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29 January 2026

To: All Members of the North Central London Joint Health Overview and Scrutiny Committee

Dear Member,

North Central London Joint Health Overview and Scrutiny Committee - Friday,  
30th January, 2026

I attach a copy of the following reports for the above-mentioned meeting which were not available at the time of collation of the agenda:

**10. NCL JHOSC TERMS OF REFERENCE (PAGES 1 - 8)**

Yours sincerely

Fola Irikefe, Principal Scrutiny Officer

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<b>NORTH CENTRAL LONDON JOINT HEALTH OVERVIEW &amp; SCRUTINY COMMITTEE</b>	<b>London Boroughs of Barnet, Camden, Enfield, Haringey and Islington</b>
<b>REPORT TITLE</b> Final Terms of Reference for the Committee	
<b>REPORT OF</b> Committee Chair, North Central London Joint Health Overview & Scrutiny Committee	
<b>FOR SUBMISSION TO</b>  NORTH CENTRAL LONDON JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE	<b>DATE</b>  30 January 2026
<b>SUMMARY OF REPORT</b>  This paper provides the final terms of reference for the JHOSC and proposes that the administrative support for the JHOSC is rotated on an annual basis between the five boroughs in the following order:  Appointed Chair's borough 2026/2027(Haringey to provide support for first 6 months of the municipal year to allow effective handover and continuity) Islington 2027/28 Enfield 2028/2029 Barnet 2029/2030 Camden 2030/2031	
<b>Local Government Act 1972 – Access to Information</b>  No documents that require listing have been used in the preparation of this report.	
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## **RECOMMENDATIONS**

The North Central London Joint Health Overview & Scrutiny Committee is asked to:

- a) Agree the final terms of reference, for onward approval at the Overview and Scrutiny meetings of Haringey, Enfield, Barnet, Camden and Islington and onward ratification at their full Council meetings between March and July 2026.

### **1. Purpose of Report**

- 1.1 An updated terms of reference for the North Central London Joint Health Overview & Scrutiny Committee is provided as **Appendix A**.
- 1.2 The Committee is asked to approve the final terms of reference and propose onward agreement by respective borough parent Scrutiny Committees. This will be followed by ratification at borough Council meetings between March and July 2026.
- 1.3 The update to the terms of reference put forward another option that has been consulted on with Democratic Services managers in the five boroughs. This is as follows:

The administrative support will be rotated on an annual basis, at the start of the municipal year, between the five boroughs and in the following order:

Appointed Chair's borough 2026/2027(Haringey to provide support for first 6 months of the municipal year to allow effective handover and continuity)  
Islington 2027/28  
Enfield 2028/2029  
Barnet 2029/2030  
Camden 2030/2031

### **2. Background**

- 2.1 Early in the 2024/25 municipal year, JHOSC Members noted that the existing terms of reference for the Committee were relatively brief and proposed that a new version should be written to better reflect its practices and procedures.
- 2.2 The Committee met in August 2024 to provide initial input and then again in September 2024 to discuss a first draft of the terms of reference. A second draft was produced shortly afterwards based on this feedback and there have been no

significant amendments subsequent to this. This version is published as **Appendix A**. This document outlines the purpose and powers of the Committee, its relationship with the Health Overview & Scrutiny Committees (HOSCs), the membership of the Committee and the protocol for meetings.

2.3 The final approval of the terms of reference has been delayed due to ongoing discussions about the future resourcing of the scrutiny support for the Committee. While the venues for the meetings of the Committee rotate between the five Boroughs, the London Borough of Haringey currently provides the administrative support to the Committee and the Haringey Members proposed that the financial resourcing could be shared across Boroughs in future. However, with all Boroughs currently experiencing financial pressures, it has not proved possible to resolve this issue. It was then further proposed in July 2025 that starting from the 2026/27 municipal year that the chairing of the meetings be done on an annual rotation basis and in borough alphabetical order. (Year 1 Barnet to chair the meetings) (Year 2 Camden to chair meetings) (Year 3 Enfield to chair meetings) (Year 4 Islington to chair meeting) then Haringey (year 1 2030 to chair meetings) and this option was not agreed with by the JHOSC meeting.

2.4 The Committee agreed in July for the Chair to write to Chief Executives of the five boroughs reiterating the need for financial support to manage and co-ordinate the JHOSC meetings and there were also further discussions with Enfield. Subsequently, the borough Democratic services managers have responded and apart from Camden, the other 3 boroughs are not able to provide the financial support needed to facilitate these meetings which includes:

- Compiling and publishing agendas and minutes for over 7 meetings a year,
- Co-ordinating agenda planning meetings,
- Annual scrutiny of the NHS Quality Accounts for North London Mental Health NHS Trust, Royal Free London NHS Foundation Trust, Whittington Health NHS Trust and North Middlesex University Hospital NHS Trust
- Co-ordinating and supporting briefing meetings with the Chair and Chief Strategy & Population Health Officer at North Central London Integrated Care Board (NCL ICB), and other senior officers. This can be around one a month. These relate to actions arising from the meetings.
- Co-ordinating venues for meetings with Haringey predominantly hosting the meetings.
- Working on governance issues such as updates to the terms of reference.
- Following up on action tracker and information sharing prior to meetings to help with the background and understanding of issues prior to the JHOSC meetings.

2.5 The previous terms of reference in 2016 indicated that the borough hosting the meetings should provide administration, but this provision was not workable before due to need for continuity with support to the chair and to ensure follow up on

actions and agenda planning support. Therefore, given that monetary funding for this support cannot be provided and to maintain democratic accountability of this body, it is proposed that each borough provides democratic services officer support on an annual basis. Democratic Services managers have raised concerns about the number of meetings, the timing of the changes and whether this can be delayed until after the local elections.

### **3. Appendices**

#### **Appendix A – Draft terms of reference for NCL JHOSC**

**DRAFT TERMS OF REFERENCE – North Central London Joint Health Overview & Scrutiny Committee (NCL JHOSC)**

**1 - Purpose of Committee**

- 1.1 The North Central London (NCL) Joint Health Overview & Scrutiny Committee (JHOSC) will operate formally as a statutory committee.
- 1.2 The purpose of the JHOSC is to:
  - engage with relevant NHS bodies on strategic area wide issues in respect of the co-ordination, commissioning and provision of NHS health services across the whole of the area of Barnet, Camden, Enfield, Haringey and Islington;
  - respond, where appropriate, to any proposals for change to specialised NHS services that are commissioned on a cross-borough basis and where there are comparatively small numbers of patients in each of the participating Boroughs;
  - respond to any formal consultations on proposals for substantial developments or variations in health services affecting the North Central London (NCL) area of Barnet, Camden, Enfield, Haringey and Islington on behalf of Councils who have formally agreed to delegate this power to the JHOSC;
- 1.3 The Committee will have regard to the Department of Health & Social Care's guidance on health overview and scrutiny which states that "*the primary aims of health scrutiny are to strengthen the voice of local people and provide local accountability*" and should "*ensure that local people's needs and experiences are considered as an integral part of the commissioning and delivery of health services and that those services are effective and safe*".<sup>1</sup>

**Powers**

- 1.4 The JHOSC is established by the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. These regulations have been amended by the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) (Amendment and Saving Provision) Regulations 2024. This enables two or more local authorities to appoint a joint overview and scrutiny committee of those authorities to exercise relevant functions subject to terms and conditions as the authorities may consider appropriate.
- 1.5 The Integrated Care Board (ICB) for the NCL area covers the boroughs of Barnet, Camden, Enfield, Haringey and Islington. The JHOSC will comprise of Councillors across the same five Boroughs in order to enable effective scrutiny of the NCL ICB.
- 1.6 The NCL ICB should provide relevant information about any significant forthcoming reorganisation of NHS services in the NCL area to the JHOSC in a timely manner.

**Relationship to HOSCs**

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<sup>1</sup> <https://www.gov.uk/government/publications/health-overview-and-scrutiny-committee-principles/health-overview-and-scrutiny-committee-principles>

- 1.7 The JHOSC will work independently of both the Cabinet and health overview and scrutiny committees (HOSCs)<sup>2</sup> of its parent authorities, although evidence collected by individual HOSCs may be submitted as evidence to the joint committee and considered at its discretion.
- 1.8 The JHOSC will seek to promote joint working where it may provide more effective use of health scrutiny and NHS resources and will endeavour to avoid duplicating the work of individual HOSCs. As part of this, the committee may establish sub and working groups as appropriate to consider issues of mutual concern provided that this does not duplicate work by individual HOSCs; and
- 1.9 The agenda papers of JHOSC meetings will be provided to each of the local authorities in the NCL area for publication on their websites.
- 1.10 The minutes of JHOSC meetings will be provided to the HOSCs for possible inclusion in their agenda papers. If the HOSCs are minded to include this as an item on their agenda, any HOSC members who are also members of the JHOSC may wish to use this item as an opportunity to provide a verbal update on issues raised at the previous JHOSC meeting.

## **2 - Membership of Committee**

- 2.1 The Committee shall be comprised of up to ten members in total, with a maximum of two members nominated from each of the five NCL Boroughs.
- 2.2 Appointments to the JHOSC will usually be approved at each authority's Council AGM at the beginning of the municipal year and expire at the end of the same municipal year.
- 2.3 Appointments by each authority to the JHOSC will reflect the political balance of that authority.
- 2.4 Members who hold an executive post shall not be appointed to the JHOSC.
- 2.5 It is strongly advisable that one of the members nominated by each Borough is the Chair of their local HOSC as this helps to strengthen the links between the JHOSC and the HOSCs. It may also be beneficial for the second nominated member from each Borough to be the Chair or a member of their main Overview & Scrutiny Committee (OSC).

### **Chair/Vice-chairs**

- 2.6 The Committee shall appoint a Chair and up to two vice-Chairs at the beginning of the first meeting of each municipal year.

The administrative support will be rotated on an annual basis, at the start of the municipal year, between the five boroughs and in the following order:

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<sup>2</sup> The name and structure of HOSCs varies between Boroughs so, in this context, HOSC refers to the Scrutiny Committee or Panel that usually deals with health policy issues.

Appointed Chair's borough 2026/2027(Haringey to provide support for first 6 months of the municipal year to allow effective handover and continuity)

Islington 2027/28

Enfield 2028/2029

Barnet 2029/2030

Camden 2030/2031

This is to ensure close working and continuity for effective progression of actions and responsibilities.

#### Quorum

2.7 The quorum for the Committee shall be:

- a) At least four members of the Committee; and
- b) At least one member from at least four of the five Boroughs.

#### Substitutes & Co-opted members

2.8 Member substitutes from each authority will be accepted. It will be the responsibility of individual committee members and their local authorities to arrange substitutions and to ensure that the lead authority is informed of any changes prior to the meeting.

2.9 Where a substitute is attending the meeting, it will be the responsibility of the nominated member to brief them in advance of the meeting.

2.10 The Committee shall reserve the right to consider the appointment of additional temporary co-opted members in order to bring specialist knowledge to inform specific work streams or agenda items. Any co-opted member appointed will not be permitted to vote at meetings.

### **3 – Protocol for meetings**

3.1 Meetings of the Committee will be conducted under the Standing Orders of the Local Authority hosting and providing democratic services support and will be subject to these terms of reference.

#### Work programme

3.2 A schedule of meetings will be agreed by the Committee at the beginning of each municipal year. The Committee shall hold five ordinary meetings of the Committee in each municipal year.

3.3 The Committee may also hold up to two further meetings in each municipal year for the specific purpose of scrutinising the draft Quality Accounts produced annually by NHS Trusts in the NCL area.

- 3.4 In addition to ordinary meetings of the Committee, extraordinary meetings may be called from time to time as and when appropriate. An extraordinary meeting of the Committee may be called by the Chair after consultation with the vice-Chairs.
- 3.5 The Committee shall be regularly consulted on the setting of items for the agendas of future meetings through a standing item on the work programme at every ordinary meeting of the Committee. Members of the Committee can also submit suggestions for future agenda items to the Chair and vice-Chair(s) at any time.
- 3.6 The Chair and vice-Chair(s) will usually meet with senior representatives from the NCL ICB and any other relevant NHS organisations approximately 6-8 weeks in advance of an ordinary meeting of the Committee in order to determine the agenda for the meeting and the content of the reports. This should include consideration of any input from the other Committee members.

#### Meetings

- 3.7 Ordinary meetings of the Committee will normally be held at 10am and are typically scheduled to last for two and a half hours. The Committee may vary the scheduling and timings of the meetings as and when required.
- 3.8 The Committee will normally hold an informal private 30-minute meeting just before the main meeting, in order to allow Committee members to discuss any procedural issues and possible lines of enquiry relating to the reports in the agenda pack. The Committee may vary the arrangements for this as and when required.
- 3.9 The venues for meetings of the Committee will normally be rotated regularly across all five Boroughs in the NCL area.

#### Voting

- 3.10 The Committee will usually endeavour to reach its decisions by consensus. However, in the event that a vote is required, each Member present will have one vote. In the event of there being an equality of votes, the Chair of the meeting will have the casting vote.

#### Deputations/Questions

- 3.11 A deputation may be received by the Committee if a request stating the object of the deputation is received by the Chair and/or committee clerk at least three clear days prior to the meeting.
- 3.12 Up to 15 minutes shall usually be allocated to deputations on the Committee agenda.
- 3.13 The deputation spokesperson will be given five minutes to introduce the deputation referring to the matters in their deputation requisition. After this they may answer any questions from Committee members. The Chair will allocate a maximum amount of time for each deputation and will have regard to other items of business on the agenda when doing so.