

South East Coast

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Clinical  
**senate**

ANNUAL REPORT SUMMARY 2013/14



South East Coast

# Clinical **senate**

The South East Coast Clinical Senate (CSSEC) has been established to be a source of independent strategic advice and guidance to Kent, Surrey and Sussex (KSS) commissioners to assist them in making the best decisions about healthcare for the populations they represent.

## CSSEC has three key roles:

- 1** Promote and support the spread of best practice, innovation and good ideas, in partnership with the Strategic Clinical Networks and Operational Delivery Networks, the Academic Health and Science Network and other relevant organisations.
- 2** Support the public profile for the clinical case for service change or reconfiguration, where the Clinical Senate has concluded it will improve patient outcomes or experience.
- 3** Provide expert independent clinical advice and support to NHS England Area and Regional Teams in their assurance of strategic service change.

This summary of our first annual report demonstrates the significant work that has been undertaken to establish this new clinical advisory body for Kent, Surrey and Sussex and commence the work of providing a source of strategic independent advice and leadership on how services should be designed to provide the best overall care and outcomes for patients.

A full version of the annual report is available by emailing [england.clinicalsenatesec@nhs.net](mailto:england.clinicalsenatesec@nhs.net) and includes a summary of CSSEC's work programme for 2014-15.

# Achievements in 2013/14

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- **CSSEC Council membership established** with appointments made by interview for non-remunerated positions representing clinical professional groups
- **Developed and received CSSEC Council approval** of business critical Clinical Senate governance processes to support the formulation and delivery of independent clinical advice
- **CSSEC Council formally considered four potential proactive topics for debate:** in spite of its many potential benefits, Advance Care Planning is underutilised in the UK and therefore CSSEC prioritised this as its first topic for proactive debate
- **Advance Care Planning Task and Finish Group** established with membership drawn from the CSSEC Council and additional South East Coast system experts, to develop advice and recommendations to commissioners, providers, clinicians and the public that will have:
  - determined the benefits, barriers and enablers to increasing the uptake of ACP
  - raised the profile of ACP
  - addressed the education and training needs of health and social care staff
  - provided recommendations to ensure its more widespread usage
- **Showcased innovation** through CSSEC meetings and broader forums for example ACP Summit May 2014  
[www.england.nhs.uk/south/2014/05/30/acp-summit](http://www.england.nhs.uk/south/2014/05/30/acp-summit)
- **Provided cross-Senate advice** - Thames Valley Clinical Senate asked CSSEC to collaborate in the provision of advice on the clinical considerations and consequences of a potential acquisition of Heatherwood and Wexham Park Hospitals NHS Foundation Trust by Frimley Park Hospital NHS Foundation Trust acquisition
- **Provided cross-Senate advice** - London Clinical Senate asked CSSEC to help provide advice on whether a sufficiently robust clinical approach was adopted by NHS England in the plans to consolidate specialised cancer and cardiac services in north central and north east London

# Priorities for 2014/15 – 2015/16

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## **Establish a positive profile for CSSEC amongst commissioners and clinicians across Kent, Surrey and Sussex:**

- Provide a common voice that connects clinicians across KSS.
- Seek out, understand and be responsive to the needs of CSSEC stakeholders and the patients and public.
- Ensure deliberations are aligned with stakeholder priorities.

## **Promote and support the spread of best practice, innovation and good ideas, in partnership with the Strategic Clinical Networks (SCNs), Operational Delivery Networks, the Academic Health Science Network and other relevant organisations:**

- Through specific and targeted project plans in response to request for advice from commissioners, and/or proactive CSSEC initiated advice topics.

## **Support the public profile for the clinical case for service change or reconfiguration, where the Clinical Senate has concluded it will improve patient outcomes or experience**

Through an evolving programme centred on service transformations:

- Identify and advise on the critical service co-dependencies for Major Emergency Centres and Emergency Centres.
- Provide advice to assist commissioners in understanding the necessary co-dependencies of clinical services within major emergency centres and the requirements for safe and effective emergency centres.
- Overview the advice provided by the four SCNs which will draw on the baselines and standards of the ten service areas encompassed by the SCNs.

## **Provide expert, independent clinical advice and support to NHS England Area and Regional Teams in their assurance of strategic service change:**

- Through running independent clinical reviews following a robust governance and business process which CSSEC Council ensures is fit for purpose in order to take on this new role.