



Report to:	Humber & North Yorkshire Integrated Care Board
Date of Meeting:	10 May 2023
Subject:	Clinical and Professional Update
Director Sponsor:	Dr Nigel Wells, Executive Director Clinical & Professional
Author:	Dr Nigel Wells, Executive Director Clinical & Professional

STATUS OF THE REPORT: *(Please click on the appropriate box)*

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT:

RECOMMENDATIONS:

Members are asked to:

- i) Note the items discussed at the Clinical & Professional Group and Executive Committee meetings.
- ii) Note the actions being taken forward by the Clinical & Professional Group and Executive Committee.
- iii) Note the update on staffing within the Clinical & Professional Directorate

ICB STRATEGIC OBJECTIVE *(please click on the boxes of the relevant strategic objective(s))*

Realising our vision	<input checked="" type="checkbox"/>
Improving outcomes in population health and healthcare	<input checked="" type="checkbox"/>
Supporting broader social and economic development	<input type="checkbox"/>
Tackling inequalities in outcomes experience and access	<input checked="" type="checkbox"/>
Delivering our operational plan 2022/23	<input checked="" type="checkbox"/>
Developing our ICS	<input checked="" type="checkbox"/>

IMPLICATIONS *(Please state N/A against any domain where none are identified)*

Finance	N/A
Quality	This Committee has a direct link to the Quality Committee via the membership of the chair (Executive Director Clinical & Professional) and vice chair (Executive Director Quality & Nursing). Clinical policies can only be approved by the Quality Committee.



HR	N/A
Legal / Regulatory	The Clinical and Professional Executive Committee forms part of the formal governance structure of the ICB.
Data Protection / IG	N/A
Health inequality / equality	The Clinical and Professional Executive Committee has a focus on improving population health, including health inequalities. All emerging Clinical Policies are subject to an Equalities and Health Inequalities Impact Assessment.
Conflict of Interest Aspects	Conflicts of Interest at Clinical and Professional Executive Committee are managed in line with the ICB Conflicts of Interest policy
Sustainability	N/A

ASSESSED RISK:

None

MONITORING AND ASSURANCE:

Recommendations will be monitored by the Clinical & Professional Executive Committee

ENGAGEMENT:

Individual clinical policies may be subject to engagement as part of their development

REPORT EXEMPT FROM PUBLIC DISCLOSURE No Yes

If yes, please detail the specific grounds for exemption



Clinical and Professional Update

1. INTRODUCTION

- 1.1. The Clinical and Professional Executive Committee met on 17th March and 21st April 2023. Three sets of clinical policies were discussed at these meetings: Continuous Glucose Monitoring, Health Optimisation and a suite of three Breast procedure policies.
- 1.2. In the intervening weeks the Clinical and Professional Group met and agreed actions on a range of topics including End of Life Care and the Yorkshire and Humber Care Record.

2. BACKGROUND

- 2.1. A subgroup of the Executive Committee (the Clinical Policy Review Group) has been established to review, assess, and prepare draft ICB clinical policies. As part of their development, draft ICB clinical policies are presented to the Clinical and Professional Executive Committee, for review and endorsement. Clinical policies also need to be endorsed by the ICB Quality Committee before they can be formally adopted by the ICB.
- 2.2. Meetings of the Clinical and Professional Group are attended by Clinical and Professional leads from across the ICB. A wide range of topics are presented to the Group including short term priorities and longer-term strategic developments.

3. ASSESSMENT

- 3.1. The Clinical and Professional Executive Committee has received three sets of clinical policies for review: Continuous Glucose Monitoring, Health Optimisation and a suite of three Breast Procedure policies.
 - 3.1.1. Continuous Glucose Monitoring: NICE Guidance has been updated to broaden access to Continuous Glucose Monitoring technology for individuals who have Type 1 and Type 2 diabetes. A draft policy has been developed, to supersede legacy CCG policies and respond to this NICE Guidance.
 - 3.1.2. Health Optimisation: A review has been undertaken of the effectiveness and appropriateness of the policy of health optimisation across the ICB area, which postpones referral for elective intervention for a certain period of time if a patient falls under certain criteria (e.g. they have a high Body Mass Index or are a smoker).
 - 3.1.3. Breast Procedures: A suite of three existing breast policies have been reviewed and revised draft policies developed for Male Gynaecomastia Reduction Surgery; Breast Prosthesis Removal; and Correction of Congenital Breast Asymmetry. These have been informed by the national Evidence Based Interventions (EBI) programme and the revised draft policies seek to harmonise discrepancies between legacy CCG policies.



- 3.2. The Clinical and Professional Group received presentations on the emerging Planned Care Strategy, Bowel Screening, Yorkshire and Humber Care Record, End of Life Care and the Maternal Medicines Network. Discussions have been rich and the meetings are proving a useful forum to inform emerging pieces of work, share learning and problem solve. Specific topics the Group will focus on and return to include:
- 3.2.1. End of Life Care: The challenges that hospices encounter with electronic prescribing were discussed and an action taken by Digital and Prescribing colleagues to identify solution(s). There was also a wide-ranging discussion about electronic care plans and how an individual's end of life care preferences are shared, accessed and updated across organisational boundaries. Members of the Group took an action to agree a consistent ICB approach to using Electronic Patient Co-ordinated Care Systems (EPaCCS) across all settings in the ICB footprint.
 - 3.2.2. Yorkshire and Humber Care Record: The Group were asked to inform its development, sense check whether any core priorities are missing from the plan and share their key priorities and immediate requirements for interactive care plans. An update on its development will return to a future meeting.
- 3.3. The Group will next focus on care homes, supported by a series of presentations outlining the challenges and opportunities facing this sector.
- 3.4. Beyond these key meetings, the Clinical & Professional Directorate has also made progress appointing to key roles and aligning teams/resources. Becky Bibby is the new Programme Director for Innovation, Research and Improvement System (IRIS). The Directorate's Clinical Effectiveness function is developing - appointments are being made to a small team which will have responsibility for scoping and leading this function. Links have also been made with the Quality Efficiency and Productivity programme, with an initial focus on Procedures of Limited Clinical Value.

4. CONCLUSION

- 4.1. The Executive Committee reviewed all three sets of draft clinical policies and were supportive of all, subject to further assessment of their financial impact and development of an implementation approach.
- 4.2. The Clinical and Professional Group will revisit the actions agreed at previous meetings; they will also continue to inform the development of key pieces of work.

5. RECOMMENDATIONS

- 5.1. Members are asked to:
 - i) Note the items discussed at the Clinical & Professional Group and Executive Committee meetings.
 - ii) Note the actions being taken forward by the Clinical & Professional Group and Executive Committee.
 - iii) Note the update on staffing within the Clinical & Professional Directorate