

Minutes

WESSEX CLINICAL SENATE COUNCIL MEETING

Minutes of the Wessex Clinical Senate Council Meeting held on Wednesday 10th June 2015 0900 – 1500 at the Lighthouse Centre for the Arts, Poole, Dorset BH15 1UG

Present:

Senate Council members in attendance:

William Roche	(WR)	Clinical Senate Chair
Andrew Mortimore	(AM)	Director of Public Health, Health and Wellbeing Board member
Liz Mearns	(LM)	Medical Director, NHS England, Wessex
Simon Plint	(SP)	Dean, Health Education Wessex
Frank Rust	(FR)	Patient and Public member
Ruth Williams	(RW)	Nurse Director, NHS England, Wessex
Hayden Kirk	(HK)	Consultant Physiotherapist, Solent NHS Trust
Lionel Cartwright	(LC)	GP and Dorset CCG
Lucy Sutton	(LS)	Associate Director, Wessex SCN
Adrian Higgins	(AH)	GP, Clinical Lead, Primary Care, Wessex AHSN
Matt Hayes	(MH)	Clinical Director, Wessex SCN, Cancer
Alyson O'Donnell	(AO)	Clinical Director, Wessex SCN, Maternity and Young People
Laura Edwards	(LE)	(Deputy for Nigel Watson) Medical Director, Wessex Local Medical Committees Ltd
Mary O'Brien (MO)		(Deputy for Sally Nelson) Consultant in Healthcare, Public Health England

Attendees/Observers:

Debbie Kennedy	(DK)	Senate Manager, NHS England, Wessex
Sara Cobby	(SC)	Senate Support Officer, NHS England, Wessex

Guests:

Dominic Hardy	(DH)	Director of Commissioning Operations, NHS England, Wessex
Karen Kirkham	(KK)	Clinical Working Group lead clinician
Nikki Rowland	(NR)	Deputy Director of Finance, Contracting and Procurement, Dorset CCG
Phil Richardson	(PR)	Director of Design and Transformation, Dorset CCG
Tim Goodson	(TG)	Chief Officer, Dorset CCG
Sally Sandcraft	(SS)	Deputy Director of Review, Design and Delivery, Dorset CCG
Katherine Gough	(KG)	Head of Medicines Management, Quality and Assurance lead for CSR.
Penny Dash	(PD)	Senior Partner, McKinsey
Paul White	(PW)	McKinsey
Simon Watkins	(SW)	GP, CSR clinical adviser

Dorset CSR Wessex Clinical Senate External Review Team Members

Alison Keen	(AK)	Head of Cancer Nursing, University Hospitals, Southampton
Clare Hooke	(CH)	Strategic Service Manager, Hampshire County Council
Cathy Winfield	(CW)	Chief Accountable Officer, North West Reading CCG, Newbury and District CCG, Wokingham CCG
Martyn Webster	(MW)	Manager, Dorset Healthwatch
Olivia Jagger	(OJ)	Fellow/GP in Southampton from August, Health Education England
Femi Ogeleye	(FO)	Consultant Psychiatrist, Southern Health Foundation Trust
Louise Southern	(LS)	Fellow and recent Care of the Elderly Registrar

Apologies:

Sally Nelson	(SN)	Consultant in Public Health Medicine, Specialised Commissioning
Ranjit Mahanta	(RM)	Consultant Liaison Psychiatrist for Older Adults, Frimley Park Hospital
Nigel Watson	(NW)	GP and Chief Executive, Local Medical Committee
Denise Cope	(DC)	Medical Director, Wessex SCN, Mental Health, Dementia and Neurological Conditions
Chris Kipps	(CK)	Medical Director, Wessex SCN, Mental Health, Dementia and Neurological Conditions
Suzanne Cunningham	(SC)	Consultant Midwife, University Hospitals Southampton

Item	Subject	Action
1.0	<p>Welcome</p> <p>The Chairman welcomed those present to the meeting. Changes in Senate Council membership include Sally Nelson, Consultant in Public Health Medicine who replaces Jim O'Brien who has taken up a new role. Declarations of Conflict of Interest forms to be circulated for completion in relation to the CSR in Dorset.</p>	
2.0	<p>Minutes</p> <p>The Minutes of the previous meeting held on 3rd March were checked and agreed. The Mental Health recommendations have not yet been published due to the pre-election period. There was general frustration with regard to the lack of progress with the primary care project.</p>	
3.0	<p>Vascular</p> <p>DH gave the group an update with regard to the vascular services business case.</p> <ul style="list-style-type: none"> • There were similarities with the South West where the Vascular Society did not regard a hybrid model with 2 linked hubs as acceptable. • UHS capacity appears no longer to be an issue. • Approval is unlikely for a twin hub in Hampshire. <p>The two possible options that remain therefore are the Senate recommendations or the Senate recommendations with more centralisation of arterial work being done at UHS subject to capacity. The Vascular Society is to do review of the renal dependency issue.</p>	

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	<p>WR added that Senate Council would be happy to give further consideration to vascular services if required and also expressed the Senate's concerns regarding:</p> <ul style="list-style-type: none"> • The future training of vascular surgeons who will need to be endo-vascular radiologists as well as surgeons, • The importance of vascular medicine support • Specialist nurse-led claudication programmes which can produce outcomes while delaying or avoiding surgery. • The re-enablement after amputation both physically and psychologically. 	
4.0	<p>Maternity</p> <p>The maternity Vision Document is being finalised, but has been delayed due to the pre-election period. The maternity recommendations will be incorporated into the Vision Document. A letter had been received from the Chief Executive at the QA in Portsmouth to AO which broadly welcomed the recommendations, but raised concerns regarding the following:</p> <ul style="list-style-type: none"> • “GPs should be supported to re-develop/refresh their antenatal competencies to allow for greater involvement in maternity care” • PHT stated GP training does not currently require obstetrics and that the Midwife is the lead professional. • The view of the Senate Council was that the GP should still have shared care, particularly with regard to antenatal/postnatal care, but not necessarily with regard to obstetrics, though some background knowledge was required. There should be a collaborative approach. • “Ultrasound scanning should be provided as close to work/home as possible” • PHT stated complex scanning should be carried out in acute hospitals. • Senate Council agreed with this comment and felt there could have been some misinterpretation of this recommendation and that complex scanning should be done in an acute setting, but that routine antenatal scanning could be done in the community. • “Choice – particularly where to receive antenatal and postnatal care” • PHT stated that choice is important but to an agreed menu and evidenced based. • The Senate Council acknowledged that choice is limited for some of the population, but that the full range of services should be available. • “Enhanced standalone midwifery led units – midwifery plus units with elective LSCS.” • PHT felt this was not a safe model. • The Senate response will make clear that this relates predominantly to rural and isolated areas and that the suitability and guidelines need to be very clear. • “Labour line at SCAS.” PHT felt that there is no evidence to support this currently. AO stated that the labour line has been well supported and 	

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	<p>appreciated by patients in Hampshire and that an audit can confirm this.</p> <p>WR stated that a reply to the letter would be circulated with the Minutes.</p>	<p>WR/SC</p>
5.0	<p>Mental Health The draft Mental Health recommendations have been forwarded to the Communication team who have made minor changes to the wording of the recommendations. After discussion Senate Council felt that Recommendation 15 may still need further clarification.</p>	
6.0	<p>Dorset Clinical Services Review</p> <p>WR welcomed members of the Dorset CCG and the external review team members who joined the meeting at this point to discuss the Dorset Clinical Services Review. WR explained this meeting was not for decision making, but for informing Senate Council of the process and options for the delivery of healthcare in Dorset.</p> <p>A presentation from Dorset CCG members and extensive discussions followed with questions from the Senate Council and the external review team to which the Dorset CCG team responded.</p> <p>Following their investigations and deliberations, the external review team will compile a report which will then be presented to the Senate Council.</p> <p>WR thanked the Dorset CCG and acknowledged their dedication and the enormous amount of hard work involved. The External review team report will be presented at the Senate Council meeting on 8th July in Dorset and the Senate recommendations will follow. WR closed the meeting.</p>	
8.0	<p>Date of Next Meeting Wednesday 8th July 2015 at RNLi College, Poole, Dorset</p>	