

Terms of Reference

<p>Portfolio</p> <p><i>Insert the name of the Committee / portfolio body</i></p>	<p>Greater Manchester Joint Health Scrutiny Committee</p>
<p>Function/Purpose</p> <p><i>Include here where functions have been given to the Committee through Government legislation, or where a joint purpose has been agreed.</i></p>	<p>The GM Joint Health Scrutiny Committee has the delegated powers from the 10 Authorities of Greater Manchester (Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Tameside, Trafford, and Wigan) to undertake all the necessary functions of health scrutiny in accordance with the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (“the Local Health Scrutiny Regulations”), relating to reviewing and scrutinising health services matters where these are at a Greater Manchester level, and to provide a body to which Health Services Providers have a duty to consult under the Local Health Scrutiny Regulations.</p> <p>The Committee will scrutinise:</p> <ul style="list-style-type: none">a. The strategies, policies, actions, and consultations of the work of the Greater Manchester Integrated Care Partnership including:

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| | <ul style="list-style-type: none">• functions carried out in Greater Manchester by NHS England under delegated authority under the devolution agreement• The joint work of the Greater Manchester Provider Collaboratives• Relevant public health functions including those undertaken by the <u>UK Health Security Agency and Office for Health Improvement and Disparities</u> (previously public Health England (Greater Manchester))• Local Authorities across Greater Manchester regarding their role as providers and commissioners of social care, and as public health agencies.• All other cross-boundary NHS services e.g. North West Ambulance Service, Christies, Specialist Children's Services provided by the Royal Manchester Children's Hospital <ul style="list-style-type: none">b. Services provided to patients living and working across Greater Manchesterc. Specific health issues that cut across geographical boundariesd. Individual authorities will reserve the right to undertake scrutiny of any of those authorities listed above with regard to matters relating specifically to their local population |
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OBJECTIVES

- a.** To ensure that the needs of local people are considered as an integral part of the delivery and development of health services; and to contribute to Improving outcomes in population health and healthcare
 - Tackling inequalities in outcomes, experience, and access
 - Helping the NHS support broader social and economic development
 - Enhancing productivity and value for money
- b.** To review proposals for consideration or items relating to proposed substantial developments/substantial variations to services provided across Greater Manchester by the GM Integrated Care Partnership or individual NHS organisations, including:
 - Changes in accessibility of services
 - Impact of proposal on the wider community
 - Patients affected
- c.** To engage pro-actively with the GM Integrated Care Partnership and GM Integrated Care Partnership Strategy.
- d.** To keep abreast of organisational changes and key policy implementation within the NHS.
- e.** To bring together the responsibilities of local authorities to promote health service provision, delivery, and accessibility within the remit of the Health Scrutiny function.

Principles	<p>Principles of Joint Health Scrutiny's operation:</p> <ul style="list-style-type: none">• The GM Joint Health Scrutiny Committee will be positive, objective, and constructive. It will acknowledge good practice and will recommend improvements where they could be of benefit. The GM Joint Health Scrutiny Committee will concentrate on service outcomes and seek to add value to each service that it considers.• The health and well-being of Greater Manchester residents is dependent upon many factors including the health services provided in partnership by NHS trusts and foundation trusts who provide services within the Integrated Care Partnership area and primary medical services providers, NHS England, voluntary services, and services provided by GM Authorities. This shared responsibility will be acknowledged by scrutiny and will feature in scrutiny reviews.• The GM Joint Health Scrutiny Committee will only be truly successful if key organisations work and co-operate together in an atmosphere of mutual respect and trust with an understanding and commitment to its aims.• The key organisations involved in health scrutiny must be willing to share information, knowledge and reports which relate to the delivery and success of health services in Greater Manchester and carry out duties that would be expected of them to enable health scrutiny to be successfully undertaken.
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- At all times both officers and members of the organisation involved in health scrutiny, patient representatives and members of the public will be treated with respect and courtesy. Matters of confidentiality will be treated with respect.
- The GM Joint Health Scrutiny Committee will be open and transparent. Any person involved in health scrutiny will always declare any personal or other pecuniary interest that they have either in a scrutiny exercise or during a meeting of the Scrutiny Committee in accordance with the Code of Conduct relating to standards of conduct and ethics.
- The GM Joint Health Scrutiny Committee whilst working in partnership, is independent of the NHS, the GMCA & AGMA Executive Board, District Health Scrutiny Panels, and the voluntary and community sector.
- The GM Joint Health Scrutiny Committee will be focused on improving services and service provision for the people of Greater Manchester and will concentrate on outputs that are intended to help improve their health.
- All dates and times of meetings of the GM Joint Health Scrutiny Committee, agendas, minutes, and reports will be circulated to members and Partners in accordance with the Local Government (Access to Information) Act 1985 or subsequent legislation.

- All members of the Greater Manchester Integrated Care Partnership will be consulted on Annual Work Programmes and informed in advance of scrutiny exercises that the GM Joint Health Scrutiny Committee is intending to undertake. Partners will be informed of the scope of all scrutiny exercises and will be given adequate notice of invitations to attend meetings of GM Joint Health Scrutiny Committee and any required information.
- All members of the Greater Manchester Joint Health Scrutiny Committee will be consulted on any draft reports before they are published. Final reports will be presented to the Greater Manchester Integrated Care Board , GMCA, AGMA Executive, the NHS Trusts, be published on the GMCA website and circulated in accordance with the regulations on health scrutiny.
- The GM Joint Health Scrutiny Committee will not be used as a complaint procedure. Case Studies may however be used as part of supporting information for scrutiny exercises.
- All members of the Greater Manchester Integrated Care Partnership will be informed of any press releases relating to Health Scrutiny although officers may speak to the press in advance of the meeting to brief them about forthcoming Scrutiny Committee meetings.

	<ul style="list-style-type: none">• The GM Joint Health Scrutiny Committee will at all times comply with the Constitution of GMCA and AGMA..
Expectations	<p>Expectations upon relevant bodies:</p> <p>The Greater Manchester Integrated Care Partnership, NHS England, Public Health England, and NHS Trusts will:</p> <ul style="list-style-type: none">• work in partnership with GM Joint Health Scrutiny Committee to provide objective and effective scrutiny of health services in Greater Manchester and the health of its residents. They will be mindful of their duty to consult on the planning, provision, or operation of a health service within Greater Manchester.• provide information relating to the planning and operation of health services that is required by the Scrutiny Committee so that it can undertake health scrutiny. This includes responses to NHS Plans, proposals and consultations and undertaking health scrutiny reviews. This will not include confidential information that identifies individual people unless it can be presented in a way in which does not identify individuals or if an individual consents to the information being disclosed.• provide the GM Joint Health Scrutiny Committee with such information within one month of the receipt of the request.

	<ul style="list-style-type: none"> • respond to health scrutiny reviews within one month of receipt. A copy of such response will be sent to the GMCA & AGMA Executive, and all other organisations involved in the review. • carry out consultations with the GM Joint Health Scrutiny Committee on plans for substantial developments in services, or substantial variations in service provision. • work jointly with GM Joint Health Scrutiny Committee to compile annual work programmes for health scrutiny. • ensure that officers attending Scrutiny Committee meetings are able to answer questions openly and are given appropriate support by their line managers.
Work Plan	<p>The GM Joint Health Scrutiny Committee will determine in consultation with members of Greater Manchester Integrated Care Partnership, an annual work programme. The GM Joint Health Scrutiny Committee is however responsible for setting its own agenda. Members of Greater Manchester Integrated Care Partnership may only make recommendations. Also, in setting the work programme the GM Joint Health Scrutiny Committee should consider the wishes of members on that committee who are not members of the largest political group on the Council.</p>
Recommendations	<p>Once it has formed recommendations on proposals for development, the GM Joint Health Scrutiny Committee will prepare a formal report and submit it to the appropriate officer for consideration by the relevant members of the Greater Manchester Integrated Care Partnership.</p>

	<p>The relevant members of Greater Manchester Integrated Care Partnership shall consider the report of the GM Joint Health Scrutiny Committee and make a response to the Scrutiny Committee within one month of it being submitted.</p>
<p>Delegations</p> <p><i>Include here where delegations have been given through legislation or directly by the GMCA or GM Mayor.</i></p>	<p>The Committee has the delegated powers from the 10 Authorities of Greater Manchester.</p>
<p>Accountability</p> <p><i>Include here how the committee or portfolio body is made up, to where it directly reports etc.</i></p>	<p>GMCA, AGMA Executive Board/Greater Manchester Integrated Care Partnership</p>

<p>Statutory/Decision Making/Informal</p> <p><i>Include here whether the committee or portfolio body is statutory i.e. legally required.</i></p>	<p>Statutory</p>
<p>Membership</p> <p><i>Detail here the membership of the committee or portfolio body, the required number of (and type of) members i.e., those who are elected members. In listing officers, ensure that these are referenced by job title/organisation.</i></p>	<p>The membership of the GM Joint Health Scrutiny Committee will be nominated by the ten Greater Manchester local authorities.</p> <p>Each local authority will nominate one non-Executive/Cabinet member.</p> <p>Where possible, members will be drawn from the individual local Scrutiny Panels/Committees that have responsibility for scrutinising Health and Social Care issues within their area.</p> <p>Officers of Individual District Health Scrutiny Panels/Committees are invited to attend to support and advise Members from their local authority on Health Scrutiny Issues and will have access to all agendas, briefing notes and minutes.</p> <p>Substitutes will be allowed but will need to be non-Executive/Cabinet members of the respective local authority.</p> <p>Members and substitutes will be appointed until the Annual Meeting of the GMCA/AGMA.</p>

<p>Appointment of Chair (and Vice Chair)</p> <p><i>Explain how the Chair is appointed and whether there is a legal requirement to appoint a certain person to Chair, also whether there is a designated length of term.</i></p>	<p>Appoint a Chair and Vice Chair at its first meeting for the municipal year.</p>
<p>Quoracy</p> <p><i>Detail how many members of the Committee or portfolio body are required to be present before a meeting can take place, and whether there are any specifications as to the breakdown of these members.</i></p>	<p>There must be five local authorities represented at each meeting in order for it to be quorate.</p>
<p>Voting</p>	<p>Voting will be made by a simple majority; the Chair will have the casting vote.</p>

<p><i>Set out here how a vote will be taken, if there is a majority vote, any casting vote etc.</i></p>	<p>In addition, as many of the sub-regional issues the Committee considers are also of interest to neighbouring authorities, representatives from surrounding local authorities are invited to attend all meetings if they wish. This role is for information, questions, and comments. If a vote is taken only the 10 GM authorities have voting rights.</p> <p>GM Authorities may agree to confer full voting rights to some or all “associate members” in relation to specific issue being considered if it is felt that this issue under consideration cuts across Greater Manchester boundaries. This decision would be at the discretion of Committee Members.</p>
<p>Meeting arrangements</p> <p><i>Detail here the current meeting arrangements, i.e. frequency, location etc</i></p>	<p>The GM Joint Health Scrutiny Committee will meet six times a year in person.</p> <p>Dates of forthcoming meetings will be confirmed at the first meeting of each municipal year. In addition, extra meetings may be scheduled to effectively deliver the work programme for the forthcoming year.</p>
<p>Lead contact</p> <p><i>Include here who is the main point of contact for the Committee / portfolio body</i></p>	<p>Nicola Ward, Statutory Scrutiny Officer, GMCA</p>

Date TOR were approved <i>Detail the date that these terms of reference were approved</i>	13.7.22
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