## HEALTH SCRUTINY COMMITTEE TERMS OF REFERENCE

## Membership

- 1. The group will be made up of elected members of the Scrutiny Assembly, appointed at Annual Council in line with the political balance of the Council.
- 2. The Committee may include Co-opted scrutiny members but they must not exceed 50% of the number of elected members.
- 3. In addition to standing co-optees, the Committee may appoint additional cooptees for one-off reviews to supplement the skills, knowledge and experience of the Committee on that particular issue (subject to the rule on total number of co-optees above).
- 4. Vice-Chairs may be appointed by majority decision of the Committee.
- 5. The guorum required for a meeting is 3 elected members.
- 6. Three elected Members and 3 co-optees of this Committee will also be expected to take part in the Joint Health Scrutiny Committee set up with elected members and co-optees from Shropshire County Council to scrutinise substantial variations or developments in service that cut across both local authority areas. Separate terms of reference apply to the Joint Health Overview and Scrutiny Committee which have been agreed with Shropshire County Council.

#### **Functions**

- 7. The Committee will be the main mechanism by which Scrutiny members will scrutinise and monitor the planning and performance of the Council's adult social care services and health services matters under the Health and Social Care Act 2012. Full Council has delegated the health scrutiny powers to this Committee.
- 8. The Committees takes the key role in:
  - a) Monitoring the performance of NHS Trusts whose services effect local people;
  - b) Acting as the statutory consultee on NHS proposals for substantial variation in service and responding to these NHS consultations.
  - c) Participating in a Joint Health Overview and Scrutiny Committee with elected members from Shropshire Council to scrutinise and respond to NHS proposals that apply to both areas;
  - d) Responding to referrals from Health Watch regarding health services;
  - e) Monitoring the Council's performance in relation to social care service for adults;
  - f) Responding to referrals from Healthwatch regarding Adult Care Services
  - g) Scrutinising proposals for the provision of adult care services and the impacts of any proposed changes to services;

- h) Scrutinising adult care services that are of concern to local people.
- 9. The Committee will set its own work programme. The main task of the Committee will be to scrutinise the planning, provision and operation of NHS health services and to scrutinse the performance of the Council's adult social care services that are provided to people in Telford & Wrekin However, members can look at any other issues within these service areas. The following points should be taken into consideration when considering the work programme each year:

□ areas where significant change is proposed and the potential impacts
□ performance in areas where significant change has been implemented;
□ areas of financial overspend;
□ areas receiving a high level of budgetary commitment;
□ areas where there is a high level of user dissatisfaction;
□ reports and action plans produced/agreed with external inspectors;
$\hfill \square$ areas that are key issues for the public or have become a public interest
issue covered in the media.

- 10. The Committee will consider matters referred by the Scrutiny Management Board, and will exercise discretion as to whether a suggestion falls within the remit of the Committee to scrutinise.
- 11. Following scrutiny of any proposals which constitute a substantial development or substantial variation in the provision of health services, to make recommendations to Full Council on the exercise of powers of referral to the Secretary of State.

# **Meeting Administration and Proceedings**

- 12. The Committee procedure rules as set out in the Council's Constitution apply to this Committee.
- 13. The meetings will follow the principles of scrutiny ie no party whip will be applied and a constructive, evidence based approach will be used.
- 14.If the Chair and Vice Chair (if appointed) are unable to attend a meeting the members present will elect a Chair for the meeting.
- 15. The meetings will be administered by Scrutiny Services and Democratic Services. Frequency of meetings will be agreed by Committee members as deemed necessary to carry out the work programme.
- 16.Scrutiny Committee meetings will be held in public, unless matters exempt under legislation is being discussed, or the Scrutiny Committee is meeting with vulnerable groups to hear their views and it is not appropriate for these meetings to be open to the public. The Scrutiny Committees may appoint subgroups to carry out investigative work as part of a review, and these may be held as informal meetings, but evidence gathered in this way will be brought back to the overseeing Committee in a public forum. In case of dispute, the

Monitoring Officer will advise on the rules of exemption.

17. Relevant Cabinet Members, Executive Directors, Directors and Service Delivery Managers and representatives from NHS commissioners and providers will attend the Committee at the request of the Chair. Representatives from partner organisations may be invited to attend.

### **Sensitive and Confidential Information**

- 18. From time to time members, as part of the work of the Committee, may become privy to information of a sensitive or confidential nature, if this happens members must maintain this confidence. Members are unable to request personal/confidential information from Officers about an individual or family. Reporting Arrangements.
- 19. The Chair will provide regular updates to meetings of the Scrutiny Management Board to inform the other Scrutiny Chairs of performance and budget issues relating to the remit of their Committees.
- 20. The Chair of the Committee, or his/her representative, will provide and present reports and recommendations of the Committee to the Council's Cabinet, Full Council or other partner organisation when necessary.