

**YORKSHIRE CANCER NETWORK AND
HUMBER & YORKSHIRECOAST CANCER NETWORK
Haematology Group**
Minutes of the meeting held on
Friday 30th September 2005, 2.00pm
YCRN Room 1, Ida Nurses Home, Cookridge Hospital

Present:	Dr A Cuthbert	Airedale NHS Trust
	Dr J Czynz Dr A Steed	Calderdale & Huddersfield NHS Trust
	Dr A G Bynoe	Harrogate and District NHS Foundation Trust
	Dr R Patmore (Chair)	Humber & Yorkshire Coast Cancer Network
	Dr D Bowen Ms R Copland Dr M Gesinde Dr B McVerry Dr G Smith	Leeds Teaching Hospitals NHS Trust
	Ms D Barker Dr M Chapple Dr D Wright	Mid Yorkshire Hospitals NHS Trust
	Dr L Bond Dr M Howard	York Hospitals NHS Trust
	Miss L Carroll Mr P Melling Mr B Tinkler Mr D Thomson Ms J Toovey	Yorkshire Cancer Network

1. Apologies

Apologies were received from Dr S Ali, Dr Allsop, Dr C Carter, Dr G Cook, Dr D Gilson, Dr C Hall, Dr R Johnson, Ms H Mitchell, Dr L Parapia and Dr M Shields.

2. Minutes of the last meeting

The minutes of the last meeting were agreed as being an accurate record.

3. Matters arising

- **Haematology provision at Calderdale and Huddersfield NHS Trust**

Dr Steed reported that no formal local MDT is taking place at Mid Yorkshire NHS Trust and noted they have been declined HMDS MDT support. Dr Patmore explained that due to limited resource available HMDS are only able to support MDTs able to meet the Quality Measures for the Manual of Cancer Services i.e. an MDT supporting a population of 500,000. As a stand alone MDT at Mid Yorkshire NHS Trust would not comply with the guidance due to population size, HMDS is therefore not able to support their MDT. The importance of Mid Yorkshire NHS Trust attending the Leeds MDT in conjunction with a local MDT to facilitate patient care in Calderdale and Huddersfield (as agreed in the action plan) was emphasised.

- **Neck Lump Clinics**

Members discussed the referral process of patients with neck lumps in their organisation and how this affects the CWT targets.

4. Cancer Waiting Times

Mr Tinkler presented the latest figures for the 14 day 31 day and 62 day CWT targets. He informed members that 31 day target needs to be met for 98% of patients and the 62 day target for 95% of patients. The targets go live from the beginning of December 2005.

Mr Melling informed members that weekly monitoring of CWT has been superseded by Priority Target Lists (PTL) and these are being submitted to the SHA on a weekly basis.

Mr Melling explained that a recent change in way breaches are allocated would apply to 62 day patients beginning for patients treated in September. Where patients are seen in one Trust and treated in a different Trust the new report will share responsibility for meeting the target. If these patients breach the target then this will also be shared between the two organisations.

5. Regional Guidelines

Following the review day that took place on Friday 1st July 2005 amendments will be made to the guidelines prior to circulation for final approval.

6. Peer Review

Mr Tinkler reported that a hard copy of the published Haematology Measures has been received. National discussions are taking place to determine whether these measures will be reviewed in a phase 2 of the Peer Review visit or in the second round of Peer Review visits (anticipated date April 2007).

7. Report from Network audit meeting

Dr Patmore gave feedback from the Network audit meeting that took place on 2nd September 2005. Richard James will be presenting the first year of data from the database at the next meeting taking place on Friday 16th December 2005.

The monitoring of minimal disease in the community programme is commencing in Leeds, Wakefield and York.

8. HMDS support for MDTs

Although HMDS does not currently have the capacity to increase MDT support it is anticipated that fortnightly MDT's will move to weekly. Members discussed the possibility of these meetings increasing even though they may not be pathologist attendance at each meeting. It was noted that one of the quality measures states members of a MDT must attend at least 50% of the meetings.

A group discussion took place on MDT meetings taking place via video conferencing. Mr Tinkler highlighted that the Pathology Modernisation sub group is currently looking at digital monitoring across West Yorkshire.

9. Any other business

- Dr Patmore informed members of the YCN Infection Educational event taking place on Friday 4th November 2005 at the Pavilions of Harrogate.
- Mr Sean Duffy has been appointed as the Medical Director of the Yorkshire Cancer Network and will be commencing employment 1st November 2005.
- Mr Thomson ensured members had received the draft YCN Chemotherapy Group guideline for the use of Erythropoietin in Chemotherapy related anaemia as part of an Emergency Blood Management Arrangement and summarised the content of this.

- Dr Patmore prompted a group discussion on HRG tariff charging. The amount of money recouped is dependent on the coding submitted. Dr Patmore emphasised the importance of colleagues overseeing what coding is being used. Mr Melling suggested they produce a list of frequently used codes. Dr Smith reported that a national group are undertaking work to produce a version of HRG's for haematology and therefore from 2008 a HRG will reflect the disease group making this process more accurate.

Mr Tinkler highlighted that there is a national drive for all hospital Trusts to fast track to foundation status by 2008 (West Yorkshire 2007).

- Dr Smith reported that the AMN 107 trial is commencing shortly and asked colleagues if they had any appropriate cases i.e. blast crisis and accelerated phase patients to inform him.
- Dr Bowen informed colleagues of the European Revlimid trial. He asked colleagues who have patients with 5q deletion or 5q deletion and an additional cytogenetic abnormality and transfusion dependent willing to participate in this study to inform him.

10. Date of next meeting

Friday 16th December 2005, 2.00pm
YCRN Meeting Room 1, Ida Nurses Home, Cookridge Hospital
(Lunch will be provided from 1.30pm)