

**North Yorkshire County Council**  
**Scrutiny of Health Committee**  
**23 June 2017**

**Overview and Scrutiny at North Yorkshire County Council**

**Purpose of Report**

The purpose of this report is to provide Members of the Scrutiny of Health Committee with a summary of how overview and scrutiny is undertaken at the Council, the way in which subjects for scrutiny are identified, why it is important and what role committee Members have to play.

This report provides Members with details of some of the specific responsibilities and powers relating to this committee and also a copy of the committee work programme for review and comment.

**Overview and Scrutiny**

The Local Government Act 2000 first introduced the requirement for every local authority to include provision for at least one scrutiny committee. Under this Act and associated legislation, scrutiny can make recommendations to the executive and other local bodies. The committees also have the power to question Cabinet members, Council officers and representatives of other organisations, such as health and community safety agencies. The committees can also investigate any issue which affects the local area or its residents.

For more detail on the roles and responsibilities of the overview and scrutiny committees have, please refer to the North Yorkshire County Council Constitution – <http://www.northyorks.gov.uk/article/24041/The-council-constitution>

**Why it is important**

Overview and scrutiny provides an important check and balance, helping to ensure that the decisions made by the executive reflect the needs of local people, are financially robust and are in keeping with the strategic priorities and responsive to the operational demands of the Council.

Where overview and scrutiny is not active, engaged and inquisitive, then there is a risk that some strategic and operational issues could be overlooked and opportunities for early intervention and action missed. Examples of where this has occurred in other local authorities, albeit at the extreme, include: child sexual exploitation in Rotherham MBC; poor care and high mortality rates at Mid Staffordshire NHS Foundation Trust; and governance failings in Tower Hamlets LBC.

**How it contributes to the Council's outcomes**

In addition to being an important check and balance and providing early warning, scrutiny aims to contribute to the Council's corporate outcomes in many other ways, including:

- Enabling Councillors to become directly involved in the development of: policy and strategy; consultation and public engagement planning; and the performance management of the Council

- Keeping Councillors and the public informed of key issues, priorities and initiatives
- Enabling direct engagement with the people of North Yorkshire
- Acting as a critical friend and providing Cabinet Members and senior officers with a non-partisan forum in which to test out ideas, approaches and gain feedback and suggestions
- Providing a structure, through the call-in process, for scrutinising specific decisions of the Executive
- Scrutinising issues of public concern beyond the remit of the Council.

### **The overview and scrutiny committees**

There are five thematic overview and scrutiny committees, each of which meet in public four times a year, as below:

- Transport, Economy and Environment – focussed upon transport and communications infrastructure, supporting business and helping people develop their skills, sustainable development, climate change, countryside management, waste management, environmental conservation and cultural issues
- Corporate and Partnerships - the Council's corporate organisation and structure, resource allocation, asset management, procurement policy, people strategy, equality and diversity, performance management, communications, partnership working, community development and engagement and community safety (as the designated Crime and Disorder Committee).
- Young People – focussed upon the interests of young people, including education, care and protection and family support
- Care and Independence – focussed upon the needs of vulnerable adults and older people and people whose independence needs to be supported by intervention from the public or voluntary sector
- Health - focussed upon the planning, provision and operation of health services in the County with the aim of acting as a lever to improve the health of local people and ensuring that the needs of the local people are considered as an integral part of the delivery and development of health services.

Overview and scrutiny functions are also supported through the following bodies:

- Scrutiny Board – this is made up of the Chairs of the five thematic overview and scrutiny committees and enables work to be co-ordinated, opportunities for joint scrutiny to be identified, and committee Chairs to act as critical friends.
- Police and Crime Panel - which scrutinises the Police and Crime Commissioner. There is also a Complaints Sub-Committee which meets on an ad hoc basis.
- Looked After Children's Members Group – this is not a formal committee but acts as an informal advisory group to the Executive Portfolio Holder for Children's and Young Peoples Services. The group performs a role consistent with statutory guidance for local authorities to promote the health and well-being of looked-after children.

## **Mid Cycle Briefings**

In addition to formal meetings of the committees, there is also a system of Mid Cycle Briefings. A Mid Cycle Briefing enables the Chair, Vice Chair and Spokespersons for each committee to meet in private four times a year to: discuss the work of the committee; identify areas for in-depth scrutiny; and have an early discussion with commissioners and providers about topics that may be confidential or under development.

## **Different approaches to overview and scrutiny**

In addition to formal committee meetings and Mid Cycle Briefings, there are a number of approaches that overview and scrutiny can take, including:

- Task and finish groups – these are informal, time-limited bodies comprised of councillors that are established by the committee to undertake a discrete piece of scrutiny work and then report back their findings and recommendations.
- In-depth scrutiny review – this is when the committee undertakes a prolonged and detailed piece of work, which includes: desktop research; expert witnesses, typically commissioners and providers; service/site visits; and engagement with service users. This approach combines formal committee meetings and the use of a sub-group.
- Select Committee – where an overview and scrutiny committee works as a whole committee to address a particular issue. Typically, this would involve a one-off meeting lasting a day where a range of expert witnesses are invited to attend and give evidence. The committee members then analyse the evidence given and make recommendations for improvements.
- Call-in – this is when non-executive members of the Council can have decisions of the Executive considered by a scrutiny committee.
- Joint scrutiny – this is when there is an issue that is directly relevant to more than one overview and scrutiny committee and so a collaborative approach is taken. This can be internal or external. External joint scrutiny is often undertaken by the Scrutiny of Health Committee.

## **Role of committee members**

All the members of an overview and scrutiny committee have a key role to play in ensuring that Council and other public sector services are delivered effectively, efficiently and that they achieve good outcomes for local people. The things that committee members can do, include:

- Contributing to the development of the committee's work programme, providing constructive challenge and suggesting topics for inclusion
- Actively engaging with all stages of the scrutiny process, including any additional groups or meetings that are setup outside of the scheduled, formal meetings of the committee
- Developing constructive relationships with other members of the committee, the relevant portfolio holders and service leads
- Working apolitically as a committee, with a strong focus upon service improvement and outcomes

- Receiving the data, information and analysis that is presented in an impartial manner
- Assessing the data, information and analysis presented to the committee and testing the conclusions that are drawn
- Contributing to the development of recommendations, based on the committee's deliberations, which are specific, realistic and relevant.

### **Scrutiny of Health Committee**

The Scrutiny of Health Committee has a responsibility to review any matter relating to the planning, provision and operation of health services in the County. This includes:

- being consulted on the reconfiguration of healthcare and public health services locally
- contributing to the Department of Health's Quality Accounts initiative and the Care Quality Commission's process of registering NHS trusts
- carrying out detailed examination into a particular healthcare/public health service.

The Scrutiny of Health Committee's powers include:

- reviewing and scrutinising any matter relating to the planning, provision and operation of health services in the local authority's area
- requiring NHS bodies to provide information within 28 days to and attend (through officers) before meetings of the committee to answer questions necessary for the discharge of health scrutiny functions
- making reports and recommendations to local NHS bodies and to the local authority on any health matters that they scrutinise
- requiring NHS bodies to respond within a fixed timescale to the health scrutiny reports or recommendations
- requiring NHS bodies to consult health scrutiny on proposals for substantial developments or variations to the local health service
- referring contested proposals to the Secretary of State for Health.

In addition to the County Councillors on the committee, there are also District Councillors. This helps ensure that there is as full as possible a consideration of health issues in a two-tier area.

### **Work programme**

The topics for overview and scrutiny are identified by the committee Chairs, Vice-Chairs, Spokespersons and Members, advised by the relevant overview and scrutiny officer, using some of the following sources of information:

- Performance data, information and analysis, in particular when it has been benchmarked against similar local authorities
- Inspection reports, such as those produced by the Care Quality Commission or OFSTED
- National research findings
- National policy changes
- National and local consultations and public engagement events
- County Council Plan

- County Council budget and delivery against savings proposals and targets
- Agendas for Executive
- Local issues raised by elected members, members of the public or highlighted in the media
- Local networks and partnerships.

Where an initial area of interest or line of inquiry is identified, further information is gathered to ascertain whether this is a valid area for scrutiny that will add value and not duplicate work that is already underway.

On every agenda for formal meetings of the overview and scrutiny committees, there is an item on the committee work programme. This provides Members with an opportunity to reflect on the issues that have been identified and assure themselves that they are appropriate for the committee.

The work programme for this committee is in Appendix 1.

### **Further information**

Further information on Overview and Scrutiny is available on the North Yorkshire County Council website - <http://www.northyorks.gov.uk/article/23665/Scrutiny>

The overview and scrutiny officer supporting the work of this committee is:

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Committee papers are available from the North Yorkshire County Council website as follows - <http://democracy.northyorks.gov.uk/>

### **Recommendation**

That Members review the Committee's work programme, taking into account issues highlighted in this report, the outcome of discussions on previous agenda items and any other developments taking place across the County.

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8 June 2017

**NORTH YORKSHIRE COUNTY COUNCIL**  
**Scrutiny of Health Committee – Work Programme/Areas of Involvement – 2017 and 2018**

(Note: Shading denotes period of on-going involvement/monitoring but without confirmed dates for items to the committee;  
✓ = Confirmed agenda item)

	7 Apr	23 Jun	22 Sep	15 Dec	16 Mar	
<b>Strategic Developments</b>						
1. Implications on health and care services of Sustainability and Transformational Plans across North Yorkshire	✓	✓	✓	✓	✓	Verbal update by the STP lead officers at the 23 June 2017 committee meeting, in response to issues raised at 7 April 2017 meeting.
2. NY Mental Health Strategy		✓				Follow up at 23 June 2017, particularly with regard to issues raised at 2 September 2016 meeting.
3. Funding of Community Pharmacies			✓			Follow up to 27 January 2017 committee meeting – watching brief and Public Health impact monitoring.
4. Health and social care workforce planning		✓				Proposal for joint scrutiny - review of work underway to address shortages of skilled, trained and experienced health and social care staff in the county.
5. Suicide prevention and reduction						Report to 3 November 2017 MCB. Follow up to audit in July 2016.
<b>Local Service Developments</b>						
6. Hambleton, Richmondshire & Whitby CCG: Hambleton and Richmondshire - "Fit 4 the Future", including developments at the Lambert Hospital, Thirsk			✓			Follow up on use of Lambert and continuity of care at 23 June 2017 committee.
7. Hambleton, Richmondshire & Whitby CCG: Transforming our Communities – mental health services.	✓	✓				Report on the early findings of the programme of public engagement/consultation and proposed next steps for the process of service reconfiguration.
8. Hambleton, Richmondshire & Whitby CCG – future plans for Whitby Hospital			✓			Follow up to discussions at 3 March 2017 MCB. Update at MCB on 28 July 2017.
9. Integrated prevention, community care and support in Scarborough and Ryedale			✓			28 July 2017 MCB 22 September 2017 Committee.

	7 Apr	23 Jun	22 Sep	15 Dec	16 Mar	
10. Mental Health Service in York/Selby area and Bootham Hospital						28 July 2017 MCB – progress with business case and commencement of building.
11. District Nurse Service – opening times, coverage, challenges - TBC						28 July 2017 MCB – initial discussion TBC
12. Castleberg Hospital, Settle – update		✓				Formal report to committee on why the temporary closure was necessary and what plans there are for the future delivery of the service.
13. James Cook, Darlington Memorial and Friarage –Siobhan McArdle and Janet Probert						28 July 2017 MCB
<b>Public Health Developments</b>			✓			
14. Development of base-line data and an on-going monitoring system on the impact of Fracking.		✓				Lincoln Sargeant and Simon Padfield PHE.
15. Dentistry provision in North Yorkshire - TBC			✓			Lincoln Sargeant to follow up and ascertain whether there are issues relating to access to services, especially on an emergency basis
16. Pharmaceutical Needs Assessment for North Yorkshire				✓	✓	
<b>In-depth Project</b>						
17. Dying well and End of Life Care			✓			Report to Health and Wellbeing Board on 17 March 2017. Follow up September.

Other areas to be explored:

- Supporting people living with one or more long term condition
- Online medical advice and prescriptions
- Integration of health and social care – progress to date, principles and outcomes
- Health and social care services in Craven

## Meeting dates 2017/18

<b>Meeting</b>				
Agenda Briefing	20 June 2017 10.30am	19 September 2017 10.30am	12 December 2017 10.30am	13 March 2018 10.30am
Scrutiny of Health Committee	23 June 2017 10.00am	22 September 2017 10.00am	15 December 2017 10.00am	16 March 2018 10.00am
Mid Cycle Briefing	28 July 2017 10.30am	3 November 2017 10.30am	26 January 2018 10.30am	27 April 2018 10.30am