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Report of Head of Governance and Scrutiny Support

Report to the West Yorkshire Joint Health Overview and Scrutiny Committee

Date: 28 November 2017

Subject: Correspondence Received

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	☐ Yes	⊠ No
Are there implications for equality and diversity and cohesion and integration?	☐ Yes	⊠ No
Is the decision eligible for Call-In?	☐ Yes	⊠ No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	☐ Yes	⊠ No

Summary of main issues

1. The purpose of this report is to present a summary of various correspondence received in relation to the work of the West Yorkshire Joint Health Overview and Scrutiny Committee (JHOSC) and agree any specific scrutiny action or activity.

Recommendation

2. Members are asked to consider the matters set out in this report and associated appendices; and to identify any specific scrutiny action / activity.

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1.0 Purpose

1.1 The purpose of this report is to present a summary of various correspondence received in relation to the work of the West Yorkshire Joint Health Overview and Scrutiny Committee (JHOSC) and agree any specific scrutiny action or activity.

2.0 Background information

- 2.1 In December 2015, the West Yorkshire Joint Health Overview and Scrutiny Committee (JHOSC) was established, drawing its membership from the five constituent West Yorkshire local authorities.
- 2.2 In November 2016, the JHOSC considered a report that set out the requirements for local NHS commissioning organisations to develop and submit place-based local Sustainability and Transformation Plans and presented the draft West Yorkshire and Harrogate Sustainability and Transformation Plan, for consideration.
- 2.3 As noted in the JHOSC's Terms of Reference, the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 provide for local NHS bodies to consult with the appropriate health scrutiny committee where there are any proposed substantial developments or variations in the provisions of the health service in the area(s) of a local authority.
- 2.4 It should be further noted that under the legislation officials from relevant NHS bodies are required to attend committee meetings; provide information about the planning, provisions and operation of health services; and must consult on any proposed substantial developments or variations in the provision of the health service.
- 2.5 With the lack of any nationally recognised definition of what constitutes a 'substantial' development or variation in the provision of the health service, it is recognised as good practice for NHS commissioners and providers to engage with the appropriate health scrutiny committees as early as possible to discuss any proposed service developments or variations in order to help define the necessary level of formal consultation.

3.0 Main issues

Correspondence received from members of the public

- 3.1 Members of the JHOSC will be aware of a range of correspondence received in September 2017, primarily from members of the public either affiliated or associated with local campaign groups *Calderdale and Kirklees 999 Call for the NHS* and *North Kirklees Support the NHS*.
- 3.2 Copies of the correspondence received have already been shared with members of the JHOSC. In summary, the correspondence received requested that the JHOSC:
 - a) Asks the Joint Clinical Commissioning Committee and the individual clinical commissioning groups to present all and any legal advice they have received about the lawfulness or otherwise of the JCCC's decision making and disputes resolution processes, as laid out in the Memorandum of Understanding.

- b) Thoroughly scrutinise the clinical evidence base and the material resources required for the proposed centralisation/reconfiguration of West Yorkshire and Harrogate Hyper-Acute Stroke Services.
- 3.3 Further correspondence from *Calderdale and Kirklees 999 Call for the NHS* was received on 16 November 2017 and is appended to this report for consideration.
- 3.4 Representatives of Calderdale and Kirklees 999 Call for the NHS and North Kirklees Support the NHS are aware these details are due to be considered by the JHOSC and are likely to be in attendance at the meeting.

Responses received addressing the concerns raised

3.5 On receipt of the original correspondence, NHS officials supporting the West Yorkshire and Harrogate Sustainable and Transformation Partnership (WYH STP) were requested to address the specific concerns raised. Details of the NHS response have already been shared with members of the JHOSC and are also appended to this report.

Correspondence received from other sources

- 3.6 Members of the JHOSC are also be aware of correspondence received from the Chair of Calderdale's Health and Wellbeing Board, Councillor Tim Swift, following representations made at a recent meeting.
- 3.7 For completeness, details of the information received and associated response are also appended to this report.
- 3.8 It should be noted that in providing these details, any information directly associated with Improving Stroke Services are not repeated here/ appended to this report, as a separate, substantive item is included elsewhere on the agenda.

4.0 Recommendations

4.1 Members are asked to consider the matters set out in this report and associated appendices; and to identify any specific scrutiny action / activity.

5.0 Background documents¹

5.1 None

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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.