

**Meeting of the PCA CUP Site Specific Group**

Thursday 8<sup>th</sup> November 2018

Lifton Farm Shop (Strawberry Fields Conference Room), Lifton, PL16 0DE

**FREEDOM OF INFORMATION**

*This group will observe the requirements of the Freedom of Information Act (2000) which allows a general right of access to recorded information including minutes of meetings, subject to specific exemptions. No one present today had any objections to their names being distributed in the minutes.*

**Draft Notes (to be ratified at the next SSG meeting)**

**CUP SSG Chair:** Dr Anne McCormack (AM)

Reference	Notes
1.0	<p><b>Welcome and Introductions – AM</b></p> <p>Please refer to separate attendance record via the SWCN website.</p>
2.0	<p>The draft minutes of the CUP SSG meeting held on the 2<sup>nd</sup> November 2017 were considered;</p>
2.1	<p><i>Ref: 3.1</i> It was agreed that an MDT referral proforma would be helpful to ensure that all relevant information about the patient is communicated fully at referral stage.</p> <p>The benefits of MDT referral proformas have been highlighted by Professor Martin Gore who is currently leading an NHSE MDT audit focusing on streamlining MDTs, and looking at new ways of working.</p>
2.2	<p><i>Ref: 3.8</i> There is concern that the pathway for referral to AOS remains unclear.</p> <p><b>Action:</b> AM to look at what work can be undertaken to increase awareness and communication with colleagues as to the remit of the AOS.</p>
2.3	<p><i>Ref: 4.0</i> It was suggested that a Histopathology pro-forma should be agreed in order to ensure that only relevant tests are undertaken and that relevant patient information is included.</p> <p><b>Action:</b> NK to discuss with AM</p>
2.4	<p><i>Ref: 6.1</i> AM reminded the group that her tenure as CUP SSG Chair would soon end and that a new chair will need to be appointed prior to the next meeting.</p> <p>It was suggested that the trusts need to ensure that chairs are supported in their role and that sufficient time is given when job planning additional work that arises from this in order to generate interest to undertake the role.</p>

	<p><b>Action:</b> NK to email the group for nominations and contact John Renninson to remind all member trusts that their teams must be supported to attend and chair SSGs.</p>
2.5	<p>The group suggested that in order to link in more with the CCG, more primary care practitioners should be encouraged to attend SSG meetings.</p> <p><b>Action:</b> NK to contact our GP/commissioners Joe Mays (NEW Devon CCG) and Eileen Deakin (Torbay and South Devon CCG) to see how this could be best facilitated [update: email sent 05.04.2019].</p>
3.1	<p><b>Updates</b></p> <p><b>MDT Streamlining</b></p> <p>NK highlighted the new NHSE national pilot project that is encouraging MDTs to review and streamline their MDT meetings in order to make the best use of the available time and resources.</p> <p>For further information, please follow this link to a <a href="#">short presentation</a>.</p>
3.2	<p><b>Living With and Beyond Cancer (LWBC)</b></p> <p>The LWBC initiative was discussed; the group felt that HNA's are relevant and patients should always be assessed with findings acted upon in the most appropriate way. It was felt that some elements of the recovery package are not as relevant or helpful to their patient cohort and therefore patient needs should be assessed on a case by case basis.</p>
4.0	<p><b>Acute Oncology Services</b></p> <p>The lack on an Acute Oncology MDT in Cornwall remains of concern.</p> <p><b>Action:</b> AM to obtain an update from Cornwall.</p>
5.0	<p><b>CUP SSG Constitution</b></p> <p>The CUP SSG Constitution document has been updated.</p> <p><b>Action:</b> NK to circulate the draft document to all members for comments.</p>
6.1	<p><b>Pan-Peninsula Audit</b></p> <p>The results of the Pan-Peninsula Audit were presented to the group and the use of C80 coding was discussed.</p> <p>It was suggested that once a cancer has been identified and a site specific diagnosis made, the coding should be updated.</p> <p>It was agreed that the C80 audit should be repeated next year.</p>

	<p><b>Action:</b> NK to send out a prompt to the group for the next set of retrospective data collection in May 2019.</p>
<b>7.0</b>	<p><b>Vague Symptoms Pathway</b></p> <p>The management of patients with vague symptoms was discussed and information kindly provided by Joe Mays was shared with the group.</p> <p>It was agreed that patients should not be seen by an Oncology Consultant before they have had a scan evidencing cancer as attending an oncology centre without a cancer diagnosis could be distressing for the patient and slow down their pathway.</p> <p>It was suggested that such patients should be first seen by an acute physician or referred for a CT by their GP.</p> <p>Rapid access diagnostic clinics for patients with vague symptom (such as that provided by <a href="#">Guys and St Thomas</a>) were discussed.</p> <p>The group were of the view that an abnormal CT TAP should be the minimum requirement for referral to Oncology services.</p> <p><b>Action:</b> David Sherriff has discussed vague symptom clinics with Joe Mays and will provide an update to the group at their next meeting.</p>
<b>8.0</b>	<p><b>SACT Protocols</b></p> <p>It was agreed that SACT regimes should continue to be agreed at local level but that the sharing of commonly used regimes would be helpful.</p> <p>For CUP patients, treatment regimens vary and it was therefore agreed that these should be decided on a case by case basis.</p>
<b>9.0</b>	<p><b>Research</b></p> <p>AM provided the group with a research update-for further information, please see the SWCN website.</p>
<b>10.0</b>	<p><b>AOB</b></p> <p>The group were of the view that the Acute Oncology Pathway requires clarity and that it would be beneficial to map out what services are offered by each trust in order to identify best practice models of care.</p> <p>NC shared information about the nurse led AOS service in North Devon and the benefits of nursing staff with advance clinical skills.</p>
<b>11.0</b>	<p><b>Date of next meeting</b></p> <p>The next meeting will be the annual joint SWAG/PCA CUP meeting-details to be circulated in due course.</p>

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