

## Greater Manchester Pathology Network – Network Advisory Group – Meeting Notes/Report

**Haematology NAG**  
**Room G54, One Central Park, Newton Heath, Manchester, M40 5BP**  
**Tuesday 12<sup>h</sup> May 2009 2:00pm-4:00pm**

In attendance			Apologies	
Steven Craig	SC	UHSM NHS Foundation Trust	John Ardern	Central Manchester NHS Foundation Trust
Tony Cumming	TC	Central Manchester NHS Foundation Trust	Sue Clark	The Christie NHS Foundation Trust
Michael Heaton	MH	Pennine Acute Hospitals NHS Trust	Keith Hyde	Central Manchester NHS Foundation Trust
Laura Kidd	LK	GM PCTs	Neil Jenkinson	GM PCTs
Neil Laurie	NL	Trafford Healthcare NHS Trust Royal	Peter Kinsella	Royal Bolton Hospital NHS Foundation Trst
Rachel Pearson	RP	GM PCTs	Gwynne Lord	Stockport NHS Foundation Trust
David Rowlands	DR	UHSM NHS Foundation Trust	Kate Pendry	WWL NHS Foundation Trust
Colin Wallbank	CW	WWL NHS Foundation Trust		

### Discussion Points

- **Welcome and Introductions** – DR welcomed everyone to the group and due to the addition of new faces introductions were made.
- **Chair's communications** – DR explained that the last Network Board meeting was held on 3<sup>rd</sup> April 2009, highlights from the meeting included a presentation by Alan Campbell (Director of Strategic Commissioning, Salford PCT) regarding the new guidelines in Commissioning. PCTs have to open the market to competition and to the private sector. This may include vertical integration of services (e.g. Foundation Trusts providing community services) and DR suggested that this could be an option for anticoagulation. Any decisions not to tender must be approved by PCT Boards.
- Discussions took place regarding the new Network Strategy Group. It was felt by some that maybe the Network Board was too large a group and so a subgroup the Strategy Group has been set up to deal with Strategic issues and feed back to the Board. DR enquired if there are any minutes available from the groups first meeting which took place yesterday. RP explained that minutes will be available and it was agreed they would be circulated with the minutes of this meeting.
- **Notes of meeting held on 10<sup>th</sup> March 2009** accepted as a correct record
- **Matters arising** as follows:
- Chair – RP explained that she had received no nominations to date. It was agreed to therefore make DR permanent chair of this group as there was no opposition.
- **Anticoagulation** – Gail Cinnamon (GC) did not attend today's meeting. RP and LK to contact GC re next meeting. DR suggested that we prepare a Network response in advance. DR reported that he had organised a meeting between the 3 Trusts (no representation from North Manchester) to discuss a Network response. The meeting concluded that the 3 Acute Trusts would have very similar ideas about how they would provide a service and having a network approach was a good idea. The meeting also had concerns that any other provider may not meet the very high quality standards employed by the Acute Trusts. TC commented that there is a need to get the appropriate Trust representatives together. SC mentioned the presentation to be given to the PCT on 1<sup>st</sup> June 2009. TC remarked that no one had been given any information regarding what to present on. MH commented that there does not appear to be any standardisation or central management for the Anticoagulation service in Pennine. He explained that Oldham has DAWN but it seems to be exclusive to them. Dosing is being done in the community, there was a suggestion for PCTs to buy into this solution and everyone have DAWN. TC enquired if anyone has links to Sheffield as they have done some good work on Anticoagulation. There is evidence to show patients have proved to be good at own dosing. SC mentioned that a Northenden GP in partnership with Lloyds Pharmacy have applied to arrange dosing for the whole of the Manchester PCT area. The group felt there would be a number of issues around training and staffing levels. MH enquired about the number of patients for North Manchester. The exact figure was unknown but SC estimated that the South is potentially 1800 and Central another 2000. DR suggested that if the group had a genuine interest in a joint approach a meeting could be scheduled for next week. MH offered to speak to Lesley Brimelow the Anticoagulation specialist.
- **Genetic Haemochromatosis** – RP circulated the proposal and 5-6 responses have been received and forwarded to TC. TC will collate, summarise and feedback the information to the Network Board. TC stressed that this is not HIS proposal he simply agreed to collate the responses. RP explained that due to other financial commitments and savings investment in this is a lower priority now. There was discussion around in house Haemochromatosis testing and the use of kits. Need to look at the margin for error and number of inappropriate tests.
- **Therapeutic Apheresis** – Dr Alderson was not present at the meeting to give an update. RP reported that a teleconference was being arranged to progress this work.
- **SWOT analysis on the implications of Carter/Darzi for Haematology** – DR explained that each NAG had carried out a SWOT analysis and in turn the Network Board had carried out a SWOT analysis. The Network Strategy Group will take forward any credible threats including the effects of the credit crunch.

- **PAGs – Update on progress** – the report was tabled including Workforce meetings being on hold, awaiting a response from the DH on the MSC consultation. TC is attending an RCPATH meeting in June on MSC and will report back if there is any new information. TC asked the group if anyone had information on the genetics pilots? It seems that no one seems to have any further information and no one from Haematology has been approached. TC also commented that the first Curriculum development group meeting is imminent. Timescales appear to be short. DR agreed and cannot see how the timescales can be met. RP explained that the Lab2Lab project is on target and that the iSOFT interface is finalised. Installation will take place at both Stepping Hill and MRI within the next 2 weeks and then testing can commence.
- **Any other business** –
- TC asked if it was worth looking at amending the current day and time of the meetings. RP commented that Tuesday meetings were originally to accommodate the previous Chair. LK to send out questionnaire re convenient days and times and to also reassess the distribution list.
- Kate Ryan (KR) and DR are looking into Haematinics. There will be an update for the next meeting.
- The group discussed the option of having joint meetings with Biochemistry. DR offered to speak with the Chair of Bio Chemistry.
- RP agreed to send info to MH on the Haemoglobinopathy service at MRI.
- IBMS CPD certificates were available.

#### **Actions**

- LK to recirculate DR to draft terms of reference and seek expressions of interest for anticoagulation group
- TC to draft Network response to proposals for GM programme of targeted screening for Genetic Haemochromatosis
- LK to circulate Strategy Group minutes
- RP to follow up with Gail Cinnamon re: Anticoagulation
- LK to circulate questionnaire on preferred days/time for meetings and to refresh the distribution list
- DR to discuss option of joint meetings with Jeff Seneviratne
- Haematinics to be discussed at next meeting
- RP to send info re: H60 to MRI

#### **Recommendations to the Greater Manchester Pathology Network Board (if any)**

- None

#### **Date and Time of Next Meeting**

Tuesday 14<sup>th</sup> July 2009 2pm-4pm – One Central Park, Northampton Road, Manchester, M40 5BP