

Health Scrutiny in Local Authorities

Briefing Note

November 2014

How health scrutiny works for local councils.

Health scrutiny is seen as the fundamental way by which democratically elected local councillors are able to voice the views of their constituents, and hold relevant NHS bodies and health service providers to account. This briefing explains how it works and how VCSE organisations can work with Health Scrutiny.

Health Scrutiny is a way for local councils to:

- Reflect the views and aspirations of local communities to ensure that all sections of local communities have equal access to health services and an equal chance of a positive outcome.
- Ensure that local communities are engaged and listened to in the development of health services appropriate to their needs
- Review the nature, impact and effectiveness of existing health policy.
- Contribute to the development of new policy.
- Act as a critical friend to those making decisions whilst holding decision makers to account for their actions.
- Challenge performance to ensure that health services are meeting the needs and are in the best interests of local communities.
- Ensure that any proposals for substantial changes to health services are in the best interests of local people.

Background

Health Scrutiny (which was first introduced with the Health and Social Care Act 2001) changed in April 2013 when new regulations were introduced. These changes reflected the introduction at the same time of Health and Wellbeing Boards and local Healthwatch, which have different powers and roles but are expected to work together when appropriate. Health Scrutiny also sits alongside the work of the Care Quality Commission in reviewing local health and social care services.

Every Council which has a Social Services function is required to undertake Health Scrutiny, through a Health Scrutiny Body. This applies to all 12 Councils in the North East. Health scrutiny is seen as the fundamental way by which democratically elected local councillors are able to voice the views of their constituents, and hold relevant NHS bodies and health service providers to account. This includes scrutiny of the Council's own Public Health functions and any other health services the council provides.

Councils do not now have to have a separate Health Scrutiny Committee although many still do. Middlesbrough has kept a dedicated Health Scrutiny Committee. Northumberland has a combined committee looking at Care and Well-being. Hartlepool scrutinises health as part of an over-arching Hartlepool Audit and Governance Committee.

Whatever model is used, health scrutiny is carried out by elected councillors who are not members of the Council's Cabinet or Executive. Membership of a Scrutiny Body has to be politically balanced, reflecting the political make-up of the council. The council can co-opt other people, including representatives of voluntary organisations, to sit on a Health Scrutiny Body but they usually wouldn't have a vote. The Council can also delegate scrutiny powers to a public committee.

Joint working between Councils

Councils can join together when an issue affects more than one council area. Middlesbrough and Redcar and Cleveland councils have a South Tees Health Scrutiny Joint Committee which meets regularly. There is a standing Tees Valley Health Scrutiny Joint Committee which meets to discuss health issues across the five Tees Valley councils, Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton on Tees.

All 12 North East Scrutiny Committees worked together on a major project reviewing the health inequalities suffered by ex-service people and their families.

Health Scrutiny Powers

Under the new Health Scrutiny regulations Health Scrutiny Bodies can:

1. Review and scrutinise any matter relating to the planning, provision and operation of local health services including:
 - a. health and public health services commissioned by the Clinical Commissioning Group(s), NHS England and the local authority;
 - b. health and public health services provided by NHS bodies **and any other relevant health service providers**, including those from the private and voluntary sectors commissioned to provide NHS or public health services by NHS England, CCGs or local authorities;
 - c. all GP practices and other providers of primary care services including pharmacists, opticians and dentists, who are now classed as relevant health service providers.

- d. health and social care policies arising from the Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies
2. Make reports and recommendations to NHS bodies, relevant health service providers and commissioners, and the local authority on any matter it has reviewed and scrutinised. Relevant NHS bodies and health service providers to which a health scrutiny report or a recommendation has been made must by law, if a response is requested, respond within 28 days of the request.
3. Comment on consultations by NHS bodies and relevant health service providers about proposals for a substantial variation or development to local health services.
4. Make recommendations to the full Council on issues related to proposed service changes, for Council referral to the Secretary of State, where it considers that there has been inadequate consultation on a proposed change/development in health services or where the proposal is not in the interests of the health service in the area.

Any relevant NHS body or health service provider proposing a substantial developments or variations has to provide the Health Scrutiny Body with a date by which they expect a response. These dates must also be published. This is so that local patients and communities are aware of the timescales that are being followed and can comment on the process and recommendations.

The Health Scrutiny Body can:

- Request information from NHS bodies and all relevant health service providers about the planning, provision and operation of health services in the city.
- Request the attendance of NHS staff and employees of relevant health service providers at public health scrutiny meetings, in order to answer questions the body may have as it carries out its scrutiny function.
- Consider health decisions made by council, which can be "called in" for scrutiny.
- Work pro-actively, helping the Council to

understand local communities and tackle inequalities. Some argue that the Scrutiny Body offers the best place for a more reflective look at how local health and care services are provided and how they might be developed in the future.

How can the VCSE work with Health Scrutiny?

Scrutiny aims to make decision-making processes more transparent, accountable and inclusive and to improve services for people by being responsive to their needs. In the light of the Francis Report into Stafford Hospital, local authorities will need to satisfy themselves that they keep open effective channels by which voluntary organisations and the public can communicate concerns about the quality of NHS and public health services to health scrutiny bodies.

The Scrutiny Body should meet in public so that local people have the opportunity to see and hear proceedings, in line with the new transparency measure in the Local Audit and Accountability Act 2014. People should be allowed to attend and use any communication methods such as filming and tweeting to report the proceedings. **The Scrutiny Body should be open to contributions from attendees**, either by prior arrangement or perhaps in a specific part of the meeting.

Any voluntary organisation or an individual can submit a request for a Scrutiny Review to be undertaken by the Health Scrutiny Body. The issues you believe should be investigated must affect residents in the area covered by the Council.

Ask your local Healthwatch to take an issue up. The new Regulations set up formal relationships between local Healthwatch and local authority health scrutiny, to ensure that the new system takes account of involvement and engagement with patients and the public.

Example: Healthwatch in North Tyneside have met with carers and children with ADHD and many issues were raised in relation to children getting statements, referred to CAMHS, school attendance

and so on. The Scrutiny Body is looking to include this in its work plan.

Offer to support the work of the Scrutiny Body. Find out which council officer supports the Scrutiny Body. Let them know how you can help an enquiry and let them know the areas and issues that you are interested in. Suggest other ways that the Scrutiny body might work with you, perhaps through commissioning a piece of work or research.

Case Study

Sunderland's Citizen Jury approach to scrutiny

In 2005 the then Sunderland Social Services and Health Review Committee decided to adopt a Citizens Jury Approach to a review of Community Mental Health services for adults of working age in the City. Part 1 saw the Committee receive evidence over a full day from a range of witnesses to form draft recommendations. Witnesses included health representatives and representatives from voluntary organisations. The Committee also received written evidence and reports.

Part 2 of the review saw the Committees findings put to community scrutiny at a focussed event at the Stadium of Light. Invitations were sent to in excess of 200 individuals, organisations, carers, service users and front line staff. Over 60 people turned up and participants were able to give collective thought and shared feedback on the Committees recommendations. This was all collected together in a final collective scrutiny report which was highly praised at the time for the range of community involvement.

The Citizen Jury approach was adopted for a range of subsequent scrutiny reviews, all available on the current committee's website.

<http://www.sunderland.gov.uk/index.aspx?articleid=2833>

You can also ask a local Councillor to refer a matter to the Health Scrutiny Body through the **Councillor Call for Action**. Councillor Call for Action (CCfA) is a process designed to help councillors resolve issues and problems on behalf of residents. A

councillor would normally have to show the Scrutiny Body that they had first tried to resolve the issue before bringing it to the Scrutiny Body.

Health improvement, prevention and tackling health inequalities

Health Scrutiny isn't just about what may have gone wrong with a service. Since the creation of the health scrutiny functions in 2001, many scrutiny bodies have prioritised issues of health improvement, prevention and tackling health inequalities as areas where they can add value through their work.

These are all areas where the VCSE excels, working on the wider social determinants of health and health inequalities and focusing on cross-cutting issues.

Health Scrutiny can offer a positive route to improving health and wellbeing in your area and it's well worth getting to know your local Scrutiny Body.

Useful publications and resources

You can find links to all the North East Health Scrutiny Bodies in the Who's Who in Health and Wellbeing section of the VONNE website.

Each Council's website will tell you how often the Scrutiny Body meets and, by checking agendas and previous minutes you can see the issues they are currently looking at.

The current published advice (June 2014) to Local Authorities on scrutinising health services is available here:

<https://www.gov.uk/government/publications/advice-to-local-authorities-on-scrutinising-health-services>

The Centre for Public Scrutiny has published a very useful report 'Local Healthwatch, health and wellbeing boards and health scrutiny - Roles, relationships and adding value' which is available on their website here:

<http://cfps.org.uk/publications?item=7195>

North East Health Scrutiny Bodies

This is a list of the names of the Bodies that scrutinise health in each local authority in the North East.

There is a standing Tees Valley Health Scrutiny Joint Committee which meets to discuss issues across the Tees Valley councils, Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton on Tees.

- Redcar and Cleveland People Services Scrutiny & Improvement Committee
- Middlesbrough Health Scrutiny Panel
- South Tees Health Scrutiny Joint Committee for Middlesbrough and Redcar and Cleveland
- Hartlepool Audit and Governance Committee
- Darlington Health and Partnerships Scrutiny Committee
- Stockton Adult Services and Health Select Committee
- Durham Adults, Wellbeing and Health Scrutiny Committee
- Sunderland - Public Health, Wellness and Culture Scrutiny Panel
- Sunderland - Health, Housing and Adult Services Scrutiny Panel
- South Tyneside Overview and Scrutiny Coordinating and Call-in Committee
- Gateshead Care, Health and Wellbeing Overview and Scrutiny Committee
- Newcastle Health Scrutiny Committee
- North Tyneside Adult Social Care, Health and Wellbeing Sub-committee
- Northumberland Care and Well-being Overview and Scrutiny Committee

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