

**Actions of the meeting held on
Wednesday 31 March 2010, 15:30**

Yorkshire Cancer Network

Seminar Room, First Floor, Paul Sykes Centre, SJUH

Present:

Dr E Loney	Bradford Teaching Hospitals NHS Foundation Trust
Dr G Gerrard	Leeds Teaching Hospitals NHS Trust
Dr V Gill	
Mr M Lansdown (Chair)	
Dr S McPherson	
Mrs L Priestley	
Mr A Nicolaides	York Hospitals NHS Foundation Trust
Mrs D Wardle	
Mr G Hughes	Yorkshire Cancer Network
Mrs C Irving	
Mrs F Halstead	Yorkshire Cancer Research Network

Apologies

Mr G Dyke, Dr D Goulesbrough, Mr I Hutchinson, Mrs C Ingham, Mr Z Makura, Mr S Nicholson, Dr R Pope, Dr A Scarsbrook, Mr S Sood, Dr J Thow

1. Welcome and Apologies			
Log No	Action	Lead(s)	Deadline
30	Members introduced themselves and apologies were noted.	N/A	N/A
2. Action Log from the last meeting			
Log No	Action	Lead(s)	Deadline
31	<p>► Nurse Led Telephone Clinical Operational Policy</p> <p>Lynn Priestly is to email Clair Irving with the additional information required to make this a Network policy, available on the YCN web.</p>	L Priestly & C Irving	30/04/2010
32	Geraint Hughes is to look at adjacent Network comparable policies to ensure that all aspects have been addressed.	G Hughes	30/04/2010
33	<p>► Patient Pathway</p> <p>Mark Lansdown informed the group that he has made enquiries as to the cut-off age for adolescents. Familial endocrine conditions are not necessarily passed onto the adult pathway at 16. The follow up of children who have radiotherapy to the neck remains a worry.</p> <p>The group agreed that it would be necessary to agree a joint policy with the YCN Paediatric-Adolescent Haematology and Oncology Group on the management of thyroid malignancies arising in childhood, the risk of thyroid of malignancies relating to other childhood malignancies requiring radiotherapy, how they are managed and what age/stage the adult team should be informed.</p> <p>Mark Lansdown is to write to the chair of the YCN Paediatric-Adolescent Haematology and Oncology Group to suggest this as a piece of work.</p>	M Lansdown	23/06/2010

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2. Action Log from the last meeting			
Log No	Action	Lead(s)	Deadline
34	The group discussed how each unit records patients declining initial appointments within the 2ww. The group agreed that an asterix should be added to the pathway to indicate that these statistics should be recorded. Mark Lansdown is to amend the patient pathway and send to Clair Irving.	Mark Lansdown	30/04/2010
35	Clair Irving to upload the amended pathway to the YCN web.	C Irving	15/05/2010
4. To discuss and agree Network-wide site visits			
Log No	Action	Lead(s)	Deadline
36	It was agreed to undertake a Network-wide series of peer-to-peer visits. Mark Lansdown agreed to meet the local teams i.e. a member of the local Surgical team, Management team, a YCN representative and also a User representative and a local Commissioner. The purpose of each visit is to discuss the pathways to identify where the vulnerabilities lie, looking at practical ways of overcoming them. Part of the visit would include a review of local data on numbers of cancers broken down into pre and post op diagnosis and how many have had primary surgery by a member of the group. Suggested dates for these visits are Wednesday afternoons between June and September (excluding August) as follows:- 16th June, 30th June, 28th July, 8th September and 22nd September. Clair Irving is to co-ordinate the site visits and to speak to Colin Sloane regarding user representation.	C Irving	31/05/2010
37	The group decided that following the site visits, it would be prudent to write a report to highlight any service gaps in need of addressing and to include a two year service development plan to present to the YCN Board. To discuss this at the November meeting after the autumn.	All	24/11/2010
39	Andreas Nicolaides agreed to visit Leeds. Clair Irving to schedule a convenient time for the Leeds site visit with Andreas Nicolaides.	C Irving	31/05/2010
6. To agree a questionnaire on current patterns of follow up			
Log No	Action	Lead(s)	Deadline
40	It was agreed that each unit are to inform Mark Lansdown of their local policy for the follow up/management of patients who didn't have radioactive iodine but who do not fall into the discharge group. Mark Lansdown to write to each designated surgeon.	M Lansdwon	23/06/2010
7. To discuss how services need to be developed in order to meet the 2012 Vision document			
Log No	Action	Lead(s)	Deadline
41	The group discussed the 2012 document in detail. Mark Lansdown agreed to ask Carol Chu - Clinical Genetics as to what the current waiting times are for patients at risk of familial cancer and what action is being taken if the delays are longer than ideal.	M Lansdown	23/06/2010

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7. To discuss how services need to be developed in order to meet the 2012 Vision document			
Log No	Action	Lead(s)	Deadline
42	The group agreed to produce a document addressing the Networks 2012 Vision for Thyroid Cancer. This may be of interest to both the DoH and to the Commissioners. It would highlight what needs to be done over the next 18 months. The work programme would need to reflect the group's vision. Clair Irving is to organise a 2/3 hour long meeting with Geraint Hughes and Mark Lansdown to discuss writing this document and to update the work programme.	C Irving	20/04/2010
43	The document is to be distributed to the group for comment.	M Lansdown	01/06/2010
8. To discuss group Work Plan for 2010-2013			
Log No	Action	Lead(s)	Deadline
44	Members to send any comments or suggestions on the current Work Programme to clair.irving@ycn.nhs.uk .	All	ASAP
45	To circulate the revised Work Programme to the group for discussion/sign off at the next meeting.	C Irving	23/06/2010
9. Educational Event - discuss potential theme, items & date			
Log No	Action	Lead(s)	Deadline
46	The group discussed holding the next educational event at the Thackray Medical Museum in September with a theme of 'Minimising and Managing Complications of Thyroid Cancer Treatment'. Clair Irving to contact the Museum to look at their September availability.	C Irving	25/04/2010
47	The group discussed opening the programme to allocate an hour to include two or three ten minute presentations for Registrars to present their research projects. Members are to discuss this opportunity with Registrars within their units and are to send details of interested parties to Andreas Nicolaides.	All	ASAP
10. YCRN update			
Log No	Action	Lead(s)	Deadline
48	The group discussed the latest update.	N/A	N/A
11. Cancer Waiting Times			
Log No	Action	Lead(s)	Deadline
49	Members discussed the latest information.	N/A	N/A

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12. Any Other Business			
Log No	Action	Lead(s)	Deadline
50	<p>► Peer Review</p> <p>Members were informed that there is a delay in the publishing of the measures. Self Assessment will need to be completed by the end of August 2010. Three documents are required for this. Namely the Work Programme, Constitution and Annual Report.</p> <p>Members discussed a Network Audit of 'Numbers Assigned to a Designated Surgeon'.</p> <p>To discuss the findings at the next meeting.</p>	All/M Lansdown	23/06/2010
51	<p>► Guidelines</p> <p>Members noted that a review of the Network Guidelines is necessary.</p> <p>Mark Lansdown and Geraint Hughes agreed to meet before the end of May to look at reviewing current guidelines.</p> <p>Clair Irving to organise a convenient afternoon for a meeting to take place.</p>	C Irving	ASAP
52	<p>► Bradford Educational Debate</p> <p>Elizabeth Loney informed the group that Bradford are holding an educational debate on the 5th May to discuss FNAs and Thyroids.</p> <p>Elizabeth Loney agreed to update the group on the outcome of discussions at the next meeting.</p>	E Loney	23/06/2010
53	<p>► Follow-up of Low Risk Thyroid Cancer</p> <p>The group discussed the paper tabled by Georgina Gerrard in detail.</p> <p>It was agreed that patients with less than 5mm PTC have such a good prognosis that no follow-up is necessary, as for benign cases.</p> <p>The group agreed that surgeons are to provide recommendations upon discharge for GPs to indicate what would trigger a re-referral for this group of patients (which would be the same as for a new primary lump).</p> <p>Mark Lansdown is to update the operational policy to reflect this.</p>	M Lansdown	30/05/2010
54	<p>Members discussed the 6-10mm group and agreed that a uniformed approach is needed. It was proposed that one ultrasound would be offered one year after surgery, discharging the patient if there are no suspicious features.</p> <p>The group agreed to offer ultrasounds annually for five years for patients with PTC greater than 10mm.</p> <p>Georgina Gerrard agreed to amend the information for MDTs.</p>	G Gerrard	30/05/2010
55	<p>► Suggested Local Implementation of Guidelines for: Lobectomy and isthmusectomy alone; post surgery radioiodine ablation; management of unexpected PTC in thyroidectomy done for MNG</p> <p>The group discussed the paper tabled by Georgina Gerrard and members agreed that they are happy with what had been written.</p> <p>Clair Irving to attach the two papers tabled by Georgina Gerrard with the action log.</p>	C Irving	30/04/2010

Date of Next Meeting(s)

Wednesday 23rd June 2010 3:00pm
Committee Room 1, Trust HQ, Ground Floor, St James's University Hospital

Wednesday 24th November 2010 2:30pm
Committee Room 1, Trust HQ, Ground Floor, St James's University Hospital