

**JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE TERMS OF REFERENCE**

The below have been proposed following a meeting on 27 September 2017 of Councillors from Bedford Borough Council, Central Bedfordshire Council, Luton Borough Council and Milton Keynes Council.

**Terms of Reference**

**Membership**

- 1.1. That the requirement for political proportionality is waived. Each council may apply proportionality in their own appointment process if they wish.
- 1.2. That the JHOSC is comprised of Members from Bedford Borough Council, Central Bedford Council, Luton Borough Council and Milton Keynes Council.
- 1.3. That each council appoints 3 members to the JHOSC as per their own arrangements. Substitutes will be permitted. (NB: these should be non-executive members of the local authority)
- 1.4. That the quorum will be at least one member from three of the four constituent councils.

**Chairing, voting, standing orders and meeting schedule**

- 1.5. The JHOSC will elect four Vice-Chairs (one from each member authority) each year. The meetings will be chaired by the Vice-Chair from the authority where the meeting is taking place. There will be no standing Chair.
- 1.6. The JHOSC will operate under the standing orders of the lead administrative local authority.
- 1.7. Each Member of the Committee will have one vote.
- 1.8. The JHOSC will agree the venues, dates and times of its meetings, noting that its work will be subject to the NHS timetable for consultation in some cases.

**Support to the JHOSC**

- 1.9. The lead administrative authority and other member authorities will provide administrative and scrutiny support to the JHOSC. The lead administrative authority will act as the co-ordinating body for the JHOSC and will provide a named officer for that purpose. Each authority will provide a named officer to act as scrutiny support and liaise with the lead administrative authority officer and the JHOSC officer support group as required.
- 1.10. The member authorities will share costs equally associated with hosting the JHOSC.
- 1.11. Each member authority will publish and distribute committee papers to its own members. The lead administrative authority will ensure that the JHOSC papers are published on the internet.

### Scope of the JHOSC's Work

- 1.12. That the JHOSC will scrutinise the work done under the auspices of the local BLMK STP, across the 5 workstreams and the STP governance arrangements.
- 1.13. That the JHOSC, for the purposes of statutory consultation on service change proposals arising from the STP, will act as the statutory health scrutiny consultee for those local authorities affected by those proposals. Where only one authority is affected, the matter will be referred back by the JHOSC to the local authority's HOSC.
- 1.14. That the JHOSC will, in the course of its work, require attendance from appropriate representatives of NHS organisations and require evidence in writing.
- 1.15. That the JHOSC may, as part of its scrutiny of the STP and any statutory consultations arising from the STP, invite interested parties to attend and give evidence to the JHOSC, in person and in writing.

### JHOSC Reports

- 1.16. At the conclusion of evidence gathering, Members will deliberate and agree in principle, their conclusions, comments and recommendations. The JHOSC will then delegate the responsibility for drafting its final report to the lead administrative council scrutiny officer, after consultation with the four Vice-Chairs.
- 1.17. The JHOSC will endeavour to reach consensus and avoid the need for any minority reports. If unavoidable, a minority report could be prepared by a dissenting JHOSC Member or Members and attached to the final report.
- 1.18. The scrutiny officers will collaborate to prepare the draft report, summarising the evidence, conclusions and any comments and recommendations agreed by the JHOSC. The draft report will be circulated to each Member of the JHOSC for comments.
- 1.19. Once the final version of the report has been agreed, after consultation with the four Vice-Chairs, the lead scrutiny officer will forward it directly to the NHS commissioners/responsible body, with a request for a written response within timescales set out in legislation.

### Local Resolution and Referral Powers

- 1.20. The JHOSC will carry out the process of local resolution with the relevant NHS bodies where it is required under the statutory consultation process.
- 1.21. Powers of referral to the Secretary of State for Health are to be retained by each local authority to exercise separately at the conclusion of each statutory consultation, on receipt of the JHOSC report and any relevant minority report from a JHOSC Member or Members.

### Press and Media

- 1.22. That the lead administrative authority will act as the initial contact point for any press queries arising from the work of the JHOSC and will liaise with the Communications Teams of each participating local authority in order to ensure that the four Vice-Chairs consider and approve any comments on press queries.
- 1.23. The JHOSC will approve press releases relating to its work, delegating the responsibility for drafting them to the supporting officer group in consultation with the four Vice-Chairs.

### Changes to the Terms of Reference

- 1.24. Any changes to the ToR can only be made by express agreement of the member authorities.