







TERMS OF REFERENCE

NAME OF GROUP:	STP Clinical Reference Group			
PURPOSE	 Provide a strategic clinical overview of the STP and its delivery plans Ensure coherence and consistency across transformation programmes Share learning, spread innovation and good practice Ensure national and STP priorities are taken into account in clinical models and pathways Horizon scanning, including highlighting new and emerging national policies that may impact on STP Sense check impact of STP changes on individual STP organisations, highlighting any clinical risks Provide clinical opinion or advice as requested by the STP Leadership Board, including commissioning additional work from expert bodies when needed Identify and assess strategic clinical risks to delivery. A particular focus for the CRG is to ensure that cross-cutting themes of prevention, mental health, children and young people, and frail older people are embedded within STP plans and clinical pathways.			
MEMBERSHIP	The CRG membership includes clinicians representing a range of professions and experience from the different sectors of health and care, including medicine, public health, nursing, allied health professionals and social care. Other clinicians may be invited for a specific meeting/agenda item as needed. The Chair is a practising clinician in Nottinghamshire and is appointed by the CRG members. The current chair is Andy Haynes, Medical Director, SFH. The busy schedules of the members are acknowledged and to ensure the balance and consistency for meetings members are asked to nominate a deputy. Sector Member Deputy Public health Alison Challenger Social care Helen Jones Jane North			
	Primary care – Mid Notts	Thilan Bartholomeuz	Gavin Lunn	









	Primary care –	Hugh Porter	Nicole Atkinson
	Greater Nottingham	Stephen Shortt	
	Mental health	Julie Hankin	Chris Packham
	Community	Tracey Tyrell	Michelle Bateman
	services –		
	Nursing/AHP		
	Secondary care – NUH	Keith Girling	Dave Selwyn
	Secondary care - SFH	Andy Haynes	
	Secondary care – Nursing/AHP	Suzanne Banks	
	NHSE Nursing	Dani Burnett	
	Allied health professionals	Catherine Pope	
	Consultant Paramedic	Roger Watson	Tbc
RESPONSIBILITIES	Members of the group are asked to: bring their expertise and understanding of the system be a conduit for bringing the views and reporting back to the sector that they represent make appropriate links and alignment with other local and regional clinical groups		
MEETING AGENDA	Standing items on the CRG agenda include: - Response to requests from the STP Leadership Board - A 'deep dive' into a topic selected in advance by the CRG, particularly topics that draw out issues around cross-cutting themes, with additional clinicians attending to present on the topic (see Annex 1 for approach) - Agreeing issues and recommendations to report back to the STP Leadership Board - Raising issues for professional groups represented		
FREQUENCY OF MEETINGS	The CRG will meet monthly. The CRG will also act as a virtual advisory group as and when needed.		
QUORUM:	The meeting will quorate when 50% of members are present.		
REPORTING PROCEDURES:	The Chair of the CRG sits on the STP Leadership Board and is the conduit for reporting to and receiving updates and requests from the STP Leadership Board.		
	A written report will be each meeting with a s		Leadership Board after once a quarter.









SERVICING:	 The STP Advisory Group will be serviced by the Executive Support Team. Agenda items will be requested from the group 2 weeks before the meeting and the agenda agreed with the Chair at least 2 weeks before the meeting The agenda and papers will be sent to members of the group 1 week before the meeting Draft minutes will be sent to the group one week after the meeting. 	
REVIEW DATE :	These Terms of Reference will be reviewed every 6 months	
DATE APPROVED :	STP Leadership Board 23 March 2018	









Annex 1

STP CLINICAL REFERENCE GROUP - APPROACH TO DEEP DIVES

General approach

- Compare and contrast approaches in the two transformation areas (Mid Notts and Greater Nottingham), including sharing what is working well and providing challenge in terms of aspects that may be missing
- Sense check and challenge current pathway and future developments, including looking for opportunities to improve alignment strategic direction of STP and consistency of approach across the STP area
- Consider agreed cross cutting themes prevention, mental health, children and young people, frail older people, carers.
- Report on opportunities and concerns to Leadership Board, with recommendations.
- Revisit themes at a future date to assess progress.

Topic specific questions for each transformation area/topic to present on

- 1. What is the size of the problem/ trend?
- 2. What is the current pathway of care and what changes are planned?
- 3. What outcomes are you measuring?
- 4. What are the key issues and how are you addressing? Are there any gaps or duplications in service provision and how might these be overcome?
- 5. What are the opportunities to improve consistency of approach and benefit from more joint working across STP area?
- 6. Do you know how much is spent on this cohort? Is there an opportunity to invest to save?
- 7. With respect to the cross cutting themes
 - O How is prevention embedded in the pathway?
 - o How is meeting peoples' mental health needs incorporated into pathways?
 - O How are specific needs of children and young people/ frail older people being met?
 - How are we supporting carers?
 - O What are the workforce considerations currently /in the future?