NORTH EAST REGION JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Responsible Cabinet Member - Councillor Stephen Harker, Health and Leisure Portfolio

Responsible Director - Paul Wildsmith, Director of Corporate Services

SUMMARY REPORT

Purpose of the Report

1. To consider the inclusion of the Terms of Reference and Protocols for the Joint Health Overview and Scrutiny Committee for the North East, in the Council's Constitution.

Summary

- 2. A Joint Health Overview and Scrutiny Committee for the North East has been established in accordance with Sections 244 and 245 of the National Health Service (NHS) Act 2006, and relevant regulations and guidance, comprising the Health Overview and Scrutiny Committees of this Council, Durham County Council, Gateshead Council, Hartlepool Borough Council, Middlesbrough Council, Newcastle upon Tyne City Council, North Tyneside Council, Northumberland County Council, Redcar and Cleveland Borough Council (the constituent authorities), to scrutinise issues around planning, provision and operation of health services in and across the North-East Region, comprising for these purposes the areas covered by all the constituent authorities.
- 3. The Terms of Reference and Protocols for the Joint Committee are attached at Appendix 1 to this report.

Recommendation

- 4. It is recommended that the:
 - (a) the establishment of the North East Joint Health Overview and Scrutiny Committee, be noted;
 - (b) the Terms of Reference and Protocols for the Joint Committee, as appended to the submitted report, be endorsed, and included within the Council's Constitution; and
 - (c) This Council's representative on the North East Joint Health Scrutiny Committee be the Chair of the Health and Well-Being Scrutiny Committee.

Reasons

- 5. The recommendations are supported by the following reasons:
 - (a) To inform of this Council's involvement in the Joint Committee.
 - (b) To endorse the Terms or Reference and Protocols for the Joint Committee and to enable the Constitution to be updated accordingly.
 - (c) To ensure that this Council is represented on the Joint Committee.

Paul Wildsmith Director of Corporate Services

Background Papers

No Background papers were used in the preparation of this report.

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S17 Crime and Disorder	There are no specific implications for Crime and
	Disorder
Health and Well Being	The establishment of the Committee seeks to
	develop understanding of the health of the North
	East region's population and contribute to the
	development of policy to improve health and reduce
	health inequalities.
Sustainability	There are no specific implications for Sustainability
Diversity	There are no specific implications for Diversity
Wards Affected	All Wards are affected equally
Groups Affected	All Groups are affected equally
Budget and Policy Framework	This does not represent a change to the Budget and
	Policy Framework
Key Decision	This is not an Executive Decision
Urgent Decision	This is not an Urgent Decision
One Darlington: Perfectly Placed	The establishment of the Committee will contribute
	towards the aims of the Healthy Darlington Theme
	contained within the Community Strategy.
Efficiency	There are no specific implications for efficiency.

MAIN REPORT

Information and Analysis

- 6. A Joint Health Overview and Scrutiny Committee for the North East has been established in accordance with Sections 244 and 245 of the National Health Service (NHS) Act 2006, and relevant regulations and guidance, comprising the Health Overview and Scrutiny Committees of this Council, Durham County Council, Gateshead Council, Hartlepool Borough Council, Middlesbrough Council, Newcastle upon Tyne City Council, North Tyneside Council, Northumberland County Council, Redcar and Cleveland Borough Council, South Tyneside Council, Stockton-on-Tees Borough Council and Sunderland City Council (the constituent authorities), to scrutinise issues around planning, provision and operation of health services in and across the North-East Region, comprising for these purposes the areas covered by all the constituent authorities.
- 7. The Terms of Reference and Protocols for the Joint Committee are attached at Appendix 1 to this report.
- 8. The purpose of establishing the Joint Health Committee is to enable the constituent authorities to scrutinise:-
 - (a) NHS organisations that cover, commission or provide services across the North East region, including and not limited to, for example, NHS North East, local primary care trusts, foundation trusts, acute trusts, mental health trusts and specialised commissioning groups;
 - (b) services commissioned and/or provided to patients living and working across the North East region; and
 - (c) specific health issues that span across the North East region.
- 9. In scrutinising the areas as detailed in paragraph 8 above, the Joint Committee will seek to:-
 - (a) develop an understanding of the health of the North East region's population and contribute to the development of policy to improve health and reduce health inequalities;
 - (b) ensure, wherever possible, the needs of local people are considered as an integral part of the commissioning and delivery of health services;
 - (c) undertake all the necessary functions of health scrutiny in accordance with the NHS Act 2006, regulations and guidance relating to reviewing and scrutinising health service matters;
 - (d) review proposals for consideration or items relating to substantial developments / substantial variations to services provided across the North East region by NHS organisations, including:-
 - (i) changes in accessibility of services;
 - (ii) impact of proposals on the wider community; and
 - (iii) patients affected; and
 - (e) examine the social, environmental and economic well-being responsibilities of local authorities and other organisations and agencies within the remit of the health scrutiny role.

Membership

- 10. The Joint Committee will be made up of twelve Health Overview and Scrutiny Committee Members comprising one Member from each of the constituent authorities. Members of the constituent local authorities who are Non-Executive Directors of the NHS cannot be Members of the Joint Committee.
- 11. A constituent authority may appoint a substitute to attend in the place of the named Member on the Joint Committee. The substitute shall have voting rights in place of the absent Member.
- 12. The Chair of the Joint Committee will be drawn from the membership of the Joint Committee, and serve for a period of twelve months. A Chair may not serve for two consecutive twelve-month periods.

Outcome of Consultation

- 13. The Terms of Reference and Protocols of the Joint Committee have been considered and endorsed by the Health and Well-Being Scrutiny Committee at its meeting held on 13th April, 2010.
- 14. The Terms of Reference and Protocols of the Joint Committee have also been considered, or are in the process of being considered, by each of the constituent authorities.