



Meeting: Radiotherapy Expert Advisory Group
Date: 26th April 2019
Time: 2.00 - 4.00pm
Venue: Evolve Business Centre

Present:	Name:	Initials
	Chris Walker, (Chair) Head of Radiotherapy Physics, Newcastle	CW
	Steve Mattock, Head of Radiotherapy Physics, North Cumbria	SM
	Sharon Driver, Radiotherapy Service Manager, Newcastle	SD
	Paul Cutler, NHS Specialised Commissioning	PC
	Claire Huntley, Radiotherapy Clinical Lead, South Tees	CH
	Suzanne Stanley, Radiotherapy Services Manager, North Cumbria	SS
	Phil Powell, Directorate Manager, NCCC, Newcastle	PP
	Lisa Trimble, Radiotherapy & Oncology Business Manager, South Tees	LT
	Hans Vander Voet, Consultant Oncologist Radiotherapy Lead, James Cook Hospital	HV
	Adrienne Moffett, Alliance Delivery Manager, NCA	AM
	Angela Wood, Clinical Lead, Secondary Care, NCA	AW
In Attendance	Laura Lund, Business Support Assistant, NCA	LL
	Nick Willis, Specialist Dosimetrist, Newcastle	NW
Apologies:	Kevin Burke, Head of Radiotherapy Physics, South Tees	KB
	Alison Featherstone, Alliance Manager, Cancer Alliance	AF
	John Frew, Consultant Clinical Oncologist, Newcastle	JF
	Ian Pedley, Clinical Director, Newcastle Upon Tyne Hospitals NHS Foundation Trust	IP
	Jonathan Slade, Deputy Medical Director and Responsible Officer, Cumbria and the North East	JS
	Sheila Pearson, Trust Cancer Lead Clinician, North Cumbria	SP
	Nick Wadd, Consultant Clinical Oncologist, South Tees	NW

MINUTES

	Lead	Enc
1. INTRODUCTION		
1.1 Welcome and Apologies		
CW welcomed all to the meeting and introductions were made. Apologies were noted as above		
1.2 Declarations of Conflict of Interest		
There were no declarations of conflict of interest made		
1.3 Minutes of the previous meeting (15th February 2019)		
Minutes of the previous meeting were accepted and agreed as true and accurate record.		
1.4 Matters arising		
Covered during the meeting		
2. AGENDA ITEMS		
2.1 ODN Development		

<ul style="list-style-type: none"> • Memorandum of Understanding (MOU) • Terms of Reference (ToR) <p>AM/PC drafted a MOU and ToR prior to the meeting, copies have been circulated for discussion by the group today.</p> <p>AM stated that an agreement has been reached and the template submitted to regional medical director and director for specialised commissioning stating the decision that: Host will be Newcastle Chair will be South Tees Chief Executive, Siobhan McArdle Deputy Chair to be confirmed but hopefully Cumbria CCG SRO</p> <p>HV asked how the decision was made AW informed the group that Specialised Commissioning has the final decision about who it should be, a criteria used with the only difference between NuTH and South Tees was the previous experience of Newcastle in hosting an ODN.</p> <p>AF is planning a meeting with Siobhan McArdle, Chief Executive Director of South Tees Hospitals NHS Foundation Trust to discuss the Network Oversight Group as Siobhan will be chairing the next group meeting.</p> <p>At the time of this meeting there has been no confirmation of funding for from Specialised Commissioning about the Network Oversight Group.</p> <p>Next Steps: AM/PC to amend draft MoU and ToR to reflect the group discussion. These include the regional responsibilities and specific membership. A/P to be circulated with minute</p>	
<p>2.2 Service Specification</p> <ul style="list-style-type: none"> • Gap Analysis <p>This was forwarded to the group prior to the meeting, the collated information received showed correlation of gaps across the trusts.</p> <p>The group discussion the gap analysis and how this can form the priorities of the ODN work programme.</p> <p>A/P LL to forward Cumbria Gap Analysis to AM</p> <ul style="list-style-type: none"> • Work Programme <ul style="list-style-type: none"> ○ Plan of action <p>PC - as a group we need to know to priorities, guidance is expected from Kim Fell, lead commissioner, and the gap analysis is a good starting point. PC proposed a small task and finish group to help with this. This was agreed by group and decided it would have to have representation from across providers A/P PC/AM to draft information and forward to group for comments.</p>	<p>LL</p> <p>PC/A M LT</p>

	<p>A/P LT to share a workplan template.</p>	
2.3	<p>North Cumbria Update – Oncology/Radiotherapy PC gave an update; The business case was due to go to NHSI in Feb 2019 but has been delayed, we are still waiting for approved, it is understood this will go to the investment committee in May 2019, all stakeholders continue to work together on the future delivery model.</p> <p>SS – the old building is nearly down, awaiting on business case formalisation, working group is still operational.</p>	
2.4	<p>Regional Protocol Format</p> <p>The format is agreed with each protocol now needing to be populated. CW to contact KB for information</p> <p>SM queried if concomitant does where to be included – yes, will be included in each individual protocol.</p>	CW/ KB
2.5	<p>Regional Coding Practice – (watching brief) Confirmation coding things the same! LT – has every provider move to block contracts? SS – Contract meeting due PP – as far as he was aware, contracts have been signed off with no change from tariff agreement. A/P PC to take query forward</p>	PC
2.6	<p>Cancer Alliance Update</p> <ul style="list-style-type: none"> • Oncology Service Review <p>AM explained the remit of the Oncology Service Review to the group. There will be 3 work streams with in this review, they are as follows:</p> <ul style="list-style-type: none"> ○ Radiotherapy ○ Chemotherapy ○ Workforce <p>With the radiotherapy specification satisfying the radiotherapy section under the guidance of the ODN.</p> <ul style="list-style-type: none"> • Funding and Priorities <p>Still waiting confirmation of national funding, not able to fully commit to any projects until this has been received; have been informed that within the funding monies are required to be used for Rapid Diagnosis Centres and the early lung diagnosis project.</p> <p>CW advised members to have a paragraph ready to submit for consideration if requiring assistance from the National Innovation Fund.</p>	
2.7	<p>Regional Training Development - Feedback Nick Willis (NW), Specialist Dosimetrist at NuTH has been invited to feedback on his work in the extended the role of dosimetry staff. A training programme has been developed that NW delivers, it is</p>	

competency based and covers delineation of tumour volumes and OAR. It also includes peer review therefore freeing up consultant time. It is something that could be rolled out across the network.

SD – Advance Clinical Practitioners.

SD has attended meetings in Newcastle and Liverpool about Advance Clinical Practitioners, the course is based on an apprenticeship within the trusts and will be open to Band 6 and above. It is a generic programme therefore an inhouse section will need to be developed. Courses are available at Sunderland and Northumbria and Teesside Universities. SD would like to roll this out more in September 2019, support from the group and to be taken forward.

There are currently 2 x Training Advance Clinical Practitioners in South Tees affiliated to Teesside University. This is a structured course, 80% work based and 20% University, 100 hours is needed per block to backfill the posts. CH shared the positive experience to date.

A national research project into ACP development is being led by the SCoR that the region is involved with.

- 2.8 **Late Effects Follow up, Living with and Beyond Cancer report**
The group was asked to consider the paper and circulate to the most appropriate person within their organisation benchmarking themselves against it. This will be discussed at the next meeting.
A/P - all

All

3. **STANDING ITEMS**

3.1 **Activity/Waiting Times**

South Tees – IMRT 96% (total)

- Waiting times Radical 23.32 days
- Waiting times Palliative 6.23 days

CT Scanner down, funding approved to get this fixed

Cumbria – no information supplied at the meeting

Newcastle – IMRT 60.6% (total)

- Waiting times Radical 18.5 days
- Waiting times Palliative 10.1 days

Reacting to referrals quicker, flexing the workforce, has quietened down recently

3.2 **Staff Vacancies/Workforce**

Middlesbrough:

Medical Physics: Vacancy

Clinicians Fully staffed

1 x Oncologist Vacancy

Radiographer Band 5 & 6 going vacancy advertised externally

Cumbria

Medical Physics fully staffed

Radiographer Temporary Band 7

Clinicians Fully staffed

Newcastle

Radiographer 4 x Band 5 Applications

Medical Physics Fully staffed

Clinicians Fully staffed

3.3 SRS

Nothing to discuss, no changes

3.4 Intraoperative Radiotherapy

Nothing to discuss

3.5 Innovation for Sharing

LT – working with the AHSN and in agreement with NHSE the use of rectal spaces for NHS prostate patients will begin in May. There will be initially 10 patients in the pilot.

Innovative Practice Event to take place in Newcastle on the 14th June.

LT has been asked to produce a business case Papillion within the network. CW informed that NHSE will not routinely commission this service, there has been national appraisals and previously discussed at Radiotherapy EAG's and as a Network it is something that would not be supported.

SS – Remote Video Consultations in Cumbria has started between West Cumberland Hospital and Carlisle. Patients are supported in the Henderson Suite by nursing staff with the consultant in Carlisle. This is at a testing phase and only used for follow up appointments. This will be followed up and more information brought to the group once more established. The software being used is Attend Anywhere.

3.6 Proton Beam Therapy (PBT)

This has commenced at Christies Hospital, referrals have been forwarded from Newcastle using the normal process to the Proton Beam Panel.

3.7 SABR CtE

CW confirmed that there was not to be a break in SABR access even though the pilot ended in April. There would be a 3-month notice period if funding is to be removed.

3.8 Superficial X-Ray Treatment (SXT) (Watching Brief)

Nothing to discuss – AM to check previous minutes of Skin EAG

Excerpt from Skin EAG Feb 2019

Superficial X-ray treatment – equipment and future services

Radiotherapy group have asked the skin EAG to consider renewing the SXT Machines as these are getting old but patients still using them. The machines are £60k each or a mobile unit the cost of which would be around £250k therefore it would be cheaper to purchase individual machines. Clarification was required as to who would pay for these. Charles Kelly has been asked to look into this but no response has been received to date.

PB asked what the frequency of using this is around the region and whether these machines are required. The group felt that the machines were needed but a decision is required who will pay for these machines.

It was felt that trusts would not have funding available to purchase these.

3.9 Clinical Reference Group Feedback

NHSE is looking to appoint a new chair and refresh the membership, the last meeting was cancelled.

3.10 Governance

None, to be discussed at the next meeting

3.11 Any Other Business

Brachytherapy – CW raised concerns re: capacity at Newcastle, here has been a busy period recently, the network agreed to work collaboratively. With managers agreeing remuneration could simply be actioned as a re-charge. The group agreed to work closely together and discuss how to take this forward.

A/P CW to arrange meetings, formalisation

CW

SS – Entering into job planning interviews and suggests peer review time is included, HV suggested a network wide time was agreed.

PC – Enquiry about whether there would be an option to dial in to the meeting group informed this can be arranged if needed, contact details can be forwarded to the group if required, was agreed that it is better to have people round the table, but dialling in is an option.

3.12 Future Meeting Dates -

Dates:

Friday 19th July 2019 2pm – 4pm, Evolve Business Centre

Friday 18th October 2019 2pm – 4pm, Evolve Business Centre

4. MEETING CLOSE

CW closed the meeting.

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