

JOINT EAST BERKSHIRE HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Terms of Reference

1. These terms of reference together with the health scrutiny code of practice for East Berkshire provide a framework for carrying out joint health scrutiny work in East Berkshire under powers to scrutinise the NHS contained in the Health and Social Care Act 2001.
2. The East Berkshire Joint Health OSC has been formed by Bracknell Forest Borough Council, Slough Borough Council and the Royal Borough of Windsor and Maidenhead;
 - a) To look at strategic, regional, sub-regional or locality related health issues or look at a specific review as determined by the joint health overview and scrutiny committee (working as a *discretionary* committee).
 - b) To form a *statutory* Joint Health Scrutiny Committee i.e. as required under law where the local authorities whose residents are affected by a particular course of action by a NHS body, consider the proposals to be “substantial” and wish to review the NHS decision/action or where the NHS body requires it.
3. The Committee will comprise of nine Councillors; three members elected annually from each of the individual three local authorities in East Berkshire. The three authorities have agreed to waive the requirement for the committee as a whole to have proportional political representation. However, each local authority may decide whether to maintain political proportionality for its seats on the committee or not.
4. Appointments to the committee will be for a term of office one year from the date of each authority’s annual council meeting. Substitutions may be made by each authority for their own representatives if they so wish. Substitutes may attend meetings of the joint committee as non-voting observers in order to familiarise themselves with the issues under review.
5. Once established the Joint Committee will meet quarterly and rotate the venue for the meeting between the three authorities. Special meetings may be called in addition to the quarterly meetings if the need arises. The joint committee will meet in public and be advertised as such in each authority area in accordance with the local government acts.
6. The Joint Committee may ask individuals to assist it on a review by review basis. Independent professionals or those with specialist knowledge may be requested to give their expert advice to the joint committee during a review, without being co-opted.
7. The quorum for the main joint committee meetings shall be 6, provided that each authority is represented. The quorum for review meetings shall be 3, provided that each authority is represented or that joint agreement is reached for one or two authorities to lead/act for the joint committee.
8. The Chairmanship of the joint committee will be rotated annually between the three East Berkshire authorities. The Joint Committee will appoint two vice-chairmen, one from each of the other participating authorities.

9. Officer support i.e. the administration of agendas and minutes will follow annually with the rotation of the Chairman. Please refer to the joint health scrutiny protocol for details of the administration of specific reviews and the balance of administration between health trusts and local authorities.
10. Health scrutiny reviews undertaken on specific topics over a specific length of time, may be delegated to review groups of the joint committee with membership of between 3 and 6 Councillors, and with at least 1 member from each authority. This may be waived if an authority does not wish to take part, as the review will not affect their area, and if the involvement of the two remaining authorities is agreed.
11. Each separate review must be accompanied by a pro forma, covering the following items; description of the subject, identification of the health bodies involved/leading the issue, review group membership, issues to be addressed, officer support and the evidence gathering process proposed.
12. At the end of each review, a report must be produced and signed off by the Joint committee and considered by each individual participating authority.
13. The joint committee will also receive and consider responses by NHS bodies to its reports and reviews as empowered under the Act.
14. The schedule of Joint Committee meetings may include flexibility if required, for example; to give a break in the timetable to allow individual authorities to evaluate responses to the Joint Committee's report and return with comments.
15. The terms of reference and the working arrangements for the joint health overview and scrutiny committee will be kept under annual review and amended as necessary with the committee's agreement.