

REPORT TO: Health Policy and Performance Board
DATE: 7 January 2014
REPORTING OFFICER: Strategic Director - Communities
PORTFOLIO: Health and Wellbeing
SUBJECT: Joint Health Scrutiny
WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To present the Board with a draft protocol for the establishment of Joint Health Scrutiny arrangements across Cheshire and Merseyside.

2.0 RECOMMENDATION: That the Board:

- i) **Note the contents of the report and associated appendices; and**
- ii) **Review and comment on the draft protocol attached at Appendix 2.**

3.0 SUPPORTING INFORMATION

3.1 A joint Health Scrutiny Officer's meeting took place in September 2013 which focused on the requirements under the new Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (summary attached at **Appendix 1**), to form joint scrutiny committees where there is a substantial development/variation proposal which is to impact on more than one Local Authority area and how as a Cheshire and Merseyside region we should respond to this requirement.

3.2 Discussions at the meeting centred on the feasibility of developing a Cheshire and Merseyside regional protocol for dealing with joint scrutiny committees. Issues initially raised included Local Authorities experiences of previous joint scrutiny committees e.g. Vascular Services, communication issues, who would lead and support on joint scrutiny arrangements, potential barriers such as appropriate number of representatives, level of commitment from Local Authorities, option for Local Authorities to 'opt out' of a joint scrutiny if they decided that a proposal was not a substantial development/variation etc.

3.3 Besides the issues outlined above, generally officers present were receptive to the concept of having a workable region wide protocol.

3.4 Taking the learning from recent joint scrutiny committees and information from example protocols already available, Knowsley agreed to take the lead/facilitate on the development of the protocol.

3.5 The draft protocol was sent through to each of the 9 Local Authorities that this arrangement would cover at the end of October for comments back by 22nd November.

3.6 The Chair and Vice Chair of the Health Policy & Performance Board meet with a small group of officers to review the draft protocol with a view to returning comments.

Comments made included :-

- Page 3 – Footnote; The NHS Commissioning Board no longer exists, it should be NHS England.
- Page 6 – Membership; Members chose **OPTION 1** with the following amendments:-
 - Only 1 nominated elected member or nominated substitute from each participating authority, whether it be 2 or 9 local authorities.; and
 - Include the quorate in the protocol;
- Page 5 – Paragraph 6.5.2 – to include ‘officer support’. It was highlighted that after the experience of a joint committee to look at vascular support, it was felt that the Authority would like officer support at the meetings. Due to the complexity of the issue and there being numerous authorities involved, there was a considerable delay in receiving the minutes etc. and it made it very difficult to keep everyone up to date on the progress. This would enable Health Board’s and Members to be updated quickly and on a regular basis.

3.7 At the time of writing this report, we are awaiting feedback from Knowsley as to comments returned by the other Local Authorities and how potentially the draft will change as a result and timescales for this; further information may be available at the Board meeting and if so will be shared.

4.0 **POLICY IMPLICATIONS**

4.1 The aim of the joint protocol is that it would be used for all future joint scrutiny committees and would help support a more structured approach to joint scrutiny being undertaken.

4.2 Each Local Authority has been asked to consider the draft protocol via their appropriate political channels/structure with a view to developing it further and getting it formally agreed across the Cheshire and Merseyside region.

4.3 It is hoped that the protocol can be agreed in advance of when there will be a requirement to establish another joint scrutiny committee. In terms of the current regional context this is likely to be when the cancer services proposals are made available and there will be a need for formal consultation to take place.

5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 None identified at this stage.

6.0 **IMPLICATIONS FOR THE COUNCIL’S PRIORITIES**

6.1 **Children & Young People in Halton**
None identified at this stage.

6.2 **Employment, Learning & Skills in Halton**
None identified at this stage.

6.3 **A Healthy Halton**
The remit of the Health Policy and Performance Board is directly linked to this priority.

6.4 **A Safer Halton**

None identified at this stage.

6.5 **Halton's Urban Renewal**
None identified at this stage.

7.0 **RISK ANALYSIS**

7.1 Not having a joint protocol agreed could lead to a disjointed approach to joint scrutiny committees being undertaken in the future.

7.2 Whilst each Local Authority must decide individually whether a proposal represents a substantial development/variation, it is only the **statutory joint health scrutiny committee** which can formally comment on the proposals if more than one authority agrees that the proposed change is "substantial". Determining that a proposal is not a substantial development/variation removes the ability of an individual local authority to comment formally on the proposal and exercise other powers, such as the power to refer to the Secretary of State.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 None identified at this stage.

9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

Document	Place of Inspection	Contact Officer
The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013	Municipal Buildings	Lynn Derbyshire Lynn.Derbyshire@halton.gov.uk