

Psychological Support and Mental Health Pathway Board

Terms of Reference

These terms of reference were agreed on 7th March 2018 by Dr Paedraig McDonnell, Pathway Clinical Director for Psychological Support and Mental Health in Cancer, and Mr David Shackley, Medical Director of Greater Manchester Cancer, on behalf of the Greater Manchester Cancer Board. The terms of reference will be subject to future review.

1. The Clinical Pathway Board

- 1.1. The Psychological Support and Mental Health in Cancer Pathway Board is a cancer care specific board with responsibility for the delivery of the Greater Manchester Health and Social Care partnership 5 year cancer plan. This will improve cancer outcomes and patient experience for local people across Greater Manchester and areas of Cheshire. The Pathway Board is led by a Pathway Clinical Director and is formed of a multidisciplinary team of clinicians, service users and other staff from all stakeholders involved in the delivery of cancer care Psychological Support and Mental Health in cancer care in Greater Manchester.
- 1.2. The Psychological Support and Mental Health in Cancer Pathway Board reports into and is ultimately governed and held to account by the Greater Manchester Cancer Board.

2. Purpose of the Clinical Pathway Board

- 2.1. The board will be responsible for reviewing the GMC 5 year Cancer plan on behalf of their cross cutting group. They will agree an action plan, relevant to their board, to ensure the successful delivery of the plan.
- 2.2. The board will project plan and monitor delivery of their action plan, reporting on progress as requested.
- 2.3. The purpose of the Pathway Board is to improve the psychological support and mental health aspects of cancer care for patients on Greater Manchester cancer pathways.
- 2.4. The Board will represent the interests of local people with cancer or living with and with and beyond their disease, whilst respecting their wider needs and concerns.

- 2.5. The Psychological Support and Mental Health in Cancer pathway board will be the primary source of clinical opinion on this pathway for the Greater Manchester Cancer Board and Greater Manchester's cancer commissioners.
- 2.6. The Pathway Board will gain a robust understanding of the key opportunities to improve outcomes and experience by gathering and reviewing intelligence about the Psychological Support and Mental Health in cancer pathway.
- 2.7. The Pathway Board will also promote equality of access, choice and quality of care for all patients within Greater Manchester, irrespective of their individual circumstances.
- 2.8. The Board will also work with cancer commissioners, when necessary, to provide expert opinion on the design and transformation of any commissioning pathways, metrics and specifications.

3. Role of the Clinical Pathway Board

The role of the Psychological Support and Mental Health in Cancer Pathway Board is to:

- 3.1. Represent Greater Manchester Cancer professional and patient communities for Psychological Support and Mental Health in Cancer.
- 3.2. Respond to and support the implementation and delivery of the Greater Manchester Cancer 5 year Cancer plan
- 3.3. Identify specific opportunities for improving outcomes and patient experience and convert these into agreed objectives and a prioritised programme of work.
- 3.4. Gain approval from the Greater Manchester Cancer Board for the programme of work and provide regular reporting on progress.
- 3.5. Design and implement new services for patients where these progress the objectives of commissioners and Greater Manchester Cancer, can be resourced, and have been shown to provide improvements in outcomes that matter to patients.
- 3.6. Ensure that appropriate diagnosis and treatment guidelines are agreed and followed by all teams in provider trusts, and are annually reviewed.
- 3.7. Ensure that all providers working within the pathway collect any pathway dataset measures to a high standard of data quality and that this data is shared transparently amongst the Pathway Board and beyond.
- 3.8. Promote and develop research and innovation in the pathway, and have agreed objectives in this area.
- 3.9. Monitor performance and improvements in outcomes and patient experience via an agreed set of metrics, understanding variation to identify areas for action.

- 3.10. Escalate any clinical concerns through provider trusts.
- 3.11. Highlight any key issues that cannot be resolved within the Pathway Board itself to the Medical Director of Greater Manchester Cancer for resolution.
- 3.12. Ensure that decisions and work programmes, involve clearly demonstrable patient participation.
- 3.13. Share best practices with other Pathway Boards within Greater Manchester Cancer and if necessary with other cancer alliances.
- 3.14. Support and implement all suitable cross-cutting initiatives (e.g. work streams in living with and beyond cancer and early diagnosis).
- 3.15. Support the work programme of Cancer Education Manchester in exploiting opportunities for improved education and training related to the pathway and implementation of new educational initiatives.
- 3.16. Provide an regular report on the response to and implementation the GM Cancer plan, outcomes and patient experience, including an overview of progress, opportunities, risks and threats to success and any other issues. .

4. Membership principles

- 4.1. All provider organisations of Greater Manchester Cancer will have at least one representative on the Pathway Board unless they do not wish to be represented.
- 4.2. All specialties and professions involved in the delivery of the pathway will be represented.
- 4.3. The Board will have at least one patient or carer representative within its membership.
- 4.4. One professional member of the Pathway Board will act as a Patient Advocate, offering support to the patient and carer representative(s).
- 4.5. Where necessary and appropriate the board can agree to invite other nominated members onto the board from outside of the approved membership categories, such as from charities, industry and research bodies.
- 4.6. The Board will have named leads for:
 - TYA
 - Paediatrics
 - Specialist nursing
 - Palliative care
 - Education
- 4.7. It is possible for an individual to hold more than one of these posts. The Pathway Clinical Director is responsible for their fair appointment and holding them to account.

- 4.8. These named leads will link with wider Greater Manchester Cancer Boards for these areas where they exist.
- 4.9. All members will be expected to attend regular meetings of the Pathway Board to ensure consistency of discussions and decision-making (meeting dates for the whole year will be set annually to allow members to make arrangements for their attendance).
- 4.10. It is expected that board members will attend all meetings in a 12 month period. In the instances when board members are unable to attend they may send identified deputies, having informed the Pathway director before the meeting.
- 4.11. When a board member's attendance is less than 67% in 12 month period, the Pathway Director, in collaboration with Greater Manchester Cancer Medical Director, reserves the right to terminate their board membership and liaise with the relevant member organisation to submit a new nomination.

5. Frequency of meetings

- 5.1. As a minimum the Psychological Support and Mental Health in Cancer Pathway Board will meet at least once every three months.

6. Quorum

- 6.1. Quorum will be the Pathway Clinical Director(or nominated deputy) plus fifty per cent of the named members of the Pathway Board or their named deputies.

Please see attendees below:

Name	Trust
Padraig McDonnell (PM)	Pathway Director
Anna Mackland (AM)	TYA Services, The Christie
Anne Crook (AC)	Counsellor/ Cognitive Behavioural Therapist The Christie
Bev Meenan (BM)	Stockport
Claire McDonald (CMc)	Clinical Psychologist, Maggies Cancer Care Centre, Oldham
Claire Rehan (CR)	Bolton FT
Coleen Quinn (CQ)	Patient Representative
Colsom Bashir (CB)	Clinical Psychologist, The Christie
Helen Tuzio (HT)	Bridgewater NHS
Julie Wisely (JW)	Clinical Psychologist, GMMH
Laura Cramond (LC)	Bolton FT
Michelle Eckersley (ME)	CNS, MFT
Pat Jones (PJ)	Lead Cancer Nurse, MFT

Ric Taylor (RT)	Trafford CCG
Robin Muir (RM)	Clinical Psychologist, Maggie's Cancer Care Centre, Manchester
Sam Parkin (SPar)	Beechwood Cancer Care Centre
Sarah Kelly (SK)	Clinical Psychologist, Pennine Care
Sonia Patel (SP)	Clinical Psychologist, MFT
Tania Hawthorn (TH)	The Christie
Tracy Acton (TA)	Service Lead, Macmillan 1:1 Team Oldham
Vanessa Hickson (VH)	CNS, Tameside
Victoria Wilmot (VW)	Service Lead - Palliative Care Counselling Service, SRFT
In attendance	
Michelle Leach (ML)	GMC Pathway Manager
Natasha Smith (NS)	GMC Macmillan User Involvement Manager

7. Communication and engagement

- 7.1. Accurate representative minutes will be taken at all meetings and these will be circulated and then validated at the next meeting of the Board.
- 7.2. All minutes, circulated papers and associated data outputs will be archived and stored by the Pathway Clinical Director and relevant Pathway Manager.
- 7.3. The Pathway Board will design, organise and host at least one open meeting per year for the wider clinical community and local people. This meeting or meetings will include:
 - An annual engagement event to account for its progress against its work programme objectives and to obtain input and feedback from the local professional community
 - An annual educational event for wider pathway professionals and interested others to allow new developments and learning to be disseminated across the system
- 7.4. Representatives from all sections of the Greater Manchester Cancer clinical and professional bodies will be invited to these events, as well as patient and public representatives and voluntary sector partners.
- 7.5. An annual report will be created and circulated to the Medical Director of Greater Manchester Cancer as agreed.
- 7.6. The agendas, minutes and work programmes of the Pathway Board, as well as copies of papers from educational and engagement events, will be made available to all in an open and transparent manner through the Greater Manchester Cancer Clinical Pathway boards website.

8. Administrative support

- 8.1. Administrative support will be provided by the relevant Pathway Manager with the support of the Greater Manchester Cancer Clinical Pathway Boards core team. Over the course of a year, an average of one day per week administrative support will be provided to each pathway board.

Appendix – Greater Manchester Cancer structure

