

## **Health and Adult Social Care Scrutiny Board**

**20 June, 2017**

### **Re-Establishment of Joint Health Scrutiny Arrangements with Wolverhampton City Council**

#### **1. Summary Statement**

- 1.1 Within its terms of reference the Scrutiny Board has the powers of overview and scrutiny in relation to all functions of the Council as contained in the National Health Service Act 2006 and regulations and directions made under that act. It also has the powers of overview and scrutiny in relation to functions of the council as contained in regulations and directions made under the Health and Social Care Act 2001 and the Health and Adult Social Care Act 2012.
- 1.2 Joint health scrutiny arrangements with Wolverhampton City Council have been re-established annually since the 2004/05 Municipal Year. Arrangements for last year involved five representatives from each authority.
- 1.3 The joint scrutiny arrangements allow for both informal working arrangements and the establishment of a formal Committee. This enables Wolverhampton and Sandwell to jointly review and scrutinise matters relating to the planning, provision and operation of health services in the area affecting both local authorities.
- 1.5 The Health and Adult Social Care Scrutiny Board is requested to consider the appointment of five members for joint health scrutiny working with Wolverhampton City Council during 2017/18, both on an informal basis and as a joint committee, if required.

Further details are attached for information.

## **2. Recommendation**

That arrangements for joint health scrutiny working with City of Wolverhampton Council be re-established for 2017/2018 and that the Board appoints five members to the Joint Health Overview and Scrutiny Committee.

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### **3. Strategic Resource Implications**

The Guidance on Overview and Scrutiny of Health issued by the Department of Health advocates that local authorities participating in joint committees should share the cost and resource implications of working together. The work generated by joint working is absorbed within existing resources.

### **4. Legal and Statutory Implications**

The purpose of the arrangements proposed in this report is to ensure that the Council efficiently executes its responsibilities with regard to scrutiny of the health service as contained within:

The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002  
Directions to Local Authorities (Overview and Scrutiny Committees Health Scrutiny Functions) dated 17 July 2003  
The Guidance on Overview and Scrutiny of Health issued by the Department of Health dated July 2003  
The National Health Service Act 2006 and regulations and directions made under that Act  
The Health and Social Care Act 2012.

### **5. Implications for the Council's Scorecard Priorities**

The Board works across health and adult social care so is able to contribute to a wide variety of scorecard priorities. In particular the following:-

Sick people need to reach GP and other health services quickly. We will join up NHS health and council social services so that people benefit from the best possible care.

We will continue to give choice and control over their lives to those with long-term disabling conditions, the frail and elderly and people with mental health needs. This means:

- encouraging them to use services so they can live independently (rather than go into hospital or a care home);
- supporting people who need to remain in their homes; and
- 'personal care budgets' so people can buy services they need to live as they choose.

We value carers' contributions to helping people maintain health and independence. We will support carers so they remain in good health themselves and can get useful information and advice.

## **6. Background Details**

- 6.1 NHS bodies have responsibilities to overview and scrutiny committees to consult on matters of substantial variation to services, this is in addition to the duty under S11 of the Health and Social Care Act 2001 to involve and consult patients and public. Experience has shown that there is a need for authorities to be ready to respond quickly to such consultations.

For this reason, the Council agreed to delegate its functions with regard to overview and scrutiny under the NHS Act 2006, the Health and Social Care Act 2001 and the regulations and directions arising therefrom to the Health and Adult Social Care Scrutiny Board.

- 6.2 Under health scrutiny legislation, local authorities must form joint committees to respond to NHS consultations on proposals for substantial variations in NHS services that may affect residents of more than one local authority area. In addition, local authorities may choose to join together proactively to form joint committees to consider health issues that cross boundaries. Where a joint committee has been established to consider a substantial variation, only that joint committee may make comments on the proposal and any associated consultation exercise. The joint committee cannot make recommendations to its respective authorities for consideration and approval.
- 6.3 In accordance with the provisions of the Local Government Act 2000 and specific guidance from the Secretary of State, the political balance requirement must be applied in respect of each joint committee which may be established. However, it is possible for political proportionality to be waived subject to the agreement of all parties involved.

### **Source Documents**

The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 (S.I.2002 No. 3048);

Directions to Local Authorities (Overview and Scrutiny Committees Health Scrutiny Functions) dated 17 July, 2003;

The Guidance on Overview and Scrutiny of Health issued by the Department of Health dated July,2003;

Council Minute Nos. 23/04 (6 January, 2004) & 63/10 (18 May 2010);

National Health Service Act 2006;

Health and Social Care Act 2012.