

SUPPLEMENTARY REPORT

7. REPORT OF THE CABINET

The following matters were considered by Cabinet at its meeting on 23 November 2016 and Cabinet's recommendations are as set out below.

Cabinet Report No. 1	Corporate Plan 2016-2020
	<p>The Cabinet noted the comments of the Scrutiny Coordinating Committee recognising the importance of the Corporate Plan and fully supporting its formal adoption. The Committee also recommended that the key priorities contained within the Corporate Plan are considered and adopted by the relevant thematic Scrutiny Committee.</p> <p>Accordingly, the Cabinet recommends the Council to approve the Corporate Plan 2016-20120.</p>
Cabinet Report No. 2	Capital Programme Second Capital Review 2016/2017 (Including Treasury Management)
	<p>The Cabinet noted the comments of the Scrutiny Coordinating Committee which noted the report and was satisfied with the proposed variation to the Capital Programme.</p> <p>Accordingly, the Cabinet recommends the Council to note the proposed variation to the Capital Programme for 2016/2017 to include additional schemes with an estimated cost in excess of £250,000. In relation to the Treasury Management Strategy and Prudential Indicators, the Cabinet recommended the endorsement of Audit and Governance Committee's approval of a change to the Council's Lending List criteria.</p>

Cabinet Report No. 3	Revenue Budget Second Review 2016/2017
	<p>The Cabinet noted the comments of the Scrutiny Coordinating Committee which noted the report and was satisfied with the proposal for the amounts identified, along with any further underspends arising from unspent contingencies and salaries savings at the end of 2016/2017 to support the overall 2016/2017 position and meet the transitional costs arising in 2016/2017 and future years.</p> <p>Accordingly, the Cabinet recommends the Council to approve the extract of the budgetary transfer detailed in the Cabinet report to Council.</p>
Cabinet Report No. 4	Youth Justice Plan 2016/2017
	<p>The Cabinet noted the comments of the Children, Education and Skills Scrutiny Committee which welcomed the Plan but in relation to the 'Workforce and Specialist Resources' paragraph expressed concern at the potential reduction in core staff and sought assurances that this would not adversely affect service delivery. The Committee agreed to make this the subject of further study. Notwithstanding this, the Committee supported the intention of the Plan to prevent offending and re-offending by young people and supported the Cabinet's recommendation to submit the Plan to Council for approval.</p> <p>Accordingly, the Cabinet recommends the Council to approve the Youth Justice Plan 2016/2017 for publication and distribution.</p>

Cabinet Report No. 5	Establishment of a Health Scrutiny Joint Committee between South Tyneside and Sunderland Local Authorities
	<p>The Cabinet resolved to recommend Council to :-</p> <ul style="list-style-type: none"><li data-bbox="762 450 1377 813">(i) consider and approve the protocol and terms of reference for Health Scrutiny Joint Committee between South Tyneside and Sunderland Local Authorities for the establishment of a joint committee for the purpose of consultation in relation to reconfiguration proposals of South Tyneside and Sunderland Health Care Group; and<li data-bbox="762 853 1377 992">(ii) appoint seven Members to serve on the Health Scrutiny Joint Committee between South Tyneside and Sunderland Local Authorities.

CABINET

23 NOVEMBER 2016

ESTABLISHMENT OF A HEALTH SCRUTINY JOINT COMMITTEE BETWEEN SOUTH TYNESIDE AND SUNDERLAND LOCAL AUTHORITIES

Joint report of the Director of Policy and Partnerships and Head of Law and Governance

1. Purpose of the Report

- 1.1 The report outlines the proposals, including a protocol and terms of reference for the establishment and operation of a Health Scrutiny Joint Committee between Sunderland and South Tyneside Local Authorities.

2. Description of Decision (Recommendations)

- 2.1 To recommend Council

- (1) to establish a Health Scrutiny Joint Committee with South Tyneside Council for the purpose of consultation in relation to reconfiguration proposals of South Tyneside and Sunderland Health Care Group and to approve the proposed protocol and terms of reference for the Joint Committee, as set out in the report.
- (2) to appoint the Council's representatives to the Joint Committee.

3. Background

- 3.1 City Hospitals Sunderland NHS Foundation Trust and South Tyneside NHS Foundation Trust, between them serve a population of 430,000 people across a large geographical area south of Tyne & Wear and have for many years collaborated to jointly provide some clinical services. Both organisations now believe that to protect the future sustainability of healthcare across both communities, requires more significant transformation leading to greater integration of services, and that this needs to be delivered at speed and scale.
- 3.2 South Tyneside and Sunderland Foundation Trusts have agreed to form and implement a health alliance, working together as "South Tyneside and Sunderland Healthcare Group", embarking on a programme of reconfiguring services across South of Tyne delivering the best patient outcomes.
- 3.3 The proposals were announced on 1st March 2016 and both Sunderland and South Tyneside Overview and Scrutiny functions have held a number of informal joint meetings to discuss in more detail the proposals and the implementation plans of the trusts.

4. Current Position

- 4.1 The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 requires local authorities to appoint joint committees where a relevant NHS body or health service provider consults more than one local authority health scrutiny function in relation to substantial reconfiguration proposals.
- 4.2 It is only the joint committee which may respond to the consultation, rather than the individual local authority health scrutiny functions and only the joint committee will have the power to require the provision of information by the relevant NHS body in relation to the proposal, or the attendance of members or employees of the relevant NHS body to answer questions connected to the consultation.
- 4.3 It should be noted that the restrictions need not apply to the authorities' respective powers to make referrals to the Secretary of State in connection with the proposals, and that the protocol reserves this power of referral to each of the constituent authorities individually.
- 4.4 The protocol and terms of reference for the establishment of a Health Scrutiny Joint Committee between South Tyneside and Sunderland are set out at Appendix 1 of this report.
- 4.5 It is proposed that the Joint Committee arrangements be reviewed after 3 years' operation in order to consider whether they are still required.

5. Reasons for the Decision

- 5.1 The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 requires local authorities to appoint joint committees where a relevant NHS body or health service provider consults more than one local authority health scrutiny function in relation to substantial reconfiguration proposals.

6. Alternative Options

- 6.1 The decision is in line with local government regulations and as such there are no alternatives to be considered.

7. Impact Analysis

Equalities

- 7.1 Any equality issues will be addressed by the Health Scrutiny Joint Committee and relevant NHS bodies throughout the consultation process and life of the joint committee.

Privacy Impact Assessment

- 7.2 The proposals have no immediate additional implications for the protection of privacy of the public.

Sustainability

7.3 The proposals have no immediate implications for sustainability.

Reduction of Crime & Disorder - Community Cohesion / Social Inclusion

7.4 The proposals have no immediate implications in terms of reduction of crime and disorder.

8. Relevant Considerations / Consultations

8.1 There are no additional considerations or consultations in relation to this report.

9. Background Papers

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013

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**Protocol for the
Health Scrutiny Joint Committee**

1. This protocol provides a framework under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 for considering and providing a formal consultation response in relation to proposals affecting the population covered by South Tyneside and Sunderland Councils, particularly those considered to be a “significant development or substantial variation” as defined in local protocols, in particular:
 - (a) The Shared Sustainability and Transformation Plan for Northumberland, Tyne & Wear and North Durham and the Local Health and Care Economy Plan for South Tyneside and Sunderland.
 - (b) The service change proposals arising from the Clinical Services Review Programme being undertaken by South Tyneside and Sunderland NHS Partnership. This will include seeking evidence of the economic, social and health impacts of residents in both Boroughs and how any shortfalls in these areas will be mitigated in carrying out service change.
2. The terms of reference of the Health Scrutiny Joint Committee is attached.
3. The Health Scrutiny Joint Committee formed for the purpose of the consultation outlined at paragraph 1 will, following approval of this protocol at its first meeting, circulate copies of the same to:-

Sunderland Council and South Tyneside Council

(“the constituent authorities”)

South Tyneside CCG

Sunderland CCG

South Tyneside and Sunderland NHS Partnership

NHS North of England Commissioning Support

(“the relevant NHS Bodies”)

Health Scrutiny Joint Committee
4. A Health Joint Scrutiny Committee (“the Joint Committee”) comprising Sunderland Council South Tyneside Council, (“the constituent authorities”) has been established in accordance with the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 for the purposes of formal consultation by the relevant NHS Bodies in relation to the matters referred to at paragraphs 1(a) of this protocol, and in particular in order to be able to:-

- i. make comments on the proposals consulted on, to the relevant NHS Bodies under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013;
- ii. require the relevant NHS Bodies to provide information about the proposals under the Regulations; or
- iii. require an officer of the relevant NHS Bodies to attend before it under the Regulations to answer such questions as appear to it to be necessary for the discharge of its functions in connection with the consultation.
- iv. make recommendations to the relevant NHS Bodies and expect a response within 28 days.

Membership

5. The Joint Committee will consist of equal representation, with 7 representatives to be appointed from the scrutiny committees of each of the constituent authorities. There will also be a Healthwatch representative from both South Tyneside and Sunderland in a non-voting capacity.
6. The term of office for representatives will be for the period from the date of their appointment by their constituent authorities until their relevant authority's next annual council meeting. If a representative ceases to be a Councillor, or wishes to resign from the Joint Committee, the relevant council shall inform the joint committee secretariat and the replacement representative shall serve for the remainder of the original representative's term of office.
7. To ensure that the operation of the Joint Committee is consistent with the Constitutions of the constituent authorities, those authorities operating a substitution system shall be entitled to nominate substitutes.
8. The Joint Committee may ask individuals to assist it (in a non-voting capacity) and may ask independent professionals to advise it for the purposes of the consultation process.
9. The quorum for meetings of the Joint Committee shall be a minimum of 3 member representatives from each of the constituent authorities.

Chair and Vice-Chair

10. The Chair of the Joint Committee shall rotate each meeting between a named Member representative from South Tyneside Council and Sunderland Council. When not chairing the meeting this Member representative will assume the position of Vice Chair. The Chair will not have a second or casting vote.
11. If the agreed Chair and Vice-Chair are absent from a meeting, the Joint Committee shall appoint a member to chair that meeting from the representatives present who are members of the same constituent Council as the Chair.

Terms of Reference

12. The Joint Committee will be the formal consultee under the Regulations and the Directions for the purposes of the consultation by the relevant NHS Bodies concerning those matters outlined at paragraphs 1(a) and will have the functions specified at paragraphs 4(a) - (c) inclusively of this protocol. Terms of reference are set out at Appendix 1.

Administration

13. Meetings shall be held at the times, dates and places determined by the Chair in consultation with each of the constituent authorities.
14. Agendas for meetings shall be determined by the secretariat (rotation between South Tyneside Council and Sunderland Council in line with rotation of Chair) in consultation with the Chair.
15. Notice of meetings of the Joint Committee will be sent to each member of the Joint Committee at least 5 clear working days before the date of the meeting and also to the Chair of the constituent authorities' relevant overview and scrutiny committees (for information). Notices of meetings will include the agenda and papers for meetings. Papers "to follow" should be avoided where possible.
16. Minutes of meetings will be supplied to each member of the Joint Committee and to the Chairs of the constituent authorities' relevant overview and scrutiny committees (for information) and shall be confirmed at the next meeting of the Joint Committee.

Final Reports and Consultation Response

17. The Joint Committee is independent of its constituent councils, executives and political groups and this independence should not be compromised by any member, officer or relevant NHS bodies. The Joint Committee will send copies of its final reports and formal consultation responses to the relevant NHS Bodies and the constituent authorities.
18. The primary objectives of the Joint Committee will be to reach consensus and will work within the relevant timescales to achieve this. However, where there are any aspects of a consultation on which there is no consensus, the Joint Committee's final report and formal consultation response will include, in full, the views of all of the constituent authorities, with the specific reasons for those views, regarding those areas where there is no consensus, as well as the constituent authorities' views in relation to those matters where there is a consensus.

Principles for joint health scrutiny

19. The constituent authorities and the relevant NHS Bodies will be willing to share knowledge, respond to requests for information and carry out their duties in an atmosphere of courtesy and respect in accordance with their codes of conduct. Personal and prejudicial and/or disclosable pecuniary interests will be declared in all cases in accordance with the code of conduct and Localism Act 2011.
20. The Joint Committee's procedures will be open and transparent in accordance with the Local Government Act 1972 and the Access to Information Act 1985 and

meetings will be held in public. Only information that is expressly defined in regulations to be confidential or exempt from publication will be able to be considered in private. Papers of the Joint Committee may be posted on the websites of the constituent authorities as determined by them.

21. Communication with the media in connection with the Joint Committee's views will be handled in conjunction with each of the constituent local authorities' press officers.

HEALTH SCRUTINY JOINT COMMITTEE

TERMS OF REFERENCE

1. To consider the proposals affecting the population covered by South Tyneside and Sunderland Councils, in particular:
 - The Shared Sustainability and Transformation Plan for Northumberland, Tyne & Wear and North Durham and the Local Health and Care Economy Plans for South Tyneside and Sunderland.
 - The service change proposals arising from the Clinical Services Review Programme being undertaken by South Tyneside and Sunderland NHS Partnership. This will include seeking evidence of the economic, social and health impacts of residents in both Boroughs and how any shortfalls in these areas will be mitigated in carrying out service change.
2. The Joint Committee will as part of this process consider the following consultation questions as contained in the public consultation documents,
3. In order to be able to formulate and provide views to the relevant NHS bodies on the matters outlined in paragraphs 1 and 2 above, the Joint Committee may:-
 - a) require the relevant NHS Bodies to provide information about the proposals the subject of the consultation with the constituent local authorities and the Joint Committee. information should be provided within 3 working days of the meeting arranged to consider it; and
 - b) require an officer of the relevant NHS Bodies to attend meetings of the Joint Committee, in order to answer such questions as appear to them to be necessary for the discharge of their functions in connection with the consultation.
4. To formulate a final report and formal consultation response within the consultation and decision making timetable to the relevant NHS Bodies on the matters referred to at paragraphs 1 and 2 above, in accordance with the protocol for the Health Scrutiny Joint Committee and the consultation timetable established by the relevant NHS Bodies.
5. To ensure the formal consultation response of the Joint Committee includes, in full, the views of all of the constituent authorities, with the specific reasons for those views, regarding those areas where there is no consensus, as well as the constituent authorities' views in relation to those matters where there is a consensus.
6. Each constituent Authority will retain their powers of referral to the Secretary of State for Health.

