Log No.	Date Created	Status	Discussion summary	Action	Action Lead	Update
44	16/07/2020	Open	All to run audit of FIT tested patient outcomes and to share with PWB. JH to circulate once received.		JH	01/09/2020
45	12/11/2020	Open	**Title: Total Neoadjuvant Therapy (TNT) for rectal cancer** **To: Discuss and decide next steps** **Owner: Claire Arthur** The aim is to develop a consensus on the approach to TNT across GM. Current approach in GM is in line with the rest of the UK, but is evolving. It doesn't usually represent more treatment, just treatment performed in a different order. There is a question as to whether changing practice would make a difference to survival rates; however there are other benefits besides this, such as reducing the prevalence of stomas. It was suggesting that we should be utilising a TNT approach more regularly, but that is should be decided at MDT patient by patient. Then with time and regular review more defined protocols could be developed.	The team at The Christie will draft a GM wide protocol document and present to Colorectal PWB for discussion and sign off.	Claire Arthur	18.03.21 - Update provided at pathway board under AOB. CA will distribute document via ML
55	18/03/2021	Closed	**Title: Welcome & Apologies** **To: Discuss** **Owner: SR** SR opened the meeting and welcomed Teresa Karran who is the new rep from Cancer Research UK and Sarah Jacobs the new service user rep to the group. SR explained that it was IB's last meeting and that he had been a service user rep on the board for many years and his input had been invaluable. The board thanked IB for all his input and support over the years and IB said he had enjoyed his time with the group and would continue to support as part of the small community where possible. Apologies were noted and recorded in the attendance tab within the Summary and Action Log.	ML to remove IB from the distribution list after circulation of meeting notes		**ML removed to close after next meeting**
56	18/03/2021	Open	**Title: Meeting Summary Action Log & Matters Arising** **To: Discuss** **Owner: SR** The Summary and Action Log was circulated for review, Some of the topics will be covered in the Agenda.			
57	18/03/2021	Open	**Title: Patients experience of the Colorectal Cancer Follow Up offered during the Covid-19 Pandemic** **To: Update** **Owner: CM** CM gave the background to the patient survey exploring how the changes to the delivery of Colorectal Cancer Follow Up over the last twelve months had impacted patient experience. This survey will be conducted by the Colorectal Clinical Nurse Specialist team at Stockport NHS Foundation Trust to assess the impact the changes they have had to make during the Covid-19 Pandemic. There is a possibility that a similar one may be done to assess the impact on staff. The patient survey has been produced and they are just in the process of putting into a survey monkey ready for distribution. CM will present outcomes at a future board. NC commented that this would also be useful info for commissioning colleagues.	CM to update the board on the patient experience survey outcomes at a future meeting	CM	**Leave open until presentation undertaken**
58	18/03/2021	Open	**Title: Personalised Care - PSFU and Treatment summary update** **To: Update** **Owner: AG** Following the last meeting the treatment summaries had been updated with the TEMS/TAMIS info and circulated to the units, use will be audited in 6 months. A best supportive care treatment summary will be distributed in the next week. The protocol developed by the board will be uploaded onto infoflex and Stockport and Pennine will be the first Trusts on the central system. The other Trusts will come on board sequentially during the coming months.	AG to audit the treatment summary in 6mths AG to circulate best supportive care treatment summary AG to continue to update the group on PSFU	AG	
59	18/03/2021	Open	**Title: Colorectal Cancer Waiting Times** **To: Inform** **Owner: KH** KH spoke to the presented data pack and explained that the suspected cancer referrals had recovered in terms of numbers of referrals much quicker in the 3rd wave of covid and continued to rise. For Q3 of 2020 the 62 day target was only 48% which remains poor. In terms of long waiters the GM total of pts waiting >104 days had decreased from 162 on 12/11/20 to 142 on 16/03/21. She explained that GM cancer have been doing a lot of work looking into any potential harm caused to these patients. NC queried the whether the data included patients stepped up to a cancer pathway and screening patients and KH agreed to check that data for clarification and ensure these were included in the numbers for the next meeting.	KH to continue to update the group	KH	

60	18/03/2021	**Open**	**Title: Lynch Compliance** **To: Inform** **Owner: SR/ML** ML had carried out an audit on nice compliance all had returned responses except Pennine and Tameside. Of the Trusts that weren't compliant they were testing for lynch in some cohorts predominantly <50yrs. ML explained that a co-ordinated approach was being undertaken with the Genomics pathway board and the commissioning lead for GM Cancer to ensure compliance across GM not just for this board but for other boards who have similar issues and she would feedback to the board as this progresses.	ML to continue to update the board on progress with lynch testing	**ML**	
61	18/03/2021	**Open**	**Title: FIT as a Prioritisation tool** **To: discuss** **Owner: SR** SR explained that FIT had been used as a prioritisation tool during covid due to the large backlog of patients waiting for endoscopy. ML had done a scoping exercise to understand which Trusts were doing this and out of the respondents all were using FIT as a prioritisation tool. KMc said it would be good to look at the data relating to this and SR agreed that this would be the next step. SR will develop a questionnaire to gather the required data and share with ML for dissemination to each Trust Lead to complete.	SR to develop survey and each Trust Lead to complete	**SR/Trust Leads**	
62	18/03/2021	**Open**	**Title: TEMS/TAMIS provision by Trust** **To: Inform** **Owner: SR** ML had done a scoping piece of work to understand which Trusts were using TEMS/TAMIS and which surgeons within the Trusts were undertaking this. The group discussed then information and SR stated that the surgeons listed could potentially become mentors to expand the use of these procedures.	NA		
63	18/03/2021	**Open**	**Title: COVID 19 Update** **To: Update** **Owner: SR** *** Clinical Leads Forum Update** **S**R provided an update of the slides shared during the meeting, which had been drawn from Tableau to look at Covid admissions. Currently there are 105 covid patients occupying ITU/HDU beds, with a total of 581 beds occupied by covid 19 patients. 30% of NHS staff sickness is attributed to covid, however cancer services are being maintained but there is still a large backlog to clear.	SR to continue to update the group		
64	18/03/2021	**Open**	**Title: Surgical Hub Referral and Data** **To: Discuss** **Owner: FH** Freya was unable to attend but will distribute a report on referrals so far, looking at average wait to treatment from referral. She will also provide some case studies on those that were delayed. AA reiterated that all should continue to refer to the hub as appropriate.	FH to provide a report with surgical hub data and case studies to ML for distribution to the group		
65	18/03/2021	**Open**	**Title: Research** **To: Update** Owner: KM KM spoke to the shared research report and encouraged the group to continue recruitment to trials. A discussion ensued about the screening study and IB enquired why only English literate patients could be considered? KM said there was a note in the documentation explaining that it was due to financial constraints but agreed it was not ideal nor inclusive. She explained that the study had been passed by an ethics committee and was live.	KM to continue to update the group on research/trials ALL support research by recruiting where possible to trials	**KM**	
66	18/03/2021	**Open**	**Title: User Involvement - Feedback from small community** **To: Update** **Owner: SW/IB/SJ** SW reiterated her thanks to IB on behalf of the small community and wished him well for the future. She explained that we would have another gentleman starting with the board at the next meeting which will mean we can keep a useful male perspective. SJ gave the background on her diagnosis and treatment and explained that she has involvement with bowel cancer UK and the MDT reform group as a service user.	NA		

67	18/03/2021	**Open**	**Title: Any other Business** **To: Share/Update** **Owner: ALL** **TNT XRT Guidelines** **CA explains that f**ollowing the last TNT presentation, they have now updated our radiotherapy guidelines. CA shared the document and highlighted some key points which she would like opinions on from the board members. CA asked for comments to be forwarded to her by end of April. SR thanked her for the update. **Prehab4Cancer** KMc updated the group that the programme has had its funding extended until September with a plea to all to keep referring. She explained that engagement in the online/virtual offering had been very well received during covid and a discussion ensued about how this is delivered. The group all agreed to continue promoting Prehab4Cancer. **Colon Capsule Endoscopy (CCE)** **SR explained that** CCE is a promising technique for non-invasive investigation of the colon. CCE is a possible filter in colonic surveillance with the primary outcome of reducing the number of colonoscopies. The NCA are piloting this for the GM Cancer Alliance and we will have an update at the next board. AA shared that the go live date is the 6th April and they are going to deploy 4-5 capsules per week from the Oldham and Salford sites.	ALL to return comments to CA by end April 2021 ALL continue promoting Prehab4Cancer ML to arrange speaker and put CCE on agenda for next board	**CA** **ALL** **ML**	
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