements. However, these help to secure the building against further expensive damage and also help ensure it does not contribute to flooding.

6.2 Option B above is the only option that enables the Council to effectively support its objectives by mitigating energy costs for this building, decreasing its emissions, and keeping it in good repair.

## **7. Implications (including financial implications)**

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### **Resources and Financial**

7.1 A capital budget of £102k is proposed. This would help with decreasing the annual electricity budget for the building by £23k, as well as minimising future costs from bird damage.

### **Legal**

7.2 The Council can install the additional PV system under s111 LGA 1972 as incidental to its wider responsibilities to deliver services through the ownership and management of buildings used for the purpose of service delivery.

7.3 Sale of surplus power, if any is generated, is permitted under the Sale of Electricity by Local Authorities (England and Wales) Regulations 2010, made under Section 11(3)(1) of the Local Government (Miscellaneous Provisions) Act 1976.

### **Risks**

7.4 The project carries a number of inherent risks, notably:

7.4.1 Works could be delayed due to material and labour supply issues. This could be mitigated by the early ordering of materials by the contractor and agreed programme between the parties.

7.4.2 There is a capacity pressure on the grid which can lead the grid operator to reject connecting the extended PV system to the grid. This would mean that any non-consumed generated electricity would not be exported. This risk is considered low, and the risks of



surplus power being generated and thus wasted is also considered low due to the balance between building energy needs and the size of the PV system.

### **Consultation**

7.5 No consultation is considered necessary for this specific scheme.

### **Climate Impact**

7.6 This project will help with increasing the generation capacity from renewable resources.

### **Community Impact**

7.7 No direct community impacts appear likely to arise from this scheme.

### **Communications**

7.8 Communications activities will focus on the outcomes and benefits of this scheme as to how it supports the council's net zero commitment and management of its cost pressures.

## **8. Background Papers**

8.1 None.

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# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6<sup>TH</sup> DECEMBER 2022

## CABINET MEMBER RESPONSIBLE FOR CHILDREN, FAMILIES, EDUCATION AND SKILLS – COUNCILLOR FIONA BAKER

<b>Report Title</b>	<b>Procurement and implementation of Children’s Social Care Case Management System</b>
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<b>Report Author</b>	<b>Tony Challinor, Assistant Director of Commissioning &amp; Partnerships</b> <a href="mailto:tony.challinor@westnorthants.gov.uk">tony.challinor@westnorthants.gov.uk</a>
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### Contributors/Checkers/Approvers

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<b>West S151</b>	Martin Henry	22/11/22
<b>Other Director/SME</b>	Stuart Lackenby Gus De Silva Chris Wales	15/11/2022
<b>Communications Lead/Head of Communications</b>	Becky Hutson	15/11/2022

### List of Appendices

None

#### 1. Purpose of Report

- 1.1 To seek approval to proceed with the replacement of the Case Management System for Children’s Social Care across Northamptonshire, which will be used by Northamptonshire Children’s Trust (NCT) in the delivery of children’s social care. This will be funded by West and North Northamptonshire Councils (WNC and NNC).

## **2. Executive Summary**

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- 2.1 West Northamptonshire Council (WNC) and North Northamptonshire Council (NNC) (collectively the Councils) contract NCT to provide Children's Social Care and other related services across Northamptonshire through to a Service Delivery Contract. To achieve this, and under the Service Delivery Contract with NCT, the Council(s) must provide an IT (Case Management) system to manage and record statutory and contractual information and to operate effectively.
- 2.2 The current contractual arrangements with OLM for the provision of a case management system end in January 2025. There is a risk that from January 2025 WNC and NNC could not fulfil statutory requirements relating to the provision of social care services in Northamptonshire, because there would be no system in place to enable this.
- 2.3 There is no provision for the current contract for the NCT Case Management system to be extended beyond January 2025.
- 2.4 This report outlines the costs associated with procuring and implementing a new Case Management System contract.

## **3. Recommendations**

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- 3.1 It is recommended that the Cabinet and then on to Council for approval due to the financial value:
  - a) Agrees to proceed with the replacement of the Case Management System for the Children's Social Care across Northamptonshire, which will be operated by Northants Children's Trust (NCT), with a financial contribution by WNC of £1.573m as outlined in section 6.
  - b) Delegates authority to the Lead Member for Children, Families, Education and Skills, in liaison with the Executive Director of People Services, to take any further decisions and actions required to implement the Case Management System and award contracts in relation to this.
  - c) Recommends to Council that a budget change is made as set out in the report, and that it delegates authority to the Cabinet Member for Finance in consultation with the Executive Director of Finance to access and utilise appropriate funding for the Case Management System for Children's Social Care.

## **4. Reason for Recommendations**

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- 4.1 To implement a new Case Management System that is fit for purpose and meets the statutory obligations for delivering Children's Social Care across Northamptonshire.
- 4.2 Other alternatives considered include:

- For the current system (CareFirst) to continue to be used impacting the transformation and process changes to be reflected on the case management system.
- For the Eclipse system to be implemented under the current service and system. However, the contract will still expire in Jan 2025 and a re-procurement would need to begin prior to implementation of the system in order to award a new contract.
- To have no case management system would not be a viable option that could be considered.
- There are no other case management software applications in use within the Council that that could be utilised by NCT.

## 5. Report Background

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- 5.1 During 2019 Northamptonshire County Council awarded a contract with OLM (Eclipse) for the provision of a Children’s and Adult Social Care Case Management System and associated finance modules. Implementation commenced with Adult Social Care, which went live ahead of the vesting day of the new Councils.
- 5.2 Between the contract being awarded in 2019 and the planned implementation of the new system, Children’s Social Care Services in Northamptonshire were transferred into an independent organisation, Northamptonshire Children’s Trust (NCT). This followed a direction from the Secretary of State for Education. Northamptonshire County Council was also disbanded and replaced by the two new Unitary Councils.
- 5.3 The relationship between the Councils and NCT is governed by a set of contractual agreements. Under the terms of these agreements, NCT is responsible for the delivery of children’s social care. However, the Councils retain responsibility for the provision of defined and agreed support services, including a database (case management system) that allows NCT to deliver services effectively. This is one of the key contractual dependencies on the Councils in the formal agreements.
- 5.4 Post-vesting day, the OLM (Eclipse) implementation programme was transferred to joint responsibility between the Councils and NCT. The Eclipse Implementation programme team undertook an implementation readiness review and identified concerns with the application of the system to Children’s Social Care. Whilst the supplier OLM worked with the Councils to rectify these the timescales for fixes implied that the solution would be implemented in the last 12 months of the OLM contract. This was not acceptable to the Councils or NCT because of the risks and uncertainty associated with these system issues. It was agreed therefore to seek alternative arrangements.



## 6. Issues and Choices

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- 6.1 Since the issues were identified in September 2021, NCT have continued working with the Councils' Programme team to shape the way forward and much effort was spent trying to make the existing contract work, with supplier workshops and analysis of the Eclipse product. However, despite this effort, in February 2022 the conclusion was that there was no way forward with the current OLM Eclipse contract and therefore a new procurement is now needed.
- 6.2 The scope of the programme is for a procurement and implementation of a new IT Case Management System for use by NCT under the NCT contract to provide services to Children and Families across Northamptonshire. This programme is shared with NNC and conditional on NNC receiving approval of their contribution. The NNC approval process is through Executive (Cabinet) that took place on 10<sup>th</sup> November 2022, and will be presented to NNC Council on 24<sup>th</sup> November

## 7. Implications (including financial implications)

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### 7.1 Resources and Financial

- 7.1.1 The costs of the system will be borne by West and North Northamptonshire Councils. In totality the estimated programme of work is £2.8m and is to be apportioned between both councils by their respective NCT contract share. The West Northamptonshire Council share of the costs (56%) equate to £1.573m over the next 4 financial years to implement this system. The details are set out in table 1.

**Table 1: Estimated Cost of Programme**

Phase	Estimated totals	2022/23	2023/24	2024/25	2025/26	TOTALS
Ongoing development of CareFirst (for next 18 months)	£150,000	£75,000	£75,000	£ -		<b><u>£150,000</u></b>
Procurement Programme SME costs	£429,125	£429,125	£ -	£ -	£ -	<b><u>£429,125</u></b>
New Case Management Implementation Programme	£1,800,000	£ -	£900,000	£900,000	£ -	<b><u>£1,800,000</u></b>

System Processes Optimisation	£430,000	£ -	£ -	£215,000	£215,000	<b><u>£430,000</u></b>
<b>TOTAL --&gt;</b>	<b><u>£ 504,125</u></b>	<b><u>£975,000</u></b>	<b><u>£1,115,000</u></b>	<b><u>£215,000</u></b>	<b><u>£2,809,125</u></b>	
<b>SPLIT</b>						
NNC (44%)	<b><u>£ 221,815</u></b>	<b><u>£429,000</u></b>	<b><u>£490,600</u></b>	<b><u>£94,600</u></b>	<b><u>£1,236,015</u></b>	
WNC (56%)	<b><u>£ 282,310</u></b>	<b><u>£546,000</u></b>	<b><u>£624,400</u></b>	<b><u>£120,400</u></b>	<b><u>£1,573,110</u></b>	

- 7.1.2 It should also be noted that there are current budgeted revenue costs associated with the OLM CareFirst System to consider within this. It is intended that these “Licence and Hosting” costs are used for the ongoing licence and hosting of a new solution. The current revenue spend on OLM CareFirst is £183,000 per annum and previous bids (from the 2019 procurement) suggest a likely range from £180,000 to £250,000 per annum (at 2019 prices). This base budget will be explored during the procurement phase, and if budget additionality is required due to an increase in licence costs, this will be adjusted for in the budget setting process preceding the year of implementation, alongside budgeting for any efficiency savings that the new system may deliver.
- 7.1.3 Within the original NCT budget there were a set of efficiency savings identified against the implementation of OLM Eclipse that were not fully realised because the system was not able to be utilised as anticipated. As a base these would be the assumed efficiencies because of this work and would therefore start to be delivered from January 2025 under the current plan. It is envisaged that improvements and efficiencies will be realised through implementation of the case management by allowing re-design of processes. Potentially further efficiencies will be realised once the system is implemented as changes required to reflect transformation within the Trust can be implemented within the system
- 7.1.4 As cloud-based systems are generally revenue in nature, funding for the project will initially be met from Transformation funding or alternatively revenue reserves. However, a decision on whether any of the costs can be capitalised, in line with the accounting code of practice, will be considered once the procurement route is finalised and will be a judgement by the respective S151 Officers.

## 7.2 Legal and Governance

- 7.2.1 The Service Delivery Contract between the Councils and NCT defines a range of activities provided by the Councils that NCT is dependent on to deliver the Services successfully. These are known as the Council Dependencies. These are to be carried out by the Councils free of charge and NCT will not have to pay the Councils in respect of the performance of the Dependencies.

- 7.2.2 If the Councils do not fulfil the Council Dependencies, NCT may claim a Relief Event, which is an event which has a direct adverse impact on NCT's delivery of the Services.
- 7.2.3 One of the specific contract dependencies is for the Councils to procure for NCT access to and the use of a database (a case management system).
- 7.2.4 The current system contract was awarded under the G-Cloud Framework and commenced in 2021. The initial contract term was for 2 years, but Northamptonshire County Council exercised the right to extend this by a further 2 years at contract commencement. This is the maximum extension allowable under the current system contract, and there is no further contractual entitlement to extend the term.
- 7.2.5 When the term of current system contract expires, the Councils will need to have in place a Case Management System in order to comply with their obligation to provide NCT with access to and use of such a system. If a new Case Management System is not delivered by the Councils before the current contract ends in January 2025, NCT may claim a Relief Event. If the NCT claims a Relief Event, it can be excused from delivering the Services, or part of the Services. NCT could also possibly make a claim under an Indemnity for Losses.
- 7.2.6 The Intelligent Client Function (involving officers from both Councils) in the Service Delivery Contract will provide governance and oversight of the programme/funding to procure a Case Management System.
- 7.2.7 The Council has the power to procure the facilities and services pursuant to section 1 of the Localism Act 2011 (GPOC) and section 111 of the Local Government Act 1972 (power to do things conducive or incidental to functions).
- 7.2.8 The estimated value of the contract means that any procurement will be subject to the Public Contract Regulations 2015 and the Council's Contract Procedure Rules. The Council's intention is to procure a Case Management System from an existing framework. This will provide a legally compliant route to tendering the requirement and provides an opportunity to reduce the time to conclude the tender process.
- 7.2.9 The data on the Case Management System is of vital importance to NCT as evidence to support legal action and court proceedings. A fresh procurement is an opportunity to strengthen the integrity and reliability of data and ensure full GDPR compliance. A high-quality Case Management System will support an effective discharge of statutory social care functions.

### 7.3 Risk

- 7.3.1 The failure of NCT to deliver to the required standard is identified as a risk on the

Council's Strategic Risk Register. The implementation of a modern and effective case management system is vital to supporting the improvement of children's social care practice and outcomes for children. The delivery of the new system therefore helps to mitigate the risk identified on the strategic risk register.

- 7.3.2 If the procurement of a new system does not take place, the Council will either have to attempt to extend the current arrangement via a new contract for the system or operate without a system. The former opens the Council up to legal challenge from other providers of case management systems as the Council has already extended the contract to its maximum length. The latter would pose a great risk to the delivery of good quality children's social care as a case management system is vital to the operation of services.
- 7.3.3 The costs included in this report are based on estimations and there is the possibility that there are increased costs for the implementation and/or the ongoing licence costs however until the procurement activities commence this cannot be established. The mitigation for this will be that the management of the budget to deliver this programme of work will be undertaken by the governance approach as outlined within section 7.2.

#### **7.4 Consultation & Communication**

- 7.4.1 In developing the proposals, the Council has consulted with NCT as the primary user of the proposed system. There has also been extensive engagement with North Northamptonshire Council as the joint funder of NCT and the programme and approval to fund the programme is currently going through their governance processes and these are expected to be complete before WNC Council considers this paper.

#### **7.5 Consideration by Overview and Scrutiny**

- 7.5.1 This decision has not been considered by the Scrutiny Committee.

#### **7.6 Climate and Environment Impact**

- 7.6.1 Once a solution has been selected specific impacts can be assessed. However, one of the potential benefits of a new case management solution is a reduction in staff travel, post and associated printing that currently occurs within the services, which should have a positive impact in this area.

## **7.7 Community Impact**

7.7.1 There is no distinct community impact arising from this report.

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## **8. Background Papers**

8.1 No background papers.





# WEST NORTHAMPTONSHIRE COUNCIL CABINET

6 DECEMBER 2022

**CABINET MEMBER RESPONSIBLE FOR FINANCE: COUNCILLOR MALCOLM  
LONGLEY**

<b>Report Title</b>	<b>Revenues and Benefits Single Software System</b>
<b>Report Author</b>	<b>Martin Henry, Executive, Finance</b>

## Contributors/Checkers/Approvers

<b>West MO</b>	Cath Whitehead	28/11/22
<b>West S151</b>	Martin Henry	21/11/22
<b>Communications Lead/Head of Communications</b>	Becky Hutson	25/11/22

## List of Appendices

None

## 1. Purpose of Report

- 1.1. This report provides members with an overview of the multiple software systems that are currently in place across the Revenues and Benefits service, outlines a proposal to introduce a single system for the service and requests Cabinet approval for the procurement, purchase and implementation of a single Revenues and Benefits software system for West Northamptonshire Council.

## **2. Executive Summary**

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- 1.2. Revenues and Benefits provides one of the largest customer facing services of the Council comprising of the administration and operation of the Council's Council Tax, Business Rates and Benefits statutory services as well as the Debt and Money Advice services, inspections to maximise income and recovery of overpaid Housing Benefit.
- 1.3. On vesting day, the service delivery was complex with three different service delivery models all with very different staffing structures. Following a full options appraisal and a business case, it was agreed to bring the service back in house. Following a staffing restructure, a new in-house team became operational from 8 November 2021.
- 1.4. The Revenues and Benefits team is currently working across multiple software systems. These are the legacy systems from Daventry District Council, Northampton Borough Council and South Northamptonshire Council. This is operationally inefficient and introduces challenges and risks around the ability to produce consistent information including provision of statutory statistical returns as well as general compliance, value for money and good practice.
- 1.5. The service will gain productivity efficiencies from a single suite of software systems that can be accessed in the same way from any location. This will also allow harmonisation of processes, bringing the teams together to deliver efficiencies and a much-improved service to our customers.
- 1.6. Members are asked to consider the content of this report and to approve the proposal to procure, purchase and implement a single Revenues and Benefits software system for the service.

## **3. Recommendations**

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- 3.1 It is recommended that the meeting:
  - a) Note the contents of this report.
  - b) Approve the procurement, purchase, and implementation of a single software system for Revenues and Benefits.
  - c) Give delegated authority to the Executive Director for Finance to take any further decisions and actions required to procure and implement the new system in consultation with the Portfolio Holder for Finance.

## **4. Reason for Recommendations**

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The Council will gain productivity efficiencies from a single software system. It will also allow for harmonisation of processes and procedures and will bring the team together to deliver efficiencies and a much-improved service.

## 5. Report Background

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- 5.1 Revenues and Benefits provides one of the largest customer facing services of the Council. These services include:
- Housing Benefit and Council Tax Reduction support to over 31,000 households
  - Council Tax billing and collection for over 178,000 households
  - Business Rates billing and collection for over 12,000 households
  - Collection of the Business Improvement District (BID) Levy for Northampton Town Centre and Brackmills
  - Delivery of a Debt and Money Advice support to residents.
- 5.2 The Revenues and Benefits service currently accesses multiple software systems from the legacy authorities of Daventry District Council, Northampton Borough Council and South Northamptonshire Council, as set out below:

### Current Revenues and Benefits systems

System	NBC area	DDC area	SNC area
Council Tax and Benefits system	NEC (Northgate)	Capita	Capita
Business Rates system	Capita	Capita	Capita
Customer Portal	NEC	Capita	Capita
Online forms	NEC	Capita	Capita
Document Management system	Civica 360	NEC - Anite	NEC - Enterprise
Document production	Planet Press	Planet Press	Pro-Print

- 5.3 This is operationally inefficient and introduces challenges and risks around the ability to produce consistent information including provision of statutory statistical returns as well as general compliance, value for money and good practice. The service will gain productivity efficiencies from a single suite of software systems that can be accessed in the same way from all locations.
- 5.4 A full appraisal has been completed to assess the options for the main back-office processing system.
- 5.5 The following areas are out of scope for this and will be considered at a later date:
- Document Management Systems – Civica 360, NEC Anite, and NEC Enterprise
  - Document production software – Planet Press and Pro-Print

## 6. Issues and Choices

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### Issues

West Northamptonshire Council Revenues and Benefits team has been designed to operate as a single team however currently there are a number of challenges:

- Working across multiple systems, on different computer networks, requiring multiple logins does not allow the service to operate as intended.
- The customer information and experience is disjointed due to multiple customer portals and forms being used currently. Customers in each of the areas currently use different self-service platforms, and the way they self-serve is different as a result of this. In addition, there are three sets of customer portals and forms which need to be maintained.
- Access to e-billing depends on which area you live in; currently only people living in the former South and Daventry areas are able to access their Council Tax and Business Rates bills online.
- Critical and time-consuming activities such as subsidy claims, and annual billing must be done multiple times.
- Freedom of Information (FOI) requests must be done in three places.
- Management reports and statistics are generated from multiple systems which must then be brought together.
- Staff flexibility is an issue, as there is currently limited ability to move people.
- Access to the systems from the varying work locations is complex.
- Limited access to the Daventry systems due to users needing to log into a physical asset (desktop) located in the Daventry offices. Single assets are currently being shared by multiple users, leading to staff becoming frustrated and disillusioned.
- System upgrades are required 4-5 times each year, this work is currently being duplicated over the three areas.
- Current set-up puts extra strain on the service leading to the need to employ temporary staff and does not allow for true harmonisation of processes which will lead to productivity and financial benefits.

### Proposed change

- 6.1 The need for a single software system with a single log-in with access from any location is clear. There are currently three mature Revenues and Benefits software systems in the market, West Northamptonshire currently use two of these, the NEC (Northgate) system and the Capita (Academy) system.
- 6.2 The Business Case shows in detail the options that have been considered and the supporting data analysis.
- 6.3 Performance has been analysed based on four key performance indicators:

1. Council Tax collection rates.
2. National Non-Domestic rate collection rates.
3. Average time taken to assess new claims for benefit.
4. Average time taken to assess changes.

6.4 The data shows that South Northants area using Capita and utilising the modules effectively is performing above the target KPIs and above the national average. Daventry are also using Capita although historically have not used the full suite of modules so although performance is good this would be enhanced further if migrated to a system with all the modules.

6.5 The former Northampton area using the NEC Northgate system is not performing as well as the other sites. This may be due in part to the fact that a significant amount of Northgate modules have not been implemented. The service could consider implementing these, but it would come at a considerable cost to the service both external costs from Northgate purchasing and internally in staff time to implement.

#### **Recommendation**

6.6 The options appraisal shows that the Capita software system is the best option for West Northants, and it is recommended that we purchase, procure, and implement Capita as the single software system for West Northants Council.

#### **Rationale:**

- Data gathered during the options appraisal highlights that South Northants using the Capita system and utilising the modules effectively performed above the target KPI's and above the Daventry and Northampton areas.
- Northampton did introduce certain modules such as e-billing and risk-based verification, but these did not function correctly and were therefore abandoned. Extensive testing to reinstate these modules would be required which is deemed unnecessary as the Capita system modules have been proven to work efficiently and are already live.
- Two of the three Council Tax and Benefits systems are already on Capita (Daventry and South). Moving the Northampton NEC system to the Capita system would involve a system conversion. However, to move the two Capita systems to NEC would involve converting South and Daventry and then merging into the Northampton NEC system. Significant work would need to be undertaken to introduce modules into the NEC system which are already working in the Capita systems.
- All three Business Rates systems are on Capita, there is significant expertise in using and managing these systems within the Revenues and Benefits team. No system conversion would be required as the data is held in the same format. A project to merge the systems into one would need to be undertaken to achieve efficiencies in processes but this is much less work and cost than a full system conversion.
- Within the Revenues and Benefits systems team, we have extensive experience of working with Capita on a system conversion from NEC to Capita, server migrations of Capita data and migration of Capita systems to a cloud environment, which reduces risk.



- This option will support a move to a cloud-based option in the future, following the conversion and merging of the existing systems to a single system. Moving single systems to the cloud carries less risk than attempting to merge and convert systems at the same time as moving to the cloud, hence the move to the cloud would be considered as a separate phase to this project.
- North Northants are also planning to move to the Capita suite of systems. There would be the potential to work closer with North Northamptonshire as a result of using the same Revenues & Benefits systems.

## 7. Implications (including financial implications)

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### 7.1 Resources and Financial

7.1.1 The full financial implications are shown in the Business Case. A summary of the current costs, indicative costs for the new proposal and implementation costs are summarised below. This is a complex migration and conversion project and will need to take place throughout 2023-2024 and into 2024-2025. During this time, it will be necessary to keep the Northgate system for conversion and subsidy purposes. This means that any financial savings will not be realised until 2026-2027.

7.1.2 There will be productivity benefits from moving to a single system in addition to other savings from not paying multiple suppliers. It's expected that efficiencies in the region of £200,000 per annum may be gained by the introduction of one system

#### Current position

System	Costs
<b>Northampton NEC for Council Tax and Benefits</b>	Annual Support and maintenance - £92,500 Annual charge for citizen access - £41,750 Gov Tech UCDS service - £14,000 Gov Tech VPN line rental - £2,985 Liberata UCDS automation £3,060 Enterprise licence - £15,000  <b>Total £169,295</b>
<b>Capita Council Tax, Business Rates and Benefits for South and Daventry including Business Rates for Northampton</b>	Revenues and Benefits £142,569 Remote support (South only) £37,756 Development fund for South and Daventry £10,015 <b>Total £190,376</b>
<b>Total costs</b>	<b>£359,671</b>

## Proposal

### Indicative costs per annum

System	Costs
Capita Council Tax, Business Rates and Benefits for South, Daventry, and Northampton	<b>No change apart from remote support:</b> Revenues and Benefits £142,569 Remote support £45,000 Development fund £10,015 <b>Total £197,587 per annum *</b>  •

The ongoing annual revenue savings associated with this proposal therefore totals approximately £362,000 per annum when the staffing savings and the systems savings are taken into account.

The payback period for the costs highlighted below is therefore less than three years.

### Implementation Costs (2023-2025)

The implementation costs have been estimated at this stage.

Detail	Estimated Costs Year 1 23-24	Year 2 24-25
Capita support for planning and scoping project, NEC conversion, merge of three datasets to create a single system	£325,000	
WNC project team costs including project management, backfilling for team members	£225,000	£225,000
Staff training costs	£25,000	
Contingency	£50,000	£25,000
<b>Total</b>	<b>£625,000</b>	<b>£250,000</b>

The implementation costs are being funded via Capital Projects as part of the budget setting process

## 7.2 Legal

7.2.1 Full engagement will take place with colleagues in Legal to ensure a robust and appropriate contract is prepared for the purchase of the new single system.

7.2.2 Work has also been undertaken with colleagues in Procurement to ensure a successful and safe process. There are two possible frameworks that may be used to facilitate a direct award and work is underway in consultation with both Legal and Procurement.

### 7.3 Risk

7.3.1 There is a risk that if the procurement process is not started as soon as possible the implementation timeframe will be adversely affected and efficiencies will not be realised as soon as we hope. Any other risks related to the implementation of a single system and the mitigations are highlighted in the Business Case.

### 7.4 Consultation

7.4.1 Consultation has taken place with colleagues in Procurement and ICT/DTI and the Business case has been considered and approved by ELT.

### 7.5 Consideration by Overview and Scrutiny

7.5.1 Not yet considered by Committee.

### 7.6 Climate Impact

7.6.1 No impacts identified.

### 7.7 Community Impact

7.7.1 No specific impacts have been identified.

### 7.8 Communications

7.8.1 Communications activities will be developed to keep stakeholders informed and updated on the single system project.

## 8. Background Papers

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8.1 None.



# WEST NORTHAMPTONSHIRE COUNCIL CABINET

TUESDAY 6<sup>TH</sup> DECEMBER 2022

**CABINET MEMBER RESPONSIBLE FOR ADULT CARE, WELLBEING AND  
HEALTH INTEGRATION: COUNCILLOR MATT GOLBY**

<b>Report Title</b>	Northamptonshire Safeguarding Adults Board (NSAB) Annual Report 2021 - 2022
<b>Report Author</b>	Suzanne Binley, Business Manager, Northamptonshire Safeguarding Adults Board <a href="mailto:NSAB.NCC@westnorthants.gov.uk">NSAB.NCC@westnorthants.gov.uk</a> <a href="mailto:Suzanne.binley@westnorthants.gov.uk">Suzanne.binley@westnorthants.gov.uk</a>

## Contributors/Checkers/Approvers

<b>West MO</b>	Catherine Whitehead	25/11/22
<b>West S151</b>	Martin Henry	22/11/22
<b>Other Director/SME</b>	Stuart Lackenby	22/11/22
<b>Communications Lead/Head of Communications</b>	Becky Hutson	20/11/22

## List of Appendices

**Appendix A – Northamptonshire Safeguarding Adults Board (NSAB) Annual Report 2021 – 2022.**

### **1. Purpose of Report**

- 1.1 To present the Northamptonshire Safeguarding Adults Board (NSAB) Annual Report 2021-22. The report outlines Board and statutory partner achievements during the year.

## **2. Executive Summary**

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- 2.1 Under section 43 of the Care Act 2014, every local authority must establish a Safeguarding Adults Board (SAB) for its area. The objective of a SAB is to help and protect adults in its area and assure itself that local safeguarding arrangements and partners act to help and protect adults in its area.

Under section 14.136 of the Care and Support Statutory Guidance, a SAB has 3 core duties:

- It must publish a strategic plan for each financial year that sets how it will meet its main objective and what the members will do to achieve this.
  - It must publish an annual report detailing what the SAB has done during the year to achieve its main objectives and implement its strategic plan.
  - It must conduct any safeguarding adults review in accordance with Section 44 of the Act.
- 2.2 The NSAB Annual Report 2021-2022 provides an overview of the Board's progress and achievements against the NSAB Strategic Plan for the period 1st April 2021 to 31st March 2022. The progress made against the plan is detailed via the achievements of the NSAB Sub Groups, work of the Delivery Board and Strategic Board.

## **3. Recommendations**

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- 3.1 It is recommended that the Cabinet receive the Annual Report of Northamptonshire Safeguarding Adults Board 2021 – 2022 (Appendix A) and note the findings.

## **4. Reason for Recommendations**

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- 4.1 To comply with statutory requirements under the Care Act 2014  
To ensure that Cabinet is made aware of the work of the Northamptonshire Safeguarding Adults Board.

## **5. Report Background**

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- 5.1 The report has been developed including contributions from the four statutory partners and was reviewed and approved by NSAB's Strategic Board on 6<sup>th</sup> October 2022. The report was also received at the WNC ELT on 18<sup>th</sup> October 2022.
- 5.2 The Care Act 2014 places Safeguarding Adult Boards on a statutory footing with a requirement to produce and publicise an annual report.
- 5.3 This is the second annual report received by West Northamptonshire Council (WNC).
- 5.4 The report highlights the progress and achievements made during the period and also advises the future developments for WNC for the year ahead to safeguarding adults in the West Northamptonshire area.
- 5.5 The format of the report aligns with the NSAB Strategic Plan, and includes quantitative and qualitative evidence, key messages, and impact of activities that relate to:



- a) Raising community awareness of how to report safeguarding concerns via the #Report It campaign.
- b) Providing multi-agency training opportunities and learning from Safeguarding Adult Reviews for frontline workers via the week of learning.
- c) Developing a new dashboard to provide analysis of safeguarding data to understand the reasons for safeguarding concerns, and to use the information to inform the strategic plan and operational arrangements including adults' desired outcomes (Making Safeguarding Personal).
- d) Under section 44 of the Care Act 2014, undertake Safeguarding Adult Reviews when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult.
- e) Working in partnership with local authorities and local Healthwatch to understand adults' experience of the s42 safeguarding process (in progress).
- f) Providing scrutiny and challenge regarding the effectiveness of safeguarding arrangements across the partnership.
- g) Developing closer working arrangements with the Voluntary & Community Sector Assembly, Safeguarding Children's Partnership and Community Safety Partnerships.
- h) Review how well agencies are working together to effectively safeguard adults at risk of harm and abuse via self-case audit activities.

## **6. Issues and Choices**

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- 6.1 The report has been developed via contributions from statutory partners and has been reviewed and approved by NSAB's Strategic Board.

## **7. Implications**

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### **7.1 Resources and Financial**

- 7.1.1 There are no financial implications arising from the presentation of the report at this time. The NSAB Strategic Board has already approved the budget for 2023-2024.

### **7.2 Legal**

- 7.2.1 Under the Care Act 2014 section 43, the Local Authority has a duty to establish a Safeguarding Adults Board, who in turn has a core duty to publish an annual report. The report provides assurance to the Cabinet of the activities undertaken to help safeguard adults across West Northamptonshire.

There are no specific equalities implications for the receipt of the Annual Report.

### **7.3 Risk**

- 7.3 Under the Care Act 2014, the Local Authority has a duty to establish a Safeguarding Adults Board (SAB), which in turn must publish an annual report. In order to mitigate risk, the report is designed to highlight achievements for the year and future priorities for the statutory partners.

Monitoring of progress enables early action to be taken where there are areas of significant risk or failure to deliver.

#### 7.4 **Consultation**

7.4.1 There has been no public consultation in respect of the NSAB Annual Report 2021-2022, but an approval process has taken place, as detailed below:

- Statutory Partners provided their input in respect of their achievements for period along with their areas for improvement for 2022-2023.
- The draft Annual Report 2021-2022 was approved by NSAB Strategic Board members on Thursday 6th October 2022 and WNC ELT on 18<sup>th</sup> October 2022. Members of NSAB's Strategic Board include senior officers from the two local authorities, lead members for adult care and wellbeing, the Integrated Care Board, and Northamptonshire Police.

#### 7.5 **Consideration by Overview and Scrutiny**

7.5.1 N/A

#### 7.6 **Climate Impact**

7.6.1 There is no climate/environmental impact arising from the NSAB Annual Report 2021-22 as it is shared on the NSAB website and not printed.

#### 7.7 **Community Impact**

7.7.1 There is no distinct community impact arising from the Annual Report.

#### 7.8 **Communications**

7.8.1 The report will be published on the NSAB website - [www.northamptonshiresab.org.uk](http://www.northamptonshiresab.org.uk)

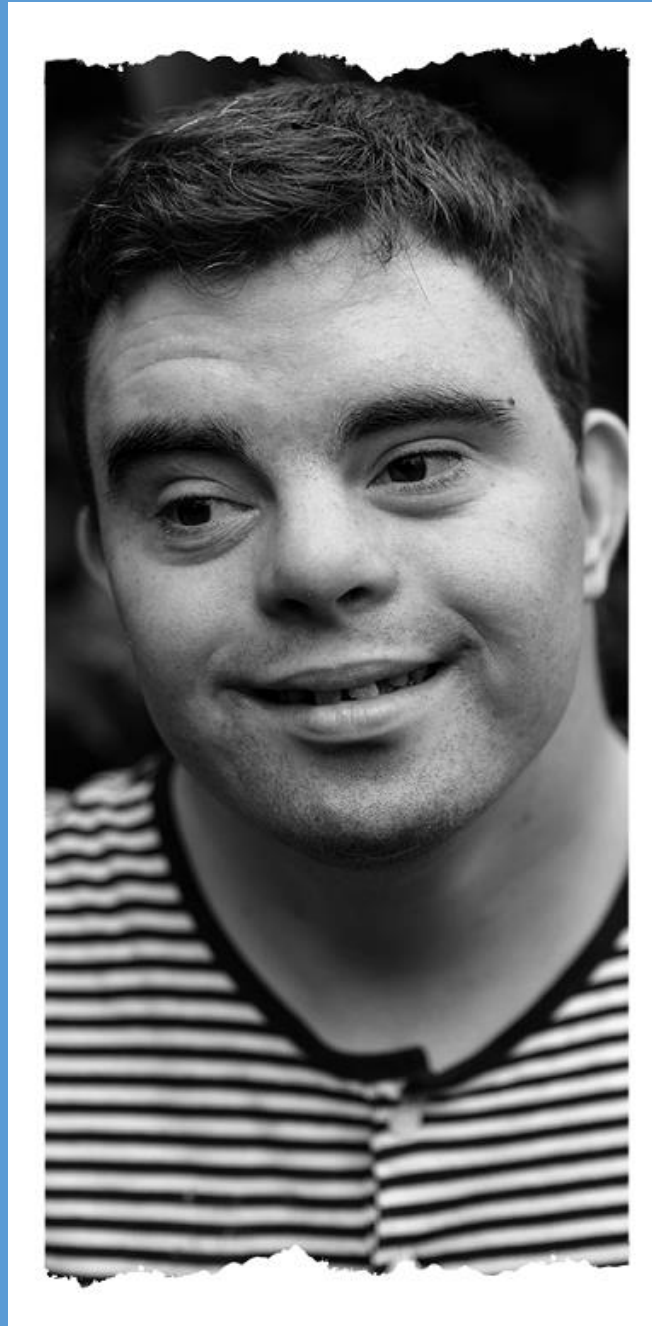
### 8. **Background Papers**

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8.1 The Care Act 2014 – [Care Act 2014 \(legislation.gov.uk\)](http://legislation.gov.uk)

8.2 [Northamptonshire Safeguarding Adults Board Strategic Plan 2021 – 2023](#)

# Northamptonshire Safeguarding Adults Board



## Annual Report 2021-2022

	Page
Foreword	2
Northamptonshire Safeguarding Adults Board	3
Annual Report Overview and 6 Key Principles of the Care Act 2014	3
Progress and Achievements against the Strategic Plan 2021-23	4-8
Working in Partnership – Our Key Statutory Partners	9-13
Safeguarding Adult Reviews	14-15
Northamptonshire Safeguarding Return Statistics	16-17
Strategic Plan 2021-23 Progress	18
Income & Expenditure for 2021-22	19

### Foreword from Stuart Lackenby, Chair of Northamptonshire Safeguarding Adults Board

This is my second annual report as Chair of Northamptonshire Safeguarding Adults Board (NSAB), and I hope that within this report there is assurance of the level of work that has been undertaken to help protect those most at risk in the county.

We started the year in the midst of the Covid-19 pandemic and were faced with a 3<sup>rd</sup> lockdown. In January 2022, the county declared a major incident due to the Omicron variant and concerns about the rapid spread of the virus, which thankfully didn't materialise as first anticipated, and the incident was soon stepped down. However, the pressures placed on organisations during this period was incredibly challenging and included increased staff absence due to Covid-19. On behalf of NSAB, we would like to thank all staff and front-line workers for their resilience during this difficult and very challenging period.

On 31<sup>st</sup> March 2021, Northamptonshire County Council ceased to exist as a result of local government reorganisation and as a consequence, North and West Northamptonshire Councils were formed. As you can imagine, there was a huge amount of work needed to ensure that the two new unitary councils were up and running and fit for purpose on the 1<sup>st</sup> April, and to ensure there was no interruption to safeguarding practices.

Like so many organisations during the period, NSAB meetings continued to be held via Teams or Zoom, which freed up time for additional meetings. Whilst there were far fewer restrictions at the end of the year, some organisations found that their service users liked the option of both face to face and virtual appointments, and many offered a hybrid approach to services.

This annual report provides more detailed information on the work undertaken throughout 2021-22, including the achievements of the Delivery Board and Sub Groups, Safeguarding Adult Reviews and the work of the statutory partners.

The work of the NSAB Business Office is very demanding having to manage and co-ordinate the many activities needed to ensure safeguarding arrangements are in place across the partnership, and I would like to take this opportunity to thank Suzanne and Chloe for their hard work and commitment, and also thank colleagues within the partnership for actively supporting the work of NSAB to help keep people safe in Northamptonshire, including Superintendent Richard Tompkins who stepped down as Chair of the Delivery Board in March 2021.

As agreed at Strategic Board, the role of NSAB Chair will change on an annual basis, and therefore it is likely that I will be handing over the Chairing responsibilities very soon, so I will take this opportunity to thank you for your continued interest and support of the work of Northamptonshire Safeguarding Adults Board.

**Stuart Lackenby**  
**Executive Director for Adults, Communities and Wellbeing (DASS) and**  
**Chair of Northamptonshire Safeguarding Adults Board**

The purpose of a Safeguarding Adults Board is to assure itself that local safeguarding arrangements and partners act to help and protect the welfare of local adults who may be at risk of abuse and harm. This is in accordance with the Care Act 2014 and supporting statutory guidance.

Northamptonshire Safeguarding Adults Board (NSAB) is made up of senior officers nominated by partner agencies including statutory partners such as local authorities, police and the clinical commissioning group. Members have delegated authority to represent their organisation and to make decisions on their agency's behalf.

NSAB's vision is:

## *'Working together to keep people safe'*

During the period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022, the Strategic Board was supported by the operational Delivery Board and four Sub Groups - Communications & Engagement, Learning & Development, Quality & Performance, and Safeguarding Adults Review. Task and finish groups were also held to support activities from the various groups.

There were no new declarations of interest received by members during the year.

Safeguarding Adults Boards have three core duties under the Care Act 2014:

- Publish a strategic plan for each financial year and its strategy for achieving its objectives.
- Publish an annual report including what has been achieved during the year, what it has done to implement the strategy, what members have achieved and findings of reviews.
- Conduct Safeguarding Adults Reviews in accordance with Section 44 of the Care Act.

The Annual Report 2021-22 provides an overview of NSAB's achievements against the [Strategic Plan 2021-23](#) for the period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022.

A meeting was held in June 2021 to review the strategic plan 2019-21. The outcome of the discussion was to retain the existing three priorities, but the key themes were reviewed and updated. See page 18 for further details.

The NSAB Strategic Plan is aligned with the six key principles as outlined in the Care Act:



### **Empowerment**

People are supported and encouraged to make their own decision and informed consent.



### **Prevention**

It is better to take action before harm occurs.



### **Proportionality**

The least intrusive response appropriate to the risk presented.



### **Protection**

Support and representation for those in greatest need.



### **Partnership**

Local solutions through services working with their communities.



### **Accountability**

Accountability and transparency in delivering safeguarding.



## NSAB Progress and Achievements

For the period 2021-22, NSAB agreed to retain the three priorities in line with other Adult Safeguarding Boards in the East Midlands region, namely: **Prevention, Quality and Making Safeguarding Personal (MSP)**. These were incorporated in the Strategic Plan 2021-23. Progress against the delivery plan is detailed below:

### Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability

#### Northamptonshire Safeguarding Adults Board

- With the change to two unitary authorities in April 2021, NSAB members agreed to hold meetings bi-monthly rather than quarterly.
- Six strategic board meetings were held during the year with 100% attendance from representatives from statutory members.
- Membership for the Strategic Board was also reviewed and increased.
- Due to the continued Covid-19 pandemic all NSAB meetings continued to be held virtually via Microsoft Teams.
- Membership of the Boards and Sub Groups were reviewed.
- Appropriate challenge was made regarding representation and attendance at Sub Groups where necessary.
- In April 2021, following the departure of the Independent Chair, Tim Bishop, NSAB agreed to align the arrangements for scrutiny with that of [Northamptonshire Safeguarding Children Partnership](#) and recruit an Independent Scrutineer instead of an Independent Chair. In this respect, a robust recruitment and selection process with statutory partners was undertaken and a new Independent Scrutineer, Jane Geraghty was appointed in July 2021.
- NSAB received bi-monthly updates from the Independent Scrutineer, Adult Social Care and the Deprivation of Liberty Safeguards (DoLS) assessments and progress on the transition to Liberty Protection Safeguards (LPS), as well as periodic updates from St. Andrew's Healthcare.
- The Chair of the Delivery Board provided updates to the Strategic Board on a quarterly basis and highlighted good practice and other key issues.
- The Board used their influence in setting up an ARM Oversight Panel in April 2021, with West Northants Council taking the lead. Officers from key agencies make up the Oversight Panel and the group provides advice and guidance on new referrals for the ARM process. During the course of the year 66 ARM notifications were received and 17 referrals were discussed at the Oversight Panel.

#### Delivery Board

- The purpose of the Delivery Board is to oversee the progress made against the strategic plan and the operational activities in place to support the three priorities and themes in the plan. The Sub Groups are instrumental in delivering the core activities to support the plan.
- In June 2021, a meeting was held to review and consider the strategic themes. Members agreed the following five themes:
  1. Raising Awareness of NSAB and Safeguarding
  2. Learning from Safeguarding Adult Reviews
  3. Understanding the Impact of Covid-19
  4. The Difference NSAB Makes
  5. Homelessness
- In March 2021, Joseph Banfield, Detective Superintendent with Northamptonshire Police took over as Chair of the Delivery Board from Detective Superintendent Richard Tompkins.
- Progress on the delivery plan was monitored at every bi-monthly meeting, and there was good progression made by Sub Groups during the course of the year as outlined below in the section below.
- In addition to updates from the NSAB Sub Group Chairs, partners were brought up to date in relation to other key activities and developments in the county, including:
  - Adult Risk Management Oversight Board (received at each meeting)
  - Homelessness (received at each meeting)
  - Mental Health – Section 140 Policy Update – 14.09.2021
  - Learning Disability Review (LeDeR) – 24.11.2021
  - Suicide Prevention – 24.11.2021
  - Exploitation – 20.01.2022
- Responsibility for the NSAB risk register moved to the Delivery Board and a review and refresh was undertaken in January 2022.

### Jane Geraghty – Independent Scrutineer Introduction

I started working as the NSAB Independent Scrutineer in July 2021. My role is to provide scrutiny and constructive challenge for Northamptonshire Safeguarding Adults Board (NSAB) and seek assurance from partners on the effectiveness of the adult safeguarding arrangements across the county in order to meet statutory duties to keep people with care and support needs safe.

I look to identify areas of good practice and report areas of weakness to NSAB, whilst ensuring that the voices of users and carers is threaded through all aspects of NSAB's work.

In my first year, I have chaired the Quality & Performance Sub Group and prioritised the development of the performance dashboard, hearing from a wide range of stakeholders. I have attended various groups of the Voluntary and Community Sector Assembly around mental health, pan-disability, carers and the elderly, and also a number of staff team meetings to hear first-hand any safeguarding issues. A key issue raised from participating in the wide range of forums is the lack of accessible mental health services. Other prominent issues are around Mental Capacity Act assessment, carer stress and limited access to advocacy.

I have overseen audits around homelessness and Making Safeguarding Personal (MSP) and have supported the development of action plans and learning materials.

Future areas of focus are the review of the partnership self-assessment audit, collaborative working with Community Safety Partnerships and Northamptonshire Safeguarding Children's Partnership around transitions and early help, as well as having a greater focus on the identification of good quality practice and the further development of engagement work and preparation for a possible Care Quality Commission (CQC) inspection next year. I know Northamptonshire is up to the challenge.

#### Jane Geraghty

#### Independent Scrutineer for Northamptonshire Safeguarding Adults Board

#### Communications & Engagement Sub Group

- A wider [#ReportIt campaign](#) was launched in August 2021 and included vinyl banners for high footfall areas, leaflets and posters for shops and businesses, and business sized cards to keep in purses/wallets. Please see page 8 for details on how the campaign was promoted across the county.
- A new information video was added to the [Adult Risk Management \(ARM\) Toolkit](#) and this was relaunched on 2<sup>nd</sup> November 2021. The campaign has generated 4587 Twitter impressions and there had been 297 views of the ARM video.
- In January 2022, the group supported Northamptonshire Police with the relaunch of the [Herbert Protocol](#). This campaign generated 3831 Twitter impressions.
- NSAB launched the [Tricky Friends animation](#) in March 2022. Thanks to Norfolk Safeguarding Adults Board who created the animation and allowed us to personalise for Northamptonshire. This campaign generated 5206 Twitter impressions.
- In March 2022, the Independent Scrutineer and Safeguarding Team Manager for North Northants Council took part in a [Safeguarding podcast with Voluntary Impact Northamptonshire](#).
- The NSAB Business Office proactively uses a Twitter account to share information. The number of followers increases month on month with 468 followers at the end of March 2022, an increase of 220 on the previous year. <https://twitter.com/NorthantsSAB>
- The NSAB website was regularly reviewed and updated during the year to provide a range of information to support both the public and practitioners including campaigns and learning opportunities.
- Website reports show that April 2021 was the month in which the NSAB website was accessed the most, with over 1300 views. This could be explained by colleagues accessing the recently published SAR 016 and 019 reports during this time.
- Over 1000 visits to the website were also registered in July 2021, November 2021, January 2022 and March 2022 which correspond to the publication of learning briefings and launch of a variety of campaigns.

### Learning & Development Sub Group

- Following the publication of SARs 016 'Dean' and 019 'Jonathan' in March 2021, learning events were held in July 2021.
- 54 colleagues from a range of organisations attended the SAR 016 Learning Event. 100% colleagues believed the event gave good insight into the issues from the case and found the discussion sessions informative and helpful. 100% colleagues also state that they would use the learning from the event to support future practice.
- 80 colleagues from a range of organisations attended the SAR 019 Learning Event. 100% of colleagues agreed that the event gave good insight into the issues identified in the case. 97% colleagues said that they would use the learning from the event to support future practice.
- Partner agencies, and organisations involved in the reviews, were asked to feedback where they shared the SAR reports within their organisations. Assurance included: reports were shared via internal communications such as email, staff intranets and newsletters, and were discussed in team meetings. The reports now form part of staff induction and training within some organisations.
- In January 2022, and in partnership with the University of Northampton, multi-agency training was provided to SAR Sub Group members and other colleagues to support knowledge in this area.
- In November 2021, the first NSAB Week of Learning was held to coincide with National Adult Safeguarding Week. This was a truly multi-agency partnership event and we thank all the speakers for giving their time and for sharing their expertise, and to the colleagues who participated. Further details can be found on page 7.
- Following the refresh of the Serious Incident and Safeguarding, supported by colleagues in Patient Safety, another audit was undertaken in December 2021 to ensure agencies had embedded the renewed process and pathway. The audit showed that whilst progress had been made, communication between the health agencies and the local authorities still needing improving.

### Quality & Performance Sub Group

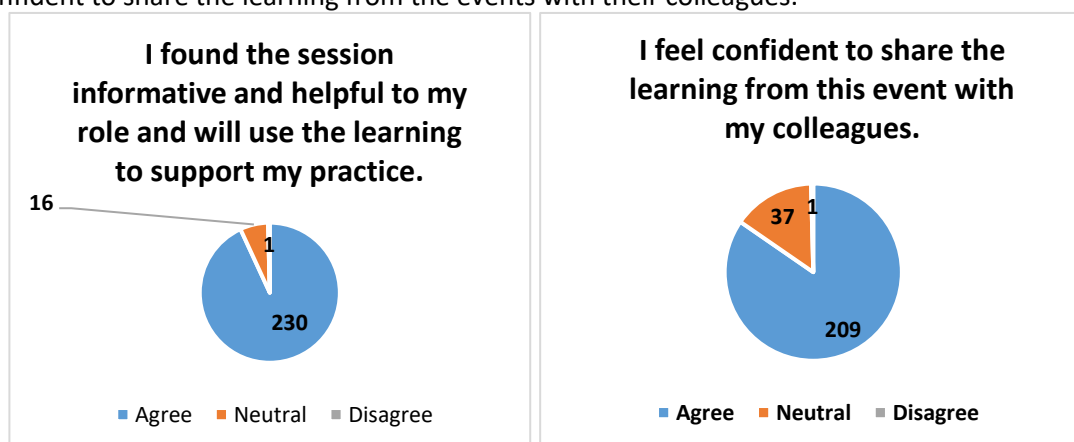
- The Independent Scrutineer took over the leadership of the Sub Group in July 2021.
- Work on redesigning the data Dashboard commenced, with a number of task and finish meetings held.
- Learning briefings for Safeguarding Adult Reviews 016, 019 and 020 were developed by the Quality & Performance Sub Group and shared with the partnership. The briefings were also made available on the [NSAB website](#), together with a briefing for multi-agency case audit mental health.
- The composite action plans for SARs 016, 019 and 020 were monitored for progress throughout the year.
- As a result of SAR 019, a great deal of additional work was put in place by the housing teams in North and West Northamptonshire Councils, and supported by the wider partnership, to develop a homelessness pathway which is likely to be launched in 2022.
- An audit on the Serious Incident and Safeguarding process was carried out in April 2021. It was positive to evidence that serious incident investigations were being undertaken and that the patient and families had been involved.
- Two multi-agency case audits (MACA) were undertaken in respect of Safeguarding Adult Review 019 'Jonathan'. Homelessness was undertaken at the end of 2021. [The findings and learning briefing can be found here \(published May 2022\)](#). The 2<sup>nd</sup> audit in February 2022 on Adult Risk Management is yet to be published at the time of writing. A learning briefing relating to a mental health MACA was published in July 2021.
- A single agency audit on Making Safeguarding Personal was held in November 2021. The audit evidenced good evidence of the adult's voice being captured, and there were very few complaints received regarding the cases audited. St Matthews Healthcare has a number of initiatives in place including a newsletter and a patient reference group. The audits showed persistence in obtaining consent and other relevant information.
- The Communication and Public Reporting Protocol, the Serious Incident and Safeguarding Process, and the Training Strategy were refreshed during the year. Work also began on updating the Information Sharing Protocol.

### Safeguarding Adult Review Sub Group

- The composite action plan for SAR 008 was completed, and the plan for SAR 010 had one remaining action for Northamptonshire Children’s Trust in respect of IT system change implementation, which has taken longer much longer to implement than expected. All other agency actions were completed.
- Good progress was made in respect of the actions for SARs 016 and 019, but this had been hampered due to the Covid-19 pandemic and the wider work undertaken to support the development of a homelessness pathway.
- The action plan for SAR 020 was completed.
- There were two ongoing SARs: 021 and 022.
- There were six Safeguarding Adult Review referrals considered by the Sub Group between April 2021 and March 2022. See further details on Safeguarding Adult Reviews on pages 14 and 15.
- The group continued to review and prioritise SAR governance during the year to support decision-making.
- Progress was made on the local action plan in respect of the [National SAR Analysis](#).

### Week of Learning – November 2021

- Historically, NSAB has held an Annual Conference in November. During this period, and due to the pandemic, the Learning and Development Sub Group offered a virtual NSAB Week of Learning to coincide with National Safeguarding Adults Week between 15<sup>th</sup> and 19<sup>th</sup> November 2021.
- Eleven learning opportunities were delivered and included: An introduction to NSAB; Modern Slavery; Raising a Safeguarding Concern (2 sessions held); ARM; Mental Health Integrated Response Hub; Cyber and Fraud Awareness; Homelessness - Duty to Refer; Experiences of caring during the Coronavirus pandemic; Voice for Victims and Witnesses service provision and how to refer in; and Legal Literacy.
- Colleagues were able to book onto the events via Eventbrite, with over 1100 registrations received, and 585 colleagues attending across the course of the week.
- The Week of Learning was promoted on @NorthantsSAB Twitter which generated 2,284 impressions.
- Partner agencies were asked to feedback where they shared the learning opportunities within their organisations. Responses included sharing via internal communications, emails, intranets, safeguarding bulletins and newsletters, and discussed at team meetings.
- Colleagues were asked to complete an evaluation form for each event they attended and in return, they received a certificate of attendance. 247 (42%) evaluation forms were received.
- The feedback was incredibly positive with 93% attendees stating they believed the sessions were informative and helpful to their role, and they would use the learning to support their practice. 85% colleagues also stated that they felt confident to share the learning from the events with their colleagues.



- Due to the event’s success, there are now plans to provide a second week of learning in June 2022 as the opportunity has a wider reach than an annual conference.
- Videos of the learning sessions are available on the NSAB YouTube channel and you can [access them via the NSAB website](#).



### #ReportIt Campaign

- The Communication and Engagement Sub Group launched a wider #ReportIt Campaign in August 2021, building on the success of the virtual #ReportIt Campaign in July 2020.
- A number of materials were developed to raise awareness of how to raise a safeguarding concern across the county. There are plans to translate the information into other key languages used in the county.
- The campaign launch was supported by a press release, social media messaging and an interview with Global Heart Radio was also given.
- Over 10,000 Twitter impression were generated for this campaign. Examples of tweets shared by NSAB are shown below.



- Partner organisations supported the campaign roll-out by retweeting NSAB tweets, sharing their own messages on social media as well as sharing within their organisation via newsletters and intranets.
- The Community Safety Partnerships in North & West Northants supported the campaign roll-out by displaying vinyl banners and sharing promotional materials at events to help raise awareness.
- Here are some of images from the #Report It campaign shared across the county.





NSAB worked closely with its statutory partners; NHS Northamptonshire Clinical Commissioning Group (CCG), Northamptonshire County Council (NCC) and Northamptonshire Police. All statutory partners are represented on the Strategic Board, the Delivery Board and Sub Groups.

### NHS Northamptonshire Clinical Commissioning Group

#### Achievements in 2021 - 2022

- We worked very closely with commissioning and primary care to ensure that the safeguarding assurance self-assessment is part of the GP contract, and therefore every practice will use this as an ongoing development tool.
- We continued to hold regular forums and training events for general practice safeguarding leads during the pandemic, and a specialist safeguarding coordinator for primary care was appointed to work alongside the Named GP's.
- We worked with the health providers and key partners in establishing a countywide Adult Risk Management Process (ARM) which is working well with several referrals and regular attendance.
- We have continued to work with colleagues across health and social care to scope and support the implementation and delivery of the Liberty Protection Safeguards.
- Progress was maintained at pace to support the transition towards an integrated care system.
- Health and other partners continued to implement actions relating to recent Safeguarding Adult Reviews (SARs) and Domestic Homicide Reviews (DHRs).
- We continued to support NSAB by maintaining a presence at Board meetings and actively supporting Sub Groups to ensure NSAB was able to meet its annual strategic plan, and we worked closely with Northamptonshire Community Safety Partnerships.
- We supported a care home by re-deploying a whole team of colleagues to support patients to be discharged from hospital during the pandemic.
- Supporting the countywide Afghanistan Refugee Resettlement, quickly responding to the request to facilitate wrap-around care solutions which included primary care, maternity and mental health services, which were regarded by the Home Office as a platinum service.

#### Areas for development

- NHS Northamptonshire CCG will become NHS Northamptonshire Integrated Care Board (ICB) from 1<sup>st</sup> July 2022. The newly appointed Chief Nurse will be the Executive Lead for safeguarding. We will ensure that the transfer of safeguarding legal responsibilities and processes are in place within the ICB and support partners to understand the new commissioning landscape. This will also include safeguarding training so that ICB staff receive the necessary skills and support to identify and respond to safeguarding concerns.
- We will respond to the Liberty Protection Safeguards consultation and will continue to work with colleagues across health and social care to support the implementation and delivery of this legislation
- We will review and fully embed the local serious incident/safeguarding adult guidance to ensure there is an effective interface between safeguarding adult procedures and serious incident investigations undertaken in health services.
- Work with other partners to ensure that the identification and management of domestic abuse at both a strategic and operational level is considered across the health system.

### North Northamptonshire Council – Adult Social Care

#### Achievements in 2021 - 2022

- The Target Operating Model (TOM) has been in place since October 2020 and continues to be embedded. During 21-22 a review and audit was undertaken to assess whether the anticipated outcomes for the people of North Northants had been achieved. The audit concluded that the TOM was satisfactory in relation to the control environment and compliance, and organisational impact was moderate. The audit and review highlighted the demand at the ‘front door’ and on the community teams, and their resilience to manage demand when faced with levels of absence and vacancies. Processes have since been strengthened, and a single approach to risk management for adults seeking support, including those waiting allocation has been implemented. This guidance has been recognised regionally and by the Department of Health & Social Care (DHSC) who wish to use our model as an example of best practice.
- The review highlighted that data and systems were a potential barrier to demonstrating performance and the original key performance indicators (KPIs) needed review. It also demonstrated positive examples of the impact of the 3 conversations model and strengths-based working, and the focus is on embedding this approach within other areas in adult services.
- In November 2020, ‘Eclipse’ replaced CareFirst and work is ongoing to ensure processes are reviewed.
- An independent audit into Safeguarding referrals, published in March 2022, identified areas for improvement and recommended the need for a single point of access to be implemented for responding to safeguarding concerns.
- Changes were made to the Quality Board following review. The reporting framework now enables all parts of the organisation to raise, report and respond to risk. A full review of the framework is due to be completed by the end of September.
- Monthly operational meetings were held with Safeguarding to share information and offer support, training and consistency to our providers, and bi-monthly provider forums were delivered face to face and via Microsoft Teams to maximum attendance. Regular provider newsletters were also completed.
- The teams moved to a place-based model of working to drive local area support and improvements.
- Several surveys were completed to aid information gathering from providers to ensure North Northants Council (NNC) can be responsive to supporting providers.
- A full review of the risk register was completed and a robust process embedded. The Safeguarding team contributed to the risk register which is presented at the Quality Board.
- A contracts officer visited all providers to seek assurance, and there have since been changes to the reporting structure, and work is ongoing with providers to identify the training, information, and advice they require.
- An annual schedule of visits was put in place for providers.
- An initial audit of training identified a gap in ARM training and improvements to the ARM toolkit.
- A working group was put in place to carry out the actions for SAR019.

#### Areas for development

- Continue to embed the Target Operating Model within North Northants.
- A project team will be set up in August to review Safeguarding processes across North ASC and implement the recommendations from the independent safeguarding review including a single point of access for responding to safeguarding referrals and a review of the Eclipse forms and processes for recording the response to Safeguarding.
- Continue to disseminate learning from Safeguarding Adult Reviews.
- Safeguarding awareness & information packs have been completed and will be distributed to all providers by Monday 22<sup>nd</sup> August 2022.
- The Notification of Concerns process will be reviewed with Safeguarding to enable swift responses to provider concerns.
- Principal Social Workers (PSWs) from the Provider Safeguarding Team have visited and presented at team meetings to raise awareness. Link roles remain with PSWs covering Primary Health care, Nursing homes, L/D services, Residential homes and home care.

### North Northamptonshire Council – Adult Social Care

#### Areas for development continued...

- As part of the contract framework review, within Commissioning we will consult with providers to identify training gaps, advice and information sharing topics and platforms for engagement. Work is ongoing to establish a “training offer” to providers and provider consultation days that will be delivered through the team. Also, we are in the process of reviewing the current monitoring tools and required data to enhance the visit opportunity for people in services, embedding learning from SARs. A provider information portal is also being developed to offer communication, examples of outstanding work (such as a medication policy) and a signposting service to access local communities.
- Due to the disaggregation of the Learning and Development Service a meeting will be held to discuss changes to the current training programme to include providing training to external stakeholders.
- The two local authorities will continue to work together with Health colleagues as members of the Northamptonshire Responsible Bodies Group to plan for the Liberty Protection Safeguards. North Northants has a working group in place to ensure that the processes, training and resources required are in place. Initial training has been provided via iLearn and consideration is being given to staff who will require specific training.
- The DoLS Service was disaggregated between North and West Northamptonshire Councils on 1<sup>st</sup> April 2022. The DoLS service has an improvement plan in place including actions regarding recruitment, systems improvements, data cleansing and the utilisation of agency Best Interest Assessors (BIAs) and doctors to reduce the waiting list of people requiring an assessment. This will improve NNC’s ability to respond to and implement LPS.
- Following North Northants response to the Government’s consultation on the proposed LPS Code of Practice and Regulations, work will progress on governance, partnership working & external stakeholders, service design, training & workforce development, and Policy and Performance, to ensure readiness to implement the LPS.

### Northamptonshire Police

#### Achievements in 2021 - 2022

##### Domestic Abuse

- DA now sits within the Violence Against Women & Girls (VAWG) portfolio, and under that banner this remains a matter of priority for Northamptonshire Police.
- In the last 12 months recorded domestic abuse (DA) has dropped by 7.2% within the County, and there are 6% fewer victims of DA crime in the same reporting period. This is at odds with the national trend which has seen increases in the amount of recorded DA. We believe that this position is as a result of our strong performance and our long term ethical crime recording position.
- The Force arrested 36% of DA perpetrators in the 12 months up to March 2022, this is significantly above the national average of 27.3% in the same period and may help to explain the current victim satisfaction rate which sits at of 90.7%. There have always been strong links between victim satisfaction and the early arrest of perpetrators and we believe the two figures are very much linked.
- Op Motto, our operation to place Independent Domestic Abuse Advisors (IDVA) in the Force Control room and also with patrol officers at times of peak demand is now embedded and improving the service we offer. The operation allows specialist advice from IDVA’s to assist control room staff prioritise incidents and provide immediate support to victims at first point of police contact.

##### Mental Health

- OP Alloy (Street Triage) continues to be a cornerstone of the partner response to mental health (MH) and has improved the interaction with, and the safeguarding of, those in crisis. The operation runs between 11:00-03:00 every day of the week and places mental health nurses and police officers together in patrol vehicles to provide the initial response to those in crisis.

### Northamptonshire Police

#### Achievements in 2021 – 2022 continued...

##### Partnership Work

- The Office of the Police, Fire and Crime Commissioner (OPFCC) is funding the purchase of FLARE. Flare is a cutting edge interactive reporting application which is available free to the user through Apple Store and Google Play. It allows for the anonymous reporting of adverse experiences within the county such as:
  - Staring
  - Cat calling/wolf-whistling
  - Inappropriate gestures
  - Inappropriate comments/comments on physical appearance
  - Invading personal space
  - Up-skirting
  - Serious sexual assault and rape

The app will help improve local agencies' understanding of how and where people feel unsafe and will allow targeted action to remedy the concerns.

##### Areas for Development

- Northamptonshire Police are in the middle of a thorough review of our protecting vulnerable people department to ensure that we are providing the best possible outcomes to those that live within the county. Additional resources have already been placed into the Multi-agency Safeguarding Hub (MASH) as a result of this work and the review will concentrate on the police response to Domestic Abuse and Rape in the coming year.
- Operation Motto, the use of VOICE crisis IDVA's within the police control room continues at peak times to improve our initial response to DA. Consideration is currently being given to extending this service due to its success.
- Serious and Organised Crime (SOC) remains a 'Matter of Priority' for the force. A new Sex Worker Profile has been compiled and will be used to provide safeguard interventions to those who need them and to target offenders who exploit them for gain.
- Senior Officer audits of DA, Modern Slavery & Human Trafficking and SOC are planned for the upcoming year to ensure we improve our service to victims and pursuit of perpetrators.

### West Northamptonshire Council – Adult Social Care

#### Achievements in 2021 - 2022

- The Adult Risk Management (ARM) oversight panel and revision of the data dashboard was embedded.
- Safeguarding practice guidance and thresholds were reviewed and implemented.
- Every safeguarding notification and PPN is now reviewed by the ASC duty team.
- Practice development sessions and listen and learn lunches in relation to safeguarding specific areas were undertaken regularly by the Principal Social Worker.
- Adult Social Care played an active role in multi-agency case audits (MACA's) and implemented the learning within WNC.
- West Northants Council Chair the Channel Panel.
- A number of cases were reviewed as part of the Person in Position of Trust (PIPOT) process.
- The Safeguarding and Assurance Service Manager and Principal Social Worker (PSW) worked with the Complaints Officer to ensure that learning from complaints was embedded across the People Directorate.
- Adult Social Care put in place ongoing learning and development from Safeguarding Adult Reviews (SARs).
- Successful work with housing colleagues took place during the winter to support people that were vulnerable and at multiple risk of becoming homeless.
- Development of strategic oversight of safeguarding data to inform areas of development with partner organisations.
- The PSW leads the Learning & Development Sub Group which has made significant progress in the last year.
- Regular assurance meetings were held with the NSAB Independent Scrutineer focused on NSAB key objectives.

## West Northamptonshire Council – Adult Social Care

### Areas for development

- Further development of the ARM Oversight Panel under the Chair of the local authority.
- Making Safeguarding Personal (MSP) – audits have identified a lack of recording of MSP on the social care system which gives a lower data percentage than actual activity. There are plans for an internal programme both in relation to recording of data and refresher training on MSP.
- Further development and embedding of the target operating model (phase 2).
- Development of an assurance framework that underpins internal practice and external market management. This includes the joint Quality Board with the Clinical Commissioning Group (CCG) and the Care Quality Commission (CQC), and the internal joint working of commissioning & quality and safeguarding, and the care home review team via a weekly forum to pro-actively manage quality in the market.
- Change of the Principal Social Worker (PSW) role to focus on practice development and assurance to include proposals for roles to be created to support this.
- The Principal Social Worker will continue to Chair the NSAB Learning and Development Sub Group.
- WNC will continue to disseminate learning from Safeguarding Adult Reviews once published.
- Preparation for the introduction of Liberty Protection Safeguards (LPS) is ongoing. A proactive working group across both councils is in place and will start to formalise the plan for LPS in Northants once the code of conduct is released for consultation.
- Work in conjunction with the NSAB Independent Scrutineer in relation to assurance activity on behalf of the NSAB.

**All statutory partners provided dedicated officers to support the work of NSAB at Strategic and Delivery Boards, and at Sub Groups and various Task & Finish Groups.**

**Statutory agencies will be asked to provide assurance to NSAB that the areas for development were achieved in next year's annual report.**





## Safeguarding Adult Reviews (SARs)

The Safeguarding Adults Board (SAB) must arrange a SAR when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult. The SAB must also arrange a SAR if the same circumstances apply where an adult is still alive but has experienced serious neglect or abuse.

### Criteria for a Safeguarding Adult Review

1. A SAB must arrange for there to be a review of a case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs); if –
  - (a) There is reasonable cause for concern about how the SAB, members of it or other persons with relevant functions worked together to safeguard the adult; and
  - (b) Condition 1 or 2 is met.
2. Condition 1 is met if:
  - (a) The adult has died; and
  - (b) The SAB knows or suspects that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died).
3. Condition 2 is met if:
  - (a) The adult is still alive; and
  - (b) The SAB knows or suspects that the adult has experienced serious abuse or neglect.
4. A SAB may arrange for there to be a review of any other case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs).
5. Each member of the SAB must co-operate in and contribute to the carrying out of a review under this section with a view to:
  - (a) Identifying the lessons to be learnt from the adult's case; and
  - (b) Applying those lessons to future cases.

The Safeguarding Adult Review (SAR) Sub Group has responsibility for considering SAR referrals, and for managing the SAR process. The group has strong links with other NSAB Sub Groups to ensure that the monitoring and communication of SARs and other type of reviews are undertaken, and that learning is embedded. The Chair of the Sub Group has responsibility for keeping NSAB updated on the progress of SARs.

For the period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022, six referrals were received for consideration of a SAR. The table below shows SAR activity for the year.

Ref	Reason for Referral - Summary	Approved by Statutory Partners	Published
020	Male - suicide out of county	August 2020	July 2021
021	Serious neglect reported at a care home	June 2020	Ongoing
022	Male - suicide	July 2021	Ongoing
023	Female - mild learning disability and physical health issues - <i>Did not meet criteria</i>	Multi-agency case audit	Awaited
024	Female - self-neglect	March 2022	Ongoing
026	Male - homelessness	Awaited	-

### SAR 020 'William'

*Whilst this SAR was covered in last year's report, we have included again as published in July 2021.*

The SAR relates to the sad circumstances of 'William' who died through suicide in 2018. SAR Sub Group members and the NSAB Independent Chair initially agreed that the criteria for a SAR was met. However, from the information gathered by agencies in Northamptonshire and out of county, it became apparent that the case did not meet the criteria for a SAR, but there was important learning that could be disseminated and a table top exercise was undertaken by the Independent Author.

#### Key points of learning for Northamptonshire:

- Referrals to Primary Care Liaison should be responded to within the standard two working days.
- Primary Care Liaison should not expect an IAPT worker to risk assess patients.
- Assumptions should not be made by Primary Care Liaison that assessments have already been made without being verified.

#### Key points of learning for Bournemouth, Christchurch and Poole:

- Poole Emergency Department (ED) staff should ensure that key information regarding suicidal thinking is communicated to police when the Criminal Justice Liaison Service (CJLS) are expected to undertake a clinical assessment.
- CJLS practice at that time was not to interrogate Systm1 electronic records. Had Systm1 been viewed and information gathered from the family, this is likely to have provided a very different picture of the risk.

#### Published reports, learning briefings and composite action plans

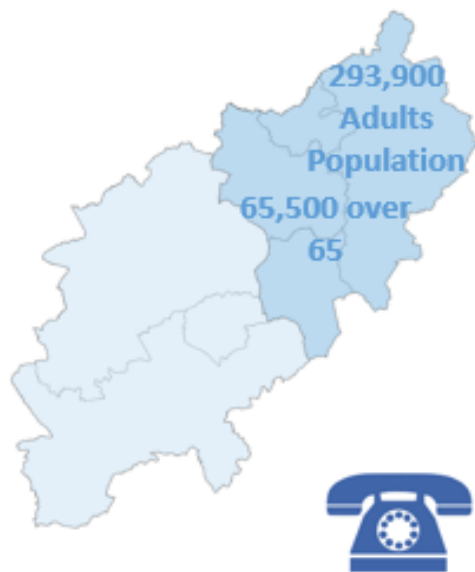
Published reports and learning briefings for all Safeguarding Adult Reviews [can be found on the NSAB website](#).

Agency recommendations for the three reviews were collated into composite action plans. All actions are monitored by the Quality & Performance Sub Group and reviewed by the Safeguarding Adults Review Sub Group. NSAB will evaluate changes to policy and practice and the embedding of the learning within agencies through until completion.



#### National SAR Analysis

The first national analysis of Safeguarding Adult Reviews (SARs) in England was funded by the Care and Health Improvement Programme, supported by the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS). Its purpose was to identify priorities for sector-led improvement. You can find the report on the [LGA website here](#). The SAR Sub Group have a detailed action plan to address the learning for Safeguarding Adult Boards.

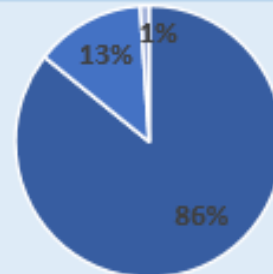


**2,533** concerns raised

**1,959**  
remained Alerts

**574**  
became Enquiries

**86%** (479) of enquiries had Provider as the 'Source of Risk'



Other options- Known to Individual 13% and unknown to Individual 1%

**42%**  
Male

**58%**  
Female

The enquiry subject was frequently of the female gender

\*Adult population based on first draft census data ages 15+.

**Subject age band of the enquiry:**

18-64  
**39%**

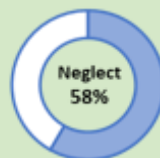
65-74  
**11%**

75-84  
**21%**

85-94  
**24%**

95+  
**5%**

**50% of completed enquiries involved Neglect.**

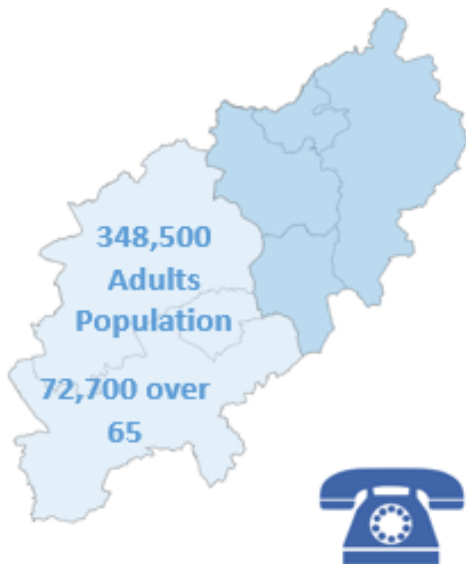


Risk Remains  
**5%**

Risk Reduced  
**63%**

Risk Removed  
**32%**

Following investigation, **95%** identified with risk had their risk removed or reduced

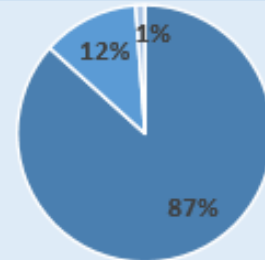


**3,941** concerns raised

**2,389**  
remained Alerts

**1,552**  
became Enquiries

**87%** (1338) of enquiries had Provider as the 'Source of Risk'



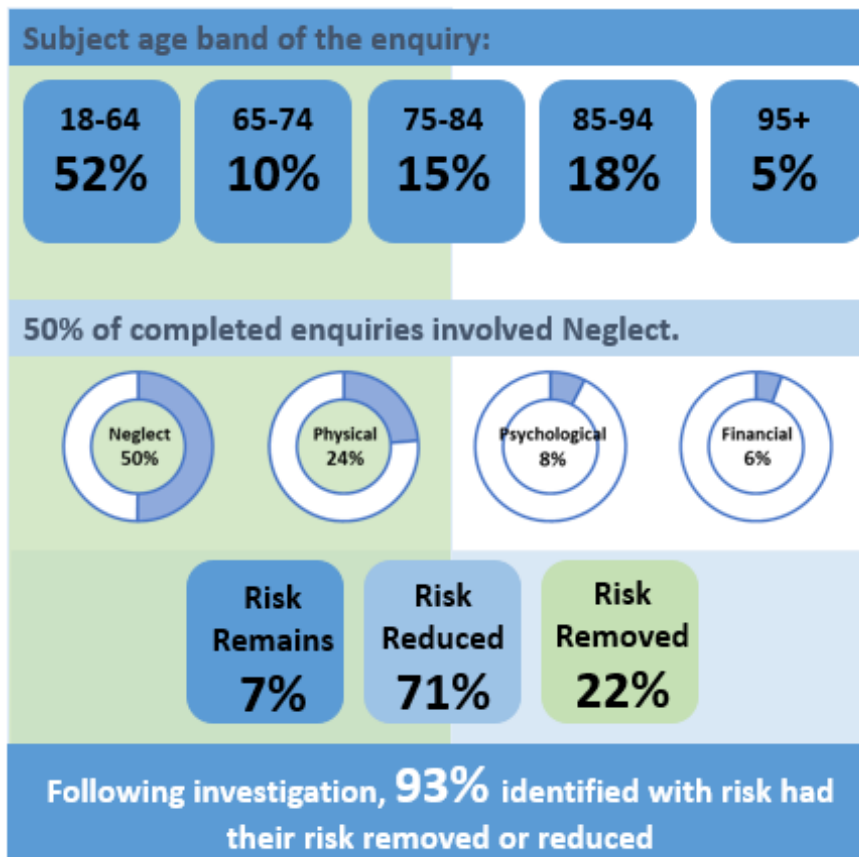
Other options- Known to Individual 12% and unknown to Individual 1%

**46%**  
Male

**54%**  
Female

The enquiry subject was frequently of the female gender

\*Adult population based on first draft census data ages 15+.



## Strategic Plan 2021-23 – Progress

The Strategic Plan 2021-23 was built on the previous plan 2018-20 and is structured according to NSAB's vision, the six key principles (as set out by the government in the Care Act 2014 statutory guidance), local and national priorities.

### Board priorities for 2021-23:

1. Making Safeguarding Personal
2. Prevention
3. Quality

### NSAB themes for 2021-23:

1. Raising Awareness of NSAB and Safeguarding
2. Learning from Safeguarding Adult Reviews
3. Understanding the Impact of Covid-19
4. The Difference NSAB Makes
5. Homelessness

The Board also received 6-monthly updates from Public Health Northamptonshire and Northamptonshire Police in respect of the themes in the previous version of the Strategic Plan - suicide, domestic abuse, and serious organised crime.

### Priority 1 - Making Safeguarding Personal

- a. Work together as a Board to provide local leadership on safeguarding adults to ensure people are safe, particularly during the period of transition from the County Council to the new Unitary Authorities. ✓ **Achieved**
- b. Continuously learn and develop as the NSAB to ensure the Board's key priorities and objectives are delivered by the partnership. ✓ **Achieved**
- c. Ensure appropriate membership is at the right level for Board and Sub Groups and engagement is appropriate to drive business. ✓ **Achieved**
- d. Ensure users and carers are supported in their role in keeping people safe, and they help to evaluate the effectiveness of safeguarding adults within Northamptonshire. ✓ **Ongoing activity**

### Priority 2 - Prevention

- a. Enable and support local communities to play their role in keeping people safe by improving communication to raise awareness of key safeguarding messages. ✓ **Achieved**
- b. Ensure learning from national and local multi-agency reviews and reports are shared and implemented locally. ✓ **Achieved**
- c. Ensure learning and development opportunities are available to the voluntary sector. ✓ **Achieved**

### Priority 3 - Quality

- a. Ensure statutory responsibilities for a safe and legal transfer to the new Unitary Authorities is in place, and that customers are not adversely affected by the change. ✓ **Achieved**
- b. Mitigate risks flagged on the NSAB Risk Register. ✓ **Achieved**
- e. Ensure effective analysis and response to partnership data. ✓ **Ongoing activity**
- c. Ensure Board have oversight of partners' use of resources to meet the demands to meet quality standards. ✓ **Achieved**
- d. Ensure NSAB multi-agency policies and procedures are reviewed in a timely manner. ✓ **Achieved**



## Income and Expenditure 2021-22

Statutory partners contribute financially to NSAB's operating expenditure as well as providing 'in kind' resources such as meeting venues and their officers' valuable time and expertise

### Partnership Income

Statutory Partner	2021-22 £
NHS Northamptonshire Clinical Commissioning Group *	30,535
North Northamptonshire Council	37,500
Northamptonshire Police *	30,535
West Northamptonshire Council	37,500
Carry forward from 2020-21 for CCG and Police	13,930
Covid fund	10,620
<b>Total Income</b>	<b>160,620</b>

\*Towards the end of financial year 2020-21, an additional contribution was requested from the three statutory partners of £4,155. NHS Northamptonshire Clinical Commissioning Group (CCG) and Northamptonshire Police made an additional financial contribution, but Northamptonshire County Council (NCC) did not adjust their base budget from £30,624. As a result, NCC overspent by £1,385 but the CCG and the Police underspent by £6,965 each. At the end of the year, there was a small carry forward of £13,930 that the CCG and Police agreed to off-set against their contribution for 2021-22.

### Partnership Expenditure

Statutory Partner	2021-22 £
Staffing	83,057
Independent Chair	18,076
Safeguarding Adult Reviews (SAR)	10,127
Marketing and print - #ReportIt campaign	734
Week of Learning	804
Office costs	207
SAR legal fees	7,075
<b>Total Expenditure</b>	<b>120,080</b>

  
**Northamptonshire**  
*Safeguarding Adults Board*



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