

Report of the Head of Democratic Services

Report to West Yorkshire Joint Health Overview and Scrutiny Committee

Date: 18 February 2020

Subject: West Yorkshire and Harrogate Health and Care Partnership: Assessment and Treatment Centres

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has consultation been carried out?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

1. Purpose of this report

- 1.1 The purpose of this report is to introduce a report from the West Yorkshire and Harrogate Health and Care Partnership (the Partnership) regarding Assessment and Treatment Centres across West Yorkshire. The Partnership report is attached as Appendix 1.
- 1.2 This report also sets out other matters that may be worthy of consideration around the significance of proposed service changes or developments; consultation and engagement and the establishment of mandatory joint committees.

2. Background information

- 2.1 The Mental Health, Learning Disabilities and Autism Programme is one of the local priority programmes of the Partnership.
- 2.2 The Joint Committee considered a report on the Mental Health, Learning Disabilities and Autism Programme at its meeting in February 2019. An extract of the minutes from that meeting are included elsewhere on the agenda. Assessment and Treatment Units formed part of the Joint Committee's discussion at the February 2019 meeting.

3. Main issues

- 3.1 The Partnership report on the Assessment and Treatment Units is attached at Appendix 1.
- 3.2 The attached report seeks to give the Joint Committee :
- (a) An update on West Yorkshire assessment and treatment units (ATU) for people with learning disabilities and on how the Partnership is responding to the national Transforming Care Programme (TCP) trajectories to build the right support in the community and as a consequence reduce the number of beds required.
 - (b) Assurance that the development of the options has involved people who use the service and taken account of the needs of their families.
- 3.3 The attached report also seeks the views of the Joint Committee on the proposals and the next steps including the presentation of the options, scope of further engagement/consultation and the decision making process.
- 3.4 Appropriate representatives from the Partnership have been invited to the meeting to discuss the details presented in the attached report and address questions from the Joint Committee.

Other considerations

- 3.5 Part 4 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (the Regulations) relate to the health scrutiny functions of local authorities and associated responsibilities. The Regulations are available [here](#).
- 3.6 The Regulations are supplemented by the Department of Health (now Department of Health and Social Care) guidance document – Local Authority Health Scrutiny (published June 2014). The guidance document is available here, and Section 4 specifically relates to consultation, including matters around timescales.
- 3.7 In relation to the attached update on Assessment and Treatment Centers, there are a number of potential issues to consider, including the significance of the proposed service change and the subsequent consultation and engagement and the potential establishment of a mandatory joint committee.

Significance of the proposed service change and the associated

- 3.8 It should be recognised there is no definition of what constitutes a ‘substantial’ service change or development. Nonetheless, the guidance suggests the early and on-going involvement of the relevant scrutiny body may assist a NHS body reach a view on the whether a proposal represents a substantial change or development of service.

Consultation and engagement

- 3.9 Where a NHS body has a substantial variation or development of service under consideration, it should formally advise the relevant local authority scrutiny body (Regulation 23) setting out:
- Details of the planned consultation (i.e. start and finish dates).

- The date by which commissioners (or relevant decision-making body) intend to make a decision as to whether or not to proceed with the proposal has not been set out.
- The date by which the relevant scrutiny body should provide comments on the proposals.

3.10 The NHS body should published these details, alongside any subsequent changes to the original timescales. Any changes to the original timescales should also be brought to the attention of the scrutiny body.

3.11 In determining the date by which the relevant scrutiny body should provide comments on the proposals, the guidance suggests health scrutiny should receive details about the outcome of public consultation before it makes a final response – so it can be informed by patient and public opinion – i.e. comments from the scrutiny body should be expected once it has had time to consider the outcome from any public consultation; with such matters being factored into the overall decision-making timetable.

Joint Committees

3.12 Where a NHS body consults more than one local authority on substantial service change / development proposals, such consultation must be undertaken through a (mandatory) Joint Committee (Regulation 30(5)). Upon appointment, only that Joint Committee can then respond to the proposals being consulted on.

3.13 In order to establish a Joint Committee, the relevant NHS body should advise all the relevant local authorities of the intention to consult on a substantial variation / development of service and therefore requiring those affected local authorities to establish a (mandatory) Joint Committee.

3.14 It is important to note that the footprint of the population covered by the proposed changes in ATUs does not match the footprint of the West Yorkshire and Harrogate Health and Care Partnership. Therefore, should a mandatory Joint Committee be required, this would most likely require a different Joint Committee configuration (i.e. West Yorkshire and Barnsley). It should also be noted that guidance provided by the Independent Reconfiguration Panel (IRP) states that, where required, mandatory Joint Committees should be established on the basis of patient flow rather than organisational boundaries.

3.15 It should be further noted that the current West Yorkshire Joint Health Overview and Scrutiny Committee (this Committee) operates as a discretionary joint committee; and has no formal delegated powers to act as a statutory body and respond to any NHS consultation on any substantial service change/ development proposals.

3.16 Each local authority required to form a mandatory JHOSC must agree those arrangements in line with its own governance arrangements. Such process may vary between different local authorities, however a high degree of collaboration and joint working is required between participating local authorities in order to develop matters such as standard terms of reference and the necessary support arrangements for any mandatory Joint Committee.

3.17 The overall process to establish a mandatory JHOSC may be lengthy and is likely to be determined by a number of factors, including the existing meeting arrangements of the necessary decision-making bodies within each participating local authority. However, it is the role of appropriate NHS bodies to provide formal notification of the need to establish a mandatory joint committee before the relevant local authorities can commence the formal processes to ensure the necessary arrangements are put in place.

- 3.18 It is reasonable to consider the time necessary to establish any formal arrangements will also need to be factored into the overall decision-making timetable.

Summary and next steps

- 3.19 The details set out above in paragraphs 3.5 to 3.18 are based on the attached report on Assessment and Treatment Units, which itself will be the subject of more detailed consideration by the Joint Committee at the meeting. Nonetheless, the above details set out some of the relevant matters that may also need to be considered during that discussion.
- 3.20 The next steps may involve the relevant NHS body providing formal notification to those local authorities affected by the proposed changes requesting the establishment of a mandatory joint committee to consider and respond to the proposals.
- 3.21 These matters have been brought to the attention of the NHS bodies considering the Assessment and Treatment Centres proposals; and independent advice on the issues raised may have been sought by the NHS bodies involved.

4. Corporate considerations

4.1 Consultation and engagement

- 4.1.1 Public and service user engagement and consultation are key considerations for the West Yorkshire and Harrogate Health and Care Partnership across all of its programme areas.
- 4.1.2 The attached report also presents an engagement and consultation mapping report in relation to Assessment and Treatment Centres.
- 4.1.3 This report sets out some of the consultation requirements when relevant NHS bodies have substantial service change and/or development proposals under consideration.
- 4.1.4 The Joint Committee may wish to give specific consideration to consultation and engagement aspects in the information provided, alongside any further specific engagement and consultation activity that may be required.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 As set out in the attached report, Assessment and Treatment Centres provide in-patient mental health services to service users with learning disabilities, whose needs cannot be met in a community setting.
- 4.2.2 The Joint Committee may wish to give specific consideration to and explore any equality and diversity implications relevant to particular aspects of the proposals.

4.3 Council policies and best council plan

- 4.3.1 No specific implications have been identified as part of this report.
- 4.3.2 The Joint Committee may wish to give specific consideration to any specific policy issues relevant to any constituent local authority and associated with particular aspects of the proposals.

Climate emergency

- 4.3.3 No specific implications have been identified as part of this report.
- 4.3.4 The Joint Committee may wish to give specific consideration to any climate emergency implications relevant to particular aspects of the proposals.

4.4 Resources and value for money

- 4.4.1 No specific implications have been identified as part of this report.
- 4.4.2 The Joint Committee may wish to give specific consideration to any resource and value for money implications relevant to particular aspects of the proposals.

4.5 Legal implications, access to information, and call-in

- 4.5.1 There are no specific access to information implications arising from the report and decisions of external bodies are not eligible for Call In.
- 4.5.2 Some of the legal implications associated with substantial service change and/or development proposals and the forming of mandatory joint committees are set out in the body of this report.

4.6 Risk management

- 4.6.1 No specific implications have been identified as part of this report. .
- 4.6.2 The Joint Committee may wish to give specific consideration to any identified risks (and associated mitigations) relevant to particular aspects of the proposals.

5. Recommendations

- 5.1 The West Yorkshire Joint Health Overview and Scrutiny Committee is asked to consider the details presented in this covering report and the attached report on Assessment and Treatment Centres across West Yorkshire; and agree any specific recommendations and/or further scrutiny activity.

6. Background documents¹

- 6.1 None

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.