

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	27 July 2021
Subject:	Hyper-Acute Stroke Service		
Report of:	Chief Legal and Democratic Officer	Wards Affected:	(All Wards);
Portfolio:	Health and Wellbeing		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

The Overview and Scrutiny Committee (Adult Social Care and Health) is requested to consider if the proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire constitute a substantial development/ variation in services for Sefton residents.

Recommendation(s):

The Committee is requested to determine whether the proposals detailed in the Appendix to the report constitute a substantial development/ variation in services for Sefton residents.

Reasons for the Recommendation(s):

NHS bodies have a legal duty to consult local authority Health Overview and Scrutiny Committees on proposals that could be deemed to constitute a substantial variation in services.

Proposals have been received for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire.

The Council's Constitution allows the Overview and Scrutiny Committee (Adult Social Care and Health) to formally respond to consultations by relevant NHS bodies and relevant service health providers on substantial reconfiguration proposals (Chapter 6 refers).

Alternative Options Considered and Rejected: (including any Risk Implications)

None considered. The Committee needs to determine whether the proposals for hyper-acute stroke services constitute a substantial variation or not.

What will it cost and how will it be financed?

There are no direct financial implications for the Council as a result of the proposals.

(A) Revenue Costs

Not applicable

(B) Capital Costs

Not applicable

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):	
None	
Legal Implications:	
Section 244 of the Health Act 2006 requires NHS bodies to consult relevant Overview and Scrutiny Committees on any proposals for substantial variations or substantial developments of health services. Consideration of the proposals ensures that the local authority complies with its statutory duties under the Local Authority (Public Health, Health and Wellbeing boards and Health Scrutiny) Regulations 2013.	
Equality Implications:	
There are no equality implications.	
Climate Emergency Implications:	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no direct climate emergency implications arising from this report.	

Contribution to the Council's Core Purpose:

Protect the most vulnerable: None directly applicable to this report. Monitoring of the proposals will contribute towards protecting vulnerable members of Sefton's communities.
Facilitate confident and resilient communities: None directly applicable to this report.
Commission, broker and provide core services: None directly applicable to this report.

Place – leadership and influencer: None directly applicable to this report.
Drivers of change and reform: None directly applicable to this report.
Facilitate sustainable economic prosperity: None directly applicable to this report.
Greater income for social investment: None directly applicable to this report.
Cleaner Greener None directly applicable to this report.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.6469/21.....) and the Chief Legal and Democratic Officer (LD.4670/21.....) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Section 242 of the Health Act 2006 places a duty on the NHS to make arrangements to involve patients and the public in planning services, developing and considering proposals for changes in the way services are provided and decisions to be made that affect how those services operate. This is quite separate from the duty to consult local Overview and Scrutiny Committees.

Implementation Date for the Decision

Immediately following the Committee meeting.

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Appendices:

The following appendix is attached to this report:

- Appendix A - Comprehensive Stroke Centre Proposal

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

- 1.1 All relevant NHS bodies and providers of NHS-funded services are required to consult local authorities when they have a proposal for a substantial development or substantial variation to the health service.
- 1.2 A substantial development or variation is not defined in legislation. Guidance has suggested that the key feature is that it should involve a major impact on the services experienced by patients and/or future patients.
- 1.3 Where a substantial development or variation impacts on the residents within one local authority area boundary, only the relevant local authority health scrutiny function shall be consulted on the proposal.
- 1.4 Where a proposal impacts on residents across more than one local authority boundary, the NHS body/health service provider is obliged to consult all those authorities whose residents are affected by the proposals in order to determine whether the proposal represents a substantial development or variation.
- 1.5 Those local authorities that agree that any such proposal does constitute a substantial development or variation are obliged to form a joint health overview and scrutiny committee for the purpose of formal consultation by the proposer of the development or variation.
- 1.6 Whilst each local authority must decide individually whether a proposal represents a substantial development/variation, it is only the statutory joint health scrutiny committee which can formally comment on the proposals if more than one authority agrees that the proposed change is “substantial”.
- 1.7 Determining that a proposal is not a substantial development/variation removes the ability of an individual local authority to comment formally on the proposal and exercise other powers, such as the power to refer to the Secretary of State. Once such decisions are made, the on-going obligation on the proposer to consult formally on a proposal relates only to those authorities that have deemed the proposed change to be “substantial” and this must be done through the vehicle of the joint committee. Furthermore, the proposer will not be obliged to provide updates or report back on proposals to individual authorities that have not deemed them to be “substantial”.

2. Considering of Proposals for a Substantial Development / Variation

- 2.1 In considering whether a proposal is substantial, all local authorities are encouraged to consider the following criteria, as issued by the Department for Health in July 2003:
 - Changes in accessibility of services: any proposal which involves the withdrawal or change of patient or diagnostic facilities for one or more speciality from the same location.
 - Impact on the wider community and other services: This could include economic impact, transport, regeneration issues.

- Patients affected: changes may affect the whole population, or a small group. If changes affect a small group, the proposal may still be regarded as substantial, particularly if patients need to continue accessing that service for many years.
- Methods of service delivery: altering the way a service is delivered may be a substantial change, for example moving a particular service into community settings rather than being entirely hospital based.
- Potential level of public interest: proposals that are likely to generate a significant level of public interest in view of their likely impact.

3. Joint Committee Membership

3.1 In June 2014 the Council agreed the Protocol for the establishment of Joint Health Scrutiny Arrangements for Cheshire and Merseyside. A copy of the Protocol can be accessed via the following link:

[Document Protocol for Joint Health Scrutiny Arrangements](#)

3.2 In accordance with the above Protocol, a joint committee will be composed of Councillors from each of the participating authorities in the following ways:

- where 4 or more local authorities deem the proposed change to be substantial, each authority will nominate 2 elected members
- where 3 or less local authorities deem the proposed change to be substantial, then each participating authority will nominate 3 elected members.

3.3 At its meeting on 24 June 2021, the Cabinet considered Appointments to Outside Bodies 2021/22 and agreed the following:

<u>ORGANISATION</u>	<u>NUMBER OF REPRESENTATIVES</u>	<u>REPRESENTATIVE(S)</u>
Joint Health Scrutiny Committee (where 3 or less local authorities request the scrutiny of a substantial variation to a service)	3	Chair (Councillor Thomas) and Vice Chair (Councillor Myers) of the O & S Committee (Adult Social Care) and one Conservative Member (Councillor Brough) (Lab 2/Con 1)
Joint Health Scrutiny Committee (where 4 or more local authorities request the scrutiny of a substantial variation to a service)	2	Chair (Councillor Thomas) and Vice Chair (Councillor Myers) of the O & S Committee (Adult Social Care)

4. Proposal – Hyper-Acute Stroke Services

- 4.1 The Committee should consider the information as detailed in the Appendix to the report and determine whether the proposals constitute a substantial variation as set out in paragraph 2 to the report.

5. Next Steps

- 5.1 The next steps to be taken are dependent on the decision taken by the Committee.