



Yorkshire and the Humber
Clinical Senate

Free and full independent and impartial clinical advice

Yorkshire and the Humber Clinical Senate

Annual Report 2018/19

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CHAIR'S FOREWORD

I am proud to present the fifth annual report for the Yorkshire and the Humber Clinical Senate describing the impartial clinical advice we have provided to our colleagues in health care in Yorkshire and the Humber and across other health care systems in England.

During this last year we have seen NHS England and NHS Improvement come together to act as a single organisation with the aim to better support the NHS and help improve care for patients. This has also meant a change to our regional structure with our Yorkshire and the Humber Senate now sitting in the regional footprint of NHS North East and Yorkshire. During this time however our work has continued unchanged and we remain committed to providing free and full, independent and impartial clinical advice on any proposal for service change in health care that has significant implications for the workforce, patients and the public

We continue to work with our 3 STPs / Integrated Care Systems (ICS's) in Yorkshire and the Humber and more widely with our Senates in the North region and nationally. Our relationships continue to strengthen as the volume, complexity and scale of the work we are asked to review continues to grow.

Most importantly our excellent clinical membership continues to grow. We had to say good bye to many of our established Council members during this year who reached the end of their 5 year tenure. We are however delighted to welcome many

more excellent clinicians onto our Council after a very competitive recruitment process. Our Assembly membership also continues to expand and offers a range of opportunities for our members and I encourage you to get in touch and join our Clinical Assembly to be kept in touch about these opportunities. You can do this by contacting england.yhsenate@nhs.net

Can I take this opportunity to thank all of our clinical and public members of the Senate for their commitment to this important role and I look forward to working with you all in the year ahead.



Chris Welsh

Senate Chair

Yorkshire and the Humber Clinical Senate



ACHIEVEMENTS

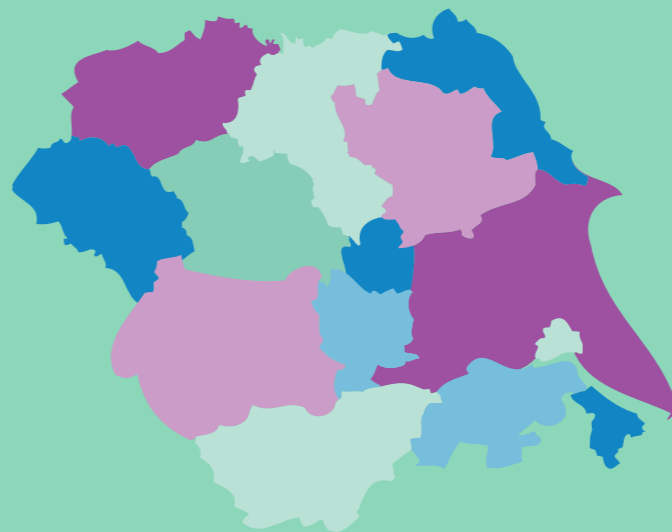
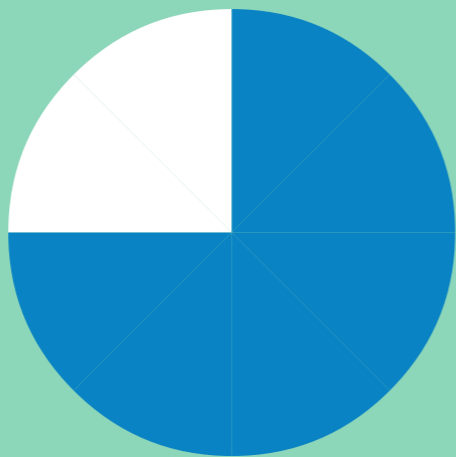
Thanks to our membership of professionals, patients and the public from a wide range of differing specialisms we are able to provide high quality independent clinical advice on proposals for service changes in health and social care. We are pleased to be able to offer early advice on developing proposals to help decision-makers implement services of the highest quality and also to offer advice as part of the NHS England service change process.

During this year we have:

Worked on **8 reviews** in Yorkshire and the Humber, **6** of which were **completed** within the year



6/8



Led on **2 reviews** in geographies adjacent to Yorkshire and the Humber



Contributed to **6 other reviews** nationwide



During this time we have drawn upon **over 100 professionals** for advice

Reviews in Yorkshire and the Humber

The map below summarises the Yorkshire and the Humber reports we have worked on during 2018/19. The full reports can be accessed on our website www.yhsenate.nhs.uk. The following case studies also provide more information on 2 of our ongoing reviews.

Review of Acute Services at the Friarage Hospital for Hambleton Richmond and Whitby CCG. February 2019

The Senate was approached by the CCG to review whether the options for the Friarage hospital clinical model addressed the issues raised in the Case for Change and to identify the risks and opportunities the commissioners needed to consider as they developed their preferred option.

Review of mental health services in Harrogate and Rural District December 2018

Harrogate and Rural District Clinical Commissioning Group (HaRD CCG) developed proposals to reconfigure their mental health service for working age adults and older people. The Senate was asked to advise if the proposed model was in line with best practice and if we could identify any clinical concerns with the model.

Review of the draft strategy for urgent care and rapid response for Leeds CCG June 2018

The Senate was asked to provide informal advice on the developing strategy advising on the issues within the strategy that need to be addressed as the detail develops. The strategy aims to provide a more joined up pathway of care for the population, improving the integration of services across multiple providers.

Maternity and Neonatal Services Review for Leeds CCG July 2018

The proposal was for the centralisation of in-patient neonatal and maternity services from two hospital sites into a single unit creating an alongside midwifery-led unit as part of the proposals. The Senate was asked to advise on whether the clinical evidence base supports the reconfiguration and whether this will provide a safe and sustainable service.

Review of Pontefract Hospital Midwifery Led Unit (MLU) (part of Mid Yorkshire NHS Foundation Trust) on behalf of Wakefield CCG (commenced Jan 2019 ongoing)

Wakefield CCG asked the Senate to inform the development of the options for the midwifery led unit at Pontefract Hospital as part of an overall strategy for Maternity Services across the Trust. The Senate was asked to identify the risks and opportunities to consider before commissioners determine their potential solutions for Pontefract MLU.

Review of Ophthalmology Out of Hours model across the Working Together Vanguard Partnership in South Yorkshire and Bassetlaw. July 2018

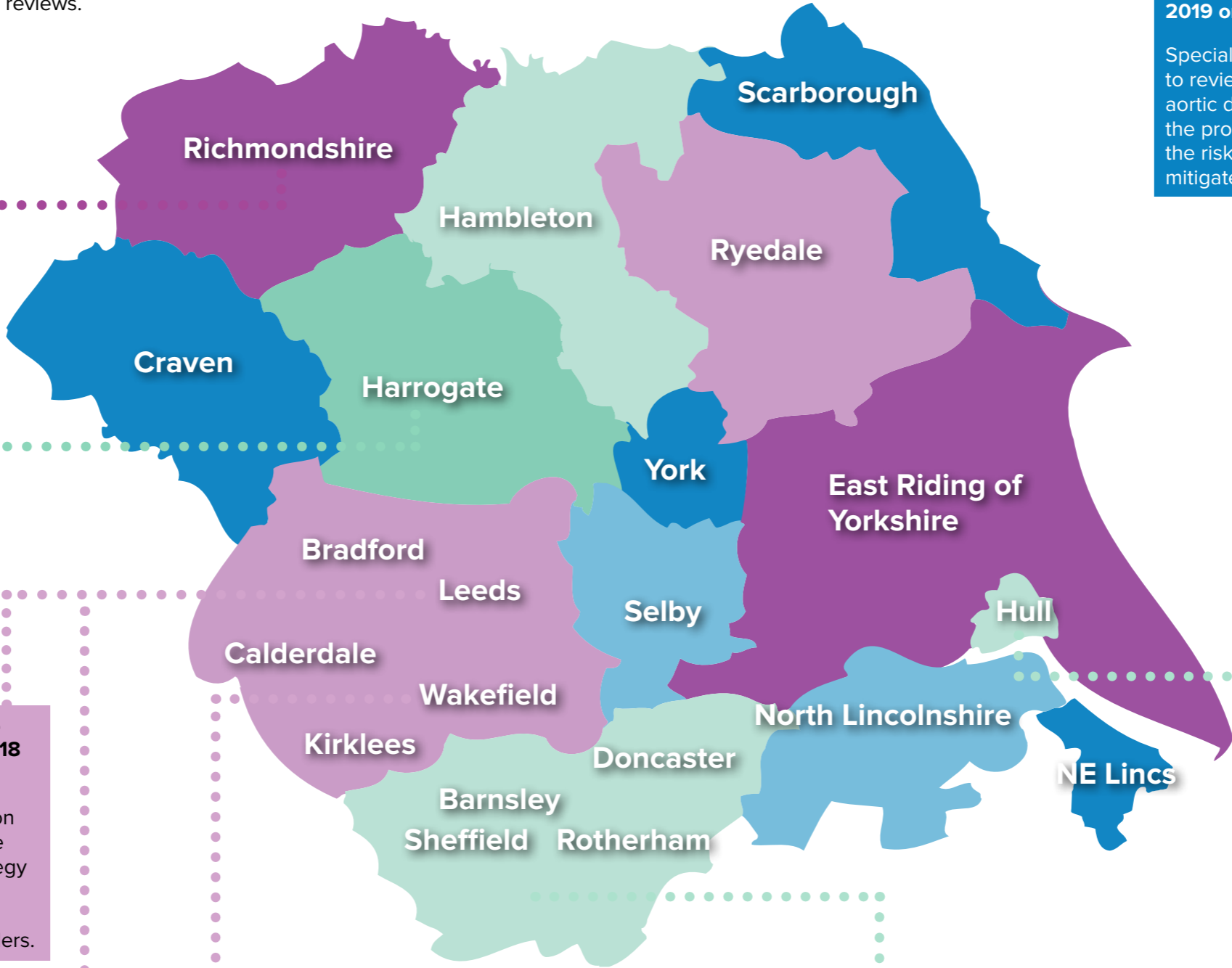
The Senate was asked to provide informal advice on whether there were any safety concerns with the model, which had experienced some difficulties since it became operational in October 2017, and whether this model best served the population.

Review of Yorkshire and Humber Wide Aortic Dissection Rota (commenced March 2019 ongoing)

Specialised Commissioning asked the Senate to review their proposal for a region wide aortic dissection rota focussing on whether the proposal was clinically acceptable and if the risks associated with additional travel are mitigated by providing best practice.

Review of Haemato-oncology services in Hull and North Lincolnshire for Yorkshire and the Humber specialised commissioners March 2019

The Senate was asked by Specialised Commissioning to review their proposals for the reconfiguration of haemato-oncology services provided by Hull and East Yorkshire NHS Hospitals Trust (HEYHT) and Northern Lincolnshire and Goole Hospitals NHS Foundation Trust (NLAG). The review focussed on if the proposed clinical model is in line with best practice and to identify any clinical concerns.



Our Involvement in Reviews Nationwide

Yorkshire and Humber Clinical Senate Reviews Nationwide

The 12 Clinical Senates across England work closely together sharing clinical experts for reviews to ensure that there is the right mix of clinical disciplines across a review panel who have no conflict of interest with the subject in question.

Due to the conflicts of interest within the neighbouring North West Senates our Senate agreed to lead on the following 2 reviews.

- **Review of acute services at Southport and Ormskirk NHS Hospital Trust on behalf of Southport and Formby CCG**
- **Review of acute services at East Cheshire NHS Trust on behalf of Eastern Cheshire CCG**

In both cases the Senate was approached by the Cheshire and Merseyside Health and Care Partnership (C&M HCP) to work with the CCGs in reviewing the sustainability of acute services. With Southport and Ormskirk the Senate was asked to advise on the Case for Change and the proposed scenarios for service change and advise on any clinical concerns relating to these.

With the East Cheshire review the Senate was asked to review the sustainability of acute services in East Cheshire NHS Trust considering the six scenarios presented and identify risks, issues, opportunities or concerns.

8 members of our Council and our Assembly have also contributed to the following reviews across England:

- **North Central London Mental Health Services Review for the London Senate**
- **Gastroenterological Services Review in Mid & South Essex STP for the East of England Senate**
- **South Tyneside and Sunderland CCG's Path to Excellence for the Northern Senate**
- **Urgent Treatment Centres in Derbyshire STP for the East Midlands Senate**

The 12 Clinical Senates across England work closely together



Case Study

Haemato-oncology – Specialised Commissioning

Background

In autumn 2017, North Lincolnshire and Goole NHS Foundation Trust (NLAG) approached Hull and East Yorkshire NHS Foundation Trust (HEY) to support the haemato-oncology services at NLAG. This was due to the shortage of Consultant Haematologists at NLAG which may affect the quality of the service they were able to offer. Both Trusts came together to work under a combined clinical network model to ensure the delivery of safe services.

The Problem

In August 2018 the Senate was asked to advise on the longer-term strategy for this service, following a recent quality review and recognising that the NLAG service would remain unsustainable without long term clinical partnership. Specialised Commissioning led on the development of a proposed clinical model and the Senate was asked to identify clinical concerns with the model and advise on whether this provided the best solution to patients given the workforce challenges.

Our Advice

The Senate advised:

- that the NLAG Trust cannot continue to provide a service without partnership with another provider.
- that the proposed clinical hub and spoke model has the potential to provide a good solution to patients, if there is the ability to retain a comprehensive outpatient service and day case chemotherapy at NLAG.
- that the relationship with the wider haematology service were made clearer.
- that the medical model and the clinical governance framework needed further consideration.
- that commissioner discussions to develop the service on to a single site were needed urgently.

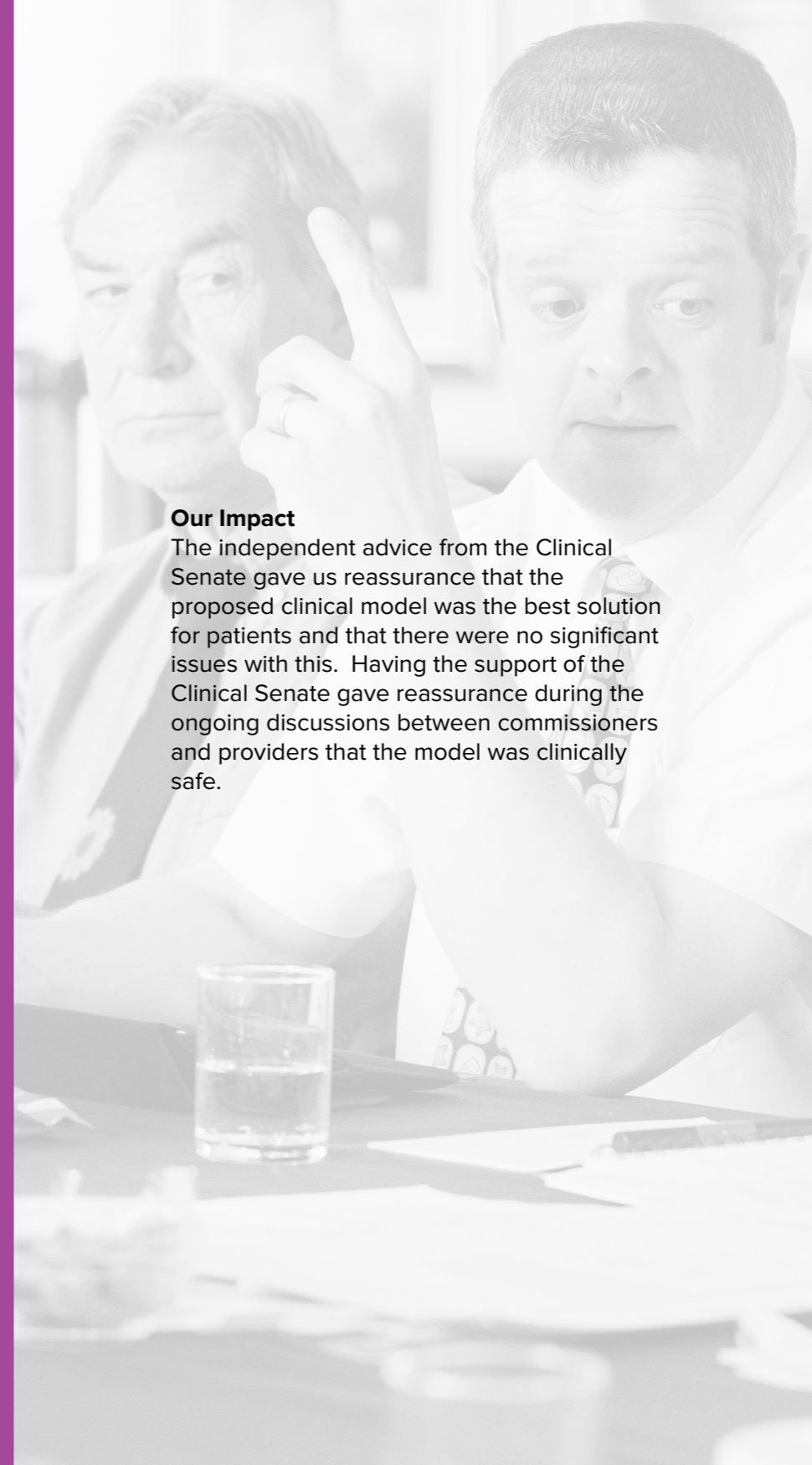
Our Impact

The independent advice from the Clinical Senate gave us reassurance that the proposed clinical model was the best solution for patients and that there were no significant issues with this. Having the support of the Clinical Senate gave reassurance during the ongoing discussions between commissioners and providers that the model was clinically safe.

Testimonial

“Working with the Clinical Senate was a seamless process with advice and guidance available at each stage of the process. The discussions with the Senate review panel were helpful to identify where greater clarity within the plans was needed.”

Kevin Peters
Specialised Commissioning.



**Working with the
Clinical Senate
was a seamless
process**

Case Study

Friarage Hospital - Hambleton, Richmond and Whitby CCG

Background

Over time the Friarage Hospital, part of South Tees Hospital NHS Foundation Trust, has experienced issues with the sustainability of some of its clinical services, with workforce shortages being the key driver for change for the Trust. With these proposals South Tees NHS FT were looking to stabilise the affected services and produce a long-term strategy to help the Friarage continue to provide safe, quality care to the local population.

The Problem

The workforce shortages, particularly of Consultant Anaesthetists to cover the Critical Care Unit and provide out of hours cover, brought into question the long-term clinical sustainability of delivering the current emergency care service model from the Friarage site. This also impacted on the acute pathway flows into the hospital side and the range of services that could be provided by acute medicine.

In January 2019 Hambleton, Richmond & Whitby CCG produced clinical models for the Friarage and asked for the Senate's early advice on these to help shape their development prior to the model being finalised. The Clinical Senate were asked to focus their review on whether the options developed for the clinical model addressed the issues raised in the clinical case for change and what risks, issues, opportunities or concerns the Senate advised the commissioner to consider.

Our Advice

Following a site visit and based upon the clinical models only being in the early stages of development, the Senate advised that the options put forward did address the issues in the case for change, but more clarity was required on the range of services that would be available at the Friarage should this clinical model be implemented.

The Senate made reference to the following issues/risks in their response, recommending these areas were addressed in the final model:

- Anaesthetic Cover/PACU and Out of Hours Cover
- Staffing
- Surgical Procedures
- Repatriation
- Paediatrics
- GPs/Out of Hours
- Care of the Elderly

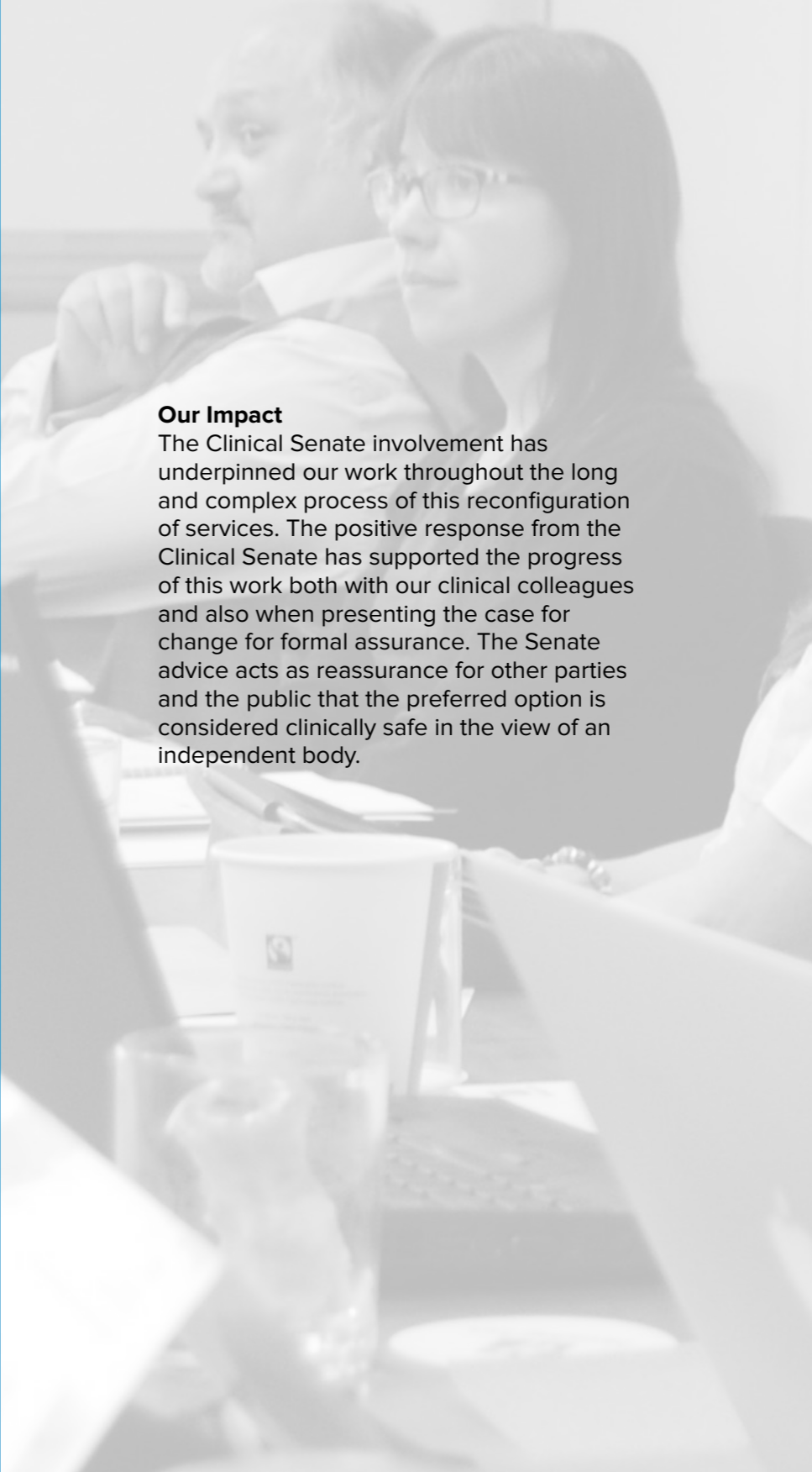
Our Impact

The Clinical Senate involvement has underpinned our work throughout the long and complex process of this reconfiguration of services. The positive response from the Clinical Senate has supported the progress of this work both with our clinical colleagues and also when presenting the case for change for formal assurance. The Senate advice acts as reassurance for other parties and the public that the preferred option is considered clinically safe in the view of an independent body.

Testimonial

"Working with the Yorkshire and Humber Clinical Senate has been a helpful, collaborative and supportive experience. We felt that the panel's review was detailed and considered. The clinical reflections received in the initial feedback from the Senate allowed us to ensure that we were articulating both the challenges and proposed solutions in a clear, balanced and understandable way."

Lisa Pope, Deputy Chief Operating Officer, Hambleton, Richmondshire and Whitby Clinical Commissioning Group.



A helpful,
collaborative
and supportive
experience.

OUR 2019 CONFERENCE

In 2019 the Clinical Senate held a unique conference to raise awareness of the Senate and the services on offer to the NHS. Delegates were invited to listen to a range of speakers from Senate members, fellow NHS colleagues and members of NHS England about how the Clinical Senate can support service change.

Watch our conference highlights here



The clinical senate is a fairly unique body; a mixture of clinicians, doctors, nurses, public health, mental health and lots of different areas of expertise who meet together to form a rich and valued view of proposals so that people can understand the gaps in service models. With the level of expertise they are able to show people the way forward.

In terms of the breadth of skills they've got round the table it's fantastic from lay members to clinical people, it's provided a sound base that we will use as an evidence going forward.



It's the first time I've seen the Clinical Senate in action and what they can do, so it's got some very positive things they can help with, shining a critical light on things to provide a view from outside about what you might be doing in CCGs, Trusts and STPs and what's the best way ahead.

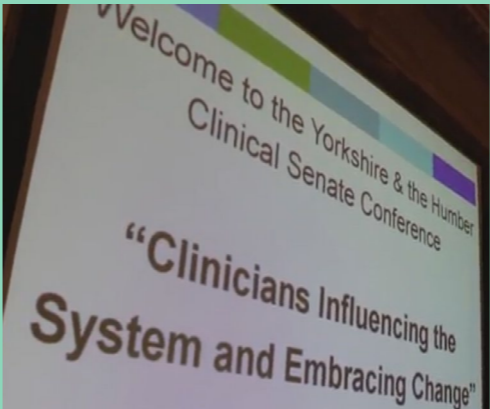


Its a very helpful facility to the NHS and there will be many difficult decisions to make going forward and this type of organisation will be very helpful in facilitating progress.



Clinical Senates have established themselves as a source of sound clinical advice and challenge to people contemplating making changes to health services.

The Clinical Senate is a useful friend in that you can ask the senate questions and get responses, whilst those some of responses will be very challenging.



OUR NEW COUNCIL MEMBERS

The Senate Council provides the oversight for the Senate, coordinating and managing the Senate’s business. It maintains a strategic overview of the work of the Senate and is also responsible for the formulation and provision of advice overseeing the work of the expert clinical panels assembled for each review. The Yorkshire and the Humber Clinical Senate Council is made up of 26 clinical members and 3 lay members from across our geography. As many of our Council members reached the end of their tenure during this year we had the opportunity to recruit and welcome the following experienced clinicians and lay member on to our Council.



Dr Nabeel Alsindi
GP & Clinical Lead,
Doncaster CCG

I would like to make sure that full consideration is given to the potential of, and the impacts on, primary care within system change and quality improvement.



Dr Robin Ghosh
Consultant Physician &
Clinical Director - Geriatric
& Stroke Medicine,
Sheffield Teaching
Hospitals NHS FT

To use my experience as both a doctor and clinical leader to improve patient care across the region.



Andrew Hodge
Consultant Paramedic -
Urgent Care, YAS NHS
Trust

I would like to bring my experience of urgent and emergency care to the Council and ensure pre-hospital care representation in Senate reviews.



Amber Wild
Professional Lead OT,
Sheffield Health & Social
Care

To share cross-organisational experience and allied health professional representation to improve patient experience and care in Yorkshire and the Humber.



Dr Alison Walker
Consultant in Emergency
Medicine, Harrogate &
District NHS FT

I am looking forward to bringing my experience across a number of clinical and management roles, including in service reconfiguration, and working with the wide spectrum of expertise on the council to provide advice



Mr Peter Sedman
Consultant - Upper
Gastrointestinal &
General Surgeon, Hull &
East Yorkshire NHS FT

To offer the Council fair and pragmatic advice in the provision of surgical services in the Yorkshire and the Humber NHS



Dr David O'Regan
Cardiothoracic Surgeon,
Leeds Teaching Hospitals
NHS FT

I have a passion about systems thinking and service principles and want to ensure we design our services with the patient at the centre of our attention.



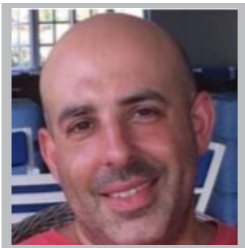
Tony Alcock
Lay Member

Helping to bring the lay-persons perspective to the important work of the Y & H Clinical Senate.



Mandy Philbin
Chief Nurse & Executive
Director, NHS Sheffield
CCG

Having over 34 years of experience in the NHS across hospitals, community and recently in commissioning allows me to bring to the Council a holistic approach to patient care, where and how it can be delivered and importantly the importance of having the right skilled staff to provide the care.



Dr Rod Kersh
Consultant Physician, The
Rotherham Hospital NHS
FT

I am a consultant geriatrician working in Rotherham across community services and secondary care advisor to the Yorkshire and Humber Clinical Network for Dementia and Older People’s Mental Health. I will bring my experience of supporting innovation, change and quality improvement to the Senate Council discussions.



Dr Tim Haywood
Consultant - PICU &
Anaesthesia, Leeds
Teaching Hospitals NHS
FT

To help provide equal access to high quality care delivered by a supported workforce.



Dr Rod Lawson
Respiratory Physician,
Sheffield Teaching
Hospitals NHS FT

As a physician with an interest in COPD, I work with people with a wide spectrum of disease. My work with its strong emphasis on multidisciplinary practice across traditional boundaries gives me a useful perspective to bring to the Council, viewing developments in care for entire health communities.



Dawn Parkes
Deputy Director of
Nursing & Quality,
The Mid Yorkshire NHS
Hospital Trust

I will bring my experience and passion of leading clinical strategic agendas into patient centred services, that drive quality and remove waste to deliver a sustainable future health service.



Angela Harris
Nurse Director, Acute &
Emergency Medicine,
Sheffield Teaching
Hospitals NHS FT

Being part of the Clinical Senate allows me as an experienced nurse, having worked across acute ambulance and systems, to share my expertise and leadership skills and ensure we enable equity of care for our patients.



Mark Steward
Consultant – Colorectal
& General Surgeon,
Bradford Teaching
Hospitals NHS FT

I believe I have the breadth of experience in clinical innovation and development, clinical management, education and training and local and national governance to ensure I would be an asset to the Senate Council. I wish to be whole-heartedly involved in advising on the evolution and strategic development of health care in Yorkshire and the Humber.

For the full membership of our Council please see www.yhsenate.nhs.uk



The Assembly

Clinical Discipline	TOTAL
Surgery	25
Neurology	5
Cardiology	5
Oncology	6
General Practice	7
Orthopaedics	1
Paediatrics/Neonates	11
Nursing	7
Obstetrics/Gynaecology	5
Mental Health	17
Emergency Medicine	3
Radiography	6
Anaesthesia	8
Diabetes	2
Gastroenterology/Renal	5
Physiotherapy/Rehabilitation	4
Critical Care & Acute Medicine	5
Paliative Care	2
Support Services	6
Physician	4
Various Clinical Practice	17
Lay Members	9
TOTAL	160

We are always looking for more clinicians and members of the public to assist us. If you are interested contact the Senate on 0113 8253467 or england.yhsenate@nhs.net

The 12 Senates across the country have summarised all the reviews they have conducted over the last 5 years in the National Topics Log which can be accessed from our [website](#). The Topics Log provides the ability to search by category or by geography to find the Senate advice and provides a link to all of the Senates' published reports.

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PRIORITIES FOR THE YEAR AHEAD

Our priority is to continue to provide high quality independent clinical advice across health and social care in Yorkshire and the Humber and more widely with our partners in the North of England. In the new organisation of NHS England and NHS Improvement and within the new regional footprint of NHS North East and Yorkshire we need to continue to develop to ensure that we offer high quality services to Integrated Care Systems and offer programmes that are of practical value and use.

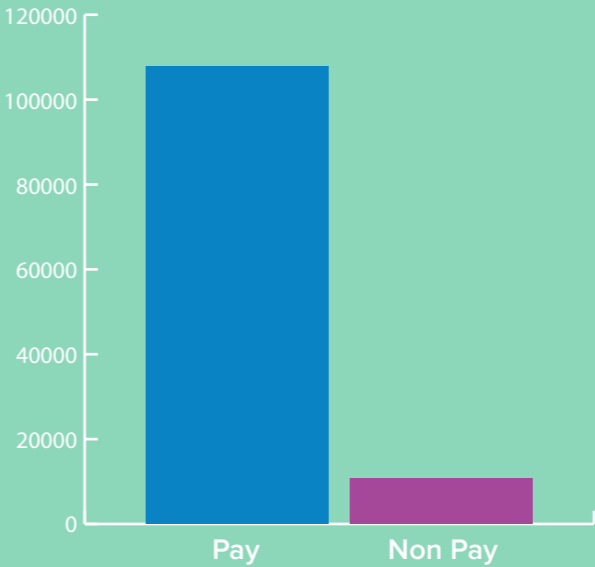
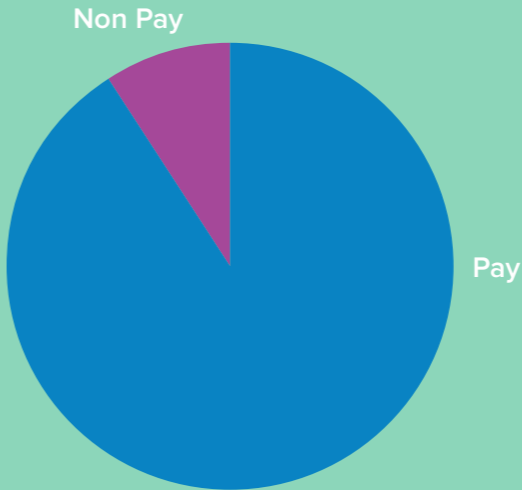
Our membership remains our greatest asset and with so many new Council and Assembly members this year we need to work together to ensure all of our clinicians are supported in their new role.

We have excellent clinical resources to offer our colleagues. As organisations grow and change they still need to access independent clinical advice and know that they have a clinical critical friend they can draw upon. We look forward to continuing to provide that valuable service.

FINANCIAL SUMMARY

The Yorkshire and the Humber Clinical Senate is incredibly cost effective as our clinicians and public members give their time freely to provide quality impartial advice. We only have a small number of paid part time staff.

2018/19 Expenditure	
Pay	108,000
Non Pay	10,801
Total	118,801



KEY CONTACTS



www.yhsenate.nhs.uk

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Senate Manager



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Chris Welsh

Senate Chair



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Stephanie Beal

Senate Administrator



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Yorkshire and the Humber
Clinical Senate

Free and full independent and impartial clinical advice