Dorset Health Scrutiny Committee

Agenda Item:

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Dorset County Council



Date of Meeting	8 September 2015
Officer	Director for Adult and Community Services
Subject of Report	Memorandum of Understanding between Dorset Health and Wellbeing Board and Dorset Health Scrutiny Committee
Executive Summary	Dorset Health and Wellbeing Board have established a joint Communications and Engagement Group in conjunction with the Bournemouth and Poole Health and Wellbeing Board. One of the tasks which has been undertaken by the Group is the clarification of roles – including the relationship between the Board and Health Overview and Scrutiny.
	Following discussions between the Chairs of Dorset's Health and Wellbeing Board and Dorset Health Scrutiny Committee, a Memorandum of Understanding has been drawn up to set out principles of cooperation and relationships (see Appendix 1).
Impact Assessment: Please refer to the protocol for writing reports.	Equalities Impact Assessment: N/A
	Use of Evidence: The Memorandum of Understanding is based on one adopted by Bournemouth Borough Council and the Borough of Poole, which in turn is based on good practice examples from other Local Authorities.
	Budget: N/A
	Risk Assessment:
	Having considered the risks associated with this decision using the

	County Council's approved risk management methodology, the level of risk has been identified as: Current Risk:-HIGH/MEDIUM/LOW (Delete as appropriate) Residual Risk HIGH/MEDIUM/LOW (Delete as appropriate) (i.e. reflecting the recommendations in this report and mitigating actions proposed) Other Implications: None.	
Recommendation	 Consider the proposals contained within the Memorandum of Understanding. Agree to the adoption of the MoU and the subsequent amendment of the Terms of Reference of the Dorset Health Scrutiny Committee by adding: "Liaise and cooperate with the Dorset Health and Wellbeing Board as set out under the MoU agreed by both parties in September 2015". Pending the above, recommend the agreement of the MOU and revised Terms of Reference to the Standards and Governance Committee (26 October 2015) and County Council (28 October or 2 December 2015). 	
Reason for Recommendation	The work of the Committee contributes to the County Council's aim to protect and enrich the health and wellbeing of Dorset's most vulnerable adults. The adoption of a Memorandum of Understanding would clarify the relationship between the Dorset Health and Wellbeing Board and the Dorset Health Scrutiny Committee.	
Appendices	 Draft Memorandum of Understanding between Dorset Health and Wellbeing Board and Dorset Health Scrutiny Committee. Existing ToR – Dorset Health and Wellbeing Board Existing ToR – Dorset Health Scrutiny Committee 	
Background Papers	None.	
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Appendix 1



Memorandum of understanding between Dorset Health and Wellbeing Board and Dorset Health Scrutiny Committee

Introduction

- 1) This Memorandum of Understanding (MOU) sets out a simple framework for the working relationship between the Dorset Health and Wellbeing Board and the Dorset Health Scrutiny Committee.
- 2) This MOU specifies the ways in which these bodies will work together in delivering their respective statutory functions.
- 3) This MOU cannot override the statutory duties and powers of either of the bodies, and is not enforceable in law. However, both parties agree to adhere to the principles set out in this MOU and will show regard for each other's activities.
- 4) The MOU sets out the principles that the parties will follow in the course of day to day working relationships. The MOU may need to be supported by protocols and other documents not included in this framework which set out in more detail operational considerations of how the organisations will work together.

Principles of cooperation

- 5) The named parties covered by this Memorandum of Understanding agree that their working relationship will be guided by the following principles:
 - I. The need to make decisions which promote the safety, health and wellbeing of the Dorset population;
 - II. Respect for each body's independence;
- III. The need to maintain public confidence;
- IV. Openness and transparency;
- V. The need to use resources efficiently and effectively.

Relationships

- 6) The Dorset Health and Wellbeing Board will maintain dialogue with Dorset Health Scrutiny Committee about the issues, risks and challenges involving the wellbeing of the local population in Dorset.
- 7) The Dorset Health Scrutiny Committee will share with the Dorset Health and Wellbeing Board relevant recommendations and / or information following the scrutiny of local health services, which the Health and Wellbeing Board will use to support partners and to inform future priorities.
- 8) The Dorset Health and Wellbeing Board will invite Dorset Health Scrutiny Committee members to relevant workshops and subsequent thematic discussions at Board meetings.

- 9) The Dorset Health and Wellbeing Board will share an annual summary report with the Dorset Health Scrutiny Committee, who may wish to comment on it and provide constructive feedback on the Board's priorities and performance.
- 10) The Dorset Health Scrutiny Committee will share an annual summary report with the Dorset Health and Wellbeing Board, who may wish to comment on it and provide constructive feedback on the Committee's work and performance.
- 11) The Dorset Health and Wellbeing Board will consult with and involve the Dorset Health Scrutiny Committee on both the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy, as appropriate.
- The Dorset Health and Wellbeing Board will inform the Dorset Health Scrutiny Committee about specific proposals for changes to services that they are made aware of at an early stage, where appropriate. This will give them the opportunity to understand the reasons for the proposals, how they might improve access or quality of services, and how patients, service users and the public are engaged and consulted on the proposals.
- The Dorset Health Scrutiny Committee will inform the Dorset Health and Wellbeing Board of any referrals they or Dorset County Council make to the Secretary for Health regarding proposed substantial reconfigurations of services.

Other areas of cooperation

- 14) The working relationship between both bodies will also include:
 - I. Cross referral of concerns;
 - II. Sharing high level / strategic information;
 - III. Seeking local resolutions to common issues.

Resolution of disagreement

Signatories:

Any disagreement between bodies will, wherever possible, be resolved at working level. If this is not possible, it will be brought to the attention of the MOU signatories who will then be jointly responsible for ensuring a mutually satisfactory resolution.

Chairman, Dorset Health and Wellbeing Board	Chairman, Dorset Health Scrutiny Committee

Appendix 2

Terms of Reference – Dorset Health and Wellbeing Board

The Dorset Health and Wellbeing Board will:

- a) Identify outcome and investment priorities from the key groups that report to the HWB.
- b) Hold partners to account for achieving improved outcomes by developing and updating the Joint Strategic Needs Assessment and by developing and updating the Pharmaceutical Needs Assessment.
- c) Measure progress against local plans, including the Clinical Commissioning Group Strategy and the Joint Health and Wellbeing Strategy, to ensure action is taken to improve outcomes when monitoring or performance indicators show that plans are not working.
- d) Develop, approve and implement the Better Care Fund and any future developments related to the Better Care Fund, as well as anticipating future policy developments in terms of integration and system change between the NHS and local government partners.
- e) Encourage and oversee integrated working between health and social care commissioners, including providing advice, assistance and other support to encourage commissioning, pooled budget and/or integrated provision in connection with the provision of health and social care services.
- f) Ensure that the patient / service user voice, including that of seldom heard groups and children and young people, is intrinsic to the commissioning cycle and commissioning decisions.
- g) Develop a strategic approach to tackling health inequalities in Dorset and support communities to achieve wellbeing.
- h) Provide an effective link to NHS England.
- i) Provide an effective link to local NHS commissioning decisions and strategy.
- j) Consider Equality and Diversity issues and deliver its public sector equalities duties under the Equality Act 2010.
- k) Work cooperatively with the Bournemouth and Poole HWB and develop opportunities to share views and expertise in the development and delivery of common goals and priorities.
- I) Make timely and effective decisions.

Membership - Total 16

Elected Members (3 in total)

County Council (2 Cabinet Members in total)

District / Borough Council (1 representative to represent all)

Local Authority Officers (4 in total)

Director for Adult and Community Services DCC

Director for Children's Services DCC

Director of Public Health DCC / NHS

District / Borough Council (1 representative to represent all)

NHS Representatives (7 in total)

Locality Executive Teams (GPs) (3 in total)

Chairman of Dorset Clinical Commissioning Group Board

Clinical Commissioning Group Accountable Officer

NHS England

Local NHS Provider Trust

Other (2 in total)

Healthwatch

Voluntary Sector

Appendix 3

Terms of Reference – Dorset Health Scrutiny Committee

In relation to the Committee's work on Local Authority Overview and Scrutiny of Health:

- (a) To review and scrutinise matters pertaining to the planning (including commissioning), provision and operation of health services in the area of the County Council.
- (b) To make reports and recommendations to relevant NHS Bodies and/or relevant health service providers and also to the Cabinet and other relevant committees of the County Council on any matter which is reviewed or scrutinised.
- (c) To give notice to require the Cabinet or the County Council to consider and respond to any reports or recommendations arising from the committee's work within two months of receipt.
- (d) Where relevant NHS Bodies and/or relevant health service providers have under consideration any proposal for a substantial development of the health service in the area of the County Council or for a substantial variation in the provision of such service:
- (i) to receive reports from the relevant NHS Bodies and/or relevant health service providers;
- (ii) to comment on the proposal(s); and
- (iii) to report in writing to the Secretary of State where any of the circumstances set out in paragraph 23(9) of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 apply.
- (e) To arrange for its functions under the 2013 Regulations to be discharged by an Overview and Scrutiny Committee of another local authority where that Overview and Scrutiny Committee would be better placed to undertake the functions and the other authority agrees.
- (f) In accordance with regulation 30 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, to appoint joint committees with other local authorities to exercise relevant functions under the said Regulations.
- (g) From time to time, as appropriate, to appoint a task and finish group consisting of members of the Committee to consider specific local issues relating to the overview and scrutiny of health.

Membership - Total 12:

6 members of the County Council, or such higher minimum number which is necessary to achieve representation from the three main political groups based on the political balance rules. Every effort being made so that each represents an area of the county which coincides with the district/borough council area in which their County Council electoral division is located, ie one County Council member to represent each of the following areas:

Christchurch, East Dorset, North Dorset, Purbeck, West Dorset and Weymouth and Portland.

1 member representing each of the 6 District/Borough Councils in Dorset.