

East Of England Cancer Alliance Board Meeting

Chaired by - Dr Rory Harvey

Monday 4 December 2017 – Novotel, Stansted

MEETING OUTCOMES		
Attendees		
Carol	Anderson	Mid and South Essex STP
Ruth	Ashmore (RA)	East of England Specialised Commissioning
Sarah	Brierley	Herts & West Essex STP
Paula	Brown (PB)	Peterborough Hospital
Sam	Brown (SB)	Cancer Alliance
Sally	Cartwright	Public Health England
Phil	Carver	Health Education England
Lindsey	Cook	Patient & Public Voice Member
Tonia	Dawson	Cancer Alliance
Erika	Denton	Norfolk & Waveney STP
Finola	Devaney	NHS Improvement
Mary	Emurla	Cancer Alliance
Simon	Evans-Evans (SEE)	East DCO Team
Rory	Harvey (RH)	Bedford Hospital NHS Trust
Peter	Holloway (PH)	Primary Care Cancer Forum
Rukshana	Kapasi	Macmillan
Carol	Kurzeja	Beds, Luton & MK STP
Chrissy	Marshall	Patient & Public Voice Member
Neeta	Masih	Cancer Alliance
Leonie	Prasad	NHS England Midlands & East (East)
John	Reeve (JR)	Patient & Public Voice Member
Kevin	Roos	Cancer Alliance
Christopher	Scrase (CS)	Suffolk and North East Essex STP
Justine	Thompson	Cancer Alliance
Susan	Watkinson	Cambridgeshire & Peterborough STP
Dean	Westcott	NHS West Essex CCG
Apologies		
Hugo	Ford	Addenbrookes Hospital
Kay	Elliott	Bedford, Luton & MK STP
Donna	Reeve	Cancer Research UK
Victoria	Doyle	Cancer Alliance
Victoria	Corbishley	Eastern Academic Health Science Network
Pippa	Corrie	National Institute for health research
Mark	Davies	Norfolk & Waveney STP
Abdul	Razaq	Public Health (Local Authorities)

<p>2.</p>	<p>Minutes of the Meeting – 13 September 2017</p> <p>Were approved. Review of actions not elsewhere on agenda -</p> <ul style="list-style-type: none"> - A Research meeting is scheduled for 15 December. - JR reported that there is an NHSE consultation on proposals to reduce barriers to establishing research trials in the NHS, focussing in particular on excess treatment costs. See document 1- “Supporting Research in the NHS”. - The CYP Service Review Engagement is complete and is now progressing through Gateway 2 before a revised version will be presented for consultation. - Prostate Radiotherapy Fractions – NICE guidance is now to use 20 instead of 37 fractions, and this is about to be made policy in NHSE. Treatment is as effective and cheaper, there is an expectation that more than 70% of patients receiving radiotherapy for prostate cancer will receive this hypo-fractionated regime, however currently several centres in the East of England have not instituted this change in practice. <p>Actions –</p> <ul style="list-style-type: none"> - The Alliance board was supportive of this change in practice and requested regular updates on full implementation of commissioning guidance - A formal response to the Thoracic Service Review will be presented at the next meeting by Specialised Commissioning 	<p>RA</p>
<p>3.</p>	<p>Transformation Funds</p> <p>The success of two of the Alliance STP’s in reaching 62-day treatment target has allowed release of transformation funding in principle to BLMK and N & W STP’s this financial year. Operational focus must now be on those STP’s to initiate the transformation agenda.</p> <p>SEE – every provider within an STP footprint must achieve the 62-day waiting time target. This is projected to be reached across the Alliance by February/March 2018. The importance of capturing results of interventions was emphasised as supporting evidence for future release of funds.</p> <p>PH expressed concern that staggering implementation of FIT testing, rather than rolling out across the Alliance at the same time may lead to variation. The Alliance has a role to mitigate that concern. SEE – see phased introduction as pilot schemes with opportunities for shared learning.</p>	
<p>4.</p>	<p>Recovery Package</p> <p>TD outlined the recovery package elements and said there had been a 100% response from the EoE Trusts to the National Living with and Beyond survey which will be discussed at a future Board</p> <p>The survey shows there is a large difference in investment across the footprint with one Trust having a full survivorship programme with leadership and 11 clinical pathways on track and others with no leadership and only one pathway in place with elements of the recovery package.</p> <p>Where Trusts are working in partnership with Macmillan the progress is good.</p> <p>Action –</p> <ul style="list-style-type: none"> - TD to present the EoE baseline at future Board - STP’s to report their phased plans for implementation of RP, RS and Community Cancer Care across their STP footprints 	<p>TD STP’s</p>

5.	<p>STP Locality Updates</p> <p><u>Mid & South Essex STP</u> – continued investment of resource focused on improving and sustaining 62 day CWT position. Further clarity on Inter Trust Transfer deadlines to be communicated between providers. Multiple pathway redesign workshops undertaken. STP Executive review underway to discuss a new approach.</p> <p><u>Suffolk & North East Essex STP</u> – An STP Executive governance review has established a revised STP Cancer Locality Group. Dr Christopher Scrase has been appointed as Clinical Lead.</p> <p><u>Norfolk & Waveney STP</u> – STP Cancer Locality Group and underpinning operational groups established and functioning well. Dr Linda Hunter has been appointed as Clinical Lead. Detailed action plan in development. Cross provider resource in place to support sustaining 62 day CWT position.</p> <p><u>Cambridgeshire & Peterborough STP</u> – Detailed action plan in place including best practice pathway criteria. Dr Hugo Ford appointed as Clinical Lead. Increased Recruitment to Diagnostics Services to overcome shortfalls. Response to Neutropenic Sepsis audit agreed with west Anglia. GP training launched with Macmillan Funding</p> <p>Action –</p> <ul style="list-style-type: none"> - C & P launching a Serious Event Audit. If there is any expertise across the region please contact susan.watkinson@nhs.net <p><u>Bedfordshire, Luton & Milton Keynes STP</u> – Caroline Kurzeja confirmed as the new STP Cancer Lead. Dr Rory Harvey confirmed as interim Clinical Lead.</p> <p><u>Herts & West Essex STP</u> – continued investment in resources focused on improving and sustaining 62 day CWT. Dr Christine Moss appointed as Clinical Lead. Detailed action underway. High level NCPES action plan will be finalised in consultation with locality including Macmillan.</p>	ALL
6.	<p>Patient Advisory Board</p> <p>Overview of PAB November meeting including input into national Radiotherapy Review.</p> <p>Meeting also discussed the development of STP NCPES Action Plans and noted mixed involvement of patients and a wide variation in detail. Plans will be reviewed by PAB membership and reported on at the next board.</p> <p>NCPES also showed that proportion of patients receiving a Care Plan was very low - even the national benchmark of 33% of patients receiving a care plan is not being achieved across EoE</p> <p>RH - Patient representation injects energy and focus into programme execution and all STPs were urged to connect to their patient representatives on the Alliance Patient Advisory Board as well as working with patients in their localities.</p>	
7.	<p>Clinical Advisory Board (CAB)</p> <p>Initial meeting held in November. Draft minutes will be circulated (attachment 2).</p> <p>It was noted that the clinical lead for the CAB was to be appointed from within the membership, and the board supported that the role should be appointed from one of the STP clinical leads.</p> <p>It was noted that there are still 2 interim Clinical Leads within the STP's.</p>	

<p>8.</p>	<p>STP/CA Memorandum of Understanding (MOU)</p> <p>A draft MoU has been developed to:</p> <ul style="list-style-type: none"> - Formalise the partnership and relationship arrangements between the East of England Cancer Alliance and the STP in respect of the Cancer Transformation programme, the Cancer Alliance STP Programme Manager and the Cancer Alliance STP Clinical Lead. - Formalise the guiding principles by which the partnership arrangements are based upon. - Clarify the respective roles and responsibilities over the term of the programme. - Demonstrate the commitment of both parties to improving standards in the quality of cancer patient care and services across the East of England. <p>The MoU was agreed in principle and Erika Denton, Norfolk & Waveney STP, offered support to other STPs in clarifying operational arrangements which are working well in N&W STP.</p> <p>Action -</p> <ul style="list-style-type: none"> - KR to circulate the document for review comments by STPs returned by 8th December. A revised MoU will be issued for sign off by each STP, host organisation and the Cancer Alliance by the end of December 2017. 	<p>KR STP's</p>
<p>9</p>	<p>MDC Pilot Site Report</p> <p>SB provided an update, and the summary to be circulated (attachment 3).</p> <p>Each pilot varies subtly in delivery method to establish best practice, and transformation funding available for roll-out. A full review of Pilot Schemes being undertaken by Anglia Ruskin University.</p> <p>Ipswich is one of the five national pilot sites for the 28 Day to Diagnosis Project. It has been extended for a further six months.</p> <p>Action –</p> <ul style="list-style-type: none"> - PH to present 28 Day to Diagnosis Project update at next Board meeting. 	<p>PH</p>
<p>10.</p>	<p>Neutropenic Sepsis Audit</p> <p>Findings of the audit show, for the fifth year, massive variation and generally poor performance level in achieving the 1 hour “Door to Needle” time of prescribing antibiotics to those on chemotherapy, despite concerted focus over a number of years. The national emphasis on sepsis in general may have detracted from neutropenic treatment strategies. Concern has been expressed by patients over quality and safety of service in a number of trusts. Full report, attachment 4..</p> <p>Action –</p> <ul style="list-style-type: none"> - Each STP to present an Action Plan to next board meeting - Contracts with Trusts to be investigated by NHS E, and with NHS I to propose methods to impose treatment targets - CA Board Chair to write to each provider highlighting the issues and urging action for improvement 	<p>STP's NHSI RH</p>

11.	<p>Pathology Turnaround Times</p> <p>The processing of pathology specimens is a key component of successful delivery of timed pathways. The Alliance has attempted to audit this with laboratories but has encountered reluctance to provide the data necessary to complete a full audit.</p> <p>The Board acknowledged this as a priority and STP members agreed to sign off a further request for the release of the information.</p> <p>PH suggested that CCG's may have the necessary data and would share it with the audit team.</p>	
12.	<p>Radiotherapy Review</p> <p>PB presented a draft response to the national radiotherapy review which she has been writing on behalf of the Board. It was noted that all the radiotherapy providers in the East of England with the exception of Mount Vernon would form a single network.</p> <p>East and North Hertfordshire Trust has signed a partnership agreement with University College London Partners to include radiotherapy and other cancer services.</p> <p>The Radiotherapy Review predicates that treatment for some rare cancers will be centralised, mitigated by better networking.</p> <p>CS provided one page summary of review which will be circulated (Attachment 5).</p> <p>A key role for the Alliance will be in supporting the development of a radiotherapy network. The importance of robust governance and resourcing of the radiotherapy network and staff was supported by the Board.</p> <p>The consultation response was approved by the Board.</p>	
13.	<p>Any Other Business</p> <p>Lung Cancer Pathway Analysis being launched by PHE, led by sally.cartwright@nhs.net. Learning from Manchester Diagnosis initiative to be shared, and due to previous projects Carol Ord to link up with PHE</p> <p>RK outlined Macmillan publications and reports available to support patient care – see attachment 6.</p>	CO
14.	<p>Date of Next Meetings – (2pm)</p> <ol style="list-style-type: none"> 1. Wednesday 7 March 2018 - (Holiday Inn CB24 9PH) 2. Monday 4 June 2018 - (Novotel, Stansted) 3. Wednesday 12 September 2018 - (Cambridge area) 	