

Greater Manchester **Cancer**
Acute Oncology Pathway Board

Pathway Board Meeting

Minutes

Meeting time and date: Friday 1st December 1-3pm

Venue: The Christie - THQ – MR4&5

Chair: Claire Mitchell

In attendance	Initial
Rebecca Price	RP
Claire Mitchell	CM
Susan Sykes	SS
Connor Fitzpatrick	CF
Clare de Marco Masetti	CdMM
Elena Takeuchi	ET
Paula Hall	PH
Sue Jones	SJ
Mary Ann O'Mara	MO
Lyn Schumaker	LS
Leah Morgan	LM
Sue Heatley	SH
Emily Unwin	EU
Anne Marie Battery	AMB
Joanne Woolley	JW
Carol Diver	CD
Ursula McMahon	UM
Lena Richards	LR
Apologies	
Mike Molette	MM
Anne Allen	AA
Jeena Mathew	JM
Vikki Percival	VP
Anne Allen	AA
Keven White	KW
Carmel Anadadas	CA
Natasha Smith	NS

Item

1 Minutes of the last meeting

Minutes of the last meeting were accepted as correct.

2 Sepsis Presentation

Lyn Bushell, Matron at the Christie, and her colleague Leah Morgan attended the pathway board meeting to give a presentation on Sepsis and the new screening tool that has been developed to Increase staff knowledge on signs and symptoms of sepsis. LB and LM gave a brief overview of the tools functionality, and presented summary data that had been collected following the tools pilot phase.

3 AO service development process / Clinical Advice to the Cancer Alliances for the commissioning of AOS.

Susan Sykes (SS) gave feedback to the group on developments of the AO service specification. Sue informed the board of the progress made in the task and finish group. The group has met twice since being established and has submitted comments on the draft specification draft thus far.

The task and finish group is due to meet on the 11th December for a final time finalising the service specification for this to then be submitted the cancer board for review.

CM noted the previously circulated Clinical Advice to the Cancer Alliances for the commissioning of AOS document and highlighted that this has been reviewed and in light of the GM Cancer Service specification being created to ensure that coherence is maintained between the two documents.

4 Data collection

CM and RP thanked the board for their continued efforts in submitting data for review.

RP informed the board that GM Cancer has yet to secure analytical support to conduct a detailed analysis of this data. The board have asked for this issue to be escalated to the GM Cancer medical director for support on this matter.

5 Macmillan User Involvement team update / Patient Experience Project

In NS and the patient's representative's absence, RP informed the board that a summary report would be circulated to the board in the upcoming weeks detailing the results of the patient experience surveys.

6 immunotherapy toxicity guidelines

The board discussed a recent incident whereby a patient on immunotherapy admitted to an acute trust unable to access appropriate treatment.

Discussed those patients on immunotherapy with GIII/IV toxicity to be admitted to cancer centre. PH to liaise with hotline.

Local teams to discuss with local pharmacists ability within trusts to use infliximab and immune modifying agents for management of severe immunotherapy toxicity

UKONS guidelines including those for immunotherapy toxicity should be available in the new year.

Board agreed to endorse and use UKONS guidelines once available. These will replace GM guidelines

In interim UKONS are happy for draft guidelines to be distributed and used prior to final version being available.

Immunotherapy toxicity workshop taking place at Christie 13/12/17 – the workshop coordinators have been made aware of concerns and issues relating to management of immunotherapy toxicity.

7 MSCC update

Service & Activity: The number of patients with cord compression so far is higher than any of the previous 3 years. The pressure on the service has levelled out slightly in the last 3 months as less patients with suspicion who turned out to have 'no' cord compression were referred. This possibly highlights improved awareness by clinicians when referring patients.

MSCC hours of 9:00 to 4:15 are still maintained as there has not been any increase in staffing for the coordinators service yet.

MSCC service working with the AO commissioning service specification T&F group to ensure network wide support

Integrate MSCC within the Hotline in small steady steps to ensure up skilling of additional clinicians on MSCC. In the initial stages, Hotline team will take referrals for patients with suspicion of MSCC and will work with the support of the MSCC coordinator for those patients.

Interviews for Conor's replacement on 24th November. Claire Shanahan has been appointed and has already been released to start her shadowing phase. This will assist with a smooth transition when Conor leaves.

Incidents: Christie - Failure to act upon suspicious symptoms has delayed diagnosis for 3 Prostate patients. RCA and ERG processes in place with actions to follow. This will likely be in the form of education to improve recognition of early symptoms and hopefully support to undertake the Patient Information project.

MSCC guidelines and pathways: Due to be updated January 2018. LR, CF, VM and the individual guideline owners are in the process of checking each document. Re local guidelines, I have received confirmation from Tameside, Bolton and CMFT that these are ready to be uploaded. Awaiting response from the rest,? Updates / ratification required.

8 Education update

National MSCC Study Day held on 1st November. Very well attended with good feedback. Disappointing that we are unable to attract GPs to these study days. Education of GPs remains a challenge. (Education meeting minutes detailing further discussion to be circulated)

As this meeting is unfortunately CF's last meeting in his post here at the Christie, the board would like to thank CF for all his hard work and dedication to the board throughout his time being a member.

9 Nursing forum update

A date for the next Nursing forum is to be finalised. RP will circulate information for this soon.

10 2018 meeting schedule

02nd February 2018 - 2:30-4:30pm

27th April 2018 – 1 -3pm

15th June 2018 – 12- 2pm

14th September 2018 – 12-2pm

9th November 2018 – 12-2pm

11 AOB

UKONS Oncology/Haematology Treatment Toxicity Risk Assessment Tool For Primary

Healthcare Professionals

MAO asked for feedback on the usefulness of this tool and asked for the group to promote awareness to health professionals in using this tool. The group agreed that the tool was useful. MAO has agreed to circulate this to her contacts with the backing of the board . The board has agreed to use the tool also once uploaded onto the GM Cancer website.

Communication to Parental oncology team

CdMM raised issue that some consultants have stated they do not wish to receive information directly from acute oncology teams. Board felt that for non-urgent communication about patients consultant should be informed by e-mail. Consultants present agreed they were happy with this. Reiterated for urgent communication direct contact with team SpR or consultant advised.

CC to raise at Consultant Clin Onc meeting. CM to raise at Consultant Med Onc meeting
