



NORTH AND EAST

**London Cancer Board – minutes**  
**14:30-16:30 Monday 23 November 2015**  
**Meeting room 2, UCLPartners, 170 Tottenham Court Road, London W1T 7HA**

<b>Members</b>	<b>Apologies</b>
Pelham Allen (PBA) - Chair	Tania Anastasiadis (TA)
Kathy Pritchard-Jones (KPJ)	Kate Hall (KH)
Amanda Begley (AB)	Sam Everington (SE)
Amanda Quincey (AQ)	Geoff Bellingan (GB)
Shahed Ahmed (SA)	Hilary Ross (HR)
Conor Burke (CB)	James Mountford (JM)
Pinki Amin – Board Secretary (PA)	<b>Invited attendees:</b> Nick Kirby (for Geoff Bellingan)
	<b>Observers:</b> Naomi Fulop and Cecelia Vindrola (RESPECT-21 study)

**1. Welcome and introductions**

- PBA welcomed everyone and introductions were made. Apologies were recorded.

**2. Minutes of previous meeting (30 September 2015)**

- The minutes were accepted as an accurate record of proceedings.

**3. CMO report**

- The **2015/16 workplan** detailing work undertaken by *London Cancer* including Camden CCG and Macmillan was introduced.
  - KPJ asked the Board to note the work being undertaken by Dr Afsana Bhuiya, Macmillan GP Improvement Lead, on coding and safety netting enabling GPs to improve use of coding in their practice. The ultimate aim of this quality improvement project is to increase earlier recognition of worrying symptom patterns, use of diagnostic support tools and better communication between health care professional contacts. This is expected to lead to earlier diagnosis of cancer and safer referral practices for investigation. The work is being taken up nationally and Macmillan will work this up as an online e-learning tool. Afsana has been invited to demo the system at the Royal College of GP's/Macmillan meeting "Improving cancer outcomes in London using significant event analysis" on 12Dec. SA asked if this can be embedded into practice and suggested that Afsana should make contact with Liz Wise.
  - KPJ reported that the MacMillan Practice Nurse Improvement Lead, Vicki Newport, has now left *London Cancer*, after having put in place a quality improvement project aimed at involving practice nurses in implementing cancer care review meetings.
  - ACE Wave 2 – KPJ reported that all selected project teams have been asked to attend a day and a half workshop on 24 and 25Nov. The level of funding will only be announced in January 2016.
  - Pathway board support –trust cancer managers have agreed to support the majority of pathway boards (a few remain outstanding) and will be attending the Pathway Directors meeting on 25Nov.

- Cancer Research UK (CRUK) and Macmillan – both are aware that *London Cancer* will be transitioning to be hosted by UCLH and have indicated they are happy with the proposed changes. More formal discussions will be arranged as part of the transition process.
- **UCLPartners Executive Group**
  - KPJ reported that she had presented an update on cancer to the UCLP Exec in November. She had been joined by Geoff Bellingan, Angela Wong and Clare Stephens, as the focus was on emergency presentation of cancer and activities to improve early diagnosis. The trust executives had acknowledged the good work done by London Cancer to date. They agreed to the 4 recommendations put to them in Ap3.2 and are keen to receive quarterly scorecards on early diagnosis to discuss at their Trust Board. SA asked if this could also be presented to CCGs.
  - KPJ tabled the draft national Cancer Metrics Board dashboard and reported that this would include a breakdown by CCG on a variety of metrics including indicators of early diagnosis. SA reported that the Secretary of State for Health stated recently that CCGs would need to improve as they would be measured on outcomes in 12 months time. KPJ also reported that the Transforming Cancer Services for London Team (TCST) have conducted some pan-London analysis which will serve to establish the baseline capacity and demand for endoscopy. AB asked if the data produced would enable CCGs to know where to invest and receive best value? KPJ acknowledged this and said this would need to be looked at as part of the Vanguard.
  - NK reported that the governance for the vanguard was being worked on with representation from Strategic Planning Groups. SA suggested that social care should be included in the governance as they, along with CCGs, hold the purse strings.
  - PBA asked that KPJ should take responsibility for producing the communication of the transition of London Cancer to UCLH, which should include what has been achieved and what remains to be done. KPJ reported that this information is available but will need to be pulled together.

**ACTION: KPJ to produce communication which should include achievements to date and work outstanding.**

- **Vanguard**
  - NK reported that the deadline for submitting the Value Proposition (VP) is 30Nov. A swift decision (within 2 weeks) is expected as NHSE wishes to distribute a portion of funding within the 2015/16 financial year. There are commonalities across all 3 vanguard partners and work such as the planned UCLH Centre for Cancer Outcomes unit could be viewed as a regional hub which could then be adopted by other organisations. NK asked for comments from the Board on the VP and the Board provided a number of suggestions for improvement:
    - I. Clearer alignment with delivery of the various national priority frameworks in cancer (5YFV, Independent cancer task force strategy), and greater prominence given to Patient experience and listening exercises.
    - II. Some duplication needed to be removed and greater clarity provided on what further support would be required and how it would benefit the whole system.
    - III. Consider laying out a 3 month roadmap of what will be delivered and what has been achieved to date in delivering the overall ambition, to make it more compelling and punchier. Could this include something that either of the other 2 organisations in our vanguard are already doing to show rapid adoption across our system to add value?
    - IV. Focus should be on 4 key outcomes and the overarching goal, for example – allowing people to spend longer time at home to recover.
      - Better access
      - Better experience
      - Satisfied staff
      - Costs within budget
  - NK reported that the business case for UCLH to host *London Cancer* has been submitted to NHSE London. A decision is expected after the Cancer Commissioning Board on 15Dec. It was agreed that KPJ would ask Andy Mitchell whether a further paper should be submitted to the CCB.
  - NK reported that whilst funding was being negotiated, we should just get on with working out the governance and that the Vanguard should just accelerate what we will be doing anyway.

- Workshop (Ap 3.3): SA stated that Health and Wellbeing Boards should be included and that the document doesn't reflect this. However PBA explained that this was not intended to be used as a standalone document for people who did not attend the meeting.
- **Governance**
  - KPJ reported that the current Joint Programme Board (JPB) could potentially evolve into the Joint Commissioning Board as this involves the right people to have as part of a new governance process for *London Cancer*.
  - The question was raised as to how we can provide assurance that all stakeholders have a voice and are able to contribute to the decision-making process for population health gain whilst being led by an acute provider. There is a need for the board to provide independent challenge and have representation from commissioners. It was agreed that the mandate would be for the UCLH Trust Board to own *London Cancer* and be responsible for ensuring it continues to represent the best interests of patients and providers across the system as a whole. The potential tension between 'ownership' and 'independent challenge' being provided internally by *London Cancer* was acknowledged. It was noted that UCLH, like any other trust, reports to its lead CCG and NHSE. There needed to be explicit patient and public health representation in the new governance structure.
  - NK stated that the UCLH-*London Cancer* delivery board would be the key decision maker and decide on how funding is spent.
  - It was agreed that the communication to our external stakeholders should state that the role of *London Cancer* is to be led by UCLH from 01Jan 2016 and that the governance would evolve over time as this is influenced by the Vanguard and other changes taking place. It should state that this is a transitional phase and that the Cancer Unification Board (CUB) would oversee *London Cancer* during the transition until the new structure is in place. The communication should focus on governance rather than funding.
  - CB, SA and TA have all confirmed that they would be willing to support the transition process and join CUB for this interim period. PBA and KPJ are already members of CUB.
  - The timescale for the communication to external partners would be after the clinical leadership team were informed on 25Nov, with sufficient time allowed to ensure the process could involve Prof Geoff Bellingan and Rachel Maybank, associate director of communications, UCLH. A clear statement would be included that the Pathway Directors and Expert Reference Group chairs would continue to report to the Chief Medical Officer and that they are a core part of the system and would remain so under the new structure.
  - The risk management document was tabled in draft form but will be circulated with the minutes.

#### 4. AOB

- KPJ discussed two draft documents she had received from Macmillan for comments on their proposals for Cancer Alliances. It was agreed that KPJ should respond to give the message that *London Cancer* and the integrated cancer system (ICS) concept in London have already been delivering many of the functions ascribed to an alliance as stated in these documents. The only exception was that commissioners had not been a formal part of the ICS's, though they had both worked closely and effectively with an integrated commissioner interface representing local CCG and NHSE specialist commissioning. Macmillan's ongoing support for *London Cancer* to continue to operate in this way is much appreciated. KPJ will arrange to meet with Ed Tallis, Macmillan, to give more detailed feedback.
- PBA thanked all Board members for persevering on this interesting journey. KPJ thanked Pelham for his sterling work in chairing the *London Cancer* Board in all of its guises and UCLH for taking on responsibility for supporting the system leadership role going forward. Everyone thanked KPJ for her determination and resilience.
- The *London Cancer* Transitional Board was closed by PBA.