

The London Clinical Senate.

The role of a Senate Council Member.

January 2019.

About the London Clinical Senate.

The London Clinical Senate's role is to provide independent, clinical and strategic advice to London's commissioners and providers.

Clinical Senates are independent bodies within NHS England. They exist to support the improvement and development of health and care services through the provision of clinical advice to commissioners and supporting them to make the best decisions about health care for the populations they serve.

Senate advice is always independent, impartial, and informed by the best available evidence.

The London Clinical Senate is one of the 12 English Clinical Senates, see <https://www.england.nhs.uk/ourwork/part-rel/cs/>

The Senate Council is the London Clinical Senate's governing body.

The members of the Senate Council:

- oversee the work of the London Clinical Senate
- take part in the Senate's provision of independent strategic clinical advice
- provide leadership on services redesign and improvement
- when providing advice, promote the needs of patients above the needs of organisations or professions

Who can be a member of the London Clinical Senate Council.

Senate Council membership is open to any senior healthcare professionals who practices in London. The council's members come from a wide variety of clinical backgrounds.

Our definition of a senior health care professional includes any of the following:

- Doctors, Nurses, Midwives
- Allied Health Professionals
- Healthcare Scientists
- Healthcare Academics
- Dentists, Optometrists and Pharmacists

Council Members can be employed by an NHS Trust, work in academia, the private sector, be an independent contractor, be a salaried primary care practitioner, or be self-employed.

The role of a Senate Council member.

Senate Council members:

- oversee the work of the London Clinical Senate
- ensure that the Senate fulfils its role of providing independent clinical advice to commissioners and providers
- agree its workplan

A council member:

- actively participates in the work of the Clinical Senate
- commits time to fully understand the issues being considered by the Senate
- models the Senate's values and applies the Senate's principles when formulating advice
- applies their professional knowledge and expertise to requests for advice from the Clinical Senate
- debates and then agrees on recommendations or advice; reaching a consensus where there is a divergence of opinion
- champions the Clinical Senate's recommendations and assist in their communication

The qualities of a Senate Council member.

A council member

- focuses on improving quality and encouraging innovation
- promotes the needs of patients above the needs of organisations or professions
- works in an open and transparent way,
- collaborates and work across organisational or other boundaries
- works with their fellow Senate Council members to create an inclusive environment where diversity and equality are valued and promoted
- acts with integrity and provides advice independent of any organisational or professional interests
- acts in accordance with the Nolan principles for Standards in Public Life.

The skills, knowledge and experience required of a Senate Council Member.

A Senate Council member has the knowledge, skills and experience to be able to provide advice or comment upon:

- matters of strategic importance to the improvement of health and care in London
- service transformation and reconfiguration e.g. advising on clinical models, clinical quality and clinical outcomes
- quality improvement. e.g. advising on quality standards
- quality assurance, e.g. advising on the impact of service change proposals and post implementation evaluation.

And to be able to:

- provide advice on quality failure and then support the development of sustainable local solutions
- provide a whole systems perspective and maintain a strategic overview

Accountability.

Senate Council members are accountable to the Senate Chair and Vice Chair. The Senate Council Chair is accountable to the NHS England Regional Medical Director.

Senate Council Meetings and other commitments.

The Senate Council meets bi-monthly. Meetings are held from 5-7pm to enable members with day-time commitments to attend.

Council members are also members of the London Clinical Senate Forum
<http://www.londonsenate.nhs.uk/senate-forum/>

Council members are expected to take part in clinical reviews and other Senate project work. Participation in a clinical review or Senate project work will be linked to a Member's clinical knowledge, skills and experience. Members can expect to take part in one clinical review a year. The time commitment for a clinical review is 4 sessions.

Tenure and remuneration.

Appointed members are Senate Council members for a period of three years. This can be extended for a further two years.

Whilst there is no remuneration for being a council member, independent contractors can claim expenses for taking part in Clinical Review.

Confidentiality.

The Clinical Senate is committed to working in an open and transparent way. However, there are occasions when the Senate's discussions and/or documentation are confidential. For example; during the formulation of advice or before advice has been provided to the statutory body that requested it.

In such circumstances, members will acknowledge their responsibility to maintain the confidentiality of such information. The Senate Council Chair will advise on issues of confidentiality as and when they arise.

*Edward Ward
London Clinical Senate Manager, January 2019.*

The London Clinical Senate's principles for improving quality and outcomes.

The London Clinical Senate has a set of principles it believes are essential for the improvement of quality and outcomes. A Senate clinical review will seek evidence of these principles in the issues it considers and will promote them in the advice it provides.

Our principles are to:

- Promote **integrated working across health and social care** and to ensure a seamless patient journey
- Be **patient-centred and co-designed**, this includes patient experience, and patient involvement in the development and design of services
- Reduce **inequalities**, this involves understanding and tackling inequalities in access, health outcomes and service experience between people who share a protected characteristic and those who do not, and being responsive to the diversity within London's population
- Ensure there is a parity **of esteem** between mental and physical health for people of all ages
- Support for self-**care** and **health and wellbeing**
- Improve **standards and outcomes**, this includes the use of evidence and research, the application of national guidance, use of best practice, and evidence of innovation
- Ensure **value**, this includes considering cost effectiveness and efficiency, long term sustainability, implications for the workforce, and the consideration of unintended consequences.