

Meeting:	eeting: Northern England Clinical Senate Council Meeting					
Date:	Tuesday 20 September 2022					
Time:	5:00pm – 6:30pm					
Venue:	via Teams					
Present:	Present: Name:					
	Sam Bethapudi, GP Principal Dunelm Medical Practice, Post Graduate Trainer & GP Appraiser. Member RCGP National Council	SB				
	Prof Andrew Cant, NE Senate Chair, Consultant in Paediatric Immunology, Newcastle Upon Tyne Hospitals NHS FT	AC				
	Ben Clark, Deputy Director, Clinical Delivery, Medical Directorate, NHSE, North East & Yorkshire	ВС				
	Lesley Durham, Director and Lead Nurse at the North of England Critical Care Network	LD				
	Dr Katie Elliott, Salaried GP, CRUK Strategic GP NCA Doctor Representative, South Tees FT, Collingwood Medical Group	KE				
	Martyn Farrer, Consultant Cardiologist & Clinical Director for Emergency Medicine, City Hospitals Sunderland NHSFT	MF				
	Dr Lesley Kay, Senate Vice Chair and Consultant Rheumatologist, Newcastle Upon Tyne Hospitals NHS FT	LK				
	Dr Raj Khanna, GP and Emergency Department Consultant, South Tyneside and Sunderland NHS Foundation Trust Dr Jean McLeod, Consultant Physician in Medicine & Diabetes, North Tees and Hartlepool NHS FT Dr Robin Mitchell, Clinical Director, Northern England Clinical Networks Dr Jonathan Slade, GP in Stockton-on-Tees and Assistant Medical Director NHS England & NHS Improvement NEY Jenna Wall, Clinical Lead for Midwifery for the North East and North Cumbria Maternity Network and Local Maternity System					
Senate support: Karen Pellegrino, Senate support		KP				
Apologies	Name					
	Dr John Bourke, Consultant Cardiologist & Senior Lecturer Dept of	JB				
Cardiology, Newcastle Upon Tyne Hospitals NHS FT Prof Mike Bramble, Senior Fellow in Gastroenterology, South Tees Hospitals FT		МВ				
	NHS FT Dr Paul Goldsmith, Consultant Neurologist, Newcastle Upon Tyne Hospitals NHS FT Prof lan Greaves, Consultant in Emergency Medicine, Department of Academic Emergency Medicine, Academic Centre, James Cook University Hospital Neil Halford, Deputy Medical Director at Gateshead Health NHS FT Elaine Henderson, Director of Nursing Delivery at Northumbria Healthcare NHS FT Dr Angela Kennedy, Consultant Psychologist, Tees Esk & Wear Valley NHS FT & member of NE Mental Health Network					
	Fiona McEvoy, Head of Nursing Quality, North Tees and Hartlepool NHS FT Jacqui Old, Director of Childrens & Adult Services, North Tyneside Council Community Services Directorate	FMc JO				

		Dref Ctovo Doboon, Conquitorit Ob atatrician, Clinical Lead NENO	Motoreite	CD
	Prof Steve Robson, Consultant Obstetrician, Clinical Lead NENC Maternity Network		•	SR JSc
	Dr Jon Scott, Consultant Physician/Geriatrician, South Tyneside Hospital NHS FT			
		s and	AS	
		Hartlepool NHS FT Prof Gerry Stansby, Consultant Vascular Surgeon, Newcastle Up	on Tyne	GS
	Hospitals NHS FT & Chair of NE Vascular Advisory Group Jeanette Unwin, NENC&YH Clinical Senate Manager			JU
		MINUTES		
1.		INTRODUCTION		Attachment
	1.1	Welcome and Apologies		
		AC welcomed everyone to the meeting and introduced council member Jenna Wall, who had kindly agreed to discuss the Ockenden Report	AC/JU	
		Apologies received, noted as above.		
	1.2	Minutes of previous meeting		
		Minutes of the previous meeting held on 28 June recorded as accurate.	AC	
	1.3	Declarations of interest		
		LK declared an interest that HSIB runs the maternity investigation programme.	AC	
	1.4	Matters arising/actions from previous minutes		
		None noted	AC	
2.		AGENDA ITEMS		
	2.1	Jenna Wall, Clinical Lead for Midwifery for the North East and North Cumbria Maternity Network and Local Maternity System, to discuss the Ockenden Report, with Q&A	JW	
		Key themes from the presentation:		
		Background - Donna Ockenden was asked to review Maternity Services in the Shrewsbury and Telford Hospital Trust by the Secretary of State, following clinical incidents between 2000 and 2019.		
		The final report published 30 March 2022 outlined local actions for learning for the Trust and immediate and essential actions for the Trust and wider system that were required to be implemented to improve safety in maternity services for the Trust and across England.		

12 urgent clinical priorities were identified and all Trusts were asked to confirm that they had implemented these by the 21 December 2022.

A maternity services assessment and assurance tool supports providers to assess their current position against seven Immediate and Essential Actions (IEAs) and provide assurance of effective implementation to their boards, Local Maternity System and NHSE/I, they are;

- 1: Enhanced Safety
- 2: Listening to women and families
- 3: Staff training and working together
- 4: Managing complex pregnancy
- 5. Risk assessment in pregnancy
- 6. Monitoring fetal well-being
- 7. Informed consent

One year on from the Report, Ruth May asked that progress against the seven IEAs be shared and discussed at Board level. Regional assurance is supported with robust governance arrangements and reporting mechanisms and the system has benefited from shared learning. Essential actions are ongoing and workforce remains a concern in areas of recruitment and retention.

The next steps are supporting Trusts, gathering in feedback from Regional assurance visits and managing workforce pressures.

ALL Discussions took place, summarised below:

How improvements can be made in relationships with professional working groups, which in some areas can be difficult. A MATNeoSip programme has produced score surveys, providing insights into different staff groups and pressures felt in MDT's. MDT training can help support this and also the networks within the Region have a mix of professionals within groups. Learning and sharing needs to be across all systems and the introduction of BadgerNet can help improve this as its visible to all.

Maternity engagement groups have service user representation and they have been supported by the use of social media, particularly during the pandemic. The younger female population who are accessing maternity services are using the digital and virtual methods which has been really helpful.

Measuring the things that are important is improving, the Patient Safety Learning network supports this.

Challenges remain an issue with workforce pressures and around retaining and recruiting staff. Improving outcomes for patients and public opinion of maternity services is a main priority.

LK offered to share details for PSIRF to be invited to talk to the Senate

JW added that this would be valuable for the LMNS

AC thanked JW for the presentation and the discussions that followed.

2.2	National Update	BC/AC	
	Next National Senate meeting is 15 November and will update at the next Senate meeting.		
	BC informed the Council about the changes within the organisational form of NHE/I, NHS Digital and HHE. This will see a reduction in headcount of the new joint organisation by 30-40% of current combined headcount.		
	A national facilitated process is being undertaken to look at what the change opportunities are within current regions and national directorates and what the new operating model will to work with ICBs now they are statutory organisations.		
	This will affect the assurance role (including that of service change / reconfiguration) and how that relates to Clinical Senates (which will be remain as a source of independent clinical advice to ICBs) and their support function within NHSE.		
	Action: BC will bring a further update to the next meeting or circulate something electronically if something material occurs before then that Council members need to be aware of.		
2.3	Northern Senates joint Development Day	AC	
	AC informed the Council that Jeanette and Caroline Baines, North West Senate Manager, are organising a joint Northern Senates development day due to take place on Thursday 23 March and Wednesday 19 April, hold the dates have been sent out.		
2.4	Reports for Ratification	AC/BC	
	NW Spec Comm final report, circulated with agenda AC detailed the process by which the panel produced the report and invited the council to comment from their reading of it and if it appears to have been done in a correct and proper way.		
	Decision: No comments received therefore AC added the report was now ratified.		
2.5	Northern England Senate-led Projects	AC/BC	
	Review of Autism provision in WY ICS. No further updates		
	SWYPFT Review of Older People's Services A panel visit took place on 20 June and a virtual meeting was held on 9 August. The Panel were overall impressed with the plan, but it needed to include a wider range of options and not just the preferred option, which will be reflected in the Senate Report. JSI informed of NHSE involvement with this service change and added that the Senate Report has been considered and changes have been made during consultation.		
	LWH Stage 2 Confirmed the preferred option would be a move to an acute site. Another review led by the NW Senate is looking into Women's		

services and the NE Senate may be asked to give final assurances on this. AC thanked all involved 2.6 Northern England Senate-related Projects HASR Refresh AC invited comments from those involved to date: MF added the panel were asked to give assurances on 3 areas, they were provided with enough information for one but more required for the two others, JU is aware of this and will feed back. RM agreed, constrained by the range at what to look at and the capital spend has a considerable implication. RK took part in the first review and fed back about the unintended consequences of the options re geography and aligned services. BC made the group aware that the HAS programme may be approaching the Senate for further support in the early 2023 as the programme moves on to the next stage of development. 2.7 Reconfiguration Report for reference – circulated with meeting documents for information. Key updates from NENC are in relation to the following service change schemes:: South Tyneside & Sunderland Path to Excellence Oncology Service Review Integrated Urgent Care in Middlesbrough, Redcar & Cleveland Bishop Auckland A&E 2.8 NE Programme Monitor, for information only (circulated with agenda) MEETING CLOSE 3.1 Any Other Business BC mentioned the NHSE/I training opportunity information that was circulated with the Agenda. It is free to anyone who is interested and if required the Senate could provide support for those who are interested but unable to attend. Action: Any queries on training modules to Jeanette Unwin, Senate Council Manager. AC thanked everyone for attending and added that it would be great to see everyone face to face at the next meeting.		1 14 NEO (1 1 1 1 C 1		
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the Durham Centre and via Teams	3.2	Wednesday 16 November 2022, 5pm-6.30pm, Hybrid meeting at		