

Palliative Care Board – Minutes of Meeting

10th February 2015

Location: 3 Piccadilly Place, Manchester M1 3BN in Mersey A, located on the 3rd floor

Time: 4:30 - 6pm

Attendance	Representation
Carole Mula	Pathway Director
Wendy Allen	Patient Lead
Margaret Hayes	Macmillan Team leader, Tameside
David Waterman	Consultant in Palliative Medicine Stockport NHS Foundation Trust
Sophie Harrison	Consultant in Palliative Medicine UHSM
Alice Davies	Macmillan Associate Lead Cancer & Palliative Care Nurse PAT
Hodan Noor	Pathway Manager
Phil Lomax	Consultant in Palliative Medicine, SRFT/Medical Director St Ann's Hospice
Anne-Marie Rafferty	Team Leader & CNS Palliative Care, The Christie
Fran Mellor	Macmillan Associate Development Manager
Elaine Parkin	SCN
Ursula Haworth	AHP CMFT
Jenny Wiseman	Consultant in Palliative Medicine WWL
Ashique Ahamed	Consultant in Palliative Medicine CMFT
Stephanie Gomm	Consultant in Palliative Medicine SRFT
Robin Muir	Clinical Psychologist, Bolton FT
Julie Whitehead	Macmillan Pharmacist, East Cheshire NHS Trust
Apologies	
Iain Lawrie	Consultant Lead Clinician for Specialist Palliative and End of Life Care, PAT
Barbara Downes	Medical Director/Consultant in Palliative Medicine Bolton Hospice
Kimberley Steel	Consultant in Palliative Medicine Bolton FT
Jennifer Gallagher	Macmillan Palliative Care team Leader WWL FT

Agenda Item	Action
<p>1. Apologies/ welcome and Introductions Apologies were noted.</p>	
<p>2. Minutes from the last meeting</p> <p>Minutes from 27th September November amendments; Anne-Marie Rafferty Team Leader & CNS Palliative Care, The Christie and Fran Mellor, Macmillan Associate Development Manager were in attendance. Elaine Parkin, SCN is a formal member of the board.</p>	
<p>3. Matters arising</p> <p>Innovation Fund – Patient Knows Best CM updated members the initial opportunity to bid for EPaCCS interoperability system for St Ann’s Hospice and Christie through the innovation fund. Patient Knows Best was the proposed system to use. The Christie was not at a stage to support the bid as the organisation is currently developing a specification for patient held record. St Ann’s was given the opportunity to take this application forward independent of Christie however due to imminent deadline it was not feasible for the organisation to commit without a detail scope of support. However, St Ann’s have submitted an application to The Health Foundation. This engagement has also encouraged further discussions at The Christie to begin identifying solutions to engage with EPaCCS. EP updated members that the project lead for EPaCCS is link to the developments of solutions across the area and is also developing an integration system to enable all systems to view records. PL raised there will be issues with regards to the level of information uploaded when using Patient Knows Best System as Trust’s will need to determine what levels of data will be shared.</p>	
<p>4. Annual plan 2015/16</p> <p>CM informed members to begin thinking about our work programme for the coming year to discuss at the next meeting.</p>	
<p>5. Annual report 2014/15</p> <p>Last year the annual report was written by CM and HN due to short notice and the formation of the board. This year CM will approach members to contribute. CM updated members that the annual report will be submitted in June to describe the progress the board has made to Manchester Cancer. A template is currently being developed which HN will share once finalised.</p>	<p>HN to share Annual report template with members.</p>
<p>6. Objective 1- Improving outcomes/survival rates</p> <ul style="list-style-type: none"> - MDT working <p>CM updated members that MDT mapping was undertaken to measure specialist palliative care attendance at site specific MDTs as per the core requirements under peer review. The findings including gaps in attendance will be submitted to the provider board. DW requests that once the information is collected, regional and local MDTs should be separated and highlighted.</p>	<p>HN to make relevant changes on MDT working.</p>
<p>7. Objective 2- Improve Patient Experience</p> <ul style="list-style-type: none"> - EPaCCS <p>HN updated members that EPaCCS training templates have now been received from the project lead, a press release has been agreed with the SCN which will be uploaded on the</p>	<p>HN to include DW recommendations into the press release</p>

<p>website. DW has request to include a statement “if you would like further information with regards to EPaCCS please contact your local palliative care team”.</p> <p>CM updated on the System Thinking workshop with regards to developing EPaCCS there is currently a report and resources available from the AHSN, however there will be a cost attached.</p> <ul style="list-style-type: none"> - 7 day working mapping <p>A report was written by members and all the comments have been received, the first action is to give recommendations to Manchester Cancer. The three pieces of work currently in relations to mapping capacity, (1)MDT working (2) 7 day working (3) specialist palliative care support, once all three documents are completed a clear recommendations can be develop to Manchester Cancer on the provision needed to deliver palliative care. DW suggested to also include the regional data mapping of SCN scoping SPC services and its provision. Members queried Macmillan to identify nursing cover recommendation with regards to population and need. FM proposed to query this information. Final report will be included in the annual report in June.</p> <ul style="list-style-type: none"> - MDT & SPC capacity mapping <p>This tool is currently out for completion using the item 6 template.</p> <ul style="list-style-type: none"> - LW&BC & PC subgroup update <p>CM updated members on a questionnaire by the sub group for people Living with Cancer to identify the needs of patient and carers as well as map against the Recovery Package. Members felt this would be a useful questionnaire for all patients living with cancer. CM confirmed once this cycle is completed for the sub group there is an opportunity to use for all patients. Currently the tool will be used as a face to face interview / focus groups of patients and carers attending hospices and patient information centres.</p>	<p>CM to share the report with members</p> <p>FM to identify nursing workforce recommendation for palliative care cover.</p> <p>CM to share the questionnaire with members.</p>
<p>8. Objective 3- Research and clinical innovation</p> <p>Clinical Trials update – The NIHR team in Manchester will be using The Open Data Platform (ODP). The ODP integrates multiple data-sets in one place connecting research by bringing monitoring and performance data together. It currently provides secure access to study and recruitment information from Clinical Research Network Portfolio as well as key data from the Coordinated System for Gaining NHS Permissions (CSP). Each pathway will receive a yearly report with national comparisons and a quarterly report during the year. New plan is currently being developed by the new Research Manager Sue Dyde, in engaging research leads and nursing representatives. HN will be attending the Research Team meeting attended by Research Nurses across the Greater Manchester Trusts on the 2nd March.</p> <p>SG queried if the nurses attending the research meeting are specific to palliative care research or by Trust. HN confirmed to investigate if there are dedicated palliative care research representation and report back.</p>	<p>HN to identify research nursing representation focused on palliative care.</p>
<p>9. Objective 4- Improving and standardising high quality care across the whole service</p> <ul style="list-style-type: none"> - Manchester Cancer Education Briefing for information - MCIP palliative care education programme <p>MCIP has commissioned the school of oncology who have approached the board to deliver palliative care education for GPs and practice staff across Manchester. 92 practices have signed up to two half day sessions. The training is centred on acute oncology and palliative care. DW proposed Manchester Cancer to share the education plans once developed outside</p>	

<p>of MCIP project. HN proposed to record this education session virtually, members agreed this is good option. CM also informed members of the development of a closer relationship with the Acute Oncology board to deliver a joint education programme for specialist nurses and AHPs.</p> <ul style="list-style-type: none"> - Palliative Care minimum standards <p>CM shared with the group the agreed action to develop palliative care minimum standards for cancer patients. An initial draft was tabled for discussion; the final version will be included in the annual plan.</p> <p>These standards will help to develop guidelines for the Manchester cancer boards to encourage engagement in palliative care.</p> <p>Discussion included the development of an overarching education section and minimum standards for specialist palliative care referencing NICE end of life care standards, CQC areas of inspection around end of life care and links to priorities of care in the last days of life.</p> <p>EP will share Lancashire Stroke pathway which has been developed incorporating generic palliative and end of life care.</p> <p>DW proposed to highlight a small task for the pathway boards that will help to generate a work programme in their respective annual plans with timelines. E.g. distribute the 5 care priorities documents against which progress can be measured.</p> <p>CM will work with leads of the SCN special interest groups to develop the specific standards.</p>	
<p>10. AOB Manchester Cancer Website – Support groups and Charitable organisations</p> <p>CM share with members that a new section has been included in the palliative care page to upload charitable organisations and support groups to showcase the support available for patient and carers outside of the generic health service provision.</p> <p>DW proposed to include a list of Hospices. Members discussed the need for support groups to be uploaded, however this potential would create a management of information task to ensure this information is accurate. Thus there needs to be further thought on the benefits of publicising support groups and how this information could be managed with the existing operational resource of Manchester Cancer.</p>	
<p>Date and time of next meetings;</p> <p>Tuesday 17th March, 3.00-4.30 Dining Hall, St Ann’s Hospice, St Ann’s Road North, Heald Green, Stockport SK8 3SZ</p> <p>Thursday 21st May , 4.30-6.00 Venue to be confirmed</p> <p>Tuesday 14th July , 3.00-4.30 Humphrey Booth Lecture Theatre 1, Mayo Building, Level 1, SRFT</p> <p>Thursday 24th September 4.30-6.00 Venue to be confirmed</p> <p>Tuesday 24th November 3.00-4.30 Seminar Room 1, Mayo building, Salford Royal Foundation Trust</p>	