

JOINT HEALTH SCRUTINY PROTOCOL BETWEEN BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL AND DORSET COUNCIL 2021

Purpose: To enable the Councils to establish joint health scrutiny committees on a task and finish basis to scrutinise proposals for changes to the provision of NHS services to residents in both Councils' areas without delay and in a way that provides one consistent response.

1. The Council identified as the lead for the issue to be scrutinised will administer the Joint Health Scrutiny meeting(s) and any associated issues. The Lead Council will be identified by the relevant Directors from each Council in consultation with the relevant Chairs of each Council's Committee with the Health Scrutiny function after determining if a matter needs to be referred to a Joint Health Scrutiny Committee.
2. The Chair for any Joint Health Scrutiny Committee meeting will be provided by the Council administering meeting arrangements. The Vice-Chair will be provided by the other Council.
3. Each Joint Health Scrutiny Committee will comprise between 3 and 5 members (which would include the Chair and Vice-Chair of the Joint Committee) from each Council by agreement with the Chairs. Each Council to bear in mind its own political proportionality. If the Chair is in agreement members can be identified from outside of the Committees with the Statutory Health Scrutiny function. However, Health Scrutiny Committee members would have priority.
4. The quorum for each meeting will be 2 from each council.
5. The procedural rules for each meeting will be those adopted by the Council administering the meeting.
6. Members will adhere to their own Council's code of conduct and make appropriate declarations at meetings.
7. The Chairs of the two Committees with the Statutory Health Scrutiny function in consultation with the Directors will agree those issues that will be considered by the Joint Scrutiny Committee and the scope of the joint scrutiny will be considered at the first meeting.
8. Joint Health Scrutiny Protocol for the Committee will be considered at the first meeting of any joint committees.
9. The Chairs will work with other relevant local authorities with the Statutory Health Scrutiny function on the extent to which they should be involved with the work of the Joint Committee.
10. A Scrutiny Committee, where members hold a valid concern that a proposed variation to local health services is not in best interest of local residents, have the ability to make a referral to the Secretary of State. This is a very specific power that can be exercised by the Committee. This power can also be delegated to

the JHSC. The Joint Health Scrutiny Protocol states that it would only be in exceptional circumstances that a referral from the JHSC to the Secretary of State could be overturned by one of the constituent Councils. It would then require Full Council support to withdraw the delegated power from the JHSC and reconsider the decision made. Advice from NHS partners and in the spirit of good scrutiny practice, if Joint Health Scrutiny is held and a decision made, it is important that the outcome is validated.

11. A written report of findings and recommendations from a Joint Health Scrutiny Committee to be sent to the relevant NHS organisation(s) identifying a timeframe in which to respond.
12. It is acknowledged that there are NHS organisations outside of the county which may affect the residents of BCP and Dorset Councils and therefore would be taken into consideration when identifying any potential items for joint scrutiny.
13. That consideration be given to the involvement of representatives of Healthwatch and their role in any joint scrutiny work.
14. That a report back is provided to each Council's Committee on the outcome of any joint scrutiny undertaken.

