

UCLH Cancer Collaborative



Meeting of the London Cancer Haematology Pathway Board

Date: March 8th 2017, 16:30-17:30

Venue: 6th floor west, 250 Euston Road, London, NW1 2PG

Chair: Ronjon Chakraverty

1. Welcome and introductions and minutes from last meeting

Previous Minutes agreed as true record.

- Previous actions discussed. SE updated on the patient information films. The scripts have now been translated and subtitles are now in the process of being transposed. The films will then be reviewed by translators before being published online. The group considered where the films should be hosted and how they should be publicised. Trust websites, network sites, the Cancer Vanguard website, Charities should be considered. We could also encourage CNS's to include a link to the films in information given to patients. It should also be explored how to offer to patients in clinic and waiting rooms. Consideration also needs to be given to patients that cannot access website perhaps by offering access to iPads in clinic.
- Barts and UCLH CNS' opinions on the above should be sought. SE to ask Andie Guy at Barts, RC to suggest UCLH contacts.

ACTION: SE to put together options appraisal for the publicising and hosting of patient information films. SE to seek CNS's opinion on options.

SE to take appraisal and opinion to board members.

Structured radiology reporting audit discussed. The board has previously expressed a wish for CT reports to follow standard guidelines; variation is a particular issue from referring Trusts. PET CT reports have been received; however, CT reports are still outstanding. The board felt the CT reports should be audited first with a follow up on PET CT to possibly follow.

ACTION: SE to request outstanding CT reports and to Farzana Rahman for presentation at June Board. Identify nuclear medicine radiologist to help with PET audit. Nominations to be sent to SE/RC.

- Previous action 'SE to establish working group of Lymphoma Consultants from BCF, BHRUT, North Middlesex and UCLH to cross check processes and breach reasons' discussed. The group should be asked to review the whole pathway. SE is to add Will Townsend to the distribution lists. Other recommendations of membership to be sent to SE.
- Whilst there will be site-specific issues, there are likely to be commonalities such as issues with GI
 referrals. Improvements are possible, e.g. UCLH have made changes radiologists are now asked to
 recommend biopsy of specific lymph nodes.

ACTION: SE to invite Neil Chauhan to lymphoma working group. Will Townsend and Rebecca to nominate members.

Timed pathways discussed. Due to a change of emphasis within London Cancer timelines for timed
pathways development have shifted. Members asked to consider whether we want to incorporate
timed pathway into guidelines. Timeframes will be affected from Trust to Trust depending on
whether they perform core biopsy or incisional biopsy.

ACTION: RC to discuss whether to include timed pathways with guideline authors.

- Action around 7 day SIHMDS development discussed and whether we diagnosing acute leukaemia quickly enough? A 7 day service for flow is easier to implement and easier to make a business case for than molecular. The board felt that maintaining a good flow service bypasses the need for a 7day molecular pathology.
- WK had obtained the day of the week of the PML RARA test were requested. Figures demonstrated these were largely evenly distributed across the week.
- Before the meeting, WK confirmed that we now have good evidence for a business case for a 7-day service for flow. Leeds already do so, WK will liaise with their team.
- The board would then to plan for delivery between UCLH, Barts, BHRUT.

ACTION: RC to speak to Tom Butler and WK. View from PB is Flow as a priority.

- Patient experience specification discussed. AG has been unable to make time for a review with Anthony Nolan and SE. LB is to attempt to free up time for AG. If not the visit should take place at UCLH.
- Previous action around GP education films discussed. Greater Manchester Cancer have created a
 portal for GP information including interactive consultation role plays. The board agreed it would
 be positive to link our work into this larger project.

ACTION: SE to link RC with a GP education lead in Manchester

2. Pan London Guideline Launch Event – June 6th

- Pan London guidelines development has involved two workstreams, combining LCA and London Cancer documents and updating where necessary.
- 120 people are expected to attend including consultants from referring Trusts and registrars.
- The board considered how to enable registrars to attend and suggested capping clinics. However a training day has also been scheduled for June that month so hard to guarantee.
- Format of break-out sessions discussed. The original plan was for authors to present key changes, receive feedback and subsequently make final changes. The sessions would run in parallel and last for 45 minutes.
- Discussion as to whether 45 minutes was sufficient. It was agreed that the opinions of referring units should be sought before the event.
- Concern also expressed that some delegates may want to come to more than one breakout session which the current format does not allow. Suggestions included a separate meeting for lymphoma, which is thought to be the biggest source of variation in London, combining breakout sessions with lunch or moving them to the end of the day and having a later finish.
- The board confirmed that pharmaceutical representatives should be able to attend the talks but not the breakout sessions.

ACTION: RC to send clarification email emphasising the need for authors to involve colleagues from across London Cancer to input on guidelines prior to the event.

Pharmaceutical representatives should not attend the breakout sessions.

3. Trials

• Rakesh Popat discussed an NIHR-funded pilot to create a web portal for clinical trial information across the North Thames region.

- The portal would need to secure funding for continual updating and maintenance. Challenges include confidentiality issues related to commercial trials. Using information on 'clinicaltrials.gov' would protect against any claims. Solely EU funded studies are also difficult to capture.
- The PB expressed an interest in seeing a demo of the program and RP indicated that he would arrange this.

ACTION: RP to arrange a demo of trial application program at the next board

4. Industry Collaboration Projects

Discussion points:

- Cellgene are working on a dashboard as part of the 'pharma challenge' that tracks the progress of patients (including highlighting sub optimal use) on Lenidomide.
- Brian Howson from Novartis is working with Jonathan Lambert and Mallika Sekhar to develop IT tools
 that enable patient stratification and data about outcomes. Pathway design and optimisation would
 involve a DARSI fallow.
- A DARSI fellow is working across NLDN to refine pathways and detail outcomes according to International Consortium for Health Outcomes Measurement (ICHOM) standards.

5. Next Meeting

Thursday 15 June 2017, 16:30-18:00, 6th Floor Central Meeting Room (East), 250 Euston Road, NW1 2PG

ACTION LOG

Action reference	Action	Owner	Date Due	Status
Sept-07	Trust representatives to carry out an audit of 10 patients with lymphoma and nodel disease to assess the radiology reports.	Trust reps	30-Nov- 16	Ongoing, related actions below
Nov- 01	SE to follow up after RC has spoken to Mike Dennis re patient information films.	SE/RC	Next PB	Complete
Nov- 02	SE to email MDT leads/coordinators, DH to represent BCF re nodal disease audit.	SE	Next PB	Ongoing, delayed to June PB
Nov- 03	SE to establish working group of Lymphoma Consultants from BCF, BHRUT, North Middlesex and UCLH to cross check 62 day processes and breach reasons.	SE	Next PB	Ongoing
Nov- 04	SE to circulate pathways in December	SE	December	Complete, pathways to be considered for pan Londonguidelines
Nov- 05	SE to coordinate with WK re algorithm and EP and MS re business case. SE to update in Feb	SE	Next PB	Complete
Nov- 06	WK to discuss benchmarking with Leeds.	WK	Next PB	Complete
Nov- 07	SE to liaise with HO re RFL information mapping.	SE	Next PB	Complete, new action supersedes this action

	SE to report back at next pathway board.			
Nov- 08	Board members to forward HAH common questions that they receive from GPs. Script to be circulated to members by SE.	All/ SE	Next PB	Complete
Mar 01	SE to put together options appraisal for the publicising and hosting of patient information films. SE to seek CNS opinion on options. SE to take appraisal and opinion to board members.	SE	Before next PB	
Mar 02	SE to request CT reports from outstanding Trusts and to Farzana Rahman for presentation at June Board. Identify nuclear medicine radiologist to help with PET audit. Nominations to be sent to SE/RC.	SE/AII	June PB	
Mar 03	RC to speak to Tom Butler and WK. View from PB is Flow as a priority.	RC		
Mar 04	RC to send clarification email emphasising the need for authors to involve colleagues from across London Cancer to input on guidelines prior to the event. Pharma should not attend the breakout sessions.	RC	6 weeks before June 6 th event	
Mar 05	SE to link RC with a GP education lead in Manchester	RC	Before next PB	
Mar 06	RP to arrange a demo of trial application program at the next board	RP		

Attendees

Name	Trust/Organisation
Ronjon Chakraverty	UCLH/ RFH
Beth Payne	UCLH
Declan Sheehan	Patient Representative
Gilly Angell	Patient Representative
Lorraine Beirne	Barts Health
Rebecca Auer	Barts Health
Kate Cwynarski	UCLH
Simon Evans	London Cancer
Rakesh Popat	UCLH

Apologies

Name	Trust/Organisation
Ali Rismani	Whittington
Chiara Debiase	Anthony Nolan
Finbar Cotter	Apologies
Hassan Al-Ashimi	GP
lan Haig	Barts Health
John Gribben	Barts Health
Maria Calaminici	Barts Health
Matthew Smith	Barts Health
Neil Rabin	Barts Health
Wai Keong Wong	UCLH