

OPEN

Adults and Health Committee

24 June 2024

Cheshire and Merseyside Joint Health Scrutiny Arrangements Protocol

**Report of: Helen Charlesworth-May, Executive Director Adults,
Health and Integration**

Report Reference No: AH/08/24-25

Ward(s) Affected: All

Purpose of Report

- 1 This report seeks approval from the Adults and Health Committee to recommend to Full Council approval of a revised Protocol for Joint Health Scrutiny Arrangements for Cheshire and Merseyside.

Executive Summary

- 2 In July 2022, Full Council agreed the establishment of the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny and approved the Joint Health Scrutiny Protocol.
- 3 Following legislative changes, the Health Scrutiny Committee no longer has the power to refer substantial variations in health service directly to the Secretary of State for Health. These changes came into effect at the end of January 2024. This has necessitated the requirement for the protocol to be revised and for it to be approved by all nine local authority areas across Cheshire and Merseyside. Some text has also been added to the protocol on the ability to request a “call-in” by the Health Secretary.
- 4 In order for Cheshire East to continue to play a role in joint health scrutiny arrangements, it is recommended that the Council approve the attached revised Protocol for the Joint Health Scrutiny Arrangements in Cheshire and Merseyside **(Appendix 1)**.

RECOMMENDATIONS

The Adults and Health Committee is recommended to:

1. Agree that the revised Protocol for Joint Health Scrutiny Arrangements for Cheshire and Merseyside, as attached to the report, be recommended to Full Council for approval.

Background

- 5 Where health providers, such as NHS Hospital Trusts, propose changes in the provision of service(s), health providers are obliged to consult with local health overview and scrutiny committees as to whether the changes are deemed to be “substantial”.
- 6 The term “substantial” is not defined in legislation. However, it is generally considered that a substantial change or variation to a health service is one that has a major impact on services experienced by patients and/or future patients. In considering whether a proposal is substantial, local authorities are encouraged to consider the following criteria:-
 - Changes in accessibility of services – any proposal which involves the withdrawal or change of patient or diagnostic facilities for one or more speciality from the same location.
 - Impact on the wider community and other services – this could include economic impact, transport, regeneration issues.
 - Patients affected – changes may affect the whole population, or a small group. If changes affect a small group, the proposal may still be regarded as substantial, particularly if patients need to continue accessing that service for many years.
 - Methods of service delivery – altering the way a service is delivered may be a substantial change, e.g. Moving a particular service into community settings rather than being entirely hospital based;
 - Potential level of public interest – proposals that are likely to generate a significant level of public interest in view of their likely impact.
- 7 Where a proposal impacts on more than one local authority area, there is a requirement for local authorities to form a joint health scrutiny committee, to consider the proposals in detail and, where appropriate, to make recommendations.
- 8 There are nine local authority areas across Cheshire and Merseyside, as follows:-

- Cheshire East Council
 - Cheshire West and Chester Council
 - Halton Borough Council
 - Knowsley Council
 - Liverpool City Council
 - St. Helens Metropolitan Borough Council
 - Sefton Council
 - Warrington Borough Council
 - Wirral Borough Council
- 9 The Joint Health Scrutiny Arrangements protocol has been developed as a framework for the operation of joint health scrutiny arrangements across the local authorities of Cheshire and Merseyside.
- 10 The Cheshire and Merseyside Joint Health Scrutiny Protocol was first adopted by all nine local authorities in 2014. It covers both mandatory and discretionary joint health scrutiny. It was last reviewed in 2022 to reflect the introduction of the new Joint Health Scrutiny Committee. Since that time, legislative change to the powers of Health Scrutiny Committees to refer health service reconfigurations directly to the Secretary of State for Health came into effect at the end of January 2024. This coincided with the issue of updated guidance on such matters to both local authorities and the NHS.

Agenda Item Consultation and Engagement

- 11 The Monitoring Officer and Executive Director of Adults, Health and Integration has been consulted on the revised Protocol.
- 12 Discussions have taken place between officers responsible for health scrutiny arrangements across Cheshire and Merseyside.
- 13 The Cheshire East Scrutiny Committee will receive the revised Protocol for noting at its meeting on Thursday 27 June 2024.

Reasons for Recommendations

- 14 The Protocol has been revised to take into account recent statutory changes and requires approval by all nine local authorities across Cheshire and Merseyside.

- 15 Health scrutiny regulations require the establishment of joint health scrutiny committees where more than one local authority's health scrutiny arrangements consider a proposed change or development in NHS services to be "substantial" in terms of the impact on its area.
- 16 Agreeing the protocol will ensure that any future considerations of substantial health variations that impact on Cheshire East residents will be taken into account.

Other Options Considered

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Option	Impact	Risk
Do nothing	Future considerations of substantial health variations that impact on Cheshire East residents may not be taken into account.	Refusal to approve the revised protocol could result in difficulties for Cheshire East representatives to be part of joint health arrangements, particularly if other Cheshire and Merseyside local authorities agree the protocol.

Implications and Comments

Monitoring Officer/Legal

- 18 The Joint Health Scrutiny Protocol was last reviewed in 2022 to reflect the introduction of the new Joint Health Scrutiny Committee. Since that time, legislative change to the ability of Health Scrutiny Committees to refer health service reconfigurations directly to the Secretary of State for Health came into effect at the end of January 2024. This coincided with the issue of updated guidance on such matters to both local authorities and the NHS.
- 19 It is therefore recognised that a further review of the Protocol is needed to ensure that the Joint Committee complies with changes to legislation. The proposed amendments are in line with the changes to the referrals and call-in powers of the Secretary of State.

Section 151 Officer/Finance

- 20 There are no financial implications, or changes required to the MTFs as a result of the adoption of the revised Protocol.
- 21 Each of the nine Local Authorities affected currently support the Joint Health Scrutiny Committee by contributing a total of £10,000 to the Host Authority.

Policy

- 22 This report and its recommendations are within the Council's existing policy framework, and it supports the priorities set out in the Corporate Plan.

An open and enabling organisation	A council which empowers and cares about people	A thriving and sustainable place

Equality, Diversity and Inclusion

- 23 There are no direct equality implications arising from the recommendations of this report, but the work of the joint committee will undoubtedly have such implications.

Human Resources

- 24 There are no human resources implications of this report.

Risk Management

- 25 Failure to adopt the revised Protocol of the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee would deprive the Council of having a voice in respect of joint health scrutiny matters at a regional level.

Rural Communities

- 26 There are no direct implications for rural communities as a result of this report.

Children and Young People including Cared for Children, care leavers and Children with special educational needs and disabilities (SEND)

- 27 There are no direct implications for children and young people/cared for children which arise from the recommendations of this report.

Public Health

- 28 Whilst the work of the joint health scrutiny committee is directly focussed upon public health matters, there are no direct public health implications arising from the recommendations of this report. *Climate Change*

Climate Change

- 29 There are no direct implications for climate change as a result of this report.

Access to Information	
Contact Officer:	Brian Reed Head of Governance and Democratic Services
Appendices:	Appendix 1 – Revised Joint Health Scrutiny Protocol
Background Papers:	N/A