SCRUTINY BOARD (HEALTH)

HEALTH PROPOSALS WORKING GROUP

DRAFT TERMS OF REFERENCE

1.0 Background

- 1.1 The legislative background regarding scrutiny's consideration of NHS proposals for changes to local health services is as follows:-
 - ➤ The Health and Social Care Act, 2001, (the Act) sets out a series of statutory requirements for the NHS in relation to patient and public involvement.
 - Section 11 of the Act places a duty on the NHS to involve and consult patients and the public in planning services, developing and considering proposals for changes in the way those services are provided, and in decisions that affect how those services operate.
 - Section 7 of the Act requires NHS organisations to consult the Scrutiny Board (Health and Adult Social Care) on any proposal for a **substantial** development or variation to health services.
 - The Act further provides powers for Scrutiny Board (Health and Adult Social Care) to refer issues, on which they have been consulted under the "substantial variation" clause, to the Secretary of State for Health either where they believe that consultation with patients, the public and other stakeholders has not been satisfactory or where they consider that a proposal of an NHS body is not in the interests of the health service in the area.

2.0 Scope

- 2.1 It is widely acknowledged that the definition of 'substantial' development or variation of health services is subjective, with proposals often open to interpretation.
- 2.2 The purpose of the Working Group is to allow local NHS bodies to inform Scrutiny of future proposals for service changes at an early stage to allow the Working Group to discuss and agree the status of such proposals according to the following table:-

Degree of variation	Colour code	Contact with Scrutiny
Substantial variation	Red	Consult
(e.g. change of site of highly		
specialist service)		
Significant change	Orange	Inform
(e.g. change in opening times)		
Minor change	Yellow	Inform
(e.g. change of location within		
same hospital site)		
Ongoing improvement	Green	No
(e.g. redesign of patient		
information leaflet)		

- 2.3 However, as the statutory duty to consider substantial changes will remain with the full Scrutiny Board, the remit of the Working Group will be to:
 - ➤ Agree whether a proposal amounts to a substantial variation and needs to be considered by the full Board.
 - > Consider whether the Trust's plans for consultation with patients, the public and other stakeholders seems satisfactory.
 - Consider whether the proposal is in the interests of the health service in the area.
- 2.4 In the case of substantial changes, the view of the Working Group on bullet points two and three will assist the full Board in coming to a decision about whether further scrutiny is necessary.

3.0 Frequency of meetings

- 3.1 It is initially proposed that the Working Group will meet on a bi-monthly basis, commencing in September 2008.
- 3.2 However, it is planned that the Working Group will adopt a flexible approach to meeting dates and, as such, may choose to meet outside of the bi-monthly timetable.

4.0 Membership

- 4.1 The membership of the Health Proposals Working Group for the duration of the current municipal year (2008/09) is as follows:
 - > Councillor Pauleen Grahame
 - Councillor Andrea McKenna
 - Councillor Judith Chapman

5.0 Key stakeholders

- 5.1 The following key stakeholders have been identified as likely contributors to the Working Group:
 - Leeds Primary Care Trust (PCT)
 - Leeds Teaching Hospitals NHS Trust (LTHP)
 - Leeds Partnership Foundation Trust (LPFT)
 - Director of Adult Social Services

6.0 Monitoring arrangements

6.1 The full Scrutiny Board (Health) will be kept appraised of the activity of the Working Group and regular updates will be provided.

July 2008