

**Minutes**

Radiation Oncology Working Group (ROWG)

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| **Date:** | Tuesday 31 August 2021 |
| **Time:** | 9.30am to 11.30am |
| **Location:** | Via Zoom |
| **Chair:** | Claire Hardie |
| **Attendees:** | Andrew Cousins, Darien Montgomerie, Denise Redwood, Judy Moselen, Koki Mugabe, Marj Allan, Michael Taylor, Nichola Naidoo, Scott Babington, Shaun Costello, Viv Ali, Louise Simonsen, John Childs, Megan Purves, Cristian Hartopeanu, Leanne Tyrie, Rix du PlessisTe Aho o Te Kahu: Gabrielle Nicholson, Liz Dennett, Rose Simpson, Elinor Millar~~,~~ John Manderson, Megan PurvesOther: Elaine Edwards (minutes) |
| **Apologies:** | Natasha Chisholm, Nicholas Glubb, John Fountain, Benji Benjamin |

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| **Item** |
| **Minutes, actions and review of the conflicts of interest register*** The minutes of the meeting held on 12 May 2021 were accepted as a true and correct record.
* The minutes of the meeting held on 13 July 2021 were accepted as a true and correct record.
* The action register was reviewed. All actions were complete/progressing. Completed action numbers 1, 3, 4, 5, 6 and 7 were removed from the register.
* The decision register was received and noted with no changes.
* The COVID decision register was received and noted with no changes.
* The MOWG minutes from 23 June 2021 were received and noted for information.
* The conflicts register was received and noted with no changes.
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| **Te Aho o Te Kahu update**The Agency’s current focus is on managing COVID-19 related cancer service issues and the CEO is attending daily meetings with the Ministry of Health leadership team, DHB COOs and others.Te Aho o Te Kahu is maintaining a close watch on service levels.It was noted that the 2020 guidance with regard to COVID vaccination is being reviewed and updated to include consideration with regard to booster doses and various treatments.Clarity with regard to operation of split teams has been requested from the Ministry of Health. |

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| **Terms of Reference Update**Te Aho o Te Kahu is updating all of its advisory groups’ terms of reference.The draft, revised ROWG Terms of Reference (TOR) were shared prior to the meeting.There will also be changes to membership to achieve the goal of having at least two Māori and two consumer members per group and to ensure membership succession planning is in place where appropriate.Another focus is ensuring that work programmes are clear and aligned with the particular group’s purpose. Te Aho o Te Kahu will work with ROWG to develop its high-level work plan at the start of each financial year. Key tasks for ROWG were discussed.The group was asked whether the TOR needed to be expanded to outline the governance responsibilities of ROWG for the radiation oncology collection (ROC). The Chair noted it was important for ROWG to have input to and approval of ROC data being accessed and used. Documentation setting this out does not currently exist, which is a gap.*Action: Te Aho o Te Kahu to develop data governance documentation for the ROC collection, in conjunction with ROWG members and cross reference this to the ROWG Terms of Reference.* The expectations with regard to group conduct and individuals were outlined. It was confirmed that it was not appropriate to nominate substitutes to attend meetings (unless agreed in advance). The frequency of meetings for all advisory groups is being considered. The intention is for there to be two full day, in person meetings per annum plus additional, ad hoc, virtual meetings as required / in agreement with the Chair, with these scheduled with as much notice as possible, ideally no less than six weeks.It was confirmed that decision making would be by consensus, with six members plus the Chair constituting a quorum.Minutes will be published on the Te Aho o Te Kahu website once they are approved as correct.Fees will only be paid to members who were not already part of the public sector. The fees outlined in the TOR are in line with the public sector fees framework. The expectation is that for staff employed by public sector organisations, those organisations would cover the cost and arrangement of staff travel to attend meetings.There was no feedback from ROWG on the Terms of Reference.*Action: Te Aho o Te Kahu to share the updated version of the TOR at the next meeting.* |
| **PHARMAC Update**PHARMAC’s written update was received and noted without discussion.It was noted that Te Aho o Te Kahu staff intend to meet with PHARMAC shortly. PHARMAC has noted their intention to progress work around medical devices, including LINACS. Te Aho o Te Kahu will gather further information and report back to ROWG.  |

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| **QPI Update**It was noted:* The Lung QPI plan was published in March 2021 and a follow up action plan is due for imminent publication.
* The draft prostate monitoring report was published in March 2021. The report had subsequently been revised and calculations had been repeated (as a number of DHBs disagreed with the original calculations because of data quality concerns).
* The key change is that the route to diagnosis QPI will no longer be presented by DHB, instead the data is presented for NZ as a whole. The updated report will be published shortly.
* Breast cancer QPI development has commenced. There is a need for a ROWG representative to join the National Breast Cancer Working Group, which has yet to be convened. ROWG, plus other key stakeholders, will shortly be approached to make nominations. The aim is to have a draft Breast Cancer QPI Monitoring Report ready in time for the next Breast Cancer Conference (planned for April 2022 in Auckland).
* Work has commenced on pancreatic cancer QPIs. Te Aho o Te Kahu is seeking feedback on potential QPI indicators (via Te Aho o Te Kahu website). To note, it is likely that not all indicators proposed will be possible to be measured using national collection data. ROWG raised a concern that, while radiation therapy is not a large component of pancreatic cancer treatment, radiation oncology was not well represented on the National Pancreatic Cancer Working Group for the work done to date, and therefore there was likely to have been little RO input to the potential pancreatic cancer QPI document. It was confirmed that the TOR, membership, etc of the pancreatic QPI WG will be reviewed prior to the next phase of work and ROWG will be invited to nominate a representative to participate in the work going forward.
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| **COVID-19 Update, Status of Departments, Resurgence Plans**Key points were discussed as follows:* Trainees have expressed concern as to how they are supported during lockdowns and suggested ROWG could assist them by providing clarification to centres as to their responsibilities to their trainees during COVID lockdowns. As such the Chair has created a draft guideline for the group to review, based on RANZCR recommendations from 2020, that aims to support radiation oncology training centres in New Zealand with appropriate working arrangements for their trainees during the COVID-19 pandemic.

**ROWG agreed to endorse** the guideline.Auckland Update* The Chair’s support with regard to the impact of the Section 70 was appreciated.
* The impact of the general nursing shortage is noted, with radiation therapists picking up additional work (screening, Section 70, FIT testers, vaccinators).
* Additional support from Te Aho o Te Kahu may be required for patients requiring travel from Northland to Auckland for treatment.
* Fractionation is continuing as normal. Criteria has been set around trigger points requiring movement to alternative protocols.

*Action: Te Aho o Te Kahu to investigate issue regarding patients who are permitted to cross the Alert Level 3 and Alert Level 4 boundary to access medical care*St Georges* The main challenge is fulfilling the Southern DHB contract for patients who need to fly to Christchurch for treatment, when there are currently no flights.

Waikato* Remote access in order to work from home is still unavailable as a result of the recent cyber-attack.
* Everything is under control, despite a reduction in radiation therapists (partly due to the inability of staff to access childcare).

*Action: Ensuring clinical staff access to childcare to be raised with the MOH by Te Aho o Te Kahu.* Resurgence Plans: All regions are confident with regard to their plans.Management of non-vaccinated staff treating patients was queried: Te Aho o Te Kahu advised that this has been raised with the Ministry of Health who are developing a policy on this. The policy will be shared with the group when available.*Action: Te Aho o Te Kahu to ask MOH team re progress of work around non-vaccinated staff treating cancer patients.* |
| **RCR Guidelines – Breast hypofractionation**The Chair noted the circulation of the UK guidelines, which adopt a pragmatic approach to hypofractionation. ROWG was asked to provide input regarding the potential for NZ to follow the UK’s approach. To note, a cancer centre has undertaken an extensive review and have rolled out significant adoption of the approach. **ROWG agree to endorse** the RCR Guidelines on breast hypofractionation.  |
| **Other Business**Radiation oncology representative on AYA Cancer Network Fertility Preservation group: To note - no expressions of interest; however, the group will come to ROWG for guidance as required. Radiation oncologist representative on the Radiation Safety Advisory Council for ORS: To note, Iain Ward has taken up a position on the Council as a Radiation Oncologist representative. Radiation Oncology Incident Reporting System: To note, work in progress and will be discussed at the next meeting. |
| **Papers for Noting and Endorsement*** Clinical Assembly Meeting Papers (April 2021). The paper is noted for information.
* Health Workforce Contracting Consultation and ROWG response. The paper is noted for information. There has not been a response from Health Workforce to the ROWG letter.

The Centres indicated the number of additional trainees they could potentially take on board (subject to DHB funding being available) as follows: Auckland 2-3; Waikato at least 1; Palmerston North at least 1, Wellington 1-2; Christchurch 2, Dunedin 1. * Trainee fellowships: Auckland DHB currently have one fellow and were keen to consider two more (research and clinical fellowships), Capital and Coast DHB were keen for a brachy fellow; Canterbury DHB were keen for one.
* RANZCR Telehealth Consultation submission and response. The paper is noted for information.
* Radiation Oncology Practice Standards. The paper is noted for information. The Standards have been circulated to ROWG members for comment with no feedback received.
* Memo for radiation oncology document for Cancer Services Planning (CSP) programme. The paper is noted for information. ROWG members were thanked for providing feedback. A meeting to discuss the next steps will be arranged.
* CSP Radiation oncology document. The document is noted for information.
* CSP/ROWG update August 2021 slides. The slides are noted for information.

*Action: Te Aho o Te Kahu to advise ROWG if the slides/document may be shared with colleagues and with the College.*  |
| **Next Meetings:**To note, Te Aho o Te Kahu will arrange a workshop to discuss the Cancer Services Planning next steps. To note, Te Aho o Te Kahu will arrange the next virtual ROWG meeting for late October.*Action:**Secretariat to schedule a Zoom meeting in late October.* |
| **Close**The meeting closed at 11.30am. |