Welcome from the Chairman

XX (Chairman) welcomed members and staff to the meeting in particular new member XX.

Members were reminded of the meeting ‘idea box’ into which members can anonymously ‘post’ suggestions for agenda items and feedback about meetings. Items for ‘any other business’ can also be posted in the box.

Notes of Thursday 24 October 2016 for agreement

The notes were agreed. XX noted that training for new hosts of the Listening Post (51/16) will be offered in the New Year.

Matters arising

50/16: identification of PCAG projects and priorities

XX reported. XX and XX have started to develop ideas for the Wallace Wing environment improvement project. The suggestions for projects made by members are being addressed in a number of ways including through items at PCAG meetings. Further suggestions are welcome.

Agenda items

58/16 Patient and family leadership in the Cancer Vanguard

Sam Hudson and Ali Malik of RM Partners reported. One of the recommendations from the National Cancer Strategy was to develop new models of care for cancer. In response to this, the Cancer Vanguard has been set up to trial new models and replicate them nationally. RM Partners is the Cancer Vanguard's local delivery system across north west and south west London that covers a population of 3.5 million people. The London Cancer Alliance has been subsumed into RM Partners.

The six priorities of the Cancer Vanguard are:

- Upgrade prevention and public health
- Earlier and faster diagnosis
- Having patient experience on a par with clinical effectiveness and safety
• Living with and beyond cancer
• High quality modern services
• Different approach to commissioning, provision and accountability

The Cancer Vanguard is a collaboration between the Royal Marsden, University College London Hospital and the Christie with their local health systems.

Sam and Ali described the work taking place about patient and family leadership in the Cancer Vanguard. The Cancer Vanguard will ensure that outcomes that matter to patients are central to their work. Patients will drive the changes.

There are five key priorities for RM Partners:
• Improved survival through early diagnosis
• Remove variability of outcomes base on geography
• Improved patient and family experience
• Living well beyond cancer
• Improved access to palliative care and end of life services

The proposed new ways of service will be designed and tested with patients and their families. Patients will be trained to develop skills to influence and work effectively in meetings. An advisory group of service users will sit in parallel to and have equal weight to the clinical group in developing the new ways of service. The aim is to get existing patient engagement network members to join the advisory group.

Planning of investment will be longer term on 10 year cycles rather than the current 1 year cycle.

The views of patients from primary care through to hospices are to be collected through a new feedback system. An event is to be held to collect the views of patients and carers on the feedback questionnaire and identify the outcomes that matter most to patients. The invitation will be circulated to the membership of PCAG.

Questions and suggestions were invited from the meeting.

Drug buying is to be pooled between the members of the Cancer Vanguard with a single contract to make savings and reduce variation in service.

The health organisations operating as part of the Cancer Vanguard will remain as they are, but will work as a system to reduce variation and improve outcomes of care.

The meeting was asked for its views on whether the six outcome domains identified by RM Partners are correct?
• Patients should be diagnosed early
Patients should have consistent access to best practice care
Our care should deliver the best clinical outcomes
Our care should maximise the quality of life, pre, during and post treatment
Patients and carers should have a positive experience of our care
We should deliver improved equity by reducing variation in outcomes across different patient demographic groups

Direct e-mail contact from PCAG members is welcomed by Sam and Ali.

59/16  Patient information production
Ellie Gibson, Patient Information Officer and Helen Mills, Head of Quality Assurance reported. There are 696 patient information items on the Trust’s intranet. Most are factsheets. There is a selection of leaflets in different languages and others are translated when needed. There are currently two Trust DVDs; one about bladder and the other for oesophageal cancer. A third DVD is being finalised about exercise. If there is demand it would be possible to explore producing others. But they are expensive to make; the cost of the latest is £14000 which has been covered by a donation from the Friends of the Royal Marsden.

Patient information is reviewed every three years unless the information changes in the meanwhile. The Trust is affiliated with the national Information Standard which quality marks the production, quality and clarity of information publications. Under the affiliation process the Trust has to show that it asks for comment from local patients affected by the condition or treatment described in the information publication.

The Trust had two items highly recommended and a runner up in the last British Medical Association patient information awards.

Key workers point patients towards information.

The meeting agreed that future occasional requests for feedback on draft literature will be sent to the whole membership of PCAG rather than to the six individuals who have previously volunteered as the PCAG ‘panel’.

Any other business
60/16  PCAG handbook
XX reported that the group’s handbook is now in draft form with the photographs the only outstanding content.

61/16  Private care nursing award
XX noted that Mo Carruthers, Divisional Nurse Director, Private Patients, recently collected the Nursing Practice Award at the Laing Buisson awards on behalf of Private Care Directorate at the Trust.
XX will pass on PCAG’s congratulations to Mo.

62/16  Next meeting
Monday 20 February 2017, 1200-1400, Board Room, Chelsea. No videolink. The meeting will include items about treatment consent and the Friends of the Royal Marsden.