

## Princess Alexandra Hospital - Hertfordshire and West Essex

### Joint Health Overview and Scrutiny Committee

#### Terms of Reference and Working Protocol

<b>1.</b>	<b>Legislative basis</b>
1.1	The National Health Service Act 2006, as amended by the Health and Social Care Act 2012 and the Localism Act 2011 sets out the regulation-making powers of the Secretary of State in relation to health scrutiny. The relevant regulations are the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 which came into force on 1st April 2013 (“the Local Health Scrutiny Regulations”).
1.2	Regulation 30 (1) states two or more local authorities may appoint a joint scrutiny committee and arrange for relevant health scrutiny functions in relation to any or all of those authorities to be exercisable by the joint committee, subject to such terms and conditions as the authorities may consider appropriate.
1.3	This joint committee has been established under the Local Health Scrutiny Regulations, on a task and finish basis, by Essex Health Overview, Policy and Scrutiny Committee and Hertfordshire Health Overview and Scrutiny Committee (“the PAH Joint Scrutiny Committee”).
<b>2.</b>	<b>Purpose</b>
2.1	The purpose of the PAH Joint Scrutiny Committee is to scrutinise the initial planning and governance arrangements for a proposed re-build and relocation of Princess Alexandra Hospital (PAH) to a new greenfield site adjacent to the M11 motorway and focus on proposed governance processes, public engagement and those matters which may impact upon services provided to patients in both counties.
2.2	The PAH Joint Scrutiny Committee is established to be formally consulted during May 2020 in accordance with the Health Scrutiny Regulations by PAH on the proposed re-build and relocation. It is anticipated that the PAH Joint Scrutiny Committee will only meet once for the above purpose in order to provide PAH with a consolidated health scrutiny view from both authorities to assist PAH prior to formal consideration of their proposal by NHS England. However, further meetings may be held if both participating local authorities so decide.
2.3	<p>In considering the proposals for re-build and relocation of Princess Alexandra Hospital (PAH) the PAH Joint Scrutiny Committee will consider:</p> <ul style="list-style-type: none"> <li>the extent to which the proposals are in the interests of the health service in Essex and Hertfordshire;</li> </ul>

	<ul style="list-style-type: none"> <li>• the impact of the proposals on patient and carer experience and outcomes and on their health and well-being;</li> <li>• the quality of the clinical evidence underlying the proposals;</li> <li>• the extent to which the proposals are financially sustainable</li> </ul> <p>in determining its support and whether the proposals constitute a substantial variation of service. The PAH Joint Scrutiny Committee will consider and may comment on the extent to which patients and the public have been, and will be, involved in the development of the proposals and the extent to which their views have been, and will be, taken into account as well as the adequacy of any public and stakeholder engagement already undertaken and/or proposed.</p>
<b>3.</b>	<p><b>Working Protocol</b></p> <p>This Protocol provides a framework for scrutiny to take place.</p> <p>The PAH Joint Scrutiny Committee will be positive, objective and constructive. It will concentrate on service outcomes and seek to add value.</p> <p>The success of the PAH Joint Scrutiny Committee will rely on key organisations working together in an atmosphere of mutual trust and respect with an agreed understanding and commitment to its aims. The key organisations involved in this health scrutiny exercise must be willing to share information, knowledge and reports which relate to the delivery and success of the scrutiny.</p> <p>At all times councillors, officers and members of the organisations involved in the scrutiny will be treated with respect and courtesy. Matters of confidentiality will be observed.</p> <p>Whilst working in partnership with the NHS, the PAH Joint Scrutiny Committee will retain its independence from the NHS.</p>
<b>4.</b>	<p><b>Membership/chairing</b></p> <p>4.1 The PAH Joint Scrutiny Committee will consist of three members representing Essex and two members representing Hertfordshire, as nominated by the respective health scrutiny committees at those authorities.</p> <p>4.2 Members of the PAH Joint Scrutiny Committee cannot be an executive or cabinet member of their authority. An authority may appoint a substitute to attend in the place of the named member on the PAH Joint Scrutiny Committee provided they are not an executive or cabinet member of the authority.</p> <p>4.3 The proportionality requirement will not apply to the PAH Joint Scrutiny Committee, provided that each authority participating in the PAH Joint</p>

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	Scrutiny Committee agrees to waive that requirement, in accordance with legal requirements and their own constitutional arrangements.
4.4	Each authority will decide whether or not to apply political proportionality to their own members.
4.5	The PAH Joint Scrutiny Committee will elect a Chairman and Vice-Chairman.
4.6	The PAH Joint Scrutiny Committee will be asked to agree its Terms of Reference at its first meeting.
4.7	Each member of the PAH Joint Scrutiny Committee will have one vote should any matter be voted upon although broad general consent will be sought wherever possible instead. Voting will be made by a simple majority and the Chairman will have the casting vote if necessary.
4.8	The quorum will be a minimum of three members provided both participating authorities are represented in that calculation.
4.9	The PAH Joint Scrutiny Committee will be open and transparent. Any person involved in the PAH Joint Scrutiny Committee will declare any personal or other pecuniary interest that they have in accordance with their own authority's Code of Conduct relating to standards of conduct and ethics.
<b>5.</b>	<b>Co-option</b>
5.1	By a simple majority vote, the PAH Joint Scrutiny Committee may agree to co-opt representatives of organisations with an interest or expertise in the issue being scrutinised as non-voting members, but with all other member rights. This may be for a specific subject area or specified duration.
<b>6.</b>	<b>Supporting the Joint HOSC</b>
6.1	Officers from Essex and Hertfordshire County Councils will jointly provide advice and administrative support to the PAH Joint Scrutiny Committee. Any further costs incurred will be apportioned between the authorities. Further discussion on support may be necessary if the PAH Joint Scrutiny Committee resolves to further meet beyond the currently anticipated one meeting.
<b>7.</b>	<b>Powers and expectations upon relevant bodies</b>
7.1	The PAH Joint Scrutiny Committee is responsible for setting its own agenda.
7.2	In carrying out its function the joint committee may:

	<ul style="list-style-type: none"> <li>• require officers of appropriate local NHS bodies to attend and answer questions;</li> <li>• require appropriate local NHS bodies to provide information;</li> <li>• obtain and consider information and evidence from other sources, such as local Healthwatch organisations, patient groups, members of the public, expert advisers, local authorities and other agencies;</li> <li>• make reports and recommendations to the appropriate NHS bodies and other bodies that it determines, including the local authorities which have appointed the PAH Joint Scrutiny Committee;</li> <li>• consider the NHS bodies' response to its recommendations;</li> </ul>
<b>8.</b>	<b>Power of Referral</b>
8.1	The power to make a referral to the Secretary of State is not delegated to the PAH Joint Scrutiny Committee.
<b>9.</b>	<b>Public involvement</b>
9.1	Meetings will be accessible for the public and press to attend either in person or virtually using appropriate conference call software.
9.2	Papers will be available at least five clear working days before the meeting. The participating authorities will arrange for papers relating to the work of the joint committee to be published on their websites.
<b>10.</b>	<b>Press strategy</b>
10.1	Any press releases made on behalf of the Joint Committee will be agreed by both the Chairman and Vice-Chairman of the Joint Committee. All members of the PAH Joint Committee will be informed of any press releases being issued.
10.2	These arrangements do not preclude participating local authorities from issuing individual statements to the media provided that it is made clear that these are not made on behalf of the PAH Joint Scrutiny Committee.
<b>11.</b>	<b>Report and recommendations</b>
11.1	Once it has formed conclusions and recommendations on the PAH proposals for the rebuild and relocation, the PAH Joint Committee will prepare a formal report. All members of the PAH Joint Committee will be consulted on the draft report before it is published with the final versions of report(s) to be agreed by the Chairman and Vice Chairman.
11.2	Such report(s) will include whether any conclusions and/or recommendations contained within it are based on a majority decision of the committee or are unanimous.

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11.3	In reaching its conclusions and recommendations, the PAH Joint Committee should aim to achieve consensus. If consensus cannot be achieved, minority reports may be attached as an appendix to the main report. The minority report/s shall be drafted by the appropriate member(s) or authority concerned.
11.4	The final report will be presented to PAH, local health commissioners and other bodies as appropriate and will be published on organisational websites and circulated in accordance with the regulations on health scrutiny.