



**Cabinet  
Tuesday, 19 July 2022**

**SUPPLEMENTARY DOCUMENT – ITEM 10**

**10. Oxfordshire-Cherwell Partnership Transition Plan (Pages 1 - 30)**

SUPPLEMENTARY DOCUMENT:

Oxfordshire-Cherwell Partnership Transition Arrangements Summary

This page is intentionally left blank



OXFORDSHIRE  
COUNTY COUNCIL

# Supplemental Paper

## Oxfordshire-Cherwell Partnership Transition Arrangements Summary

Page 1

*OCC Cabinet Report - July 2022*

Agenda Item 10

# Transition Programme Phase 0

# SLT Separation

Post	OCC/CDC	Decision taken	Implementation Date
Chief Executive	CDC	Joint Chief Executive arrangements ended.	09/02/22
Director of Law & Governance	OCC	Joint Monitoring Officer role arrangements ended. (Director Law & Governance role ended from 29/04/22.)	09/02/22
Director of Finance, S151	OCC	Joint S151 officer arrangements ended.	09/02/22
Corporate Director, Environment and Place	OCC	Service decoupled. Joint CD Environment and Place ended.	01/04/22
Corporate Director, Adults & Housing Services	OCC	Service decoupled, including Housing returned to CDC. Joint AD Housing & Social Care role ended.	01/04/22
Corporate Director, Public Health & Wellbeing	OCC	Service decoupled. Joint CD Public Health and Wellbeing role ended.	01/04/22
Executive Support Team		Following the separation of joint Chief Executive arrangements, joint support arrangements ended.	11/04/22
Corporate Director Commercial Development Assets & Investment	OCC	Joint CD Commercial Development, Assets and Investment role ended.	30/06/22
Corporate Director, Customers, Organisational Development and Resources	OCC	Joint CD Organisational Development and Resources role ended.	31/05/22

# Transition Programme Phase 1

# Climate Action

<b>Recommendation approved by JSSP</b>	That the joint team decouples and all secondments end. A formal SLA will provide for the delivery of specialist services (eg Greenhouse Gas reporting) from OCC to CDC.
<b>Decision date</b>	25 April 2022
<b>Financial implications</b>	The current contributions from both OCC and CDC for the joint team ceases. The decoupling results in a consequent net reduction in income for OCC which needs to be managed in the BAU budget and business planning process for 2023/24, although it is believed this can largely be absorbed into existing OCC Climate budgets. Further financial detail can be found in Annex A.
<b>HR implications</b>	<p>In OCC, the remaining team is broadly fit for purpose to meet the council's climate action priorities. Some adjustment to job description may be required to better define responsibilities within the revised team as part of the broader Environment and Place directorate planning.</p> <p>Existing CDC post will return to CDC will line management into CDC management structures.</p>
<b>Transition arrangements</b>	Joint shared staff and activity under the current s113 agreement ceased from 17/06/22 and secondment arrangements came to an end. A new SLA is in development for the provision of Greenhouse Gas reporting from OCC to CDC and will be implemented no later that 31/08/22.
<b>Additional information</b>	

# Healthy Place Shaping (HPS)

<b>Recommendation approved by JSSP</b>	That the joint posts within this service decouple, allowing both councils to meet their individual strategic objectives and facilitate broader cross-county partnership working.
<b>Decision date</b>	25 April 2022
<b>Financial implications</b>	The current contribution from CDC for the HPS Lead salary cease. This decoupling results in a consequent reduction in income to OCC. OCC needs to review the impact of the contribution reduction within BAU business and budget planning arrangements. Further financial detail can be found in Annex A.
<b>HR implications</b>	As a consequence of the decoupling, the HPS Lead no longer line manage the CDC HPS Team and suitable arrangements have been but in place at CDC.
<b>Transition arrangements</b>	The management function of Health Place Shaping Lead at CDC ceased from 30/04/22 and line management of CDC staff reverted to CDC. As a consequence, the Director of Public Health and Wellbeing ceased to have a joint CDC role after 30/04/22 and charging ceased from that date.
<b>Additional information</b>	OCC originally stated their preferred option to maintain the joint HPS lead role however CDC wished to end the joint role and their contributions towards it. It was therefore decided there would be a complete decoupling.



# Corporate Health and Safety

<b>Recommendation approved by JSSP</b>	That the joint team decouples and an in-house Health & Safety resource is appointed at CDC, that can better provide Council-wide assurance and support to all services in CDC, thus minimising risk across services.
<b>Decision date</b>	25 April 2022
<b>Financial implications</b>	The current contribution from CDC to OCC for the management oversight provided by the OCC Corporate Health, Safety and Wellbeing Manager ceases. The decoupling results in a consequent reduction in income to OCC which needs to be managed in the BAU budget and business planning process for 2023/24. Further financial detail can be found in Annex A.
<b>HR implications</b>	Line management responsibility for the CDC Health & Safety Supervisor has been transferred from the OCC Corporate Health, Safety & Wellbeing Manager to a resource within CDC.
<b>Transition arrangements</b>	This decoupling has been implemented. The partnership arrangement ended after 30/04/22 and line management of the Health and Safety Supervisor reverted to CDC. Charging ceased from that date.
<b>Additional information</b>	

# Policy and Strategy

<b>Recommendation approved by JSSP</b>	That the joint team decouples and the SLA with OCC ceases, to allow each council to align to their individual strategic objectives.
<b>Decision date</b>	25 April 2022
<b>Financial implications</b>	The current contribution from CDC to OCC ceases. The decoupling results in a consequent reduction in income to OCC which needs to be managed in the BAU budget and business planning process for 2023/24. Further financial detail can be found in Annex A.
<b>HR implications</b>	The joint team were all under contract to OCC and there were therefore no HR implications or line management changes required within OCC.
<b>Transition arrangements</b>	This decoupling has been implemented. The partnership arrangements ended after 30/04/22 and the charge for joint roles ceased from that date. There will be no further commissioning of policy support through the current Section 113.
<b>Additional information</b>	

# Internal Audit

<b>Recommendation approved by JSSP</b>	That OCC continue to provide the current service to CDC, but under a new SLA arrangement. This will allow for continuity of service and the implementation of a formalised SLA will seek to enhance the value provided to both councils.
<b>Decision date</b>	25 April 2022
<b>Financial implications</b>	An annual fee for the service to CDC will be agreed based on the number of planned working days. Included within the service provided is IT Audit Days which are outsourced by OCC. For 2022/23 it has been agreed 200 chargeable days would be need to deliver the agreed plan/annual audit opinion, at a cost of £63,000.
<b>HR implications</b>	<p>The service continues as-is, but with the addition of an SLA, and so there are no organisational changes or HR implications for either council.</p> <p>The SLA needs to reflect the same operating model as the current arrangement including risk share.</p>
<b>Transition arrangements</b>	Provision of services continues under the existing S113 agreement whilst a new SLA is being developed for no later than 31/08/22.
<b>Additional information</b>	

# Counter Fraud

<b>Recommendation approved by JSSP</b>	That OCC will continue providing the service to CDC, under a formal SLA, to allow for continuity of service and provide the opportunity for wider collaboration with other public sector fraud teams across Oxfordshire.
<b>Decision date</b>	25 April 2022
<b>Financial implications</b>	<p>An annual fee for the service to CDC will be agreed based on a cost share model, apportioned based on estimated resource share.</p> <p>For 2022/23 – the same charge as 2021/22 would be applied = £63,692. This is based on approximately 1/3 of the counter fraud team costs, as 1/3 of the OCC counter-fraud team's time is spent on CDC counter fraud activity.</p>
<b>HR implications</b>	The service continues as-is, but with the addition of an SLA, and so there are no organisational changes or HR implications for either council. The SLA need to reflect the same flexibility in the current operating model.
<b>Transition arrangements</b>	Provision of services continues under the existing S113 agreement whilst a new SLA is being developed for no later than 31/08/22.
<b>Additional information</b>	

# Transition Programme Phase 2

# Strategic Marketing

<b>Recommendation approved by JSSP</b>	<p>That strategic marketing and web services decouple and OCC to provide pay-as-you-go marketing, design and video services to CDC. This will allow both councils to meet their individual strategic direction and goals and minimise current risks around Marketing officers handling sensitive and confidential information for both councils.</p>
<b>Decision date</b>	<p>23 May 2022</p>
<b>Financial implications</b>	<p>The decoupling results in a consequent increase in costs to OCC – and the reduction in costs to CDC – for the cost of three new posts less current contribution towards joint posts. This is partially offset by paid services and otherwise addressed through business and budget planning processes. A structure and process is already in place at OCC to manage pay-as-you-go services. Further financial detail can be found in Annex A.</p>
<b>HR implications</b>	<p>Decoupling resulted in an over-provision of resources in CDC and an under-provision in OCC. Therefore through transition planning, the councils agreed transfers of staff from CDC to OCC that support continuity of service provision and minimise risks to individuals with effect from 01/07/22. Transfer were undertaken through mutual consent in consultation with the affected staff members and both council’s HR teams.</p>
<b>Transition arrangements</b>	<p>All joint roles in Strategic Marketing ceased and the transfer of staff took place on 01/07/22. Ongoing provision of specialist marketing services will continue to be delivered from OCC to CDC through the existing s113 agreement until a revised agreement is put in place, no later than 31/08/22.</p>
<b>Additional information</b>	

Page 12

# Communications

<b>Recommendation approved by JSSP</b>	That the joint service decouples and the joint provision of services ceases. This will resolve the current challenges faced of conflicting strategic priorities between both organisations and minimise current risks around communications officers handling sensitive and confidential information for both councils.
<b>Decision date</b>	23 May 2022
<b>Financial implications</b>	The current contribution from OCC to CDC ceases. The decoupling results in a consequent reduction of income to CDC, and an equal reduction of costs to OCC, which needs to be addressed through budget and business planning processes for 2023/24. Further financial detail can be found in Annex A.
<b>HR implications</b>	Decoupling results in a small over-provision of resources in CDC and an under-provision in OCC. Therefore through transition planning, the councils agreed the transfer of one member of staff from CDC to OCC to support continuity of service. The transfer was undertaken through mutual consent in consultation with the affected staff member and both council's HR teams.
<b>Transition arrangements</b>	This decoupling has been implemented. All joint roles and services ceased and the transfer of staff took place on 01/07/22.
<b>Additional information</b>	

# Consultation and Engagement

<b>Recommendation approved by JSSP</b>	The joint service decouples and an SLA is established for the provision of specialist support to CDC. This will allow both councils to meet their individual strategic direction and goals.
<b>Decision date</b>	23 May 2022
<b>Financial implications</b>	The current contribution from CDC to OCC ceases. The decoupling results in a consequent reduction of income to OCC, and an equal reduction of costs to CDC, which needs to be addressed through budget and business planning processes for 2023/24. This cost is partially offset by a paid advice service. Further financial detail can be found in Annex A.
<b>HR implications</b>	Provision of a pay-as-you-go service enables CDC to draw on expertise and advice when required. CDC needs to identify in-house resource to manage the Engagement HQ platform and commission services from OCC.
<b>Transition arrangements</b>	This decoupling has been implemented and all joint roles in Consultation and Engagement ceased on 01/07/22. Ongoing provision of specialist consultation services will continue to be delivered from OCC to CDC through the existing S113 agreement until a revised agreement is put in place, no later than 31/08/22.
<b>Additional information</b>	



# Performance and Insight

<b>Recommendation approved by JSSP</b>	<p>That the joint team decouples and there is a separate provision of services. This will allow both councils to meet their individual strategic direction and goals and minimise current risks around conflicts of interest and handling sensitive information for both councils.</p>
<b>Decision date</b>	<p>23 May 2022</p>
<b>Financial implications</b>	<p>The current contribution from OCC to CDC ceases. The decoupling results in a consequent reduction of income to CDC, and an equal reduction of costs to OCC. Separation could mean higher costs for both councils when renewing their Unity performance system contracts in November 2022, although the Procurement team advise that the likely impact will be minimal. Further financial detail can be found in Annex A.</p>
<b>HR implications</b>	<p>Separation leaves CDC with a small team (1.81 FTE), with potentially little resilience for managing a broad range of work with tight deadlines. Therefore through transition planning, the councils agreed the transfers of one staff member from OCC to CDC to support continuity of service provision with effect from 01/07/22. This was done in consultation with the affected staff member and both council's HR teams.</p> <p>Separation leaves OCC with no Performance Team Leader, resulting in a skills and line management gap that will need to be filled promptly.</p> <p>Management of the Unity performance system falls to one person at both council, which means a single point of failure.</p>
<b>Transition arrangements</b>	<p>This decoupling has been implemented, all joint roles in Performance and Insight ceased and the transfer of staff took place on 01/05/22. (The JSSP decision was retrospective due to an appointment process at CDC meaning that joint arrangements had effectively ceased from 1 May.)</p>
<b>Additional information</b>	

Page 15

# Corporate Programmes

<b>Recommendation approved by JSSP</b>	That the joint team decouple and a separate provision of services is established. This will allow both councils to meet their individual strategic direction and goals, which are no longer aligned.
<b>Decision date</b>	23 May 2022
<b>Financial implications</b>	The current contribution from OCC to CDC ceases. The decoupling results in a consequent reduction of income to CDC, and an equal reduction of costs to OCC. Further financial detail can be found in Annex A.
<b>HR implications</b>	Separation leaves OCC with a very small team relative to the volume of projects (1.5 FTE project managers), and necessitate review of project management resource. Resourcing of separate project management networks would be challenging for both teams.
<b>Transition arrangements</b>	This decoupling is complete with all joint roles ceasing from 01/07/2022.
<b>Additional information</b>	

# Legal Services

<b>Recommendation approved by JSSP</b>	The joint service decouples.
<b>Decision date</b>	22 April 2022.
<b>Financial implications</b>	The current contribution from CDC to OCC (for 30% of Head of Legal time) ceases, resulting in a reduction of income for OCC. There are no other direct recharging arrangements in place for the two resources providing OCC legal planning support to CDC. Further financial detail can be found in Annex A.
<b>HR implications</b>	OCC and CDC legal services are separate. There were two joint posts who had oversight over both teams, the Director of Law & Governance and the Head of Legal. Both joint posts have returned to OCC functions.
<b>Transition arrangements</b>	This decoupling is complete. Joint working ceased on 29/04/2022.
<b>Additional information</b>	The JSSP decision was retrospective as a staffing change agreed by Chief Executives meant that the joint service had effectively ceased from 29th April 2022.

# Democratic Services

<b>Recommendation approved by JSSP</b>	That the joint service decouples, with CDC providing support to OCC over the transitional period to ensure continuity of service. Decoupling will minimise risk through allowing both organisations to work independently as current demand and activity levels were felt to be unsustainable for the joint resource.
<b>Decision date</b>	23 May 2022
<b>Financial implications</b>	Temporary provision of services from CDC to OCC was to meet immediate resource need and therefore does not have a budgetary impact.
<b>HR implications</b>	<p>A CDC officer supported OCC under a S113 agreement. CDC has a need for its officer to return due to capacity issues following the local elections and due to pressures of other decoupling exercises.</p> <p>OCC have appointed an interim Head of Governance who will manage the Committee Services and Access and Disclosure teams and line management responsibilities.</p>
<b>Transition arrangements</b>	This decoupling is complete with all joint working to cease from 01/07/2022.
<b>Additional information</b>	

# Information Governance

<b>Recommendation approved by JSSP</b>	<p>That the joint service decouples, with CDC buying the service from OCC over the transitional period and the statutory DPO role moving to CDC with immediate effect.</p>
<b>Decision date</b>	<p>23 May 2022</p>
<b>Financial implications</b>	<p>Funding is already in place until the end of the transition period so there are no immediate financial implications. Following the decoupling, there will be a consequent reduction of income to OCC and an equal reduction in costs to CDC. Further financial detail can be found in Annex A.</p>
<b>HR implications</b>	<p>There is no change to the OCC staffing arrangements. There are no joint posts to resolve therefore no impacts to current staff.</p>
<b>Transition arrangements</b>	<p>The DPO role was moved to CDC with immediate effect from 23/05/22. The provision of the service via joint working will continue under the existing s113 agreement until 31/08/22.</p>
<b>Additional information</b>	

Page 10

<b>Recommendation approved by JSSP</b>	The service decouples, with OCC continuing to provide support to CDC over the transitional period.
<b>Decision date</b>	23 May 2022
<b>Financial implications</b>	CDC will have to consider the financial implications of a new resource as there were previously no financial arrangements in place for the provision of FOI services.
<b>HR implications</b>	All FOI resources are OCC staff and so CDC will need to appoint new resources over the transition period.
<b>Transition arrangements</b>	Provision of the service from OCC to CDC via joint working will continue under the existing s113 agreement until 31/08/2022 and will then cease.
<b>Additional information</b>	

# Transition Programme Phase 3

# IT Services

<b>Recommendation approved by JSSP</b>	That the joint management arrangements decouple and that OCC continue to provide specific IT services to CDC via an SLA, as specified in an agreed Service Catalogue.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	The financial contributions from both CDC and OCC for the joint team will cease under the recommended option to decouple. The new costs to CDC are defined in the Service Catalogue which currently estimates a cost of £20,000 p/a (payable to OCC), based on a day rate basis, with potential for further costs or savings depending on the scope and scale of services required by CDC. Further financial detail can be found in Annex A.
<b>HR implications</b>	All previously joint roles will become OCC only. Decoupling may result in an over-provision of resources in CDC and an under-provision in OCC. Therefore through transition planning, the councils will agree transfers of staff from CDC to OCC that support continuity of service provision and minimise risks to individuals. Any transfers will be with the mutual consent of the member of staff concerned.
<b>Transition arrangements</b>	Provision of services from OCC to CDC will continue until a new SLA and Service Catalogue is put in place, no later than 31/08/22.
<b>Additional information</b>	



# Procurement and Contracts

<b>Recommendation approved by JSSP</b>	That the joint team decouples and commences separate provision of services.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	The current contribution from CDC to OCC (for CDC's contributions for Procurement officers and for the shared costs of the Head of Procurement) ceases. The decoupling results in a consequent reduction in income to OCC which will be managed through the business and budget planning process and by reviewing resource level, e.g. through vacancy management. Further financial detail can be found in Annex A.
<b>HR implications</b>	The Head of Procurement will no longer be a joint role and will be employed solely by OCC. There will be no other HR implications for OCC.
<b>Transition arrangements</b>	Transition plans need to be confirmed with the Chief Executives and implemented no later than 31/08/22.
<b>Additional information</b>	Both Council's initial preferred option for Procurement and Contracts was to deliver a new form of partnership in a similar manner to the proposal for Digital and IT Services. However, the Councils were not able to agree a mutually acceptable price as OCC's officers' assessment of the costs incurred to deliver a procurement service was above the level CDC officer's could recommend as value for money. Therefore the recommended option is to fully decouple from the current partnership arrangements.

# Property Services

<b>Recommendation approved by JSSP</b>	That the joint service decouples, and shared service arrangements end following appointment of interim Head of Estates roles for both councils.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	CDC and OCC will be required to pay for and resource separate services. The current contribution from CDC to OCC towards the 12 joint posts and the provision of Hard Facilities management service cease. Therefore the decoupling results in a consequent reduction in income to OCC. It is anticipated that these pressure this can be absorbed into existing budgets. Further financial detail can be found in Annex A.
<b>HR implications</b>	Joint posts will revert to OCC.
<b>Transition arrangements</b>	Current provision of services will continue to be delivered over the transition period until 01/08/22 at which point all joint roles and services will cease. After this, OCC will provide light touch support for training of new CDC staff and for the handover and training around the new single view of the asset system under business inter-council working. All shareholder responsibilities will be transferred by the 01/08/2022 at the latest.
<b>Additional information</b>	The preferred option for OCC was for Facilities Management services to remain shared. CDC informed OCC that their preference was to discontinue the joint Facilities Management arrangement and so the preferred option was updated to a full decoupling. Former responsibility for commercial asset management and shareholder responsibilities are also ceasing.

# Customer Service Centre

<b>Recommendation approved by JSSP</b>	That the joint service decouples and the two Customer Service Centres are to be separately operated by each Council.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	There are no financial implications from an as-is perspective as each Customer Service Centre (CSC) has its own revenue budget.
<b>HR implications</b>	<p>The CDC CSC Service Delivery Manager will report into the interim Assistant Director for Customer Focus from 01/07/22.</p> <p>The OCC CSC will continue to be led and managed by the OCC Director for Customer Experience and Cultural Services, with no changes to current structure or establishment.</p>
<b>Transition arrangements</b>	This decoupling is complete and joint posts ceased from 01/07/22. (This decision was retrospective as through recruitment processes, joint management effectively ceased from 01/07/22.)
<b>Additional information</b>	OCC's preferred option was to 'operate jointly through a formal SLA', however CDC informed OCC that a review into the preferred direction of travel for Customer Experience and Customer Services concluded that the right decision for CDC would be to decouple these services from OCC and provide the opportunity for CDC to review and remodel these services to support the strategic direction of our council and to align CDC operating model considerations. The direction of travel was subsequently amended through the JSSP.

# Continuous Improvement

<b>Recommendation approved by JSSP</b>	That the joint service decouples and the Continuous Improvement Team (CIT) becomes an OCC only function.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	The current contribution from CDC to OCC ceases. The decoupling results in a consequent reduction in income to OCC which needs to be managed in the BAU budget and business planning process for 2023/24. Further financial detail can be found in Annex A.
<b>HR implications</b>	There will be no HR implications to OCC as the CIT will remain in OCC and so there will be no impacts on staff or structure.
<b>Transition arrangements</b>	Joint management ceased from 01/07/22 with phased close-down of joint improvement projects ongoing to 31/08/2022.
<b>Additional information</b>	OCC's preferred option was to 'operate jointly through a formal SLA', however CDC informed OCC that a review into the preferred direction of travel for Customer Experience and Customer Services concluded that the right decision for CDC would be to decouple these services from OCC and provide the opportunity for CDC to review and remodel these services to support the strategic direction of our council and to align CDC operating model considerations. The direction of travel was subsequently amended through the JSSP.

# Land Charges

<b>Recommendation approved by JSSP</b>	That the Land Charges team decouples and returns to CDC only line management.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	This is a standalone service for CDC, with a CDC budget and income target so there will be no financial implications from decoupling.
<b>HR implications</b>	The Service continues to operate as now but under new line management within CDC.
<b>Transition arrangements</b>	This decoupling is complete and joint posts ceased from 01/07/22. (This decision was retrospective as through recruitment processes, joint management effectively ceased from 01/07/22.)
<b>Additional information</b>	

Page 27

# Emergency Planning

<b>Recommendation approved by JSSP</b>	That CDC commission Emergency Planning support from OCC through an agreed SLA to achieve similar outcomes to the previous arrangements.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	CDC continue to pay £25,000 p.a. for Emergency Planning services.
<b>HR implications</b>	<p>CDC continue without any identified 'in house' corporate capacity or specialist expertise on Emergency Planning and Business Continuity.</p> <p>OCC Emergency planners have specific skills allowing a flexible team approach to supporting CDC based on the requirements of the work. OCC Emergency Duty Officer to provide advice and support to CDC Duty Director.</p> <p>Further agreement required to consider induction and maintenance training for CDC Duty Directors. Within OCC this is jointly delivered by Emergency Planning and Fire and Rescue.</p>
<b>Transition arrangements</b>	Provision of services will continue under the existing S113 agreement whilst a new SLA is being developed, to be agreed by 01/08/22.
<b>Additional information</b>	

# Regulatory Services and Community Safety

<b>Recommendation approved by JSSP</b>	The joint team continues to work across both councils and provide services for both councils, based on the agreed scope of the works to be delivered under a new s.113 agreement. These 'works' should be based on outcomes and deliverables that will be set out in an agreed Business Plan, reviewed annually.
<b>Decision date</b>	4 July 2022
<b>Financial implications</b>	CDC continue to pay OCC £102,520 per annum for Regulatory Services support.
<b>HR implications</b>	<p>The AD of Regulatory Services and Community Safety will report jointly into both councils and objective setting will be undertaken jointly. OCC will be the lead manager and employment matters will be dealt with by OCC. The joint working will be agreed through a new s113 agreement and employment matters relating to the joint post will be confirmed to the individual via an individual agreement.</p> <p>Both OCC staff (Trading Standards) and CDC staff (Regulatory Services) within the in-scope services will report into the joint AD role.</p>
<b>Transition arrangements</b>	Provision of services continues under the existing S113 agreement whilst a new SLA is being developed, to be agreed by 01/08/22.
<b>Additional information</b>	

# Acronyms

---

CD: Corporate Director  
CDC: Cherwell District Council  
JSSP: The Joint Shared Services and Personnel Committee  
PCC: Oxfordshire County Council  
SLA: Service Level Agreement