

South East Coast

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# Clinical **senate**

**Clinical Senate, South East Coast (CSSEC)**

**Process for Requesting and Formulating Advice**

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## 1. Purpose of Document

Clinical senates are non-statutory organisations for the provision of independent strategic clinical advice and leadership. The advice provided will be evidence based and impartial, informed through engagement with the broad range of health and wider care professionals and the public in its formulation.

This document lays out the process for seeking advice from the Clinical Senate South East Coast (CSSEC) and details how it will go about formulating that advice and publishing it. The document also provides a template for completion by the topic sponsor to ensure that the relevant scope of information is provided. It should be noted that as a new body, Clinical Senate's advice process is likely to evolve, and any future changes will be communicated.

The full terms of reference for the Clinical Senate are separately published and available on request.

## 2. Process for requesting and formulating Clinical Senate South East Coast advice

It is anticipated that requests for advice will come primarily from commissioning bodies. This could include:

- NHS England Area Team - Surrey and Sussex and/or Kent and Medway
- Clinical Commissioning Group (CCG) or a group of CCGs within South East Coast.
- Local Authority Commissioners of health services within South East Coast

In addition requests for advice may come from the following:

- Health and Wellbeing Boards within South East Coast, with support from commissioning bodies
- Patients and public with support through the Clinical Senate Patient and Public Engagement representatives

In addition, the Clinical Senate Council may advance a topic itself that it considers strategic, cross-cutting, important, relevant and would promote improved quality and safety of care. The topic would not be being actively considered for the South East Coast region by another body. Before formally agreeing to take on such a topic, it should be discussed with the South East Coast commissioners (via the relevant standing members of the Clinical Senate Council with links to the commissioning organisations, i.e. the CCG collaborative leads, the Area Teams' Medical and/or Directors of Commissioning, and the Social Care Director), to ensure relevance to commissioners and ensure their support of the topic.



### 3. Requesting advice:

- I. The topic sponsor should in the first instance discuss the topic with the Clinical Senate Chair (or an appointed deputy in their absence), arranged through the Clinical Senate office (contact details below). If the Chair agrees that the topic meets the criteria for Clinical Senate advice (see Section 3 below), the topic sponsor will complete a formal request for advice, assisted by a member of the Support Team using a standard template (see Appendix 1) This will provide the relevant details and background information for the Clinical Senate Council to take a considered view of the proposal.
- II. The topic will be discussed at the next meeting of the Clinical Senate Council. The topic sponsor may be asked to present the request to the Council in person.
- III. If agreed as appropriate, the topic sponsor will be advised and the topic will be introduced on to Clinical Senate's work programme.

### Formulating advice

- I. The Clinical Senate Council, once it has agreed to take on a topic, will then oversee the setting up of an assembly appropriate to the topic.
- II. The Clinical Senate Council will identify individuals, professional bodies and public and patient groups with the relevant knowledge and understanding of the topic who would be suitable to be involved in the formulation of advice, and will invite them to be part a topic-specific Assembly. A minimum and/or maximum number of members will not be prescribed. Membership will be appropriate to the topic, dependent on the expertise and availability of members and taking declaration of interests into account. The topic-specific assembly will be steered by a working group, for which a Chair will be agreed by the Clinical Senate Council. This working group would be overseen by a Clinical Senate Council member (if the working group chair is not a Council member them self), who would meet with the working group chair for regular updates, and to provide guidance and advice throughout the life of the group.
- III. Terms of reference for the production of advice on the selected topic, including the process through which advice will be formulated and the timescale for completion and publication of the advice will be agreed with the topic sponsor.
- IV. The Clinical Senate's advice and recommendations will normally be presented to the commissioners as a written report which will include: background, the terms of reference for the assembly working group agreed with the lead commissioner; the supporting evidence reviewed and used; the extent of engagement with health and care professionals, relevant patient, public and third sector representatives and the



recommendations and conclusions. Where indicated, presentation of advice other than as a written report will be agreed with the sponsor as part of the terms of reference. In the interests of transparency, once reports have been discussed with the lead commissioner, they will be regarded as publicly available documents. Until that time they will remain confidential.

- V. The Clinical Senate has no executive authority or legal obligations (i.e. it is non-statutory). The Clinical Senate will issue advice and recommendations for consideration and implementation as decided by commissioners and other statutory organisations. The Clinical Senate will request feedback from commissioners as to how its advice was subsequently used in their decision-making processes.

The Clinical Senate office is run by the South East Coast Strategic Clinical Network-Clinical Senate support team (NHS England employees) who will maintain a register of topic requests (Appendix 2) and manage the business support processes for the Clinical Senate including the mechanisms for issuing the Council's advice on selected topics.

### **Criteria used to determine which topics the Clinical Senate will consider**

Topics will be considered by the Clinical Senate if all of the following five criteria are met:

- I. The topic on which advice is sought relates to the area of the NHS South East Coast (Kent, Medway, Surrey and Sussex);
- II. The topic is an important regional issue involving a substantial scale of change across a county or South East Coast. It is unlikely the Clinical Senate would consider single condition issues that are best addressed via the Operational Delivery Networks or Strategic Clinical Networks.
- III. Addressing the topic is expected to have a positive impact on quality of care and patient outcomes;
- IV. The topic is not subject to other ongoing advisory or scrutiny processes i.e. the Clinical Senate is not being asked to give advice on the topic in parallel to these processes; and,
- V. Commissioners believe that the independent clinical review provided by the Clinical Senate would add value compared to other available processes.

Further to the above essential criteria, topics may be considered suitable by commissioners if:



- The topic is considered contentious and a respected, independent strategic clinical view will assist in discussing the topic with the public and other stakeholders (e.g. proposals for service change);
- Decisions on the topic are likely to have wider implications for other services or other areas of South East Coast e.g. where consistency of service delivery is considered important.

The Clinical Senate would not consider the following:

- Topics considered within the preceding year where a strategic decision was made, such as following a National Clinical Assessment Team (NCAT) review.
- Topics which do not have commissioner sponsorship or support.
- Topics which do not have appropriate evidence or justification for taking forward.

### Information required for consideration of a topic

In order for the Clinical Senate to be able to consider an application for advice and ensure that it brings the right experts to the working group if the topic is approved, the topic sponsor will be required to provide background and supporting information.

A template has been developed to facilitate this – see Appendix 1. The completed template should be sent by email to Ali Parsons, Clinical Senate Manager, [aliparsons@nhs.net](mailto:aliparsons@nhs.net)

### Clinical Senate Office Support

The Clinical Senate office will keep the topic sponsor informed of progress and commits to:

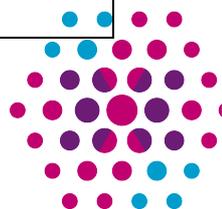
- Confirming receipt of the application and confirmation of date of consideration.
- Advising of the outcome of topic consideration.
- Advising of the chair and members of the working group considering the topic.
- Agreeing terms of reference, and time line, for the topic.
- Advising of meeting dates, expected methodology and approach.
- Providing progress reports on a confidential basis.
- Agreeing with the topic sponsor the date of publication of advice.



## Appendix 1 -Template for Requesting Clinical Senate Advice

(A Template for internal use to support the discussions with potential topic sponsors)

Topic sponsor's name, role, organisation and contact detail
Summary of the topic or issue requiring advice
Rationale for advice request i.e. what is the issue, what will it address, what is its importance and breadth of interest and to whom?
What is the scope of the topic - what is the question to be addressed?
How does the topic meet each of the criteria?
What will be the benefits of the intended advice? <ul style="list-style-type: none"><li>• How will it provide improvements?</li><li>• To whom?</li><li>• What are the specific service improvement/s and/or quality and financial benefits?</li></ul>
What is the intended use and potential impacts of the advice? <ul style="list-style-type: none"><li>• Who will be the end user/s of advice?</li></ul>



- How it will be implemented/applied?
- Which other groups (individuals, professional bodies, agencies, other NHS etc.) will the advice will impact upon and how?
- What is the expected financial impact and on whom?

Explanation of current position, and detail of topic including:

- Background
- Key people and organisations already involved, including any public involvement
- Detail of any previous or current challenges made
- Include relevant data and supporting information

Expected methodology to be applied in the formulation of the advice

Date CSSEC report required by (and where the advice is intended to be formally considered)

If you would like to discuss the completion of any part of this template with the Clinical Senate Chair or Manager please contact [aliparsons@nhs.net](mailto:aliparsons@nhs.net)

