JOINT HEALTH SCRUTINY COMMITTEE - 8TH OCTOBER 2010

NHS CONSULTATION FRAMEWORK

REPORT OF SCRUTINY MANAGER, TELFORD AND WREKIN COUNCIL

1.0 PURPOSE

1.1 To enable Members to consider a framework that sets out 4 levels of consultation in relation to changes to NHS services.

2.0 RECOMMENDATIONS

2.1 Members consider the consultation framework outlined in Section 5.2 of the report.

3.0 PREVIOUS MINUTES

3.1 N/A

4.0 BACKGROUND

- 4.1 The Health and Social Care Act (2001) sets out the role of Health Overview and Scrutiny Committees and the requirements on the NHS in relation to consultation on changes to services. (This was further strengthened by the NHS Act (2006) and the Local Government and Public Involvement in Health Act (2007)).
- 4.2 The requirements relating to the Health Overview and Scrutiny Committee are:
 - Where there is a proposed substantial variation or development in service NHS bodies are required to consult with the relevant health Overview and Scrutiny Committee.
 - Where a report or recommendation is made to an NHS body, that body must respond in 28 days where a reply is requested.
 - Where a committee feels that a consultation, or the reasons given for an exception to the consultation are inadequate or where they feel the proposals are not in the interest of local health services it may refer the matter to the Secretary of State for Health.

(Reference: Centre for Public Scrutiny: Pulling it all together, A guide to legislation on overview and scrutiny in English Local Authorities April 2010)

- 4.3 The Regulations for overview and scrutiny do not define the term 'substantial'. The guidance on health scrutiny from the Department of Health states that local NHS bodies should aim to reach a local understanding or definition with their Health Overview and Scrutiny Committee and that this should be informed by discussion with other key stakeholders. However, the guidance does state that when considering if a proposal is substantial NHS bodies, committees and stakeholders should consider generally the impact of the change upon patients, carers and the public who use or have potential to use the service. More specifically they should take into account:
 - Changes in accessibility to the service for example both reductions and increases in a particular site or changes in opening times for a particular clinic
 - Impact of the proposal on the wider community and other services including economic impact, transport and regeneration
 - Patients affected changes may affect the whole population or a small group. If it affects a small groups this might still be regarded as substantial.
 - Methods of service delivery altering the way a service is delivered may be a substantial change for example moving a particular service into community setting rather than being entirely hospital based
- 4.4 Where proposals for changes to health services relate to more than one local authority area a Joint Health Overview and Scrutiny Committee may be established.

5. 0 PROPOSED CONSULTATION FRAMEWORK

- 5.1 Under the Scrutiny arrangements introduced in June 2010 the Active Lifestyles, Leisure and Culture Scrutiny Committee undertakes the Health Scrutiny function which includes the work of the Joint Health Scrutiny Committee with Shropshire Council.
- 5.2 Members of the Committee are asked to consider adopting a framework for NHS consultations. The framework is set out below and identifies 4 levels of consultation the committee may wish to apply to proposed changes to NHS services:
 - Level 1- the change in service proposed is minor or there are immediate risk to the safety and welfare of patient or staff.
 Consultation is not required but patients should be involved in the development of the service and the impact on other services and staff should be considered.

- Level 2 the change in service is not substantial but some consultation with patients is required regarding the proposed change and the impact on other services and staff should be considered.
- Level 3 the change in service proposed is a substantial variation or development in service and requires a statutory 3 month consultation.
- Level 4 the proposed change in service is a significant change in service but the decision has been made at a national level and therefore local consultation on whether the change should be implemented is not necessary. However the Committee may expect the local NHS organisations to demonstrate that patients and the public will be involved in how the change will be implemented.
- 5.3 Members are asked to consider the framework outlined above and agree if discussions should be held with the Primary Care Trusts and SaTH to apply this framework locally.

6.0 EQUAL OPPORTUNITIES

6.1 Members would consider the impact of proposed NHS service changes across communities and for minority groups.

7.0 ENVIRONMENTAL IMPACT

7.1 There are no environmental impacts directly arising as a result of this report.

8.0 **LEGAL COMMENT**

- 8.1 The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 require NHS bodies to consult health OSC when proposing substantial developments or variations in health services.
- 8.2 The 2002 Regulations also provide that a health OSC can review and scrutinise any matter relating to the planning and delivery of health services in its area.

9.0 LINKS WITH CORPORATE PRIORITIES

9.1 Proposed changes to NHS services may have an impact on a number of corporate priorities but the main connection will be through Adult Care and Support.

10.0 FINANCIAL IMPLICATIONS

10.1 There are no financial implications for the Council arising directly from this report.

11.0 OPPORTUNITIES AND RISKS

11.1 Health Scrutiny has real influence on the services for local people. This is most effective when Committees take a constructive but challenging approach to the role.

12.0 WARD IMPLICATIONS

12.0 The framework would apply to proposed changes in health services across both local authority areas.

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