

HEALTH SCRUTINY IN MIDDLESBROUGH

Health Scrutiny Panel – 30 June 2015
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Underlying principles – national guidance for Health Scrutiny

- * The primary aim is to **strengthen the voice of local people** in the commissioning and delivery of health services.
- * Health scrutiny has a **strategic role** in taking an overview of how well integration of health, public health and social care is working.
- * Health scrutiny **proactively seeks and challenges information** about the performance of local health services and institutions.
- * Health scrutiny functions must be **discharged in an open and transparent way**.

Legislation and guidance

- **Duty on local authorities** to have arrangements in place to be consulted by NHS on matters of *substantial* variation or development
 - No national definition of 'substantial'*
 - Local determination*
 - Take into account equity, access, impact of change*
- **Duty** to carry out 'local resolution' before a referral is made
- **Duty** to establish joint committee when a substantial variation/development crosses boundaries
- **Duty** to respond to referrals from local Healthwatch

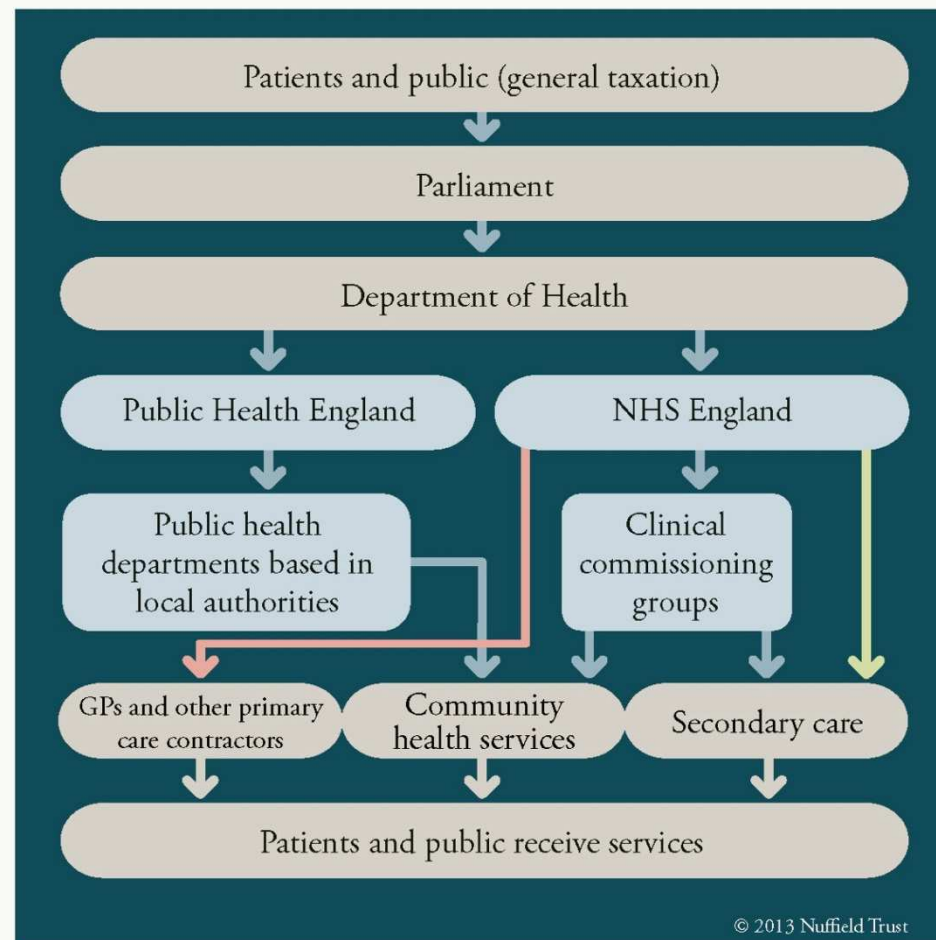
Powers and Duties: Local Authorities

- **Power** to delegate role to a committee
- **Power** to scrutinise health services (NHS funded)
- **Power** to require information including financial information
- **Power** to require attendance at meetings (NHS and independent providers funded by NHS)
- **Power** to make recommendations to NHS and independent providers
- **Power** to establish joint committees
- **Power** to refer issues to the Secretary of State on the basis of:
 - ✓ insufficient consultation
 - ✓ not in the interests of health services

Duties on NHS bodies and ‘all relevant health service providers’

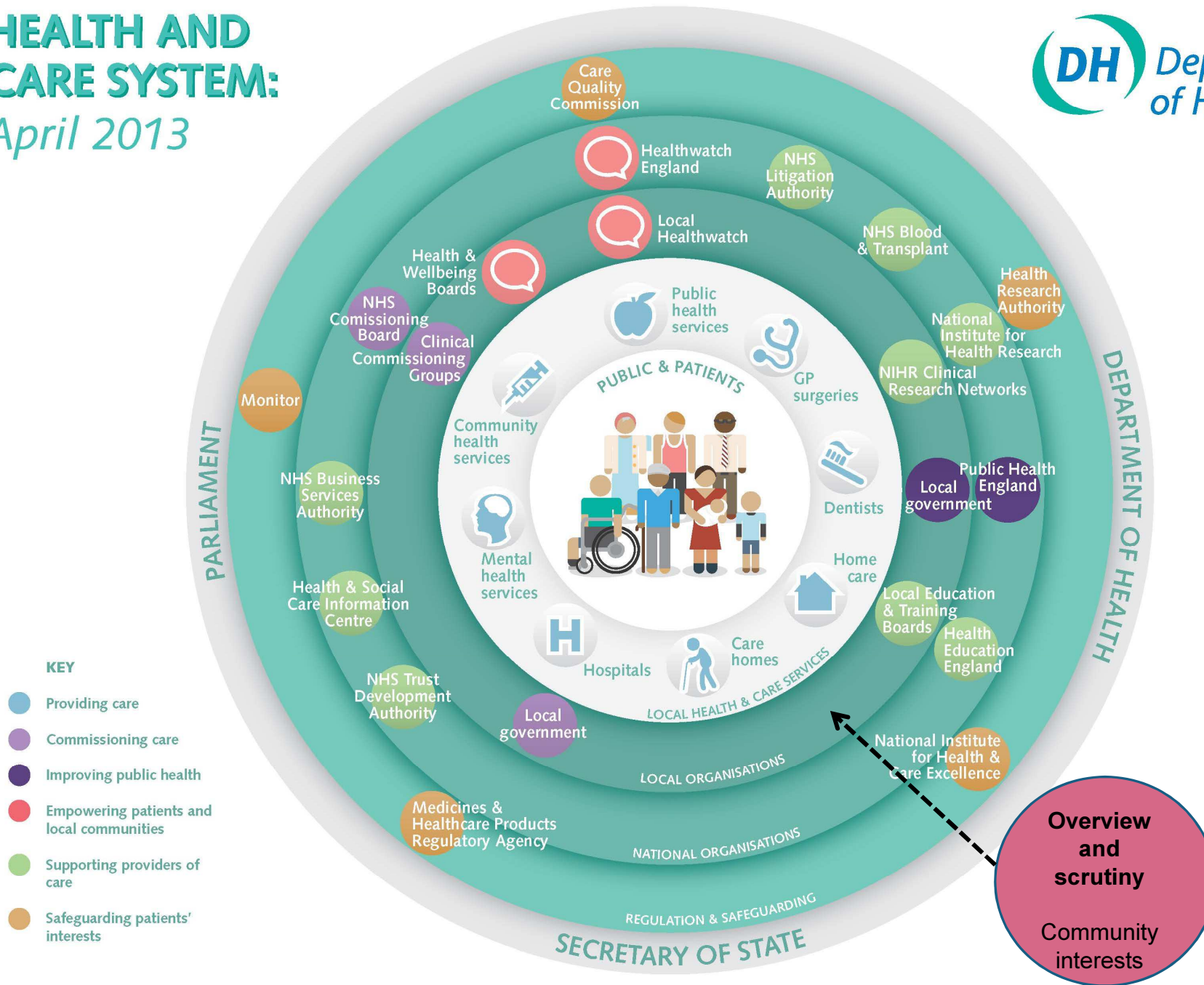
- **Duty** to consult all relevant local authorities on issues of substantial variation or development
- Provide information about the timetable including when decisions will be made
- *This duty is placed on the organisation instigating or leading the proposals for change.*
- *Consultation is additional to discussions with local authority services, e.g. Adult Social Care*
- **Duty** to respond to requests for information
- **Duty** to respond to requests for attendance at meetings
- **Duty** to respond to recommendations
- *The NHS is also subject to other duties to involve users of services and/or their representative in the commissioning and provision of services*

How the NHS is funded



- New organisation
- Funding
- Service provision
- Holds contracts directly
- Direct commissioning of specialised services e.g. specialised mental health services

HEALTH AND CARE SYSTEM: April 2013



KEY

- Providing care
- Commissioning care
- Improving public health
- Empowering patients and local communities
- Supporting providers of care
- Safeguarding patients' interests

How people can influence their health and social care services

