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# UK Chemotherapy Board

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## PUBLIC MINUTES UK Chemotherapy Board

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Minutes of a meeting held on 7 October 2019

<b>Present:</b>	Dr Ruth Board	Chair, Royal College of Physicians (RCP)
	Dr Catherine Bale	Wales
	Ms Lisa Barrott	UK Oncology Nursing Society (UKONS)
	Ms Pinkie Chambers	British Oncology Pharmacy Association (BOPA)
	Ms Netty Cracknell	British Oncology Pharmacy Association (BOPA)
	Ms Alia Nizam	Project Lead, SACT Regimen-Specific Consent forms
	Fionnuala Green (Phone)	Vice chair of the SACT regional group (deputising for Dr Paula Scullin, NI)
	Dr Janine Mansi	Association of Cancer Physicians (ACP)
	Dr Tom Roques (Phone)	Royal College of Radiologists (RCR)
	Dr Hannah Tharmalingam	VP elect of RCR Faculty of Clinical Oncology
	Ms Edna Young	Lay member
<b>In attendance:</b>	Ms Alison Shore	Committee Manager
<b>Apologies</b>	Dr Pippa Corrie	National Institute for Health Research (NIHR)
	Dr David Dodwell	
	Dr Denise Bonney	Consultant paediatric oncologist, The Royal College of Pathologists (RCPath)
	Dr David Hobin	Consultant paediatric & adolescent oncologist, Royal College of Paediatrics and Child Health (RCPCH)
	Professor Jo Martin	Royal College of Pathologists (RCPath)

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Dr Catherine Oakley	(UKONS)
Professor Nick Reed	Scotland
Dr Anne Rigg	Chair, Chemotherapy Clinical Reference Group (CCRG)
Dr Paula Scullin	Northern Ireland
Dr Alice Turnbull	National Cancer Registration and Analysis Service (NCRAS), Public Health England (PHE)

## **1 Welcome, apologies and conflicts of interest**

Dr Board welcomed all especially those attending for the first time. Apologies were noted as above. No conflicts of interest were declared.

## **2 Minutes from the previous meeting held on 6 June 2019 (DOC 29.19) & (DOC 301.19)**

The minutes were confirmed as an accurate record

## **3 Actions from the previous meeting on 6 June 2019 (DOC 31.19)**

All appeared on the agenda and so addressed in the minutes.

## **4 Matters Arising**

There were no matters arising

## **5 Membership**

- **Independent Sector Places on the UKCB**

**Noted:**

The independent sector cancer network represented private providers. Whether it would be appropriate to have representation from them on the UKCB was discussed.

**Lay member**

Ms Edna Young's extended term of membership was ending in May 2020. The January 2020 meeting would be Ms Young's final UKCB attendance.

**Update on RC Path membership**

A new chair had not yet been nominated by the RC Path.

## 6 Terms of Reference (ToR)

Terms of reference were up to date and no further action needed until next review

- **Establishment of Fixed Secretariat Service Level Agreement (SLA) (DOC 32.19)**

### **Noted:**

It was unlikely the SLA for the fixed secretariat would be in place by January 2020.

It was agreed a template scoring system should be devised to ensure transparency of decision making. An evaluation sheet would also be required.

All members present agreed with the SLA as it stood in terms of specification namely 54 days per year translating to approximately one day per week. It should be explicit within the SLA that the days could be worked flexibly and be focused on and around scheduled meeting times.

## 7 **Chemotherapy Board Workstreams**

- **Chemotherapy Consent Forms (DOCs 33.19, 34.19, 35.19, 36.19, 37.19)**

### **Noted:**

- Ongoing work by the national steering group during the period was reported as in (DOC 34.19). Page 7 of the quarterly review identified the rolling schedule for the review and revalidation of published consent forms.
- The patient survey (DOC 35.19) had been finalised by the national steering group and would be piloted at GSTT and the Christie hospitals prior to being rolled out across other trusts including Scotland, Wales, and NI. Noted were the valuable comments provided by Ms Edna Young.

The chair reported a letter outlining the role of the UKCB had been sent to Cancer Alliances in England inviting response and from which was hoped an accurate distribution list for England could be gleaned for the dissemination of UKCB output.

- **Age is no barrier to chemotherapy**

### **Noted:**

Dr Mansi reported this would be presented at the NCRI conference in November.

- **Chemotherapy Workforce**

### **Noted:**

Work had started by BOPA on a census to encapsulate the pharmacist workforce.

- **CRUK Systemic Anti-Cancer Therapy SACT Diary**

### **Noted:**

The SACT 'Your Treatment Diary' had been awarded highly commended at the BMA Patient Information Awards 2019 ceremony.

<file:///C:/Users/alisonshore/Downloads/BMA-2019-Patient-Information-Awards-programme.pdf> (see page 50).

- **Project ideas for 2019**

### **Noted:**

- **Variations in prescribing**

It was agreed this would not be taken forward at the moment but possibly considered in 2020.

- **Development of guidance on the monitoring of blood sugar levels whilst on steroids (tabled paper 4)**

Ms Chambers shared a pathway produced by the Christie on glucose monitoring. The chair would explore at the ACP conference whether any senior oncology registrars would be willing to undertake a large national level management project to support Ms Chambers who would have oversight and report back to UKCB.

**Action: Chair**

- **SACT treatment and guidance on national protocols for Osteonecrosis (ONJ)**

**Noted:**

The document was nearing completion and consisted of guidelines, pathways, communications aids such as dental alert cards, dental practitioner and specialist referral guidance letters collated from agreed best practices by the working group from a combination of trusts.

The work undertaken by Dr Mansi and the working group was commended by the chair.

- **Intrathecal Chemotherapy (ITC)** – item not discussed

## **8 Neutropenic Sepsis information ‘bundle’ launch 2019**

### **Low Risk Febrile Neutropenia Pathway (DOC 41.19)**

**Noted:**

This document had been produced by the acute oncology neutropenia working party. All members of the UKCB had seen previously and commented upon. The document was now considered in a position for endorsement by the UKCB and a request had been submitted to the Board. Members were asked for comment and to request endorsement by executives of the respective professional bodies by end of October 2019.

## **9 Chemotherapy Data**

- **Public Health England (PHE) SACT dataset report (DOC 38.19)**
- **National Institute for Health Research (NIHR) summary report** – *nothing to report for this meeting*

## **10 Education**

*KHP e-learning modules discussed under item 1*

## 11 Items for Report

- **Update on hyper sensitivity reaction when preparing monoclonal antibodies**

### **Noted:**

Ms Barrot reported time had been allocated in November to prepare a case study for publication so the information was available. Ms Barrott would also check with her trust to explore whether this and the Marsden policy could be shared more widely and if possible to bring to the next meeting.

**Action: Ms Barrott**

- **Diabetes and hepatitis infection** – *discussed under item 7*
- **KHP E-Learning modules**

King's Health Partners Learning Hub - <https://learninghub.kingshealthpartners.org/>

Link directly to the resource -

<https://learninghub.kingshealthpartners.org/product?catalog=khp1064c>

### **Noted:**

KHP had requested UKCB endorsement. The committee manager would send module links to UKCB members to request whether respective executives would be willing to endorse.

**Action: All/Committee manager**

## 12 **Chemotherapy Commissioning**

- **DPD Testing**

### **Noted:**

At the last meeting DPD testing had been discussed and a policy proposal for its mandation had been submitted and accepted. Ms Chambers reported that this had been delegated to the NHSE new genomics board and would establish name of the project lead.

- **Update from Chemotherapy Clinical Reference Group (CCRG)** – *item not discussed*
- **Refreshment of guidance for 30 day morbidity & mortality audit meetings developed by the board in 2016 (DOC 40.19 & 40.19a).**

### **Noted:**

A survey would be undertaken in the first instance to ascertain who was using the guidance and how by attendees at morbidity & mortality audit meetings.

Comments were invited from members of the board by Dr Scullin on the questions or the guidance with a view to providing response by end of October.

- **Acute Oncology Sub-Group**

### **Noted:**

- **Low risk sepsis pathway (DOC 41.19)** - *discussed under ite*

### **13 Devolved Nations Update**

**Noted:**

- **Northern Ireland**

**Noted:**

Dr Scullin asked whether anyone would be willing to undertake a sense check of the e-prescribing system commissioned for Northern Ireland. Dr Tom Roques agreed to put Dr Scullin in touch with someone who could provide haematologist expert input/experience.

- **Scotland (DOC**

**42.19) Noted:**

SACT and informed consent for chemotherapy Scotland was progressing and gradually moving toward a consensus approach for Scotland.

- **Wales**

There was to be a peer review of SACT services early next year. Procurement would be undertaken within the next few months for a single instance of e-prescribing for the whole of Wales.

### **14 Commissioning Chemotherapy Services Conference**

**CCC Noted:**

For the 2019 conference Professor Peter Johnson the new National Clinical Director (NCD) for Cancer had kindly agreed to undertake a number of talks at short notice. There remained a gap in the programme for a speaker on genomics medicine.

### **15 Any Other**

**Business**

- **BMA awards ceremony – *discussed under item 7***
- **National Peer Review Manual for Cancer Service Chemotherapy Measures (Tabled paper 3)**

**Noted:**

It was felt these were becoming outdated. New radiotherapy documentation produced had measures specified within it and it was likely the chemotherapy measures would follow a similar model with chemotherapy delivery networks mapped against the radiotherapy networks.

Dr Mansi thanked Dr Board for chairing over the past year but acknowledged this would continue at least for the first meeting until a new chair was appointed by RC Path.

### **16 Date of Next Meeting**

- 23 January 2020 time TBC

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