

Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013

SUMMARY

- 1.1 The Government has now published regulations relating to local authority health scrutiny functions. These cover public health, health and wellbeing boards and health scrutiny functions and come into effect on 1st April. This report provides details on changes to the local authority health scrutiny functions.

RECOMMENDATION

- 2.1 To consider and note the new Local Authority (health scrutiny) Regulations 2013.

REASONS FOR RECOMMENDATION

- 3.1 Adults and Public Health Board has the responsibility for the local authority health scrutiny function.

SUPPORTING INFORMATION

- 4.1 Regulations were published by the Government in February 2013.

OTHER OPTIONS CONSIDERED

- 5.1 None

This report has been approved by the following officers:

Legal officer	Janie Berry
Financial officer	N/A
Human Resources officer	N/A
Estates/Property officer	N/A
Service Director(s)	N/A
Other(s)	N/A

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Background papers:	None
List of appendices:	Appendix 1 – Implications Appendix 2 – Local Authority (Health Scrutiny) Regulations 2013 Appendix 3 – Statutory Instruments 2013 No.218

IMPLICATIONS

Financial and Value for Money

- 1.1 None arising from this report

Legal

- 2.1 Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 came into effect on 1 April 2013.

Personnel

- 3.1 None arising from this report

Equalities Impact

- 4.1 None arising from this report

Health and Safety

- 5.1 None arising from this report

Environmental Sustainability

- 6.1 None arising from this report

Property and Asset Management

- 7.1 None arising from this report

Risk Management

- 8.1 None arising from this report

Corporate objectives and priorities for change

- 9.1 Our aim is to work together so that Derby and it's people will enjoy a thriving sustainable economy, good health and well-being and an active cultural life.

Local Authority (Health Scrutiny) Regulations 2013

1. The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 were published in February 2013 and will come into effect on 1 April 2013. Under the public health heading, the new regulations clarify the role and responsibility of the council in recording children's health information whilst the Health and Wellbeing Boards section allows the appointment of sub committees and officers to discharge functions.
2. The new Regulations predominantly cover the local authority health scrutiny function. They reiterate the broad scrutiny powers provided to local authorities to enable them to review and scrutinise any matter relating to the planning, provision and operation of the health service in their area. However, for the first time the new Regulations allow authorities to determine the procedure for discharge of health scrutiny. This may involve appointment of:
 - (a) An overview and scrutiny committee
 - (b) A joint overview and scrutiny committee with one or more local authorities
 - (c) A committee or sub-committee
3. The new Regulations require local authorities carrying out a review and scrutiny of a particular matter to:
 - (a) invite interested parties to comment on the matter; and
 - (b) take account of relevant information available to it and, in particular, relevant information provided to it by the Local Healthwatch
4. They continue to provide the same powers as available to the former Local Involvement Networks (Links) and enable the local Healthwatch provider to refer matters to overview and scrutiny. Where a matter is referred, the local authority is required to:
 - (a) acknowledge receipt of the referral within 20 working days beginning with the date on which the referral was made; and
 - (b) keep the referrer informed of any action taken in relation to the matter
5. The Government has also specified what information needs to be included in reports recommendations where a matter has been reviewed or scrutinised. This includes:
 - (a) an explanation of the matter reviewed or scrutinised;
 - (b) a summary of the evidence considered;
 - (c) a list of the participants involved in the review or scrutiny; and
 - (d) an explanation of any recommendations on the matter reviewed or scrutinised.
6. Where a response is required from health bodies, they are required to respond in writing within 28 days of the request.

Consultation on substantial development or variations

7. The Regulations also make some important changes to consultation by health bodies on any proposals they may have for substantial development or variation of service. Where health bodies have proposals for substantial developments or variation, they are required to:
 - Consult the local authority
 - When consulting, they are required:
 - provide the authority a date by which the health body intends to make a decision and specify a date by which the authority is required to provide any comments to the health body
 - Inform the authority of any changes to the dates
 - Publish those dates, including any changes
8. The above requirements do not apply to proposals where the health bodies are satisfied that a decision has to be taken without allowing time for consultation because of risk to safety or welfare of patients or staff. However, they are required to notify the authority immediately of the decision taken and the reason why no consultation took place.
9. Local authorities are required to inform health bodies whether or not they will respond to the consultation. If they choose to make a response then they must do so on or by the date provided. Where the authority's response includes a recommendation and the health body disagrees with that recommendation then:
 - The health body must notify the authority of the disagreement
 - Both the health body and the authority are required to take reasonably practical steps to try and reach an agreement
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10. The same process applies where the consultation is being conducted by a commissioner. In addition the commissioner is required to involve the health body.

Secretary of State reporting

11. Local authorities retain the power of reporting to the Secretary of State and may do so in writing where:
 - a) the authority is not satisfied that consultation on any proposal referred above has been adequate in relation to content or time allowed;
 - b) in a case where paragraph (8) applies, the authority is not satisfied that the reasons given by R are adequate; or
 - c) the authority considers that the proposal would not be in the interests of the health service in its area
12. A report to the Secretary of State as above must include:
 - (a) an explanation of the proposal to which the report relates;
 - (b) in the case of a report under paragraph (11), the reasons why the authority is not satisfied of the matters set out in paragraph (11);

- (c) a summary of the evidence considered, including any evidence of the effect or potential effect of the proposal on the sustainability or otherwise of the health service in the area of the authority;
- (d) an explanation of any steps the authority has taken to try to reach agreement with the health body in relation to the proposal or the matters set out in paragraph (11);
- (e) evidence to demonstrate that the authority has complied with the applicable condition;
- (f) an explanation of the reasons for the making of the report; and
- (g) any evidence in support of those reasons.

Information to be provided by responsible person

13. The Health bodies are required to provide local authorities with such information about planning, provision and operation of health services in the area of the authority as the authority may reasonably require in order to discharge its function.
14. Local authorities may also require any member or employee of the health body to attend before the authority to answer questions to enable it to discharge its health scrutiny function.