

## **KENT ASSOCIATION OF LOCAL AUTHORITIES**

### **KENT PROTOCOLS FOR NATIONAL HEALTH SERVICE OVERVIEW AND SCRUTINY**

1. These protocols are agreed within a context that assumes **organisationally**:

- the bringing into force of the Health and Social Care Act 2001
- the continued development of partnership working, especially between Social Services and NHS bodies
- the continued existence at District/Borough level of local overview and scrutiny committees concerned with NHS matters
- the continued existence of Community Health Councils or representative organisations operating at sub-county level
- a partnership approach working with not against NHS bodies in the county

2. The protocols are based on the **principles** that:

- Overview and Scrutiny should focus on supporting the improvement of health services to Kent residents.
- Overview and Scrutiny should minimise the additional administrative burdens on local authorities or NHS bodies.
- Overview and Scrutiny agendas need to be developed jointly by the local authorities and the NHS bodies.
- Overview and Scrutiny needs to operate at different levels within Kent;

3. Overview and Scrutiny **structures** will comprise:

#### **Community Health Councils**

To continue as now till replaced by new patient bodies but with more support from local authorities and integration into the Overview and Scrutiny system to pave their way for the way for their successor bodies:

- Dialogue focused on service providers (acute trusts and PCT provider units)

### **District Council Overview and Scrutiny Committees**

To look at local service issues:

- Local co-ordination (or joint committees) to ensure cross-district issues dealt with jointly
- Local KCC Members and CHC representatives to have rights of participation
- Focused on PCTs

### **KCC Health Service Scrutiny Committee**

To look at broad and wide area issues, including from the viewpoint of the County Council's Social Service responsibilities:

- An emphasis on working through themed (topic) reviews conducted by Select Committees (smaller ad hoc groups) including District and Patient members
- DC and CHC representatives to have rights of participation
- Service reconfigurations to be looked at through Select Committees (ad hoc time limited sub-committees including District Council and CHC participation) reporting to the KCC Health Service Scrutiny Committee to consider reference to the Reconfiguration Panel (when the legislation is brought into force)
- Focused on Health Authorities

### **Medway Overview and Scrutiny Committee**

To combine both levels of operation within the Medway area but linked into the co-ordinated system.

## **CO-ORDINATION**

4. Overview and Scrutiny activity at local and Kent level needs free exchange of information and protocols for co-ordination of work and resolution of conflicts. To facilitate this there will be
  - a regular (six-monthly?) meeting of Committee Chairmen and NHS representatives to agree a programme of work across the county and Medway
  - a similar officer forum to support and advise the Chairmen on the work programme and co-ordinate requests for NHS officers to provide papers, information or attend committee meetings
  
5. The KCC Committee membership allows for District and CHC membership:

**(The following three points are proposed for discussion but have yet to be considered by the KCC Health Service Scrutiny Committee)**

- a permanent representation of three District/Borough Members nominated by KALA and two CHC representatives nominated by the CHCs
  - a right for the Chairmen of each District/Borough Overview and Scrutiny Committee and each CHC to attend and speak at the KCC Committee (or send a representative) on a matter particularly affecting that area
  - appointment of members of relevant District Overview and Scrutiny Committees and CHCs to individual topic reviews (agreed through the chairmen's meeting)
6. District Committees will allow local KCC Members and CHC representatives to attend and speak at the Committee.
  
  7. KCC and District members on CHCs will be briefed by and feed back to their appointing Councils.

## **REVIEW PLANNING**

8. Overview and Scrutiny will take the form of a programme of reviews. Each review should be preceded by a Review Plan discussed within the officer forum and agreed with the relevant NHS bodies . Any disagreement should be considered by the relevant Overview and Scrutiny Committee after the NHS representative has attended the Committee to express the NHS view and answer member questions.
  
9. The Review Plan should:
  - set the terms of reference for the review including the general nature of the expected outcome
  - set an approximate timetable of meetings and a reporting date
  - state the officers supporting the review within the local authority, the NHS and the CHCs and estimate the time commitment required of them
  - state the main witnesses and information sources expected to be involved

## **REVIEW ADMINISTRATION**

10. The arrangements for meetings of Overview and Scrutiny Committees shall ensure that:
  - Dates for witnesses to attend Committee meetings are agreed with witnesses as far in advance as possible
  - NHS Chief Executives and other local authorities' Chief Officers arrange for officers chosen by them to attend to give evidence on the identified topics (subject to any provision to be made in statutory regulations)
  - Advance notice is given of the areas to be covered in questioning
  - Information is wherever possible distributed to the Committee in writing before the witness attends

## MEETING PROTOCOLS

11. All Overview and Scrutiny Committees should incorporate in their procedural rules or otherwise ensure that:

- Committee Members should endeavour not to request detailed information from officers of the NHS or another local authority at meetings of the Committee, unless they have given prior notice through the Clerk. If, in the course of question and answer at a meeting of Committee, it becomes apparent that further information would be useful, the officer being questioned may be required to submit it in writing to members of the Committee through the Clerk.
- In the course of questioning at meetings, officers of the NHS or another local authority may decline to give information or respond to questions on the ground that it is more appropriate that the question be directed to a more senior officer or Authority Member.
- Officers of the NHS or another local authority may decline to answer questions in an open session of the Committee on the grounds that the answer might disclose information which would be exempt or confidential as defined in the Access to Information Act 1985. In that event, the Committee may resolve to exclude the media and public in order that the question may be answered in private sessions.
- Committees may not criticise or adversely comment on any individual officer of another local authority or of an NHS body by name.

## REPORTING

12. All local authorities should ensure that:

- A record is made of the main statements of witnesses appearing before the Committee and agreed with the witness prior to publication or use by the Committee (Committee meetings may be electronically recorded)
- Drafts of Committee reports and recommendations should be made available for comment by the relevant NHS body (or local authority) whose operations might be commented on and any adverse comments or concerns reported to the Committee before the final report is published
- The Chief Executive of any NHS body and/or the Chief Officer of any other local authority involved with the review is given advance notice of the date of publication of the report and consulted on the text of any accompanying press release
- Reports should include an agreed timetable for any NHS body and/or other local authority involved to publish a response to the report's recommendations once confirmed by the appropriate Overview and Scrutiny Committee

## SERVICE RECONFIGURATIONS

13. NHS bodies remain responsible for public and other consultation on service reconfiguration proposals.
14. The intention to carry out a consultation will be discussed in the officer forum.
15. The KCC Health Service Scrutiny Committee will consult District/Borough Councils and CHCs for the areas affected by each proposal on whether to:
  - consider the matter at a full meeting of the Committee
  - set up a KCC Select Committee to consider the proposal
  - request a District/Borough Overview and Scrutiny Committee to consider the proposal
16. If a Select Committee is established or a District/Borough Overview and Scrutiny Committee requested to carry out a review:
  - paragraphs 9 -12 above shall apply to its work programme and proceedings
  - the review plan shall as far as possible be integrated with the NHS body's consultation programme
  - consideration shall be given to:-
    - including one or more members of District/Borough Councils on the Select Committee or KCC members on the District/Borough Overview and Scrutiny Committee
    - including CHC members on the Committee

- other arrangements for ensuring all local authorities and CHCs may express their views and seek information on the proposal
  
- the review report shall be submitted to the KCC Health Services Scrutiny Committee who will consider the recommendations together with any response by the NHS body and decide whether to refer the proposal to the national Reconfiguration panel