

YORKSHIRE CANCER NETWORK Thoracic Group

Minutes of the meeting held on
Thursday 14th October 2004, 3.00pm
Arthington House Conference Suite, Cookridge Hospital

Present:	Ms J Harrison Dr H Hosker	Airedale General Hospital
	Mr B Jacob Dr S Cheesman Ms K Lilley	Bradford Hospitals NHS Trust
	Dr D Jackson	Harrogate Health Care NHS Trust & York Hospitals NHS Trust
	Dr M Bond Dr M Snee Mr J White	Leeds Teaching Hospitals NHS Trust
	Dr D Currie (Chair)	Mid Yorkshire NHS Trust
	Professor M Baker Mr P Melling Mrs H Ryan Mr D Thomson Mr B Tinkler	Yorkshire Cancer Network

1. Apologies

Ms N Bell, Mrs K Henderson, Dr A Hunter, Dr M Muers, Dr P Plant, Dr R Taylor, Ms M Tetlow, Mr A Thorpe and Dr D Wild.

2. Minutes of the last meeting

These were agreed as being an accurate record.

3. Matters arising

• Lung Cancer Action Plan Update

The final Lung Cancer Action Plan was circulated to the group electronically for information. Dr Currie thanked Mr Tinkler for updating the action plan in line with the comments from the last meeting.

Mr Tinkler informed the group that the Department of Health accepted the Lung Cancer Action Plan as meeting the Improving Outcomes Guidance. Progress on the implementation of lung cancer will be monitored through Peer Review.

• Nurse Led Follow-up

Mr White highlighted that the nurse led follow-up protocol is almost complete. The final document will be circulated to the YCN Thoracic Group for any final comments.

The YCN Lung Cancer Nurses will launch the Network Nurse Led Follow-up Protocol at the beginning of November, Lung Cancer Awareness Month.

Action: Mrs Ryan to circulate final draft to the group for comment.

4. Peer Review Update

Professor Baker highlighted that the Yorkshire Cancer Network will be reviewed in September and October 2005. Notification of Phase I and II Measures is expected in March 2005. There will then be a three month period during which the Network and Units will carry out self assessment followed by pre visits.

Visits to each Trust will take two days and will follow a standard model with simultaneous meetings with a number of MDT's at one time.

Professor Baker confirmed that Breast, Lung, Colorectal, Gynaecology, Urology and Upper GI and almost certainly Haematology will be reviewed in September and October 2005.

Professor Baker explained the YCN Peer Review Timetable.

It was noted that CQuINS, the Cancer Quality Information Network System will be used for data management of the National Cancer Peer Review Programme 2004-2007 to avoid the huge amount of paper work that was generated in the last round of Peer Review.

The Peer Review programme will be complete in March 2007. It is expected that the whole process will then be taken over by the Health Care Commission.

Professor Baker informed the group that there have been two Peer Review meetings for all the Chairs of the Network Groups regarding the expectations of the process. Over the next few months Professor Baker will be meeting with the individual Chairs of the Network Groups to be reviewed to discuss the annual report, action plan and sign off of guidelines by MDT's.

Dr Currie highlighted that all of the group should encourage their local Trusts to read the Cancer Services Manual of Cancer Services. Dr Currie referred to the Quality Measures for the local lung MDT and a discussion followed.

- **Terms of Reference for Thoracic Group**

Mr Tinkler tabled a copy of the original YCN Thoracic Group Terms of Reference (1998/9) and explained that they need to be rewritten to meet the Quality Measures for Cancer Peer Review.

Action: Mr Tinkler to circulate generic terms of reference to the group for comment.

5. NICE Guidance

Dr Currie explained that the draft Lung Cancer Clinical Guidance was issued for second consultation on 6th September until 4th October.

Dr Currie highlighted that there are key gaps associated with PET and CHART.

Professor Baker highlighted that there is currently a consultation ongoing on a Department of Health framework for implementing PET; consultation will be complete on 22nd October. There is a suggestion that PET will be designated as specialist service and made a priority for commissioning next year.

Professor Baker highlighted that the current framework for PET is based on current evidence and would equate to around 2000 scans for the YCN, which is the capacity of one PET CT Scanner.

A discussion followed.

Mr Tinkler reminded the group that he had circulated an early discussion paper from the Scottish Evidence Group on the use of PET.

6. Centralisation of Surgery

Professor Baker highlighted that there is an intention to centralise thoracic surgery for West Yorkshire in Leeds when the new oncology wing opens around January/ February 2008 with the possible exception of York whose work may continue to go to Hull. With the slippage in the oncology wing and likely staff pressures in Bradford it may be necessary to centralise the service before the opening of the new oncology wing.

Dr Snee and Dr Bond highlighted that the Leeds and Bradford Surgeons had been informed that transfer of surgery is scheduled for 23rd May 2005. Most of the group were unaware of this decision.

Professor Baker explained that this would have implications for current MDT arrangements in the west of the Network where Airedale, Harrogate and Calderdale and Huddersfield link into the Bradford MDT and Harrogate does not have a local MDT.

Dr Bond explained that there was discussed at the Leeds Development meeting and Mr Papagiannopoulos confirmed that the Leeds Surgeons would continue to attend the MDT's locally. Bradford was not aware of these discussions.

Dr Snee highlighted that that the number of beds in the Leeds Thoracic Surgery Service will be reduced. The group agreed that the same level of service and waiting lists would still be expected. Professor Baker suggested that this should only happen if all patients have a PET scan before surgery in order to reduce the build up of unnecessary surgery.

Action: Dr Currie to write to Mr Papagiannopoulos on behalf of the group regarding the issues discussed.

7. Waiting Times

Mr Melling tabled Lung cancer waiting times information for urgent referral to first seen (21 days), decision to treat to treatment (31 days), and urgent referral to treatment (62 days) for 2003/04 and the first quarter of 2004/05.

Mr Melling confirmed that the data is allocated to the Trust of treatment.

Mr Melling highlighted that he is still concerned that all cancer data is not being collected. This is a marked problem for Lung Cancer for all Trusts across the Network. Mr Melling confirmed that more work is required to try and improve the ascertainment of data.

8. LUCADA Update

Mr Melling explained that problems with the ascertainment of cancer waiting times data will affect LUCADA.

Mr Melling highlighted that LUCADA is being rolled out nationally after the Yorkshire Cancer Network were successful early adopters of the programme. Each Trust who participated in the early adopter phase should have received funding for LUCADA.

The LUCADA National Team has asked Trusts to continue from the piloting phase and roll LUCADA out across the Network.

9. Staging Prognostic Information

A letter from Dr Mike Leahy, Chair of YCN Information Group was circulated with the agenda.

Dr Currie highlighted that the letter encourages Network Groups to consider ways to improve the recording of staging information in a way that the Cancer Registry can pick up, for example in case notes or MDT records and to ask groups if there were other prognostic indicators which Network Groups would be interested in developing.

Mr Melling highlighted that staging information would be addressed by LUCADA.

10. YCRN Clinical Trials Update

A Lung Cancer Trial Portfolio Update paper was tabled for information in Ms Tetlow's absence.

11. Any Other Business

- **Network Lead Pharmacist**

Mr David Thomson, Yorkshire Cancer Network Lead Pharmacist introduced himself to the group.

- **National Meeting of Lung Cancer Leads**

Dr Currie informed the group of the National Meeting of Lung Cancer Leads meeting on 15th November in London. It was noted that Dr Currie and Mr Papagiannopoulos were unable to attend the meeting; Mr White is attending the meeting and agreed to feedback to the group.

12. Dates for 2005 Meetings

Date	Time	Venue
Tuesday 15 th February	3.00pm	Blue Room, Postgraduate Centre, Pinderfields General Hospital
Wednesday 15 th June	3.00pm	Arthington House Conference Suite, Cookridge Hospital
Thursday 13 th October	3.00pm	Blue Room, Postgraduate Centre, Pinderfields General Hospital