

**YORKSHIRE CANCER NETWORK AND
HUMBER & YORKSHIRE COAST CANCER NETWORK
Paediatric & Adolescent Haematology & Oncology Group**

Minutes of the Meeting held on
Thursday 3rd November 2005, 2.00pm
YCRN Meeting Room 1, Ida Nurses Home, Cookridge Hospital

Present:	Alison Britland Karen Cooke Linda Sanderson	Airedale NHS Trust
	Amanda White Des Ginbey Helen Gormley	Bradford Teaching Hospitals NHS Trust
	Sally Bennett Heather Cooper-Waite Martin Elliott Richard Feltbower Alison Franklin Martin Hemmingway Miranda Hodgkin Rachel Hollis Ian Lewis Bob Philips Sue Picton (Chair) Stephen Richards Roly Squire Trish Thompson	Leeds Teaching Hospitals NHS Trust
	Mike Miller	Martin House Children's Hospice
	Brigid Allagoa Julie Austwick	Mid Yorkshire Hospitals NHS Trust
	Tracey Dale	North & East Yorkshire & North Lincolnshire Health Authority
	Margaret Riley	Royal Hull Hospitals NHS Trust
	A.R. Falconer	Scarborough & North East Yorkshire Healthcare NHS Trust
	Lucy Carroll Barry Tinkler	Yorkshire Cancer Network
	Jill Crampton Nicola Lockwood Katie Mortimer	York Hospitals NHS Trust

1. Apologies for Absence

Apologies were received from Pat Ansell, R. Ball, Ian Beddis, Catherine Cullinane, Adam Glaser, Sally Kinsey, Barbara Pymmer, Mike Richards, Jill Sharpe and Angie Walker.

2. Minutes of the Last Meeting

Were agreed as being an accurate record.

3. Matters Arising

? **ALL Maintenance Project**

Miranda Hodgkin gave feedback on the implementation of the ALL Maintenance Project that commenced in September 2005. She summarised the model being undertaken.

The thumb prick clinic in Halifax and Huddersfield is working well. An audit on the clinic journey is being repeated and questionnaires to determine colleagues views on the changes undertaken has been circulated. York, Halifax, Huddersfield and Northallerton are working towards modifying their maintenance doses.

4. Service Agreement Funding

No discussion took place.

ACTION: Lucy Carroll/Miranda Hodgkin to invite Maria Lewis to the next meeting

5. Clinical Audit

Clinical audit papers detailing all the new patients, patients that had relapsed, those patients that had died and new patients in shared care centres were tabled. Due to patient confidentiality the discussion was not minuted.

The group felt it would be beneficial if future audit papers could include data for Bradford, Harrogate, Mid Yorkshire and York.

Sue Picton informed colleagues of the 'Teenagers and Young Adults with Haematological Conditions Referral Pathway' document. Work to agree pathways for Teenagers and Young Adults with Brain Tumours is also being undertaken. Mr Tinkler said finalised pathways will be made available on the web site.

Ian Lewis prompted a group discussion on the transition of patients between services and how individual organisations are managing young people. Mr Tinkler said the IOG will help focus on this in more depth.

ACTION: Future audit papers to include data for Bradford, Harrogate, Mid Yorkshire and York.

6. Tumour Banking

No discussion took place.

7. Yorkshire Children's Tumour Registry

Richard Feltbower gave an update on work the Yorkshire Children's Tumour registry has undertaken. A paper which looks at the similarities between leukaemia ALL and Type 1 diabetes in children has been published.

Work on the long term relapse patterns of patients diagnosed since the mid 1970's and a poster looking at the similarities between ALL and brain tumours in children was presented at a national meeting.

Collaboration work is being undertaken with the Northern region registry to look at relapses and clustering in C&S Tumours for patients up to the age of 39 diagnosed from 1990.

It is hoped a grant proposal will be approved by Cancer research UK to investigate patient's perceptions of their care focusing in particular on adolescents straddling the paediatric and young adult, 16-24 ages.

8. Shared Care

? Hull

Hull is continuing to run a level 4 shared care service and a third surgeon has been appointed. Discussions on the referral of patients to Hull need to take place. Ian Lewis emphasised the value of lessons learned from this service.

? Scarborough

There is a vacancy for an E Grade community nurse, however, the funding of this post has been frozen.

? Mid Yorkshire

Mid Yorkshire is moving towards a level 1 shared care service across the three sites (Dewsbury, Pinderfields and Pontefract).

Huddersfield/Halifax, Airedale, Northallerton, York and Martin House had no major issues to report.

Ian Lewis reported that Mid Yorkshire is having ongoing meetings to discuss configuration and relationships with local and specialist services in Leeds.

? **Bradford**

A meeting between the Bradford Teaching Hospitals Trust and PCTs has taken place to discuss the development of a shared care service model. Representatives from Airedale were unable to attend this meeting.

9. NICE Guidance on Child and Adolescent Cancer Services – Implementation

Rachel Hollis presented on the Implementation NICE Guidance on Child and Adolescent Cancer Services (presentation enclosed).

Tracey Dale, Senior Commissioning Manager, North & East Yorkshire and North East Lincolnshire introduced herself to the group. She informed members of the NEYNEL Specialist Obstetrics and Paediatric Commissioning Group for Yorkshire and prompted a group discussion on the interaction between the Children's Network Commissioning and Specialist Commissioning.

Barry Tinkler explained the YCN approach to the implementation of IOG. The Network has produced and submitted to the CAT action plans detailing how the IOG will be met over a three year period. Mr Tinkler emphasised the implications as a result of the planned NHS structure changes (reduction in SHA and PCTs) noting that the WYSHA has recommended all the clinical Networks including Specialist Commissioning take an agency approach.

Ian Lewis emphasised the importance of having good clinical leadership to develop Networks that are based on natural functions and natural patient flows. It has been agreed there will be a single children's Network that will encompass West Yorkshire and North & East Yorkshire but not North Lincolnshire. This will also encompass the SOAPS group.

Barry Tinkler summarised the Peer Review Process. Quality measures are produced six months after the publication of the IOG and are circulated for a three month consultation. There is a minimum six months from publication of the measures to Peer Review Visit. Following the Peer Review Visit a draft report is circulated for factual comments prior to publication in the public domain. Action plans must be produced.

Barry Tinkler emphasised the importance for all organisations to ensure they have appropriate representation at the meetings. It is likely that children and adolescent cancer services will be reviewed in the second round of visits taking place in 2008.

It was highlighted that further work needs to be undertaken on local referral pathways to ensure people have access to age appropriate facilities and tumour specific expertise. It is thought that the implementation group have decided the top age is 24 years.

10. Any other business

Rachel Hollis said she will circulate details regarding bids for posts to support the implementation of IOG.

ACTION: Rachel Hollis to circulate details.

11. Date of 2006 meetings

Members agreed to meet three times a year and hold a yearly educational event. Ian Lewis emphasised the importance of having local clinical leadership at the meetings.

Thursday 9th March, 2.00pm

Thursday 20th July, 2.00pm

Thursday 16th November, 2.00pm

Date of next meeting

**Thursday 9th March 2006, 2.00pm, YCRN Meeting Room 1,
Ida Nurses Home, Cookridge Hospital**