

Actions of the meeting held on
Wednesday 09 July 2008, 14:00

Humber and Yorkshire Coast Cancer Network

Seminar Room, Martin House Hospice

Yorkshire Cancer Network

Present:

Ms K Cooke	Airedale NHS Trust
Ms D Moore	
Ms R Hopkinson	Bradford and Airedale Teaching PCT
Dr G Sharpe	Calderdale and Huddersfield NHS Foundation Trust
Ms L Grayson	Hull and East Yorkshire Hospitals NHS Trust
Ms J Taylor-Clark	Humber and Yorkshire Coast Cancer Network
Ms K Eaton	Hunslet Health Centre
Mr M Hemingway	Leeds Teaching Hospitals NHS Trust
Ms D Highfield	
Dr M Kwok-Williams	
Ms S Morgan	
Dr S Picton (Chair)	
Mr D Thomas	
Ms P Thompson	
Dr B Allagoa	Mid Yorkshire Hospitals NHS Trust
Ms S Coughlan	North Trent Cancer Network
Mrs J Adams	North Yorkshire and York PCT
Mrs M Allanson	Scarborough & North East Yorkshire Healthcare NHS Trust
Ms V Johnson	Wakefield District PCT
Ms C Vickers	
Dr R Ball	York Hospitals NHS Foundation Trust
Ms J Crampton	
Ms P Hargreaves	
Mr S Duffy	Yorkshire Cancer Network
Mr P Melling	
Mr B Tinkler	

Apologies

Ms A Brady, Dr A Britland, Ms M Cooke, Dr A Essex-Cater, Dr A Falconer, Dr A Glaser, Ms R Hollis, Mr S Richards, Dr G Shenton, Ms A Thomas, Ms B Young

2. Action Log from the last meeting			
Log No	Action	Lead(s)	Deadline
11	The action log from the last meeting was agreed as being an accurate record.	N/A	N/A
3. Matters arising			
3.1 Skin Pathway			
Log No	Action	Lead(s)	Deadline
12	<p>The draft skin cancer pathway has been amended following discussions at the last meeting.</p> <p>It was agreed that information about the diagnosis should only be given in the cancer unit if the clinician has appropriate knowledge on the subject. If not this information should be given at the TYAS appointment.</p> <p>To amend skin cancer pathway to reflect breaking bad news issue.</p>	F Stephenson	July 2008

3. Matters arising			
3.1 Skin Pathway			
Log No	Action	Lead(s)	Deadline
13	To re-circulate pathway to the group.	L Carroll	July 2008
4. CYP IOG Implementation - Update			
Log No	Action	Lead(s)	Deadline
14	<p>Barry Tinkler updated the group from the Specialist Commissioning Group meeting on 23 June 2008</p> <ul style="list-style-type: none"> •Children <p>A discussion took place on Hull and East Yorkshire Hospitals Trust progressing from level 1 through to level 3 shared care service for children.</p> <p>A meeting with Hull and Leeds Principal Treatment Centre will be arranged to discuss how this can be accommodated.</p> <ul style="list-style-type: none"> •Young People <p>Agreement that Leeds is the principal treatment centre for 16-18 year olds for both Humber and Yorkshire Coast Cancer Network (HYCCN) and YCN patients except for HYCCN where patients are already being seen and treated at the Sheffield children's service.</p> <p>For the 19-24 year olds Leeds would be the principal treatment centre for both Networks.</p> <p>The YCN are required to produce an Implementation Summary for the Department of Health. This work is being taken forward by both Principal Treatment Centre and HYCCN colleagues and will be presented to the YCN and HYCCN Boards in early September, to the Specialist Commissioning Group on 19th September and then to the National Cancer Action Team.</p> <p>Issues are to be resolved around the pathways for both 16-18 and 19-24 year olds.</p> <p>A meeting will take place on 14th July 2008 of the National Implementation Team at which a number of questions will be asked for guidance and resolution.</p> <p>To keep the group updated.</p>	B Tinkler/ F Stephenson	On-going
15	<p>Siobhan Coughlan offered to visit any of the Hospital Trusts to discuss TYA developments and shared care arrangements.</p> <p>Sue Morgan would also like to attend the meetings.</p> <p>To contact Siobhan Coughlan.</p>	All	On-going

5. Peer Review - National Consultation			
Log No	Action	Lead(s)	Deadline
16	<p>National Peer Review Consultation documentation was emailed to the group on 17th June 2008.</p> <p>Fiona Stephenson summarised the proposal for the new approach to the delivery of cancer peer review.</p> <p>The YCN is expected to be reviewed in June 2009 for Skin, Revised Gynaecology, Upper GI and Urology. A possibility and not confirmed is a review of breast and/or lung.</p> <p>Children and possibly TYA will be reviewed in 2010.</p> <p>Individual comments on consultation document to be sent directly to National Peer Review Team.</p>	All	31/08/2008
6. Pathway for children aged under 16 with suspected cancer			
Log No	Action	Lead(s)	Deadline
17	<p>The pathway has been amended following discussions at the last meeting. The clinical pathway is now complete.</p> <p>David Thomson is developing the supportive care and patient information elements of the pathway to support the clinical pathway.</p> <p>The pathways will be presented to the YCN and HYCCN Boards for formal agreement before wide circulation.</p> <p>To develop the brain and CNS pathway and circulate for comment.</p>	F Stephenson	On-going
7. Patient Information Pathway			
Log No	Action	Lead(s)	Deadline
18	<p>David Thomson presented the draft Parent Information Pathway adapted from the YCN site specific pathway template. Amendments were suggested by members present.</p> <p>To circulate Parent Information Pathway to the group for comment.</p>	L Carroll	July 2008
19	<p>To email Barry Tinkler a list of questions to ask Birmingham on sarcoma information for Barry Tinkler to chase.</p>	D Thomson/ B Tinkler	July 2008

8. Cancer Waiting Times			
Log No	Action	Lead(s)	Deadline
20	<p>Philip Melling presented to the group the latest YCN and HYCCN Paediatric and Adolescent Haematology and Oncology cancer waiting times.</p> <p>The Cancer Reform Strategy (CRS) was published in December 2007. Within the CRS there are several commitments to extend the NHS Cancer Plan standards. This document details the dataset revisions required to monitor the existing NHS Cancer Plan standards in a manner consistent with the monitoring of the 18-Week standard, and introduces the data elements needed to support the new CRS waiting time standards:</p> <ul style="list-style-type: none"> •Maximum two week wait from referral for general breast symptoms (where cancer is not initially suspected) to date first seen (December 2009) •Maximum two month wait from referral from a cancer screening service to first treatment for all cancers (December 2008) •Maximum two month wait from a consultant's decision to upgrade the urgency of a patient they suspect to have a cancer to first treatment for all cancers December 2008) •Maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where radiotherapy is the chosen treatment modality (December 2010) •Maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where an anti-cancer drug regimen or surgery is the chosen treatment modality (December 2008) •Maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer for all other treatment modalities (December 2008) <p>To keep the group updated.</p>	P Melling	On-going
9. Guidelines			
Log No	Action	Lead(s)	Deadline
21	<p>Group agreed to address the cross network management of clinical guidelines and protocols for both 16-18 and 19-24 year olds with North Trent and HYCCN to ensure consistency.</p> <p>To speak to Rachel Hollis and propose a way forward.</p>	F Stephenson	On-going
10. Clinical Audit			
Log No	Action	Lead(s)	Deadline
22	The group reviewed the clinical audit papers.	N/A	N/A

Date of Next Meeting(s)

Friday 14th November 2008 9:00 am
Thackray Medical Museum, Leeds

Friday 14th November 2008 10:30 am
Thackray Medical Museum, Leeds [Educational Event]