

Date of Meeting 17th November 2015
Time of meeting 13.30 hrs
Venue Frank Rifkin, Mayo building, SRFT

Present –

Dr Catherine McBain (Chair)	Andrea Wadeson	Elizabeth Molloy
Julie Emerson	Lucie Francis	S Rutherford
Sara Robson	Sarah Cundliffe	Rebecca Price
Dr C Douglass	Dr Moe Sein	Dr A Ishmail
Hester Benson	Dr Samantha Kay	Dr Scott Rutherford

Apologies –

Sarah Cundliffe	Sophie Harrison	Dr A Tran
Miss Tina Karabatosu	Dr K Karabatsou	

1. Welcome and apologies

The pathway director (CMCB) welcomed all to the meeting and noted the number of apologies.

2. Minutes of last meeting 21/4/15 / Matters arising

These were noted.

Stroke Pathway issues have now been resolved.

3. Objective no 1 – Improving outcomes / survival rates

a. First Brain and CNS Clinical Outcomes Report

Catherine Introduced the Manchester Cancer Annual report for the boards review

Discussion of the 2014-15's objectives and a Review of the annual plan showed that the board were on track for most of this business years objectives.

b. Agreed 'Outcomes Dashboard'; Local results & national comparisons

CMB introduced and circulated copies of the Outcome measures agreed at the 10th November 2015 Strategic management group. The preliminary comparison was discussed and Figures reviewed by the board.

Catherine asked the board to consider the prospect of including top line figures base of skull figures within the annual report. This was agreed as being advantageous to include within the report.

c. Subgroup Update: Strategic Management Group

Meeting minutes noted.

4. Objective no 2 – Improving the patient experience

a. Macmillan Survivorship grants; project progress

CMB introduced Hester and Julie to explain the premise of the 2 living with and beyond projects.

Survey, focus groups, health and wellbeing even being the end goal.

Data capture for holistic needs review.

Brain metastasise project - focus on staff? - Educational needs assessments. Up skilling. Survivorship needs for patients with Brain metastasis.

b. Cancer Network MDT Peer Review outcome

JE – Self assessed at 77.8%. Scored 100% in come of the targets.

c. Patient involvement

Lucie Francis introduced herself and explained what herself and the Macmillan user involvement team do Lucie Francis was welcomed to the board as the new Macmillan User Involvement Manager. LF updated the board with the information that Macmillan has funded 5 posts to facilitate better and more meaningful patient involvement

with Manchester Cancer. These appointments will help to facilitate patient representation on each of the patient boards.

LF expressed her ambitions for the board for the upcoming year in regards to User involvement. The board agreed that they would like to work to find someone to compliment the great work Julie Emmerson has been doing already. Lucie explained that she felt it was key that users feel confident and able to speak out/challenge the board. Lucie will be attending board meetings to support patient reps. Lucie explained the current Menu of opportunities her team will provide and agreed to circulate this to the board in email form. If any of board has any ideas for projects/demographics ideas etc they have advised to discuss with Lucie. (Lucie.francis@nhs.net). Further discussion to be held at the next BPEG.

d. Subgroup Update: Patient Experience Group

Discussed above.

5. Objective no 3 – Research and clinical innovation

a. Application for Brain Tumour Charity Centre of Excellence
£1 million pounds worth of funding

b. Proposed research away day 12/2/16.

c. Clinical trial recruitment and national comparisons

The meeting noted the research trials currently being undertaken. Research portfolio is due to open more trials in the upcoming months.

6. Objective no 4 – Improving & standardising high quality care across the whole service

a. Acute Trust issues and reports

Web link for referrals into the MDT not currently working. Link to be added to trust intranet pages.

b. Potential impact of changes to NICE 2 week wait referral guidelines
GP access to Scanning in the community discussed. Not consistent across the patch. Initial steps discussed, audit where each trust currently is and review this before starting work on pathway redesign.

c. Neuro-oncology MDT referrals

The board agreed that the process appears to be up and running although gaps in some trusts were highlighted.

d. Epilepsy guidelines – for circulation

For review post meeting.

7. Membership, attendance and operation of this Board

Members of the board agreed that the meeting in its current format is working well. Many feel there are great benefits to holding the meeting twice a year.

8. Any other business

9. Date and time of next meeting: TBA: Approx. April 2016