

<b>Meeting:</b>	<b>Northern England Clinical Senate Council Meeting</b>	
<b>Date:</b>	<b>Tuesday 19 November 2019</b>	
<b>Time:</b>	<b>5:00pm – 7:00pm</b>	
<b>Venue:</b>	<b>The Durham Centre</b>	
<b>Present:</b>	<b>Name:</b>	<b>Initials</b>
	Sam Bethapudi, GP in Durham City, Post-graduate trainer, member of Public Health England North East and the RCGP North East Faculty	SB
	Prof Mike Bramble, South Tees Hospital NHS FT	MB
	Prof Andrew Cant, NE Senate Chair, Consultant in Paediatric Immunology, Newcastle Upon Tyne Hospitals NHS FT	AC
	Ben Clark, Senate Manager (interim)	BC
	Prof David Colin-Thome, Independent Consultant GP (retired)	DCT
	Mr Derek Cruickshank, Sunderland CCG & HAST, Darlington & South Tees CCG	DC
	Lesley Durham, Director and Lead Nurse at the North of England Critical Care Network	LD
	Dr Martyn Farrer, City Hospitals Sunderland NHS FT	MF
	Debbie Freake, Director of Integration, Northumbria Healthcare	DF
	Elaine Henderson, Director of Nursing Delivery at Northumbria Healthcare NHS FT	EH
	Gareth Hosie, Consultant Paediatric Surgeon, The Newcastle Upon Tyne Hospitals NHS FT	GH
	Mr Raj Khanna, GP and Emergency Department Consultant, South Tyneside and Sunderland NHS Foundation Trust	RK
	Dr Jean McLeod, North Tees and Hartlepool NHS FT	JMC
	Dr Robin Mitchell, Northern England Clinical Networks	RM
	Dr Jon Scott, South Tyneside Hospital NHS FT	JS
	Mr Andy Simpson, North Tees and Hartlepool NHS FT	AS
	Prof Gerry Stansby, Newcastle Upon Tyne Hospitals NHS FT / Northern England Vascular Advisory Group	GS
<b>Senate support:</b>	Karen Pellegrino	KP
<b>Apologies</b>	<b>Name:</b>	
	Dr Kerry Benton, GP in Newcastle and GP Appraiser	KB
	Maurya Cushlow, Executive Chief Nurse at the Newcastle Upon Tyne Hospitals NHS FT	MC
	Lesley Durham, Director and Lead Nurse at the North of England Critical Care Network	LD

	Dr Katie Elliott, Northern Cancer Alliance Prof Chris Gray, NHS England and Improvement, North East and Yorkshire Dr Lesley Kay, Newcastle Upon Tyne Hospitals NHS FT Debbie Wade, Northumbria Healthcare NHS FT	KE CG  LK DW	
<b>MINUTES</b>			
<b>1.</b>	<b>INTRODUCTION</b>	<b>Lead</b>	<b>Attachments</b>
	<b>1.1 Welcome and Apologies</b>		
	AC welcomed everyone Apologies received noted as above.	<b>AC</b>	
	<b>1.2 Declaration of Interest</b>		
	None noted	<b>ALL</b>	
	<b>1.3 Minutes of previous meeting</b>		
	Minutes of the previous meeting held on 23 September 2019 recorded as accurate	<b>AC</b>	<b>Attached to email</b>
	<b>1.4 Matters arising/actions from previous minutes</b>	<b>AC</b>	
	AS updated the Council on the input he had given to the North West Clinical Senate review of Emergency Care in Preston and Chorley stating the report had now been signed off.  BC confirmed that the action from the previous council meeting to share the expression of interest information for membership of the independent reconfiguration panel (IRP) had been completed.		
<b>2.</b>	<b>AGENDA ITEMS</b>		
	<b>2.1</b> BC updated the Council on the NEC Senate visit to the Clatterbridge Cancer Centre in Liverpool that took place on 2 <sup>nd</sup> October 2019.  The NE Clinical Senate had been asked to look at interim options for a model of care for haemato-oncology services that the Clatterbridge Cancer Centre currently provide from within the Royal Liverpool Hospital. This interim model is required due to a delay in the build of a new Royal Liverpool Hospital (adjacent to the current building) and the opportunity presented by the opening of the new Clatterbridge Cancer Centre Liverpool (CCC-L) in May 2020 which is adjacent to both the old and new Royal Liverpool Hospital but will not have bridge access to the old Royal Liverpool Hospital.	<b>AC/BC</b>	

Four options had been considered by the CCC Trust Board (with option four being the preferred option):

1. Maintain the current Haemato-Oncology service within the current RLH until the new RLH opens
2. Move Outpatient and Day Case work to CCC-L. The inpatient service to remain in the current RLUH until the new RLH opens.
3. Move the H-O service, except for BMT/ higher intensity service, which would remain in RLUH until the new RLH opens
4. Move the full H-O service to CCC-L before physical links are in place

The Panel was chaired by Prof Andrew Cant and included the following clinicians:

- Dr Gail Jones, Consultant Haematologist and Clinical Director, Newcastle Upon Tyne Hospitals NHS Foundation Trust
- Dr Fiona Clark, Consultant Haematologist and Clinical Service Lead (Queen Elizabeth Hospital Birmingham) University Hospitals Birmingham NHS Foundation Trust
- Nurse Lesley Durham, Critical Care Nurse, Northumbria Healthcare NHS Foundation Trust and Director for the Northern England Critical Care Network
- Dr Robin Mitchell, Consultant Anaesthetist and Medical Director (retired) and Clinical Director of the Northern England Clinical Networks
- Dr Dave Cressey, Consultant in Intensive Care Medicine and Anaesthetics, Newcastle Upon Tyne Hospitals NHS Foundation Trust and Medical Lead of the Northern England Critical Care Network
- Nurse Fiona Marshall, Specialist Nurse – Haematology, South Tyneside and Sunderland NHS Foundation Trust

The senate panel met with a series of organisational leaders, clinical and nursing leads and other staff from across the relevant specialties from both the CCC and the RLH as part of a review visit on the 2nd October 2019.

The review day included a visit to the haematology inpatient and day case facilities in the current Royal Liverpool Hospital, a site visit to the new build CCC-Liverpool site and a physical walk-through of proposed critical transfer route between the CCC-L and the RLH outlined within some of the options to considered.

	<p>The final advice was provided by the Northern England Clinical Senate to CCC on the 18th October 2019 and is due to be considered by the CCC Trust Board on the 27th November 2019.</p> <p><b>ACTION</b> Final senate report to be circulated once to senate council members and placed on the NE Clinical Senate website once the CCC Board Papers are published.</p>		
2.2	<p><b>National and Regional Update</b></p> <p>AC and BC both attended the National meeting on 13<sup>th</sup> November. The agenda included:</p> <ul style="list-style-type: none"> <li>• Professor Steve Powis, National Medical Director, NHSE &amp; NHSI spoke about the Senates role in the new structure and how they link with the Long Term Plan implementation framework.</li> <li>• Dr Clare Gerada, Joint Chair of the NHS Assembly gave an update on the work of this representation body that provides advice and challenge to NHS England and NHS Improvement at a national level</li> <li>• Nick Duffin, Fellow of The Consultation Institute (who has previously presented to the NE Clinical Senate Council) gave an overview of his organisation’s role in providing independent advice and quality assurance on engagement and consultation in health and social care</li> <li>• Michael Lennox, Pharmacist on the South West Senate Council, outlined the work undertaken by this senate on the potential use of pharmacy in service delivery</li> <li>• Dr Ron Fenton from the North Essex Success Regime described his experience as a clinician who had been on the other side of a senate review (by the East of England Clinical Senate)</li> <li>• Professor Tony Young, National Clinical Lead for Innovation NHSE and NHSI delivered a presentation around IT, digital and innovation which included Artificial Intelligence</li> </ul> <p><b>ACTION</b> Karen Pellegrino to circulate the slides from the national meeting to senate council members.</p>	BC/AC	

<p><b>2.3</b></p>	<p><b>Regional update</b></p> <p>BC informed the council of the imminent changes to the support structure of the Northern England Clinical Senate Council as part of Phase 3 of the Joint Working Programme across NHS England and NHS Improvement.</p> <p>The new structures and personnel have been confirmed and will begin operating in the new year. As part of these arrangements:</p> <ul style="list-style-type: none"> <li>• Both the senate councils and senate chairs for the Northern England Clinical Senate and Yorkshire and Humber Clinical Senate are to be retained. They remain independent of NHS England and NHS Improvement but will continue to draw their management and administrative support from the regional offices of these regulatory bodies.</li> <li>• Senate manager support will be provided to both councils by Jo Poole (currently senate manager for the Yorkshire and Humber Clinical Senate).</li> <li>• Karen Pellegrino will continue to provide administrative support to the Northern England Clinical Senate and Steph Beal will continue to provide administrative support to the Yorkshire and Humber Clinical Senate.</li> <li>• BC will be taking up the new Deputy Director of Clinical Delivery role in the NHS England and NHS Improvement (NEY) Medical Directorate in which clinical senate support will sit. As such he will provide cover and review management support to Jo Poole to ensure retention of capacity. Jill Simpson (Clinical Delivery Manager) who will be working to BC in the new structure will provide further review management and senate council support to the NE Clinical Senate.</li> <li>• The current NE Clinical Senate website will be moved onto the Yorkshire and Humber Clinical Senate website but separate and distinct sections will be retained for both individual senate councils</li> </ul> <p>As a first step in moving to these new arrangements, Jo Poole will attend the January 2020 NE Clinical Senate Council meeting to meet council members and observe the senate council meeting. BC will in turn be attending the YH Senate Council meeting in January to meet YH Council members and take any questions on the new support offer to the senates.</p>	<p><b>BC</b></p>	
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2.4	<p><b>Reconfiguration Grid for information</b></p> <p>The latest grid was distributed for information with the following issues highlighted:</p> <ul style="list-style-type: none"> <li>• BC updated the council on the latest position of the Rothbury Community Hospital review The news that the process used to reach the verdict of the Judicial Review of the Path to Excellence Phase 1 (in which the NE Clinical Senate undertook a clinical assurance review) in December 2018 will itself be reviewed by the Court of Appeal on the 19<sup>th</sup> November 2019. A verdict is expected pre-Christmas 2019.</li> </ul>	BC	Attached to email
2.5	<p><b>Northern England Senate-led Projects</b></p> <p><b>GM ECAP Orthopaedics</b></p> <p>BC informed the Council that the reconvened review had taken place on 7<sup>th</sup> October 2019. The panel undertook a desktop review of a revised model of care (following the initial senate review in July 2018) and was carried out by:</p> <ul style="list-style-type: none"> <li>• Mr Ben Lankester, Consultant Orthopaedic Surgeon and Clinical Director of Orthopaedics, Yeovil District Hospital NHS FT</li> <li>• Mr Peter Worlock, Consultant Trauma and Orthopaedic Surgeon, Clinical Director, Musculo-skeletal Unit, Newcastle upon Tyne Hospitals NHS</li> </ul> <p>The final report has been sent to Greater Manchester with the offer of a face-to-face review given the fact that the clinical senate panel members' concerns on the original model of care had not been fully addressed.</p> <p><b>GM ECAP Cardiology</b></p> <p>The Cardiology ECAP review panel reconvened on 28<sup>th</sup> October 2019. The panel undertook a desktop review of a revised model of care (following the initial senate review in August 2018) and was carried out by:</p> <ul style="list-style-type: none"> <li>• Dr Martyn Farrer, City Hospitals Sunderland NHS FT</li> <li>• Dr John Bourke, Consultant Cardiologist &amp; Senior Lecturer Department of Cardiology, Newcastle Upon Tyne Hospitals NHS FT</li> </ul> <p>The final report has been sent to Greater Manchester.</p>	BC	

	<p><b>2.6 Northern England Senate-related Projects</b></p> <p><b>Scarborough Acute Services Review</b></p> <p>MF, who has supported the recent Yorkshire and Humber Senate review of the Scarborough proposals (which cover Obstetrics, Paediatrics and Urology pathways) gave a brief overview of the issues and challenges facing this provider.</p> <p><b>Humber Acute Services Review</b></p> <p>This review will take place towards the end of January 2020 and will focus on urgent and emergency care, acute assessment, inpatient and critical care, maternity and paediatrics and planned care preferred option. The Northern England Clinical Senate has several council members supporting this review being led by the Yorkshire and Humber senate.</p>	<b>BC</b>	
<b>3.</b>	<b>MEETING CLOSE</b>		
	<p><b>3.1 Any Other Business</b></p> <p>BC asked the council to submit ideas for future presentations. Suggestions so far include:</p> <ul style="list-style-type: none"> <li>• Pharmacy</li> <li>• Co-production work in North Cumbria</li> <li>• Mental Health services</li> </ul> <p><b>Action BC</b> to circulate information to Senate Members for expressions of interest</p> <p>AC wished everyone a Merry Christmas and hope to see all in the New Year</p>	<b>AC</b>	
	<b>3.2 Next meeting</b>		
	<p>Wednesday 22 January 2020 The Durham Centre, DH1 1TN, 5pm – 7pm</p>		