

Meeting of the *London Cancer* HPB Tumour Pathway Board

Date: **February 24th 2017, 14:00-16:00**

Venue: **5th Floor Trustees Board Room, 250 Euston Road, London, NW1 2PG**

Chair: **Satya Bhattacharya**

1. Welcome and introductions and minutes from last meeting

- 27/09/2017 minutes agreed as true record.

2. Timed Pathway Sign Off

- Pathway developed by Dinesh Sharma, Satya Bhattacharya, Helen Allibone and Simon Evans discussed. The pathway aims for treatment by day 45. The last 24 days are based on the pathway currently in use at The Royal Free. It is an aspirational tool but when followed it should help reduce the number of 62day breaches.
- Query as to whether one pathway can cover both pancreas and HCC given their differences discussed.
- Issue that numbers are too high for the front stage of the pathway to achieve 7 day 1st OPA deadlines. More flexibility may be needed at this front stage.
- The group commented that the pathway is not comprehensive enough to be a treatment algorithm. However it does help identify the key milestones against which we can audit ourselves.

ACTION: SE to draw out key points into a more simplified pathway.

3. Development of Pan Vanguard Guidelines

- Since the last board there has been a drive towards development of pan vanguard guidelines.
- There was an agreement that this was a positive development. The board recommended naming a lead from each vanguard site to review one set of guidelines each. It is not anticipated that there will be major differences between each set of guidelines.
- The working groups of leads should comprise a surgeon, an oncologist and a gastroenterologist/heptologist.
- Tim Meyer volunteered to represent London Cancer on HCC guideline development.

ACTION: SE to take suggestion for working group membership to RM Partners.

4. Joint Audit and Training Meetings & Network Education Session

- SB reiterated the desire to re-activate joint audit and training meetings between RFL and RLH, members agreed to re-launch these sessions. The first meeting should be held in May/June with a second in September/October
- The first session should be held in a morning with a wider network education session in the afternoon.
- The value in a wider education afternoon lies in informing the conversations clinicians from non-specialist hospitals have with patients. Furthermore the wider network will want a steer from the

specialists as to how to improve outcomes. The network event must therefore ensure it has direct clinical and practical relevance.

- RFL may be able to host the day in their Atrium

ACTION: The first Audit and Training meeting to be followed by a network wide education event is to be held in June.

5. CRCLM

- Data provided by Barts and RFL discussed. The proportion of those discussed in MDT that subsequently underwent surgery is broadly similar at 37% and 40%.
- The board suggested that getting sector wide numbers of diagnosed colorectal liver mets may be more useful.

ACTION: SE/SB to discuss with Mick Peake and Ben Goretzki how it might be possible to get total numbers of colorectal liver mets diagnosed and operations for the whole of London Cancer.

6. Patient Experience Audit

- SE drafted a survey based on previous surveys created by Andrew Millar, Graham Wyles and John Lancaster amongst others.
- Optimal points to give the survey discussed. The survey should be split in two and given just after diagnosis and after first treatment.
- The board felt more could be done to tease patient opinions of medical care, to include care given by nurses, consultants etc.
- The survey should also consider the travel burden, patients will be travelling to different sites for investigations and treatment.

ACTION: The board recommends two surveys one looking at the first stage of the pathway, encompassing primary care.

The second should look at other issues such as travel, quality of care, ward cleanliness etc.

SE to set up meeting with GS, JL and CNS'.

7. Trial Recruitment

- Trial recruitment figures from the North Thames CRN discussed. The list of trials was thought to be comprehensive albeit some closed trials have been included. However the recruitment figures were lower than thought to be the reality.
- The board considered how to disseminate trial information to MDTs in order that they are well informed when discussing patients that may be eligible for trials.
- Currently the research faculty sends an email out with relevant trials. The board suggested using London Cancer as a conduit for a newsletter to be created by TM and DP which details trials to MDTs. This newsletter could then target the disengaged. This will help ensure equitable access across the network.
- The board reiterated the importance of fully explaining the purpose of clinical trials to patients. There is concern that patients commonly view trials as their last chance for a cure.

ACTION: SE to work with TM to put together a research portfolio newsletter.

8. AOB

- JL notified the board that a new patient support group, the 'Essex Pancreatic Support Network' has been established. The group can be found via Facebook. JL has asked CNS' to signpost the group to relevant patients.

9. Next Meeting

10th May 2017, 14.00-16.00, Trustees Board Room, 5th Floor, 250 Euston Road, NW1 2PG

Attendees

Name	Trust/Organisation
Satya Bhattacharya	Barts Health
Graham Wyles	Patient Representative
James Hodson	Princess Alexandra
Javaid Subhani	Basildon and Thurrock
John Lancaster	Patient Representative
Massimo Pinzani	University College London Hospitals
Dinesh Sharma	Royal Free London
Helen Allibone	Royal Free London
Tim Meyer	Royal Free London
Simon Evans	London Cancer

Apologies

Name	Trust/Organisation
Andrew Millar	North Middlesex University Hospital
Aileen Marshall	Royal Free London - Hampstead / UCLH
Aruna Dias	Barts Health
Cate Simmons	Princess Alexandra
Doug Thorburn	Royal Free London - Hampstead
Dominic Yu	Royal Free London - Hampstead
Elliott Westhoff	Royal Free London - Hampstead
Ian Renfrew	Barts Health

Name	Trust/Organisation
Jacqueline Ullman	Royal Free London - Hampstead
Kito Fusai	RFH
Mike Chapman	University College London Hospitals
Rosemary Phillips	Princess Alexandra Hospital
Yiannis Kallis	Barts Health