

Report to: Health Overview and Scrutiny Panel
Report from: Stewart Agland, Local Democracy Manager
Report by: Katie Benton, Scrutiny Support Officer

Health Overview and Scrutiny Panel – Terms of Reference

1. Purpose of Report

1.1 To advise the Panel on the updated terms of reference

2. Recommendations

That the draft Terms of Reference set out in Paragraph 3.2 of the report be approved.

3. Background

3.1 In March 2003 the Council approved recommendations relating to the new role given to local authorities in relation to overview and scrutiny of local NHS and health issues within their area. These included:

- The establishment of the Health Overview & Scrutiny Panel (HOSP) from May 2003;
- The inclusion of six Portsmouth members and six co-opted members from the surrounding area;
- A terms of reference for the HOSP;
- That Portsmouth be the lead authority in respect of both the Portsmouth City Teaching Primary Care Trust and the Portsmouth Hospitals NHS Trust;
- That in respect of scrutiny of the Strategic Health Authority a joint committee be appointed comprising members from Hampshire County Council, Isle of Wight Council, and Portsmouth and Southampton City Councils.

3.2 Since this time, the role of the Health Overview & Scrutiny Panel has evolved, as has the legislation with regards to which the terms of reference were written.

3.3 The regulations relating to the HOSP as set out in the Health & Social Care Act 2001 were updated by the NHS Act 2006, and further developed by the Local Government & Public Involvement in Health Act 2007.

3.4 The Local Government & Public Involvement in Health Act 2007 cited the discontinuation of the Public & Patient Involvement Forums (PPIFs) in March 2008, and the introduction of the Local Involvement Network (LINK). It stated that LINKs have the statutory power to refer unresolved social care issues to the local authority Health Overview & Scrutiny

Committee, with an expectancy that the Committee keeps the LINK informed of any actions relating to the referral.

- 3.5 From May 2008, the City Council Executive became the Cabinet.
- 3.6 From July 2008, the HOSP also began to scrutinise the City Council Adult Social Care service.
- 3.7 In November 2008, the City Council passed resolutions to change the scrutiny structure. Previous policy & review panels, managed by an oversight panel, became five scrutiny topic panels (reflecting the Council's portfolios), managed by a scrutiny management panel. The HOSP remained unchanged.

4. Updated Terms of Reference – Health Overview & Scrutiny Panel

- 4.1 The following are the suggested updated terms of reference, to encapsulate the role of the Panel as set out in the 2003 previous report agreed by the City Council, and the changes to the Panel and Council as set out in paragraphs 3.3 - 3.7 –
 1. To scrutinise matters relating to the health of Portsmouth's residents and contribute to the development of policy to improve health and reduce health inequalities.
 2. To undertake all the statutory functions in accordance with the NHS Act 2006 and the Local Government & Public Involvement in Health Act 2007 relating to reviewing, scrutinising and receiving referrals relating to health and social care service matters.
 3. To formally acknowledge receipt of all referrals made by the Portsmouth Local Involvement Network (LINK), and to keep the LINK informed of all actions taken in relation to the referral.
 4. To review and scrutinise the impact of the City Council's own services and of key partnerships on the health of its residents.
 5. To ensure the City Council as a whole, the Cabinet and other scrutiny topic panels take into account the implications of their policies and activities on health, and health inequalities.
 6. To make reports and recommendations to the NHS, Adult Social Care, the Portsmouth LINK, the City Council, the Cabinet and other scrutiny topic panels, and to other relevant bodies and individuals.
 7. To evaluate and review the effectiveness of its recommendations.
 8. In undertaking its functions the Panel's role and purpose should be to –
 - Focus on opportunities for improvement;
 - The promotion of healthy lifestyles and the reduction of health inequalities;

- Provide a process for partnership between the local authorities and the relevant health bodies;
- Not to duplicate the work of other health inspection bodies or scrutiny committees;
- Not to cover individual cases, clinical issues, children's social care or NHS staffing;
- To seek and take account of the views of Portsmouth's residents.

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Local Democracy Manager

Background Papers – 'NHS Act 2006'
'Local Government & Public Involvement in Health Act 2007'