

Scrutiny Commission

At 7:00pm on Tuesday 31 January 2023

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

Present:

Members

Councillor Wendy Brackenbury (Chair)	Councillor Kevin Watt (Vice Chair)
Councillor Valerie Anslow	Councillor Philip Irwin
Councillor Robin Carter	Councillor Anne Lee
Councillor John Currall	Councillor Andy Mercer
Councillor Mark Dearing	Councillor Gill Mercer
Councillor Jim Hakewill	Councillor Lee Wilkes

Officers

Adele Wylie – Executive Director of Customers and Governance (Monitoring Officer)
David Watts – Executive Director of Adults, Health Partnerships and Housing
Guy Holloway – Assistant Chief Executive
Rob Atkins – Interim Head of Performance, Intelligence and Partnerships
Shirley Plenderleith – Assistant Director Recovery & Wellbeing
Louise Tyers – Senior Democratic Services Officer

Also Present

Councillor Helen Harrison – Executive Member for Adults, Health and Wellbeing

51. Apologies for Non-Attendance

Apologies for non-attendance were received from Councillors Zoe McGhee and Geoff Shacklock. Councillor Anne Lee was in attendance as substitute for Councillor McGhee.

52. Members' Declarations of Interest

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

No declarations of interest were made.

53. Notification of Requests to Address the Meeting

There had been no requests to address the meeting.

54. Minutes of the Meeting Held on 1 November 2022

RESOLVED:

That the minutes of the meeting held on 1 November 2022 were approved as a correct record and signed.

55. Consideration of Any Matter Referred to the Commission for Call-In

There had been no requests for call-in.

56. Development of the North Northamptonshire Public Mental Health Strategy

The Scrutiny Commission considered a report of the Interim Consultant in Public Health which described the population health approach to the development of a strategy to improve public mental health in North Northamptonshire.

In November 2022, Integrated Care Northamptonshire (ICN) became a signatory to the national Office for Health Improvement and Disparities Mental Health Prevention Concordat. This Concordat will feed into the North Northamptonshire Public Mental Health Strategy and associated Action Plan which will be further informed by the recommendations from the Mental Health Joint Strategic Needs Assessment.

The Concordat was based on the Five Domain Framework for Local Action:

- Understanding local need and assets
- Working together/partnership and alignment
- Taking action on prevention/promotion of mental health and to reduce mental health inequalities
- Defining success/measuring outcomes
- Leadership and Direction

The detailed Concordat Action plan described key programmes, initiatives and activities under each of the domains, and these included:

- Engaging with partners and local communities to understand available data and information, mapping local services and assets, identifying gaps in local services (All-age JSNA and Audit of Coroner's Closed Suicide Cases).
- Enhanced partnership working and joining up services across partners and local communities at system, place and local area partnerships. Aligning strategies and plans (e.g. ICN and Health and Wellbeing Strategies, Place Development Programmes, Health Inequalities Plan, etc) to ensure service delivery at community level is responsive to individual needs.
- Developing approaches to increase awareness of and support for positive mental health and well-being and reducing stigma related to mental illness. Work to improve quality of life in people with mental illness (e.g., all age mental health awareness and training for all who live and work in Northamptonshire).
- Supporting the implementation of the Health Inequalities Plan, contributing to reducing health inequalities in people with severe mental illness and

- specific community groups (minority groups, homeless, those misusing drugs and alcohols, etc).
- Agreeing, measuring and reporting on identified outcomes, in line with the ICN Outcomes Framework and based on evidence of what works to improve mental wellbeing (e.g. school-based approach, frontline practitioners trained, and reducing suicide by 10% across the county by 2025 and self-harm admissions in 15–19-year-olds).
 - Strategic and operational countywide leadership and partnership provided by the Mental Health and Learning Disabilities and Autism (adults) and Children and Young People Collaboratives, reporting to the ICN Partnership Board, Health and Wellbeing Boards, Place Development programme boards.

During discussion, the following principle points were noted:

- i. Work plans were needed to identify those who were at risk, the degree of that risk and how it could be alleviated. It was important that the focus of the strategy was not lost. The Executive Director advised that a place-based approach was being developed in North Northamptonshire and it was important to identify how agencies could intervene earlier, including with families and schools.
- ii. The Executive Member advised that the ICS would examine what was being developed locally and the Local Area Partnership would bring partners together. There was a focus on mental health, incidents of self-harm and anxiety and depression. The promotion of good mental health was important, along with early intervention.
- iii. A member asked whether information sharing was adequate to take this work forward or were there any data protection issues which needed to be considered. In response, the Executive Director advised that there was a clear legal basis to enable the sharing of information as it related to direct care.
- iv. The ramifications around suicide were huge and it was questioned how the 10% fall in the number of suicides had been identified as a target. The Executive Member explained that the 10% reduction was a national requirement. Work was already being taken forward, including how to support schools.
- v. It was highlighted that effective treatment meant being able to access GPs. It was noted that a third of people who had taken their life were under the care of a GP at the time. Due to the current workload of GPs, it was questioned whether they were the right first port of call for people and should other facilities be available. The Executive Member advised that prevention and early intervention were a priority. GPs were not the only way to access help early and there were various ways to access support before visiting a GP. It was also highlighted that the way GP practices worked these days meant that you often did not see the same GP who could possibly identify issues and concerns.
- vi. The Concordat would help to shape the Strategy and there were a number of approaches to deliver action plans. The use of other officers such as housing and social workers could be used as a way to get early

support for people. There needed to be a discussion about how wider services could influence the agenda.

- vii. Whilst the delivery of a school's programme was welcomed, this should not be relied upon as some children with anxiety may not become involved as they were not attending school. There was also concern about the reliance on the voluntary sector due to the cuts in funding which may mean some organisations may need to close. It should not be assumed that the voluntary organisation are able to put programmes in place.
- viii. It was accepted that not everyone would engage. The voluntary sector had approached the Council offering to signpost people to the right place. The four local infrastructure organisations were keen to be involved and everyone welcomed a vibrant voluntary sector.
- ix. Picking up issues early would prevent higher cost in the longer term but schools had a long waiting list to access services. There was also a need to look at poor housing and debt which were also causes of poor mental health.
- x. The report was welcomed as mental health affected all aspects of people's lives. Engagement with voluntary organisations was vitally important. It was suggested that the National Farmers Union (NFU) would be a good link into rural communities, where suicide was particularly high amongst the farming community.
- xi. A member who had attended a recent Local Area Partnership meeting advised that the meeting had been very well attended by the voluntary sector and everyone was very willing to work together. In response, the Executive Director advised that very good feedback had been received following that meeting and he would encourage Local Area Partnership attendance. The Executive Member advised that an ICS Conference would be held in February to explain how the ICS was being developed and working. Invitations would be sent to all members shortly.
- xii. It was noted that the Council was currently undertaking a review of its scrutiny arrangements, with a suggested dedicated Health Scrutiny Committee, and that Committee may wish to request the ICB and Local Medical Council to attend to give evidence about the issues around primary care.
- xiii. Members questioned how the ICS would know if the Strategy was succeeding. In response, a number of milestones would be in place, including a reduction of the number of people needing treatment, and these would be measured.

RESOLVED:

To note the progress in the programme of work to improve public mental health, which will inform the North Northamptonshire Public Mental Health Strategy.

57. ICT Value for Money Scrutiny Review

The Scrutiny Commission considered a report of the Assistant Chief Executive which sought the Commission's approval of an initial scoping document to set out the terms of reference for a Scrutiny Review into ICT Value for Money.

The Council's annual budget for ICT services was £7.696m, and just under half of this was spent on services provided by West Northamptonshire Council (WNC). The Council was rapidly approaching a point where it would be considering the future options for the service, including its disaggregation from WNC. An understanding of the value for money of the arrangements currently in place would be of significant benefit for the Council.

During discussion, the following principle points were noted:

- i. To delegate the appointment of a Lead Member to the Chairs of the Scrutiny Commission and Finance & Resources Scrutiny Committee.
- ii. It was clarified that there were no contractual deadlines approaching and the proposed review was being driven by other pieces of work. The review was specifically around the value for money of the current arrangements.
- iii. It was important that the review would be able to talk to the Head of ICT and it was confirmed that the Council's Chief Information Officer would be added to support the Group and his equivalent in WNC would also be invited to attend.

RESOLVED:

- (i) To approve the draft ICT Value for Money scoping document as a basis for the scrutiny review and agree that it be added to the Scrutiny Workplan.
- (ii) That the Scrutiny Review Group consist of seven members – 4 Conservative, 2 Labour and 1 Green Alliance.
- (iii) That the appointment of a councillor lead for this scrutiny review be delegated to the Chairs of the Scrutiny Commission and Finance & Resources Scrutiny Committee.
- (iv) That the Vice Chair for the Scrutiny Review Group be appointed at its first meeting.
- (v) That the Assistant Chief Executive be appointed as the officer lead for this scrutiny review.
- (vi) That a review on the progress of the scrutiny review will be considered in April 2023, if required.

58. Performance Indicator Report 2022/23 (Period 8)

Rob Atkins, Interim Head of Performance, Intelligence and Partnerships was welcomed to his first meeting of the Commission

The Scrutiny Commission considered a report of the Assistant Chief Executive which provided an update on the Council's performance across a wide range of services, as measured by performance indicators. The report provided a

summary of the performance of Council services and further detail including trend lines and exception reports.

Comments on several specific indicators were made, including:

- % substance misuse clients waiting more than 3 weeks for their first intervention (AFL23) – it was noted that no information had been provided. The Assistant Chief Executive advised he would check the latest data with the relevant Team.
- % of infants due a new birth visit that received a new birth visit within 14 days of birth (BBF02) – the level was dropping and there was concern that this could affect the mental wellbeing of mothers. The Executive Director of Adults, Health Partnerships and Housing advised that the performance was consistently higher than nationally.
- % of in-year eligible population offered an NHS Health Check (AFL20) - the level was declining. Was this due to a shortage of GPs?
- % of planning applications determined (STP16 and STP17) – members advised that they were hearing of long delays in determining planning applications and this was concerning. The Assistant Chief Executive advised that he would take these concerns to the Executive Director of Place and Economy.
- Number of children without a school place (BBF22) – this performance was concerning. 30 children were waiting specialist places through the Children's Trust and therefore 120 were not in school. Does this figure include those being home schooled?
- Number of Voids (STP36) – this could be an area that the Commission may want to look at in greater depth as the performance consistently dips. The Executive Director advised that the narrative on the report provided more background on performance. It was suggested that the current measure was not correct.
- % occupancy of Corby Innovation Hub and East Northamptonshire Enterprise Centre (MPS27 and MPS28) – has a new marketing strategy been considered?
- Number of E-Scooter trips (GSE01) – was there any data on the number of accidents reported to the Police?
- Total number of non-emergency repairs completed (STP10) – is it possible to explain the number and reasons for non-emergency repairs not being completed. In response, the Executive Director advised that there were a number of reasons why repairs were not undertaken, including the tenant not being in and staff being unable to access the property. Triage of repairs was now also being undertaken. There had been a huge backlog due to the pandemic and the teams had been resourced to deal with the norm. A one-off capital budget had been built in to address the backlog.

The Assistant Chief Executive undertook to obtain written responses to the issues raised and would circulate outside of the meeting.

RESOLVED:

To note the performance of the Council and its services.

59. Close of Meeting

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

The meeting closed at 9.24pm.

Chair

Date