

Report from the Joint Clinical Directors

Governing Body meeting

Q

7 November 2013

Author(s)/Presenter and title	Dr Zak McMurray and Dr Richard Oliver, Joint Clinical Directors
Sponsor	Dr Zak McMurray and Dr Richard Oliver, Joint Clinical Directors
Key messages	
To update Governing Body on the work of the Clinical Directors, including the Protected Learning programme and the Clinical Reference Group.	
Assurance Framework (AF)	
<p>Assurance Framework Number: 4.2</p> <p>How does this paper provide assurance to the Governing Body that the risk is being addressed?</p> <p>This paper describes the clinical leadership being exercised through the CCG's Clinical Directors which secures engagement of clinicians in service redesign, scrutiny of proposed changes and participation in education.</p> <p>Is this an existing or additional control: Existing</p>	
Equality/Diversity Impact	
<p>Has an equality impact assessment been undertaken? NO</p> <p>Which of the 9 Protected Characteristics does it have an impact on?</p> <p>The work of the Clinical Reference Group aims to address health inequalities and to support the CCG in meeting its statutory duties around equality. The work programme of the Clinical Directors has the potential to make a positive impact on people with any or all of the protected characteristics.</p>	
Public and Patient Engagement	
Elements of the Clinical Directors' work include public and patient engagement, for example, communication of health messages to the public, involving patients in the development of new services and delivery of education.	
Recommendations	
<p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> Note the contents of the report Comment on the work of the Clinical Directors, the Clinical Reference Group or the Protected Learning Initiative programme. 	

Report from the Joint Clinical Directors

Governing Body meeting

7 November 2013

1. Update on the work of the Joint Clinical Directors

- 1.1. The two Clinical Directors continue to discharge a range of duties associated with their joint role, for example: liaison with the Local Medical Committee; maintaining links with the Foundation Trust Medical Directors, participating in reviews of commissioning for enhanced services, and contributing to the CCG's governance arrangements.
- 1.2. Dr Zak McMurray continues to provide clinical advice and leadership to the Right First Time programme. Zak sits on the Programme Board and supports the Project Leads. He is particularly involved in managing flow of patients into and out of the frailty unit. He is also involved in the regional primary care transformational work and will also be offering support around commissioning of ambulance services. Zak has also contributed to reviews of infection control procedures in nursing homes; represented the CCG on the city wide Child Death Overview Panel; supported redesign of geriatric and stroke medicine services; provided clinical expertise to the Joint Management Board for community nursing and the Unscheduled Care Board; contributed to work on quality development in mental health services, and participated in the development of commissioning for outcomes for musculo –skeletal conditions.
- 1.3. Dr Richard Oliver continues to work on the implementation and ongoing governance of the national “111” service, including call reviews. He contributes across a range of medicines management activities, including chairing the Area Prescribing committee, representing the CCG at Sheffield Teaching Hospital FT's Medicines Safety Committee and on the Local Pharmaceutical Committee, and is involved in developing prescribing protocols. Richard has contributed to service improvement plans in children's unscheduled care and to city wide children's strategy development; provided clinical advice to the development of electronic discharge project, and worked on redesign projects in dermatology and pathology.
- 1.4. Richard also is clinical lead for information governance as our Caldicott Guardian and works with other CCGs in South Yorkshire on screening for clinicians whose performance gives some cause for concern. He also supports the Chief Nurse and his team on quality assurance, including investigation of “never events”. He attends the Local Optometry Committee and works with optometrists to develop good practice and to disseminate what we are doing in Sheffield more widely. He has contributed to the review of the contract review with the Clover Group of practices, worked on the development of the primary care referral and education portal, and supported the introduction of a new process for clinical pathway redesign.

2. The work of the Clinical Reference Group (CRG)

2.1. The purpose of the CRG is to provide a forum for clinical debate and scrutiny of clinical innovation, ideas for change, challenge from CCG members on developing clinical cases. CRG conducts most of its business virtually but where required can facilitate face to face meetings. The range of such discussions is broad, for example the July session considered abnormal uterine bleeding, use of denosumab and management of henoch schonlein purpura. Virtual debates have included use of walking sticks, hyperparathyroidism, irritable bowel syndrome and diabetic retinopathy. The forum is increasing the number of participants - currently there are 85.

3. The Protected Learning Initiative (PLI)

3.1 This year's PLI programme continues to be well attended, with events regularly attracting 250 – 275 attendees. The CCG has begun to use an electronic survey method to gather feedback from delegates; this has led to a lower number of evaluations completed, however the feedback continues to show that these events are valued by general practice staff and attendance continues to be high.

PLI events which have taken place so far this year:

May: "Diabetes – A Problem Of Increasing Size"
June: Practice based learning sessions
July: "Safeguarding Adults – Making Connections"
September: Locality based events for North, Central and West
October: "Supporting Patients to Make Healthy Choices – Motivation And Behaviour Change", and locality based event for Hallam and South
November: "A Good Start In Life For Sheffield Children – Paediatrics in Primary Care".

Four more events are planned for the remainder of the year, covering: child safeguarding, haematological conditions and urology / men's health, as well as another practice based session. Dr Oliver has clinical overview of the PLI programme, together with three other GPs who provide advice and guidance on the content of the sessions and method of delivery.

4. Recommendations

The Governing Body is asked to:

- Note the contents of the report
- Comment on the work of the Clinical Directors, the Clinical Reference Group or the Protected Learning Initiative programme.

Paper prepared by Jane Howcroft, Senior Commissioning Manager

On behalf of Dr Zak McMurray and Dr Richard Oliver, Joint Clinical Directors

October 2013