



DERBY CITY COUNCIL

Minority Ethnic Communities Advisory Committee
16 June 2005

Report of the Director of Corporate Services

Potential Role for Advisory Committees in Health Scrutiny

RECOMMENDATION

1. To consider and comment on the potential role of Advisory Committees in supporting the City Council's health scrutiny function.

SUPPORTING INFORMATION

Background

- 2.1 The Health and Social Care Act 2001 gave local authorities with social services new additional powers to scrutinise National Health Service (NHS) health services. The legislation is clear that the scrutiny power is only exercisable by overview and scrutiny committees. The responsibility for health scrutiny has been given Social Care and Health Commission. The legal powers enable the Commission to review and scrutinise any matter relating to the planning, provision and operation of health services within the city. In essence, the Commission can scrutinise organisations and services to see how they might be improved to address local needs.
- 2.2 The Council's Overview and Scrutiny Commissions have two ways of conducting scrutiny. Firstly the Commissions can request reports to their scheduled business meetings on topics that fall within their terms of reference. This method is often used to scrutinise key decisions that have been, or will be, made by Council Cabinet. The second method involves the Commissions carrying out in-depth reviews of topics that Commission members consider to be significant and important to the Council and the people of Derby. The Commissions can each carry out up to two of these 'topic' reviews in any one year. The legislation does not require the Commission to obtain Council Cabinet's approval of health scrutiny reports.
- 2.3 During the past year, the Social Care and Health Commission considered numerous health related items at its scheduled business meetings. The Commission has also conducted two major topic reviews. One of these reviews looked at ways of reducing health inequalities and the other considered hospital car parking charges. As part of the review process the Council's Advisory Committees were consulted on both these reviews.

Issue

- 2.4 Unlike other external organisations, the health bodies have a statutory duty to respond to the requests made by health scrutiny committees for information and to any recommendations resulting from scrutiny. They are given an opportunity to comment on the draft final report prior to adoption by the Commission. The health bodies are also required to consult the Commissions on any proposals that involve substantial development or reconfiguration of their services.
- 2.5 The main aim of the health scrutiny function is to add value to decisions and to act as a lever for improving health. It also seeks to enhance local accountability and strengthen local democracy. This is achieved by allowing democratically elected community leaders to voice the views of their constituents and by requiring the health bodies to listen and respond. This process provides genuine opportunities for the Commission to influence the delivery of local health services.
- 2.6 The membership of the Council's Advisory Committees consists of people with a range of skills and experiences who could potentially contribute to the health scrutiny process. One role for the Advisory Committees would be to act as consultees for topic reviews. The Commission has done this with its previous topic reviews and it is proposed to continue with this practice.
- 2.7 The Advisory Committees could also assist the Commissions with identifying appropriate groups for further consultation on topic reviews as well as disseminating information to their respective communities on key findings.
- 2.8 The Regulations do not specify which issues should be considered but suggest the following areas:
 - a. arrangements made by local NHS bodies to secure hospital and community health services to the inhabitants of the authority's area and the services that are provided;
 - b. arrangements made by local NHS bodies for public health, health promotion and health improvement (including addressing health inequalities) in the authority's area;
 - c. the planning of health services by local NHS bodies, including plans made in co-operation with local authorities setting out a strategy for improving both the health of the local population and the provision of health care to that population;
 - d. the arrangements made by local NHS bodies for consulting and involving patients and the public under the duty placed on them by section 11 of the Act; and
 - e. any matter referred to the committee by a patient's forum by virtue of powers under the NHS Reform and Health Care Professions Act 2002.

2.9 Since the responsibility for selecting topics and setting work programme lies with the Overview and Scrutiny Commissions, the Advisory Committees could support the health scrutiny function by identifying health issues within their respective communities and presenting it to Commissions for their consideration. This could make a useful addition to the suggestions for topic reviews that are submitted by other stakeholders.

2.10 Overview and Scrutiny Commissions are not the only body responsible for looking at the health service provision, as there are a number of other organisations that are actively involved in monitoring and assessing the patient and public perspective of the health service. These include the Patient and Public Involvement Forums, Patients Advice and Liaison Service, the Healthcare Commission and the Independent Complaints Advocacy Service (ICAS). The Advisory Committees may wish to learn more about the role and responsibilities of these organisations and how they could be involved with them and contribute to the health improvement of their respective communities from the Department of Health website (www.dh.gov.uk).

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Background papers:	None
List of appendices:	Appendix 1 – Implications

IMPLICATIONS

Financial

1. None.

Legal

2. Local authorities with social services have powers under the Health and Social Care Act 2001 to scrutinise the NHS health services

Personnel

3. None.

Equalities Impact

4. The involvement of advisory committees and their support in the health scrutiny process should help to make sure equalities issues are taken into account.

Corporate objectives and priorities for change

5. This report links to the Councils corporate objectives through partnership with others to provide healthy, safe and independent communities.