

Lancashire County Council

Urgency Committee of the Full Council

**Thursday, 28th March, 2013 at 2.00 pm in Cabinet Room 'B' - County Hall,
Preston**

Agenda

Part 1 (Open to Press and Public)

No. Item

1. Apologies

2. Disclosure of Pecuniary and Non-Interests

Members are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.

3. Minutes of Previous Meeting held on 8 November 2012 (Pages 1 - 2)

The Committee is asked to confirm the Minutes of the meeting held on 8 November 2012 as a true and correct record.

4. Urgent Business

An item of urgent business may only be considered under this heading where, by reason of special circumstances to be recorded in the Minutes, the Chair of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Member's intention to raise a matter under this heading.

5. Lancashire Health and Wellbeing Board (Pages 3 - 16)

6. Lancashire County Council Independent Remuneration Panel (Pages 17 - 24)

I M Fisher
County Secretary and Solicitor

County Hall
Preston

Agenda Item 3

Lancashire County Council

Urgency Committee of the Full Council

Minutes of the Meeting held on Thursday, 8th November, 2012 at 2.30 pm in Cabinet Room 'C' - County Hall, Preston

Present:

County Councillor Geoff Driver (Chair)

County Councillors

A Atkinson	D O'Toole
M Devaney	J Shedwick
K Iddon	B Winlow
J Mein	

1. Apologies

Apologies for absence were received from County Councillors C Grunshaw and P Malpas.

County Councillor K Iddon replaced County Councillor P Malpas for the meeting.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

None.

3. Minutes of Previous Meeting

Resolved: That the Minutes of the Meeting held on 17 January 2012 be confirmed and signed by the Chair.

4. Membership of the Scrutiny Committee

It was reported that the Scrutiny Committee in July 2012 had received a report of the Arts Development Funding Joint Task Group established to examine the state of arts in pan Lancashire. The Committee approved the Task Group's report and its recommendations with some amendments.

The final approved report of the Task Group was then referred to the appropriate Cabinet Member, County Councillor Mike Calvert, to formally respond to the recommendations of the Task Group. The report was also issued by the County Council to all witnesses and partners involved in the Task Group's work.

It had subsequently come to light that the Chairman of the Task Group, County Councillor Kevin Ellard, had issued to the same organisations and individuals an

unauthorised version of the report. A number of those who had received both versions of the document had contacted the County Council expressing their confusion.

In considering what action to take on the matter the Committee noted that the Labour Group had removed County Councillor Ellard from the membership of the Scrutiny Committee until the end of the municipal year.

Resolved: That the Committee note that County Councillor K Ellard has been removed from the membership of the Scrutiny Committee by the Labour Group until the end of the municipal year and agree that in those circumstances no further action need therefore to be taken.

5. Urgent Business

None.

I M Fisher
County Secretary and Solicitor

County Hall
Preston

Urgency Committee
Meeting to be held on 28 March 2013

Electoral Division affected: All

Lancashire Health and Wellbeing Board
Establishment: Board Arrangements, Terms of Reference and Rules of Procedure; and Arrangements for Health Overview and Scrutiny
(Appendices 'A' and 'B' refer)

Contact for further information:
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Executive Summary

The establishment of a Lancashire Health and Wellbeing Board, and revised arrangements for Health Overview and Scrutiny.

Recommendation

The Committee is asked to:

- i. agree to the establishment of a Lancashire Health and Wellbeing Board as a formal Committee of the County Council, on the basis as set out in this report;
- ii. approve the membership to the Lancashire Health and Wellbeing Board for 2013/14, on the basis as set out in this report,
- iii. approve that all members of the Lancashire Health and Wellbeing Board shall have equal voting rights, on the basis set out in the terms of reference of the Board set out at Appendix 'A', and disapply the requirements to political proportionality,
- iv. agree to the arrangements, procedural rules and the terms of reference of the Board as set out in this report,
- v. agree that the health scrutiny functions of Lancashire County Council be discharged by the Health Scrutiny Committee, and;
- vi. agree the revised terms of reference for the Health Scrutiny Committee as set out in this report and Appendix 'B'.

Background and Advice

The Health and Social Care Act 2012 stated that local authorities must establish a Health and Wellbeing Board for their areas.

The act states that: 'A Health and Wellbeing Board is a committee of the local authority which established it and, for the purposes of any enactment, is to be treated as if it were a committee appointed by that authority under section 102 of the Local Government Act 1972.'

On 8th February 2013 the Government published the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. The publication of these regulations prescribes the rules on the arrangements, procedural rules and regulations relating to Health and Wellbeing Boards and Health Overview and Scrutiny.

Health and Wellbeing Board

A Health and Wellbeing Board is a committee of the local authority which established it and, for the purposes of any enactment, is to be treated as if it were a committee appointed by that authority under section 102 of the Local Government Act 1972.

The regulations make provision for the disapplication and modification of certain enactments relating to local authority committees appointed under section 102 of the Local Government Act 1972, insofar as they are applicable to a health and wellbeing board established under section 194 of the Health and Social Care Act 2012. The regulations aim to provide local areas with the flexibility and freedom to shape their health and wellbeing boards as best fits with local circumstances. In particular:

- health and wellbeing boards will be free to establish sub-committees and delegate functions to them;
- voting restrictions have been lifted so that non-elected members of a health and wellbeing board (i.e. CCG representative, local Healthwatch, Directors of Public Health, Children's Services and Adult Social Services and any wider members) could vote alongside nominated elected representatives on the board.
- political proportionality requirements have also been lifted so that the question of political proportionality of health and wellbeing board membership is left to local determination.

Role and Responsibility of Health and Wellbeing Boards

The Health and Social care Act 2012 establishes health and wellbeing boards as a forum where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.

Each top tier and unitary authority should have its own health and wellbeing board. Board members will collaborate to understand their local community's needs, agree priorities and encourage commissioners to work in a more joined up way. As a result, patients and the public should experience more joined-up services from the NHS and local councils in the future.

Health and wellbeing boards are a key part of broader plans to modernise the NHS to:

- ensure stronger democratic legitimacy and involvement
- strengthen working relationships between health and social care, and;
- encourage the development of more integrated commissioning of services.

The boards will help:

- give communities a greater say in understanding and addressing their local health and social care needs.
- secure better outcomes for the population, better quality of care for patients and care users and better value for the taxpayer.
- be the key partnership for improving and promoting the health and wellbeing of residents. Its focus will be on securing the best possible health outcomes for all people.

What will they do?

- Health and wellbeing boards will have strategic influence over commissioning decisions across health, public health and social care.
- Boards will strengthen democratic legitimacy by involving democratically elected representatives and patient representatives in commissioning decisions alongside commissioners across health and social care. The boards will also provide a forum for challenge, discussion, and the involvement of local people.
- Boards will bring together clinical commissioning groups and councils to develop a shared understanding of the health and wellbeing needs of the community. They will undertake the Joint Strategic Needs Assessment (JSNA) and develop a joint strategy for how these needs can be best addressed. This will include recommendations for joint commissioning and integrating services across health and care.
- Through undertaking the JSNA, the board will drive local commissioning of health care, social care and public health and create a more effective and responsive local health and care system. Other services that impact on health and wellbeing such as housing and education provision will also be addressed.

Timetable for Implementation

A Shadow Health and Wellbeing Board has been operational since January 2012, the Health and Wellbeing Board must be established by April 2013. It is therefore proposed that the Lancashire Health and Wellbeing Board be established, effective from 1 April 2013.

Make up, Terms of Reference, Arrangements and Roles and Responsibilities

Local Authorities are also asked to agree the Terms of Reference, Arrangements, and Roles and Responsibilities of their respective Health and Wellbeing Board, which are prescribed in legislation and can be supplemented for local operational needs.

The Health and Social Care Act 2012 sets a core membership that Health and Wellbeing Boards must include:

- At least one councillor from the relevant council (in this instance Lancashire County Council)
- The Director of Adult Social Services
- The Director of Children's Services
- The Director of Public Health
- A representative of the local Healthwatch organisation (which will come into being on a statutory footing on 1 April 2013)
- A representative of each relevant Clinical Commissioning Group (CCG)
- Any other members considered appropriate by the Council (in this instance Lancashire County Council)

The act enables the County Council to include other members as it thinks appropriate. It is recommended that the existing membership of the Shadow Health and Wellbeing Board for Lancashire be formally included in the full Board membership with equal voting rights. Any subsequent changes to the membership will require the authority to consult the Health and Wellbeing Board if doing so any time after the Board is established.

All Members of the Board will be bound by the County Council's code of conduct and requirements on Disclosable Pecuniary Interests. Further information on the code of conduct and Disclosable Pecuniary Interests can be accessed here: <http://www.lancashire.gov.uk/corporate/web/?Constitution/34193> .

Non-councillor members of the Board may be bound by other codes of conduct and professional standards. For example, the General Medical Council (GMC) provides advice for members of the medical profession on standards of professional conduct for doctors and the Health and Care Professions Council (HCPC) sets standards for members of the social work profession and of health care professions.

Attached at Appendix 'A' are the terms of reference, draft board arrangements and draft rules of procedure, for approval by the Committee. The documents are based on legislation, guidance and regulations currently available. They also reflect the current Terms of Reference and Membership of the Shadow Board, so far as they are able to under the new rules.

Frequency of Board meetings

It is expected that that the Lancashire Health and Wellbeing Board will meet at least four times per year to undertake its statutory functions. The Board can determine its own meetings cycle and appoint any sub-committees or task groups as it sees fit. It is intended that each year the Board will be appointed for a 12 month period, and appointments confirmed at each respective Annual Meeting in May, to enable any annual adjustment of the Panel arising from Council elections in May.

It is intended that the first meeting of the Lancashire Health and Wellbeing Board will be held on 25 April 2013.

Overview and Scrutiny

The regulations make a number of changes to the rules around Health Overview and Scrutiny. The power to require the NHS to attend meetings, and reply to requests for information and responses to recommendations made by scrutiny remains. The key changes are:

- Full council can determine how health scrutiny powers are dispensed – it is no longer a requirement to have a Health Scrutiny committee. This reflects the changes in the Localism Act allowing councils to adopt a committee system, and ensures that these councils which no longer operate any scrutiny function are still able to exercise health scrutiny powers.
- Where a matter is referred to the Health Scrutiny Committee by the Local Healthwatch, there would be an obligation on the scrutiny committee to acknowledge receipt of the referral and keep Healthwatch informed of action taken

The Committee is therefore asked to agree that health scrutiny powers will be exercised by the Health Scrutiny Committee, and that the revised terms of reference attached as Appendix 'B' are agreed.

Consultations

N/A

Implications

Risk management

The Health and Social Care Act 2012 states that local authorities must establish a Health and Wellbeing Board for their areas by 1 April 2013.

Local Government (Access to Information) Act 1985

List of Background Papers

N/A

Reason for inclusion in Part II, if appropriate

Lancashire Health and Wellbeing Board Terms of Reference

1. Purpose

To lead on the strategic co-ordination of commissioning of health, social care and health related services across the NHS, social care and public health.

The starting point for the Health and Wellbeing Board is one of assumed collaboration.

2. Principles

The Health and Wellbeing Board will operate in accordance with the following principles:

- Members of the Board will accept shared leadership for the health and well being of the communities of Lancashire
- The Board will promote joint working and wide engagement amongst bodies working for the health and well being of the people of Lancashire, whether represented on the board or not.
- The Board will be open, transparent and accountable in its actions and decisions
- The Board will be inclusive and seek to engage with patients, service users and the public.
- Board members will have respect for each other's organisational culture, and relationships will be based on trust.
- The Board collectively is accountable to the County Council, individual board members are representing their respective organisations and bodies.
- There will be a commitment to drive real and meaningful change to improve services and outcomes.
- All decisions will be based on parity between board members and a commitment to shared responsibility for decisions.
- The Board and its members will work in partnership and collaborate with other non health related strategic partnerships in Lancashire.

3. Functions

- To prepare a Joint Strategic Needs Assessment (JSNA) for Lancashire.
- To determine the priorities for, and prepare, the Joint Health and Wellbeing Strategy for Lancashire, that spans the NHS, social care, public health, and wider health determinants. The Strategy will be based on the JSNA and will focus on priority outcomes which address the health inequalities in Lancashire.
- To promote integration and partnership between health and social care commissioners, including providing advice, assistance and support to encourage arrangements under Section 75 of the National Health Service Act 2006 in connection with the provision of health and social care services.
- To encourage close working between commissioners of health related services and the board.

- To encourage close working between commissioners of health related service and commissioners of health and social care services.
- To ensure that, regardless of provider, commissioning decisions for health and wellbeing are in line with the joint Health and Wellbeing Strategy and take due notice of the JSNA, and any structures underneath the Lancashire Health & Wellbeing board are fit for purpose and align with commission plans.
- To co-ordinate effort to make the public monies invested in health and wellbeing work effectively to address the health inequalities to deliver the priorities in the Health and Wellbeing Strategy.
- Hold to account those responsible for the delivery of the outcomes set out in the Strategy.
- Lobby and represent the views of health agencies in Lancashire to regional and national policy makers.
- The Board cannot discharge the functions of any of the Partners
- Where appropriate, to make arrangements for the exercise of the functions of the Board jointly with the Health and Wellbeing Board of another local authority.
- To require information from the local authority or any other representative serving on the Board in connection with the discharge of its functions, where that information is a function of that representative's role.

4. Membership

The membership of the Lancashire Health and Wellbeing Board will consist of:

- Cabinet Member for Health & Wellbeing, LCC* (Chairperson)
- Cabinet Member for Children and Schools, LCC
- Cabinet Member for Adult and Community Services, LCC
- Executive Director with responsibility for adult social services, LCC* (Director of Adult Social Care)
- Director of Public Health, LCC*
- Executive Director with responsibility for children's social services, LCC* (Director of Children's Services)
- 6 Clinical Commissioning Group (CCG) Network Members* (1 to be nominated by each CCG)
- Director of Lancashire Area Team (National Commissioning Board)
- 3 District Councillors (one from each of the sub areas of Lancashire, to be nominated by the Lancashire Leaders Group)
- 1 District Council Chief Executive (To be nominated by the Lancashire Chief Executives Group)
- Third Sector Representative (To be nominated by One Lancashire)
- Chairperson of Healthwatch*
- 2 Providers (To be nominated by Chief Executives of NHS Foundation Trusts)

* Denotes core member of the Board. Core members have automatic voting rights and the County Council can decide whether other non-core members can have voting rights. The County Council has decided that all members as listed above will have equal voting rights. All members are required to abide by the Lancashire County Council Members' and Co-opted Members' Code of Conduct.

5. Meeting Arrangements

Unless specified below, meeting arrangements are subject to the County Council's procedural standing orders

- The County Council's Cabinet Member with responsibility for Health and Wellbeing will be the Chair of the Board;
- The Board will appoint Deputy Chair annually
- The Board will meet quarterly, or more/less frequently if it so decides;
- The quorum at a meeting of the Board shall be a quarter of the whole number of voting members of the Board with at least one cabinet member being present;
- Substitutes for Board members are permitted with written notification being given to the clerk by the relevant nominating body in advance of the meeting.
- Meetings of the Board are open to the public but they may be excluded where information of an exempt or confidential nature is being discussed – see Access to Information Rules set out at Appendix 'H' in the County Council's Constitution.

Proposed Revised Terms of Reference – Health Scrutiny Committee

2. **Health Scrutiny Committee** (Thirteen County Councillors and twelve non-voting Co-opted district Members)

To review and scrutinise issues around public health and health inequalities. The Committee will review and scrutinise the work and performance of any relevant part of the County Council and its partners and the functions of the relevant Cabinet Members

To discharge the statutory health overview and scrutiny functions under the provisions of the Health and Social Care Act 2012. For this purpose the Committee shall include twelve non-voting Co-opted district council Members.

Health Scrutiny Committee

Note: The Committee shall, for the purpose of discharging the statutory health overview and scrutiny functions, comprise twelve non-voting district council Members

1. To review decisions made, or other action taken, in connection with the discharge of any relevant functions undertaken by the Cabinet collectively, or the relevant Cabinet Members or Cabinet Committee.
2. To make reports or recommendations to the Full Council, the Cabinet or the relevant Cabinet Member or Cabinet committee with respect to the discharge of any relevant functions undertaken by the Cabinet collectively or the relevant Cabinet Member or Cabinet committee.
3. In reviewing decisions (other than decisions designated as urgent under Standing Order 34(3)) made in connection with the discharge of any relevant functions undertaken by the Cabinet collectively or the relevant Cabinet Member or Cabinet committee, but which have not been implemented, the Committee may recommend that the decision be reconsidered by the person who made it or to refer the decision to the Full Council for it to decide whether it wishes it to be reconsidered by the decision taker.
4. To request a report by the executive to Full Council where a decision which was not treated as being a key decision has been made and the Health Scrutiny Committee is of the opinion that the decision should have been treated as a key decision

5. To hold general policy reviews and to assist in the development of future policies and strategies (whether requested by the Full Council, the Cabinet, the relevant Cabinet Member, Cabinet committee or decided by the Committee itself) and, after consulting with any appropriate interested parties, to make recommendations to either the Cabinet, the relevant Cabinet Member, Cabinet committee or to the Health and Well Being Board or the Full Council as appropriate.
6. To review and scrutinise any County Council services planned or provided as part of the Council's wider public health responsibilities, and to make recommendations to the Full Council, the Health and Well Being Board or the Cabinet or Cabinet committee, as appropriate.
7. To review and scrutinise any matter relating to the planning, provision and operation of the health service in the area and make reports and recommendations to NHS bodies as appropriate,
8. In reviewing any matter relating to the planning, provision and operation of the health service in the area, to invite interested parties to comment on the matter and take account of relevant information available, particularly that provided by the Local Healthwatch
9. To review and scrutinise any local services planned or provided by other agencies which contribute towards the health improvement and the reduction of health inequalities in Lancashire and to make recommendations to those agencies, as appropriate
10. In the case of contested NHS proposals for substantial service changes, to take steps to reach agreement with the NHS body
11. In the case of contested NHS proposals for substantial service changes where agreement cannot be reached with the NHS, to refer the matter to the relevant Secretary of State.
12. To refer to the relevant Secretary of State any NHS proposal which the Committee feels has been the subject of inadequate consultation.
13. To scrutinise the social care services provided or commissioned by NHS bodies exercising local authority functions under Section 31 of the Health Act 1999.
14. To request that the Scrutiny Committee establish as necessary joint working arrangements with district councils and other neighbouring authorities.
15. To draw up a forward programme of health scrutiny in consultation with other local authorities, NHS partners, the Local Healthwatch and other key stakeholders.

16. To acknowledge within 20 working days to referrals on relevant matters from the Local Healthwatch or Local Healthwatch contractor, and to keep the referrer informed of any action taken in relation to the matter
17. To consider any relevant matter referred to the Committee by the Scrutiny Committee following a request by a County Councillor or a Co-optee of the Committee who wishes the issue to be considered.
18. To request that the Scrutiny Committee establish task groups and other working groups and panels as necessary.
19. To require the Chief Executives of local NHS bodies to attend before the Committee to answer questions, and to invite the chairs and non-executive directors of local NHS bodies to appear before the Committee to give evidence.
20. To invite any officer of any NHS body to attend before the Committee to answer questions or give evidence.
21. To invite to any meeting of the Committee and permit to participate in discussion and debate, but not to vote, any person not a County Councillor whom the Committee considers would assist it in carrying out its functions.
22. To recommend the Full Council to co-opt on to the Committee persons with appropriate expertise in relevant health matters, without voting rights.
23. To require any Councillor who is a member of the Cabinet, the appropriate Executive Director or a senior officer nominated by him/her, or the Director of the Lancashire County Commercial Group to attend any meeting of the Committee to answer questions and discuss issues.
24. To recommend to the Scrutiny Committee appropriate training for members of the Committee on health related issues

Agenda Item 6

Urgency Committee

Meeting to be held on 28 March 2013

Electoral Division affected: None

Lancashire County Council Independent Remuneration Panel

(Appendices 'A' and 'B' refer)

Contact for further information:

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Executive Summary

The appointment of additional members of the Independent Remuneration Panel

Recommendation

The Committee is asked to approve an increase in the size of the Panel to 6 members and the appointment of Irene Divine, Keith Leaver and Terry Whitehead, as members of the Independent Remuneration Panel for a four year term with effect from 28 March 2013.

Background and Advice

The County Council is by Regulation obliged to put in place a Remuneration Panel to make recommendations to the Authority about Allowances to be paid to members.

The Constitution and Terms of Reference of the Council's Panel are set out at Appendix 'A'. These have been derived from the Local Authorities (Members' Allowances) (England) Regulations 2003 and associated guidance.

Panels are required to consist of at least three members. However, in 2006 the County Council agreed to increase membership of its Panel from three to five in order to seek to ensure that sufficient members are available when required to conduct any necessary business. Since then Panel has comprised five members but there are now two vacancies with the existing members of the Panel being:

- Gordon Johnson DL (Chair)
- Dennis Mendoros OBE DL
- Gayle Stanley MBE DL

Notice of the vacancies inviting applications, and the role specification for members of the Panel (Appendix 'B') have been placed on the Council's website. Three applications have been received from the three former Independent Members of the former Standards Committee of the County Council:

- Irene Divine
- Keith Leaver
- Terry Whitehead

In appointing its Panel, a local authority should consider candidates' knowledge of local government and the way it works although lack of familiarity with the functions of councils should not be a bar to appointment. The three applicants have considerable knowledge and experience of the County Council as they all served on Council's Standards Committee until it was disestablished in June 2012.

Whilst the Panel's current size is 5 members, and there are currently 2 vacancies, all 3 applicants are considered to have similar skills and experience relevant to the role. It is therefore suggested appropriate to consider an increase in the size of the Panel to 6 members and to consider appointing all 3 applicants to the panel. This will increase the capacity of the Panel to ensure that sufficient members are available when required to conduct any necessary business.

The appointments if made by the Committee on behalf of the County Council would be for a four year term with effect from 28 March 2013.

The three applicants have all been appointed by the County Council as Independent persons in relation to Councillor code of conduct matters. These appointments do not disqualify the three applicants from being appointed as members of the Independent Remuneration Panel.

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Risk management

These are outlined in the report

Local Government (Access to Information) Act 1985 List of Background Papers

Paper	Date	Contact/Directorate/Tel
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N/A

Reason for inclusion in Part II, if appropriate

N/A

Lancashire County Council

Remuneration Panel

Constitution and Terms of Reference

1. Terms of Reference of the Panel

1.1 The Panel shall make recommendations on schemes of payments to Councillors and produce a report in relation to Lancashire County Council making recommendations as to:

- a) the amount of the basic allowance
- b) the responsibilities and duties for which; special responsibility allowance, travel and subsistence allowance and co-optees allowance may be payable and setting the amount of such allowances
- c) whether dependants' carers' allowance should be payable to Members and the amount of that allowance
- d) whether if a scheme is amended during the year to affect the amount of allowance any payment may be backdated to the beginning of the year
- e) whether adjustments should be determined by reference to an index, which index should apply and for how long, subject to a maximum period of four years before application of that index is reviewed.
- f) which Members of the Authority are to be entitled to join the pension scheme.
- g) treating basic allowances or special responsibility allowance as amounts in respect of which such pensions are payable.

2. Membership of the Panel

2.1 The Panel shall consist of at least five Members appointed by Lancashire County Council.

2.2 The appointment of a Panel Member shall continue for a period of four years unless the member resigns from his appointment to the Panel. If a member is willing to serve for a second term, the County Council may continue such member appointment for a period of up to a further four years.

2.3 If a Panel Member should commit a criminal offence or engage in conduct such that by association Lancashire County Council might be brought into disrepute that Member shall at the request of Lancashire County Council resign from the Panel.

3. Chair

3.1 Lancashire County Council shall nominate one of the Members to be the Chair of the Panel for a twelve month period from the date of appointment.

4. Conduct of Meetings

4.1 The Panel shall meet at least once a year to consider their report to be produced to the Authority.

4.2 Further meetings of the Panel will be convened by Lancashire County Council or the Chair of the Panel as appropriate.

5. Quorum

5.1 No business shall be transacted at a Panel meeting unless at least three Members are present, including the Chair.

6. Casting Vote

6.1 The Chair of the Panel shall be able to exercise a casting vote upon any matter that the Panel considers.

7. Secretarial support

7.1 Lancashire County Council will provide secretarial support to the Panel as required and will provide the Panel with all the information which it has to enable the Panel to fulfil its responsibilities.

8. Expenses of Panel Members

8.1 Lancashire County Council will reimburse Members for their travel expenses.

Appendix 'B'

Role Specification for Members of the Lancashire the Lancashire Independent Remuneration Panel

The following qualities are sought in Members of Lancashire's Independent Remuneration Panel.

- Good character
- Understanding and communication
- Social awareness
- Maturity and sound temperament
- Sound judgement
- Commitment
- Reliability

By law Members of the Panel cannot be members of the County Council or barred from membership of the County Council (details of disqualifications are attached at Annex 1).

It is helpful if members of the Panel have some knowledge of the workings of Local Government and the role of Councillors.

Members of the Panel need to be available to attend meetings during the working day roughly four times a year.

Lancashire County Council - Independent Remuneration Panel

Disqualifications

You are disqualified from being a Member of a local authority Independent Remuneration Tribunal if:

- you are employed by the local authority or hold a paid office under the authority (including joint boards or committees); or
- you are someone who is the subject of a bankruptcy restrictions order in England or Wales, who has been adjudged bankrupt in Northern Ireland, or who has had their estate sequestered in Scotland; or
- you have been sentenced to a term of imprisonment of three months or more (including a suspended sentence) without the option of a fine, during the five years before the date of election; or
- you have been disqualified under Part III of the Representation of the People Act 1983 or under the Audit Commission Act 1998.

Disqualification also applies if you have been convicted or reported guilty of a corrupt or illegal practice by an election court, or if you have been disqualified from standing for election to a local authority following a decision of the Adjudication Panel for England.

The Local Government and Housing Act 1989 also defines a number of politically restricted posts under a local authority which would disqualify you from being a member of any local authority in Great Britain.

