

Present:

Mrs A Bandyopadhyay	Airedale NHS Foundation Trust
Dr A Conn	
Dr M Crawford	
Dr J Tuggey	
Ms T Hiley	Bradford Teaching Hospitals NHS Foundation Trust
Dr M Kon	
Mrs H Spencer	
Dr A Hart-Thomas	Calderdale and Huddersfield NHS Foundation Trust
Mrs C Thomas	
Mr S Bolton	Harrogate and District NHS Foundation Trust
Dr T Fennerty	
Dr M Callister	Leeds Teaching Hospitals NHS Trust
Miss E Conlon	
Ms A Craig	
Ms S Dixon	
Mr R Milton	
Mr K Papagiannopoulos	
Dr P Plant (Chair)	
Mr J White	
Dr P Blaxill	Mid Yorkshire Hospitals NHS Trust
Ms C Foster	NHS Leeds
Ms M Allinson	User Partnership Group
Dr K Rodger	York Teaching Hospital NHS Foundation Trust
Mr S Duffy	Yorkshire Cancer Network
Mrs C Ferguson	
Mr G Hughes	
Mrs C Irving	
Mr P Melling	
Ms E Chambers	Yorkshire Cancer Research Network

1. Welcome and Apologies			
Log No	Action	Lead(s)	Deadline
20	Paul Plant welcomed everyone to the meeting.	N/A	N/A

2. Action Log from the last meeting			
Log No	Action	Lead(s)	Deadline
21	The action log from the last meeting was agreed to be a true record.	N/A	N/A

4.1 EGFR testing			
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4.1.1 EGFR testing - Presentation of the AstraZeneca pathway tool			
Log No	Action	Lead(s)	Deadline
22	Claire Darbyshire presented the current Astra Zeneca pathway tool to the Group which showed how pathways can be built and manipulated to look at different management solutions.	N/A	N/A
4.1 EGFR testing			
4.1.2 EGFR audit - report and findings			
Log No	Action	Lead(s)	Deadline
23	<p>Andy Conn presented findings on the EGFR mutation audit from York and Bradford taken from the last 20 patients tested and a Group discussion followed.</p> <p>It was noted that there appears to be variation in who is tested (in relation to pathology and stage) and also in turnaround times.</p> <p>The Group discussed how complete EGFR genotyping is in each testing Unit.</p> <p>Members felt it would be beneficial to have the EGFR result when seeing new patients.</p> <p>Andy Conn to send Clair Irving his audit criteria/presentation to share with the Group.</p>	A Conn	ASAP
24	The remaining Trusts are to carry out similar audits and are to come to the next meeting with a 5 minute presentation each to share with the Group.	Leeds, Calderdale and Huddersfield, Mid Yorks, Harrogate and Airedale	21/03/2012
25	<p>Members discussed whether Leeds would have the capacity to take on referrals from other Units across the YCN.</p> <p>Paul Plant is to clarify the process with colleagues running the EGFR process in Leeds and to report back to the Group.</p>	P Plant	21/03/2012
4.1 EGFR testing			
4.1.3 To discuss the outcomes from the meeting with the YCN Lead Managers & Commissioners			
Log No	Action	Lead(s)	Deadline
26	It was reported that Sean Duffy is requesting an update regarding payment options for an interim solution at the next WYCOM meeting.	N/A	N/A

4.1 EGFR testing			
4.2 Pathways and Cancer Waiting Times			
4.2.1 CWT data and Network Pathway Performance			
Log No	Action	Lead(s)	Deadline
27	<p>Members discussed in particular the 62 days : Urgent Referral – Treatment (Q1 2011/12) breeches in detail.</p> <p>It was agreed that obstacles need to be identified and pathways fully revised in order to overcome any issues. It was acknowledged that pathways have become increasingly complex in recent times given the rise in the number of tests and their limited availability.</p> <p>Given that the evidence base is continually evolving for certain procedures, members felt that it would be useful to come to Network consensus to provide clarity.</p> <p>Paul Plant has already started mapping pathways to understand why breeches occur and to look at ways of refining current practice.</p> <p>Paul Plant and Geraint Hughes to lead on this work.</p>	P Plant & G Hughes	ASAP
4.2 Pathways and Cancer Waiting Times			
4.2.2 Pathway developments - EBUS, Neck Ultrasound and Mediastinal Staging			
Log No	Action	Lead(s)	Deadline
28	<p>►EBUS</p> <ul style="list-style-type: none"> • Bradford It was reported that the PCT had agreed to support the bid however this needs to be re-looked at as a joint venture with Airedale which is supported by the NSSG. • Calderdale EBUS has been agreed to be commissioned from 1st April 2012 or sooner should the equipment become available before. • Mid Yorkshire EBUS has now been up and running since March 2011 and are looking to source a second scope. 	N/A	N/A
4.2 Pathways and Cancer Waiting Times			
4.2.3 Development of thorocscopy across the Network			
Log No	Action	Lead(s)	Deadline
29	<p>Leeds reported that it is hoped that thorocscopy will commence in February 2012.</p> <p>It was acknowledged that it may not be feasible for other Trusts to look at developing this service if numbers are small.</p>	N/A	N/A

4.1 EGFR testing			
4.3 Lung Thoracic CNS - update and discussion			
Log No	Action	Lead(s)	Deadline
30	<p>Sandra Dixon introduced herself to the Group in her new role and described her current work as follows:-</p> <ul style="list-style-type: none"> • Understanding how each MDT functions, relays changes in pathways and documents on PPM • Setting up effective communication pathways • Development of patient information • Carrying out the patient experience survey which is to be repeated in 12 months time • Audit of length of stay following resection which will be re-done in 12 months time <p>Future work will include:-</p> <ul style="list-style-type: none"> • Looking at developing a pre and post operative rehabilitation programme. <p>Sandra Dixon to liaise with Marion Allinson in order to assist with patient experience surveys.</p>	S Dixon & M Allinson	ASAP
4.4 TYA referral and adult cancer pathways			
Log No	Action	Lead(s)	Deadline
31	Geraint Hughes is to email these to the Group for comment.	G Hughes	ASAP
4.5 Managing clinician changes to the MDT Decision			
Log No	Action	Lead(s)	Deadline
32	<p>Members discussed their thoughts and experiences to managing Clinician changes to the MDT decision.</p> <p>It was agreed that:-</p> <ol style="list-style-type: none"> 1. A MDT decision can be changed however, any change in decision needs to be communicated back to the MDT swiftly and PPM kept up to date 2. Ideally, patients would remain with the same surgeon through the pathway 3. The Group needs to look at reviewing and agreeing the Medistinal pathway with a view to reducing variation and to provide a more unified way forward in decision making. <p>Paul Plant to lead on this work and share with the Group.</p>	P Plant	21/03/2012
4.6 To discuss new models of lung cancer follow up			
Log No	Action	Lead(s)	Deadline
33	To be discussed at the beginning of the next meeting.	All	21/03/2012
4.8 Developing an Electronic Interprovider Referral			
Log No	Action	Lead(s)	Deadline
34	<p>Members were reminded that the YCN Board have agreed a single process for all interprovider transfers. Each NSSG are required to agree the minimum information required for each referral.</p> <p>Parry Blaxill to lead on this work.</p>	P Blaxill	21/03/2012

4.1 EGFR testing			
4.9 Progress in addressing Peer Review concerns regarding thoracic surgery capacity			
Log No	Action	Lead(s)	Deadline
35	<p>There was a certain level of confusion regarding the current surgical capacity situation in Leeds.</p> <p>Angie Craig is to ask the relevant surgeons if the surgical capacity is sufficient and report back to Paul Plant.</p> <p>Angie Craig is also to invite the Directorate Manager to the next meeting to discuss further.</p>	A Craig	21/03/2012
5. GOVERNANCE and AUDIT			
5.1 NSSG Agreed Datasets - 2 yearly review			
Log No	Action	Lead(s)	Deadline
36	<p>Members agreed to continue collecting the cancer registry dataset and cancer waiting times.</p> <p>Clair Irving to amend the review date.</p>	C Irving	ASAP
5.2 To consider a future NSSG audit			
Log No	Action	Lead(s)	Deadline
37	To discuss through the Executive Group and to discuss at the next NSSG.	Executive Group	21/03/2012
5.3 Guidelines for review			
Log No	Action	Lead(s)	Deadline
38	To delegate responsibilities through the Executive Group.	Executive Group	ASAP
5.4 LUCADA update			
Log No	Action	Lead(s)	Deadline
39	Philip Melling to circulate LUCADA information with the action log.	P Melling	ASAP
6. YCRN report			
Log No	Action	Lead(s)	Deadline
40	Emma Chambers discussed the latest YCRN report with the Group.	N/A	N/A
7. Any Other Business			
Log No	Action	Lead(s)	Deadline
41	<p>► EBUS Patient Information</p> <p>Members were informed that this is in development and will be circulated to the Group for comment shortly.</p>	N/A	N/A
8. Date and time of 2012 meetings			
Log No	Action	Lead(s)	Deadline
42	Clair Irving to book 4 meetings in 2012 rather than 3 on different days if possible.	C Irving	ASAP

Date of Next Meeting(s)

Lung Executive Group (MEMBERS ONLY)
Thursday 2nd February 2012 5:30pm, TBC

Lung Group
Wednesday 21st March 2012 3:00pm, Lecture Room, Cookridge Suite, Level 7, Bexley Wing,
St James's University Hospital

Lung Group
Thursday 21st June 2012 3:00pm, Lecture Room, Cookridge Suite, Level 7, Bexley Wing, St
James's University Hospital

Lung Group
Tuesday 13th November 2012 3:00pm, Lecture Room, Cookridge Suite, Level 7, Bexley Wing,
St James's University Hospital