

Draft V4.3

**Business Case to the Chief Coroner
for merging the
Lincolnshire Coroner Area
and
North Lincolnshire and Grimsby Coroner Area**

DRAFT

Contents

- 1. Information on areas proposed to merge**
- 2. Senior Coroner Appointment**
- 3. Impact of proposed Merger on Service Delivery**
- 4. Impact of merger on those working in the Service**
- 5. Resource implications**
- 6. Risks and Mitigation**

Appendices

Appendix 1 – Map of the proposed Greater Lincolnshire Coroner Area

Appendix 2 – Staff Structure charts

Appendix 3 – Performance statistics

ALTERATION OF CORONER AREAS UNDER SCHEDULE 2 OF THE CORONERS AND JUSTICE ACT 2009¹

MINISTRY OF JUSTICE BUSINESS CASE TEMPLATE FOR MERGERS

NAMES OF CORONER AREAS THAT ARE PROPOSING TO MERGE

- Lincolnshire, North Lincolnshire and Grimsby Area

PROPOSED NAME OF NEW AREA

- Greater Lincolnshire Area

1. INFORMATION ON AREAS THAT PROPOSE TO MERGE

- Please provide key details in the table as follows:

| Coroner area | Lincolnshire | North Lincolnshire and Grimsby | Proposed: Greater Lincolnshire |
|---|--|---|---|
| Geographical area covered | Lincolnshire | North Lincolnshire and North East Lincolnshire | Lincolnshire, North Lincolnshire and North East Lincolnshire |
| Local authority/authorities that fund(s) coroner area and % | Lincolnshire County Council 100% | North Lincolnshire 49% North East Lincolnshire 51% | 3 stage phased approach culminating on a per capita split Lincolnshire 69.6% (761,224), North Lincolnshire 15.8% (172,763), North East Lincs 14.6% (159,942). |
| Relevant authority (formerly lead authority) | Lincolnshire County Council | North East Lincolnshire Council | Lincolnshire County Council (TBC) |
| Police Force(s) | Lincolnshire | Humberside | Humberside and Lincolnshire Police forces |
| Transport links | East Midlands Mainline train route from London to the north/Scotland A1 main road A52 east/west road | A180 Transpennine Services Grimsby Docks South Humber Bank | All combined |

¹ <http://www.legislation.gov.uk/ukpga/2009/25/schedule/2>

| Coroner area | Lincolnshire | North Lincolnshire and Grimsby | Proposed: Greater Lincolnshire |
|----------------------------------|---|---|--------------------------------|
| | <p>Large volume of A roads and country roads</p> <p>Numerous large Royal Air Force bases the largest being RAF Waddington. Also RAF Coningsby, RAF Digby, RAF Scampton and RAF Cranwell</p> <p>Boston Docks</p> <p>A16 and A15</p> | <p>Industries</p> <p>Immingham Docks</p> <p>Humberside Airport</p> | |
| Major hospitals | <p>United Lincolnshire Hospitals Trust – - County Hospital Lincoln - Pilgrim Hospital Boston - Grantham</p> <p>Lincolnshire Community Health Service Hospitals at Grantham, Louth Gainsborough, Spalding and Skegness</p> | <p>Diana Princess of Wales, Grimsby</p> <p>Scunthorpe General Hospital</p> <p>St Hughes Hospital, Grimsby</p> | All combined |
| Prisons in area | HMP Lincoln HMP North Sea Camp | None | All combined |
| Other state detention facilities | Morton Hall Immigration Removal Centre Swinderby Lincolnshire | Humberside Police Custody Suite (36 cells) | All combined |

| Coroner area | Lincolnshire | North Lincolnshire and Grimsby | Proposed: Greater Lincolnshire |
|--|--|--|--|
| | <p>Lincolnshire Police Custody Suites Skegness, Grantham, Boston and Lincoln (66 Cells)</p> <p>Secure Centre-Sleaford</p> <p>Mental health Secure unit</p> <p>(NB – large volume of nursing homes in relation to Deprivation of Liberties -DoLS)</p> | | |
| Courtrooms/ inquest venues | <p>Myle Cross Centre, Lincoln</p> <p>Lindum road, Lincoln</p> <p>Endeavour House, Boston</p> | <p>Grimsby Town Hall</p> <p>Cleethorpes Town Hall</p> <p>North Lincolnshire Civic Centre</p> | All combined |
| Office/staff accommodation – location and capacity | <p>Structure chart (Appendix B) Located at Lincoln Registration Offices and Boston ...</p> <p>Smart working introduced to allow flexibility to location/ homeworking.</p> | <p>Structure Chart (Appendix B) Located at Cleethorpes Town Hall</p> | <p>Combined to one Area Team Structure. Location of staff to be as now. Technology to be maximised to allow flexible locations</p> |
| Employer of coroner's officers' | Lincolnshire County Council | North East Lincolnshire Council | Lincolnshire County Council (TBC) |
| Name of senior coroner | Acting Senior Coroner Paul Smith | Acting Senior Coroner Mark Kendall | To be appointed in line with CC guidance |

| Coroner area | Lincolnshire | North Lincolnshire and Grimsby | Proposed: Greater Lincolnshire |
|---|--|---|--|
| Number of area coroners | 1(vacant due to acting up to senior) | None | One |
| Number of assistant coroners | 3 | Two including one assistant Coroner currently acting up as Senior Coroner | 6 proposed to bring in line with Chief Coroner Guidance to do circa 15 days per year |
| Number of coroner's officers | 1 Coroners Manager 7.5f fte Coroners Officers 0.8 fte Coroners Development Officer | 3.06 fte Coroners Officers | 1 Coroners Manager 1 Senior Coroners Officer 9.5 fte Coroners Officers 0.8 Coroners Development Officer |
| Number of administrative support staff | 4 fte | 1 | 5 fte |
| Number of deaths reported in the previous calendar year (2020) | 3272 | 1279 | Circa 5000 |
| Inquests held in the previous calendar year (2020) | 425 | 114 | Circa 540 |
| Post mortem rate as % of reported deaths in the previous calendar year (2020) | 38% | 38% | Circa 38% |

Please note attached map of the proposed area as Appendix A.

2. SENIOR CORONER APPOINTMENT

- **Why are you seeking a merger now (i.e., which area's senior coroner is stepping down, when and why)?**

The Senior Coroner for Grimsby and North Lincolnshire retired in December 2018, at this point the Chief Coroner advised North and North East Lincolnshire Councils they could not move to appoint a new Senior Coroner but needed to consider the merger with another area as the referral numbers were lower than those proposed under the model coroners area 1,700 rather than 3,000. Following a direction to discount any merger northwards with Hull and East Riding, discussions were held with the then Senior Coroner for Lincolnshire Mr T. Brennand, In September 2020 Mr Brennand moved to take up an appointment in Manchester West, since this date the Area Coroner for Lincolnshire Mr P Smith as acted up as Senior Coroner, leaving Lincolnshire without the benefit of an Area Coroner until the matter of a merger is resolved.

There is positive political and officer support for the merger into a Greater Lincolnshire area, partially down to the collaborative manner in which this proposal has been developed.

3. IMPACT OF PROPOSED MERGER ON SERVICE DELIVERY

- **What will be the impact of the proposed merger on service delivery?**

The current service delivery model in terms of how residents access the coroners service, need not change, it is anticipated that current arrangements will be maintained to ensure there is no impact on service access, and that it continues to be delivered within the local community. However, the recent restrictions resulting from Covid have meant that in person hearings have had to be limited, LCC have invested in remote technology to allow participation for parties to participate in hearings. This remote option has been welcomed and is something that will be developed across all court buildings within the merged area.

The creation of a single team and harmonisation of processes and better use of technology can only deliver efficiencies and improved performance for residents. The proposed merger will also give better resilience to deliver the service and additional resources to deal with fluctuations in service demand. It will also enable improved business continuity planning for the service as a whole.

The merger with Lincolnshire would also form a single region, particularly under emerging collaborative arrangements across the three tier 1 councils. The new service is clearly out of kilter with historical regional working across the old Humberside region; however there are strong plans in place across the three councils that make up the Greater Lincolnshire area to work closely on a broad range of issues both strategically and on service delivery.

Will additional coronial or administrative support be provided in the new area? (E.g. will additional coroners need to be recruited or will workloads be increased/redistributed etc.? How will additional caseloads be managed?)

Coronial Support - In terms of coronial support the merger benefits include access to a full time Senior Coroner, full time Area Coroner and a larger pool of assistants, to manage the workload, respond to fluctuations in demand, and improve the timelessness of inquests held. The full-time fixed cost of a senior coroner and an area coroner removes the unforeseen impact on budgets in the event of additional day rate inquests costs, which local authorities with part time coroner's experience.

What will be the impact of the merger on associated services – such as post-mortem examinations, and mortuary provision?

The merger to one coronial area would have a positive impact on all three local authorities in terms of resilience of service and longer-term cost reduction in post-mortem fees, as well as improved performance for families.

Lincolnshire already has a good spread of providers including Hull Royal Infirmary, whilst Grimsby and North Lincolnshire utilise the smaller facilities at Lincoln County Hospital. PM work would be redistributed to ensure minimal transportation for the deceased and their families. The availability of 4 different providers of PM facilities allows for strong resilience of service provision.

The larger pool of pathologists in the new area would improve current resilience and ensure the timeliness of post-mortems is maintained, when it is known that nationally there is shortage. Timeliness of post-mortems has a significant impact on the whole bereavement journey for families, and affects performance of the local registration service, who endeavour to conduct the registration within 7 days of the date of death, where a post-mortem has been conducted.

The new service will also explore the possibility of a Digital Autopsy provision from all its providers, to carry out non-invasive post mortems where possible, to seek greater reduction in costs of post mortems. This approach is increasing nationally within coroner services, responding to customer requests for choice and providing longer term mitigation to the risk of fewer pathologists available to conduct regular evasive post mortems. Coronial pathology is a reducing profession, and digitisation of post mortems is proving to provide an efficient alternative.

How will the relevant local authority administer the new coroner area?

How will administrative governance be achieved between the relevant local authority and other funding local authorities?

It is proposed that Lincolnshire County Council will be the Lead Authority for the new Greater Lincolnshire Area. It is preferred that the merger incorporates a Transfer of Undertakings (Protection of Employment) (TUPE) transfer of staff to Lincolnshire County Council from NE Lincolnshire, to create a newly formed Greater Lincolnshire Team to deliver the service and realise the financial and efficiency benefits of a single team. It is envisaged however that staff will remain in situ within NE Lincolnshire and continue to provide a local

service to N/NE Lincolnshire residents. The new area will be governed in the form of an agreed Service Level Agreement across the three constituent authorities. The service level agreement is being developed to ensure no financial disadvantage to any party and will therefore take a phased approach to how costs are shared.

It will be essential for the new combined service to use the same IT systems so that there are shared processes and procedures across the new service. It is proposed to extend the licence for WPC, currently used by Lincolnshire to cover the North and North East Area and thus bring a transformation to existing outdated systems and processes.

The new system provides staff and coroners the flexibility to work remotely, at home and at any location with a Wi-Fi connection. Coroners officers work to a workflow system to receive referrals digitally from other parties (including the direct transfer into the system through a referral portal, and coroners authorise post mortems, sign authorities digitally and can view case files digitally in court or provide paper bundles.

Improved Performance

A merger to one area, harmonising processes and making better use of a digital workflow system will bring the following benefits:

- An improvement in the quality and consistency of the referral – all referrals now received in writing. Information is received in a logical order using a template to receive the information. We also will work closer with local GMC and MEs and therefore anticipate a reduction in the number of referrals.
- The data received is safe and secure, and each referral will prepopulate and create a case within the system to prevent re-keying of information by staff. Reducing error rates and supporting our duty under GDPR.
- The system introduces a paperless service, saving on accommodation and storage facilities; the reliance on paper files is being reduced. The need for paper record retention and management is drastically reduced and therefore overtime, costs reduced on physical archiving.
- System available remotely for out of hours cover.

4. IMPACT OF MERGER ON THOSE WORKING IN / WITH THE SERVICE

What will be the impact of the merger on:

Coroners

Coroners' officers

Other staff in the coroner's offices

Pathologists

Coroners – The Senior Coroner personally conducts the more complex, highly sensitive inquests, and believes it is reasonable to be able to take on the additional workload of cases within the extended area, with the support of the Area Coroner. An open competition will be managed to recruit a new Senior Coroner for the merged area.

Coroner's officers – It is proposed that staff currently within NE Lincolnshire will transfer to the employment of Lincolnshire County Council; however, arrangements are made for them to remain in their current location, in order to continue to provide the service locally. Lincolnshire has an experienced Coroners Service Manager already in place, to train and support coroners' officers. The Service Manager is dedicated to the Coroners service and therefore can focus on developing its officers and service development. All Coroners officers will need to work to the same processes and computer system. Staff have been kept updated as the merger business case has been developed however a formal staff consultation will be required to ensure that this transition is managed smoothly with minimal service impact.

A new Team of 11 coroner's officers will provide greater resilience for the receiving of day-to-day referrals and will provide opportunities for improved business continuity planning should the operation at any of the individual sites be disrupted for any reason. The new IT system will allow any member of staff to access any case referral, allowing other staff to pick up the work in the absence of others. The Covid 19 situation has also highlighted the benefits of remote working and the ability to access all systems to deliver the service at home. The larger team includes a management and senior officer post therefore allowing for career progression and therefore better staff retention and knowledge development.

The current administrative support staff structure is resourced adequately to support the new combined area.

We see improvements for pathologists with the availability of a dedicated link role via the Coroners Development Officer and Coroners Services Manager. Also, the access to electronic report transfers. The development role provides a key contact for contracted parties, whilst also ensuring processes are developed in an evolutionary process.

5. RESOURCE IMPLICATIONS OF MERGER

Current Total Service Budgets

The current total budgeted costs for each Coronal Area for 21/22 are shown below.

| | Grimsby and North Lincolnshire | Lincolnshire |
|---|--------------------------------|------------------|
| <i>Senior Coroner</i> | 88,571 | 163,172 |
| <i>Area Coroner</i> | | 128,809 |
| <i>Assistant Coroners</i> | 8,000 | 20,000 |
| <i>Total</i> | 96,571 | 311,981 |
| <i>Service Team- Officers/Manager</i> | 141,200 | 450,296 |
| | | |
| Total people costs | 237,771 | 761,752 |
| | | |
| Contract Costs | 317,600 | 1,428,670 |
| | | |

| | Grimsby and North Lincolnshire | Lincolnshire |
|--------------------|--------------------------------|------------------|
| Other Costs | 15,200 | 81,766 |
| | | |
| Total Cost | 570,571 | 2,272,188 |

The table below shows total costs per authority based on current cost splits

| Authority | Percentage contribution |
|---------------------------------|-------------------------|
| Lincolnshire County Council | 100% |
| North Lincolnshire Council | 52% |
| North East Lincolnshire Council | 48% |

Greater Lincolnshire Proposed Costs Split

The end approach will be to split costs based on a per capita basis, however due to the divergence of the current cost basis a phased approach will be taken to cost sharing that will therefore be able to take account of the development of efficiencies in systems and contract reviews. This approach will be managed by a MOU and Service Level Agreement between the 3 authorities.

Table 2 Population and Number of Deaths

| Population | Number | % |
|--------------|------------------|-------------|
| Lincs | 761,224 | 69.7% |
| N Lincs | 172,763 | 15.8% |
| NE Lincs | 158,327 | 14.5% |
| Total | 1,092,314 | 100% |

Phase 1

All staffing (Coroners and officers) costs to be covered as per current split 77% Lincolnshire 23% to ensure no party pays more than currently.

Contracted services (PM, Removals, Transfers and Storage) to remain as is.

Phase 2

Move to a per capita split for all staffing costs as shown in Table 2.

Contracted services (PM, Removals, Transfers and Storage) to remain as is.

Phase 3

Per capita split for all staffing costs and contracted services. Contracted services have been fully reviewed and re tendered.

Further Expected savings

It is clear that a merger will longer term, achieve efficiency savings from a number of areas, which all local authorities will benefit. The following points are listed as potential areas to consider in more detail:

- Reduction in referrals, leading to a reduction in required staff resource; achieved by working with referring agencies such as ambulance trusts and medical examiners
- Saving on expert medical witnesses attending inquest: achieved by the adoption of technology within the court room.
- Utilise full time Senior and Area Coroner
- Review of Post Mortem contracts including exploration of public mortuary facility
- Review and re procurement of transportation of the deceased.
- Reduction in IT costs, merging to one system, savings can be made to annual maintenance and licence charges.
- The day-to-day management of the service will be covered by the Lincolnshire Coroner's Service Manager, supported by the development officer continual improvements and efficiencies can be identified.
- Automation of admin process: achieved through WPC capabilities adopted fully.

6. LEGAL IMPLICATIONS

- **Are you aware of any legal issues that need to be resolved before a merger can go ahead (in addition to the Lord Chancellor making an order under Schedule 2 of the 2009 Act)? If so please give details.**

The TUPE transfer of staff to Lincolnshire Council will need to take place, prior to the merger going ahead.

7. VIEWS OF THOSE AFFECTED BY MERGER

- **Do all affected local authorities support the merger? Please provide details.**

Yes, the proposal has received support from the Leaders and Chief Execs of all 3 councils. Initial discussions with Members show that they support the proposed merger in principle as this business case sets out it will lead to the provision of better services, greater resilience and realisation of savings/efficiencies, to the benefit of all stakeholders and customers, whilst retaining local service delivery. The three upper tier authorities of Greater Lincolnshire have established a joint committee to facilitate cooperation and collaboration in the development of opportunities to gain greater alignment across Greater Lincolnshire, where scale and scope are required and can enhance upper tier

- **Have the local authority councillors / cabinets approved the merger? Please provide details.**

*Comments will be added when the business case has been considered by the cabinet/executive of **all authorities involved in the merger.***

- **What is the view of affected coroners and their staff?**

Initial discussions indicate that the coroner and their staff agree that the merger is the right thing to do to enhance the service.

Comment from Paul Smith HM Acting Senior Coroner for Lincolnshire:

"I fully support this proposed merger of the Coroner areas. As noted within the House of Commons Justice Committee Report of May 2021, for many years the consistency of Coroner services has suffered from the absence of a unified national Coroner Service. Successive Chief Coroners have encouraged the merger of Coroner areas where appropriate, with a view to there being fewer Coroner areas, each dealing with greater numbers of referrals. The quality of service currently provided nationally all too often depends upon the priorities and funding available from each Local Authority.

In Lincolnshire we have recently addressed that issue through our Coroners Transformation Project. That has provided an opportunity to review in depth the quality of the service provided to our bereaved families. It has proved very successful. We have reviewed the relationships between the Local Authority and the Coroner Service and have identified common aims. We have made a number of improvements to our systems, including the way in which referrals are received, the manner in which our caseload is managed, and how and where inquests are heard. The development of IT has a significant role to play at all stages of our service. We are confident that the improvements made will improve the quality of the service that we provide to our bereaved families. It is crucial that their interests remain at the heart of all that we do.

I believe that the merger of the two areas will permit us to build upon the success of that project. It will enable us to deliver a more consistent, resilient, timely and efficient service across the whole area and will provide a platform for the continued development of Coroner services across the whole area."

- **How will bereaved people be affected by the merger – e.g., travelling to inquests, being able to contact coroners' offices?**

The location to which inquests are held is unchanged, and the new Greater Lincolnshire area will continue to ensure the customer remains at the focus of any developments, service changes. In addition, customers could under the new Lincolnshire area, request the inquest to be held at any one of the designated court rooms across the area, providing greater choice and flexibility.

- **Have you sought the views of other affected stakeholders - such as police authority and constabulary, hospitals, prisons, GPs, faith groups and funeral directors? Please provide details.**

Following the Joint Committee decision to progress this through to the formal decision-making process, a short consultation by letter will be carried out with key stakeholders, to gather their views on the Greater Lincolnshire proposal. *Wording of letter to be*

agreed to ensure the matter is not construed as a predetermination of any formal decision.

- To provide a more concise and efficient service to communities.
- A larger coronial jurisdiction would create opportunities to share and learn good practice.
- In the medium to long term, the proposal would provide options to deliver some economies of scale.

What are the views of other stakeholders?

Lincolnshire County Council, North and North East Lincolnshire council's support the merger, due to the potential benefits listed above, including potential cost savings, increased resilience a merger brings to the service, and improvements to bereaved families. However, the completed business case will need to be approved by all Cabinets.

The national medical examiner service – comments to follow

- **What impact will the merger have in terms of disability, gender and racial equality?**

An Equalities Assessment is to be completed.

8. RISKS AND MITIGATING ACTIONS

- Please provide details of any risks identified and mitigating action (to be) taken.

A Risk Register will need to be created; however initial risks identified below:

| Risk | Mitigation |
|--|---|
| Insufficient capacity to deliver the merged service. | An increased staff team will allow a more flexible service to be delivered and allow for coverage of staff absence. The use of the Area Coroner and experienced Assistants are already in place to support the wider area. Potential changes to the IT system and working electronically will enable coroner's office staff to meet the demands of the new area. |
| Failure of operations, systems or processes | Lincolnshire has recently undertaken a robust transformational review of all its processes, it is expected these along with associated IT will be adopted across the whole area, supported by an SLA. There remains a risk in the short term of operating 2 IT systems and potential issues with the introduction of a single new IT system. However, Lincolnshire does have recent |

| Risk | Mitigation |
|--|---|
| | experience of merging two areas and is aware of some of the issues that will need to be mitigated |
| Negative response by staff affected by the merger. | To ensure they are formally consulted and included in any proposals, and their views are taken into account. |
| Insufficient initial investment required to operate the merged service. | Consideration will need to be given to IT investment into courtrooms. Full cost implications will need to be considered and agreed by all local authorities. |
| The quality of service drops | To ensure that processes and policies are designed and implemented to ensure there is a seamless service to all customers, and impact is minimal. |
| Loss of staff | Potential that some staff seek alternative employment if they are not fully engaged. Important to consult at the earliest stage following approval of the merger, and ensure staff understand the benefits of the proposal. |
| Customers, stakeholders confused as merger takes place and processes change | To ensure there is a clear communications plan, as part of the implementation phase, with key stakeholders and information is clear to customers |
| The proposed area crosses two different police force areas and several health trusts | This issue will be addressed through good and continuous stakeholder engagement, led by dedicated Manager and Development Support officer. |

9. ALTERNATIVE OPTION(S)

- Please describe other options considered, in addition to the proposed merger, and the advantages and disadvantages for each option.

Other Options have been considered and include:

OPTION 1 – Maintain the status quo,

Advantages

This would maintain the current service provision and be delivered within existing budgets.

Disadvantages

The does not deliver the Chief Coroners clear guidance and longer-term aspiration to decrease the number of coronial areas, introduce standardised processes.

Potential savings are not realised maintaining unnecessary cost to the public purse.

OPTION 2 – North Lincolnshire and Grimsby Area merge with another area

Advantages

The two South Humber Authorities could merge with the other Humber authorities which would provide a single coroners service that is contiguous with Humberside police area.

Disadvantages

This option would not be consistent with the newly created regional structure for Coroners, where North Lincolnshire, North East Lincolnshire and Lincolnshire are in the Central region whilst Hull and East Riding are in the North.

Additionally this option would not be consistent with the aspirations of the Greater Lincolnshire Joint Oversight Committee.

10. CONTACT WITH THE CHIEF CORONER'S OFFICE / MINISTRY OF JUSTICE / CONSULTEES

- **Have you had previous discussions with the Chief Coroner on the proposed merger? (This is a requirement before MoJ can formally consult on the merger.) Please provide details of the discussion.**

No direct constructive discussions as yet pending completion of until the Business Case. However, both the Chief Coroner's Office and MoJ have been regularly engaged with and kept apprised of developments. is fully completed. This approach however supports the policy of the Coroners and Justice Act 2009, whereby the Chief Coroner and the MoJ are seeking fewer coroner areas with more whole time Coroners covering larger geographical areas.

- **Have you had previous contact with MoJ on the proposed merger? Please provide details.**

Early discussions have taken place and the MoJ are aware of the work needed to consider the best approach for coronial services in Northern Lincolnshire and Humberside. Further communications will be required in order to ensure that political priorities are suitably reflected within the business case.

- **Are you happy for this business case in its entirety to be sent to all consultees? If not please provide details.**
- **Please list consultees for the consultation on the proposed merger – the organisation's name and the most appropriate email address - at Annex B. MoJ will remove email addresses from Annex B before sending the business case to consultees.**
- **Further information on the merger process is available in the form of Chief Coroner guidance at: <http://www.judiciary.gov.uk/wp-content/uploads/2014/05/guidance-14-mergers-of-coroner-areas.pdf>.**

Annex A

Resource implications of the merger

Table A: Details of current Senior Coroners and Area Coroner/s (if applicable) in each existing coroner area

| Position (e.g. Senior Coroner, Area Coroner) | First name | Surname | Current salary (including National Insurance and pension contributions) | Long Inquest Payments (if applicable) or other additional payments | Proposed salary in amalgamated area (if applicable) (including National Insurance and pension contributions) |
|---|-------------------------|----------------|--|---|---|
| Acting Senior Coroner LCC | Paul | Smith | 2021/22: £163, 282 | 2021/22: none 2019/20: none | £ 130,603 (recognises increased complexity and size of Area) |
| Area Coroner LCC | Vacant due to acting up | | 2021/22: £128,464 2019/20: £106,760 | 2020/21: none 2019/20: none | £128, 284 |
| Acting Senior Coroner (temporary wef 01/01/19) NELC | Mark | Kendall | 2021/22 88,571 2019/20 | 2020/21 2019/20 | N/A |

Table B: Office costs

| Category | Lincolnshire Area 21/22 | North Lincolnshire and Grimsby Area 20/21? | Total Cost 20/21 | Combined Area | Saving |
|--|---|---|---------------------|-------------------------------------|--------|
| Fees for Assistant Coroner(s) | £443 per sitting | £250 per day | | £443 | |
| Salary costs of Coroner's officer(s) <i>(including National Insurance and pension contributions)</i> | £ 450,296 | £141,200 | | £641,774 | |
| Salary costs of administrative staff <i>(including National Insurance and pension contributions)</i> | £56,988 per annum | £24,871 | | | |
| Staff accommodation | Registration Office, Lincoln and Endeavour Park, Boston | Cleethorpes Town Hall The Knoll Cleethorpes | | All combined Costs to be quantified | |
| Inquest accommodation | Use of various LCC buildings plus £25,965.88 - hire of premises | Cleethorpes Town Hall Scunthorpe Civic Centre Grimsby Town Hall | | All combined | |
| IT costs | £20,199.96 - not inclusive of general IT support. | £4,200 | | TBC | |

| Category | Lincolnshire Area 21/22 | North Lincolnshire and Grimsby Area 20/21? | Total Cost 20/21 | Combined Area | Saving |
|-----------------------------------|---|--|---------------------|--|--------|
| Post mortem/Pathologist costs etc | £1,084,179.71 includes all costs relating to PMs, toxicology, histology and body removal | £282,600 | | TBC | |
| Other costs? | | £82,500 Service support and Accommodation charge | | To quantify costs for postage printing telephone s travel and mileage etc. | |

List of consultees

[Please include:

- *All effected Senior Coroners, Area Coroners and Assistant Coroners in the areas in question;*
- *relevant local authority contacts from all neighbouring coroner areas (MoJ can assist with this if necessary);*
- *all MP's with constituencies within the effected coroner areas;*
- *pathologist contacts;*
- *representatives of local funeral directors within the effected coroner areas;*
- *representatives from hospitals and/or prisons within the area;*
- *the Chief Coroner (MoJ will have the relevant contact details)*
- *local police contacts(MoJ can assist with this if necessary and will include a national ACPO contact as standard))*

This list is still in development

Appendix 1 –Merged Area Map



APPENDIX 2- Structure Charts

| NE Lincs & Grimsby | Lincolnshire | Proposed Greater Lincolnshire |
|--|---------------------------------------|--------------------------------------|
| 1 x Acting Senior Coroner PT 0.5fte | 1 x Senior Coroner | 1 x Senior Coroner |
| | 1 x Area Coroner | 1 x Area Coroner |
| 2 x Assistant Coroner 12 days pa (1 vacancv) | 4 x Assistant Coroners (1 vacancy) | 6 x Assistant Coroners |
| | 1 x Coroners Manager | 1 x Coroners Manager |
| | | 1 x Senior Coroners Officer |
| 3.05 fte Coroners Officers | 7.5 fte Coroners Officers | 9.5 fte Coroners Officers |
| | 0.8 fte Coroners Development Officer | 0.8 fte Coroners Development Officer |
| 1 Coroners Administrator | 4 x Business Support | 5 x Business Support |

Appendix 3 – Performance Statistics –

| Coroner Statistics | 2016 | | 2017 | | 2018 | | 2019 | | 2020 | |
|--|--------|-----|--------|-----|--------|-----|--------|-----|--------|-----|
| | Number | % | Number | % | Number | % | Number | % | Number | % |
| <u>No of Deaths reported</u> | | | | | | | | | | |
| Lincolnshire | 3615 | | 3389 | | 3217 | | 3242 | | 3272 | |
| Lincolnshire and Grimsby | 1809 | | 1759 | | 1833 | | 1741 | | 1102 | |
| <u>No of Post Mortem investigations/percentage compared to deaths reported</u> | | | | | | | | | | |
| Lincolnshire | 1329 | 37% | 1293 | 38% | 1253 | 39% | 1292 | 40% | 1279 | 39% |
| Lincolnshire and Grimsby | 383 | 21% | 367 | 21% | 404 | 22% | 422 | 24% | 425 | 39% |
| <u>No. of inquests opened</u> | | | | | | | | | | |
| Lincolnshire | 398 | 11% | 347 | 10% | 364 | 11% | 305 | 9% | 416 | 13% |
| Lincolnshire and Grimsby | 205 | 11% | 165 | 9% | 141 | 8% | 114 | 6% | 140 | 13% |
| <u>Average time taken for inquests (weeks)</u> | | | | | | | | | | |
| Lincolnshire | 37.1 | | 45 | | 45 | | 35 | | 37.5 | |
| Lincolnshire and Grimsby | 22 | | 31 | | 38 | | 41 | | ? | |

(Source MHCLG)

| Registration Statistics | | | | |
|---|---------|---------|---------|---------|
| Timelessness of death registration following a post mortem (completed within 7 days of the death) | 2016/17 | 2017/18 | 2018/19 | 2019/20 |
| Lincolnshire | % | % | 61% | 67% |
| NE Lincolnshire | 68% | 67% | 50% | 31% |
| N Lincolnshire | 70% | 63% | 45% | 31% |

(Source GRO)