

East of England Clinical Senate Council Meeting

14th October 2015 13.30hrs to 17.00 hrs

Kings Suite, Holiday Inn, Lakeview, Bridge Road, Cambridge CB24 9PH

AGENDA

	Agenda Item	Lead	For info/ action by
1.	Welcome and introductions	Bernard	action by
13.30	Walcome Dr. Dechael Addiest	Brett	
	Welcome Dr Rachael Addicott		
Dr	Rachael Addicott, Senior Research Fellow, The Kings Fund		
	 Dr Rachel Addicott has been a senior research fellow at fund since 2007, where her portfolio includes research or reform and models of governance and accountability in the care, including work on foundation trusts, provider failure integrated care. Rachael was a 2011-2012 UK Harkness Fellow in Health Policy and Practice, based at the School of Public Health of Berkeley, examining experiences with collaborative go through accountable care organisations. Previously she lecturer in public sector management at the University of models a PhD in organisational behaviour from Imperial College, London. 	n system JK health and Care n, University overnance was a London,	
	Agenda Item	Lead	For info/ action by
14.30	Senate council business meeting commences, Assembly and invited members are welcome to remain		
1.	Apologies for absence received.	Bernard	NOTE
14.30	(Margaret Berry, Denise Williams)	Brett	
2.	Declarations of Interest		
14.35	Members to declare any interests in matters on the business agenda.	ALL	ACTION
3. 14.40	Notes of previous meeting held 18 th June 2015 <i>(attached separately)</i> Matters arising	Bernard Brett	ACTION



4.	a. Update on NHS England Smith/ Improvement architecture	Bernard	NOTE		
4. 14.50	review and senate regional oversight group	Brett	NOTE		
	b. Single Operating Framework				
5.	Update on clinical senate activity Current & recent activity:		ha fa		
15.05	a. West Hertfordshire system. Panel held 10 th June to provide	BB	Info		
	independent clinical advice on proposal prior to further public				
	consultation.	BB	Info &		
	 b. Cambridgeshire & Peterborough CCG 'Developing a sustainable health & social care system'. Update on panel 		action		
	18 th June 2015. Report previously circulated to council				
	members. Second set of panels to be held 16 th December				
	2015.				
	c. West Norfolk Dementia Service – to be advised that following	BB	Info		
	discussion with regional assurance team, West Norfolk CCG				
	decided not to proceed with independent clinical advice from				
	clinical senate				
	d. Request for input into regional interventional radiology	BB	Info &		
	services from Medical Director forum.		discussion		
5. 15.15	Seven Day Services – Standard 8 project	Robert	Action		
	To receive the paper from Dr Robert Lindfield and consider the	Lindfield			
	approach for sharing and dissemination of the learning to be sent				
	separately				
6. 15.35	Membership update	BB	Info		
7.	Date of future meetings	ALL	NOTE		
	16 th December – confidential review panel				
	14 th January 2016 Senate Council meeting				
15.40	Short break				
0 45 50					
8. 15.50	SHARING LEARNING FROM PANELS Assembly members and guests are invited to remain and participate.				
	Assembly members and guests are invited to remain and particip	ale.			
	Council to review the recommendations of all panels and start to	ALL	ACTION		
	develop information and learning report for dissemination to				
	commissioners of Senate review (such as CCG and Specialist				
	Commissioners) and sharing.				
	Initial thinking is that the four recurring and probably the most				
	important themes that appear in our recommendations so far are				
	evaluation, workforce, resilience of the system (under new model)				
	and ICT management including patient data and outcomes. Groups				



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	are asked to determine whether these are the four key themes to concentrate on. If so, we should aim to expand on each of these.	
	Whilst in general wishing to take the council's independent views forward, the need for an enhanced focus on evaluation has already been identified (by the Eastern Academic Health Science Network), it would be helpful to the wider healthcare system if this was one of the four themes (this could include evaluation tools that focus on: hard end point data, patient experience, integration and ease of navigation	
	A group for each potential area to review the recommendations and develop a section to inform a report.	
	Each group to nominate a lead who would be able to continue to work on this report.	
16.50	Chairman's summary and close	