

TRUST LEADS BOARD MEETING

Minutes of the meeting held on
11th May 2015, Seminar Room 6, SRFT

In attendance:

Name	Trust
Tom Pharaoh (TP)	Manchester Cancer
Adrian Hackney (AH)	Trafford CCG
Fiona Noden (FN)	WWL (representing Director of Ops)
Alison Dalton (AD)	Pennine
Alison McCarthy (AM)	Pennine
Julie Emerson (JE)	Christie/Salford
Hodan Noor (HN)	Manchester Cancer
Melissa Wright (MW)	Manchester Cancer
James Leighton (JL)	Manchester Cancer
David Wright	Christie
Lisa Galligan-Dawson (LGD)	Bolton
Simon Hargreaves (SH)	Bolton
Maryna Lewinski (ML)	Stockport
Laura Elliott (LE)	CMFT
Louise James (LJ)	UHSM
Pat Jones (PJ)	CMFT
Caroline Culverwell (CC)	Stockport
Dominic McGaw (DM)	SRFT
Janet Irvine (JI)	WWL
Ann Dingle (ADi)	Mid Cheshire
Janet Keegan (JK)	Bolton
Ian Welch (IW)	UHSM
Anthony Blower (AB)	Christie
Julie Fletcher (JF)	WWL
<i>Jane Ashworth</i>	<i>Manchester Cancer (Minutes)</i>

AGENDA ITEM

1. Welcome and introductions

2. Minutes of the last meeting on 12/03/2015

The minutes were agreed to be an accurate record.

Matters arising

Section 3ii, 'Update on Cancer Manager Breach Analysis', an Action was minuted for MH to 'Audit Patients referred to Robot'. As MH was unable to attend the meeting this action

will be reviewed at a later date.

Section 4, ML's proposal to form radiology group.

ML informed the Board that early discussions have taken place with radiologists and how a radiology group might look. There is currently a radiology representative on each Pathway Board which could be brought together to form a radiology group.

FN asked whether specialist radiographers were being considered as potential members of the radiology group. There was a discussion of this. AB suggested that a similar pathology group may be required. TP noted that if a radiology group is formed, then this model could then be applied to other groups as necessary.

CWP Update

TP informed the Board that Manchester Cancer have agreed with The Christie to jointly fund a part time Programme Manager post and to formalise the project board. The project board will also investigate the potential upgrade to Somerset.

ACTION: MC to update when Project Board established

3. Cancer Waiting Times Pathways

i. Action Plan

The action plan was noted. TP to bring revised version to future meetings and outline any updates

ii. Draft Cancer Validation Policy

LE presented the draft policy to the Board. She explained that the Cancer Managers had worked together and used their existing trust policies as a basis for the new draft validation policy.

The Board heard that the draft policy had been presented at the Director of Operations meeting and had been agreed to 'in principle'. The Board heard that the proposed policy would need to be signed off and accepted by commissioners and the Manchester Cancer Provider Board.

There was some discussion of the detail of the draft and LE took away some amendments that would clarify the policy.

ACTION: LE to amend draft validation policy

There was a discussion around agreeing standard waiting times for diagnostics across the region. The Board heard that the Cancer Managers had been working with the Director of Operations group to understand current waiting times and draft an agreement ('DERP').

FN noted that there was a Director of Operations meeting on Friday 10th July and that the cancer managers would be expected to produce this work by then.

The Board heard that 62-day performance would remain a standing item on the agenda.

4. Peer Review briefing

TP introduced the briefing document that had been widely circulated. No members raised any concerns and no changes or clarifications were requested. TP confirmed that following negotiation with the national team the Peer Review deadline had been extended to 17/07/2015.

AM told the Board that the Lead Nurse Group have met with Louise Wilson (Peer Review) and have been advised that the Peer Review process is to change in 2016. Some members suggested standardising the approach to validated self-assessment across the region.

TP suggested discussing this in a separate forum to discuss the above once the new Peer Review process for 2016 has been established.

ACTION: MC to organise Peer Review forum once 2016 changes are announced

5. Videoconferencing survey results

TP introduced a paper that detailed the responses from pathway board members to the recent video conferencing survey. The Board heard that over 40 responses had been received.

The Board discussed the results and noted that there was no real pattern and no case for a regional project on videoconferencing. It was suggested instead that Trust Leads should present the results for their own organisations to their own trusts and use this to help solve problems locally.

6. 5-minute updates

ML – Clinical Leads

Covered previously.

AM – Lead Cancer Nurses

The Board heard that the Lead Nurse Group was currently looking at the following:

- a) work programme
- b) objectives of lead cancer nurses
- c) integration with primary care
- d) succession planning for CNSs
- e) LW&BC Recovery Package

FN – Director of Operations

Covered previously.

Cancer Managers

Covered previously.

JE – AHP Group

JE reminded the Board of the AHP event 'AHPs have Got Talent' on 15th June at The Christie:

- <http://www.christie.nhs.uk/school-of-oncology/education-and-training/education-events/150615-ahps-have-got-talent.aspx>

JE told the Board that the group is engaged in lymphoedema work linked to MCIP and are also looking at the issue with the ageing workforce in lymphoedema.

Adrian Hackney – Cancer Commissioning Board

AH provided the Board with an update on Devo Manc and explained that the Cancer Commissioning Board has suggested that the Programme Board for Devo Manc to make Cancer Care one of its priorities.

7. Other Manchester Cancer issues and updates

Endoscopic ultrasound survey

TP informed the Board that the HPB Pathway Board is conducting a survey regarding endoscopic ultrasound and asked for the support of trust leads in this.

Out of hours MRI for MSCC

TP noted that the Pathway Clinical Director for Acute Oncology had raised the issue of patchy out-of-hours access to MRI for suspected MSCC. Board members noted that this was an issue for some trusts. There was a discussion of how this could best be addressed. It was suggested that it was the pathway board itself that was in the best position to lead this work to improve this.

8. Any other business

AM asked for clarity regarding the staffing numbers outlined in the draft acute oncology specification that was considered at the recent Provider Board meeting. AH clarified that the status of the draft service specification. It was noted that any changes should be directed through the acute oncology pathway board.

9. Date and time of next meeting

Thursday 16th July, 2.30-4pm
Seminar Room 1, Mayo Building, SRFT