

Actions of the meeting held on
Friday 28 November 2008, 09:30

Yorkshire Cancer Network

St Gemma's Hospice

Present:

Mr J Ausobsky (Chair)	Bradford Teaching Hospitals NHS Foundation Trust
Mr J Griffith	
Ms L Booth	Harrogate and District NHS Foundation Trust
Mr D Leinhardt	
Mr S Ambrose	Leeds Teaching Hospitals NHS Trust
Ms J Crossley	Mid Yorkshire Hospitals NHS Trust
Ms C Parchment-Smith	
Ms K Pogson	NHS Bradford & Airedale
Ms C Holman	User Partnership Group
Mrs L Cooper	Yorkshire Cancer Network
Mrs C Ferguson	

Apologies

Dr J Hornsey, Ms P Pickersgill

2. Action Log from the last meeting			
Log No	Action	Lead(s)	Deadline
22	The Action Log from the last meeting was agreed as accurate record.	N/A	N/A
3. Matters arising			
3.1 Membership			
Log No	Action	Lead(s)	Deadline
23	<p>Mr Ausobsky commented that the group only met twice per year and that attendance was very variable and of some concern. A presentation given to the board on the 1st October by Mr Ausobsky and Mr Harrison was well received and the group received a clear mandate from the board that the work of the group should continue.</p> <p>Carol Ferguson fed back that there had also been generic discussion regarding NSSG's at the November board meeting and that it had been agreed that the colorectal group should be a pilot – to commission a colorectal pathway.</p> <p>It was therefore agreed that the group should move forward with the work, using today's meeting to define a forward work programme. This would provide a tool for commissioners to enable them to face the challenge of 'world class commissioning'.</p> <p>ACTION: To draft a letter to be sent out to all colorectal leads, reminding them that the groups work has been ratified by the board and that they will be guiding the processes that need to be put into place. These meetings are therefore their opportunity to be involved in the pathways that will be commissioned.</p>	J Ausobsky & C Ferguson	19/12/2008

3. Matters arising			
3.3 STT monitoring - Mr Griffith's update			
Log No	Action	Lead(s)	Deadline
24	<p>Mr Griffiths gave an update on a retrospective review that had been undertaken of direct referrals (excluding fast tracks and 'choose& book') over a 6 week period. Of the 141 referrals audited, 30% could have bypassed an outpatient appointment and gone straight to a flexible sigmoidoscopy clinic. As a result of the review a recommendation has been made for a further flexisigmoidoscopy clinic to be provided in the New Year. The rationale for this is both to help the Trust meet 18 week targets and to attempt to provide a level playing field for those patients not referred via the 2 week wait rule.</p> <p>Discussion followed regarding the role of the group in ensuring that sufficient resources were made available for the development of one-stop clinics and that PCT's supported this. It was agreed that it was inappropriate that different pathways should exist across the network and that it is their role to see that as efficient a service as possible is both developed and commissioned. It was agreed that a fragmented service is both less cost effective and less safe.</p> <p>Carol Ferguson reiterated that it is the work of the group to both inform the board of their aspiration to shorten the initial contact time for patients and explain what it would take to do this.</p> <p>ACTION: To facilitate discussion with PCT's about extending existing STT policy beyond colorectal 2WW referrals.</p>	C Ferguson	19/12/2008
4. Harrogate STT process			
Log No	Action	Lead(s)	Deadline
25	<p>David Leinhardt presented the work that Harrogate had undertaken broadly following the 'Leicester Model' for STT.</p> <p>ACTION: To obtain & circulate DL's presentation</p>	L Cooper / L Carroll	19/12/2008

10. Any Other Business			
Log No	Action	Lead(s)	Deadline
26	<p>Work Programme</p> <p>It was agreed at this point to defer the remainder of the planned agenda and to concentrate on the work programme for the next 12 months.</p> <p>The work programme for the next 12 months was agreed as follows:</p> <ol style="list-style-type: none"> 1.To develop methods of quality control and management of pathways 2.To develop a method of costing & commissioning the agreed pathways <ol style="list-style-type: none"> 1. Starting with the colon cancer pathway: Quality criteria <p>There was initial debate about quality of GP referral – but it was agreed to put this issue to one side, but to list GP education as an urgent need.</p> <p>Criteria 1 – User & Patient Experience Survey This was acknowledged as being currently under development and agreed as a measurable criterion.</p> <p>Criteria 2 - % patients presented at an IOG compliant MDT before primary treatment. This was agreed as a measurable criterion – but the wording should be changed to ‘100 % of elective patients.’</p> <p>Criteria 3 – 100% of patients submitted to the Cancer Registry dataset. Outcome data submitted to NBOCAP and the live use of the database when available. This was agreed as a measurable criterion.</p> <p>Criteria 4 – A range of network audits that will be specific to the colorectal pathway (e.g.’s listed). It was suggested that “returns to theatre within 5 days” should be changed to “readmission or returning to theatre within 30 days”. “AP rates” is not applicable to colon pathway.</p> <p>To Add – Criteria 5 - % patients whose surgery was performed laparoscopically</p> <p>A small change to the pathway wording was also agreed as necessary: “FOXROT trial considered” to be changed to “clinical trials considered”.</p> <p>ACTION: Carol Ferguson to speak to Jon Ausobsky about additional reference to management of emergencies.</p>	C Ferguson & J Ausbsky	19/12/2008
27	<p>ACTION: Alterations to pathway / quality criteria to be made and pathways redistributed to group.</p>	L Cooper	19/12/2008
28	<p>ACTION: Members of group to feedback on other paths re: quality criteria prior to next meeting</p>	All	19/12/2008
29	<p>► Costing pathways</p> <p>The group wished to advise the network that a research project be developed to pursue this.</p> <p>ACTION: Jon Ausobsky or Simon Ambrose plus John Griffiths to put together a proposal for the network to consider.</p>	J Ausobsky, S Ambrose & J Griffith	19/12/2008

10. Any Other Business			
Log No	Action	Lead(s)	Deadline
30	ACTION: Jon Ausobsky asked the group if they agreed to him submitting the pathways as a poster to the ACP (subject to there being sufficient time remaining for submissions). This was agreed.	J Ausobsky	N/A

Date of Next Meeting

To be scheduled