

## Meeting of the *London Cancer* Psychosocial Expert Reference Group

---

Date: **Thursday 17<sup>th</sup> August 2017, 15:00-17:00**

Venue: 250 Euston Road, Ground Floor Central Meeting Room

Chair: **Mark Barrington**

### 1. Welcome and introductions and minutes from last meeting

MB welcomed members, introductions were made and apologies heard. The minutes of the last meeting were accepted as an accurate record of proceedings.

### 2. Review of action log:

Action status was updated as follows:

Action	Owner	Status
Contact SC regarding screen grab of eHNA	HM	Completed
Contact SC regarding delivery plan for Recovery Package and Stratified Follow-up	MB	Completed
Organise and circulate dates for a Level 2 train-the-trainers event	MB	Completed
Invite Sue Gibbons to join the ERG	MB	Completed

#### Discussion points:

- Level 2 familiarisation event took place yesterday at Barts. The next one will be held on 30<sup>th</sup> August at 51 Wimpole Street.

### 3. London Cancer / UCLH Cancer Collaborative update

#### Discussion points:

- SC updated the group on the Cancer Transformation Fund Bid. Release of funding from NHSE is still pending and is contingent on specific 62 day wait trajectories and conditions being met at pan-London level.

#### 4. Implementation of QoL measure

##### Discussion points:

- SC reported that there had been a successful bid to participate as a pilot site for a Quality of Life Metric. Administration of the QoL tool will begin in October and run for 15 months. UCLH and Barts will participate, as a requirement was that trusts should have a patient portal, so that patients can complete questionnaires at home or remotely. Patients will be between 12 and 24 months post cancer treatment for tumour groups breast, prostate and colorectal. There is no plan for clinical staff to review the completed questionnaire and this will be made clear to participating patients. If concerns arise from questionnaire completion, the patient will need to raise them at their next clinic appointment.

##### ACTION:

- SC to circulate the different versions (depending on tumour type) of the QoL tool

#### 5. Health and wellbeing events: Fear of recurrence

##### Discussion points:

- SC asked the group if there is any standardised content around fear of recurrence that could be implemented into HWBEs pan-London. Following some discussion, it was agreed that there should be material that encourages an exploration of:
  1. How common this fear is and how it should not be inappropriately pathologised.
  2. When it might be appropriate to seek additional help (e.g. when despite time and repeated 'clear' tests there appears to be either no reduction or a worsening of the fear).
  3. How other aspects of 'self management' advice (e.g. monitoring for symptoms) could be applied in an unhelpful manner (e.g. 'obsessive' checking for symptoms).
- MK offered to collate literature regarding fear of recurrence e.g. paper that CS said covers evidence of reduction of fear.

##### ACTION:

- SC to circulate HWBE guidelines
- MK to contact the ERG letting them know that he is collating links/references to literature available regarding fear of recurrence. Once collated, MK will distribute to the group

#### 6. Patient representation themes

##### Discussion points:

None

## 7. 2016/17 Workstreams

### Discussion points:

- The first Level 2 familiarisation event took place 16<sup>th</sup> August at Barts. Next is on 30<sup>th</sup> August.
- It has been agreed that all staff involved in delivering the new training will have the opportunity to sit in as observers first.

## 8. Planning 2017/18 workstream

### Discussion points:

MB noted that he had had no suggestions for alterations or additions to the proposed workstreams discussed at the last meeting. The 4 workstreams are as follows:

Workstream	Description
1. Quantify impact of Psychosocial workstreams	Collate data relating to the impact/outcome of past workstreams. Review data to inform on-going and future plans
2. Widen access to the 2017 video promoting better communication with children affected by cancer	Identify funding and then direct and oversee the production of non-English language versions of the video
3. Extend the depth and breadth of Level 2 CPD	<p>Agree on a standard format for the new 'crib sheet' templates that will be used by facilitators during <i>Clinical Discussion Groups</i></p> <p>Oversee the collection of crib sheets developed by the Level 2 facilitators across London Cancer</p> <p>Ensure that system level processes to support the delivery of Level 2 training/CDGs are in place (including a mechanism for evaluating the new crib sheets)</p>
4. Promote and support the implementation of the pan-London Psychological Care Pathway	<p>Continue to support the Macmillan Mental Health Clinical Lead in producing a pan-London pathway / service specification</p> <p>In 2018, work with Macmillan, TCST, commissioners and providers to promote the development.</p>

- MB noted that workstreams 2 and 4 were extensions of work from 2016/17 and that the respective leads, Pete Southern and Mark would continue in their roles. MB said he would email the ERG requesting volunteers to lead workstreams 1 and 3. After this, the Forum will be emailed to invite participation and the leads for workstreams 1, 2 and 3 will convene meetings to establish provisional plans. The aim is have plans in place by the next ERG meeting.

### ACTION:

- MB to email ERG to identify leadership for workstreams 1 and 3
- MB to email Forum to invite participation in the new workstreams
- Workstream leads to convene initial meeting of their groups to establish provisional plans

## 9. Collating outcome data

### Discussion topics

- SG noted that time could be saved if systems could be put in place to support the reporting on outcome data.

## 10. AOB

- MK informed the group that due to inadequate capacity (and continually increasing demand) the assessment waiting list at NELFT has been temporarily closed. Their risk register has been updated to reflect this.
- There was a general discussion reflecting on an apparent reduction in the allocation of clinical psychology trainees to cancer placements

## Next Meeting

Thursday 19th Oct 3-5pm - 47 Wimpole Street, Meeting Room, Basement, W1G 8SE.

## ACTION LOG

Action	Owner	Status
SC to circulate the different versions (depending on tumour type) of the QoL tool	SC	
<ul style="list-style-type: none"> <li>• SC to circulate HWBE guidelines</li> </ul>	SC	
MK to contact the ERG letting them know that he is collating links/references to literature available regarding fear of recurrence. Once collated, MK will distribute to the group	MK	
MB to email ERG to identify leadership for workstreams 1 and 3	MB	
MB to email Forum to invite participation in the new workstreams	MB	
Workstream leads to convene initial meeting of their groups to establish provisional plans	Leads	

## Attendees

Name	Role	Trust/Organisation
Clare Stevenson	Clinical Psychologist in Cancer Care	Homerton
Lallita Carballo	Clinical Head of the Macmillan Support and Information Service	UCLH
Liz Shaw	Psychologist	North Middlesex

<b>Name</b>	<b>Role</b>	<b>Trust/Organisation</b>
Marc Kingsley	Consultant Clinical Psychologist	NELFT/BHRUT
Mark Barrington	Consultant Clinical Psychologist	Barts
Mary Burgess	Consultant Clinical Psychologist	UCLH
Pauline McCulloch	Lead Colorectal Nurse	Homerton
Roxanne Payne	Project Coordinator	UCLH CC
Sharon Cavanagh	Programme Lead for LWBC and MICa	UCLH CC
Sue Gessler	Consultant Clinical Psychologist	UCLH

## Apologies

<b>Name</b>	<b>Role</b>	<b>Trust/Organisation</b>
Heather Munro	North Middlesex Hospital	<i>Apologies</i>
Daphne Earl	Patient Representative	<i>Apologies</i>
Sue Gibbons	Whittington	<i>Apologies</i>
Elaine Heywood	Royal Free	<i>Apologies</i>