



SCRUTINY: HEALTH AND SOCIAL CARE REVIEW GROUP

(DRAFT) TERMS OF REFERENCE 2012-13

1. INTRODUCTION

- 1.1 Overview and scrutiny powers give non-Executive Councillors the ability to:
- Examine how local health and social care services are provided and developed for their community;
 - Consider and voice the views of the community, particularly people who use those services; and
 - Require local health and social care service providers, including the Council, to listen and respond to recommendations for improvements, as appropriate.
- 1.1 The functions of health overview and scrutiny are independent and distinct from those of the Executive of the Council, discharged by the Overview and Scrutiny Board (OSB), through its Health and Social Care Review Group (HSCRG).
- 1.2 Responsibilities of the HSCRG include:
- Overseeing all health and social care services in Luton and holding local decision-makers to account for commissioning decisions affecting people who use those services in Luton;
 - Reviewing/ Scrutinising health and social care priority topics;
 - Reviewing and responding to local consultations by NHS bodies or health service providers on changes to services affecting people who use those services;
 - Contributing to joint health scrutiny committees, reviewing consultations by NHS bodies or health service providers on cross-border changes to services, affecting people who use those services in the relevant areas.

2. OBJECTIVE

- 2.1 To help ensure that the development and provision of health and social care services in Luton are in the best interest of the area and people who use those services.

3. METHODOLOGY

- 3.1 The HSCRG will focus on three main activity areas:
- a. **Overview:**
- Keeping an awareness of the provision of health and social care services, including key developments/ variations;
 - Holding to account decision-makers about key decisions relative to health and social care services, affecting the area and people who use those services;
 - Making comments/ recommendations for improvement as appropriate.
- b. **Review and Scrutiny:**
- Identifying and undertaking time-limited reviews into health or social care priority topics;

- Identifying and scrutinising health or social care related incidents, giving cause for public concerns;
- Making comments/ recommendations as appropriate.

c. Consultation:

- Dealing with consultations by NHS bodies or health service providers about substantial developments or variations of health services in the area;
- Advising NHS bodies or health service providers on the developments or variations of services, not considered substantial;
- Representing Luton on any regional/ sub-regional Joint Health Overview and Scrutiny Committee, dealing with cross-border consultations;
- Making comments/ recommendations, and if not satisfied with the consultation and/ or the decision of the NHS body or health service provider, making a reference to the Secretary of State, in line with current process.

3.2 The HSCRG's method of working will involve:

- Developing constructive working relationships with the statutory Health and Well-Being Board (HWBB), commissioners, including the Luton Clinical Commissioning Group (CCG) and NHS bodies and health service providers;
- Calling on senior representatives of the HWBB, Luton CCG, NHS bodies and health service providers, providers of social care services and expert witnesses, as appropriate, to meetings to provide information/ evidence and respond to issues of concerns;
- Maintaining a close working relationship with the Care Quality Commission (CQC) and with the Local HealthWatch (currently LINK), including inviting a representative of Local Healthwatch to serve as a co-optee on the HSCRG.

4. GUIDING PRINCIPLES

4.1 Members of the HSCRG will discharge their roles and responsibilities, against the following principles:

- Promoting equality, inclusion, and community cohesion;
- Treating witnesses, members of the public, officers and partners with courtesy and respect;
- Being objective, leaving out partisan party politics;
- Engaging with and putting the needs of the community first;
- Making evidence-based recommendations on the basis of consensus, to achieve acceptable resolutions.

5. EVIDENCE GATHERING, ANALYSIS AND REPORTING

5.1 The Democracy and Scrutiny Officer (DSO) will develop and maintain a work programme to guide the work of the HSCRG.

5.2 For any time-limited topical review, the DSO will arrange the preparation of a project scope and a project plan for the HSCRG, to co-ordinate evidence gathering and the reporting process.

- 5.3 Evidence gathering, particularly for topical reviews, will be taken at HSCRG meetings, personal interviews, site visits and community groups meetings as follows:
- From senior representatives of the HWBB, NHS bodies, and health and social care service providers;
 - From other experts/ stakeholders, including members of the public and community/ special interests groups, as required.
- 5.4 Evidence will also be drawn from relevant documents, to include:
- Strategy documents and plans and Performance Reports;
 - Equality Impact Assessments/ Integrated Impact Assessments;
 - Results of user experience/ satisfaction surveys;
 - NHS Reform proposals and legislation;
 - Reports on the outcome of consultation and public engagement exercises;
 - Reports of similar reviews from other authorities;
 - Good practice guidance, e.g. from the Centre for Public Scrutiny, Local Government Association.
- 5.5 The HSCRG will determine the types and levels of public engagement work required, in liaison with the Consultation & Community Engagement Team. Evidence will be taken from the results of consultations already undertaken by the service, and from any supplementary work commissioned by the HSCRG.
- 5.6 The HSCRG will approve press releases, in liaison with the Press & Public Relations Team, to raise awareness and appeal for evidence/ views from the public and people who use services, to inform the review.
- 5.7 Dates of meetings are as follows, but may alter to meet emerging needs:
- | Date | Time | Venue |
|-------------------------------------|-------------|------------------|
| • Wed, 20 th June 2012 | 6.00 pm | Committee Room 4 |
| • Thurs, 2 nd Aug 2012 | 6.00 pm | Committee Room 3 |
| • Thurs, 13 th Sept 2012 | 6.00 pm | Committee Room 2 |
| • Wed, 10 th Oct 2012 | 6.00 pm | Committee Room 3 |
| • Tues, 20 th Nov 2012 | 6.00 pm | Committee Room 2 |
| • Thurs, 10 th Jan 2013 | 6.00 pm | Committee Room 3 |
| • Thurs, 7 th Mar 2013 | 6.00 pm | Committee Room 3 |
| • Thurs, 4 th Apr 2013 | 6.00 pm | Committee Room 3 |
- 5.8 The Democracy and Scrutiny Officer will collate, co-ordinate and help analyse evidence, formulate conclusions/ recommendations and draft reports for consideration by the HSCRG.
- 5.9 The HSCRG will make appropriate evidence-based comments/ recommendations by consensus on matters scrutinised at any time and following time-limited topical reviews.
- 5.10 The HSCRG's final report, following a time-limited topical review will be subject of a Scrutiny Consistency Panel review (as for other Task & Finish Group reviews), and OSB approval prior to submission to the Executive or NHS bodies/ health service provider, unless otherwise authorised by the OSB.

- 5.11 The Democracy and Scrutiny Officer will be provided delegated responsibility for finishing the HSCRG's final report, after consultation with the Chair of the HSCRG.

6. MEMBERSHIP AND OFFICER SUPPORT

- 6.1 The following Members were appointed to the HSCRG for 2012/13:

- | | |
|---------------------------|-------------------------------|
| • Councillor Campbell | • Councillor T. Malik |
| • Councillor Jenny Davies | • Councillor Moles |
| • Councillor Foord | • Councillor Zia |
| • Councillor Aslam Khan | • Norris Bullock (Luton LINK) |

- 6.2 HSCRG will elect a Chair at its first meeting to serve for the duration of the municipal year.

- 6.3 A Member, who is unable to attend a scheduled meeting, may nominate another eligible Member to attend, by notifying the Democracy and Scrutiny Team no later than the start of the meeting. The substituted Member will cease to be a HSCRG Member for the duration of the meeting, in favour of the substitute Member.

- 6.4 Officer Support will be provided as follows:
- Project management/ co-ordination - Democracy and Scrutiny
 - Public Involvement - Consultation and Community Engagement
 - Public Relations - Press & Public Relations
 - Expert advice – Public Health, Housing & Community Living, and others to be determined, as necessary

7. REVIEW OF TERMS OF REFERENCE

- 7.1 This Terms of Reference and any subsequent amendments are subject of approval by the OSB Chair and Vice-Chairs.