**South West Clinical Senate Biennial Report (2022-2024)**



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## **Chairs’ Foreword**

Welcome to the South West Clinical Senate Biennial Report covering years 2022 -2024. This is the first report post the COVID-19 pandemic when work of the Clinical Senate was paused with staff deployed to support the NHS response.

In the years following the pandemic, the South West Clinical Senate team has carried several vacancies which have impacted capacity within the team, and in turn, the prioritisation of different workstreams. Consequently, this report covers the last two financial years (instead of the usual one) – describing the activities and independent clinical advice we have provided across health and care systems.

In 2022, the Health and Care Act received Royal Assent. This introduced significant reforms to the organisation and delivery of health and care services in England and formalised Integrated Care Systems. The legislative framework supports collaboration and partnership working to bring services for patients together in new ways, capitalising on innovations and the changing health and care landscape for coming generations. The Act also includes targeted changes to public health, social care, and the oversight of quality and safety which are intended to address health inequalities, of particular importance in the South West region with the largest concentration of older population in the country.

In 2023, the NHS celebrated its 75th birthday against a backdrop of several challenges with increasing high demand across primary and secondary care, significant waiting lists for elective care, workforce challenges, and industrial action. In addition, NHS England was managing one of the largest public sector change programmes as it merged with Health Education England, NHS Digital, and NHSX, and decommissioned Public Health England to create a more streamlined and smaller organisation to lead the NHS more effectively.

Hence, the last couple of years have been particularly challenging for the NHS, dealing with the post-pandemic recovery of services, industrial action, high demand for services, and workforce challenges. In addition, the impact of the NHS England change programme and similar reorganisation activity in the Integrated Care Boards (ICBs), was a halt in service reconfiguration proposals submitted for Clinical Reviews (as part of the NHS England Assurance process) in 2023/2024. It is envisaged that this activity will ramp up in the months following the general election which is expected to hold in 2024.

However, the South West Clinical Senate has continued with its proactive work on deliberative sessions on ‘wicked’ clinical issues in the region. The outputs from these sessions are published on our website and will be detailed in this report.

Finally, the South West Clinical Senate has continued to be successful through the commitment and dedication of our Senate Council, Senate Assembly, and Citizens Assembly. These groups are made up of clinicians, and public and patient voice partners who freely contribute their extensive knowledge and experience to support the work of the South West Clinical Senate, without which we would not be able to deliver high-quality outputs and leadership. We thank all our members for their continued support.

A close-up of a person smiling

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Dr. Sally Pearson MBChB MPH FFPHM

Chair, South West Clinical Senate

A person in a white shirt and tie

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Professor David Halpin

Vice Chair, South West Clinical Senate

## **About Us**

The South West Clinical Senate comprises a Senate Council (circa 49 members[[1]](#footnote-1)), a Senate Assembly (circa 100 members), and a Citizens’ Assembly (circa 28 members which provides a patient and public perspective to Clinical Senate activities), supported by a core management team.

In the last couple of years, there has been no change in the clinical leadership of the South West Clinical Senate with the Senate Chair and Vice Chair remaining unchanged. However, there has been a change in the leadership of the Citizens' Assembly with Debbie Rigby succeeding Nick Pennell as the Chair of the Citizens' Assembly in December 2023.

In addition, Rebecca Murphy joined the Senate team in April 2024 as a Project Support Officer.

The core team:

* Chair: Dr Sally Pearson
* Vice Chair: Professor David Halpin
* Head of Senate: Ajike Alli-Ameh
* Project Support Officer: Rebecca Murphy
* Senate Administrator (vacant)



Ajike Alli-Ameh

Head of South West Clinical Senate



Rebecca Murphy

Project Support Officer

**Role and Function of the Clinical Senate**

Clinical Senates have been established to be a source of independent, strategic advice and guidance to commissioners and other stakeholders to assist them in making the best decisions about healthcare for the populations they represent.

They are comprised of a core Senate Council and a wider Senate Assembly.

The Senate Assembly is a diverse multi-professional forum providing the Senate Council with ready access to experts from a broad range of health and care professions. Membership of the Assembly or Forum will encompass the ‘birth to death’ spectrum of NHS care and will include patient representatives.

The Senate Council is a small multi-professional steering group. This group coordinates and manages the Senate's business. It will maintain a strategic overview across its region and be responsible for the formulation and provision of advice working with the broader Senate Assembly.

The Clinical Senate is a non-statutory entity with no executive authority or legal obligations which, in providing advice to commissioners, will take a broad view on the totality of health and social care.

By harnessing the collective expertise and intelligence across the region, the Clinical Senate is a valued partner in the new commissioning landscape and will bring a renewed professional focus to the challenges facing health communities.

The Clinical Senate membership is multi-professional, geographically representative, and spans a variety of organisation types. Members are experts with strategic abilities and are held in high regard in their respective fields.

Clinical Senates have the opportunity to develop professional consensus to help local health communities make effective decisions about quality, equity, safety, and efficiency. The challenges faced by the NHS mean that the Clinical Senate will, at times, make unpopular recommendations.

**South West Clinical Senate Landscape**

A map of england with a pink and blue outline

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**Our area and population**

The South West region of England is known for its picturesque landscapes and historical towns. It is home to approximately 5.71 million people [[2]](#footnote-2). Overall, the region has higher life expectancy and lower levels of poverty and deprivation. However, there is significant variation within the region with some communities and populations experiencing significant challenges.

In April 2023, the South West region became a Marmot Region to bring a renewed regional focus on tackling health inequalities. By becoming a Marmot region, the South west region has access to experts in tackling health inequalities and the opportunity to learn from other regions and cities around the country.

Through this work, the South West seeks to address the issue of widening health inequalities by focusing on the wider determinants of health such as the conditions in which people are born, live, and work; to improve health outcomes and reduce health inequalities within the region.

**The Integrated Care Systems**

The Integrated Care Systems (ICSs) play a crucial role in improving health outcomes and enhancing care coordination in the region. There are 7 ICSs in the South West, namely:

* Bath and North East Somerset, Swindon, and Wiltshire ICS
* Bristol, North Somerset, and South Gloucestershire (BNSSG) ICS
* Cornwall and Isles of Scilly ICS
* Devon ICS
* Dorset ICS
* Gloucestershire ICS
* Somerset ICS

A map of the united kingdom

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**South West Providers**

|  |
| --- |
| **Bath and North East Somerset, Swindon, and Wiltshire**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * [Great Western Hospitals NHS Foundation Trust](https://www.england.nhs.uk/publication/great-western-hospitals-nhs-foundation-trust/) * [Royal United Hospitals Bath NHS Foundation Trust](https://www.england.nhs.uk/publication/royal-united-hospitals-bath-nhs-foundation-trust/) * [Salisbury NHS Foundation Trust](https://www.england.nhs.uk/publication/salisbury-nhs-foundation-trust/) * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |
|  |
| **Bristol, North Somerset, and South Gloucestershire**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * [Avon and Wiltshire Mental Health Partnership NHS Trust](https://www.england.nhs.uk/publication/avon-and-wiltshire-mental-health-partnership-nhs-trust/) * [North Bristol NHS Trust](https://www.england.nhs.uk/publication/north-bristol-nhs-trust/) * [University Hospitals Bristol and Weston NHS Foundation Trust](https://www.england.nhs.uk/publication/university-hospitals-bristol-nhs-foundation-trust/) * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |
|  |
| **Cornwall and the Isles of Scilly**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * Cornwall Partnership NHS Foundation Trust * Royal Cornwall Hospitals NHS Trust * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |
|  |
| **Devon**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * [Devon Partnership NHS Trust](https://www.england.nhs.uk/publication/devon-partnership-nhs-trust/) * Royal Devon University Healthcare NHS Foundation Trust * [Torbay and South Devon NHS Foundation Trust](https://www.england.nhs.uk/publication/torbay-and-south-devon-nhs-foundation-trust/) * [University Hospitals Plymouth NHS Trust](https://www.england.nhs.uk/publication/university-hospitals-plymouth-nhs-trust/) * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |

|  |
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| **Dorset**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * [Dorset County Hospital NHS Foundation Trust](https://www.england.nhs.uk/publication/dorset-county-hospital-nhs-foundation-trust/) * [Dorset HealthCare University NHS Foundation Trust](https://www.england.nhs.uk/publication/dorset-healthcare-university-nhs-foundation-trust/) * [University Hospitals Dorset NHS Foundation Trust](https://www.england.nhs.uk/publication/university-hospitals-dorset-nhs-foundation-trust/) * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |
|  |
| **Gloucestershire**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * Gloucestershire Health and Care [NHS Foundation Trust](https://www.england.nhs.uk/publication/university-hospitals-dorset-nhs-foundation-trust/) * Gloucestershire Hospitals NHS Foundation Trust * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |
|  |
| **Somerset**  This ICS includes the following provider organisations. In some cases, such as ambulance trusts and specialised services, the work of a trust will cut across more than one ICS.  Providers:   * Somerset [NHS Foundation Trust](https://www.england.nhs.uk/publication/university-hospitals-dorset-nhs-foundation-trust/) * Yeovil District Hospital NHS Foundation Trust * [South Western Ambulance Service NHS Foundation Trust](https://www.england.nhs.uk/publication/south-western-ambulance-service-nhs-foundation-trust/) |

**Senate Activities in 2022 -2024**

The activity of the South West Clinical Senate in recent years has been unusual and unlike any other period of the Clinical Senate’s history.

Health and care services were heavily impacted during the COVID-19 pandemic, and whilst there have been sterling efforts in the recovery of NHS services in the region, there is still much to be done. The impact of the pandemic and the challenges around the recovery of NHS services – have been felt by the South West Clinical Senate, particularly in terms of the clinical reviews, to support NHS England South West assurance processes.

The South West Clinical Senate’s core administration is delivered by a small team. Ajike Alli-Ameh, Head of Senate joined the Senate in 2021 and continues to lead and develop the team. In the last couple of years, there have been several personnel changes and due to the recruitment controls imposed when the NHS England organisational change programme ‘*creating the new NHS England’* commenced in July 2022, the team has carried vacancies for extended periods. The Project Support Officer role was filled in April 2024 by Rebecca Murphy, following the departure of the previous post holder in October 2022. Since the retirement of the Senate Administrator in November 2023, the post remains vacant and is yet to be filled.



Credit: Photo by [National Cancer Institute](https://unsplash.com/@nci?utm_content=creditCopyText&utm_medium=referral&utm_source=unsplash) on [Unsplash](https://unsplash.com/photos/person-sitting-while-using-laptop-computer-and-green-stethoscope-near-NFvdKIhxYlU?utm_content=creditCopyText&utm_medium=referral&utm_source=unsplash): [Person sitting while using laptop computer and green stethoscope near photo – Free Medical Image on Unsplash](https://unsplash.com/photos/person-sitting-while-using-laptop-computer-and-green-stethoscope-near-NFvdKIhxYlU) (accessed 20/06/2024)

**Advice provided 2022- 2024**

The South West Clinical Senate provides commissioners of health and care services with a source of independent clinical advice to help them to make the best possible decisions about health and care provision in the South West

Clinical Reviews

The independent Clinical Review is undertaken by the Clinical Senate to consider whether proposals for large-scale service change meet the Department of Health's five tests for service change before going to public consultation. The Clinical Senate principally considers tests 3 and 5; the evidence base for the clinical model and the ‘bed test’ to understand whether any significant bed closures can meet one of 3 conditions around alternative provision, treatment, and bed usage.

Gloucestershire Fit for the Future Phase 2

In 2022, the South West Clinical Senate considered the Gloucestershire Fit for the Future Programme Phase 2 proposals for the service reconfiguration across Gloucestershire Royal Hospital and Cheltenham General Hospital sites – the two main hospital sites for Gloucestershire Hospitals NHS Foundation Trust.

As part of its Centres of Excellence work under the Fit for the Future Programme, Cheltenham General Hospital would be developed as a Centre for Planned Care and Gloucestershire Royal Hospital would be developed as a Centre for Emergency Care.

The Clinical Review Panel concluded that it could offer assurance that the proposed clinical models presented are ready to proceed to public consultation, with some provisos and observations detailed within the report.

[The Clinical Review Report is available to download on the South West Clinical Senate website](https://www.swsenate.nhs.uk/south-west-clinical-senate-gloucestershire-ics-service-reconfiguration-fit-for-the-future-programme-phase-2-clinical-review-panel-report/3954/).

Somerset Hyperacute Stroke Services Reconfiguration

The Clinical Senate was asked to examine the clinical case for change underpinning the proposals of Somerset ICS Hyperacute Stroke Service Reconfiguration proposals in 2022. The case for change looked at the Hyper Acute (first 72 hours) and Acute parts of the stroke pathway of Transient Ischaemic Attack (TIA) services.

The Clinical Review Panel (CRP) considered the Somerset proposals to reconfigure Hyper Acute Stroke and Transient Ischaemic Attack services at Musgrove Park Hospital, Somerset NHS FT (SFT), and Yeovil District Hospital (YDH), to a centralisation of stroke services intended to improve access to emergency imaging and assessment and consequently the timely identification of patients that are suitable for thrombectomy. The proposals aim to deliver specialist stroke care that ensures that those at greatest risk have equitable access to specialist services through the creation of a single stroke delivery team which would optimise how the available specialist stroke workforce is deployed, to achieve the best possible outcomes for patients.

The business case articulated four options which were presented to the Clinical Review Panel for consideration with none being identified as a preferred option. The Clinical Review Panel concluded that it could assure two of the four options: **Option C** (HASU at SFT, and ASU beds at both sites) and **Option D** (All HASU and ASU beds at a single hospital site - SFT). This assurance was based on the staffing assumptions in the models being fully realised.

[The Clinical Review Report is available to download on the South West Clinical Senate website](https://www.swsenate.nhs.uk/south-west-clinical-senate-stage-two-clinical-review-stage-two-clinical-review-report-somerset-stroke-hyperacute-services-reconfiguration-proposals/3814/).

Deliberative session (proactive work)

The South West Clinical Senate plays a pivotal role in shaping healthcare services across the region. It provides independent, clinical advice on topics or ‘wicked issues’ in the region, that have a clinical element via the Senate Council deliberative sessions. Commissioners or groups or organisations in the region, that have an interest in health and social care can submit a topic. See Appendix 2 and 3 for more information.

Listed below are the deliberative sessions which held between 2022 – 2024.

Handover Delays

Harm emerged as a deliberative topic from conversations that the South West Clinical Senate had with the NHS England South West Region Clinical Quality team which had embarked on a project to quantify harm across the region, with a particular focus on system-level harm. The Clinical Senate determined that a more specific area where it could add value was to consider harm arising from the poor flow of patients through and out of hospital care, which is most visibly manifested as ambulance handover delays.

The Senate Council met on 21 July 2022 to discuss how harm to patients and staff relating to handover delays could be quantified, and what could be done at a system level the mitigate the impact.

[The Recommendations Report is available to download on the South West Clinical Senate website](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-handover-delays-and-harm/3701/).

Workforce Retention

Workforce re-emerged as a deliberative topic for the Senate Council, still considered to be wholly relevant in light of the current challenges around the workforce across both health and care sectors, and the fact that recent service reconfiguration proposals were precipitated by Systems experiencing workforce challenges.

Crucial to the delivery of safe and sustainable patient care, is having the right levels of skilled workforce. Systems and organisations need to secure and retain a competent and confident workforce to enable them to deliver healthcare services that are both safe and sustainable.

The Senate Council met on 24 November 2022, to discuss the retention of the healthcare workforce and the lessons that could be learned from healthcare organisations’ actions during the first wave of the COVID-19 pandemic, that were valued by the workforce.

[The Recommendations Report is available to download on the South West Clinical Senate website.](https://www.swsenate.nhs.uk/sw-clinical-senate-council-recommendations-workforce-retention-in-healthcare-and-lessons-learned-from-actions-taken-by-organisations-during-the-covid-19-pandemic/3721/)

Reducing and preventing harm from opioid medication for those living with pain

‘Reducing and preventing harm from opioid prescribing’ emerged as a deliberative topic from conversations that the South West Clinical Senate had with the South West Health Innovation Network (formerly South West Academic Health Science Network) and the West of England Health Innovation Network (formerly West of England Academic Health Science Network).

The Senate Council met on 09 February 2023 to discuss how people in the South West can be supported to live well with pain whilst reducing and preventing harm from opioid medication.

[The Recommendations Report is available to download on the South West Clinical Senate website](https://www.swsenate.nhs.uk/presentations-contributed-to-how-can-we-support-people-in-the-south-west-to-live-well-with-pain-whilst-reducing-and-preventing-harm-from-opioids-medication/3734/).

Building a sustainable NHS for the next 75 years

In 2017, “The NHS is facing an existential crisis[[3]](#footnote-3)” was the headline in Open Access Government. Six years later, the same sentiment was echoed in the national media, the same year that the NHS celebrated its 75th birthday! The increasing high demand across primary and secondary care, workforce challenges, and industrial action contributing to the pressure on the capacity of Trusts already dealing with significant waiting lists for care, as they strive to recover services post-pandemic.

In addition, every year it is reported that the NHS is facing ‘winter pressures’ to the point that this has become normalised for the NHS to operate under extreme conditions.

When the NHS was created 75 years ago things were very different in terms of life expectancy, public expectations, and the range of interventions available. Things cannot continue as they are, and something will need to be done to ensure that the NHS is on a firm and sustainable footing for the next 75 years.

The Senate Council met on 29 June 2023 to discuss how a sustainable NHS might be built that would enable innovation and support the restoration of evidence-based interventions. [The Thought Piece is available to download on the South West Clinical Senate website](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-there-is-a-recognition-that-the-system-faces-significant-pressure-increasing-high-demand-dealing-with-post-pandemic-elective-recovery-w/3783/).

Risk stratification and prioritisation of children and young people waiting lists.

Risk stratification and prioritisation of children and young people waiting for care emerged as a deliberative topic from conversations that the South West Clinical Senate had with Dr. Vinay Takwale, Medical Director NHS England – South West who is responsible for coordinating elective care recovery in the South West region; and supported by conversations with colleagues from NHS Devon ICB, who were also aware of potential inequities in the application to children’s pathways, of tools intended for the prioritisation of adults.

The Senate Council met on 23 November 2023 to discuss what risk stratification and prioritisation process could be introduced across the South West region, to support children and young people waiting for care, to ensure equitable access to care is provided within four groupings - Surgery, Paediatric specialities, All-age specialities, and Diagnostic Imaging.

[The Recommendations Report is available to download on the South West Clinical Senate website](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-on-how-we-might-ensure-that-children-and-young-people-waiting-for-paediatric-specialties-and-community-pathways-are-appropriately-prioritized-and-receive-sa/3949/).

Senate Assembly Conference 2024

The South West Clinical Senate Assembly Conference entitled “Reimagining the NHS … the next 75 years” took place on 07 March 2024 at the Mercure Rougemont Hotel, Exeter.

It was well attended with 65 of the 81 registered delegates attending on the day. Positive feedback was received from delegates and speakers both on the day and in response to a survey questionnaire that was sent out, following the conference.

[Read the 2024 Senate Assembly Conference feedback report here](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.swsenate.nhs.uk%2Fwp-content%2Fuploads%2F2024%2F06%2F20240307_-Feedback-Report-SWCS-Assembly-Annual-Conference-SHORT.docx&wdOrigin=BROWSELINK).

This conference brought together academicians, healthcare professionals, patient and public voice partners in the region: creating the opportunity to hear from expert speakers, have a safe space to explore key issues, and network with peers.



Delegates at the South West Clinical Senate Assembly Conference held on 07 March 2024

A diagram of speech bubbles displaying feedback quotes from delegates as follows; 
'an opportunity to zoom out, reflect and horizon scan', 'stimulating up-to-date presentations, useful workshops, and an opportunity to network with people from across the whole region', The SW Clinical Senate Assembly Conference 2024 provided people, place and perspective for participants wanting a context for their clinical practice', 'As a member of the Citizens' Assembly, I was delighted to be with the Senate after 'lockdown' and see everyone face to face. The talent we have in the SW is inspiring - thankyou for all the sessions and input. The NHS can be rightly proud of these people', A stimulating and thought-provoking day, covering ideas that one wouldn't have capacity to think about as part of normal frontline work', The quality of the keynote sessions was excellent and informative providing food for thought as the future direction of healthcare needs and service provision', 'great day, really good to be able to get off the service delivery and operational roundabout and have protected tine and space to listenm, think and reflect.  Some inspirational speakers, ideas and work presented. Also key networking and sharing of improvement and learning to take away.'

Whilst recognising the success of the 2024 conference which was delivered in person, it is acknowledged that there are benefits to be had from delivering a virtual event – in terms of accessibility and flexibility for delegates. The South West Clinical Senate will explore the options for a hybrid format conference model that will be accessible to a wider audience without compromising on quality or delegate experience.

**Professionals in Training scheme**

In 2022, the South West Clinical Senate Council decided to create a development opportunity for two professionals-in-training (doctors, nurses, allied health professionals) who are aspiring to leadership and actively involved in healthcare delivery to join the Senate Council on a 12-month “Professional-in-Training” programme.

The Senate Council is responsible for the formulation of clinical advice from the South West Clinical Senate. The Professionals in Training would join a multi-disciplinary steering group of clinicians from across health and social care. The Professionals in Training are not expected to represent their organisations or professional bodies, ensuring that impartiality remains the fundamental strength of the Senate. The interest was overwhelming with over 36 applications received, and from these two applicants were successfully recruited onto the programme in December 2022.

Upon the request of the trainees, and an evaluation of the programme in early 2024, the decision was made to extend the length of the placement initially for an additional year (to the end of December 2024), as the South West Clinical Senate did not organise any desktop or clinical reviews in 2023, and so trainees were unable to observe this important strand of the Clinical Senate business. It is anticipated that after the 2024 general election, requests for desktop and clinical reviews will recommence. This will provide an invaluable learning opportunity for trainees.

**Patient and Public Voice**

The South West Clinical Senate is committed to ensuring that the perspective of individuals, their families, and carers is integral to its business activities.

The South West Clinical Senate's Citizens' Assembly (CA) is made up of (principally) local Healthwatch representatives who are interested in shaping and improving healthcare services in the region. These representatives bring the public voice right to the heart of the work of the Clinical Senate.

The Citizens’ Assembly continues to grow and evolve since its inception in 2014. It has become an integral part of the South West Clinical Senate, supporting the various activities of the Clinical Senate – contributing to the development of clinical advice to support the clinical review process, the deliberative sessions, and any other relevant activities of the Clinical Senate.

Statement from Chair of the Citizens’ Assembly

Our Citizens’ Assembly meetings have both a business and development function.

In 2023, the Citizens' Assembly met to explore the impact of the changes to how individuals access Primary Care through the changes to the telephone system used by General Practice surgeries. Members reported that many individuals had not felt informed or consulted before the changes were introduced. We invited Primary Care Commissioners and System Leads to one of our meetings to discuss this issue and share our observations and concerns. As an outcome we have shared the presentation from the Citizens Assembly with South West ICBs, Healthwatch’s and Patient Participation Groups (PPGs) to enable reflection and learning, we also invited the ICBs to engage and meet with the CA to present real life experience.

In 2024, the Citizens Assembly met to discuss possible topic options for a future Senate Council deliberative session. From this session, six themes emerged:

* Transport, car parking, patient access.
* Mental Health
* Virtual Wards / Use of AI and Technology
* Co-design/ Co-production:
* Personalised Care – What matters to me!
* Developing Positive organisational cultures – promoting a just culture

Members proposed their top three priority topics based on conversations with their local Healthwatch organisation. 'Mental Health' has emerged as the top-ranked topic with the following questions:

* What is the impact of delays in other care and treatment for children & young people on their mental health?
* How should mental health services in rural areas be delivered? Is there a national network around rural mental health services?

To this end, the Citizens’ Assembly proposes CYP Mental Health as a deliberative topic for the Senate Council.

Public Health and Health Inequalities are other areas of interest for the Citizens Assembly.

We will continue strengthening our membership and representation, increasing our network connections, and developing our strategic offer. If you are interested in finding out more about the Citizens' Assembly, please do not hesitate to check out our [Citizens Assembly webpage](https://www.swsenate.nhs.uk/citizens-assembly/).



Debbie Rigby

Chair, Citizens’ Assembly

**Collaboration with other regional Senates**

The role of the Clinical Senate is to provide independent, strategic, clinical advice to commissioners. This advice can be to support large scale service change and service reconfiguration by delivering an independent clinical review of clinical models and evidence base, as part of the NHS England Assurance Process or on ‘wicked’ clinical issues that would benefit from deliberation by an independent body of experienced senior health and care professionals.

There are nine Clinical Senates across England covering a different region (see figure 1). There is good collaboration between the Clinical Senates – underpinned by regular communication via the monthly Senate Managers meetings, and bi-annual Senate Chairs meetings. These meetings provide the vehicle for knowledge exchange, innovation, and developing coordinated approaches for addressing system-wide issues or contributing to policy development. The Clinical Senates work together to manage conflicts of interest by facilitating their Council members to join Clinical Review Panels set up by other Clinical Senates, as required. The South West Clinical Senate has benefitted, in the past, from being able to access this support.

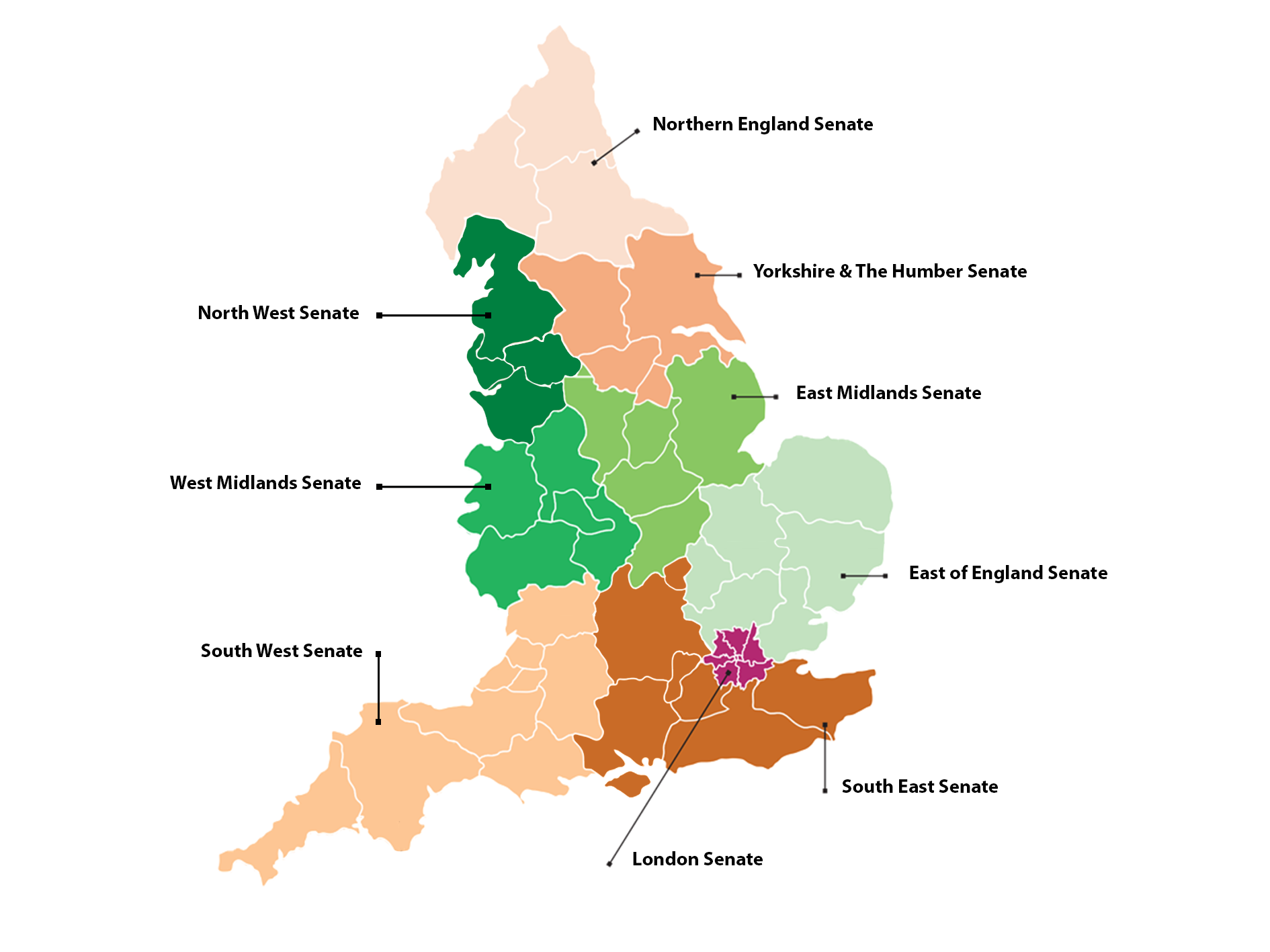
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Figure 1: Map of 9 Clinical Senates across England

**Looking Ahead**

It is anticipated that after the 2024 general election, there will be an increase in the activities of the Clinical Senate responding to requests for clinical reviews of proposals from the ICSs in the region. The Clinical Senate team works collaboratively with ICSs to ensure that this anticipated demand is effectively managed.

In addition, the NHS England organisation change programme concludes in the first quarter of 2024 – 2025. This has been one of the largest public sector change programmes – bringing together NHS England, NHS Digital, and Health Education England, which has not been without its challenges. It is hoped that as we come out of this change programme, a ‘new normal’ will emerge which will provide stability across the organisation – particularly around workforce and allow the focus to move to other activities.

Here at the South West Clinical Senate, we look forward to supporting the ICSs as they seek to move forward with proposals, and other stakeholders around the proactive work we do around the deliberative sessions.



Credit: Photo by RDNE Stock project: <https://www.pexels.com/photo/first-aid-responders-on-an-ambulance-6519925/> (accessed 20/06/2024)

**Acknowledgments**

The work of Clinical Senates is only possible because clinicians, patients, members of the public, and other stakeholders are prepared to give their time, along with their knowledge and expertise to help improve healthcare across the South West. We are grateful for the significant contribution of everyone we have worked with in the last couple of years – supporting our clinical reviews.

We are also grateful for the time and expertise of the speakers who have presented at Senate Council deliberative sessions:

|  |  |
| --- | --- |
| Name | Job title, Organisation |
| Matt Thomas | Interim Medical Director, South West Ambulance Service NHS Foundation Trust |
| Wayne Darch | Deputy Operations Director, South West Ambulance Service NHS Foundation Trust |
| Adrian South | Deputy Clinical Director, South West Ambulance Service NHS Foundation Trust |
| Dr Marion Andrews-Evans | Director - Research and Vaccinations, NHS Gloucestershire Integrated Care Board |
| Kate MacKay | Retention Manager, NHS England South West |
| Helen Edmunds | Deputy Director – Workforce, NHS England South West |
| Alison Hackett | Head of Staff Experience and Engagement, NHS England South West |
| Penny Smith | Director of Nursing Leadership and Quality, NHS England South West |
| Dr Namritha Ramanujam | Trainee Doctor, Royal United Hospitals, Bath |
| Peter Buttle | Former Chair\*, Citizens Assembly (\*was Chair at the time of the event) |
| Dr Cathy Stannard | Clinical Lead, Pain Transformation Programme, NHS Gloucestershire Integrated Care Board |
| Dr Arpit Srivastava | GP, Clinical Lead, GWH |
| Dilesh Khandhia | Deputy Pharmacy Director, Royal United Hospital |
| David Hutchins | Consultant in Pain Medicine and Anaesthesia, University Hospitals Plymouth NHS Trust |
| Dr Nigel Acheson | Chief Medical Director, NHS Devon Integrated Care Board |
| Dr Vinay Takwale | Medical Director, NHS England South West |
| Dr Emma Redfern | Acting Medical Director, University Hospitals Bristol and Weston NHS Foundation Trust |
| Nick Pennell | Former Chair\*, Citizens Assembly (\*was Chair at the time of the event) |
| Dr Simon Courtman | Consultant in Paediatric Anaesthesia, Clinical Director, SW Surgery in Children Operational Delivery Network |
| Dr Rowan Kerr- Liddell | Consultant Paediatrician with Expertise in Cardiology, Torquay, Torbay General District Hospital |
| Dr Claire Hooper | Strategic Clinical Advisor Planned Care, NHS Devon Integrated Care Board |
| Sarah Cooper | Regional Lead Healthcare Scientist South West, NHS England, Chief Clinical Cardiac Scientist Training and Development Lead, Royal Cornwall Hospital NHS Trust |
| Stuart Harris | Paediatric Audiologist, University Hospitals Plymouth |

Finally, we would like to thank our Senate Council members who freely contribute their time and expertise to support the work of the Clinical Senate.

Senate Council members list (As at 19 June 2024)

|  |  |  |
| --- | --- | --- |
| **Name** | **Job Title** | **Organisation** |
| **Standing Members** |  |  |
| Dr Sally Pearson | Senate Chair | South West Clinical Senate |
| Professor David Halpin | Consultant Physician and Honorary Professor | Royal Devon and Exeter Hospital |
| Debbie Rigby | Chair, Citizens Assembly | Patient and Public member |
| Debi Reilly | Regional Director SW | NHS England South West |
| Mark Juniper | Medical Director | West of England Health Innovation Network (formerly West of England Academic Health Science Network) |
| Dan Lyus | Deputy Chief Executive Officer | South West Health Innovation Network (formerly South West Academic Health Science Network) |
| Rebecca Whitting | Interim Portfolio Director - Implementation | South West Health Innovation Network (formerly SW Academic Health Science Network) |
| Professor Maggie Rae | Deputy Director – Regional Public Health Programmes | NHS England – South West |
| **Core Members** | | |
| Steve Jones | Consultant Paediatrician and Neonatologist | Royal United Hospitals Bath NHS Foundation Trust |
| Professor Parag Singhal | Consultant General Medicine, Diabetes and Endocrinology | University Hospitals Bristol and Weston NHS Foundation Trust |
| Dr Christine Spray | Consultant in Paediatric Gastroenterology, Hepatology and Nutrition | United Hospital Bristol Healthcare Trust |
| Dr Giorgio Gentile | Consultant Nephrologist | Royal Cornwall Hospitals NHS Trust |
| Dr Nicholas (Nick) Kennedy | Consultant Anaesthetist and Intensivist | Taunton and Somerset NHS Trust |
| Professor Minesh Khashu | Clinical Lead for Poole Hospital | University Hospital Dorset |
| Dr Anne Frampton | Consultant in Paediatric Emergency Medicine | University Hospitals Bristol and Weston NHS Foundation Trust |
| Dr Katie Cross | Consultant General Surgeon | Northern Devon Healthcare Trust |
| Ann Lyons | Consultant Colorectal Surgeon | North Bristol NHS Trust |
| Neil (Andrew) Hopper | Consultant Vascular Surgeon | Royal Cornwall Hospitals Trust |
| Bruce Daniels | Head of Pathology, South West region, NHS England | NHS England South West |
| Rebecca Reynolds | Director of Public Health | Bath and North East Somerset Council |
| Dom Williamson | Consultant Emergency Medicine | North Bristol NHS Trust |
| Dr Paul Winterbottom | Consultant Psychiatrist | 2gether NHS Foundation Trust |
| Dr Anita Pearson | Specialist in gender health care | Devon Partnership Trust |
| Tom Hilliard | Consultant Respiratory Paediatrician | University Hospitals Bristol and Weston NHS Foundation Trust |
| Peter Davis | Consultant Paediatric Intensivist | University Hospitals Bristol and Weston NHS Foundation Trust |
| Miles Wagstaff | Consultant Paediatrician, Neonatologist | Gloucestershire Hospitals NHS Foundation Trust |
| Will Mongare | Clinical Nursing and Quality Manager / CAMHS Case Manager | NHS England South West |
| Carol Stonham MBE | Respiratory Nurse Specialist Primary Care | NHS Gloucestershire Integrated Care Board |
| Hannah Little | Assistant Chief Nursing Officer - Cancer Services | North Bristol NHS Trust - Southmead Hospital |
| Dr Claire Barlow | Consultant Medical Oncologist | Musgrove Park Hospital |
| Dr Marion Andrews-Evans | Director - Research and Vaccinations | NHS Gloucestershire Integrated Care Board |
| Joanne Meacham | Deputy Chief Operating Officer | Wiltshire Health and Care |
| Dr Peter Wright | Director of Healthcare Science and Technology | University Hospitals Plymouth NHS Trust |
| Dr Sara Evans | Consultant Geriatrician, Lead for Medical Education research and development, and medical workforce | Royal United Hospital Bath |
| Dr Rachel Bradley | Consultant Geriatrician | University Hospitals Bristol and Weston NHS Foundation Trust |
| Mark Stone | Pharmacist Consultant/Devon LPC Project Lead, Vice Chair of the East Cornwall Primary Care Network | Devon Local Pharmaceutical Committee and Tamar Valley Health Practices |
| Bruce Daniel | Head of Pathology | NHS England South West |
| Alex Sharp | Head of Clinical Development | South West Ambulance Service NHS Foundation Trust |
| Alyson O Donnell | Medical Director | Royal Bournemouth and Christchurch Hospital NHS Trust |
| Dr Mary Backhouse | GP | North Somerset Clinical Commissioning Group |
| Dr Amelia Randle | GP, and Clinical Lead Somerset Wiltshire, Avon, and Gloucestershire Cancer Alliance | The Park Surgery, and Somerset Wiltshire, Avon, and Gloucestershire Cancer Alliance |
| Richard Walters | Physiotherapy | University Hospitals Plymouth NHS Trust |
| Ros Wade | Head of Therapy Services | Royal Devon University Healthcare NHS Foundation Trust |
| Dr Emma Jones | Consultant Healthcare Scientist in GI Physiology | University Hospital Southampton |
| **Co-Opted Members** | | |
| Dr Geeta Iyer | Chief Medical Officer | NHS Bristol, North Somerset, and South Gloucestershire Integrated Care Board |
| Dr Amanda Webb | Chief Medical Officer | NHS Bath and North East Somerset, Swindon, and Wiltshire Integrated Care Board |
| Dr Andrew Seymour | Chief Medical Officer | NHS Gloucestershire Integrated Care Board |
| Dr Nigel Acheson | Chief Medical Officer | NHS Devon Integrated Care Board |
| Dr Bernie Marden | Chief Medical Officer | NHS Somerset Integrated Care Board |
| Dr Christopher Reid | Chief Medical Officer | NHS Cornwall and Isles of Scilly Integrated Care Board |
| Dr Paul Johnson | Chief Medical Officer | NHS Dorset Integrated Care Board |
| **Non-Voting Members/ invited members** | | |
| Jane Jacobi | Implementation Facilitator, NICE Field Team | National Institute for Health and Care Excellence (NICE) |
| Dr Matthew Boissaud-Cooke | Neurosurgery Specialist Registrar (ST5) | University of Hospitals Plymouth NHS Trust |
| Dr Hannah Lyons | Medical Oncology Registrar | Bristol Haematology Oncology Centre |

**Get in touch**

For more information about the South West Clinical Senate, please look at our website [Home - South West Senate (swsenate.nhs.uk)](https://www.swsenate.nhs.uk/) or contact the team at [england.swclinicalsenate@nhs.net](mailto:england.swclinicalsenate@nhs.net).



Credit: Photo by [Piron Guillaume](https://unsplash.com/@gpiron?utm_content=creditCopyText&utm_medium=referral&utm_source=unsplash) on [Unsplash](https://unsplash.com/photos/medical-professionals-working-U4FyCp3-KzY?utm_content=creditCopyText&utm_medium=referral&utm_source=unsplash) ([Medical professionals working photo – Free Medical Image on Unsplash](https://unsplash.com/photos/medical-professionals-working-U4FyCp3-KzY) (accessed 20/06/2024)

**Appendix 1: Get involved with the work of the South West Clinical Senate**

|  |  |
| --- | --- |
| **Introduction** |  |
| The South West Clinical Senate plays a crucial role in healthcare improvement in the region. Our mission is to provide strategic, independent advice and leadership on the design of healthcare services, ensuring the best outcomes for patients across the South West region.  The work of the South West Clinical Senate is delivered by the Senate Council which has its membership from senior clinicians and healthcare leaders from across the region. It is supported by the Senate Assembly which is made up of a wider group of healthcare professionals.  We are always interested in hearing from healthcare professionals who are active in the delivery of health and care services and passionate about helping to shape healthcare in the South West region. | |

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| **Why join us?** |  |
| * **Help shape healthcare in the region**: Contribute your expertise to the development of clinical advice on ‘wicked’ clinical issues in the region, and on significant service change and reconfiguration. * **Collaborate with Peers**: Work alongside a diverse group of health and care professionals and patient partners across the region. * **Professional Development**: Access to unique learning opportunities to develop strategic leadership skills and knowledge in the wider healthcare system. | |

|  |  |
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| **Impact and Success Stories** |  |
| **Transforming Healthcare through Collaboration**  The South West Clinical Senate has been instrumental in shaping healthcare services in the region. Listed below is some of our recent work.   * **Risk stratification and prioritisation of children and young people waiting lists.** The recommendations contained within the report will help ensure that children and young people are appropriately prioritised and receive safe, high-quality, and timely care. [The link to the Senate Council Recommendations Report](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-on-how-we-might-ensure-that-children-and-young-people-waiting-for-paediatric-specialties-and-community-pathways-are-appropriately-prioritized-and-receive-sa/3949/) * **Building a sustainable NHS for the next 75 years** The Senate Council met to discuss how a sustainable NHS might be built for the next 75 years against a backdrop of increasing high demand, workforce challenges, industrial action, and the legacy of the COVID-19 pandemic; that would enable innovation and support the restoration of evidence-based interventions. The ideas from this session are documented in a Thought Piece. [The link to the Thought Piece](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-there-is-a-recognition-that-the-system-faces-significant-pressure-increasing-high-demand-dealing-with-post-pandemic-elective-recovery-w/3783/) * **Reducing and preventing harm from opioid medication for those living with pain.** The recommendations contained within the report will help healthcare professionals, providers, and patients take positive steps to reduce harm from opioid prescribing for those living with pain. [The link to the Senate Council Recommendations Report.](https://www.swsenate.nhs.uk/presentations-contributed-to-how-can-we-support-people-in-the-south-west-to-live-well-with-pain-whilst-reducing-and-preventing-harm-from-opioids-medication/3734/) * Other Senate Council Recommendations are available on the South West Clinical Senate website. [This is the link to the Senate Council Recommendations Reports](https://www.swsenate.nhs.uk/senate-recommendations/) | |

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| **Making a Difference** |  | **Take the Next Step in your Professional Journey** |
| Our members are at the heart of our success. By joining the South West Clinical Senate, you become part of a legacy of positive change and innovation in healthcare.   * **Join the Senate Assembly:** Applications are welcome from health and care professionals at a consultant level or equivalent, in the South West region. There is no cap to the number of Senate Assembly members. * **Join the Senate Council:** The Council draws its membership from the Senate Assembly. Applicants who are not members of the Senate Assembly will be required to join the Senate Assembly as a first step |
| **Are you ready to make a significant impact in the healthcare sector? Act Now! Join our Senate Assembly or Senate Council!**   * **Connect** **with us on social media**:   + LinkedIn. [This is the link to the South West Clinical Senate page on LinkedIn](https://www.linkedin.com/in/south-west-clinical-senate-6b74a8193/),   + X (formerly Twitter) [This is the link to the South West Clinical Senate page on X (formerly Twitter)](https://x.com/SouthWestSenate) * **Visit our website to learn more about the Senate Assembly and Senate Council.:** [The link to the South West Clinical Senate website](https://www.swsenate.nhs.uk/) * **Any questions?** Contact the Senate team at [england.swclinicalsenate@nhs.net](mailto:england.swclinicalsenate@nhs.net)   **Apply to join our Senate Assembly or Senate Council.** We have ongoing, open recruitment to the Senate Assembly. Visit our website for the application form, and to check for Senate Council vacancies. |
|  |
| A group of medical professionals standing together  Description automatically generated |
| Credit:[[4]](#footnote-4) | | |

**Your voice matters. Your expertise is invaluable.**

**Come, be a part of the South West Clinical Senate community and help to drive healthcare forward in the South West region**.

**Appendix 2: How to suggest a deliberative topic to the South West Clinical Senate**

Seeking independent clinical advice

|  |  |
| --- | --- |
| **Introduction** |  |
| The South West Clinical Senate plays a pivotal role in shaping healthcare services across the region. It provides independent, clinical advice to commissioners on proposals for service reconfiguration and service change, and ‘wicked’ issues that have a clinical element.  The South West Clinical Senate invites topic suggestions from commissioners and other stakeholder organisations in the region, to inform its Senate Council deliberations. | |

|  |  |  |  |
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| **Who can submit a topic?** | |  | |
| Any groups or organisations that have an interest in health and social care can submit a topic. Some examples are: | | | |
| * Commissioners * NHS England * Local Authorities | * Provider Organisations * Integrated Care Boards or Systems * Specialised Commissioning | | * Clinical Networks * Proposed by the Senate to a Commissioner * Provider Organisations |

|  |  |  |
| --- | --- | --- |
| **Criteria** |  | **Recent Topics** |
| The Senate Council will assess the relevance of the suggested discussion topic against the following guiding principles:   * Topics where the Clinical Senate can add value. * Topics of significant and strategic importance to health and social care transformation | * **Risk stratification and prioritisation of children and young people waiting lists.** The recommendations contained within the report will help ensure that children and young people are appropriately prioritised and receive safe, high-quality, and timely care. [The link to the Senate Council Recommendations Report](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-on-how-we-might-ensure-that-children-and-young-people-waiting-for-paediatric-specialties-and-community-pathways-are-appropriately-prioritized-and-receive-sa/3949/) * **Building a sustainable NHS for the next 75 years** The Senate Council met to discuss how a sustainable NHS might be built for the next 75 years against a backdrop of increasing high demand, workforce challenges, industrial action, and the legacy of the COVID-19 pandemic; that would enable innovation and support the restoration of evidence-based interventions. The ideas from this session are documented in a Thought Piece. [The link to the Thought Piece](https://www.swsenate.nhs.uk/south-west-clinical-senate-recommendations-there-is-a-recognition-that-the-system-faces-significant-pressure-increasing-high-demand-dealing-with-post-pandemic-elective-recovery-w/3783/) * **Reducing and preventing harm from opioid medication for those living with pain.** The recommendations contained within the report will help healthcare professionals, providers, and patients take positive steps to reduce harm from opioid prescribing for those living with pain. [The link to the Senate Council Recommendations Report.](https://www.swsenate.nhs.uk/presentations-contributed-to-how-can-we-support-people-in-the-south-west-to-live-well-with-pain-whilst-reducing-and-preventing-harm-from-opioids-medication/3734/) * Other Senate Council Recommendations are available on the South West Clinical Senate website. [This is the link to the Senate Council Recommendations Reports](https://www.swsenate.nhs.uk/senate-recommendations/) |
|  |
| **Proposing a topic** |
| * **Identify:** Your topic should be relevant to more than one ICS area and should have the potential to improve healthcare services or patient care. * **Describe:** Set out the background, supporting evidence, potential impact of your topic. The template form can be used as a guide (See Appendix 1). * **Submit:** Email your proposed topic to the South West Clinical Senate at [england.swclinicalsenate@nhs.net](mailto:england.swclinicalsenate@nhs.net) with **“Proposed deliberative topic”** in the title. * **Any Questions?** Contact us at [england.swclinicalsenate@nhs.net](mailto:england.swclinicalsenate@nhs.net). |
| **Feedback:** The Senate Council values all submissions and will provide feedback on the outcome of your suggestion. | | |

Appendix 3: Proposing a Deliberative Topic Template

This template is a guide to what to include. All the fields in the form do not need to be completed. However, providing this information will help the Senate Management Team and/ or the Senate Council in choosing the topic.

Email your proposed topic to the South West Clinical Senate at [england.swclinicalsenate@nhs.net](mailto:england.swclinicalsenate@nhs.net) with **“Proposed deliberative topic”** in the title. If you have any questions, please contact us at the same email address.

|  |  |
| --- | --- |
| 1 | Describe the topic or issue (include background/ context). |
|  |  |
| 2 | Why? What is the rationale for exploring this topic (include any data, evidence base, case studies, research, etc.) |
|  |  |
| 3 | What is the benefit or impact on patient care or healthcare delivery? |
|  |  |
| 4 | Who are the stakeholders and contributors? (include details of any expert speakers, or knowledge brokers in the South West region that could contribute to the discussion or provide background material/ data).  Who is the target audience for the report? (include details of commissioners, networks, providers, or other groups) |
|  |  |
| 5 | Anything else |
|  |  |

1. See Appendix 1 for information on how to join the Senate Council, Senate Assembly [↑](#footnote-ref-1)
2. [Health Profile of the South West of England 2021 (phe.org.uk)](https://fingertips.phe.org.uk/static-reports/health-profile-for-england/regional-profile-south_west.html#overview-of-the-population-of-south-west) [↑](#footnote-ref-2)
3. [NHS is facing an existential crisis | Open Access Government](https://www.openaccessgovernment.org/nhs-facing-existential-crisis/31574/) [↑](#footnote-ref-3)
4. Image reference: Photo by <a target="\_blank" href="https://freerangestock.com/photographer/Direct-Media/5081">Direct Media</a> from <a target="\_blank" href="https://freerangestock.com">Freerange Stock</a> (accessed 19/06/2024)

   [Free Stock Photo of Team of doctors | Download Free Images and Free Illustrations (freerangestock.com)](https://freerangestock.com/photos/142120/team-of-doctors.html) [↑](#footnote-ref-4)