

Greater Manchester Cancer Children's pathway board Minutes

Held on Wednesday, 28 June 2017
Ward 84 Seminar Room
RMCH

Present: Bernadette Brennan, Consultant Paediatric Oncologist (Chair),
Sue Crook, Matron, PTC
Susan Kafka, Principal Pharmacist, PTC
Adrienne Hickman, Macmillan Nurse, PTC
Julia Whillis, Macmillan Nurse, PTC
Charmilla Sugden, Consultant Paediatrician, Royal Preston Hospital POSCU
Heather Houston, Operational Manager, PTC
Sue Cawley, Ward Manager, Blackpool POSCU
Jayne Hopewell, Consultant Paediatrician, Blackpool POSCU
Lorraine Sanderson, Sister, Blackpool POSCU
Vanessa Holme, Consultant Paediatrician, East Lancs POSCU
Andrea Stevenson, Macmillan Nurse, PTC
Naomi Allen, Paediatric Outreach Nurse, Royal Preston Hospital POSCU
Natalie Stringfellow, Clinical Educator, PTC
Guy Makin, Senior Lecturer in Paediatric Oncology, PTC
Janet Clucas, Sister, Royal Preston Hospital POSCU

Apologies: Tasneem Khalid, Principal Pharmacist, PTC
Jo Hewitt, Ward 84 OPD Manager, PTC

Dr Brennan welcomed everyone to the Board. The Children's Cancer Pathway Board acts as a strategy group for identifying issues within the PTC region and POSCUs and action. There is a requirement for the Board to meet quarterly and therefore meetings will be arranged as such for 2017/2018.

1. **Minutes of last meeting** – Minutes from March 2017 meeting agreed
2. **Parent/Patient Representative** – We currently do not have either a parent or patient representative for the Board. Discussion around how to recruit a parent representative and the potential to recruit a teenage representative. **ACTION: To consider advertising by way of a poster at the PTC and POSCU's asking representatives to commit for a period of 12 months. Macmillan Team**
3. **Objective no 1 – Improving outcomes / survival rates**
 - a. **Timely access of new patients to PTC – Med Student Project.** JDG advised that this audit has now commenced. BB asked for the group to consider other audits, including nursing and POSCU-based audits, and advised that support could be given by the MDT Co-ordinator for the PTC. **ACTION: POSCU's to bring any audit ideas to next meeting.**
 - b. **New form for Suspected Cancer.** Further to the form that BB tabled at the last meeting, which was a draft of a new form for GPs to refer patients who present to them with a

suspicion of cancer. VH confirmed Blackburn have reviewed the form and are now using this. The idea is to encourage GP to phone and discuss the referral with the appropriate team before referring on the HSC205 pathway.

4. Objective no 2 – Improving the patient experience

- a. **Current patient experience exercise** – This is rolled out throughout the year at PTC and the most recent results are in for analysis.
- b. **POSCU Patient Experience exercise** - Blackburn, Preston and Blackpool have their own version of questionnaire. The End of Treatment survey has been finalised and posted to patient. VH will update in regards to this at the next meeting. The Macmillan Team also meet with parents at the end of treatment and could give out questionnaires to families.
ACTION: VH will send summary of Blackburn end of treatment survey results to HH before the next meeting and forward the questionnaire to Preston.
- c. **POSCU MDT meetings** – All POSCUs meet regularly. AS reported that the ELHT meeting work well. They all have leaflets to give to patients which have recently been updated.
ACTION: HH to share all leaflets with each POSCU.
- d. **Communication** – POSCU representatives reported that correspondence for patients with leukaemia is not routinely shared with them. **ACTION: HH to look at what information is currently sent out.**
- e. **Chemotherapy Group** – Ambulatory chemo. BB is to attend a meeting in London in relation to ambulatory chemo. **ACTION: BB to feedback info at next meeting.**
IV chemo - VH reported that Blackburn have looked at this and feel it would provide good patient experience. However, lots of work was required to move to Level 1 and so would need to have the aspiration to move to Level 2.
FBC Tel clinics: AS reported these are moving forward, after a few issues to begin with. Families are now getting used to the system. Burnley has 6 patients, Preston has 6 patients and Blackpool have 6 patients set up on the clinics and all POSCUs reported this system was working well.
- f. **Patient Info Needs** – The current information needs looking at and updating. It was felt that separate guidance was needed on management in relation to the antibiotic policy.
ACTION: Discuss at the CSU Clinical Effectiveness Meeting. SK to review current info and share with the POSCUs.
- g. **Information on Manchester Cancer Website/Guidance** – Information and guidance documents need updating and then uploading to Manchester Cancer Website. **ACTION: SC and HH to look at guidelines to upload.-Joanna Thompson will start to pull documents together**
- h. **Peer Review 2017** - The PTC are currently working through the Operational and Annual reports and supporting documentation.

5. Objective no 3 – Research and clinical innovation

- c. **Phase I/II Centre development.** This is moving forward and a virtual network has been formed between Leeds, Liverpool, Sheffield and Manchester which will increase the availability of trials.

- d. Objective no 4 – Improving & standardising high quality care across the whole service**
- a. **CAPACITY** – Stem Cell and Gene Therapy Unit to open on 04 July 2017. This will create up to 4 extra beds in the future. Two extra beds will open immediately. Nurse recruitment is ongoing. Also, Ward 84 inpatients are actively recruiting for staff nurses in order to increase bed capacity to 29 during the week.
 - b. **POSCU – Capacity.** Blackpool and Blackburn have struggled recently with capacity.
 - c. **MBHT** – VH confirmed she has sent all relevant documents in relation to POSCU to MBHT.
- e. Date and time of next meeting:** Wednesday 04 October 2017.