

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Cabinet
Date:	14 April 2014
Title:	Health and Social Care Act 2012 – Revised role of the Health and Wellbeing Board, revised Scrutiny Arrangements and other Constitutional Changes
Reference:	5746
Report From:	Director of Policy and Governance - Corporate Services

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1. Executive Summary

- 1.1. The purpose of this report is to propose changes to the role of the Health and Wellbeing Board, to propose related changes to the County Council's arrangements for the overview and scrutiny of health, public health and adult social care matters, and to define how the County Council will engage with the NHS on major service changes and reconfigurations.
- 1.2. This report seeks to:
 - a. Propose changes to the terms of reference of the Health and Wellbeing Board to make explicit its role in engaging with the NHS on major service changes and reconfigurations (Annex 1).
 - b. Outline the current arrangements for the overview and scrutiny of health, public health and adult social care matters.
 - c. Propose new arrangements for the overview and scrutiny of health, public health and adult social care (Annex 2 (a), Annex 2 (b), and Annex 2 (c)), by disbanding the Safe and Healthy People and the Health Overview and Scrutiny Committees, and establishing a new Health and Adult Social Care Select (Overview and Scrutiny) Committee.
 - d. Propose changes to the terms of reference of the Policy and Resources Select (Overview and Scrutiny) Committee to include arrangements for the overview and scrutiny of the County Council's community safety, crime prevention, crime and disorder and regulatory services functions, currently

within the remit of the Safe and Healthy People Select (Overview and Scrutiny) Committee.

- e. Clarify the respective roles of the proposed Health and Adult Social Care Select (Overview and Scrutiny Committee) and the Health and Wellbeing Board in relation to engagement with the NHS on major service changes and reconfigurations.
- 1.3. Cabinet are asked to agree the proposals set out in this report for recommendation to the County Council for approval at its meeting on 30 May 2014.

2. Contextual information

- 2.1. On the 24 June 2013 Cabinet considered a report on the establishment of the Health and Wellbeing Board for Hampshire, the delegation of the County Council's health scrutiny functions, and on proposed amendments to the terms of reference of the Health (Overview and Scrutiny) Committee ('HOOSC').
- 2.2. The report proposed terms of reference for the new Health and Wellbeing Board and referred to the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 ('the Regulations') which allowed for changes to the way in which the County Council can undertake its health scrutiny function by removing the requirement for health scrutiny to be undertaken by an Overview and Scrutiny Committee.
- 2.3. On the basis of the 24 June 2013 report Cabinet recommended that the County Council establish the Health and Wellbeing Board with the terms of reference as set out in the Cabinet report, and that the County Council delegate the function of health scrutiny to the Health (Overview and Scrutiny) Committee, subject review of the new arrangements within 12 months of that decision.
- 2.4. On 18 July 2013 the recommendations of Cabinet referred to at Paragraph 2.3 above were approved by the County Council.
- 2.5. On 24 March 2014 an update was provided to Cabinet on the direction of travel in respect of Constitutional and Scrutiny issues and arrangements emerging from the development of work on the Better Care Fund. Cabinet requested that a further report in this regard be brought back to the April meeting of Cabinet and then the County Council meeting on 30 May 2014.

3. Health and Wellbeing Board

- 3.1. The Health and Wellbeing Board was established in July 2013 and is now fully operational. The role of the Health and Wellbeing Board in driving the integration of health and adult social care services is critical to the County Council's continuing success. It is therefore timely to review the Board's relationship with the County Council's health scrutiny function to fully exploit the Board's unique potential to shape health provision in Hampshire.

- 3.2. The Health and Wellbeing Board's current terms of reference establish its remit to contribute towards the integration agenda for health and adult social care through its duty to prepare the Joint Strategic Needs Assessment ('JSNA') and the Joint Health and Wellbeing Strategy ('JHWS') for Hampshire and to facilitate effective partnership working between health and care stakeholders. However as currently drafted the terms of reference do not explicitly refer to the role of the Health and Wellbeing Board in engaging with the NHS to shape future service changes and reconfigurations; something which is now paramount given the introduction by Government of the Better Care Fund.
- 3.3. The opportunity presented by the breadth of membership of the Health and Wellbeing Board, particularly with its County Council and Clinical Commissioning Group members, means that in addition to its role in the integration of health and Adult Social Care services it is uniquely positioned to take a strategic lead for the County Council in engaging with the NHS on major service changes and reconfigurations to ensure that the County Council effectively shapes the direction of these changes. This process could go on for some years.
- 3.4. The health and care system under the NHS Act 2006, as amended by the Health and Social Care Act 2012, enables the NHS and the County Council to work together through the Health and Wellbeing Board to deliver high quality health and care services based on the best evidence of local need.
- 3.5. There is a natural progression from analysing local assets and needs, and how current service provision meets those needs, to developing priorities for action, which may include commissioning and providing services in new or different ways which in turn may lead to major service change or reconfiguration.
- 3.6. Ensuring that there is continuity from the work of the Health and Wellbeing Board in developing the JSNA and the JHWS to the development by the NHS of commissioning strategies and to service reconfiguration plans has a number of advantages:
 - a. The unique composition of the Health and Wellbeing Board means that proposals can be considered holistically across the local health and care system.
 - b. The preparation of the JSNA and the JHWS involves significant engagement with the local community. Where communities can see that their views have directly influenced plans and investment decisions they are more open to more in-depth conversations on potential changes to particular health services.
 - c. Local consensus on health and care needs and priorities and how they can be met within local resources potentially mitigates the risk of disagreements about major service change and reconfiguration further down the line.
- 3.7. The proposed amended terms of reference for the Health and Wellbeing Board set out in Annex 1 (including a new paragraph 9.9.11) seek to make the Board's role in this 'natural progression' explicit.

- 3.8. A further review of the terms of reference of the Health and Wellbeing Board is likely to be required as part of the implementation of governance arrangements required in consequence of the Better Care Fund. A further report will be brought to Cabinet in respect of any recommendations in this regard once further work on the options has been done. Members are asked to note that Deloitte will report in late March on a range of issues including governance which may require further amendment.

4. Overview and Scrutiny

- 4.1. Overview and scrutiny of the County Council's Adult Social Care functions is currently undertaken by the Safe and Healthy People Select (Overview and Scrutiny) Committee. This Committee is currently also responsible for the County Council's statutory community safety, crime prevention, crime and disorder and regulatory services functions. Health scrutiny is undertaken by the Health (Overview and Scrutiny) Committee.
- 4.2. While considerable efforts have been made to ensure that the HOSC and the Safe and Healthy People Select (Overview and Scrutiny) Committee do not duplicate each other's work it is becoming increasingly clear, particularly in the light of the development of the integration agenda for health and adult social care, that there are significant practical overlaps between the remits of the two Committees. It is considered that this overlap will only increase as the integration agenda gathers momentum.
- 4.3. The required review of the operation of the County Council's health scrutiny functions is particularly timely given the increasing pace of development of the integration agenda for health and adult social care as is evidenced by the establishment of the Better Care Fund. Joint commissioning of health and adult services, the pooling of health and adult social care budgets, joint appointments and delivery of services and the development of a performance framework will be at the heart of the proposals to integrate health and adult social care. It will therefore be increasingly important for the County Council's overview and scrutiny functions in relation to health and adult social care to be able to assist in policy development and to scrutinise issues in this area in a consistent, coherent and comprehensive manner.

5. Related proposed changes to Overview and Scrutiny Committees

- 5.1. It is proposed to reduce the current number of overview and scrutiny committees appointed by the County Council from six to five by disbanding the Safe and Healthy People and the Health Overview and Scrutiny Committees and establishing a new Health and Adult Social Care Select (Overview and Scrutiny) Committee. This new Committee would reflect the natural synergies of the areas of business, make better sense in light of the appointment of one Executive Member with responsibility for adult social care and public health, and enable the new Committee to contribute to the integration agenda in a holistic and comprehensive manner.
- 5.2. The establishment of a new Health and Adult Social Care Select (Overview and Scrutiny) Committee would also provide an opportunity for members of

the new Committee to assist the Executive with cross cutting policy development work in relation to health, public health and issues relating to adult social care and, in addition, undertake policy development work to support the work of the Health and Wellbeing Board. It is suggested that the cross cutting remit of a new Committee focused on the core Health, Public Health and Adult Social Care functions would better enable it to contribute toward related health, public health and adult social care issues as the integration agenda gathers pace.

- 5.3. It is proposed in consequence that the statutory community safety, crime prevention, crime and disorder functions and the regulatory services functions of the existing Safe and Healthy People Select (Overview and Scrutiny) Committee be reallocated to the Policy and Resources Select (Overview and Scrutiny) Committee, to reflect the fact that the impact of these issues cuts across a number of areas of the County Council's business and to enable the newly established Health and Adult Social Care Select (Overview and Scrutiny) Committee to focus on its core business.
- 5.4. The creation of one overview and scrutiny committee to cover health and adult social care functions does raise some practical questions, in particular consideration of the role of the four Co-opted District Council Members currently appointed to the HOSC. There is also the practical question as to whether the scope of the new Committee would be such as to enable it to effectively transact all necessary business.
- 5.5. In relation to the Co-opted Members, it would be possible to continue to appoint the four Co-opted Members to the new Committee, although their ability to vote would be limited to specific health issues. It is suggested that continuation of the appointment of four District Council Co-opted members to the new Committee would enable the County Council to retain the breadth of membership necessary to conduct effective health scrutiny and to maintain relationships with key partners.
- 5.6. Turning to the question of capacity, while it is true that the HOSC has always had a heavy workload, recent pro-active management of its agenda has reduced the number of reports considered by it. Further work could be done in this area to ensure that the workload of the new Committee is manageable, timely and effective. In addition the migration of managing the County Council's strategic engagement on health issues from the HOSC to the Health and Wellbeing Board (see Section 3 above) would further assist in this area.
- 5.7. An ancillary benefit of the proposed changes will be that the reduction of overview and scrutiny committees from six to five will reduce the running costs of the County Council. Removing the infrastructure required to support a meeting cycle from the Committee programme will save considerable amounts of officer time which can be redirected towards the more effective operation of the new and remaining Scrutiny Committees. There will also be a consequential saving in Members' Allowances.
- 5.8. Suggested terms of reference of the new Health and Adult Social Care Select (Overview and Scrutiny) Committee are set out at Annex 2 (b),

together with revised terms of reference of the Policy and Resources Select (Overview and Scrutiny) Committee, to include its suggested additional responsibilities in respect of community safety, crime prevention, crime and disorder and regulatory services functions. Consequential changes in respect of the establishment and procedures of the new Committee are included at Annex 2 (a) and Annex 2 (c).

6. Defining the relationship between the new Health and Adult Social Care Select (Overview and Scrutiny) Committee and the Health and Wellbeing Board

- 6.1. Over the past few years the business of the HOSC has become almost exclusively reactive as it has been dominated by responding to proposals by the NHS to make significant changes to service delivery. While it is suggested that this statutory function should remain within the remit of the new Health and Adult Social Care Select (Overview and Scrutiny) Committee it is suggested, as discussed in Section 3 of this Report, that the role of engaging with the NHS on the strategic Health agenda would be more appropriately undertaken by the Health and Wellbeing Board, in accordance with its revised remit and its general duty to encourage joint working and the integration of health and social care services in Hampshire.
- 6.2. Annex 3 contains a summary of process contained within guidance issued by the NHS, 'Planning and delivering service changes for patients'. It is proposed that the Health and Wellbeing Board should lead the County Council's engagement with the process at the 'Setting the Strategic Context', 'Proposal and 'Discussion' stages of the process with the NHS. In this way decisions which require formal consultation with the County Council at the 'Decision' stage of the process should already reflect the County Council's strategic objectives. The formal consultation at the 'Decision' stage would be undertaken by the new Health and Adult Social Care Select (Overview and Scrutiny) Committee, as would any on-going assessment of the new arrangements going forward.
- 6.3. It will also be important to ensure that the work of the new Health and Adult Social Care Select (Overview and Scrutiny) Committee, particularly in relation to its engagement with the NHS, complements the work of the Health and Wellbeing Board. This must however been seen in the context of the County Council's statutory engagement with the NHS on major service changes and reconfigurations and scrutiny of the work of the Health and Wellbeing Board being part of the remit of the new Committee.

7. Conclusion

- 7.1. Amending the terms of reference of the Health and Wellbeing Board and defining the relationship between the health scrutiny function of the County Council and the Board by separating the roles of formally responding to consultations on significant changes to health services and engaging with the NHS on the strategic health agenda will enable both functions to be undertaken in the most appropriate and effective forum.

- 7.2. The creation of a new Health and Adult Social Care Select (Overview and Scrutiny) Committee with a focus on the County Council's core health, public health and adult social care functions, will enable the new Committee to better contribute towards the integration agenda. It will also enable the new Committee to genuinely engage in policy development work.
- 7.3. There would also be a consequential benefit in terms of cost and resources.
- 7.4. Discussions with the CCG's and Acute providers are on going. It is likely that membership of the Board may require to be reviewed and in line with the implementation of the Better Care Fund, new arrangements made on how future management and delivery models are created. The Chief Executive will report further on these issues.

8. Recommendations

That the Cabinet agrees the following recommendations to be made to the County Council at its meeting on 30 May 2014:

- 8.1. That the amended terms of reference for the Health and Wellbeing Board set out in Annex 1 be approved.
- 8.2. That the Health (Overview and Scrutiny) and the Safe and Healthy People Select (Overview and Scrutiny) Committees are disbanded.
- 8.3. That the County Council delegates the function of health scrutiny to a new Health and Adult Social Care Select (Overview and Scrutiny) Committee and that the terms of reference for that Committee set out in Annex 2 (b), and consequential amendments set out in Annex 2 (a) and 2 (b) be approved.
- 8.4. That the amended terms of reference for the Policy and Resources Select (Overview and Scrutiny) Committee set out in Annex 2 (b) be approved.
- 8.5. That the Head of Governance be given authority to make the necessary amendments to the Constitution including any consequential amendments, and to (re)organise the schedule of meetings as required in conjunction with the relevant chairmen.
- 8.6. That the Chief Executive report further on future management and delivery arrangements for joint working with Health and the Better Care Fund.

CORPORATE OR LEGAL INFORMATION:**Links to the Corporate Strategy**

Hampshire safer and more secure for all:	yes
Corporate Improvement plan link number (if appropriate):	
Maximising well-being:	yes
Corporate Improvement plan link number (if appropriate):	
Enhancing our quality of place:	yes
Corporate Improvement plan link number (if appropriate):	

Other Significant Links

Links to previous Member decisions:		
<u>Title</u>	<u>Reference</u>	<u>Date</u>
Health & Social Care Act 2012: Establishment of a Health and Wellbeing Board for Hampshire and amendments to the terms of reference of the Health (Overview and Scrutiny) Committee (Cabinet)	<u>4925</u>	<u>24 June 2013</u>
Health & Social Care Act 2012: Establishment of a Health and Wellbeing Board for Hampshire and amendments to the terms of reference of the Health (Overview and Scrutiny) Committee (Full Council)	<u>5052</u>	<u>18 July 2013</u>
Health and Social Care Act 2012: - revised role of the Health and Wellbeing Board, revised Scrutiny arrangements and other Constitutional changes	<u>5756</u>	<u>24 March 2014</u>
Direct links to specific legislation or Government Directives		
<u>Title</u>	<u>Date</u>	
N/A		

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

IMPACT ASSESSMENTS:

1. Equalities Impact Assessment:

1.1. There are no impacts

2. Impact on Crime and Disorder:

2.1. There is no impact as scrutiny functions relating to this area will be performed by another committee

3. Climate Change:

a. How does what is being proposed impact on our carbon footprint / energy consumption?

N/A

b. How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

N/A

Part 1: Chapter 9

The Health and Wellbeing Board

9.1 The County Council has appointed a Health and Wellbeing Board for Hampshire which will be a key partnership for promoting the health and wellbeing of the residents of Hampshire.

9.2 **Composition**

The Health and Wellbeing Board includes within its membership:

- At least one Hampshire County Council elected Member nominated by the Leader of the County Council
- The Director of Adult Services
- The Director of Children's Services
- The Director of Public Health
- The Director of Policy and Governance
- A representative of each relevant Clinical Commissioning Group within Hampshire nominated by the relevant Clinical Commissioning Group
- A representative of the Local Healthwatch organisation for Hampshire nominated by the Local Healthwatch organisation
- A representative of NHS England (Wessex) nominated by NHS England (Wessex)
- The Police and Crime Commissioner for Hampshire
- Up to two elected members of the District, Borough and City Councils within Hampshire nominated by those Councils
- A representative of the Chief Executives of the Hampshire District, Borough and City Councils to be nominated by those Councils
- A representative of the voluntary and community sector nominated by the Hampshire Voluntary Sector Consortium

9.3 **Proportionality**

The rules relating to political proportionality for appointments to County Council Committees do not apply to the Health and Wellbeing Board.

9.4 Appointment of Substitute Members of the Health and Wellbeing Board

Allocation

9.4.1 As well as allocating seats on the Health and Wellbeing Board, the County Council will at the Annual General Meeting of the County Council in each year appoint a designated Substitute Member for each member of the Health and Wellbeing Board.

9.4.2 Powers and duties

9.4.2.1 Substitute Members will have all the powers and duties of any Ordinary Member of the Board but will not be able to exercise any special powers or duties exercisable by the person they are substituting.

9.4.3 Substitution

9.4.3.1 Substitute members may attend meetings in that capacity only:

9.4.3.1.1 to take the place of the Ordinary member for whom they are the designated substitute;

9.4.3.1.2 where the Ordinary member will be absent for the whole of the meeting; and

9.4.3.1.3 after notifying the Chief Executive 5 Working days before the meeting of the intended substitution.

9.5 Chairman of the Health and Adult Social Care Select (Overview and Scrutiny) Committee

The Chairman of the County Council's Health and Adult Social Care Select (Overview and Scrutiny) Committee shall have a standing invitation to attend Meetings of the Health and Wellbeing Board and shall, at the discretion of the Chairman be able to participate in the meeting, but shall not be able to vote on any matter.

9.6 Election of Chairman and Vice-Chairman of the Health and Wellbeing board

The Chairman of the Health and Wellbeing Board will be appointed by the County Council at the Annual General Meeting of the County Council in each year pursuant to Standing Order 6 of the County Council's Standing Orders. The Vice Chairman of the Board will be elected by the Health and Wellbeing Board at the first Meeting of the Health and Wellbeing Board following the Annual General Meeting of the Council in each year.

9.7 Voting rights of members of the Health and Wellbeing Board

All members of the Health and Wellbeing Board and any Sub-Committee of the Board shall be full voting members of the Board or Sub-Committee.

9.8 Sub-Committees

The Health and Wellbeing Board may appoint one or more Sub-Committees of the Board to advise the Board with respect to any matter relating to the discharge of functions by the Board.

9.9 Role and function

The role and function of the Health and Wellbeing Board will be:

- 9.9.1 For the purpose of advancing the health and wellbeing of the people of Hampshire, to encourage persons who arrange for the provision of any health or social care services in Hampshire to work in an integrated manner.
- 9.9.2 To provide such advice, assistance or other support as it thinks appropriate for the purpose of encouraging the making of arrangements under Section 75 of the National Health Service Act 2006 in connection with the provision of such services.
- 9.9.3 To encourage persons who arrange for the provision of any health or social care services in its area to work with the Health and Wellbeing Board.
- 9.9.4 To encourage persons who arrange for the provision of any health or social care services and persons who arrange for the provision of any health-related services in Hampshire to work closely together.
- 9.9.5 To undertake a Joint Strategic Needs Assessment ('JSNA') for Hampshire having regard to any guidance issued by the Secretary of State and ensuring the involvement of the Local Healthwatch organisation, the people who live and work in Hampshire and each relevant District, Borough or City Council.
- 9.9.6 To oversee and assure the translation of that JSNA into a Joint Health and Wellbeing Strategy ('JHWS') to address the identified health and social care needs, having regard to the extent to which the needs could be met more effectively by the making of arrangements under Section 75 of the National Health Service Act 2006 and to guidance issued by the Secretary of State and ensuring the involvement of the Local Healthwatch Organisation and the people who live and work in Hampshire.
- 9.9.7 To give the County Council its opinion on whether the County Council, in the exercise of its functions, is giving due regard to the JSNA and the JHWS.
- 9.9.8 To join up commissioning through a robust knowledge of need by ensuring the delivery of a comprehensive JHWS by the County

Council, Clinical Commissioning Groups ('CCG's') and other partners.

- 9.9.9 To provide an opinion to CCG's and the County Council on whether commissioning plans have taken proper account of the JHWS and to give NHS England its opinion on the matter where appropriate.
- 9.9.10 To consider the exercise or proposed exercise of the commissioning functions of NHS England in relation to Hampshire.
- 9.9.11 To engage with the NHS on major service changes and reconfigurations ensuring that proposals are developed collaboratively and that they take advantage of opportunities for greater integration of services.

Part 1: Chapter 13

A Select (Overview and Scrutiny) Committees

13.1 Background

Under the Local Government Act 2000 (“The 2000 Act”), the County Council must establish at least one Overview and Scrutiny Committee. The County Council has decided to appoint five such Committees known as Select (Overview and Scrutiny) Committees. Select (Overview and Scrutiny) Committees may appoint such Sub-Committees as they consider appropriate from time to time. Representation on these Committees and Sub-Committees will bear the same proportionality as the political composition of the whole County Council (Section 9 FA (6) of Part 1A of the 2000 Act).

13.2 General role

The main purpose of Select (Overview and Scrutiny) Committee is to hold the Executive to account. Select (Overview and Scrutiny) Committees also have a broad advisory role in relation to functions of the whole County Council and matters affecting the locality of Hampshire.

Within their scope, Select (Overview and Scrutiny) Committees will:

- 13.2.1 review and scrutinise decisions made, or actions taken, in connection with the discharge of Executive functions;
- 13.2.2 make reports or recommendations to the County Council or the Executive, in connection with the discharge of Executive functions;
- 13.2.3 review and scrutinise decisions made or actions taken, in connection with the discharge of Non-Executive functions;
- 13.2.4 make reports or recommendations to the County Council or the Executive, in respect of the discharge of Non-Executive functions;
- 13.2.5 make reports or recommendations to the County Council or the Executive on any matter affecting the County Council’s area or members of the public in Hampshire;
- 13.2.6 call in decisions made by the Executive which have not yet been implemented which they consider should be reviewed or scrutinised;

13.2.7 review and scrutinise the exercise by risk management authorities of flood and coastal erosion management functions which affect the County Council's area.

13.2.8 review and scrutinise decisions made, or other action taken, in connection with the discharge by the County Council of its crime and disorder functions, and make reports and recommendations to the County Council in respect of the discharge of such functions.

13.3 Appointment of Select (Overview and Scrutiny) Committees

The County Council appoints the Select (Overview and Scrutiny) Committees, set out in the left-hand column of the table set out in Part 2 Chapter 5, to perform the functions conferred by Section 9 F and Sections 9 FA to 9 FI of Part 1A of the 2000 Act, Section 19 of the Police and Justice Act 2006, by Sections 16 and 17 of the Local Democracy, Economic Development and Construction Act 2009, and by the Health and Social Care Act 2001 and the National Health Service Act 2006 (as updated by the Local Government and Public Involvement in Health Act 2007) and regulations provided in accordance with these Acts or by any relevant amending or superseding legislation, and having regard to statutory guidance in relation to the matters set out in the right-hand column;

Part 2: Chapter 5

Scrutiny

A Select (Overview and Scrutiny) Committees

5.1 Responsibilities for Scrutiny Functions

The following table sets out the allocation of responsibilities within the Select (Overview and Scrutiny) Committees.

Committee	Scope
Policy and Resources	<p>Coordinating Scrutiny:</p> <p>To ensure resources of all scrutiny functions are being effectively targeted.</p> <p>To ensure the outputs and outcomes of Scrutiny are having impact and being evaluated.</p> <p>To prioritise topics for scrutiny task and finish groups (thematic reviews).</p> <p>To create an annual work programme.</p> <p>To identify where each thematic review on the work programme should be considered.</p> <p>To provide an annual report to the County Council outlining the effectiveness, outcomes and learning of the scrutiny function (i.e. Select (Overview and Scrutiny) Committees and overall work programme).</p> <p>To monitor the operation of the provisions relating to call-in and urgency submitting a report to Cabinet if necessary.</p> <p>Scrutinising Corporate functions:</p>

	<p>Reviewing how policies, services and decisions ensure effective use and management of all resources; how effectively is cross-cutting/corporate policy developed, implemented and performance evaluated and improved.</p> <p>Efficiency; Human Resources; Partnership Working (internal and external); Procurement; Relevant Financial Management (e.g. budget setting and monitoring final accounts, capital programme, capital receipts); asset and estate management; information management (including records management); communications; use of IT; Health and Safety; corporate policy and performance; Business Units; Rural Affairs; crime prevention; crime and disorder; Regulatory Services.</p> <p>Reviewing and scrutinising decisions made, or other actions taken, in connection with the discharge of crime and disorder functions by the authorities responsible for crime and disorder strategies in relation to the County Council's area, and making reports or recommendations with respect to the discharge of those functions.</p> <p>Makings reports or recommendations to the County Council with regard to any matter which is a local crime and disorder matter in relation to a member of the County Council (i.e. a matter concerning crime and disorder which affects all or part of the electoral Division for which the Member is elected or any person who lives or works in that area).</p> <p>Departments covered;</p> <ul style="list-style-type: none"> - Corporate Services - Culture, Communities and Business Services - County Council as a corporate entity.
Children and Young People	<p>Reviewing how the needs and interests of children and young people are met by all Departments, policies, services and decisions; and how performance is evaluated and improved.</p>

	<p>Universal, targeted and specialist services for children and young people: prevention and management of risk; social care; children's and young people's wellbeing; education – supporting and enabling learning for all children and young people; internal and external partnership working re Children and Young People; supporting parents and families; relevant financial management.</p> <p>Departments covered:</p> <ul style="list-style-type: none"> - Children's Services - Culture Communities and Business Services - Any other Department doing work with or impacting on children or young people.
Health and Adult Social Care	<p>Reviewing how policies, services and decisions support safe, well, independent and continuously developing people (adults and older persons) and Public Health; how they are implemented and how performance is evaluated and improved.</p> <p>Focus on how the County Council is contributing to delivering the Wellbeing agenda for adults; adult social care; promoting independence and quality of life for older people; healthy and safe families; Public Health: the integration of Health and Care services and relevant financial management.</p> <p>Scrutiny of the provision and operation of health services in Hampshire.</p> <p>Departments covered:</p> <ul style="list-style-type: none"> - Adult Services - Corporate Services - Culture, Communities and Business Services - Any other relevant functions in other Departments

Culture and Communities	<p>Reviewing how policies, services and decisions support thriving culture and sustainable, inclusive communities; how they are implemented and how performance is evaluated and improved.</p> <p>Culture and recreation; heritage; economic development; community development; developing sustainable communities; supporting diversity and inclusion; community engagement and consultation; lifelong learning for adults; relevant financial management.</p> <p>Departments covered:</p> <ul style="list-style-type: none"> - Culture Communities and Business Services - Corporate Services - Adult Services - Environment - Any other relevant functions in other Departments.
Economy, Transport and Environment	<p>Reviewing how policies, services and decisions support a positive and sustainable environment, accessibility to services for all and effective management of natural resources; how they are implemented and how performance is evaluated and improved.</p> <p>Passenger transport; transport policy; road infrastructure; access; protection of the environment; flood and coastal erosion risk management; economic development; sustainable development; climate change; land management; waste management; relevant financial management.</p> <p>Departments covered:</p> <ul style="list-style-type: none"> - Environment - Culture, Communities and Business Services - Children's Services

	- Any other relevant functions in other Departments
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Specific Functions

5.2 Policy development and review

Select (Overview and Scrutiny) Committees may:

- 5.2.1 assist the County Council and the Executive, at their request, to develop the budget and policy framework by in-depth analysis of policy issues
- 5.2.2 conduct research in the analysis of policy issues and possible options
- 5.2.3 question members of the Executive or Senior Officers, about their views on issues and proposals affecting their remit
- 5.2.4 liaise with external organisations as appropriate

5.3 Scrutiny

Select (Overview and Scrutiny) Committees may:

- 5.3.1 review and scrutinise Executive decisions
- 5.3.2 review and scrutinise the County Council's service delivery and performance, performance concerning its policy objectives, performance targets and particular service areas
- 5.3.3 question members of the Executive or Senior Officers about their decisions and performance; whether compared to service plans and targets, or related to particular decisions, initiatives or projects
- 5.3.4 make recommendations to the Executive or County Council arising from the scrutiny process
- 5.3.5 review and scrutinise the performance of other public bodies in the area; invite reports from them by asking them to address the relevant Select Committee
- 5.3.6 question and gather evidence from people and organisations that can inform the scrutiny process

5.4 Health Scrutiny Functions of the Health and Adult Social Care Select (Overview and Scrutiny) Committee

The Health and Adult Social Care Select (Overview and Scrutiny) Committee will have the following additional roles and functions in relation to health matters:

- 5.4.1 To review and scrutinise any matter relating to the planning, provision and operation of the health service in Hampshire.
- 5.4.2 To make reports and recommendations to relevant NHS bodies and to relevant health service providers (as defined in the Local Authority (Public Health, Health and Wellbeing Board and Health Scrutiny) Regulations 2013) on any matter that it has reviewed or scrutinised.
- 5.4.3 To act as consultee to relevant NHS bodies or relevant health service providers on issues of:
 - a) Substantial developments of the health service in Hampshire; and
 - b) Any proposals to make any substantial variation to the provision of such services.
- 5.4.4 Subject to the approval of the County Council to report contested proposals for major health service changes to the Secretary of State;
- 5.4.5 To scrutinise the social care services provided or commissioned by relevant NHS bodies or relevant health service providers exercising local authority functions under Section 31 of the Health Act 1999;
- 5.4.6 To review or scrutinise health services commissioned or delivered in Hampshire within the framework set out below:
 - a) Arrangements made by relevant NHS bodies or relevant health service providers to secure hospital and community health services to the inhabitants of Hampshire;
 - b) The provision of such services to those inhabitants;
 - c) The provision of family health services, personal medical services, personal dental services, pharmacy and NHS ophthalmic services;
 - d) The public health arrangements in Hampshire; e.g. arrangements by the County Council for public health promotion and health improvement (including addressing health inequalities) in Hampshire.

- e) The planning of health services in Hampshire, including plans setting out a strategy for improving both the health of the local population and the provision of health care to that population; and
- f) The arrangements made by relevant NHS bodies and relevant health service providers for consulting and involving patients and the public.

5.5 Delegation of Health Scrutiny Functions

- 5.5.1 The County Council may delegate health scrutiny powers to a joint Scrutiny Committee and appoint Members to that Committee when there is an intention by a relevant NHS body or relevant health service provider to consult on a substantial variation or development to health services that extend beyond Hampshire.
- 5.5.2 The Chief Executive, in consultation with the Chairman of the County Council and the Chairman of the Health and Adult Social Care Select (Overview and Scrutiny) Committee, may agree to the formation of such a committee, its membership and terms of reference, if there is insufficient time for that decision to be taken by the County Council, subject to the details being submitted for approval to the next meeting of the County Council.
- 5.5.3 Any joint committee so convened should work to a specific proposal and with clear terms of reference, which would be restricted to consideration of and agreeing a response to the proposal on which the committee had been consulted.

5.6 Petitions

Select (Overview and Scrutiny) Committees must, when required to do so by a petition organiser, review the adequacy of the steps taken or proposed to be taken in response to a petition.

5.7 Finance

Select (Overview and Scrutiny) Committees may exercise overall responsibility for any money made available to them.

5.8 Annual Reports

- 5.8.1 The Policy and Resources Select (Overview and Scrutiny) Committee will submit to the County Council as soon as reasonably practicable in each financial year an account of the activities and outcomes of the scrutiny function for the last year and a tentative list of intended scrutiny inquiries for the following year.

5.8.2 The Health and Adult Social Care Select (Overview and Scrutiny) Committee will submit to the County Council as soon as reasonably practicable in each financial year an account of the activities and outcomes of the health scrutiny function for the last year and a tentative list of intended health scrutiny inquiries for the follow year.

5.9 Proceedings of Select (Overview and Scrutiny) Committees

Select (Overview and Scrutiny) Committees will conduct their proceedings in line with the Overview and Scrutiny Procedure, set out in Part 3, Chapter 3 of this Constitution.

Part 3: Chapter 3

A **Select (Overview and Scrutiny) Committees**

Scrutiny Procedures

1.1 **Background**

The County Council will have the Select (Overview and Scrutiny) Committees set out in Part 1, Chapter 12 of the Constitution, and it will appoint Members to them in such numbers in political proportionality as it considers appropriate from time to time. The membership of the Policy and Resources Select Committee shall include the Chairmen of the other Select (Overview and Scrutiny) Committees. The Policy and Resources Select Committee, having a corporate overview, may agree the appointment of working groups of Members and Officers to advise relevant select (Overview and Scrutiny) Committees. Such working groups may be appointed for a fixed period, if appropriate, on the expiry of which they shall cease to exist;

1.2 **Membership of Select (Overview and Scrutiny) Committees**

Members of (Overview and Scrutiny) Select Committees – all Members (except members of the Executive) may be members of any Select (Overview and Scrutiny) Committee. No Member may be involved in scrutinising a decision in which he or she has been directly involved;

1.3 **Co-optees**

Co-optees – each Select (Overview and Scrutiny) Committee or working group may include in its membership any person or persons as non-voting co-optees where the Committee or working group considers this would be advantageous to their work;

1.4 Children and Young People Select (Overview and Scrutiny) Committee

The Children and Young People Select (Overview and Scrutiny) Committee, when dealing with the education Functions of the Executive shall include in its membership the following voting representatives:

1.4.1 one Church of England Diocese representative;

1.4.2 one Roman Catholic Diocese representative;

1.4.3 three Parent Governor representatives.

1.5 Health and Adult Social Care Select (Overview and Scrutiny) Committee

The Health and Adult Social Care Select (Overview and Scrutiny) Committee, when dealing with health scrutiny matters shall include in its membership four district, city and borough Council Members (nominated via the Hampshire and Isle of Wight Local Government Association) who shall be full voting members of the Committee on health scrutiny matters.

1.6 Meetings of Select (Overview and Scrutiny) Committees

Select (Overview and Scrutiny) Committees will normally meet four times a year (except the Health and Adult Social Care Select (Overview and Scrutiny) Committee which shall normally meet six times a year), in accordance with a timetable to be published by the Chief Executive. In addition, extraordinary or ad hoc meetings may be called from time to time as and when appropriate. A Select (Overview and Scrutiny) Committee meeting may be called by the chairman of the relevant Select (Overview and Scrutiny) Committee, by a quorum of the members of the committee or by the Chief Executive if he or she considers it necessary or appropriate.

1.7 Chairing Select (Overview and Scrutiny) Committees

The Chairman and Vice-Chairman of each select committee shall be appointed by the County Council at its Annual General Meeting. In the absence of the Chairman, the Vice-Chairman will preside. In the event that neither the Chairman or the Vice-Chairman are present within 10 minutes from the time appointed for any meeting to begin, the Committee may appoint a person to chair it from amongst the members sitting on it. Sub-Committees and working groups shall appoint their own Chairman from among their membership. An officer of the County Council may not chair a working group;

1.8 Work programme

Select (Overview and Scrutiny) Committees will be responsible for proposing their own work programme of activities within their planned meetings structure and, in doing so, shall take into account wishes of members on that Committee who are not members of the largest political group on the County Council. The Policy and Resources Select Committee will oversee and determine the overall work programme of working groups;

1.9 Agenda items

- 1.9.1 Any member of a Select (Overview and Scrutiny) Committee shall be entitled to give notice to the Chief Executive that they wish an item relevant to the functions of the Committee or Sub-Committee to be included on the agenda for the next convenient meeting (Section 9 FC (1) (a) and (b) of Part 1A of the 2000 Act). On receipt of such a request, the Chief Executive will ensure that it is so included;
- 1.9.2 Any member of the County Council may refer to any Select (Overview and Scrutiny) Committee, of which they are not a member, any matter which is relevant to the function of that Committee in accordance with Section 9 FC (1) (c) of Part 1A of the Local Government Act 2000, and which is not an excluded matter under Section 9 FC (5) of Part 1A of the 2000 Act (crime and disorder matters and excluded matters within the meaning of the Overview and Scrutiny (Reference by Councillors) (Excluded Matter) (England) Order 2012). In considering whether to exercise this power, the member must have regard to any relevant statutory guidance;
- 1.9.3 Any member of the County Council who is not a member of the Policy and Resources Select (Overview and Scrutiny) Committee may refer to that Committee a local crime and disorder matter affecting all or part of their division, or any person who lives or works in that area (Section 19 (3) (b) of the Police and Justice Act 2006);
- 1.9.4 A local health watch organisation or local health watch contractor may refer any matter relating to the planning, provision and operation of health services or social care service to the Health and Adult Social Care Select (Overview and Scrutiny) Committee and any such referral shall be acknowledged by the Committee within 20 working days of the referral being made and the referrer shall be kept informed of any action taken in regard to the matter;
- 1.9.5 A matter referred to a Select (Overview and Scrutiny) Committee under paragraph 1.9.2 or to the Policy and Resources Select (Overview and Scrutiny) Committee under paragraph 1.9.3 shall be included in the agenda for, and discussed at, a meeting for the Committee. Arrangements for the handling of a matter so referred shall be in accordance with the 'Councillor Call For Action' protocol

agreed by the County Council (and the provisions of the 2000 Act and the Police and Justice Act 2006 as appropriate);

- 1.9.6 The County Council or the Executive may request a Select (Overview and Scrutiny) Committee to consider matters referred by it or them. Where this occurs, the matter shall be placed on the agenda of the next convenient meeting of the Committee and the Committee will decide what further action should be taken.

1.10 Review and Scrutiny

The Health and Adult Social Care Select (Overview and Scrutiny) Committee must, when reviewing or scrutinising any health matter, invite interested parties to comment on the matter and take account of relevant information available to it and in particular information provided by the Local Healthwatch organisation or a Local Healthwatch contractor pursuant to paragraph 1.9.4.

1.11 Reports from Select (Overview and Scrutiny) Committees

- 1.11.1 Once it has formed recommendations on a particular matter, the Select (Overview and Scrutiny) Committee will request the Chairman of the relevant Committee to report to the Executive (if the recommendations are consistent with the existing budgetary and policy framework), or to the County Council as appropriate (e.g. if the recommendation would require a departure from or a change to the agreed budget and policy framework). Where members of a Select (Overview and Scrutiny) Committee cannot agree on a single report, the report to the County Council or the Executive shall contain a paragraph giving brief details of where there is dissent from the majority finding. In accordance with Section 9 FE (3) of Part 1A of the 2000 Act, the Committee must notify the Executive or the County Council of the Committee's requirement in respect of its report. The Safe and Healthy People Select (Overview and Scrutiny) Committee in regard to its review and scrutiny of crime and disorder matters is exempt from the provision of Section 9 FE (3) of Part 1A of the 2000 Act but must comply with the requirement of Section 19 of the Police and Justice Act.
- 1.11.2 The County Council or Executive will consider the report of the Select (Overview and Scrutiny) Committee as soon as practicable after the report has been submitted to it or them, and will provide at least an initial response within 2 months of receipt of the report (Section 122 of the Local Government and Public Involvement in Health Act 2007);
- 1.11.3 In the event of any dispute between the Executive, the County Council, and/or any Select (Overview and Scrutiny) Committee, it shall be resolved by the County Council. If there is any issue as to

whether a matter is a dispute that needs to be resolved by the County Council, the Chief Executive shall advise, and if necessary, will place the matter on the County Council agenda for the next convenient meeting.

1.12 Reports on Health Matters from the Health and Adult Social Care Select (Overview and Scrutiny) Committee

1.12.1 The Health and Adult Social Care Select (Overview and Scrutiny) Committee may in addition make reports and recommendations on health matters to relevant NHS bodies or relevant health service providers. Such reports and recommendations shall include:

- An explanation of the matter reviewed or scrutinised:
- a summary of the evidence considered;
- a list of the participants involved in the review or scrutiny: and
- an explanation of any recommendations on the matter reviewed or scrutinised.

1.12.2 Where the Health and Adult Social Care Select (Overview and Scrutiny) Committee requests a response from a relevant NHS body or relevant health service provider to whom it has made a report or recommendation, that body must respond to the request within 28 calendar days of the date of the request.

1.12.3 Where the Health and Adult Social Care Select (Overview and Scrutiny) Committee has completed its review and made reports and recommendations to relevant NHS bodies or relevant health service providers scrutinised, the Scrutiny Officer will copy the report to:

- The Cabinet;
- The Local MPs and MEPs;
- The relevant Clinical Commissioning Groups;
- The local health watch organisation; and
- Other bodies or organisations that have expressed an interest in the inquiry.

The Scrutiny Officer will also place a copy of the report on the County Council's website.

1.13 Consultation

- 1.13.1 Each relevant NHS body or relevant health service provider has a duty to consult the Health and Adult Social Care Select (Overview and Scrutiny) Committee on any proposals for any substantial development of the Health Service in Hampshire or any proposals to make any substantial variation in the provision of such services.
- 1.13.2 When consulting the Health and Adult Social Care Select (Overview and Scrutiny) Committee the relevant NHS body or relevant health service provider must provide the Committee with the proposed dates by which the relevant NHS body or relevant health service provider intends to make a decision to proceed with the proposal and the date by which the Health and Adult Social Care Select (Overview and Scrutiny) Committee is required to comment on the proposal.
- 1.13.3 The relevant NHS body or relevant health service provider must inform the County Council of any change in the dates provided under Paragraph 1.13.2 and publish those dates, including any change to those dates.
- 1.13.4 The relevant NHS body or relevant health service provider may undertake a substantial development or substantial variation to the health service in Hampshire without consulting the Health and Adult Social Care Select (Overview and Scrutiny) Committee where it is satisfied that the decision had to be taken without consultation because of a risk to safety or welfare of patients or staff subject to notifying the County Council immediately of the decision and the reason why no consultation has taken place.
- 1.13.5 The Health and Adult Social Care Select (Overview and Scrutiny) Committee may make comments and recommendations on the proposal consulted on by the specified date.
- 1.13.6 When the Health and Adult Social Care Select (Overview and Scrutiny) Committee's comments include a recommendation and the relevant NHS body or relevant health service provider disagrees with that recommendation.
- 1.13.6.1 the relevant NHS body or the relevant health service provider must notify the Health and Adult Social Care Select (Overview and Scrutiny) Committee of the disagreement
- 1.13.6.2 the relevant NHS body or relevant health service provider and the Health and Adult Social Care Select (Overview and Scrutiny) Committee must take such step as are reasonably practicable to try to reach agreement in relation to the subject at the recommendation

- 1.13.7 When the Health and Adult Social Care Select (Overview and Scrutiny) Committee has not commented or when it has commented but its comments do not contain a recommendation the Health and Adult Social Care Select (Overview and Scrutiny) Committee must inform the relevant NHS body or the relevant health service provider whether or not it intends to report the matter to the Secretary of State and if applicable the date by which it proposes to make the report or the date by which it proposes to make a decision as to whether to report the proposal to the Secretary of State.
- 1.13.8 Subject to Paragraph 1.13.9 the Health and Adult Social Care Select (Overview and Scrutiny) Committee may report to the Secretary of State in writing when :
- 1.13.8.1 the Health and Adult Social Care Select (Overview and Scrutiny) Committee is not satisfied that that consultation on a proposal has been adequate in relation to the content or time allowed
 - 1.13.8.2 in a case where Paragraph 1.13.4 applies the Health and Adult Social Care Select (Overview and Scrutiny) Committee is not satisfied that the reasons given are adequate
 - 1.13.8.3 the Health and Adult Social Care Select (Overview and Scrutiny) Committee considers that the proposal would not be in the interests of the health service in Hampshire
- 1.13.9 The Health and Adult Social Care Select (Overview and Scrutiny) Committee may not make a report to the Secretary of State unless the Health and Adult Social Care Select (Overview and Scrutiny) Committee is satisfied that :
- 1.13.9.1 the steps specified in Paragraph 1.13.6.1 and 1.13.6.2 have been taken but agreement has not been reached in a reasonable time
 - 1.13.9.2 the relevant NHS body or relevant health service provider has failed to comply with its duty under Paragraph 1.13.6.2 within a reasonable time
 - 1.13.9.3 in a case where Paragraph 1.13.7 applies unless the Health and Adult Social Care Select (Overview and Scrutiny) Committee has complied with its duty under Paragraph 1.13.7 and that

1.13.9.4 it has obtained the agreement of the County Council to the making of the report to the Secretary of State

1.13.10 A report made under Paragraph 1.13.8 must include:

1.13.10.1 an explanation of the proposal to which the report relates

1.13.10.2 the reason why the Health and Adult Social Care Select (Overview and Scrutiny) Committee believes the consultation to have been inadequate or the reasons why the Health and Adult Social Care Select (Overview and Scrutiny) Committee does not agree that the proposal should be implemented without consultation

1.13.10.3 in the case of a report under Paragraph 1.13.8.3 a summary of the evidence considered including evidence of the effect or potential effect of the proposal on the sustainability or otherwise of the health service in Hampshire

1.13.10.4 an explanation of the steps the Health and Adult Social Care Select (Overview and Scrutiny) Committee has taken to try to reach agreement with the relevant NHS body or relevant Health service provider in relation to the proposal

1.13.10.5 in a case falling within Paragraph 1.13.6 evidence to demonstrate that the Health and Adult Social Care Select (Overview and Scrutiny) Committee has complied with the conditions in Paragraph 1.13.9

1.13.10.6 an explanation of the reasons for the making of the report

1.13.10.7 any evidence in support of those reasons

1.13.11 A relevant NHS body or relevant health service provider undertaking a consultation should be prepared to attend the Health (Overview and Scrutiny) Committee, if so requested, to explain the rationale behind the proposals and the options for change being considered.

1.14 Co-ordinating role

As provided for in its terms of reference, the Policy and Resources Select (Overview and Scrutiny) Committee, will co-ordinate the scrutiny function

so as to ensure effective resource allocation, and that review reports are consistent and take account of corporate issues;

1.15 Members' and Officers' attendance at Select (Overview and Scrutiny) Committees or working groups

1.15.1 A Select (Overview and Scrutiny) Committee or working group may scrutinise and review decisions made or actions taken in connection with the discharge of Executive functions. A Select (Overview and Scrutiny) Committee also has an advisory role in respect of any County Council functions within its terms of reference. As well as reviewing documentation, it may require any member of the Executive, the Chief Executive, and/or any other Senior Officer to attend before it to explain, or give evidence, in relation to matters within their remit and it is the duty of those persons to attend if so required.

1.15.2 Where any Member or Officer is required to attend a Select (Overview and Scrutiny) Committee or Sub-Committee under this provision, they shall be given reasonable notice of the meeting they are required to attend. The notice will state the nature of the matter on which they will be asked to explain or answer, and they will also be given notice of whether any papers are required to be produced. Where attendance is likely to require the production of a report, the member or officer concerned will be given sufficient notice to allow for preparation of that documentation.

1.15.3 The Health and Adult Social Care Select (Overview and Scrutiny) Committee may require the attendance of an officer from a relevant NHS Body or relevant health service provider to answer question the relevant Body or relevant health service provider are under a duty to comply with such a request. Any request for an officer from a relevant NHS Body or relevant health service provider to attend must make clear the nature of the information requested, its relevance to its review, and must give the officer requested to attend reasonable notice.

1.16 Attendance by others

A Select (Overview and Scrutiny) Committee or Sub-Committee may invite people other than those referred to in the previous paragraph, to address it, discuss issues of local concern, and/or answer questions. This could include, for example, residents, external experts, stakeholders, and members and officers in other parts of the public sector. In the case of these people, unless required by law attendance will be optional.

1.17 Call-in

- 1.17.1 Where a decision of the Executive has been made but not yet been implemented, a quorum of members of the relevant Select (Overview and Scrutiny) Committee(s) may require by way of notice in writing to the Chief Executive that a meeting of the Committee is held to consider whether or not to exercise the Committee's powers under Section 9 F (4) of Part 1A of the 2000 Act (referred to in this Constitution as 'call-in'). These powers are to arrange that the decision be reconsidered by the Executive, or arrange for its powers in respect of review or scrutiny of the decision to be exercised by the County Council. Where a decision materially affects more than one Select Committee (i.e. it is cross-cutting) a call-in must be made by at least two of the Select (Overview and Scrutiny) Committees;
- 1.17.2 A decision can only be called-in within 5 clear working days of the date the decision was notified to all members of the appropriate Select (Overview and Scrutiny) Committee(s).
- 1.17.3 When a valid call-in request is made, the Select (Overview and Scrutiny) Committee(s) must meet to consider the request, make a decision and communicate to the Executive any recommendations it wishes to make within 14 clear calendar days of the request being made. When it meets the Committee(s) must consider whether or not to recommend;
- i) that the decision be reconsidered by the relevant decision making body who made the decision; or
 - ii) that the County Council consider whether the relevant decision making body should reconsider the decision (this recommendation shall not be made when the decision is in line with the budget, or the Policy Framework, or statutory requirements regarding notice procedures in respect of publicity for Key Decisions)
- 1.17.4 Any decision of the Executive which is not in line with the Budget or the Policy Framework, or the notice procedure in respect of Key Decisions as set out at Part 3 Chapter 2 Paragraph 3.2 of the Constitution, if called-in, shall not be implemented until the request has been disposed of by;
- i) The withdrawal of the request
 - ii) The rejection of the request by the Select (Overview and Scrutiny) Committee(s) or by the County Council
 - iii) The relevant decision-making body rejecting the recommendation for reconsideration or;

iv) The relevant decision-making body reconsidering and confirming the original decision.

1.17.5 Call-in shall not prevent the decision from being acted on where the decision is in line with the Policy Framework and other policies approved by the County Council but when the views of the Select Committee differ from, or are critical of, the Executive decision, the facts shall be reported to the next County Council meeting and be debated without changing the previous decision although the County Council may request the Cabinet or relevant Executive Member(s) to review the decision in question.

1.18 Call-in and urgency

1.18.1 The call-in procedure set out above shall not apply where the decision being taken by the Executive is an urgent Key Decision (see Chapter 2, Paragraphs 3.3 and 3.4 of this Part).

1.18.2 The record of the urgent Key Decision, and the notice by which it is made public, shall state whether (in the opinion of the decision-making person or body) and confirmed by the Chairman of the relevant Select (Overview and Scrutiny) Committee the decision is an urgent one. If it is considered urgent, the decision will not be subject to call-in. The Chief Executive, or his or her nominee, will have to advise on the issue of urgency in all cases.

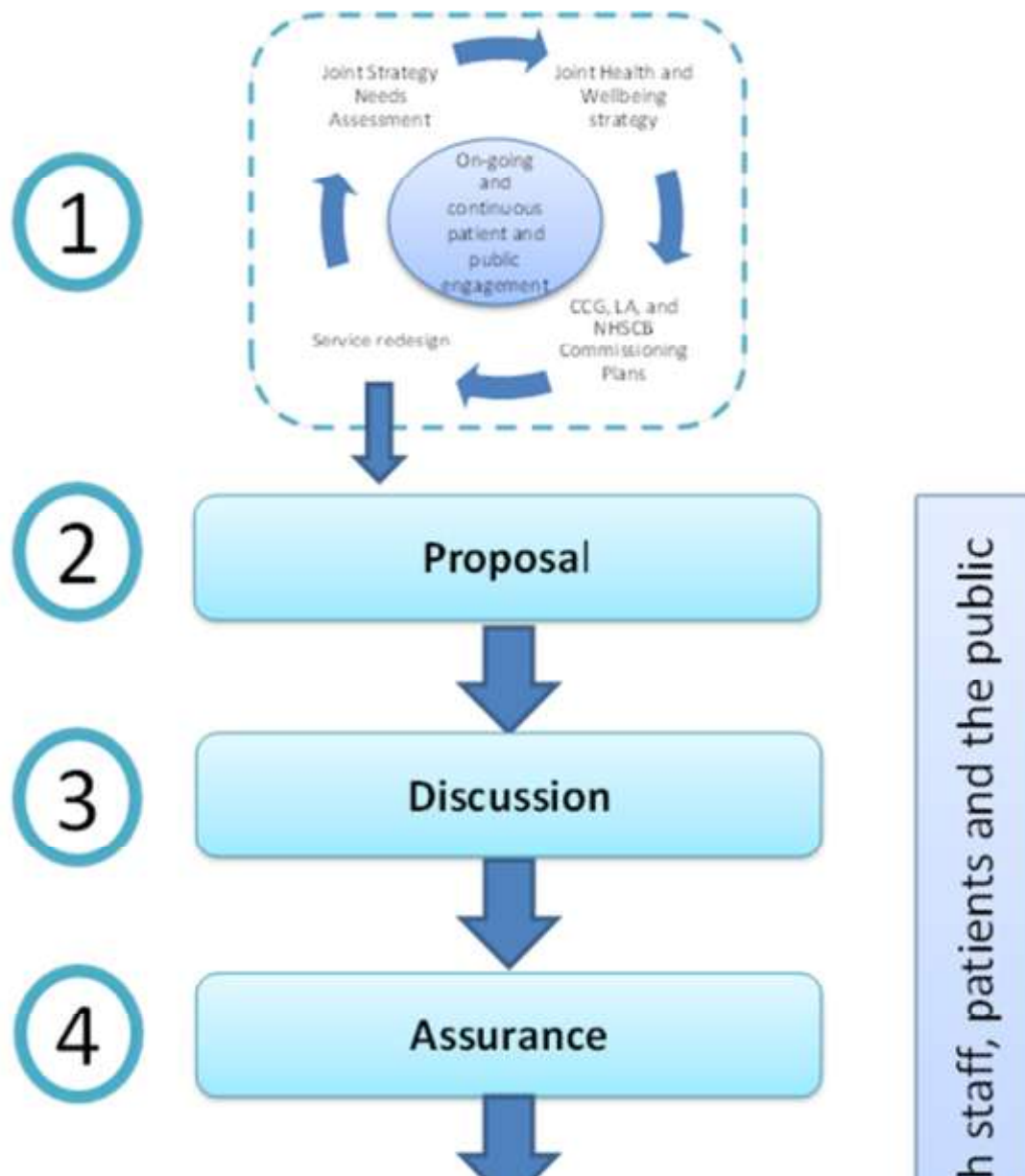
1.18.3 Decisions taken as a matter of urgency must be reported by the Chief Executive to the members of the relevant Select (Overview and Scrutiny) Committee, together with the reasons for the urgency. If considered appropriate, the Select (Overview and Scrutiny) Committee may refer the matter to the next appropriate Meeting of the County Council.

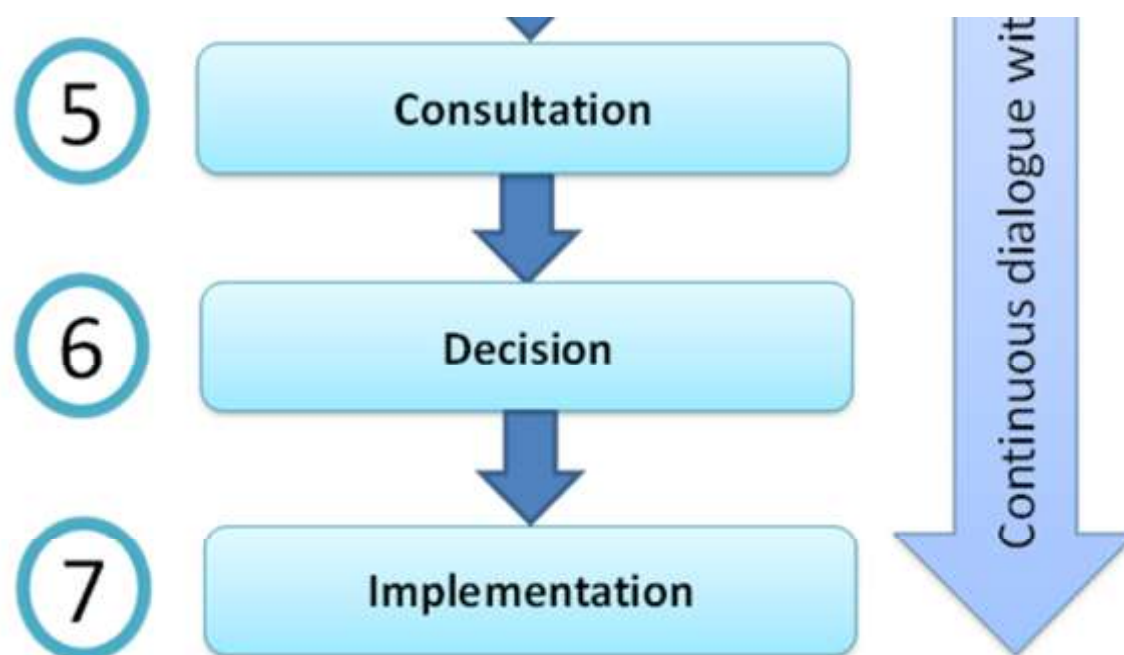
1.18.4 The operation of the provisions relating to call-in and urgency shall be monitored by the Policy and Resources Select (Overview and Scrutiny) Committee and a report submitted to the County Council with proposals for review, if necessary.

The process in summary

The following pages describe a high level process which is intended to help shape the planning and development of schemes. This process has been grouped into seven logical stages, that brings together elements found in many standard models of programme and project management – from identification of need and generation of concepts, through development of business cases, detailed analysis planning and delivery, to implementation – but which includes specific considerations relevant to the NHS.

Whilst all reconfiguration programmes should have regard to these stages, and there is a natural sequence in how they are carried out, the planning and development of reconfiguration proposals is rarely linear. The process is intended to be flexible in how each stage is undertaken depending on the nature of the scheme.





1. **Setting the strategic context** – the development of joint strategic needs assessments, joint health and wellbeing strategies, and commissioning plans, should provide an important strategic context for major service change and reconfigurations. Continuous dialogue with health and wellbeing boards, and with communities on local health priorities and needs, can provide a firm foundation for the subsequent development of proposals.

2. **Proposal** – during or following the development of commissioning plans, commissioners may conclude that health outcomes and the quality of care can be improved through a major service change. Commissioners should build their proposal by identifying the range of service changes that could improve outcomes within available resources. Commissioners have a statutory duty⁴ to involve service users in the development of proposals and, as part of this, is good practice that commissioners involve patients and the public, and wider stakeholders, in the early stages of building a case for change. As proposals are developed and refined they should undergo an assessment by commissioners against the Government’s ‘four tests’ as outlined on pages 23 to 30.

3. **Discussion** – when commissioners have a proposal they are satisfied meets the ‘four tests’, commissioners should discuss formally with local stakeholders, including relevant health and wellbeing boards, and local authority health scrutiny bodies – prior to any wider public consultation. In earlier reconfiguration guidance this was referred to as ‘preconsultation’. This builds alignment on the case for change, avoids proposals being developed in isolation, and that interfaces with the wider health system are considered.

4. **Assurance** – prior to any formal public consultation, reconfiguration programmes should undergo an assurance exercise to review the clinical case for change, the robustness of programme, workforce and financial plans, and the alignment

between the proposal and commissioning plans as may be relevant. NHS England will support the assurance of schemes led by clinically commissioning groups and will put in place equivalent arrangements for directly commissioned services.

5. Consultation – effective reconfiguration schemes will have continuous engagement with staff, patients and the public throughout their lifecycle. However, commissioners may wish to undertake further public consultation to obtain views and feedback on specific configuration options. This may include a formal consultation exercise, though the Cabinet Office principles for public consultations⁵ allow for a range of approaches to be employed, and engagement should be tailored, targeted and proportionate.

6. Decision – at the conclusion of any main consultation phase, the commissioner(s) should determine whether to proceed and which (if any) of the configuration options they wish to pursue. They should notify that decision to all relevant stakeholders, including local authorities discharging health scrutiny functions.

7. Implementation – commissioners should ensure there are clear and robust implementation plans, and that they track the delivery of benefits. It is also important to maintain on-going dialogue with patients and the public as new services come on stream, and that organisations seek and act on feedback as these services bed down.

⁴ Sections 13Q and 14Z2 of the Health and Social Care Act 2012

⁵ www.cabinetoffice.gov.uk/resource-library/consultation-principles-guidance