

**Meeting Report**  
**NHS Clinical Reference Board meeting**  
**RCN Head Office, 20 Cavendish Square, London W1G 0RN**  
**Friday 21<sup>st</sup> July 2017**

<b>Present:</b>		
<b>Chair</b>	Mandie Sunderland	Chief Nurse, Nottingham University Hospitals NHS Trust Chair, NHS Clinical Reference Board
<b>Board Members:</b>		
	Sandy Brown	Director of Nursing and Clinical Quality & Deputy Chief Executive, East of England Ambulance Service NHS Trust
	Dr Naomi Chapman	Clinical Programme Lead, NHS Clinical Evaluation Team
	Geraldine Cunningham	Associate Director of Cultural Change, Barts Health NHS Trust
	Rose Gallagher	Head of Standards, Knowledge and Innovation, Royal College of Nursing
	Professor Suzanne Hinchliffe	Chief Nurse/Deputy Chief Executive, Leeds Teaching Hospitals NHS Trust
<b>Apologies:</b>		
	Suzanne Banks	Chief Nurse, Sherwood Forest Hospitals NHS Foundation Trust
	Professor Greg Dix	Director of Nursing, Plymouth Hospitals NHS Trust
	Sally Fenwick	Dept of Health, CET Programme Manager
	Siobhan Heafield	Regional Nurse Director, Midlands and East, NHS Improvement
	Clare Linley	Director of Nursing, Leeds North CCG
	Michelle Norton	Director of Nursing, George Eliot Hospital NHS Trust
	Dee Roach	Executive Director of Nursing and Quality, Lancashire Care NHS Foundation Trust
<b>In attendance</b>		
	Simon Hall	Clinical Lead, NHS Clinical Evaluation Team
	Justine Henson	Communications and Engagement Lead, Department of Health (Part 5 only)
	Karen Hudson	Clinical Lead, NHS Clinical Evaluation Team
	Roger Kirkham	Clinical Lead, NHS Clinical Evaluation Team
	Marc Naughton	Clinical Lead, NHS Clinical Evaluation Team
	Liz Wright	Acting Clinical Products Lead, Department of Health
	Lisa Edwards	PA to Mandie Sunderland
<b>Customer Board Exec:</b>		
	Louise Hillcoat	Supplier Relationship Manager, NHS Business Services Authority
	Debbie Pacey	Stakeholder Coordinator, NHS Business Services Authority

#### **21/07/1 Welcome and introductions**

- 1.1 Members were welcomed to the meeting. Apologies were made for those unable to attend.
- 1.2 Particular welcome was given to Lisa Edwards, currently PA to the Chair, who is going on secondment to support the National Clinical Evaluation Team.

#### **21/07/2 Receive minutes from Clinical Reference Board meeting 19<sup>th</sup> May 2017**

- 2.1 The minutes were reviewed and agreed as a true record.

#### **21/07/3 Review minutes of National Customer Board Meeting 4<sup>th</sup> July 2017**

- 3.1 The Chair gave feedback from the National Customer Board.

#### **21/07/04 Action Report**

- 4.1 Action 3.7 - Greg Dix was unable to attend this meeting. The Chair advised that Ruth May is to meet the team on August 1<sup>st</sup> to update on the programme and therefore this action could be closed.
- 4.2 All other outstanding actions were addressed further on in the meeting.

#### **21/07/5 Future Operating Model (FOM)**

- 5.1 Justine Henson attended to give the Board an update on the implementation plan of the Future Operating Model.
- 5.2 Justine referred to a forthcoming call regarding the structure of procurement within trusts and agreed to send Roger Kirkham an invitation in order that the CPSN is represented.
- 5.3 Justine agreed to share the update and evaluation slides after the meeting and all members were asked to provide feedback on their usefulness and any suggested amendments.
- 5.4 Justine asked members to let her know if they have any outstanding questions or requirements for updates.
- 5.5 Rose asked that she and Justine align on messaging and terminology in order that clinicians have access to information in a format and language that is meaningful to them.

#### **21/07/6 Priorities 2017/18 and CRB project plan**

- 6.1 The 2017/18 priorities and workplan are currently being developed and will be shared with members once completed and approved by the NHSBSA.

#### **21/07/7 NHS Clinical Evaluation Team (NHSCET)**

- 7.1 Naomi updated the Board that the team has been integrated into the ICC design process and will be part of the directorate going forward. The governance of product assurance sits within the ICC but product evaluation will sit within the category towers.
- 7.2 Naomi advised that two new members have been appointed to the team, namely Colin Iverson and Joanna Davison and that recruitment is currently underway for 14 new team members to support the Nationally Contracted Product evaluation programme. Members were asked to share any expressions of interest with Roger Kirkham
- 7.3 Funding has been agreed for team members to be seconded with a contract that is valid for a period of 12 months, although due to the fluid nature of the transition period the actual period of the secondment may vary.
- 7.4 The ICC will be linked to the NHSI governance structure. The ICC directorate will include a product assurance director and all members of the directorate will be recruited from clinicians and will evaluate both clinical and non-clinical products. There will be a dotted line governance structure in place to all other clinicians within the ICC. Funding has been approved to go ahead with recruitment of the director and heads of clinical product assurance roles. Naomi requested input from key CRB members to support the interview process. Sandy and Suzanne agreed to look at their availability to support Naomi.
- 7.5 Rose asked for it to be noted that the progress of the influence of the CRB and CET has been both powerful and positive over a relatively short time. The position of the profession in the future

operating model is testament to the influence and change management skills of the CRB team members and Naomi Chapman in particular.

- 7.6 Suzanne Hinchliffe reported that she had attended a recent DOF meeting, where she felt some references to the nurse involvement in procurement were not clear and could be misconstrued to imply excessive resourcing in this field. Rose suggested that the paper explaining the value of clinical input to the procurement process within trusts should be reissued.
- 7.7 Rose Gallagher suggested that a celebratory event be organized pre-Christmas, to recognise the success and achievements of Naomi and the team. All were in agreement.
- 7.8 Naomi presented a draft paper discussing the possibility of a more rapid evaluation to support Trusted Customers and national savings programmes. The proposed process is based on the existing NHSCET evaluation process and offers a framework for Trusts to use for national clinical evaluation that falls outside of the NHSCET work plan. It was agreed that the Trusted Customer documentation should be included in the draft paper. Daran Devine to be asked for the updated version to be sent to Naomi Chapman.
- 7.9 Suzanne Hinchliffe asked that the indemnity position of each Trust should be considered if they are evaluating on a national basis. Naomi agreed that the liability question should be posed to the NHSBSA and clarification sought.
- 7.10 NHSCET reports have previously not been published until signed off by the CRB. Naomi asked the Board to consider whether the relative complexity of asking the whole Board to sign off the reports should be reviewed and suggested that a category specific member of the Board could be asked to take the responsibility to give final sign off the report. After discussion it was agreed that a robust governance process includes official sign off by the Board and should remain as the correct process.
- 7.11 It was agreed that a statement should be issued around how the NHSCET reports will be signed off for governance by the CRB.
- 7.12 The request for the NHSCET to expand the scope of the product portfolio, whilst not yet being formally requested, will be made in order to support the wider Carter requirement for nationally contracted products. Louise Hillcoat proposed that Naomi link into Paul West's working group to ensure that the assumption and expectations that are passed on from the procurement activities.

## **21/07/8 Progress with the Clinical Reference Board priorities**

### **8.1 Electrodes Clinical Evaluation – project update**

- 8.1.1 Marc Naughton gave the Board an update on the work he has done to date and highlighted some key patient safety issues that he have transpired as a result. Suzanne Hinchliffe asked that a list of “horror stories” be created to demonstrate the power of the clinical evaluation that will influence what an acceptable product specification should be.

### **8.2 Ambulance Service – Acute Sector standardisation project**

- 8.2.1 Sandy Brown gave an update on the progress of the programme and the memorandum of understandings that are being signed (update shared in pre-read). Sandy has had a very positive response to the electrodes programme across the East of England region. The programme is growing and resources are potentially stretched. Evaluation will take place in three months to identify the savings and behavior change that have taken place. Naomi has agreed to support Sandy with resources as required in order that the programme can continue to gather momentum.
- 8.2.2 The Chair asked the Board to recognize the superb work that Sandy has led and the revolutionary behavior change that has the potential to be rolled out nationally and to save the NHS millions of pounds.

### **8.3 Underpads Clinical Evaluation – project update**

- 8.3.1 Karen Hudson presented an update on the clinical evaluation that has taken place with Procedure Underpads. Engagement with suppliers, market experts and continence nurses, as well as attendance at the parliamentary briefing at the House of Lords, has enabled Karen to

engage with a wide range of experts and key stakeholders to ensure that the report will be fully comprehensive.

- 8.3.2 Rose asked whether the published concern that recycled cellulose could be a trigger for fungal growth has been considered in the report. Karen confirmed that it has, although recent research has not highlighted the issue.

#### 8.4 **Summary of recent engagement with the nursing community and active networks**

- 8.4.1 Rose Gallagher gave an update and reported with regard to the 'small changes, big differences' project, a communications lead has been appointed and is making changes to the website to make it more user-friendly
- 8.4.2. A Facebook page has been launched for the procurement network members, but non-members are also welcome. 32 people have so far joined the Facebook page.
- 8.4.3 Rose is working with Louise Hillcoat to produce a document giving a headline summary of current procurement programmes, for use by directors of nursing as a resource tool.
- 8.4.4 Rose reported that she has been in discussions with Samantha Baker at NHS Supply Chain regarding traffic light stickers for use on products supplied via the national route, and to highlight the relative cost of those products.
- 8.4.5 The GS1 work is continuing.
- 8.4.6 Rose has been asked if the RCN would consider being involved in developing educational standards for clinical procurement practitioners which would be instrumental in protecting nurses who are involved in procurement. A one day economic assessment course will be held on 13<sup>th</sup> October and Rose agreed to share the information with the Board.
- 8.4.7 Geraldine referenced a game that demonstrates the value of using clinical input to procurement. She agreed to share details with the Board.
- 8.4.8 The Chair reported that she will be speaking at the NHSI conference in September

#### 8.5 **Partnership with AUKUH**

- 8.5.1 Simon Hall reported that AUKUH have been very supportive.
- 8.5.2 Simon updated the Board that he needs 400 volunteers to test adhesive foam dressings and asked the members to support with trials. The Chair offered people within her Trust and Louise Hillcoat suggested that NHSBSA office staff could support. Liz will also ask DH employees. Simon will contact the various organisations and give details of what the trial would entail.
- 8.5.3 Rose suggested an RCN guide to supplement the work that Simon is doing would be helpful. This will be picked up when Simon and Rose meet on 3<sup>rd</sup> August.

#### 8.6 **GS1 Activity**

- 8.6.1 Suzanne Hinchliffe gave an update and reported that all wristbands in her Trust (Leeds Teaching Hospitals NHS Trust) are now GS1 compliant and that work is being conducted on the wristbands to ensure patient comfort.
- 8.6.2 Suzanne reported that her Trust has introduced the scan code on each hospital location and products are being tracked from point of receipt through to use. Suzanne reported that various sites across Yorkshire are now live for Scan4Safety and that the programme is being rolled out across the region, with constant monitoring of the cost and time benefits.
- 8.6.3 Suzanne reported that the The product recall process is savings £164 for each field safety notice that is published.
- 8.6.4 The Trust set up a model scan enabled ward for one week and used it as a tour/training demonstration as to how Scan4Safety works throughout the hospital.

8.6.5 The Chair asked whether a future meeting could be held at the new headquarters of GS1 and Debbie Pacey agreed to liaise with GS1 to arrange this once 2018 dates have been agreed with the Chair.

**21/07/9 Any other business**

9.1 Louise Hillcoat referenced NHS England's Expo 2017 conference on Innovation and asked whether members would be interested in attending. The Chair suggested that the CRB would not be an interested audience.

**21/07/10 Close of meeting**

10.1 The Chair brought the meeting to a close and thanked everyone for their attendance. The next meeting will be held on Friday 15<sup>th</sup> September at the Novotel Manchester City Centre, 21 Dickinson Street, Manchester, M1 4LX