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**North
Northamptonshire
Council**



**West
Northamptonshire
Council**

Meeting: Shared Services Joint Committee
Date: Wednesday 27th March, 2024
Time: 2.00 pm
Venue: Council Chamber, Corby Cube, George Street, Corby, NN17 1QG

To members of the Shared Services Joint Committee

Councillor Jonathan Nunn (Co-Chair), Councillor Jason Smithers (Co-Chair), Councillor Adam Brown, Councillor Lloyd Bunday, Councillor Mike Hallam and Councillor Helen Howell

Agenda			
Item	Subject	Presenting Officer	Page no.
01	Apologies for non-attendance		
02	Members' Declarations of Interest		
03	Notifications of requests to address the meeting		
04	Minutes of the Meeting held on 17 January 2024		5 - 8
05	Chair's Announcements		
Items requiring a decision			
06	Approved Mental Health Professionals (AMHP) Disaggregation Update	David Watts (NNC) and Stuart Lackenby (WNC)	9 - 18
07	Visual Impairment (VI) Update	David Watts (NNC) and Stuart Lackenby (WNC)	19 - 28
08	Inter Authority Agreement - 2023/2024 Quarter 3 Performance Report	Tom Barden (NNC) and Sarah Reed (WNC)	29 - 56


Urgent Items

To consider any items of business for which notice has been given to the Proper Officer prior to the meeting and which the Chair considers to be urgent pursuant to the Local Government Act 1972

09

Close of Meeting

Sanjit Sull, Monitoring Officer
North Northamptonshire Council



Proper Officer
Tuesday 19 March 2024

This agenda has been published by Democratic Services.

Committee Administrator: Louise Tyers

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Where a matter arises at a meeting which **relates to** other Registerable Interests, you must declare the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but must not take part in any vote on the matter unless you have been granted a dispensation.

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Agenda Item 4



Minutes of a Meeting of the Shared Services Joint Committee

At 2.00 pm on Wednesday 17th January, 2024

Held in the Council Chamber, Corby Cube, George Street, Corby

Present:-

Members

Councillor Jason Smithers (Co-Chair, North)	Councillor Jonathan Nunn (Co-Chair, West)
Councillor Lloyd Bunday (North)	Councillor Matt Golby (West)
	Councillor Mike Hallam (West)

Officers

George Candler – Interim Chief Executive (NNC)
Anna Earnshaw – Chief Executive (WNC)
Adele Wylie – Executive Director of Customer and Governance (NNC)
Sarah Hall – Deputy Director of Law and Governance (WNC)
Janice Gotts – Executive Director of Finance and Performance (NNC)
Jane Bethea – Director of Public Health (NNC)
David Watts – Executive Director of Adults, Health Partnerships & Housing and Children's Services (NNC)
Tom Barden – Head of Performance, Intelligence and Partnerships (NNC)
Hayley McKagan – Commissioning, Quality & Outcomes Manager (WNC)
Andrew Macheson – Commissioning Manager (NNC)
Michael Hurt – Service Manager (WNC)
Louise Tyers – Senior Democratic Services Officer (NNC)

31 Apologies for non-attendance

Apologies for non-attendance were received from Councillors Adam Brown and Helen Harrison. Councillor Matt Golby attended as a substitute member.

32 Minutes of the Meeting held on 25 October 2023

The minutes of the meeting held on 25 October 2023 were approved as a correct record and signed by the Chair.

33 Members' Declarations of Interest

The Chair invited those who wished to do so to declare any interests in respect of items on the agenda.

Councillor Mike Hallam and David Watts declared that they were related through Councillor Hallam's cousin.

34 Notifications of requests to address the meeting

There were no requests to address the meeting.

35 Chair's Announcements

There were no Chair's announcements.

36 Commissioning Healthwatch in Northamptonshire

The Joint Committee received a report which outlined the intention to separate the countywide Healthwatch service and for each authority to develop and commission their own Healthwatch models for West Northamptonshire Council (WNC) and North Northamptonshire Council (NNC) respectively.

Both councils jointly commissioned a local Northamptonshire Healthwatch organisation, with the existing contract due to expire on 31st March 2024. Both authorities now wanted to develop and commission their own Healthwatch service to make it more local for their respective areas, as per national guidance. Healthwatch was a statutory duty for each local authority. Councils had a responsibility under the Health and Social Care Act 2012 to make arrangements to establish and maintain a local Healthwatch service.

The current contract value was £195,000 per annum and was split 48.6% North Northamptonshire and 51.4% West Northamptonshire.

RESOLVED:

To delegate authority to the Cabinet Member for Adult Social Care and Public Health and the Executive Member for Adults, Health and Wellbeing, in consultation with the Executive Director of People Services and Director of Public Health & Wellbeing to:

- Commission a separate more local North Northamptonshire Healthwatch and a West Northamptonshire Healthwatch services, that will have the interests of its own population served.
- Each authority reviews their service specification to include Healthwatch England's current recommendations and any revised national quality framework.
- The guidance states that local authorities should establish a contractual arrangement with an independent organisation that should be a social enterprise that delivers Healthwatch activity. Social Enterprises are defined as:

Community Interest Companies (CICs), Industrial and Provident Societies (IPSs) or Limited Liability Partnerships (LLPs).

- The recommended financial model for Healthwatch asks councils to provide additional funding to bolster the core grant. A 12-month waiver would offer each authority time to re-assess the contract value as they develop their own model.

Reasons for Recommendation

To ensure that each council has appropriate Healthwatch arrangements in place which have the interests of its own population served.

Alternative Options Considered

The only alternative would be the existing model, that both councils had the intention of moving away from.

37 Options Appraisal for Recommissioning Public Health Services for Children and Young People and Integrated Sexual Health Services

The Joint Committee received a report which sought agreement to approve the recommissioning approach of:

- The 0-19 Health Visiting and School Nursing Service
- Strong Start Service
- Northamptonshire Integrated Sexual Health and HIV Service
- Youth Counselling Offer (REACH)
- Oral Health Promotion Service
- Dental Epidemiology Survey

An initial decision was sought as to whether the North and West contracts (total estimated annual value of £17.4m, North £8.5m and West £8.9m), should be contracted separately from April 2025 following disaggregation. These contracts were currently funded from Public Health Grant by each local authority.

Both councils were working closely with providers to regularly review the contracts and assess them against service improvement plans as a mechanism for driving up performance and monitoring progress.

RESOLVED:

- (i) For services described in the report that are currently commissioned jointly by NNC and WNC, to continue to be commissioned in this way until 31 March 2025.
- (ii) For joint commissioning arrangements to cease of 31 March 2025, with both NNC and WNC commissioning and procuring services independently from this point onwards.

Reasons for recommendations

The separate recommissioning of these services will ensure that the process meets the statutory duties of both NNC and WNC and provides an opportunity to improve and transform the current services and target more resources locally where they are needed, especially in those areas most in need.

Both NNC and WNC have sufficient commissioning staff and time to increase market interest, by carrying out soft market testing creating competition, and opening up dialogue with current, new and emerging providers through market engagement events. These may be different in NNC compared to WNC.

Commissioners will ensure that engagement and involvement of current service users, families, practitioners and providers are considered to develop the service model and pathway for Children and Young People services.

Commissioners will ensure that the Children and Young People services are better aligned with current services in different parts of Northamptonshire (e.g. integrated Family Hub ambitions (hub and spoke) and the youth offer).

Alternative options considered

To maintain the existing commissioning arrangements.

38 Inter Authority Agreement - 2023/2024 Quarter 2 Performance Report

The Joint Committee received a report which provided the quarter two performance report for services delivered via the Inter-Authority Agreement (IAA) arrangements and covered the period between July and September 2023.

Performance was reported on those services provided by NNC to WNC:

- Approved Mental Health Providers
- Countywide Traveller Unit
- Digital Infrastructure
- Household Waste Recycling Centres
- Learning and Development
- Minerals and Waste Planning
- Northamptonshire Archaeological Resource Centre
- The Virtual School
- Public Health Intelligence
- Adult Learning

along with those services provided by WNC to NNC:

- Archives and Heritage, including Historic Environment Records and Portable Antiquities Scheme
- Assistive Technology
- Library Support Services
- Streetlighting
- Visual Impairment.

Members noted that there had been good performance across the IAA services.

RESOLVED:

To note the Quarter 2 performance report, as shown in Appendix A of the report.

39 Close of Meeting

The Chair thanked members and officers for their attendance and closed the meeting.

The meeting closed at 2.10pm.

Chair

Date

Agenda Item 6



Shared Services Joint Committee 27 March 2024

Report Title	Approved Mental Health Professionals (AMHP) Disaggregation Update / Progress Report
Report Author	David Watts and Stuart Lackenby
Executive Members	Cllr Gill Mercer, Executive Member for Adults, Health and Wellbeing, NNC Cllr Matt Golby, Portfolio Holder for Adult Care, Wellbeing and Health Integration, WNC

Key Decision	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in by Scrutiny?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there public sector equality duty implications?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information (whether in appendices or not)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Applicable paragraph number/s for exemption from publication under Schedule 12A Local Government Act 1972	

1. Purpose of Report

- 1.1 This report is on the progress and timescales with the disaggregation of the Approved Mental Health Professionals (AMHP) service and seeks the approval from Shared Services Joint Committee to:
- Prepare a further report to a future SSJC meeting, where a path to Disaggregation will be outlined.

2 Executive Summary

- 2.1 The AMHP is a Statutory role delivered pursuant to the Mental Health Act (2007) and its Code of Practice. The Local Authority (LA) is legally responsible for the Service. AMHP is a statutory service, due to the high risk of the people supported by this service, for which the LAs are legally responsible.
- 2.2 The Service is hosted by NNC, serving both Children and Adults across Northamptonshire.
- 2.3 The timeframe for disaggregation was set out within the IAA Blueprint approved by NCC and WNC initially set to be by April 2022, but in January 2021, it was agreed that it would be at a date after April 2022 without specifying a date.

- 2.4 The AMHP service has an Inter Authority Agreement (IAA) in place which lays out the service to be provided, statutory requirements and Key Performance Indicators (KPIs) which have to be reported against. There are also detailed arrangements laid down regarding the UK GDPR Article 28 regulations regarding the holding and processing of information.
- 2.5 To ensure NNC and WNC can continue to deliver the service safely as part of their statutory duties, without additional risk to customers, an updated report will set out a recommendation to reprofile the disaggregation of this function.
- 2.6 There is a national shortage of suitably qualified personnel for the AMHP Service. The Service will be at a high risk of failure if it is disaggregated prior to suitable staffing arrangements being in place. The risk to residents is significant (including potentially fatal) if the Service is not adequately resourced prior to disaggregation.

3 Recommendations

- 3.1 It is recommended that the Shared Services Joint Committee (SSJC) approve:

Option A –

- To receive a future report on progress and timescales with the AMHP service in May or July 2024 outlining a plan to disaggregate when it is safe and legal to do so.

3.2 Reasons for the Recommendation

- 3.2.1 Approving the proposed option will see a reprofiling of the disaggregation of the Service and will provide time to give greater assurance on when the service will be able to disaggregate, by ensuring staff can be recruited, adequately trained and qualified to provide safe and effective service delivery and to prepare how the Service should be managed to carry out its duties with the Emergency Duty Team activities transferring out from NCT who currently provide the service.
- 3.2.2 Reprofiting the disaggregation of the Service will reduce the significant risks to people with serious mental health problems as well as reducing risks of Local Authority liability and reputational damage to NNC and WNC.

3.3 Alternative Options Considered (Not Recommended)

Option B – Continue as a hosted service and not to disaggregate at all.

4. Report Background

- 4.1 From 1 April 2021, NNC and WNC entered an IAA for the delivery of hosted services as agreed as part of the Future Northants Disaggregation Blueprint.
- 4.2 The timeline for disaggregation of the Services is not currently set. It was agreed to be delayed until it is safe and legal to do so and to reprofile the hosted AMHP Service disaggregation timelines, adjusting the IAA Blueprint. The IAA

Schedule 2A1 and Schedule 3A1 are being updated and will be added as an Appendix.

- 4.3 The Service operates across Northamptonshire, responding to requests to coordinate and assess individuals who are in mental health crisis (alongside authorised doctors) and are considered to need admission to hospital using the powers of the Mental Health Act 1983.
- 4.4 During the project activity to disaggregate the Service, significant risks were identified. At the 16 June 2022 Adults IAA meeting and at the Shared Services Joint Committee 18 January 2023, it was agreed that disaggregating as per the original blueprint would pose significant risks for the seriously mentally ill people dependent on this service, so it was agreed to delay disaggregation until the Service is ready.
- 4.5 The team consists of 7.8 full time equivalent (fte) AMHP posts, plus a Team Manager and a Business Relations Officer making a total of 9.8 fte hosted by NNC. It provides a Service to WNC in line with the LGR Blueprint. Alongside the substantive AMHP team, there are non-substantive AMHPs within NNC, WNC, Northamptonshire Health Foundation Trust (NHFT) and AMHPs employed on casual hours who support the rota.
- 4.6 The Service is not constrained by age restrictions or any specialist need. AMHPs exercise additional duties and powers under the Act in respect of Community Treatment Orders (CTO), Guardianship, Applications to Court to displace a Nearest Relative (NR) or taking over the NR role. Each AMHP acts in an autonomous manner, they cannot be instructed by the LA to make a decision and the LA holds vicarious liability for the actions of the staff.
- 4.7 The current service delivers a 09:00 to 21:00 rota from Monday to Friday with Northamptonshire Children's Trust (NCT) covering the Service via their Emergency Duty Team (EDT) from 21:00 to 09:00 on weekdays and all day on weekends and bank holidays. NCT have advised that they no longer wish to deliver this service for WNC and NNC and an Options Appraisal is being worked up to help decide what future EDT might be managed.
- 4.8 The LA has a legal responsibility to ensure it provides 'sufficient' AMHPs to provide a safe and legal service. AMHPs lead the inter-agency organisation of statutory Mental Health Assessments under the Mental Health Act 1983 and are authorised to detain under the Act. AMHPs exercise additional duties and powers under the Act in respect of CTO's, Guardianship, Applications to Court to displace a Nearest Relative (NR) or taking over the NR role.
- 4.9 The Service has a 5 workers per day rota. 2 new AMHPs have joined the Rota this financial year (1 in the North and 1 in the West). The 7.8 substantive posts cover 67% of the assessment rota 'slots' with the remainder being covered by non-substantive posts and casual AMHPs.
- 4.10 There are several Performance Indicators that are reported as part of the IAA and the Service is performing within these targets. There is also one national indicator that is reported to the CQC bi-annually.

- 4.11 The Operating Model in Adult Social Care has resulted in more generic team functions, which in turn has led to a number of staff who lack the confidence and competence to support adults with enduring or acute mental health presentations. Fewer staff are coming forward for training, therefore there has been an increase of responsibility on remaining AMHP staff. There is also a shortage of AMHP trained staff which will make splitting the current staff between NNC and WNC or recruiting to posts difficult, exposing both councils to statutory risk. Vulnerable people dependent on this statutory service would be put at high risk.
- 4.12 To undertake additional training to become an AMHP, a person needs to be a Registered Social Worker, Mental Health or Learning Disability Nurse, or Occupational Therapist with 2 years' experience. The Service will continue to plan to 'grow our own' and work with NHFT to explore the training of Nurses to the role. This is an ongoing process across the County, which is delivered via University programmes that take 2 years to complete. In December 2023, there are currently 6 people in various stages of qualifying. There are 3 AMHPs who have just successfully completed the AMHP course (Lead Assessments now outstanding, but can still now go on the Rota), 2 who have successfully completed the first stage of the course, 1 who is still doing so and we are just receiving applications for next year's course. Establishing a team, with this level of qualification is necessary in order to reach a safe staffing level.
- 4.13 AMHP training is provided via accredited courses at Universities, so the training timescales are reliant on when these courses are run across the year. A limiting factor is the ability of the AMHP service to support trainee AMHPs alongside its daily workload. All trainee AMHPs require a Practice Mentor Assessor to support and assess their work. This role is undertaken by members of the substantive team, so they are only able to support around 8 trainees at any time. The ability to train new AMHPs is also reliant on the Councils supporting newly qualified workers to gain the 2 years' experience required, to gain experience and confidence specifically in working with people with mental health problems so that they are ready and confident to apply for and complete the course. NNC has a Social Worker career pathway which encourages and rewards Social Workers taking on additional roles.
- 4.14 The Deputy Director of Mental Health, Learning Disabilities and Autism at NHFT remains concerned about the ability of the stretched AMHP service to provide a safe service were it to disaggregate.
- 4.15 **Links and Dependencies**
- 4.16 There are links with work, which is underway to bring the Adults Emergency Duty Team (EDT), which is currently delivered by the NCT, into Adult Social Care.
- 4.17 Systm1 (read access to the mental health database only). Any future agreements would need to be split between two councils if this changed.
- 4.18 Partners - NHFT, East Midlands Ambulance Service, Police and Courts – Although there are no formal partnership arrangements, to undertake the functions of the Mental Health Act requires all these organisations. At present,

NHFT do not have the Doctors' rota in place to support NNC and WNC running separate AMHP services.

5. Issues and Choices

5.1 The following options are to be considered:

- **Option A** – To receive a further report in May 2024 which gives details of progress with a recommended timescale for disaggregation.
- **Option B** – Continue as a hosted service and not to disaggregate at all.

5.2 The recommended option is Option A.

5.3 Option A (Recommended Option) – To receive a report in May 2025 on progress and a recommended timescale for disaggregation.

Advantage / Disadvantage	Approved Mental Health Professionals
Advantage 1	Both WNC and NNC agree that disaggregation now would present a high statutory risk to both LAs, leaving Service users vulnerable and pose a potential danger to themselves or others. This option would mitigate these risks.
Advantage 2	The Safeguarding of the people supported is paramount, ensuring that they receive the best outcomes. This option would enable the Service to continue to deliver on these requirements until it is safe and legal to disaggregate the Service.
Advantage 3	There is a national shortage of suitably qualified AMHPs and therefore recruitment to vacant posts is difficult. Due to the complexity of the role it takes 2 years to train staff. Allowing additional time would enable the Service to recruit people, facilitate them obtaining the relevant qualifications and train them to the required standard prior to disaggregating in a manner that is safe and legal.
Advantage 4	The Service is the statutory responsibility of each LA. Delaying disaggregation would allow the Service to carry out their roles lawfully until it is safe and legal to disaggregate.
Disadvantage 1	Hosting arrangement places a potential additional burden on the host authorities by continuation of line management requirements and financial costs.
Disadvantage 2	There may be a perceived lack of local focus of the Service by WNC during this extended period leading to a less personalised and connected Service for Service users.

5.4 **Option B** – Continue as a hosted service and not to disaggregate at all.

Advantage / Disadvantage	Approved Mental Health Professionals
Advantage 1	The Service would be able to continue to deliver the statutory service as they currently do.
Disadvantage 1	There would be a potential additional burden on the host authority to continue to host the Service through line management requirements and financial costs.
Disadvantage 2	There may be a perceived lack of local focus of the Service by WNC leading to a less personalised and connected Service for Service users.
Disadvantage 3	It may be a perceived that there is not the depth of understanding of the community at the local level and the offer may not provide for the specific needs of the area and a less personalised and connected Service for customers.
Disadvantage 4	Not disaggregating would conflict with the desire to fully disaggregate the Service, giving each authority greater control over decision making in line with what is appropriate for its Service users.

6. Implications (including financial implications)

6.1 Resources and Financial

- 6.1.1 Additional resources will be required, such as Human Resources, ICT and Legal Services, to support the disaggregation process.
- 6.1.2 Recruitment and training of staff to ensure future suitably qualified staff for each Service.
- 6.1.3 Alternative ways of training and working, such as collaborative support agreements between WNC and NNC will need to be explored to ensure that services can be delivered, with resilience built in to protect customers.

6.2 Legal and Governance

- 6.2.1 The SSJC is responsible for “ensuring there are robust plans for any disaggregation of Services and that there is a smooth transition to new service delivery arrangements”. They are also responsible for ensuring that statutory arrangements are in place for each Council.
- 6.2.2 The Service is currently operating in accordance with the IAA that exists between NNC and WNC. The Councils will approve any further amendments under the IAA to ensure that adequate collaborative, contract and financial management and governance is in place between the authorities.
- 6.2.3 AMHP is a statutory service and the LAs are legally responsible for the Service. It is imperative to ensure that the Service is disaggregated when it is safe and

legal to do so. If there is not a delay to disaggregation, then there is a risk that legal requirements would not be met, and vulnerable people supported will be put in danger.

6.3 Relevant Policies and Plans

6.3.1 Reprofiled disaggregation of AMHPs Service complies with the requirements of the approved Blueprint, whereby it outlines the hosted services in each authority that require disaggregating.

6.4 Risk

6.4.1 If the Service is disaggregated before the recommended date the following risks will arise:

Risk Assessment	Mitigating Action
<p>Disaggregating the Service could mean the Service cannot be delivered in accordance with Statutory requirements.</p> <p>The disaggregated Services will lose the ability to be flexible to be able to respond adequately to daily fluctuating numbers of referrals from each LA (which have to be seen urgently, so cannot be managed via a waiting list). This leaves both Councils at risk of failing to meet their statutory responsibilities.</p>	<p>Delay of disaggregation provides more time to ensure that there are adequate substantive staff at NNC and WNC to safeguard the Service and Executive Directors are confident that the Service can be split.</p>
<p>Disaggregating the Service may require NHFT to provide additional Psychiatrists to support both Councils' rotas- outside usual working hours. This may or may not be possible but would incur additional costs.</p>	<p>Early conversations are required with NHFT to plan for any disaggregation so that the impact on Health colleagues and capacity can be understood and planned for.</p>
<p>Colleagues in NHFT, the Police and the General Hospitals currently raise concerns about the inability to assess people as quickly as they or we would wish. Disaggregating the service without sufficient resources in place to cover the two Councils' individual rotas increases this risk.</p>	<p>Delay of disaggregation allows the two Councils to invest in increasing the capacity and resilience in AMHP services to meet current and future need.</p>
<p>Disaggregation would leave the Service at WNC and NNC vulnerable due to a lack of numbers of substantive staff members, especially if there is sickness or resignations.</p>	<p>Delay of disaggregation provides more time to ensure that there are sufficiently trained substantive and non-substantive staff at NNC and WNC to safeguard the Service.</p>

Risk Assessment	Mitigating Action
<p>As of 1 December 2023, there are 7.8 FTE members of staff undertaking substantive AMHP posts in NNC for both Councils. Additionally, there are:</p> <ul style="list-style-type: none"> • 4 NNC non substantive AMHPs • 6 WNC non substantive AMHPs • 4 NHFT non substantive AMHPs <p>In addition, there are 4 Casual AMHPs (employed per shift).</p>	
<p>Disaggregating the service would require increasing the size of the team in each Council in order to provide a safe service. Both teams would require a Team Manager (1.0 FTE) and Business Relations Officer (1.0 FTE).</p>	<p>Delay of disaggregation provides more time to develop staff to take on these roles and to identify funding for a future service.</p>
<p>Residents will be left vulnerable to harm (including death) if the Service cannot adequately meet the demands placed on it and therefore cannot provide an AMHP to assess people who are seriously mentally ill and require a hospital admission to protect themselves or others.</p> <p>Each LA may be exposed to reputational risk.</p>	<p>Delay of disaggregation will allow time for the Executive Directors to judge when a safe and legal service is be put in place</p>

6.4.2 If the Service is reprofiled and disaggregation delayed, this will significantly reduce the risk of the Services not meeting their statutory duties. It will also allow for recruitment and training for new / substantive posts and sufficient transfer of knowledge, data and systems to enable the Services to function satisfactorily.

6.5 Consultation

6.5.1 This report does not meet the parameters required for public consultation.

6.6 Consideration by Executive Advisory Panel

6.6.1 No considerations arising from this report.

6.7 Consideration by Scrutiny

6.7.1 No considerations arising from this report.

6.8 Equality Implications

6.8.1 The Service supports people with protected characteristics, namely those who are subject to Statutory mental health assessments under the Mental Health Act 1983 and potentially detained under the Act. This section of the community could be exposed to high risk if the Service is not disaggregated in a prudent and lawful manner. The proposed extended timescales will reduce the disruption and danger to Service users.

6.9 Climate Impact

6.9.1 No negative impacts arising from this report.

6.10 Community Impact

6.10.1 The Community will be protected by ensuring high-quality services are in place.

6.11 Crime and Disorder Impact

6.11.1 People who experience mental illness are more likely to come into contact with the criminal justice system, due to their heightened vulnerability to being subject to crime and the elevated risk of crime perpetration. The community as a whole will be protected by ensuring a high-quality Service is in place.

7.0 Background Papers

7.1 **None**

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Shared Services Joint Committee 27 March 2024

Report Title	Visual Impairment (VI) – Update /Progress Report
Report Author	David Watts and Stuart Lackenby
Executive Member	Cllr Gill Mercer, Executive Member for Adults, Health and Wellbeing, NNC Cllr Matt Golby, Portfolio Holder for Adult Care, Wellbeing and Health Integration, WNC

Key Decision	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in by Scrutiny?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there public sector equality duty implications?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information (whether in appendices or not)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Applicable paragraph number/s for exemption from publication under Schedule 12A Local Government Act 1972	

List of Appendices

[Appendix A - Glossary of Terms](#)

1. Purpose of Report

- 1.1 To report on progress and timescales within the Visual Impairment (VI) service as requested by SSJC on the 18/01/2023 ([Public Pack](#))[Agenda Document for Shared Services Joint Committee, 18/01/2023 14:00 \(moderngov.co.uk\)](#) and 29/03/2023 [Public reports pack 29th-Mar-2023 Shared Services Joint Committee](#) As per the Inter Authority Agreement (IAA) Annual Report for 2022/23 presented to SSJC on the 14/06/2023 the VI service currently has a revised disaggregation date of long term deferral.
- 1.2 To reduce the potential disruption to the Statutory Service and diminish risk to the North Northamptonshire Council (NNC), West Northamptonshire Council (WNC) and their residents, this report seeks the approval to provide a further update report on progress and timescales within the VI service in March 2025.

2. Executive Summary

- 2.1 VI is a Statutory Service, due to the high risk to the safety of customers of the service, for which the Local Authorities (LAs) are legally responsible.
- 2.2 The Service is hosted by WNC, serving both Children and Adults across Northamptonshire (NNC and WNC).
- 2.3 The timeframe for disaggregation was set out within the IAA Blueprint approved by NCC and WNC.
- 2.4 The Service has an IAA in place which lays out the service to be provided, statutory requirements and KPIs which must be reported against. There are also detailed arrangements laid down regarding the UK GDPR Article 28 regulations regarding the holding and processing of information.
- 2.5 To ensure NNC and WNC can continue to deliver the Service safely as part of their statutory duties, without additional risk to customers, this report sets out the recommendation to reprofile the disaggregation of this function, and the request to report in March 2025, detailing progress and a recommended timescale for disaggregation.
- 2.6 There is a national shortage of suitably qualified personnel for the VI Service. The Service will be at a high risk of failure if it is disaggregated prior to suitable staffing arrangements being in place. The risk to residents is significant (including potentially fatal) if the Service is not adequately resourced prior to disaggregation.
- 2.7 The Service is a Statutory provision delivered pursuant to the Care Act (2014) and its Code of Practice.

3. Recommendations

- 3.1 It is recommended that the Shared Services Joint Committee:
 - 3.1.1 Approve to a further report in March 2025 outlining progress and timescales for the VI service being disaggregated.

4. Reasons for the Recommendation

- 4.1.1 This will provide the service with enough time to ensure staff can be adequately trained and qualified to provide safe and effective service delivery.

Alternative Options Considered

- 4.1.2 **None** – SSJC have approved a long-term delay to disaggregation and requested a further report in March 2024 only.

5. Report Background

- 5.1 From 1 April 2021, NNC and WNC entered an IAA for the delivery of hosted Services as agreed as part of the Future Northants Disaggregation Blueprint. Both provisions are delivered through hosted arrangements in line with the

Local Government Reform (LGR) blueprint previously agreed through the LGR transformation programme.

- 5.2 The timeline for disaggregation of the Service is currently set as a revised long-term deferral, (IAA schedule 3A8), as part of wider plans for the Adult Social Services disaggregation.
- 5.3 The Service is Statutory and LAs are legally responsible for the delivery of the Service. In Northamptonshire the VI Service operates across the whole County (WNC and NNC) responding to requests for support from customers.
- 5.4 The Service provided under the Care Act 2014, prevention section, providing a countywide Specialist Rehabilitation Service for Adults and Children who have a visual impairment and those who may need help with mobility training and/or daily living skills training. This includes the administration of specialist equipment which is supplied to customers undergoing rehabilitation programmes to provide support in their homes and in the community; the Service objective is to promote customers' independence whilst improving their of quality life, providing safety and managing risk to the service user.
- 5.5 The team currently hosted by WNC, provides a Service to NNC through a hosted arrangement in line with the LGR blueprint previously agreed through the LGR transformation programme.
- 5.6 The statutory element of the service is the Visual Impairment register of residents with visual impairments in accordance with Statutory requirements to plan the provision of Services to meet demand for care and support, and monitors changes to the number of adults in the area with the need for care and the types of needs they have. The register has now been split so North Northamptonshire and West Northamptonshire both maintain their own registers in accordance with statutory requirements.
- 5.7 The Councils have a three-yearly Statutory obligation to report on the register of blind and partially sighted people (SSDA902). Both councils now hold their own registers on their IT systems.
- 5.8 The Service is responsible for documentation, liaison with NHS consultants, and updating registers and records, in line with the Care Act (2014) accordingly.
- 5.9 The Service delivers a 9:00 – 17:00 service across Monday to Friday.
- 5.10 It is considered impossible, at this time, to split the service further. The service has experienced challenges which included difficulties recruiting appropriate officers with the required qualifications as there are current shortages in the labour market for qualified personnel. The existing members of staff were cultivated through university programmes by the current team. Recruitment to these specialist roles is challenging, but we can 'grow our own' through the apprenticeship scheme. Alternative ways of working are also being considered in order to address these issues.
- 5.11 The Service comprises of 2 permanent Full Time Equivalent staff: one Qualified Senior Rehabilitation Officer (Visual Impairment) and one Qualified Rehabilitation Officer (Visual Impairment). Since the previous report to this

committee 2 apprentice roles have been recruited to, one starting in May 2023 and the other starting in June 2023, they both enrolled in September 2023 for the 2-year course and qualification for the Qualified Rehabilitation Officer (Visual Impairment Rehabilitation Certificate (Foundation Degree) which takes two years to complete.

- 5.12 The qualification for the Qualified Senior Rehabilitation Officer (Rehabilitation Officer Certificate or equivalent e.g., Diploma in Higher Education in Rehabilitation Studies, Mobility Officer / Technical officer's Certificates) takes a further two years to complete.
- 5.13 It is not viable to run the service on one qualified member of staff per unitary. The different grade levels of the two members of staff mean that the balance of the two unitary councils' ability to deliver the same service would be compromised. Therefore, the recruitment and training of the new apprentice roles will give the service enough capacity to enable disaggregation to take place.

6. Links and Dependencies

- 6.1 The Service works closely with the Northamptonshire Association for the Blind (NAB).
- 6.2 The Service is involved in a pilot scheme with the Royal National Institute of Blind People (RNIB) offering places on a "Living Well with Sight Loss" free phone course at the point of registration. The aim of the pilot is to link people with the RNIB services, information and advice, and other people with a VI. It doesn't take away any of the work the team provide face to face in people's homes.
- 6.3 The Service is part of the wider Community Therapy team.

7. Issues and Choices

7.1 The following options are to be considered:

- 7.1.1 Approval of a request to provide a further report in March 2025, which gives details of progress and a recommended timescale for disaggregation.

8. Implications (including financial implications)

8.1 Resources and Financial

- 8.1.1 We can update that in addition to the IAA WNC now also recharge NNC for half of the apprenticeship costs.

8.2 Legal and Governance

- 8.2.1 The Shared Service Joint Committee is responsible for "ensuring there are robust plans for any disaggregation of Services and that there is a smooth transition to new Service delivery arrangements". They are also responsible for ensuring that Statutory arrangements are in place for each Council.
- 8.2.2 The Service is currently operating in accordance with the IAA that exists between NNC and WNC. If the recommendation proposed within the report is

agreed, then the Councils will approve any further amendments under the IAA to ensure that adequate collaborative, contract and financial management and governance is in place between the authorities.

8.2.3 As outlined within the report, VI is a Statutory Service and the LAs are legally responsible for the Service. It is imperative to ensure that the Service is disaggregated when it is safe and legal to do so. If there is not a delay to disaggregation, then there is a risk that legal requirements would not be met, and vulnerable Service users will be put in danger.

8.3 Relevant Policies and Plans

8.3.1 Reprofitting disaggregation of the VI Service complies with the requirements of the approved Blueprint, whereby it outlines the hosted Services in each authority that require disaggregating.

8.4 Risk

8.4.1 If the Service is disaggregated prior to the team having sufficiently trained and qualified staff at NNC and WNC to safeguard the Service the following risks and issues will arise:

8.4.2

Risk Assessment	Mitigating Action
Disaggregation would leave the Service at WNC and NNC vulnerable due insufficient numbers of qualified staff, to provide resilience especially if there is sickness or resignations.	Delaying disaggregation provides more time to ensure that: <ul style="list-style-type: none"> • There are sufficiently trained and qualified staff at NNC and WNC to safeguard the Service. • There is adequate time to explore alternative ways of training and working and • Executive Directors can be confident that the Service can be split in a safe and legal manner.
Residents may be left vulnerable to harm including potential death, if they do not get required the support in a timely manner e.g. road safety, if the Service cannot adequately meet the demands placed on it, and each LA may be exposed to reputational risk.	Delaying disaggregation provides more time to ensure that: <ul style="list-style-type: none"> • There are sufficiently trained and qualified staff at NNC and WNC to safeguard the Service. • There is adequate time to explore alternative ways of training and working and • Executive Directors can be confident that the Service can be split in a safe and legal manner.
Key Performance Indicators may not be met if the service is disaggregated and would leave vulnerable residents without	Delay in disaggregation would allow resources to be put in place to ensure that each Council will be able to meet

Risk Assessment	Mitigating Action
a service to ensure their safety, for an unacceptable length of time.	their statutory responsibilities and agreed service standards (as stated in the VI Service Plan – schedule 3A8)
<p>Resilience to ensure the Service can be delivered by each authority independently, safely and legally:</p> <ul style="list-style-type: none"> • Qualified Rehabilitation Officer – There is only one person in the Service that has the relevant qualifications and experience to deliver this role. • Qualified Senior Rehabilitation Officer – There is only one person in the Service that has the relevant qualifications and experience to deliver this role. • Geographical location – Existing staff that work within the Service are both geographically located within West Northamptonshire. This would likely lead to both members of the team staying with WNC, leaving NNC with no staff for their Service. 	<p>Delaying disaggregation provides more time to ensure that:</p> <ul style="list-style-type: none"> • There are sufficiently trained and qualified staff at NNC and WNC to safeguard the Service, and • Executive Directors can be confident that the Service can be split in a safe and legal manner.

8.5 Consultation

8.5.1 This report does not meet the parameters required for public consultation.

8.6 Consideration by Executive Advisory Panel

8.6.1 No considerations arising from this report.

8.7 Consideration by Scrutiny

8.7.1 No considerations arising from this report.

8.8 Equality Implications

8.8.1 The Service supports people with protected characteristics, namely those who are visually impaired. This section of the community could be exposed to high risk in terms of safety, independence, access to education, work and community life if the Service is not disaggregated in a prudent and lawful manner. The proposed delay to disaggregation will reduce the disruption and danger to Service users.

8.9 Climate Impact

8.9.1 No negative impacts arising from this report.

8.10 Community Impact

8.10.1 The Community will be protected by ensuring high-quality Services are in place.

8.11 Crime and Disorder Impact

8.11.1 No negative impacts arising from this report.

9. Background Paper

9.1 None

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Appendix A - Glossary of Terms

Acronym	Meaning
SSJC	Shared Services (Joint Committee)
NNC	North Northamptonshire Council
WNC	West Northamptonshire Council
VI	Visual Impairment
IAA	Inter-Authority Agreement
NHFT	Northamptonshire Health Foundation Trust
LA	Local Authority
FTE	Full Time Equivalent
DASS	Director of Adult Social Services
LGR	Local Government Reform
NAB	Northamptonshire Association for the Blind
CTO	Community Treatment Orders
RNIB	Royal National Institute of Blind People

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Agenda Item 8



Shared Services Joint Committee 27 March 2024

Report Title	Inter Authority Agreement – 2023 / 2024 Quarter 3 Performance Report
Report Author	Tom Barden – Head of Performance, Partnerships and Intelligence, North Northamptonshire Council Sarah Reed – Executive Director – Corporate, West Northamptonshire Council Report author: Philip Bavister – WNC Performance and Governance (<i>on behalf of West Northamptonshire and North Northamptonshire Councils</i>)

Key Decision	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in by Scrutiny?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there public sector equality duty implications?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information (whether in appendices or not)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Applicable paragraph number/s for exemption from publication under Schedule 12A Local Government Act 1972	N/A

List of Appendices

Appendix A – Draft IAA Quarterly Performance Report – Quarter 3 2023/24

1. Purpose of Report

- 1.1. To provide the Shared Services Joint Committee with the draft quarter four performance report for services delivered via the Inter-Authority Agreement (IAA) arrangements between North Northamptonshire Council (NNC) and West Northamptonshire Council (WNC) (see section 7. Background Papers).

2. Executive Summary

- 2.1. This report provides Members with an overview of performance for those services delivered via the Inter-Authority Agreement in place between North Northamptonshire Council and West Northamptonshire Council. The report covers the period between October and December 2023 inclusive (Quarter 3).

3. Recommendations

- 3.1. It is recommended that the Shared Services Joint Committee:
- a) Note the Quarter 3 performance report shown in Appendix A.

4. Report Background

- 4.1. Performance indicators included in the report have been approved by the Shared Services Joint Committee as part of the development of IAA schedule 3 service plans.
- 4.2. Each agreed schedule 3 service plan includes a suite of performance indicators that will be used to measure the service delivered to the receiving authority by the providing authority.
- 4.3. On a quarterly basis a performance report will be produced to provide Members with assurance that services are being delivered in line with the previously agreed target measures. Where performance has not met agreed targets an overview of the reasons why, along with any mitigating actions taken, will be presented by a senior officer from the associated service.
- 4.4. Table 1, below, details the services which are included within the Quarter 3 performance report, split by providing authority.

Table 1: Services reported within the Q3 IAA Performance Report

Services provided by NNC to WNC:
<ul style="list-style-type: none">➤ Approved Mental Health Providers➤ Countywide Traveller Unit➤ Digital Infrastructure➤ Household Waste Recycling Centres➤ Learning and Development – Partially Disaggregated➤ Minerals and Waste Planning➤ Northamptonshire Archaeological Resource Centre➤ The Virtual School

<ul style="list-style-type: none"> ➤ Public Health Intelligence ➤ Adult Learning
Services provided by WNC to NNC:
<ul style="list-style-type: none"> ➤ Archives and Heritage, including Historic Environment Records and Portable Antiquities Scheme ➤ Assistive Technology ➤ Library Support Services ➤ Streetlighting ➤ Visual Impairment

5. Issues and Choices

5.1. There are no issues or choices to consider.

6. Implications (including financial implications)

6.1. Resources and Financial

6.1.1 Performance and Service area resources are required to produce the associated quarterly performance reporting, set out within this report. This is being delivered within existing resource across both West and North Northamptonshire Councils and there are no resources or financial implications arising from the proposals.

6.2. Legal and Governance

6.2.1 The Shared Service Joint Committee are responsible for “Reviewing the performance of the services and initiating additional/remedial action where appropriate”.

6.3. Relevant Policies and Plans

6.3.1. The Administrative Agreement between West Northamptonshire Council and North Northamptonshire Council for the Hosted / Lead Provision of Functions and Services between the two authorities dated 30 March 2021. A link to this document can be found in section 7.1 of this report.

6.4. Risk

6.4.1 There are no risks arising from the recommendations within this report.

6.5. Consultation

6.5.1 No consultation activity is required because of this report/activity.

6.6. Consideration by Executive Advisory Panel

6.6.1. No consideration by scrutiny has been requested.

6.7. Consideration by Scrutiny

6.7.1. No consideration by scrutiny has been requested.

6.8. Equality Implications

6.8.1. There are no equality implications associated with this report.

6.9. Climate Impact

6.9.1. There is no anticipated climate impact because of this report.

6.10. Community Impact

6.10.1 There is no anticipated community impact because of this report.

6.11. Crime and Disorder Impact

6.11.1. There is no anticipated crime and disorder impact because of this report.

7. Background Papers

7.1. Administrative Agreement -

<https://northnorthants.moderngov.co.uk/documents/s1068/7.%20Appx%20B%20-%20IAA%20and%20Schedules.pdf>

7.2. [Shared Services Joint Committee - Wednesday 15th December, 2021 2.00 pm](#) – Item 8 (Appendix C) -

<https://northnorthants.moderngov.co.uk/ieListDocuments.aspx?CId=152&MIId=498&Ver=4>

7.3. [Shared Services Joint Committee - Wednesday 23rd March, 2022 2.00 pm](#) – Item 7b (Appendix A) -

<https://northnorthants.moderngov.co.uk/ieListDocuments.aspx?CId=152&MIId=501&Ver=4>

7.4. **Shared Service Joint Committee, List of Meetings -**

<https://northnorthants.moderngov.co.uk/ieListMeetings.aspx?Committeed=152>

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**North
Northamptonshire
Council**



**West
Northamptonshire
Council**

Inter-Authority Agreements Quarterly Performance Report Quarter 3 2023/24 (October to December 2023)

Report collated on behalf of North Northamptonshire Council and West Northamptonshire Council by the WNC Performance and Governance team.

Introduction

This report provides an overview of performance for services delivered via Inter-Authority Agreements (IAA). This report covers the quarter 3 reporting period for 2023/24 (October to December 2023).

The report is split into two key sections:

Section 1: Performance information for services provided by North Northamptonshire Council to West Northamptonshire Council.

Section 2: Performance information for services provided by West Northamptonshire Council to North Northamptonshire Council.

The tables below outline the services for which Q3 performance information has been, or is due to be, reported:

Section 1: Services provided by North Northamptonshire Council to West Northamptonshire Council
Approved Mental Health Providers
Countywide Traveller Unit
Digital Infrastructure
Household Waste Recycling Centres
Learning and Development - partially disaggregated.
Minerals and Waste Planning
Northamptonshire Archaeological Resource Centre
The Virtual School
Public Health Intelligence
Adult Learning

Section 2: Services provided by West Northamptonshire Council to North Northamptonshire Council
Archives and Heritage (including Historic Environment Records and Portable Antiquities Service)
Assistive Technology
Library Support Services
Streetlighting
Visual Impairment



Section 1: Services provided by NNC to WNC



Q3 KPI overview - services provided by North Northamptonshire Council to West Northamptonshire Council

The table below provides an overview of the KPI outturns across ten NNC service areas who deliver services to WNC via an Inter-Authority Agreement. Of the 46 measures reported to date for Q3, 30 have met or exceeded target and 1 was reported as amber (Minerals and Waste Planning). In addition there were a further 15 measures that recorded no activity or were not due to be reported during quarter 3.

NNC Service Area	Outturn			No activity or Not due
	G	A	R	
Approved Mental Health Providers	3			2
Countywide Traveller Unit				2
Digital Infrastructure	2			
Household Waste Recycling Centres	2			3
Learning and Development	3			1
Minerals and Waste Planning	2	1		
Northamptonshire Archaeological Resource Centre	3			3
The Virtual School	3			1
Public Health Intelligence	6			2
Adult Learning	6			1
Total:	30	1	0	15

Approved Mental Health Professionals (AMHPs)

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
KPI01	Completion of return to advise on the number of people subject to Section 7 guardianship	National/ Statutory	Annual	Return Submitted within timescale	N/A	N/A	N/A	N/A	N/A
AMHP1	Respond to referrals within 3 hours of receipt (and agree action plan with referrer)	Local	Quarterly	95%	98.9%	98.2%	97.3%		
AMHP2	Provision of resource to fully staff the AMHP rota and ensure appropriate shift cover on a weekly basis	Local	Quarterly	23 Shifts Per Week	24.8 Shifts	25 Shifts	24.6 Shifts		
AMHP3	Numbers of new AMHPs trained and warranted per year.	Local	Annual	4	N/A	N/A	N/A		
AMHP4	AMHP quarterly service review meeting to take place.	Local	Quarterly	Service Review Meeting Held	Not Held	Service Review Meeting Held	Service Review Meeting Held		

Supporting commentary

KPI01 - NHS England has paused this data collection and it is being reviewed.

AMHP1 - 125 referrals were responded to during the quarter with 122 being responded to within 3 hours of receipt (97.3%),this related to NNC data only.

AMHP4 - Service review meeting held on 15th December 2023.

Countywide Traveller Unit

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn		
					Apr to Sept 2022	Oct 2022 to Mar 2023	YTD
NTU01	% of new encampments to be visited within one working day of notification; unless operational difficulties prevent this	Local	Six-monthly	95%	100%		
NTU02	% of enquiries dealt with a contact within 3 working days	Local	Six-monthly	90%	100%		
NTU03	Advise partner agencies of current encampment status on a weekly basis	Local	Six-monthly	95%	100%		

Supporting commentary:

NTU01 - 100% encampments were visited within 1 working day of notification (43 during first 6 months of 2023/24).
 NTU02 - 234 enquiries were responded to within 3 working days of receipt.
 NTU03 - 25 weekly encampment status reports were sent to partner agencies throughout the first 6 months of 2023/24.

Digital Infrastructure

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
DI1	Overall Superfast Northamptonshire project (RAG) status as at end of quarter	Local	Quarterly	Green status	Green Status	Green Status	Green Status		
DI2	A project update report on all Digital Infrastructure projects and activity (excluding Superfast Northamptonshire project) is provided to WNC within 20 working days from end of quarter	Local	Quarterly	Report provided	Report provided	Report provided	Report provided		

Supporting commentary

The extension of full fibre and gigabit capable broadband networks across Northamptonshire continues to perform strongly. At the end of Q3, countywide coverage had reached 79.4% and 90.1% of premises respectively. This compares to an average across England of 60.1% and 80.7% respectively. West Northants broadband coverage also continues on an upward trajectory. At the end of Q3, full fibre availability had reached 88.8% of premises and gigabit coverage stood at 91.5%. Superfast coverage (>30Mbps) and sub 2Mbps coverage remained the same as Q2. We expect the trajectory to slow as coverage increases and those hardest to reach premises remain which are less attractive commercially or not viable. Project Gigabit will support the delivery of solutions to some of these hardest to reach premises over the next several years. BDUK have still not announced the contract awards for Project Gigabit Lots 11 and 12 but news is expected shortly. A fuller report should be available in Q4.. Source of coverage data www.ThinkBroadband.com

E-Scooter trial - latest data for Q3 indicates over 70k users with 3.5m rides undertaken across Northampton since the start of the trial. Voi ran a 'don't drink and scoot' campaign in December 2023.

Starship Delivery Robots - trial continues to be a success. Delivery robots have served over 273k households saving 24,000 kg Co2 since launch in Northamptonshire. Fleet size and geography remain unchanged from Q1 2023-24.

Household Waste Recycling Centres

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
HWRC1	% of payments made to Urbaser Ltd within agreed contractual timescales for services received	Local	Quarterly	100.00%	100%	100%	100%		
HWRC2	Number of monthly contract monitoring meetings attended by relevant NNC representatives	Local	Annually	10	N/A	N/A	N/A		
HWRC3	Provision of the following key contractual information monthly: • Audit information (if required) • Monthly revenue financial forecasts • Contractual performance data.	Local	Monthly	Yes	Yes	Yes	Yes		
HWRC4	Provision of annual tonnage figures for the previous year by August to enable WNC to calculate the annual growth forecast figures by September of each year.	Local	Half Yearly	Forecast provided	N/A	Forecast provided	N/A	N/A	
HWRC5	Provide any required data for WNC Corporate performance dashboards by agreed dates	Local	Quarterly	Data provided within deadline	WNC now manages all its own data (HWRC data is checked by NNC Waste Performance Officer(HWRC)) and can provide own data for any dashboards from Waste Data Flow/local data				

Supporting commentary

HWRC5 - None Requested - WNC now manages all its own data (HWRC data is checked by NNC Waste Performance Officer(HWRC)) and can provide own data for any dashboards from Waste Data Flow/local data
 May need to review this KPI as no longer relevant due to changes in IAA and data management.

Learning and Development

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
LD1	Completion and submission of Individualised Learner Record (ILR) return for WNC	National	Quarterly	ILR submitted	ILR submitted	ILR submitted	ILR submitted		
LD2	Apprenticeship Public Sector Target	National	Annual (Q4)	2.3%	N/A	N/A	N/A		
LD3	Annual Apprenticeships self-assessment report and quality improvement plan produced and submitted to Ofsted	National	Annual	Report and Plan submitted	Report and Plan submitted	N/A	Report and Plan submitted	N/A	
LD5	% of WNC apprentices that start qualification who go onto successfully complete	Local	Quarterly	75%	100.0%	100.0%	100.0%		

Supporting commentary

LD4 & 6 - These indicators are no longer reported as this area has now disaggregated.

Minerals and Waste Planning

[Return to summary](#)

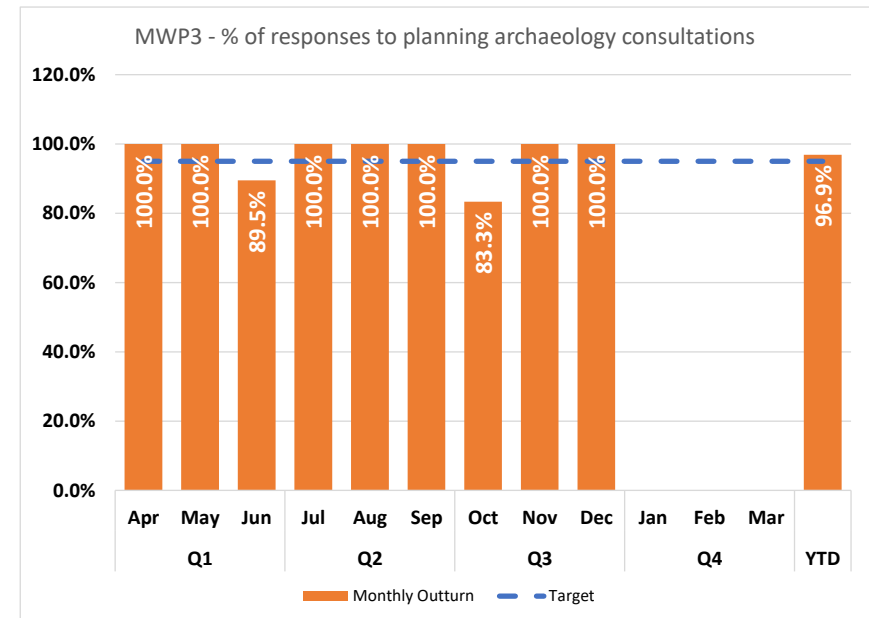
KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
MWP1	% of County Matter planning decisions made within required timescales	Local	Quarterly	95%	100%	100%	100%		
MWP2	% of responses made in relation to Duty to Co-operate matters with other minerals and waste planning authorities within time period requested	Local	Quarterly	95%	100%	None Requested	100%		
MWP3	% of responses to planning archaeology consultations from the area planning offices of NNC/WNC within timescales	Local	Quarterly	95%	96%	100%	94%		

Supporting commentary:

MWP1 - 1 County Matter planning decision was made during the third quarter.

MWP2 - During quarter 3, two Duty to Co-operate with other minerals and waste planning authorities were requested.

MWP3 - During quarter 3, 48 responses to planning archaeology consultations from the area planning offices of NNC/WNC were made, 45 of these were made within agreed timescales giving a quarterly outturn of 94%. Performance in October was below the 95% target which resulted in missing the target for Q3 by 1.2%. The three applications that missed the deadline needed additional time to respond to (which was given by the relevant case officer).



Northamptonshire Archaeological Resource Centre (ARC)

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
ARC1	Standards associated with ACE Museum Accreditation Scheme (applicable from the date of joining the Scheme)	Local	Quarterly	ACE standards met	<i>ARC as CHE has not yet applied for ACE Museum Accreditation. Likely will be in 2023. However, ARC is following ACE standards for loans/accessions/storage.</i>				
ARC2	Provision of a report to WNC detailing the number of visits to the ARC split by: 1. Academic visits, and 2. Other visits	Local	Quarterly	Report provided to WNC	Report provided to WNC	Report provided to WNC			
ARC3	Provision of a report to WNC on the number of new accessions	Local	Quarterly	Report provided to WNC	Report provided to WNC	Report provided to WNC	Report provided to WNC		
ARC4	Provision of a report to WNC indicating the number of total archive boxes in the ARC identified by origin	Local	Quarterly	Report provided to WNC	Report provided to WNC	Report provided to WNC	Report provided to WNC		
ARC5	An annual survey to capture user net satisfaction with service (5-point scale)	Local	Annual	TBD	<i>Initial survey to be conducted in 2022/23 as benchmark. The satisfaction scale to be used will range from very satisfied to very dissatisfied.</i>				
ARC6	An annual survey to capture user perception of VfM of service (5-point scale)	Local	Annual	TBD	<i>Initial survey to be conducted in 2022/23 as benchmark. The satisfaction scale to be used will range from very satisfied to very dissatisfied.</i>				

Supporting commentary:

ARC1: The wider Chester House Estate has not submitted an application to the ACE Museum Accreditation Scheme. This is expected to take place in the second half of the 23/24 financial year. The ARC however is following ACE standards in its documentation etc.

ARC2: 4,864 total visits year to date.

ARC3: 27 sites accessioned, 112 boxes during quarter 3.

The Virtual School

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
VS1	Number of Learning, Skills and Education performance scorecards produced and presented to the Director of Children's Services and their Senior Leadership Team on a monthly basis	Local	Termly	3 per term	3	3	3		
VS2	Provision of relevant information to NCT to facilitate the completion of the Corporate parenting performance scorecard which is produced and presented to the Corporate Parenting Board on a bi-monthly basis	Local	Quarterly	Bi monthly CPB performance report produced and presented	Bi monthly CPB performance report produced and presented	Bi monthly CPB performance report produced and presented	Bi monthly CPB performance report produced and presented		
VS3	A Virtual School Head Annual Report is produced and presented at WNC Senior Leadership Team and the joint Corporate Parenting Board and published on the Virtual School website within agreed timescales.	Local	Annual (February)	Annual report produced and published	N/A	N/A	N/A		
VS4	Performance updates are presented to the Virtual School Advisory Panel (VSAP) on a termly basis and made available to the Corporate Parenting Board.	Local	Termly	Performance updates presented	Performance updates presented	Performance updates presented	Performance updates presented		

Supporting commentary:

VS1 - Information is now delivered once a term, rather than monthly.

VS4 - Spring term meeting of the VSAP scheduled for 07/03/2024.

Public Health Intelligence

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				YTD
					Q1	Q2	Q3	Q4	
PHI-1	Statutory return submitted for Health Checks dataset	National	Quarterly	Data return fully submitted within OHID deadline	Data return fully submitted within OHID deadline	Data return fully submitted within OHID deadline	Data return fully submitted within OHID deadline		
PHI02	Statutory return submitted for National Childhood Measurement Programme dataset	National	Annual Q2	Data return fully submitted within OHID deadline		Data return fully submitted within OHID deadline			
PHI03	Statutory return submitted for Early Years (Health Visitor) dataset	National	Quarterly	Data return fully submitted within OHID deadline		Data return fully submitted within OHID deadline			
PHI04	Statutory return submitted for Adult Weight Management dataset	National	Quarterly	Data return fully submitted within OHID deadline	Data return fully submitted within OHID deadline	Data return fully submitted within OHID deadline	Data return fully submitted within OHID deadline		
PHI05	Agreed data and information for inclusion within the Public Health section of the corporate performance report for North and West is provided on monthly basis within agreed timescales.	Local	Quarterly	All data provided within agreed deadlines	All data provided within agreed deadlines	All data provided within agreed deadlines	All data provided within agreed deadlines		
PHI06	Quarterly data and intelligence reports to support the development of the Joint Strategic Needs Assessment (JSNA) are completed in line with the JSNA annual work plan.	Local	Quarterly	All planned quarterly data and intelligence reports produced within agreed timescales	All planned quarterly data and intelligence reports produced within agreed timescales	All planned quarterly data and intelligence reports produced within agreed timescales	All planned quarterly data and intelligence reports produced within agreed timescales		
PHI07	Performance information and supporting data is collated and provided on a quarterly basis to support the preparation of the Director of Public Health's annual health report	Local	Quarterly	All planned quarterly information and data provided on a quarterly basis (as per agreed plan)	All planned quarterly information and data provided on a quarterly basis (as per agreed plan)	All planned quarterly information and data provided on a quarterly basis (as per agreed plan)	All planned quarterly information and data provided on a quarterly basis (as per agreed plan)		
PHI08	All agreed performance dashboards and other required reports are produced and provided to relevant forums in line with the agreed quarterly work plan	Local	Bi annual	All dashboards or reports are produced in line with agreed quarterly work plan	All dashboards or reports are produced in line with agreed quarterly work plan	All dashboards or reports are produced in line with agreed quarterly work plan	All dashboards or reports are produced in line with agreed quarterly work plan		

Supporting commentary:

Adult Learning

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
AL01	Completion and submission of ILR record (ILR) to ESFA on a monthly basis	National	Monthly	ILR return submitted	ILR return submitted	ILR return submitted	ILR return submitted		
AL02	Self-Assessment report (SAR) produced and submitted to OFSTED within the required timescale	National	Annual Q3	Report produced and submitted to OFSTED within timescale					
AL03	A Performance Board is held on a termly basis to provide oversight of NNC delivery of Apprenticeship training and the Adult Learning Service.	Local	Termly	Meeting Held	Meeting Held	Meeting Held	Meeting Held		
AL04	An Adult Learning performance report (which includes data dashboard) is produced and presented to Performance Board three times a year	Local	3 times a year	Report produced and circulate	Report Produced	Report Produced	Report Produced		
AL05	An Adult Learning strategy (underpinned by ESFA contract and aligned to Public Health outcomes) is developed for both authorities and approved by Performance Board.	Local	Annual	Strategy developed and approved by Performance Board			Strategy developed and approved by Performance Board		
AL06	% of learners who achieve qualification for accredited courses funded by ESFA skills funding allocation	Local	Annual	75.00%	94.0%	82.0%	94.0%		
AL07	OFSTED rating for regulated provision to be at least 'Good'.	Local	Annual (through SAR)	Maintain at least Good rating	Good	Good	Good		

Supporting commentary:

AL03 - Meeting held January 11th. Overview of transformation plan for ALS shared.

AL04 - Report produced and shared. New format launched with Cleary comparative data. Missing some achievement data due to dates of production but will be rectified for Q4.

AL05 - Strategy in place and published. Final sign off approved following FEC visit and transformation plan in place to meet strategic aims.

AL06 - Please note: percentage data above is based on retention and is therefore best case scenario. Likely to decline over Q4 and then again in Q1 and Q2 of following year until final outturn is known for 23/24 academic year. Learner number have reset since those reported in Q2 as we are in a new academic year so they will increase over the following quarters.



Section 2: Services provided by WNC to NNC



Q3 KPI overview - services provided by West Northamptonshire Council to North Northamptonshire Council

The table below provides an overview of the KPI outturns across five WNC service areas who deliver services to NNC via an Inter-Authority Agreement. Further details for these measures can be found by viewing the service specific page within the report. Of the 21 measures reported for Q3, 10 have met or exceeded target. In addition there were a further 21 measures that recorded no activity or were not due to be reported during quarter 3.

Service	Outturn			No activity or Not due
	G	A	R	
Archives and Heritage (including PAS and HER)	2			7
Assistive Technology				5
Libraries Support Services	2			4
Streetlighting	6			2
Visual Impairment				3
Total:	10	0	0	21

Archives and Heritage (including Historic Environment Records and Portable Antiquities Service)

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn					
					Q1	Q2	Q3	Q4	YTD	
AH1	Accredited status with The National Archives	National	To be reported in 2023	Accredited	<i>To be reported in 2023 following application to The National Archives</i>					N/A
AH2	Provision of a report to NNC detailing quarterly activity, including: 1. Number of visits to County Archive 2. Number of enquiries responded to 3. Number of website hits 4. Number of outstanding TNA/HE recommendations	Local	Quarterly	Report provided to NNC	Not Reported - See Notes	Not Reported - See Notes	Not Reported - See Notes			
AH3	An annual survey to capture user net satisfaction with service (5-point scale)	Local	Annual	Survey completed	N/A	N/A	N/A			
AH4	An annual survey to capture user perception of VfM of service (5-point scale)	Local	Annual	Survey completed	N/A	N/A	N/A			
PAS1	Compliance with PAS MOU with the British Museum	Local	Annual (Q4)	Full compliance	N/A	N/A	N/A			
PAS2	Number of Finds 'Surgeries' and outreach events held across the year (Countywide).	Local	Annual (Q4)	10 per annum	11	8	13			
HER1	Historic England audit status	National	Quarterly	Satisfactory audit status	Next Audit due 2024					
HER2	Percentage of commercial and non-commercial enquiries processed promptly (within 10 working days)	Local	Quarterly	95%	100%	100%	100%			
HER3	To ensure all grey literature is included on the HER database promptly (within three months)	Local	Quarterly	95%	100%	100%	100%			

Supporting commentary

AH1 - The member of staff leading on the Accreditation work, having been off sick for some time, has now left the authority. However, the documentation has now been assessed and reviewed by the head of service and Archives Conservation Officer and a way forward agreed. However, progress will also require action on areas that are outside the service's immediate control. Thus the assessors for Accreditation will need to see progress on the plans for environmental stability in all the repositories and that action has been undertaken to address issues outstanding since the 2017 inspection. This will be one priority for relevant staff in West Northants Assets and Environment division in the New Year.

AH2 - This was a period of adjustment and consolidation. The loss of the Archives operational manager necessitated some changes to line management and also some positive focus on induction and training for new members of staff. The team has worked well on some disaster planning training including both practical work and the written elements of the plan. There has also been some in-house training on the sources, especially aimed at the staff who undertake front-line roles but it has also been helpful to other staff. A member of staff to cover for the maternity leave was finally recruited and started in December.

PAS2 - The total number of surgeries held for the quarter is 13. It is higher than the previous quarter because traditionally the autumn is a good time for metal detectorists when the crops come off the fields. The two main locations for the surgeries were the Archives Service in Northampton and the Archaeological Resource Centre near Wellingborough. Other meetings were held in Corby, Daventry and Towcester.

HER1 - The Levelling Up and Regeneration Act became law in October 2023. This was significant in many ways but in respect of HERs it has defined that provision of an HER is a statutory responsibility on local authorities. The guidance on exactly what this might mean will probably not be completed for 9-12 months but the combined authorities are well positioned, given the recent appointment of an assistant support role. The postholder is already making an impact, taking on enquiries and the backlog of work to free up the HER Officer for strategic projects, including the completion of the NRHE project by August 2024.

HER2 - All the enquiries received have been processed within the required deadlines. As noted for the previous PI, the appointment of an assistant has enabled many of these enquiries to be passed from the HER Officer to the HER Assistant and thus free up up time for other development work on the HER as a resource. The deadlines are still being met but with a different approach.

Assistive Technology

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
AT1	Average response time (working days) to standard referrals received	Local	Quarterly	7 working days	0.9 days	0.1 days	Not Reported		
AT2	Average response time (working days) to urgent referrals received	Local	Quarterly	2 working days	0.1 days	0.03 days	Not Reported		
AT3	Number of referrals to be processed by assistive technology team (excluding customer contact centre) which are open as at quarter end	Local	Quarterly	<150	34	11	Not Reported		
AT4	Provision of a quarterly service performance report to be presented at a quarterly review meeting. <ul style="list-style-type: none"> • Number of installations completed • Number of people supported by AT rentals • Establishment review and any proposed changes. • Policy and procedure changes. 	Local	Quarterly	Quarterly report provided	Quarterly report provided	Quarterly report provided	Not Reported		
AT5	Number of services users awaiting Adult Social care Lifeline response utilization (Social care response)	Local	Quarterly	Zero	Zero	Zero	Not Reported		

Supporting commentary

We are unable to report upon Assistive Technology KPIs at present due to a reporting software issue, once rectified these will be reported retrospectively.

Library Support Services

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				YTD
					Q1	Q2	Q3	Q4	
LIB01	Annual CIPFA return completed and submitted for North Northamptonshire Local Authority area within required timescale (31st July)	National	Annual (Q2)	Return submitted	N/A	Return submitted	N/A	N/A	
LIB02	% of book stock deliveries completed against planned schedule	Local	Quarterly	95%	100%	100%	100%		
LIB03	Number of Northamptonshire BIPC interventions supported	Local	Annual (Q4)	170	26	35	162		
LIB04	Number of new businesses started with support from the BICP Northamptonshire	Local	Annual (Q4)	25	2	3	15		
LIB05	Number of sessions/activities/ workshops accessible in the North Northamptonshire area	Local	Annual (Q4)	60	26	0	71		
LIB06	% of annual SLA Reviews completed for each Community Managed Library (within NNC area)	Local	Quarterly	100%	None Reported	100%	100%		

Supporting commentary

LIB03 - Following the launch of the UKSPF Build your business programme in September we have seen activity shoot back up to levels exceeding the previous programme and are already ahead of target which were based on previous year achievement. We anticipate high intervention levels in Q4 too.

LIB04 - As predicted, the seasonal trend for businesses launched has always seen higher performance in Q3 and 4. This quarter has been particularly high with more than 50% of the target being achieved in quarter.

LIB05 - Following the launch of the UKSPF Build your business programme in September we have seen a huge rise in workshops and sessions. The additional funding allows us to add capacity to meet the demand and we have already delivered 100% more workshops than the target which were based on previous year achievement. We anticipate high numbers of sessions in Q4 too as the programme continues to build pace.

LIB06 - All SLA reviews have now been completed for the 10 CMLs in North Northants. The remaining 5 were completed during this quarter.

Streetlighting

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn				
					Q1	Q2	Q3	Q4	YTD
SL1	% of payments made to Connect Roads within contractual timescales for services received	Local	Quarterly	100.00%	100%	100%	100%		
SL2	Number of monthly contract monitoring meetings attended by relevant WNC representatives	Local	Quarterly	3 per quarter	3	3	3		
SL3	Quarterly Network Board meeting attended by relevant WNC representatives	Local	Quarterly	Quarterly meeting attended	Quarterly meeting attended	Quarterly meeting attended	Quarterly meeting attended		
SL4	Provision of key contractual information within required timescales: Audit information (as required) / Monthly revenue financial forecasts / Annual growth forecasts	Local	Quarterly	Provided	Provided	Provided	Provided		
SL5	Provision of an updated asset register on an annual basis to inform charging for the next financial year	Local	Annual	Asset register provided	N/A	N/A	N/A		
SL6	Reports on the average length of time for lamp repair in North Northamptonshire	Local	Quarterly	5 days	1.4 days	1.4 days	1.7 days		
SL7	Reports on the number of occasions on which lighting points are not in light during the Lighting Up Period in North Northamptonshire (excluding intentionally switched-off lights)	Local	Quarterly	N/A - for info	180	180	226		
SL8	Percentage of lights in Light during the Lighting Up Period in North Northamptonshire	Local	Quarterly	99%	99.7%	99.7%	99.6%		

Supporting commentary

Visual Impairment

[Return to summary](#)

KPI ID	KPI	National or Local KPI	Reporting Frequency	KPI Target	2023/24 Performance Outturn			
					April to September		October to March	
VI01	% of Certified Visually impaired receivers added to the visual impairment register once user consent received	National	Six-monthly	100%	100%			
VI02	% of referrals responded to within agreed timescales (5 working days)	Local	Quarterly	90%	100%	100%	Not Reported	
VI03	Visual Impairment quarterly service review meeting to take place	Local	Quarterly	Service review meeting held	Service review meeting held	Service review meeting held	Not Reported	

Supporting commentary

We are unable to report upon Visual Impairment KPIs at present due to a reporting software issue, once rectified these will be reported retrospectively.

Report collated on behalf of North Northamptonshire Council and West Northamptonshire Council by the WNC Performance and Governance team.

