

Manchester Cancer

Gynaecology pathway board minutes

Date of Meeting 4th December 2015

Time of meeting 14.00hrs – 16.00hrs

Venue Meeting room 6, Trust Administration, The Christie

Attendance	Representation
Dr Barraclough (Chair)	Christie
Robina Malik	Patient representative
Mr Rick Clayton	Central
Julie Dale	Pennine
Dr Andrew Clamp	Christie
Mr K A Abidogun	Bolton
Sabina Fornacon-Wood	South Manchester
Dr Richard Hale	Stockport
Karen Johnson	Christie
Mr Jim Wolfe	SRFT
Ms Birgit Schaefer	Pennine
Venessa Hilton-Watts	East Cheshire
Mr Suku George	Stockport
Apologies	
Mr S Burns	UHSM
Mr Kyle Gilmour	Tameside
Ann Lowry	Central
Dr Ann Mills	Bolton
Dr Susan Davidson	Christie
Dr Mike Smith	Christie
Julie Kiernan	South Manchester
Mr Richard Slade	Christie
Mr S Ali	Pennine
Mr Murray Luckas	Leighton
Amanda Lowe	Tameside
Mr Vincent Hall	Macclesfield
Mr Brett Winter-Roach	Christie
Mrs Sally Petith	Mid- Cheshire
Karen Blackwood	WWL
Ms Jo Dzyra	Stockport
Miss Catherine Holland	Central Manchester
In attendance	
James Leighton	Manchester Cancer
Michelle Leach	Manchester Cancer

1. **Welcome, introductions and apologies**

Lisa Barraclough (LB) welcomed all to the meeting and noted the apologies received. She thanked everyone for attending this rearranged meeting.

She also welcomed Mrs Robina Malik (RM) to the meeting, as a patient representative.

2. **Minutes of last meeting**

Pathway Director

a. Matters arising not on the agenda

These were accepted as a true record of the meeting and there were no matters arising.

3. **Objective no 1 – Improving survival rates**

a. Cancer awareness events 2016

The board noted the dates of all the gynaecological cancer awareness events throughout 2016. They are keen to support these events and would be guided by existing initiatives within primary care and the CNS group. They asked that this is kept under review and a standing item on each board meeting.

b. Standardised referral forms

JL confirmed that the GP lead at the SCN, Dr Sarah Taylor, had confirmed that a standardised referral would be deployed across the conurbation in 2016. He confirmed that the draft of the forms had previously been circulated to board members.

Members confirmed that they had provided feedback on the drafts to the SCN and JL agreed to get the most up to date version of these forms for the board to review. JL agreed to keep the board informed on this initiative.

Action – JL to obtain the most up to date version of the referral forms and distribute to the board

4. **Objective no 2 – Improving the patient experience**

a. Local Patient experience survey update

The board noted the patient experience survey report tabled by Julie Keenan for UHSM. In view of the late arrival of these papers they had not been sent to the board prior to the meeting. JL agreed to distribute them after the meeting for review and discussion at the next board meeting.

Action – JL to forward the patient experience survey report to the board

b. User involvement update

Michelle Leach (ML) spoke to the tabled report and updated the board on the work of the user involvement team.

5. Objective no 3 – Research and innovation

a. Education event 2016

JL confirmed that a provisional booking had been made for the auditorium at the Christie NHS foundation Trust for Friday May 13th. He also confirmed that the Gynae CNS group had agreed to support the meeting.

He then explained that sponsorship was required in order to hold the event and his experience from the last event was that the agenda and identified speakers would be required to obtain sponsorship monies.

The board then had a discussion on the content of the meeting and decided that it should focus on cervical cancer in support of the cervical cancer screening awareness month.

JL agreed to progress the purpose of the meeting and obtain support from board members to draft the meeting agenda.

Agenda - JL to contact board members and the CNS group outside of the meeting

6. Objective no 4 – Improving service delivery

a. Update on single service project

Richard Clayton (RC) and LB outlined to the board outlined the current state of this project and what were the existing barriers. The board then had a wide ranging discussion as a result of this update

Amongst the board there was support for the concept of the single service but also a realisation and understanding of the risks and issues identified because of the differences that exist between both providers.

The board asked to be kept updated on progress and LB agreed to do this.

Action – LB to update board members as work on the single service progresses.

b. Endometrial follow-up policy

This item was deferred to the next board meeting.

c. Gynae nurse group feedback

JL confirmed that he had met with the Gynae CNS group and agreed to support the group in its work. He informed the board that Manchester Cancer would provide a page on their website, set up a Twitter feed and look to develop a NHS Network page to allow for better exchange of information.

As explained earlier in the meeting he confirmed that they would also contribute to the study event in May.

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d. Diagnostic referral policy

JL spoke to the tabled report. He confirmed that as the DRP had now been adopted, patients sent for a diagnostic procedure and then subsequently breach the CWT, the breach would be shared between both Trusts.

e. Manchester Cancer Vanguard update

The board noted the tabled briefing note.

7. Any other business

- (i) Mr George enquired if any of the board were aware of Manchester Surgical Services, as his Trust had been receiving referrals from them. No one was aware of the organisation.
- (ii) JL proposed that as this meeting was scheduled later than planned it would not be necessary to meet again in January. Therefore the board agreed to cancel the January meeting and next meet in March 2016.

Action- JL to confirm the cancellation to all members as soon as possible

8. Date and time of next meeting

- a. ~~8th January 2016~~ ~~14.00hrs~~ ~~CMFT~~