

YORKSHIRE CANCER NETWORK

Imaging Services Group

Minutes of the meeting held on
Wednesday 11th June 2003, 6.00pm
Ramada Jarvis Leeds North Hotel

Present:	Dr S Blake	Airedale General Hospital
	Dr C Kay	Bradford Hospitals NHS Trust
	Professor M Baker	Yorkshire Cancer Network
	Miss H Lamb	
	Mr B Tinkler	

1. Apologies for absence

Dr P James, Dr R Mannion and Dr N Spencer.

2. Minutes from the last meeting

Item 3, Potential Additional CT and MRI Scanners should have stated that an announcement regarding the potential CT and MRI scanners has been delayed due to an embargo placed on it by the Department of Health.

With this amendment the minutes were agreed as being accurate.

3. Matters arising

- **MDT Activity in the Units**

Mr Tinkler explained that at the Imaging meeting in October 2002 the group agreed that it would be useful to produce a Network wide list of all MDT meetings detailing the date and time and if they were attended by a Consultant Radiologist. The group was asked to send lists of MDT's to the Network Office.

Miss Lamb highlighted that nothing had been received. Mr Tinkler suggested that the issue could be picked up via the YCN Cancer Lead Managers group.

Action: Mr Tinkler to raise issue at Lead Managers Group.

4. Progress with site-specific Imaging Guidelines

Professor Baker highlighted that the group have completed reviewing all the site-specific imaging guidelines and summarised the progress to date.

Professor Baker explained that the Breast and Gynaecology Imaging Guidelines have been included in the YCN site-specific guidelines. The Urology Group is currently reviewing the YCN Urology Guidelines and Dr Spencer is working with the Urology Group to finalise the Imaging Section of those guidelines.

Professor Baker explained that he is unsure of the situation with the Upper GI, Colorectal and Lung Cancer Imaging Guidelines. He mentioned that there is a Network remit for follow-up scanning for colorectal cancer, however the diagnostic issue has not been addressed. Professor Baker suggested that the issue be brought up at the YCN Colorectal meeting and to invite Dr Guthrie to an Imaging meeting to discuss this issue further.

Action: Professor Baker to follow up the Upper GI, Colorectal and Lung Cancer Imaging Guidelines.

5. Imaging Capacity

Mr Tinkler explained that the Network Imaging group had produced a three-year cancer plan for additional CT and MRI scanners. The plan was to fit in with the Service Delivery Plan to ensure that the commissioners were engaged to fund both the capital and the revenue. Additional allocations of capital from the Department of Health have ensured the delivery of the first two years of the programme.

A paper regarding the Yorkshire Cancer Network Scanners DoH July 2002 update July 2003 was tabled at the meeting for information and discussion. Mr Tinkler talked the group through the paper.

Mr Tinkler highlighted that there is an additional CT for Leeds and for York and an additional MRI for Bradford and Harrogate on the current programme, which takes the Network up to 2004. The plan has left a second scanner for Airedale and a third CT for Bradford. There will probably be an additional CT at the LGI by 2005. For 2006/07 there is additional CT for Calderdale and Huddersfield and Mid Yorkshire.

Mr Tinkler highlighted that the two Leeds MRI scanners are in bold due to the initiative which has been announced of the replacement of scanners that were installed prior to 1997.

Dr Kay suggested that there should be an agreement between neighbouring hospitals to support a hospital with only one CT or MRI scanner.

Dr Blake informed the group of the funding issues at Airedale. Airedale PCT is not investing money into CT and MRI scanners even though the capacity is there. Professor Baker explained that the Network has had some discussions with Airedale about getting revenue for a second CT scanner, with negative response.

Mr Tinkler informed Dr Blake of the Harrogate MRI Scanner Appeal. Harrogate Hospital and Community Friends are pledging to raise £150,000 of the £1.6 million to buy and house the state-of-the-art magnetic resonance imaging scanner and have it up and running by June 2004. Mr Tinkler said that he would forward this information to Dr Blake.

Mr Tinkler highlighted that if individuals can get revenue support from their commissioners then the Network can still tap into the additional allocation programme. Professor Baker highlighted that the revenue hold ups need to be identified and pressure needs to be exerted on commissioners.

6. Workforce Issues

Professor Baker asked for feedback regarding recruitment of radiologists across the Network. Dr Kay highlighted that on 1st July 2002 29 new consultant posts were advertised nationally and the following week 24 consultant posts were advertised. The college is aware of 350 vacancies.

Dr Blake reported that another Consultant Radiologist has been appointed at Airedale.

Dr Kay explained that radiographer staffing for Leeds and Bradford is a problem.

Mr Tinkler mentioned that a document has just been published by the Department of Health on Radiography Skills Mix at www.doh.gov.uk/radiography.

Dr Kay highlighted that the NICE Guidelines for Head Trauma will impact on cancer services. The Guidelines are still under consultation.

Professor Baker asked the group about ultrasound particularly relating to the capacity to carry out TRUS without increased waiting times. Professor Baker highlighted that there is a big block in Mid Yorkshire even though the service is very streamlined there is not enough TRUS capacity available.

Professor Baker referred to training scheme. The Deanery has been offered additional posts again, which previously both the colleges nationally and the training committee regionally had turned down.

The group agreed that the training scheme needs a revolution and needs the head of training to be a non-Leeds representative.

Professor Baker explained that he is unsure how to take this forward, however he will pursue the issue.

7. PET Scanning

Professor Baker explained that there had been plans for a National Workshop to determine the planned roll-out of PET scanning across the NHS. The proposal has collapsed as the South of England have set up a regional mechanism due to an overwhelming number of private contractors attempting to do deals with individual Trusts.

The North of England Networks including North Trent, Yorkshire and Humber and Yorkshire Coast will follow the same mechanism. This will involve the Networks and Specialist Commissioners meeting together within the next few weeks. It is expected that it will be either Leeds or Sheffield to get the first PET scanner and the other Network will receive a second.

Mr Tinkler highlighted that the commissioning arrangements for the individual scanners will be a specialist regional service.

8. Service Improvement

Professor Baker highlighted that there is going to be a major initiative on diagnostics as part of the Modernisation Agency, principally looking at endoscopy, imaging and to a lesser extent pathology. West Yorkshire Health Authority has volunteered to be a pilot.

Mrs Ferguson, Service Improvement Lead will be taking this forward.

Professor Baker highlighted that he is unsure of the impact on individual trusts across the Network.

9. Horizon Scanning

Professor Baker explained that 6 months ago he and Mr Tinkler wrote to Len Wright and Tony Chapman at Leeds regarding the shape of imaging services in the future. A meeting will take place in August 2003 to discuss this issue in depth.

Professor Baker asked the group for their thoughts on this issue. Dr Kay highlighted that he had completed some work involving the structure, the equipment and changes in imaging protocols etc and written a paper, which he will forward to Professor Baker.

Dr Kay highlighted that Bradford will be participating in a large study regarding Virtual Colonoscopy.

Action: Dr Kay to forward paper to Professor Baker.

10. National Dataset- Imaging Section

The Imaging Section of the National Dataset was tabled for information (paper enclosed)

Mr Tinkler explained that there are five items in the national dataset that relate to imaging. Currently in terms of the waiting times the diagnostics tests are being selected, which will be introduced along with the site specific cancer datasets.

The Cancer dataset will be phased through the National Clinical Audit Support Programme. The first phase will be Lung called LUCADA (Lung Cancer Dataset), which is just about to begin in pilot form and the Yorkshire Cancer Network has been accepted as one of the pilots.

The second phase is for Head and Neck Cancers entitled DAHNO (Data for Head and Neck Oncology).

Mr Tinkler asked if all radiology departments in the network have a computer system and are there standard fields in the computer system. If the fields are standard they can be downloaded from the radiologist computer system into the Trust system.

Mr Tinkler highlighted that it would be helpful if the group could feedback any anomalies in the imaging section of the cancer dataset to Mr Philip Melling, Information Manager.

Action: All of group to feedback suggestions on the Imaging Section of the Cancer Dataset to Mr Melling (philip.melling@leedsth.nhs.uk).

11. Any Other Business

None.

12. Date of Next Meeting

Wednesday 26th November 2003, 6pm at the Ramada Jarvis North Leeds Hotel*

*We would be grateful if all members of the YCN Imaging Group could confirm their attendance at the next Imaging Services meeting for venue and catering purposes.