

Joint Health Scrutiny Committee for the Lancashire and South Cumbria Integrated Care System (ICS)

Terms of reference

1. Title

The Committee to be named the Joint Health Scrutiny Committee for the Lancashire and South Cumbria Integrated Care System (ICS).

2. Scope and function

To consider proposed health service changes that will directly affect all four upper tier local authorities within the Lancashire and South Cumbria areas.

To exercise the statutory functions of a health scrutiny committee under the provisions of the National Health Service Act 2006; the Local Government and Public Involvement in Health Act 2007; and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 and to make reports and recommendations to NHS bodies as appropriate in relation to matters which directly affect all four upper tier local authorities within the Lancashire and South Cumbria areas.

The joint committee will establish an annual work plan to determine the specific issues to be addressed for the forthcoming municipal year.

3. Membership

The membership of the joint committee comprises:

- 3 elected voting Members and up to 3 non-voting district council co-opted members from the Lancashire County Council Health Scrutiny Committee
- 3 elected voting Members from the Cumbria County Council Health Scrutiny Committee
- 3 elected voting Members from the Blackburn with Darwen Borough Council People Overview and Scrutiny Committee
- 3 elected voting Members from the Blackpool Council Adult Social Care and Health Scrutiny Committee

Each local authority to appoint on the basis of two members from the administration and one opposition member.

The Joint Committee shall be appointed annually prior to its first meeting in each municipal year.

When selecting individual members to serve on the Joint Committee, each local authority should consider a member's experience, expertise, and interest in health scrutiny; as well as the ability to act impartially, work as part of a group, and the capacity to serve.

4. Substitutes or replacements

Any member of the Joint Committee may be represented at a meeting of the Joint Committee by a substitute or replacement appointed by the appropriate local authority. Local authorities in these circumstances are encouraged to ensure the substitute or replacement member's experience, expertise, and interest in health scrutiny is taken into consideration when appointing either on a temporary or permanent basis; notwithstanding the ability to act impartially, work as part of a group and the capacity to serve. Substitutes will have the same voting rights as the member they replace and count towards the establishment of a quorum.

If any Member ceases to be a Councillor of their local authority or if the local authority notifies of any changes to the membership they shall no longer be a member of the Joint Committee.

5. Chair and Vice Chair

The Chair and the Vice Chair shall be elected by the Joint Committee from among the Committee's voting membership at the first meeting in each municipal year. It is intended that the Chair shall rotate between each local authority for each municipal year. The elected Chair must be a Member of a different local authority to the Vice Chair.

The Chair shall preside at the meetings. In the absence of the Chair, the Vice Chair shall Chair the meeting. In the absence of both the Chair and the Vice Chair, the Joint Committee Members present shall elect a Chair for that meeting from among their number of voting members.

6. Secretary of State Referrals

In the case of contested NHS proposals for substantial service changes or any NHS proposal which the Joint Committee feels has been the subject of inadequate consultation, by majority agreement, the Joint Committee to have delegated authority to directly refer the matter to the relevant Secretary of State.

That in relation to the function described above, any Joint Committee decision on whether or not a referral should be made to the relevant Secretary of State is not required to be approved by the individual Overview and Scrutiny Committees at those local authorities that may be directly affected by the decision.

7. Scrutiny Arrangements

Decisions and recommendations may only be made by the Joint Committee. However task and finish groups may be established if the Joint Committee deem this to be the most appropriate method of scrutiny.

The Joint Committee has the following powers:

- To require the following person/s to attend the Joint Committee to answer questions or supply evidence:
 - a) The Chief Officer (or their representatives) of the Lancashire and South Cumbria Integrated Care System, Partnerships and Neighbourhoods;
 - b) Any relevant Chief Executives (or their representatives) of local NHS bodies;
 - c) The relevant Directors of Public Health, Adult and Children's Social Care from the four Local Authorities within the Integrated Care System area;
 - d) Any relevant Chief Officer of third sector organisations;
- To invite to any meeting of the Joint Committee and permit to participate in discussion and debate, but not to vote, any person not an elected Member appointed to the Joint Committee, whom the Joint Committee considers would assist it in carrying out its functions.
- To co-opt or appoint independent technical advisers as and when necessary and under such terms as the Joint Committee thinks appropriate, persons with appropriate expertise in relevant health matters, without voting rights.
- To invite the Chief Officers (or their representatives) from the four Healthwatch bodies within the Integrated Care System area.
- To request findings and recommendations from any Clinical Senate review relating to a proposal.
- Make reports or recommendations to the relevant health bodies as appropriate.

8. Review of functions, administration arrangements and terms of reference

To review at least annually the functions of, and administration arrangements for meetings of the Joint Committee.

To annually review the Joint Committee's terms of reference.

9. Conduct of Business Meetings

The Clerk to the Joint Committee shall, with the agreement of the Chair and the Vice Chair, arrange meetings of the Joint Committee as and when necessary

(discretionary) or for the purposes of responding to consultation by a Responsible Person (mandatory) in accordance with Regulation 30 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. An Annual General Meeting will be scheduled each year.

The public are welcome to attend and observe meetings, however, there are no public speaking rights

No meetings of the Joint Committee shall be held during the notice of election period for any elections.

Any scheduled Joint meeting may be cancelled where the Chair and the Vice Chair of the Joint Committee both agree.

Where possible the venue for meetings of the Joint Committee shall be rotated between the local authorities. Secretarial support for the Committee shall be from the local authority from which the Chair of the Joint Committee is a member of.

a) Quorum

The quorum for the Joint Committee shall be five voting members from at least three of the affected upper tier local authorities being present. 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.

b) Agendas and Items of business

Agendas for meetings of the Joint Committee shall be circulated at least five working days in advance of the meetings and in accordance with the provisions of legislation relating to Access to Information.

Other than in exceptional circumstances, where agreed by the Chair, the only business to be considered at any meeting will be that which has been notified.

c) Declarations of Interest

Any Member having a non-pecuniary interest must disclose that fact and act accordingly. Those Members declaring a pecuniary interest must leave the room and take no part in the discussion or influence that particular item. Members must give reference to the individual code of conduct of their local authority when declaring an interest.

d) Decisions

The Joint Committee will seek to make decisions and recommendations by consensus whenever possible. In the event of any disagreement, the Chair will seek to resolve any differences.

Where it is not possible to achieve a consensus, voting is by show of hands.

The Chair shall have a second or casting vote.

e) Minutes

The minutes of each Joint meeting shall be submitted for information to the individual Overview and Scrutiny Committees at the respective local authorities.