



NORTH AND EAST

London Cancer Nursing ERG

Date: **Wednesday, 22nd June 2016, 3.00-4.00**

Venue: **Meeting room 1, 3rd Floor, Macmillan Cancer Support, Vauxhall**

Chair: **Alison Hill, ERG Chair**

1. Welcome, Apologies and minutes of last meeting

AH welcomed members of the ERG, introductions were made and apologies heard. The minutes of the last meeting were accepted as an accurate record of proceedings. It was noted that there has been a lack of patient representation at Nursing ERG meetings for a while and that this needs to be addressed.

2. Level 2 Supervision/Clinical Discussion Groups

The LC Psycho-social Group has agreed that group size can be increased from 4-6 CNS, and the ERG agreed that was a good way forward. There is still some interest in increasing group size to 8 CNS but this might affect the evidence base, as there is less time for each individual to discuss a specific case.

It was agreed that it would be helpful to change the name to Clinical Discussion groups as this makes more sense to those outside cancer e.g. matrons/managers and can be linked to peer review standards. It was also agreed that it was appropriate as a standard for all CNS to attend level 2 supervision.

However, there are remaining problems with smaller sites where less psych support.

The other issue which the Psycho-social group had raised was whether the requirement to attend Advanced Communication Skills 2 day training before Level 2 training could be changed to attend Sage and Thyme as currently few (only UCLH/BHRUT) are running the courses. All agreed that this would be a good way forward in the short term but Advanced Comms should be an expectation of a CNS and as AH was training facilitators at UCLH and should be able to offer the course more widely by 2017 which should enable better uptake.

3. Recovery Package

NMUH have submitted their proposal to Macmillan for a post which will mean that all Trusts in London Cancer except RFH have a post. It will be important for these post-holders to meet as a Group and share and support each-other. Difficulties raised with HNA metric and the need for 31 day patients to be the priority. Some Trusts doing other non-target patients and numbers are therefore not correct. This is difficult as patients with most

need may not be target patients. NMUH offering to all patients-many patients decline. **AH to raise again with SC at LC.**

Treatment summaries these are currently only being undertaken by nurses which is a concern as the numbers increase .LCA website has some good templates which we could look at and consider. UCLH having problems with Inflex but all others are on Somerset.

4. Chemotherapy Competencies

The meeting to discuss this had been postponed as a number of people were moving on. It is still important that this work is undertaken to bring us in line or near to the LCA Competencies as it will be difficult to develop the London Passport otherwise. It was agreed that **AH would contact Lisa Dougherty at RMH** to get an update on their progress in reviewing and then we needed another meeting. But will need more chemo experts to join to advise?

ACTION: ALL Any suggested names to AH

5. Band 6 CNS roles

These were discussed at length. It was agreed that there is a continued need for succession planning as it is much harder now to recruit a Band 7 and often the compromise is a Band 6 who will need development. London Cancer still has the Succession planning Programme funded through HENCEL but it is currently being evaluated by LSBU. Should get the evaluation in late July-then we can review way forward.

ACTION: ALL to consider whether Band 6 posts should be called "Associate CNS" ACROSS ALL London Cancer Trusts

6. AOB

KH raised issue of transfer between Trusts and need for transfer template for CNS teams (enclosed).

AH raised that all Trusts should identify HENCEL funding for Cancer Patient Experience for 2016/2017.

All to check on funding

7. Next Meeting

Scheduled meeting on Monday 12th September at 3.00 immediately before the Pan London Lead Nurses Meeting at Selsdon Park. The meeting on the 8th September has been cancelled.

ACTION LOG

Action	Owner	Date Agreed	Status
Discuss patient representative attendance with Kellie Thomas	Alison Hill	14/04/2016	Patient recruited July 2016
Find out if PAH have connected facilitators and invite them to attend Alison Hill's training programme	Tina Smith	14/04/2016	2 trained in May 2016
Circulate an email to the Nursing ERG group outlining Psychosocial ERG proposal to up supervision group numbers to six and request ratification	Alison Hill	14/04/2016	Circulated April 2016
Share documents relating to enhanced supportive care CQUIN	Kathryn Hornby	14/04/2016	June 2016
Suggest names of chemotherapy experts to Alison Hill	All	22/06/2016	Ongoing
Consider whether Band 6 posts should be called "Associate CNS" ACROSS ALL London Cancer Trusts	All	22/06/2016	Ongoing

Attendees

Name	Role	Trust/Organisation
Monica Deckon (MD)		NMUH
Karen Phillips (KP)		Whittington
Sarah Pearson (SP)		Bartshealth
Linda Athey (LA)		Homerton
Alison Hill (AH)	Trust Lead Cancer Nurse/ERG Chair	UCLH

Apologies

Name	Role	Trust/Organisation
Tina Smith (TS)		PAH
Saran Evans (SE)		Bartshealth