

YORKSHIRE CANCER NETWORK

Head & Neck Group Meeting

Minutes of the meeting held on
Monday 22nd March 2004
YCRN Conference Suite, Ida Nurses Home, Cookridge Hospital

Present:	Ms H Berry	Bradford Teaching Hospitals NHS Trust
	Dr M Kellett	Leeds Dental Institute
	Ms S Cameron	Leeds Teaching Hospitals NHS Trust
	Dr C Coyle (Chair)	
	Dr K MacLennan	
	Mr TK Ong	
	Dr M Sen	
	Ms J Hoole	Mid Yorkshire NHS Trust
	Mrs S Fisher	University of Leeds
	Mr P Whitfield	York Health Services NHS Trust
	Miss H Lamb	Yorkshire Cancer Network
	Mr B Tinkler	
	Ms C Sleigh	Yorkshire Cancer Research Network

1. Apologies for absence

Professor M Baker, Mr Z Makura, Mr P Melling, Mr D Mitchell, Dr B Nattress, Mr S Sood and Mr S Worrall.

2. Minutes of the last meeting

Were agreed as being an accurate record.

3. Matters arising

• GP Notification of Diagnosis

Dr Coyle explained that at the last meeting the Mid Yorkshire GP notification form was accepted by the group. Dr Coyle highlighted that the form should be implemented in all units across the Network.

Action: All units to implement form in clinics, circulated to group previously.

• Staging Form

Dr Coyle asked members if they had all received copies of the staging form. Dr MacLennan asked for a set of forms to be sent to Pathology at Leeds.

Action: Dr Coyle to forward staging forms to Dr MacLennan.

• Management of ORN

Mrs Fisher highlighted that the system is working well. There has been a problem with transport, which should be addressed at a strategic level.

4. Leeds Dental Institute

Dr C Coyle introduced Dr M Kellett, Dean and Director of Leeds Dental Institute (LDI) to the group.

Dr Kellett gave a presentation regarding 'The Vision for the Future of Leeds Dental Institute'.

A discussion followed. Dr Coyle highlighted that a consultant business case to support the management of primary dental care was previously submitted to various board members and members of management with no support. Dr Kellett agreed to take the business case to the LDI Board on behalf of the group.

Action: Dr Coyle to forward consultant business case to Dr Kellett.

4. NCRN Update

Dr MacLennan and Mrs Fisher Updated the group on NCRN trials. Mrs Fisher tabled a paper regarding 'NCRI Head and Neck Clinical Studies Group'.

Dr MacLennan highlighted the first randomised trial comparing endoscopic surgery and radical radiotherapy for early stage cancer was announced. Leeds will be co-ordinating the pathology. A patient consent form has been drafted.

It was noted that there was no progress to report regarding NTRAC.

The next NCRI Clinical Studies group will take place on Friday 26th March, when updated protocols will be considered.

5. Recording of MDT Decision in the Notes

Dr Coyle highlighted that following the pilot Peer Review at Leeds there was concern regarding how the MDT decision was recorded. It was noted that different methods are adopted across the Network:

Mr Tinkler highlighted that work could be carried out on this once the standards are produced.

Dr Coyle suggested that the MDT decision and proposed treatment of the patient could be dictated into the Cookridge notes.

6. Update on Patient Information Project

Ms Julie Hoole, Head and Neck Nurse Specialist from Mid Yorkshire NHS Trust introduced herself to the group.

Ms Hoole tabled a paper on the Yorkshire, North Trent and Humberside Head and Neck Specialist Network-Patient Information 'Update' and explained that the topics to be addressed in the leaflets are nutrition, dysphagia, mouth care post surgery, nose/sinus cancer, ear cancer, parotid cancer, and neck dissection and scar management.

Progress has been slower than anticipated. Only three leaflets have been completed, two are with patient groups and three remain with local teams. Other topics are being developed alongside these.

Ms Hoole highlighted that the patient groups have been a difficulty. A meeting will take place in April and it was suggested that the outstanding patient information leaflets should go through the Yorkshire Cancer Network User Partnership Group.

Ms Hoole highlighted that Trusts across the Network have different patient information protocols. Mr Tinkler advised Ms Hoole to contact Ms M LeBeau, Yorkshire Cancer Network User Facilitator. Once the patient information has been approved it will go onto the Network website.

Action: Ms Hoole to contact Ms M LeBeau.

7. GP Communication – How to audit?

Dr Coyle asked the group for ideas for a Network audit. An audit regarding GP communication was suggested, Ms Fisher confirmed that this had already been carried out within the last two years for oral cancer.

Dr MacLennan highlighted that Dr Carey and Dr Swift are reviewing the radiology and histopathology of the neck and rates of positivity of picking up lymph nodes.

Dr Sen suggested carrying out a prospective TNM Staging Audit for the Network. An in-depth group discussion followed.

Mr Tinkler suggested an audit of GDP and GP referrals. Mr Whitfield highlighted that York are carrying out a Head and Neck fast track audit on referrals and their appropriateness, results will be fed back to the PCT's. There will be a pilot project in practices with electronic facilities.

Action: Dr Sen to draw up audit proforma and discuss with relevant parties regarding prospective staging audit.

8. Update on DAHNO

Ms Helena Berry, Cancer Services Data Manager at Bradford updated the group on DAHNO on behalf of Mr Melling.

Ms Berry highlighted that the early adopter phase of DAHNO started in early October 2003 and finished on 30th January 2004. Across the country seven networks signed up as early adopters for DAHNO. Two of the Networks were unofficial early adopters which included the Yorkshire Cancer Network.

Evaluation forms have been submitted (of the seven networks only four submitted evaluation forms) and an official evaluation report has been received outlining the following key themes of the early adopter phase:

- Difficult installation process.
- Lack of expertise in lotus notes (DAHNO software), no guidance regarding structure.
- Problems in collecting some of the data items.
- Transfer of data between Trusts, more work is required on this.

Ms Berry informed the group that Bradford was the only site that submitted the evaluation. York is now inputting data. Ms Berry has liaised with Mr M Waugh at Leeds to discuss the DAHNO strategy, Leeds will not support the use of lotus notes as they are not a software NHS organisations regularly use apart from for the cardiac audit.

Leeds does plan to provide a system which will enable the recording of the data required for DAHNO but also for other cancer sites. The final decision regarding the software has not yet been made, therefore currently there is no way of recording the head and neck data at Leeds. Mr Waugh has agreed that when Leeds makes the decision regarding the vehicle to collect the national cancer dataset, head and cancer will be the first to roll out.

Ms Berry highlighted that a web based patient summary browser would be made available.

Ms Berry informed the group of a DAHNO Roll-out Awareness Workshop to be hosted by Teeside Cancer Care Alliance on 6th May 2004. National roll-out of DAHNO will take place in December 2004.

Action: Mr Tinkler to find out about cardiac database at Leeds.

9. Web Privacy

Dr Coyle highlighted that the Yorkshire Cancer Network (YCN) Head and Neck minutes are made available on the YCN website, some members of the group were unaware of this.

Mr Tinkler highlighted that the YCN website was previously a restricted site. When the website was to be made open to the public all Network Groups were asked if it was acceptable for minutes to go onto the website, which was agreed.

Mr Tinkler apologised if this was not re-emphasised when the website was made open and confirmed that any minutes are checked by himself and authorised by the Chairs of the Network Group. If there is any material which is of a sensitive nature it is omitted.

10. NICE Guidance

Dr Coyle highlighted that the latest draft of the NICE Improving Outcomes Guidance was out for consultation from 30th January-27th February 2004.

Dr Coyle informed members of the Modernisation Agency meeting on 29th April and the BAHNO and AGM meeting on 30th April. Dr Coyle asked the group for any issues regarding the Guidance they would like to be addressed at the meeting.

Action: Comments to be sent to Dr Coyle.

11. Any Other Business

- **Waiting Times**

Dr Coyle highlighted that most of the Network are doing well for the 31 and 62 day waiting times targets.

Dr Coyle informed members that the current waiting lists for radiotherapy at Cookridge has risen quite dramatically over the last few months, making it difficult to meet cancer waiting times targets. This is due to significant rise in referrals in October and November 2003 coupled with shortages in radiographers and medical physics.

Mr Tinkler highlighted that Mr Melling has been presenting waiting times data to some of the other Network site specific groups. The group agreed that it would be useful for Mr Melling to present data at the next meeting.

Action: Mr Melling to do presentation on waiting times at next meeting.

- **Cancer Services Collaborative 'Improvement Partnership' Head and Neck Advisory Group**

Mrs Fisher tabled the notes from the Cancer Services Collaborative 'Improvement Partnership' Head and Neck Advisory Group. Mrs Fisher agreed to keep the group updated.

- **Naso-Gastric Tube Replacement in Radiotherapy Patients**

Ms Cameron informed members that Dr Coyle circulated a letter about Naso-Gastric Tube replacement for head and neck patients and problems with local replacement for some patients.

12. Date of Next Meeting

**Monday 27th September 2004, 1.00pm
at Arthington House Conference Suite, Cookridge Hospital**

A light buffet lunch will be available