

**Actions of the meeting held on  
Tuesday 10 June 2008, 14:00**

Humber and Yorkshire Coast Cancer Network

**Seminar Room, Cookridge Suite, Level 7, Bexley Wing, St James's University Hospital** Yorkshire Cancer Network

**Present:**

Ms E Brown	Leeds Teaching Hospitals NHS Trust
Dr S Edward	
Ms V Frost	
Ms L Hopcroft	
Dr W Merchant	
Dr P Robinson (Chair)	
Dr R Turner	
Dr A Edwards	Wheatfields Hospice
Dr D King	York Hospitals NHS Foundation Trust
Mr G Hughes	Yorkshire Cancer Network
Mrs H Ryan	
Ms C Sleigh	Yorkshire Cancer Research Network

**Apologies**

Dr S Ankarath, Ms J Dent, Mr S Duffy, Ms S Edwards, Mr K Horgan, Dr I Lewis, Professor M Lind, Dr M Marples, Mr P Melling, Mr H Peach, Ms T Rawnsley, Dr R Stuart, Ms J Taylor-Clark, Mr B Tinkler

<b>2. Action Log from the last meeting</b>			
Log No	Action	Lead(s)	Deadline
1	The action log from the last meeting was agreed as being an accurate record.		
<b>4. IOG Update</b>			
Log No	Action	Lead(s)	Deadline
2	<p>A meeting of the three cancer Networks (Yorkshire, Humber and Yorkshire Coast (HYCCN) and North Trent Cancer Networks), Chaired by Cathy Edwards, Specialist Commissioning Group (SCG) Director took place in May to discuss the Sarcoma IOG implementation plan. The networks are required to present their implementation plans within 2 weeks to Cathy Edwards to compile an SCG plan for submission to the national team.</p> <p>Dr Robinson is presenting to the Board in July to propose the sarcoma pathway and YCN sarcoma IOG implementation plan.</p> <p>To keep the group updated.</p>	P Robinson	Next meeting (03/10/2008)

<b>5. Patient Pathway</b>			
Log No	Action	Lead(s)	Deadline
3	<p>Mr Hughes gave an overview of how the group could influence the shape of Network Sarcoma Pathways within the reformed NHS.</p> <p>The various stages in the commissioning process coupled with the changes at Network Board level, mean the group have a real opportunity to engage directly with commissioners at Network level in order to help shape Network sarcoma services. The engagement will be essentially around pathways.</p> <p>The draft sarcoma pathway was circulated with the agenda and amendments were suggested by those present at the meeting.</p> <p>To find out if there are electronic referral systems (e.g. MRI to MDT) in the Network.</p>	G Hughes	July 2008
4	To amend the pathway following the suggested amendments and circulate to the group for final comments before presenting to the YCN Management Board in July.	G Hughes/ All	July 2008
<b>5.1. Influencing the Shape of the Bone Sarcoma Pathway</b>			
Log No	Action	Lead(s)	Deadline
5	<p>As a result of IOG the group have an opportunity to question and influence the shape of the bone sarcoma pathway before it is commissioned.</p> <p>To track 20 patients across the Network on the bone sarcoma pathway using PPM and report back at the next meeting.</p>	G Hughes	Next meeting (03/10/2008)

<b>6. Cancer Waiting Times</b>			
Log No	Action	Lead(s)	Deadline
6	<p>The latest YCN and Humber and Yorkshire Coast Cancer Network sarcoma cancer waiting times was circulated to the group with the agenda.</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"> <li>•Maximum two week wait from referral for general breast symptoms (where cancer is not initially suspected) to date first seen (December 2009)</li> <li>•Maximum two month wait from referral from a cancer screening service to first treatment for all cancers (December 2008)</li> <li>•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)</li> <li>•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)</li> <li>•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)</li> <li>•Maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer for all other treatment modalities (December 2008)</li> </ul> <p>To keep the group updated.</p>	P Melling	On-going
<b>7. YCRN Update</b>			
Log No	Action	Lead(s)	Deadline
7	<p>Ms Sleigh presented to the group the Yorkshire Cancer Research Network portfolio and recruitment into sarcoma trials.</p> <p>To keep the group updated.</p>	C Sleigh	On-going

### **Date of Next Meeting(s)**

Wednesday 3rd September 2008 2:00 pm  
Seminar Room 2, Littlewood Hall, B Floor, Postgraduate Centre, Leeds General Infirmary

Thursday 4th December 2008 2:00 pm  
Lecture Room, Cookridge Suite, Level 7, Bexley Wing, St James's University Hospital