

East Of England Cancer Alliance Board Meeting

Chaired by - Dr Rory Harvey

Wednesday 7 March – Holiday Inn, Cambridge

MEETING OUTCOMES

Attendees		
Rory	Harvey (RH)	East of England Cancer Alliance - Chair
Mary	Emurla	East of England Cancer Alliance
Sam	Brown (SB)	East of England Cancer Alliance
Tonia	Dawson	East of England Cancer Alliance
Peter	Holloway (PH)	Primary Care Cancer Forum
Rukshana	Kapasi	Macmillan
Neeta	Masih	East of England Cancer Alliance
Ruth	Ashmore	NHS England Specialised Commissioning
Richard	McDonald	NHS England Specialised Commissioning
Leonie	Prasad	NHS England M&E (East)
Simon	Evans-Evans	NHS England M&E (East)
Dean	Westcott	NHS West Essex CCG (Alliance Finance Director)
John	Reeve (JR)	Patient rep
Lindsey	Cook	Patient rep
Christopher	Scrase (CS)	Suffolk & N E Essex STP
Hugo	Ford	Cambridgeshire & Peterborough STP
Justine	Thompson	East of England Cancer Alliance
James	Ramsay	Bedford, Luton & Milton Keynes STP
Naresh	Chenani	NHS Improvement
Sally	Cartwright	Public Health England
Raluca	Nagy	Macmillan (Cancer Support)
Carol	Anderson	Mid and South Essex STP
Anna	Lidington	Herts and West Essex STP
Sam	Hepplewhite	Suffolk and North East Essex STP
Erika	Denton	Norfolk & Waveney STP
Rob	Murphy	Cambridgeshire and Peterborough STP
Donna	Reeve	Cancer Research UK
Paul	Titley	Cancer Research UK
Jennifer	Ebert	Eastern Academic Health Science Network
Louise	Kitley	Health Education England
Naresh	Chenani	NHS Improvement
Apologies		
Dr Pippa	Corrie	National Institute for health research
Donna	Derby	Bedford, Luton & MK STP

	<p>Victoria Doyle East of England Cancer Alliance Alastair Lipp NHS England (Midlands and East (East)) Kate Lancaster Herts and West Essex STP Finola Devaney NHS Improvement Chrissy Marshall Patient Rep Abdul Razaq Public Health (Local Authorities) Susan Watkinson Cambridgeshire & Peterborough STP</p>	
2.	<p>Minutes of the Meeting – 4th December 2017</p> <p>Agreed and approved.</p> <p>Action Log updated :</p> <ul style="list-style-type: none"> • Action 12 – TD confirmed Recovery package EoE baseline has now been completed and the National Report will be shared when checked. • Action 18 – the outcomes of Ipswich 28 day to diagnosis pilot scheme to be presented at the next Clinical Advisory Board and Alliance Board. 	
3.	<p>Cancer Alliance Board Development Programme by Janice Steed (JS)</p> <p>JS is working with the Alliance to:</p> <ul style="list-style-type: none"> • Review the board’s alignment and effectiveness; • Identify what the Board could be like if it was at its most effective, and what it would need to do to achieve this; • Understand how each member can contribute and be fully engaged. <p>Prior to the Board meeting JS spoke to core board members personally to gain their views and feedback on the overall objectives. The attached slides capture the outputs which centre around three key areas; (1) creating an Alliance wide programme, (2) moving the board to a strategic focus, and (3) how the board operates effectively.</p> <p>Seven recommendations flow from the work to date. These were discussed and endorsed by the Board. The recommendations are as follows:</p> <ul style="list-style-type: none"> • Clarity of purpose and expectations from each party in supporting the strategy, with shared responsibility – move from operational to strategic focus. There was a general view at the Board meeting that the Board should set the overall direction for cancer services, maximise opportunities to address variation, and harness the opportunities provided by research and innovation; • Operational activity should happen between Board meetings with timely reporting for review and decisions to the Board; • Progress and forward view on strategic objectives should be the main focus of the Board, with time for appropriate discussion and decisions; • Partners and advisory Boards should have their own agreed areas of contribution/activity and reporting; • Board agendas, chairing, membership, participation and minuting should reflect the purpose and requirements of a Partnership Board. <p>Action:</p> <ul style="list-style-type: none"> - A Development Day for core board members to be organised before the next Board meeting. This will take place on 3 May 2018. - A highlight report will be developed to capture operational matters and to flag risks and issues that require Board consideration. 	<p>JS/ME</p> <p>ME</p>

<p>5.</p>	<p>Clinical Advisory Board (CAB) by Rory Harvey (RH)</p> <p>All STP Clinical leads posts have been filled. RH has written to each of the leads to invite their expressions of interest for becoming the chair and a co-chair of the CAB</p> <p>Elevated PSA Referral Guidelines - a notification was sent to all East of England GPs which set out the regional standardised guidance that went beyond NICE Guidance in the use of PSA Testing.</p> <p>Lung Cancer – there are geographical challenges and variations across the footprint. Engagement across the broad clinical community is imperative so there are no duplications and mixed messages. There is continuing support from NCRAS.</p> <p>The date of the next CAB is 19th April, Fulbourn</p> <p>ACTION</p> <p>It was agreed that local clinical issues requiring discussion or escalation would be discussed with the STP clinical lead who can take them to the CAB for review and action.</p>	<p>All STPs</p>
<p>6.</p>	<p>Transformation Funded Programme by Mary Emurla (ME)</p> <p>The Alliance received confirmation on the arrangements for accessing 2018/19 transformation funding on 5 March. The attached slides set out the process and STP SROs have received the funding letter and FAQs provided by the National Cancer Team.</p> <p>All Alliances will receive funding in 2018/19 and the ‘in-principle’ allocation for the East of England is £9.15M for the first half of the year (Q1 & Q2). Allocations are based on 62 day performance in Q3 which for the East of England was 82.9% and gives the Alliance access to 75% of the total bid value.</p> <p>The Alliance now needs to prioritise the transformation programme and set out what will be delivered in 2018/19. The process and timeline was set out for the Board and is captured in the attached slides.</p> <p>There may be an opportunity for additional funding to address priorities in the planning guidance that were not in the original Alliance bid. This would be captured in the prioritisation process. A breakdown of the capital funding will also be required.</p> <p>There was an appetite for STPs to learn from each other and share as they consider priorities. This would be pulled into a single Alliance wide programme for national review.</p> <p>ACTION</p> <ul style="list-style-type: none"> - STPs to identify a lead for the prioritisation process and to work with the Alliance PMO over the coming period. A meeting to be set up with each of the identified leads/STPs during the week commencing 12 March. - A set of funding principles will be developed and circulated to SROs for Board approval 	<p>SROs/ PMO ME</p>
<p>7.</p>	<p>Finance Advisory Board (FAB)</p> <p>Feedback from meeting on 20th Feb by Dean Westcott(DW)</p> <p>DW discussed the Cancer Alliance financial report that was circulated to the board and included the draft 2018/19 budget plan for core Alliance funding. The FAB met on 20 February and agreed the finance MoU. DW highlighted the need for finance leads and SROs to work closely to ensure the release of Transformation funding due in June.</p>	

<p>8.</p>	<p>Cancer Waiting Times (CWT) by Sam Brown (SB)</p> <p>3 slides were presented by SB to show December figures on 62 Day CWT performance at STP and Trust level.</p> <p>The Boards attention was drawn to the following:</p> <ul style="list-style-type: none"> • 1 April 2018 new cancer waiting times system goes live • 1 July 2018 new inter-provider transfer policy comes into effect • 1 July 2018 new faster diagnosis standard entry fields go live <p>Further information can be found in the national letter about transformation funding forwarded to SROs recently. Systems need to prepare for these changes.</p> <p>ACTION</p> <ul style="list-style-type: none"> - Focused discussion on progress towards and impact of changes to reporting at next Board meeting - NHS Improvement to report to next Board on provider performance issues and recovery trajectories 	<p>ME NHSI</p>
<p>9.</p>	<p>Harnessing research and innovation by Jennifer Ebert (JE)</p> <p>JE on behalf of Helen Oliver presented the Cancer Innovation exchange proposal. Early diagnosis of cancer is one of the four themes identified by the Eastern AHSN for an innovation exchange approach. The approach brings healthcare and innovation together to find innovative solutions, with successful projects being recommended for national adoption. A collective partnership approach will be sought (see slide 6) to enable collaborative agreement. The Eastern AHSN has committed funds of £200K, though match funding is being proposed in order to maximise the potential across the Alliance footprint. There is a short time frame to deliver with some challenges around the footprint.</p> <p>ACTION</p> <ul style="list-style-type: none"> - STPs/Clinical Leads and PAB to identify key themes for the innovation exchange approach. Please contact: helen.oliver@eahsn.org or jennifer.ebert@eahsn.org - Alliance and Eastern AHSN to set out a plan for taking this work forward 	<p>SROs/ Clinical Leads/ PAB ME/HO</p>
<p>10.</p>	<p>STPs Feedback on Progress, Risks and Issues</p> <p>Each STP provided feedback on key areas of progress, risks and issues. This covered areas such as the strategic positioning of cancer within the STP, recruitment to key posts, progress with addressing areas highlighted in the neutropenic sepsis and NCPES audits. STPs already in receipt of funding highlighted progress to date.</p> <p>ACTION</p> <p>All agreed that an STP highlight report would be the best way forward to update the Board. The Alliance PMO will develop a report format and a single report will be brought to the next Board meeting.</p>	<p>ME</p>
<p>11.</p>	<p>Cancer Workforce Planning by Louise Kitley (LK)</p> <p>The Board discussed the added value that the Alliance partnership can bring to Workforce planning. This is both in terms of designing future workforce models and the benefits of the Alliance in developing networked solutions to delivering services across the footprint. Radiotherapy networks were given as an example. It was agreed that workforce planning should be a central plank of the Alliance programme.</p> <p>HEE are currently working with Alliances to develop workforce supply plans by 31 March.</p>	

	<p>The initial focus is on seven key workforce groups identified during the development of the Cancer Strategy. LK outlined the approach, process and timelines (see attached slides). STPs have been asked to sense check the data by HEE at provider level and some responses are outstanding – see page 6 of the slides.</p> <p>Action</p> <ul style="list-style-type: none"> - STPs who have not yet submitted their returns to do so - Alliance to set up workforce group to take workforce planning forward. 	SROs ME
12.	<p>Lung pathway analysis project by Sally Cartwright</p> <p>SC briefly summarised the lung STP packs that were sent to the Board. RH looked at the the lung resection page from the lung pathway brochure and noted the variation in resection rates. RH asked SROs to take this back to their STP to look any gaps in the pathway as it is a key piece of work in the next 18 months.</p> <p>ACTION</p> <ul style="list-style-type: none"> - SC to circulate the report for comments back to sally.cartwright@nhs.net - SROs to highlight and discuss variation in resection rates within the STP - Lung pathway project to be included on the CAB agenda in April 	All SROs RH
13.	<p>Thoracic Service Review</p> <p>RA presented specialised commissioning updates from the radiotherapy, surgery and thoracic service reviews.</p> <p>ACTION</p> <ul style="list-style-type: none"> - Thoracic service review to be included on the CAB agenda in April - Specialised Commissioning to provide a comprehensive update on all services at the next Board. 	RH RA
14.	<p>Cancer Alliance Stakeholder Event – 28 June at Duxford</p> <p>ME briefly highlighted the objectives of the event.</p> <p>‘Defining the Vision for Cancer’. Board members agreed to the objectives, audience and next steps. Board Members are requested to attend the day and to circulate the information to key stakeholders</p> <p>Action</p> <ul style="list-style-type: none"> - Board members interested in being involved in planning to contact sam.brown4@nhs.net and victoria.doyle@nhs.net 	All
15.	<p>AOB</p> <p>RH outlined the following development for discussion at future Board meetings:</p> <ul style="list-style-type: none"> - MDT work Constraints - Genomics - genetic testing, there will be issues around procurement once it become a centralised lab - APPG Breast Cancer Report 	
16.	<p>Next Board meeting from 2pm:</p> <p>Monday 4th June 2018, Novotel Stansted</p> <p>Wednesday 12th September 2018, The Belfry Cambridge</p>	

