



Somerset, Wiltshire, Avon and Gloucestershire (SWAG) Cancer Alliance

**Somerset, Wiltshire, Avon and Gloucestershire (SWAG)
Cancer Services**

Colorectal Cancer Network Site Specific Group

Annual Report

2016/17

This Annual Report was prepared by:

Mike Williamson, Chair of the SWAG Colorectal NSSG, Consultant Colorectal Surgeon, Royal United Hospital Bath NHS Foundation Trust

Helen Dunderdale, SWAG Cancer Network NSSG Support Manager

Colorectal NSSG Annual Report Contents

Section	Contents	Page
1	Overview, achievements and challenges	
1.1	Overview of report	4
1.2	Overview of service	4
1.3	Achievements and key service improvements over the past 15 months	4
1.4	Challenges for the NSSG	5
2	The Network Group Meeting and Membership	
2.1	Chair of the NSSG	5
2.2	Network Group Membership	5
2.3	Attendance Spreadsheet	5
2.4	Associate Members of the NSSG	8
3	Chemotherapy Treatment Algorithms	10
4	Clinical Trials and Research Activity	10
4.1	Discussion of Clinical Trials	10
4.2	Recruitment Action Plan	10
4.3	Current Clinical Trials Activity	11
4.4	Recruitment of Teenagers and Young Adults (TYA)	11

1. Overview, achievements and challenges

1.1 Overview of report

This report reflects the period of activity for the NSSG from 1st January 2016 to 31st March 2017. It contains a summary of the activity of the Colorectal NSSG for this period measured against several key performance indicators that have been outlined in the National Cancer Peer Review Programme. The report should be reviewed alongside three other key documents for the NSSG: the Constitution, Clinical Guidelines and the Work Programme. The Colorectal NSSG Constitution provides an overview of how the NSSG operates, outlining the general working processes of the NSSG, the patient referral pathways and the guidelines to which the NSSG adheres. The Clinical Guidelines outline the diagnostic and treatment processes agreed by the network group. The Work Programme summarises the key areas for growth, development and improvement of the NSSG over the next financial year (and beyond where appropriate). All four documents should be reviewed together to give a full overview of the NSSG, its performance and its future plans.

1.2 Overview of service

The Colorectal site-specific group aims to oversee, support and bring together the viewpoints of all the multi-disciplinary teams working within colorectal cancer services across the Network. The group also aims to ensure the same standard of care and treatment with this type of cancer across the Network. The NSSG works to ensure implementation of NICE guidelines for investigation and treatment of colorectal cancers and to provide guidelines for supportive care. It supports a programme of education on key developments in the field of colorectal cancer. It also aims to continue and expand the clinical trials programmes available within individual trusts.

1.3 Achievements and key service improvements over the past 15 months

The following are noted as key achievements and service improvements of the Colorectal NSSG over the past 15 months (during 2016/17):

Clinical opinion on network issues

- Update on the formation of the SWAG Cancer Alliance.

Clinical guidelines

- A letter of recommendation was written on behalf of the Colorectal SSG for dissemination to local commissioning groups to ask for the FIT test to become available as soon as possible

Review amendments to surgical practices

- Amendment to clinical guidelines to state 'surgical resection' rather than limit performing anal cancer procedures to one platform

Review amendments to radiotherapy practices

- Update given on referral criteria for Stereotactic Ablative Radiotherapy (SABR) for oligometastatic disease

Review amendments to pathology practices

- Contribution of comments to the NICE Lynch Syndrome diagnostic consultation document.

Coordination of patient care pathways

- Agreement of suspected cancer referral form.

Patient experience

- Identification of priorities for improvement from review of the National Cancer Patient Experience Survey, 2015
- Input on ongoing issues from user representatives
- Provision of patient information leaflets for advice on recovering from cancer and DNA consent on the SWCN website.

Living With and Beyond Cancer (Survivorship)

- Update on implementation of the recovery package.

Quality indicators, audits and data collection

- Review of National Bowel Cancer audit data
- Network audit of two week wait referrals.

Research

- 2 x clinical trial regional updates
- Review of the PulMiCC trial eligibility criteria and progress
- Review of the CANDID trial.

Service development

- West of England Genomic Medicine Centre update.

Quality Surveillance Programme

- Introduction of the new Quality Surveillance quality indicators.

1.4 Challenges for the NSSG

The key challenges for the Colorectal NSSG moving forward are highlighted below:

Clinical opinion on network issues

- Implementation of CRUK MDT recommendations.

Clinical guidelines

- Implementation of Faecal Immunochemistry Testing

Review amendments of pathology practices

- Assessment of the impact / possibility to implement Lynch Syndrome testing for all patients as per NICE recommendation
- Development of follow up guidance for patients diagnosed with Lynch Syndrome

Review amendments to imaging practices

- Standardised radiology reporting: to be ratified at a future SSG meeting.

Coordination of patient care pathways

- To ensure surgical and oncology treatment summaries are routinely sent from anal cancer service to CNS teams in local centres
- Improving diagnostic capacity to meet increased demands caused by the new NICE 2WW guidelines.

Patient experience

Patient information

- Development of a shared care patient information leaflet
- Development of patient information solutions as per the example of the DVD created by the Taunton team
- Streamlining patient pathways to improve the patient experience.

Living With and Beyond Cancer (Survivorship)

- Implementation of the recovery package
- Agreement of risk stratified follow up pathways.

Quality indicators, audits and data collection

- Retrospective audit of stoma care 2016; to establish how data collection can be automated
- Streamlining data collection for National mandatory audits.

Research

- Continuing to expand and support the clinical trials programme.

Service development

- Incorporating the requirements of the Genomic Medicine Centre into practice
- Ensuring that all Trusts in the Network regularly contribute to the educational and audit programmes.

2. The Network Group Meeting and Membership

2.1 Chair of the NSSG

Mr Mike Williamson has been the Chair of the Colorectal NSSG since 2015. A list of responsibilities for the NSSG, for the Chair, and for other members of the NSSG, plus the NSSG terms of reference, can be found in the paper *Recurrent Arrangements for Cancer Network Clinical Groups and Responsibilities for Peer Review*, as proposed by the South West Strategic Clinical Network (SWSCN) Cancer Network Manager, Jonathan Miller (14th July 2014):

<http://www.swscn.org.uk/wp/wp-content/uploads/2014/08/Cancer-Network-Clinical-Groups-Recurrent-Arrangements-v5-Final.pdf>

The NSSG meetings are also conducted in line with the Manual for Cancer Services, Colorectal Measures, [Version 1.0](#).

2.2 Network Group Membership

The Colorectal NSSG is held approximately every six months. In 2016/17, meetings were held on the 29th June 2016 and the 30th November 2016.

2.3 Attendance Spreadsheet

The table below shows the core members of the NSSG and their attendance.

All participants at MDTs are welcome to attend the NSSG meetings.

Table 1.0 Colorectal NSSG core members and attendance 2016/17.

Trust	Name	Position	29.06.2016	30.11.2016
YDH	Andrew Allison	Consultant Colorectal Surgeon		
NBT	Ann Lyons	Consultant Colorectal Surgeon	✓	✓
NBT	Anthony Dixon	Consultant Colorectal Surgeon		
WAHT	Donatella Barbera	Consultant Colorectal Surgeon		
YDH	Jonathan Ockrim	Consultant Colorectal Surgeon	✓	
UH Bristol	Jonathan Randall	Consultant Colorectal Surgeon		✓
WAHT	Kandaswamy Krishna	Consultant Colorectal Surgeon		✓
TST	Louise Hunt	Consultant Colorectal Surgeon	✓	✓
UH Bristol	Michael Thomas	Consultant Colorectal Surgeon		
RUH	Mike Williamson	Consultant Colorectal Surgeon	✓	
YDH	Nader Francis	Consultant Colorectal Surgeon		
Glos	Neil Borley	Consultant Colorectal Surgeon		
WAHT	Nitya Chandratreya	Consultant Colorectal Surgeon	✓	
TST	Paul Mackey	Consultant Colorectal Surgeon		
WAHT	Reuben West	Consultant Colorectal Surgeon		
UH Bristol	Robert Longman	Consultant Colorectal Surgeon		✓
UH Bristol	Meg Finch-Jones	Consultant Hepato-biliary Surgeon		
UH Bristol	Tim Batchelor	Consultant Thoracic Surgeon	✓	

UH Bristol	David DeBerker	Consultant Dermatologist		
UH Bristol	Alan Donaldson	Consultant Geneticist	✓	
RUH	Ashley Cox	Consultant Clinical Oncologist		
UH Bristol	Axel Walther	Consultant Clinical Oncologist	✓	
UH Bristol	Charles Comins	Consultant Clinical Oncologist		✓
RUH	Emma de Winton	Consultant Clinical Oncologist		
TST	Emma Gray	Consultant Clinical Oncologist		
TST	Erica Beaumont	Consultant Clinical Oncologist		
UH Bristol	Stephen Falk	Consultant Clinical Oncologist		✓
TST	Clare Barlow	Consultant Medical Oncologist		
YDH	Matthew Sephton	Consultant Medical Oncologist		
RUH	Sharath Gangadhara	Consultant Medical Oncologist		✓
WAHT	Ed Sheffield	Consultant Histopathologist		
YDH	Edwin Cooper	Consultant Histopathologist		
RUH	Leigh Biddlestone	Consultant Histopathologist	✓	✓
UH Bristol	Newton Wong	Consultant Histopathologist		✓
NBT	Nicholas Rooney	Consultant Histopathologist		
NBT	Adrian Pollentine	Consultant Radiologist		
YDH	Cenydd Thomas	Consultant Radiologist		
UH Bristol	David Wilson	Consultant Radiologist		
TST	Elizabeth Ladd	Consultant Radiologist		
NBT	Eric Loveday	Consultant Radiologist	✓	
TST	Kajendran Balasubramaniam	Consultant Radiologist		
NBT	Andrew Heryet	Laboratory Manager Cellular Pathology		
YDH	Claire Norman	Specialist Screening Practitioner		
YDH	Gill Shire	Bowel Screening Practitioner		
GLOS	Amber Reid	Colorectal Cancer Clinical Nurse Specialist	✓	
TST	Anna-Lisa Saunders	Colorectal Cancer Clinical Nurse Specialist		
WAHT	Annie Muldoon	Colorectal Cancer Clinical Nurse Specialist		
NBT	Annie Reilly	Colorectal Cancer Clinical Nurse Specialist		
NBT	Catherine Ree-Jones	Colorectal Cancer Clinical Nurse Specialist		
NBT	Clodagh Hershbein	Colorectal Cancer Clinical Nurse Specialist		
GLOS	Emma Mitchell	Colorectal Cancer Clinical Nurse Specialist		
YDH	Jo-Ann Oliver	Colorectal Cancer Clinical Nurse Specialist		
YDH	Joanna Jones	Colorectal Cancer Clinical Nurse Specialist		
UH Bristol	Joanna Smalley	Colorectal Cancer Clinical Nurse Specialist	✓	
YDH	Julie Burton	Colorectal Cancer Clinical Nurse Specialist		✓
RUH	Lorraine Young	Colorectal Cancer Clinical Nurse Specialist		
RUH	Louisa Serle	Colorectal Cancer Clinical Nurse Specialist		
TST	Maria Salter	Colorectal Cancer Clinical Nurse Specialist		
UH Bristol	Mia Card	Colorectal Cancer Clinical Nurse Specialist		
Glos	Michele Silavant	Colorectal Cancer Clinical Nurse Specialist		

TST	Nicola Forsyth	Colorectal Cancer Clinical Nurse Specialist	✓	
UH Bristol	Sam Dixon	Colorectal Cancer Clinical Nurse Specialist	✓	✓
NBT	Sarah John	Colorectal Cancer Clinical Nurse Specialist		✓
RUH	Siobhan John	Colorectal Cancer Clinical Nurse Specialist		
YDH	Tina Maddams	Colorectal Cancer Clinical Nurse Specialist		
WAHT	Tricia O'Sullivan	Colorectal Cancer Clinical Nurse Specialist		✓
WAHT	Lisa Macklin	Colorectal/stoma Clinical Nurse Specialist		
N/A	Rowland Hackett	User Representative		
N/A	Geoff Loydon	User Representative		
TST	Nathan Brasinton	MDT Team Leader & Data Manager		
TST	Caroline Fitzavon	Colorectal MDT Coordinator		
UH Bristol	Clare Maggs	Colorectal MDT Coordinator		
WAHT	Jolanda Bennett	Colorectal MDT Coordinator		
YDH	Louise Groth	Acting QA Manager		
Administration	Helen Dunderdale	Cancer Network SSG Support Manager	✓	✓
Administration	Asha Sahni	Cancer Network SSG Support Administrator		✓
Administration	Kaitlyn Hamilton	Cancer Network SSG Administrative Coordinator	✓	

2.4 Associate Members of the NSSG

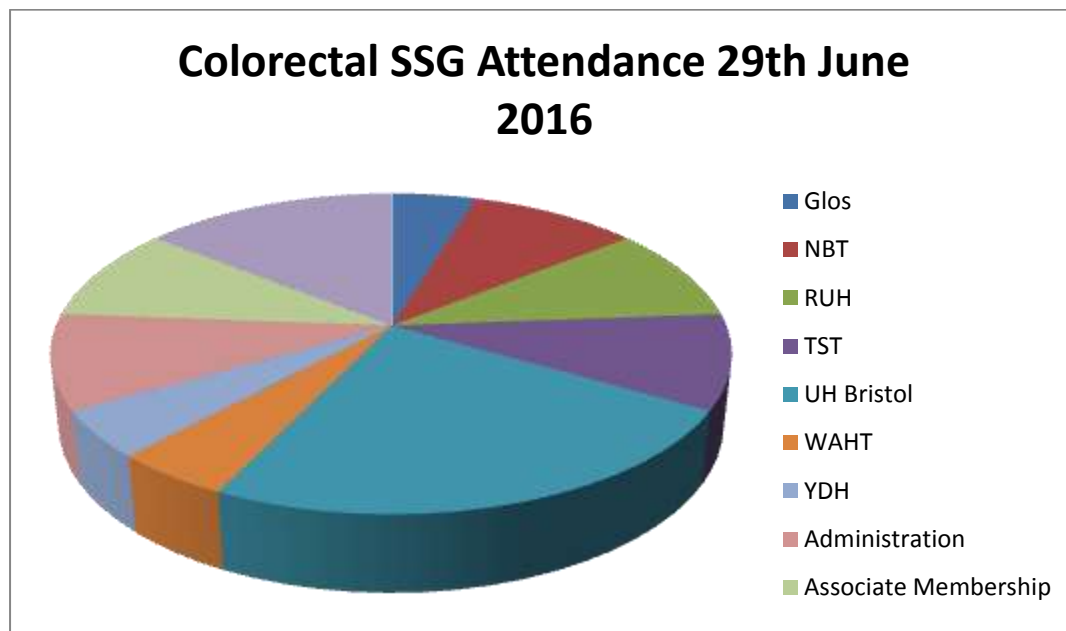
The table below notes the extended membership of the NSSG during 2016/17 and their attendance at the meetings.

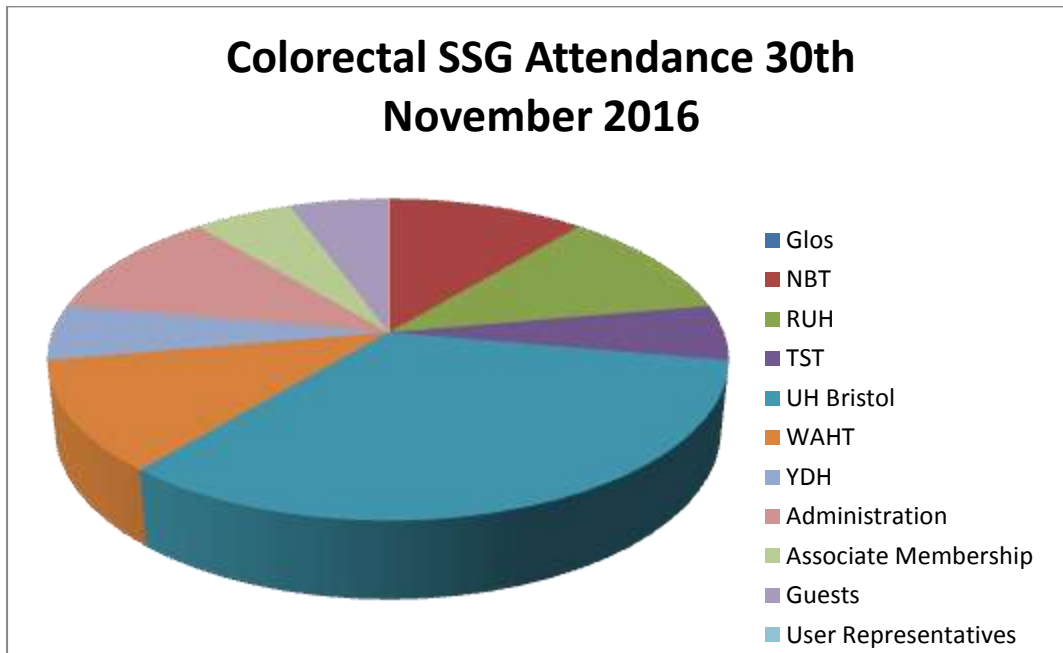
Table 1.1 Associate NSSG members and guests attendance 2016/17.

Trust	Name	Position	29.06.2016	30.11.2016
Guest	Fergus Macbeth	Oncologist		
UH Bristol	Joanna Smalley	Colorectal Cancer Clinical Nurse Specialist		
WOE CRN	Maxine Taylor	Senior Research Delivery Manager	✓	
YDH	Nicola Gowen	Cancer Manager	✓	
WOE CRN	Richard Mundy	Portfolio Facilitator	✓	
UH Bristol	Ruth Hendy	Lead Cancer Nurse		✓
NBT	Samuel Wadham	Cancer Manager	✓	
Pelican Cancer Foundation	Sarah Crane	Chief Executive		✓
Guest	Tom Treasure	Professor of Cardiothoracic Surgery	✓	

Table 1.2 Attendances by Trust

TRUSTS/OTHER	Colorectal SSG Attendance 29th June 2016	Colorectal SSG Attendance 30th November 2016
GLOS	1	0
NBT	2	2
RUH	2	2
TST	2	1
UH Bristol	5	6
WAHT	1	2
YDH	1	1
Administration	2	2
Associate Membership	2	1
Guests	3	1
Total Attendance	21	18





3. Chemotherapy Treatment Algorithms

An agreed list of acceptable chemotherapy treatment algorithms is reviewed bi-annually and is available to view on the SWSCN website [here](#).

Any treatment algorithms that require updating are to be listed in the NSSG work programme.

4. Clinical Trials and Research Activity

4.1 Discussion of clinical trials

Members of the NSSG discuss each MDT's report on clinical research trials within every NSSG meeting. A list of open trials on the Colorectal NIHR portfolio, and any potential new trials, is supplied for each NSSG meeting by the West of England Clinical Research Network (CRN) Cancer Research Delivery Manager.

Due to the CRN's mapping with the Academic Health Science Networks, Taunton and Yeovil are in South West Peninsula CRN. The Cancer Research Delivery Manager from the Peninsula CRN will provide the NSSG with the data for these Trusts. Potential new trials to open and actions to improve recruitment will be documented in the NSSG work programme. The NHS staff member nominated as the research lead for the NSSG is Dr Stephen Falk.

4.2 Recruitment Action Plan

The trials available in each Trust will be updated on the South West Strategic Clinical Network website at regular intervals so that NSSG members can ensure, wherever possible, that clinical research trials are accessible to all eligible colorectal cancer patients.



Somerset, Wiltshire, Avon and Gloucestershire (SWAG) Cancer Alliance

NSSG members can view potential clinical trials to set up via the following link:

<http://csg.ncri.org.uk/portfolio-maps/>

4.3 Current Clinical Trials Activity

A summary of the clinical trial recruitment into National Institute of Health Research trials during 2015 can be found on the SWCN website [here](#).

4.4 Recruitment of Teenagers and Young Adults (TYA)

There were no TYA patients recruited to Colorectal studies in 2016/17.

-END-