



# INNER NORTH EAST LONDON (INEL) JOINT HEALTH and OVERVIEW SCRUTINY COMMITTEE (JHOSC)

## TERMS OF REFERENCE

(updated 10 September 2019)

### INTRODUCTION

1. Regulation 30 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (Reg 30) ensure that there are sufficient scrutiny procedures and policies in place to cover the cross-Borough wide NHS Sustainability and Transformation Plan (STP).

### ROLE

2. Consider and respond to any health matter which:
  - 2.1. Impacts on two or more participating local authorities or on the sub region as a whole, and for which a response has been requested by NHS organisations under Section 244 of the NHS Act 2006; and
  - 2.2. All participating local authorities agree to consider as an INEL JHOSC
3. To collectively review and scrutinise any proposals within the STP that are a substantial development / variation of the NHS or the substantial development / variation of such service where more than one local authority is consulted by the relevant NHS body pursuant to Reg 30;
4. To collectively consider whether a specific proposal within the STP that's is not a substantial development or variation is only relevant for one authority and therefore should be referred to that local authority's Health Scrutiny Committee for scrutiny;
5. In the event that a participating local authority considers that it may wish to consider a discretionary matter itself rather than have it dealt with by the joint committee it shall give notice to the other participating councils and the joint committee shall then not take any decision on the discretionary matter (*other than a decision which would not affect the council giving notice*) until after the next full Council meeting of the council giving notice in order that the council giving notice may have the opportunity to withdraw delegation of powers in respect of that discretionary matter;
6. To require the relevant local NHS body to provide information about the proposals under consideration and where appropriate to require the attendance of a representative of the NHS body to answer such questions as appear to it to be necessary for the discharge of its function;



7. Make reports or recommendations to the relevant health bodies as appropriate and/or the constituent authorities' respective Overview and Scrutiny Committees (OSC) or equivalent;
8. Each Council to retain the power of referral to the Secretary of State of any proposed "substantial variation" of service, so this power is not *solely* delegated to INEL JHOSC.
9. To review the procedural outcome of consultations referred to in any substantial development / variation, particularly the rationale behind contested proposals;
10. To undertake in-depth thematic studies in respect of services to which the NHS Trusts contribute and where a study is done on a Trust wide and cross borough basis;
11. To take account of relevant information available and in particular any relevant information provided by Healthwatch under their power of referral;
12. To maintain effective links with Healthwatch and other patient representative groups and give consideration to their input throughout the Scrutiny process;

## MEMBERSHIP

13. The INEL JHOSC will be a committee serviced by the participating local authorities on a two-yearly cycle – *the current local authority hosting the INEL JHOSC is the London Borough of Newham* in accordance with section 101(5) of the Local Government 1972;
14. The membership shall be made up of three members from each of the larger participating local authorities and one from the City of London Corporation; making a total of 13 members, with each council's membership being politically proportionate and with non-executive councillors making up the membership.
15. The membership to include one observer from the London Borough of Redbridge and other neighbouring local authorities with the agreement of the majority of INEL JHOSC members, put to a vote at meetings where necessary.
16. Substitutions will be accepted if a councillor is not able to attend a meeting of the INEL JHOSC and that councillor has informed the Chair and Scrutiny Officer at least five working days in advance of the meeting.
17. Guidance suggests that co-opting people is one method of ensuring involvement of key stakeholders with an interest in, or knowledge of, the issue being scrutinised. This is already a power of overview and scrutiny committees by virtue of the Local Government Act 2000. However, the Guidance also recommends other ways of involving stakeholders by, for example, giving evidence or by acting as advisers to the committee.
18. A Chair (from the host authority) will be appointed by INEL JHOSC at the first meeting.
19. A vice-Chair (from non host local authorities) will be appointment by INEL JHOSC at the first meeting. Where agreed, a second vice-Chair may also be nominated to ensure parity across the Membership.



## QUORUM

20. The quorum for meetings will be one member from four of the five authorities represented. During any meeting if the Chair counts the number of councillors present and declares there is not a quorum present, then the meeting will adjourn immediately. Remaining business will be considered at a time and date fixed by the Chair. If a date is not fixed, the remaining business will be considered at the next meeting.

## DECISION MAKING PROCESS

21. Decisions will be taken by consensus. Where it is not possible to reach a consensus, a decision will be reached by a simple majority of those members present at the meeting. Where there are equal votes the Chair will have the casting vote.

## REPORTING ARRANGEMENTS

22. Prior to the agenda for each meeting of INEL JHOSC being finalised officers will convene a planning / pre-meeting with the Chairs of the individual HOSC's or their nominee, along with key individuals presenting papers from the NHS and other informal briefings as considered appropriate;
23. In terms of the INEL JHOSC's conclusions and recommendations the Guidance says that one report has to be produced on behalf of INEL JHOSC if a report is required and sufficient information gathered to ensure a report. The final report shall reflect the views of all local authority committees involved in INEL JHOSC. it will aim to be a consensual report.
24. In the event there is a failure to agree a consensual report the report will record any minority report recommendations. At least nine members of INEL JHOSC must support the inclusion of any separate minority report in the committee's final report.
25. Any report produced by INEL JHOSC will be submitted to respective local authority's council meetings for information.
26. The NHS body or bodies receiving the report must respond in writing to any requests for responses to the report or recommendations, within 28 days (*calendar, not working*) of receipt of the request.
27. In the event that any local authority exercises its right to refer a substantial variation to the Secretary of State, it shall notify the other local authorities of the action it has taken and any subsequent responses.



## FREQUENCY AND ADMINISTRATION

28. INEL JHOSC to meet quarterly, with at least one meeting within a 12 month period aligned with ONEL JHOSC to consider issues that cover the STP footprint;
29. To constitute and meet as a Committee as and when participant boroughs agree to do so subject to the statutory public meeting notice period;
30. Meetings will usually be led by each authority rotating on a two-yearly basis with the Chair being a councillor from the current lead local authority;
31. The lead administrative and research support will be provided by the a Scrutiny Officer from the borough which holds the Chair with the assistance, as required, from the officers of the participating boroughs;
32. Meetings of INEL JHOSC will be rotated between participating authorities as agreed by INEL JHOSC. The host authority for each meeting of the INEL JHOSC will be responsible for arranging appropriate meeting rooms; ensuring that refreshments are available, providing spare copies of agenda papers on the day of the meeting; and producing minutes of the meeting within 10 working days;
33. Each authority will identify a key point of contact for all arrangements and Statutory Scrutiny Officers are at all times to be kept abreast of arrangements for INEL JHOSC;
34. If there is a specific reason, for example, if the issue to be discussed relates to a proposal specific to the locality of one Local Authority area the meeting venue can change to a more appropriate venue. The lead Local Authority would remain the same, even if the venue changes;
35. Any changes to the host authority must be agreed by the Committee;
36. Agenda and supporting papers to be circulated and made publicly available at least five working days before the meeting;
37. Actions to be circulated to those with actions as soon as possible after the meeting – no later than three working days following the meeting;
38. Meetings to be held in public, with specific time allocated for pre-submitted public questions;

## PETITIONS, STATEMENTS AND QUESTIONS

39. Members of the public and members of council, provided they give notice in writing or by electronic mail to the proper officer of the host authority (and include their name and address and details of the wording of the petition, and in the case of a statement or question a copy of the submission), by no later than 12 noon **ONE WORKING DAY BEFORE** the meeting, may present a petition, submit a statement or ask a question at meetings of INEL JHOSC.



40. The petition, statement or question must relate to the terms of reference and role and responsibility of the committee;
41. The total time allowed for dealing with petitions, statements and questions at each meeting is fifteen minutes;
42. Statements and written questions, provided they are of reasonable length, will be copied and circulated to all members and will be made available to the public at the meeting;
43. There will be no debate in relation to any petitions, statements and questions raised at the meeting but the committee will resolve;
  - 43.1. “that the petition / statement be noted”; or
  - 43.2. if the content relates to a matter on the agenda for the meeting: “that the contents of the petition / statement be considered when the item is debated”;

## **RESPONSE TO QUESTIONS**

44. Questions will be directed to the appropriate Director or organisation to provide a written response directly to the questioner. Appropriately redacted copies of responses will be published on the host authority’s website within 28 days.
45. Details of the questions and answers will be included on the following meeting’s agenda.
46. Any questions submitted by INEL JHOSC to the presenting body must respond in writing within 28 days (*calendar, not working*) of receipt of the request.

## **PRINCIPLES OF EFFECTIVE SCRUTINY**

47. Scrutiny undertaken through INEL JHOSC will be focused on improving the health and health services for residents in areas served by INEL JHOSC through the provision and commissioning of NHS services for those residents;
48. Improving health and health services through scrutiny will be open and transparent to Members of the Local Authority, health organisations and members of the public.
49. All Members, officers, members of the public and patient representatives involved in improving health and health services through scrutiny will be treated with courtesy and respect at all times.
50. Improving health and health services through scrutiny is most likely to be achieved through co-operation and collaboration between representatives of the various Local Councils, NHS Trusts, representatives of Healthwatch and the Clinical Commissioning Groups commissioning hospital services;



51. Co-operation and joint working will be developed over time through mutual trust and respect with the objective of improving health and health services for local people through effective scrutiny.
52. All agencies will be committed to working together in mutual co-operation to share knowledge and deal with requests for information and reports for INEL JHOSC within the time scales set down.
53. INEL JHOSC will give reasonable notice of requests for information, reports and attendance at meetings.
54. INEL JHOSC, whilst working within a framework of collaboration, mutual trust and co-operation, will always operate independently of the NHS and have the authority to hold views independent of other Members of representative Councils and their Executives;
55. The independence of INEL JHOSC must not be compromised by its Members, by other Members of the Council or any of the Councils' Executives, or by any other organisation it works with;
56. Those involved in improving health and health services through scrutiny will always declare any particular interest that they may have in particular pieces of work or investigation being undertaken by INEL JHOSC and thus may withdraw from the meeting as they consider appropriate;
57. INEL JHOSC will not take up and scrutinise any individual concerns or individual complaints;
58. Where a wider principle has been highlighted through such a complaint or concern, INEL JHOSC should consider if further scrutiny is required. In such circumstances it is the principle and not the individual concern that will be subject to scrutiny.