






Haematological Oncology Pathway Board


Thursday 25th August 2016, 3pm – 5pm, HTU Seminar Room, The Christie





Attendance:	
Name	Pathway Representation
Mike Dennis	Chair & Clinical Director, Consultant Haematologist, The Christie
Fiona Dignan	Consultant Haematologist, CMFT Representative
Clare Barnes	Consultant Haematologist, Salford Representative
Hayley Greenfield	Consultant Haematologist, Pennine Representative
Jo Tomlins	Nursing and Christie Representative
Simon Watt	Consultant Haematologist, UHSM Representative
Satarupa Choudhuri	Consultant Haematologist, TYA Lead
Charlene Jones	TYA CNS, Greater Manchester & Cheshire
Hitesh Patel	Consultant Haematologist, WWL Representative
Ann Harrison	Primary Care Representative
Chetan Patalappa	Consultant Haematologist, Bolton Representative
Lucie Francis	Macmillan User involvement Manager, Manchester Cancer
Evangelie Dunn	Macmillan User involvement Manager, Manchester Cancer
Nicola Remington	Pathway Manager, Manchester Cancer
Apologies:	
Rowena Thomas-Dewing	Consultant Haematologist and Survivorship Lead, SRFT
Liz Bates	Patient Representative
Montaser Haj	Consultant Haematologist, Stockport Representative
Hussein Baden	Consultant Haematologist, Tameside Representative
Eleni Tholouli	Consultant Haematologist, Central Manchester Representative
Leila Hamrang	Patient Representative

Agenda Item	Action
Welcome and Introductions Apologies were noted.	
1. a) Minutes of the previous meeting The minutes were agreed as correct and will be uploaded to the Manchester Cancer Website.	

<p>Outstanding actions from previous minutes:</p> <ul style="list-style-type: none"> i. ACTION: JR to send invite to the Pathway Board to the next Lymphoma Group meeting in order to progress with update of guidelines. ii. ACTION: CJ to send TYA Guidelines & Proforma to NR to forward to PB and to upload on Manchester Cancer website. iii. ACTION: HP to complete Lymphoma network level pathways. iv. ACTION: RT-D to send invitation to H&W Event to all members of PB & Nursing Group. <p>b) Matters arising not on the agenda</p> <ul style="list-style-type: none"> i. Single Manchester Hospital proposal Summary report of current status:  Manchester Single Hospital for pathway Details of the above summary report were discussed and further implications/possibilities were raised such as MDTs being conducted by disease speciality as opposed to by geographical sector. ii. TYA Service Data across networks: SC stated that she has been attempting to merge the audit data from a number of networks and wished for clarification from the group as to which areas to include. The PB agreed to only focus on the areas covered by Manchester Cancer. 	<p>ACTION: (MD will contact JR to prompt).</p> <p>ACTION: CJ confirmed she will forward TYA Guidelines & proforma to NR.</p> <p>ACTION: HP confirmed he will complete Lymphoma pathway by next PB meeting.</p> <p>ACTION: SC to present data at next HO pathway board</p>
<p>2. Objective 1 - Improving outcomes/survival rates</p> <p>a) Pathway Guidelines for the indications for invasive investigations</p> <ul style="list-style-type: none"> - Updated guidelines  InitialInvestigationsM CPB_AUG16_FINAL.d The above document was approved by the Pathway Board and is to be published on the MC website. - Network level Pathway Development <ul style="list-style-type: none"> - Myeloma: Satarupa Choudhuri   MC_Multiple_Myelom MC_Multiple_Myelom a_Network_Pathway_a_Network_Pathway_ The group discussed the above documents. LF suggested having a patient group involved in reviewing the documents – all agreed. Consideration for trials was suggested to be included within the document – SC to update. 	<p>ACTION: NR to publish guideline on MC website.</p> <p>ACTION: LF/ED to liaise with SC for review of documents by UI group.</p> <p>ACTION: SC to update Myeloma pathway document and share with</p>

<p>- Lymphoma: Hitesh Patel – to be provided at next meeting.</p>	<p>group.</p>
<p>3. Objective 2 – Improving the patient experience</p> <p>a) Specialist Nursing Group Update JT fed back to the team that the Nursing Group had met on the 23rd August and was fairly well attended. A guest speaker from the Lymphoma Association presented to the group.</p> <p>b) Living With and Beyond Cancer</p> <ul style="list-style-type: none"> - Health and Wellbeing events The Health & Wellbeing Event hosted by SRFT – scheduled for Saturday 15th October 2016 at the Marriott Hotel Worseley Park and open to all across GM. RT-D will issue invitation to all. - End of Treatment Summaries Update JT re-iterated that within PAHT there is a LWABC team in place for two years and an element of their remit is to develop and embed Treatment Summaries across all specialties. To avoid duplication Catherine Wardley (Treatment Summary lead with the Nursing group) has therefore deferred responsibility to this group. A Haem specific Treatment Summary is to be developed within the group, however, JT is yet to receive agreed draft from CW but this is expected by October 2016. <p>c) Patient Experience Survey NR stated that the number of received surveys has considerably increased to 167. However, there is disparity across sites with regards to response rates. The Board agreed to extend the survey until the end of September 2016. NR to re-send pdf of flyer etc. to all.</p> <p>d) National Cancer Patient Experience Survey 2015 Results</p> <div style="text-align: center;">  NCPES 2015 - Haem.pdf </div> <p>The above report was discussed. All requested to send summary action points derived from the NCPES report for each trust to NR. NR to collate report showing actual number of responses to each question by trust. Pathway Board NCPES Action plan to be produced at next PB meeting after review of the above.</p> <p>e) Patient User Involvement LF introduced Evangelie Dunn to the Board who has recently joined the UI Team. ED will be the UI Lead for the Board going forward. Tel : 0161 918 2368 Email: evangeliedunn@nhs.net</p> <p>LF provided an update of the current position of the UI Team and stated that their main objective is to develop and maintain a small community of people affected by Haematological Cancer to link in with LH and LB in order to ensure a broad representation of views. LF stated that LH is taking a short break from the Pathway Board but is expected to return in October 2016. LF also invited suggestions on how to best involve patient representatives at the Pathway</p>	<p>ACTION: RT-D to send invitation to H&W Event to all members of PB & Nursing Group.</p> <p>ACTION: JT to provide update regarding Treatment Summaries after receiving update from CW.</p> <p>ACTION: NR to re-send pdf of flyer to all sites.</p> <p>ACTION: All trusts to send summary of review with action points from NCPES report to NR for collation.</p> <p>ACTION: NR to collate detailed NCPES summary report.</p> <p>ACTION: NR to schedule pre-meet with MD and pt reps before each scheduled PB meeting & to</p>

<p>Board meetings/work-streams. It was suggested that the patient representatives could meet with the Pathway Director 30 minutes prior to the start of the Pathway Board in order to receive a de-brief on what was to be discussed etc. Also, the patient representative could be invited to contribute an agenda item for each meeting.</p>	<p>request an agenda item from pt reps for each PB meeting agenda.</p>
<p>4. Objective 3 – Research and clinical innovation</p> <p>a) Research Trials report 2016/17 Q1 Report not published at time of meeting. SW stated that Sue Dyde [Research Delivery Manager, NIHR] and Prof Nigel Bundred are scheduling a meeting to discuss Trial Recruitment across GM. Meeting yet TBC.</p>	
<p>5. Objective 4 – Improving and standardising high quality care across the whole service</p> <p>a) Manchester Cancer Haematological-Oncology Annual Report 2015/16</p> <p> Haem-Onc_Pathway_Board_Annual_Repc</p> <p>The Objectives for the Annual Plan 2016/17 within the above document were reviewed. Suggested addition:</p> <ul style="list-style-type: none"> i. Clinical guidelines – <i>to develop a robust process to ensure the timely updating of clinical guidelines and to continue to complete new guidelines. To work with the Cancer Vanguard to set challenging clinical quality standards in the coming year.</i> – SC volunteered to be the lead. ii. 5 Year Chemotherapy Strategy for Haematological –Oncology. <p>With regards Objective 5: GP Education – Increase awareness of Haematological malignancy in Primary Care AH stated that GP educational events are usually well attended and therefore could be a good opportunity for a PB representative to present at a future meeting. AH to forward dates of future GP Educational Events to NR.</p> <p>Haem specific E-Learning package for GPs – AH stated that she will enquire as to whether GPs find such tools useful.</p> <p>b) Blood tests for the diagnosis of Myeloma – request for clarification from Steven Elliott, Macmillan GP, Cancer Lead & Chair Community Based Care Strategy Group, NHS Salford CCG The Board discussed what tests should be standard. Board agreed the following:</p> <ul style="list-style-type: none"> • FBC • Biochemistry Profile • Immunoglobulins <p>c) Chemotherapy Strategy for Haematological malignancy Both the SACT and Haemato-Onc Pathway Boards have agreed to have a joint Pathway Board meeting. Doodle Poll of dates within October to be issued.</p> <p>d) Administration of IV cyclophosphamide for non-cancer indications This will be progressed at the Joint PB meeting.</p> <p>e) HMDS Service Update –</p>	<p>ACTION: NR to update Objectives within Annual Plan.</p> <p>ACTION: NR to arrange joint PB meeting with SACT PB in October 2016.</p> <p>ACTION: AH to forward dates of future GP Educational Events to NR.</p> <p>ACTION: AH to assess validity of E-Learning package for GPs.</p> <p>ACTION: MD to send response to Steven Elliott</p> <p>ACTION: NR to send Doodle poll of possible dates for Joint PB meeting to</p>

<p> Briefing re HMDS - 25 Aug 2016 (3).doc</p> <p>JB was not present but had provided the above summary report stating the current position. JB will be invited to attend the next PB to present a summary of the project delivery.</p> <p>f) Capacity Audit reviews Pennine audit outstanding – to be provided at next PB meeting.</p> <p>   Salford_Capacity_Audit_1516.docx CMFT_High_Intensity_Chemotherapy_Capacity_Audit_1516.docx Christie_Capacity_Audit_1516.docx</p> <p>The above reports were reviewed and discussed. Christie observations:</p> <ul style="list-style-type: none"> • # of patients treated admissions increased • Mortality rates decreased • Marked increase in patients attending local A&E (Possible issue with bed availability – JT to investigate). <p>CMFT observations:</p> <ul style="list-style-type: none"> • Improvement from previous year • In September 2015 a further 8 beds were assigned to Haematology thereby reducing the # of patients being assigned non-designated beds. • Currently have 26 beds assigned to Haematology and are developing a business case to increase further. • Currently completing a separate audit on triage calls as most patients are admitted from the Day Unit (open 7 days) as opposed to A&E. • 30 Day Mortality figures not included within report – to be provided. <p>SRFT observations:</p> <ul style="list-style-type: none"> • Majority of admission through A&E • 38.8% direct to designated beds • Out-of-hours issue- disparity as Bolton patients do not have 24hr access <p>The Board agreed that a single template should be used by all trust for future Capacity Audits. The Christie template was agreed to be used.</p> <p>g) Clinical Guidelines No new guidelines reviewed</p> <p>h) Osteonecrosis of the jaw in myeloma XI participants SW stated that he has secured participants for the audit. SW stated that initial findings are that more patients than expected are being found with this condition. SW is extending the audit and will continue to feedback to the PB.</p>	<p>all.</p> <p>ACTION: MD to invite JB to attend the next PB to present a summary report of the position of the HMDS project.</p> <p>ACTION: Pennine to update capacity audit and forward to MD/NR.</p> <p>ACTION: NR to send Capacity Audit Template to all.</p> <p>ACTION: JT to coordinate OOH audit through nurses group.</p> <p>ACTION: SW to provide further updates on audit at next PB meeting.</p>
<p>6. AOB None stated.</p>	
<p>Date of next meeting: TBC (Joint meeting with the SACT Pathway Board)</p>	