

Greater Manchester **Cancer**

Urology Pathway Board

Pathway Board Meeting

Minutes of the meeting held on 4th July 2018

Humphrey Booth Lecture Theatre, SRFT

Members in attendance

Satish Maddineni (Chair)	Pathway Director	Rose Garvey	User representative
Mike Thorpe	User representative	Tony Elliot	Consultant Oncologist
Jane Booker	CNS	Jacob Cherian	Consultant Surgeon
Anna Tran	Consultant Oncologist	Amar Mohee	Consultant Surgeon
Mamoon Siraj	Consultant Surgeon	Steve Elliott	GP representative
Tom Waddell	Consultant Oncologist	Euan Green	Consultant Surgeon
Noel Clarke	Consultant Surgeon		

In attendance

James Leighton	GM Cancer	Astrid Greenberry	Macmillan Bolton
Natasha Smith	UI manager	Jo Blood	SRFT
Alex Hoyle	SPR SRFT		

1. Welcome and introductions

SM welcomed all to the meeting and noted the apologies received. SM welcomed Mr Mohee (AM) to the meeting as the representative for MFT. He has replaced Mr Burke (DB) who has stood down. He also confirmed that Mr O'Flynn (KO'F) has also stepped down and will be replaced by Mr Green (EG).

On behalf of the Board SM thanked DB and KO'F for all of their contribution to the work of the Board over the last few years.

2. Minutes of the previous meeting and matters arising

The meeting agreed that the minutes were an accurate record and there were no matters arising.

CWT Standards – JL and JB explained that the CWT standards outlined at the May meeting had been amended and would now reflect what had previously been in place in GM.

3. Bone Profile study

Discussion summary	<p>AH presented the preliminary study data of the effect of hormone treatment on bone mineral density and other known associated risk factors.</p> <p>He explained how the cohort was identified, the cohort profile and how the study was undertaken. He then outlined the findings of the study namely that</p> <ul style="list-style-type: none"> • 25% had a deterioration in their BMD • there was an increase in BMI and waist circumference • No real difference in performance status • There were 4 deaths that would be reviewed • Poor uptake of the “Can Move” initiative <p>The Board then had a wide ranging discussion on this study which covered the use of locally prescribed Vitamin D and Calcium as well as the 4 patients that died.</p> <p>The Board were disappointed with the poor uptake of the “Can Move” initiative and were keen that this was addressed by the ERAS+ project.</p> <p>SM suggested that the Board take this forward and develop it into a policy and advice document. AM agreed to take responsibility for this with the Board.</p>
Conclusion	The Board noted this presentation and thanked AH for his work.
Actions & responsibility	AM to develop a policy document for the Board

4. Prostate pathway – Project initiation

Discussion summary	<p>SM outlined to the Board the process that was now in place for the implementation of the prostate pathway. He explained that there was some GM transformation funding available to support the roll out of the pathway.</p> <p>The Board went onto review the proposed pathway and possible impact on service provision. The Board reviewed the proposal and the bid for funding.</p> <p>The Board wanted to ensure that the bid supported the development of the diagnostic hubs and increasing the template biopsy capacity. It also explored the need for pathway navigators, educational support and research and evaluation.</p>
Conclusion	The Board noted this presentation
Actions & responsibility	SM to submit a bid for funding to GM Cancer

5. Template Biopsy policy for GM

Discussion summary	<p>SM explained that with the identified increase in Template biopsies the Board felt that an operational policy would help manage delivery. The Board provided an update on current practice and provision.</p> <p>Following this discussion JC agreed to liaise with colleagues and draft a policy.</p>
Conclusion	The Board noted this discussion
Actions & responsibility	JC to present to the next meeting of the Board

6. Transformation update

Discussion summary	<p>SM confirmed the implementation group continued to meet and a meeting had just taken place that morning. He explained that the phase 1 of the implementation plan was now broadly agreed. This would undertake a review of the MDT infrastructure and that a survey of stakeholders on this was being provided.</p> <p>The Board had a wide ranging discussion on the plan and how it would be delivered and the potential impact on services. TE asked how the MDT output would be reported and SM confirmed that this was discussed and a solution was being explored to standardise this report and provide ease of access.</p>
Conclusion	The Board noted this report.
Actions & responsibility	There were no actions for the board.

7. Research update

Discussion summary	<p>TE provided an update to the tabled paper on Q4 17/18 recruitment. He outlined the open trials for Testes and how recruitment was at Bolton with little at the Christie. He agreed to explore why this was the case.</p> <p>The Board noted the rest of the recruitment figures and noted that DETECT 1 & 2 studies were not open at all sites.</p> <p>For those trials in set up he informed the Board on a bladder trial that would shorten the pathway and wished to ensure that recruitment was maximised for this.</p>
Conclusion	The Board noted this report.
Actions & responsibility	There were no actions for the board.

8. CWT standards - New CWT standards

Discussion summary	JL provided the board with an update report on the new metrics that will be used to measure CWT standards. He explained that diagnostic Trusts have 38 days to diagnose/refer and treating Trusts have 24 days to treat.
Conclusion	The Board noted this report.
Actions & responsibility	There were no actions for the board.

9. User involvement update

Discussion summary	<p>NS updated the Board on the recent UI pathway Board representatives meeting, which took place recently. This reviewed how the objectives could be delivered and how representatives could undertake a piece of work on behalf of the Board.</p> <p>MT felt it was a useful meeting as it allowed all the representatives to share experience and learning across all the Boards. SM raised the issue of UI on the transformation implementation group, which currently is not supported. The Board felt that this should be addressed to include UI.</p>
Conclusion	The Board noted this report and asked NS to progress UI on the implementation group
Actions	NS to progress the user involvement on the implementation group.

10. Any other business

JL confirmed that NHS E had set up a share and learn webex on July 17th. He confirmed it would be delivered by the team at UCLH.

AG asked the Board about the standardised treatment summary and how much progress had been made on this. JB confirmed that progress had been made but some refinement was required on a few sites.

9. Date and time of next meeting

Tuesday 11th September 2018

14.00- 16.00hrs Seminar room 1, Mayo Building, Salford Royal NHS FT