

# **East Midlands Breast Cancer Expert Clinical Advisory Group (ECAG)**

## **ANNUAL REPORT**

**April 2016 – March 2017**

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**East Midlands Clinical Network**

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# East Midlands Breast Cancer Expert Clinical Advisory Group Annual Report

## 1.0 Introduction

This annual report relates to the operational period April 2016 to March 2017.

One meeting was held, as follows:

Meeting date	Trust representation
16 September 2016	No representation from BHFT

## 2.0 Key Achievements

- The Breast Clinical Guidelines have been approved by the Radiotherapy ECAG and wait approval from the Chemotherapy ECAG.
- East Midlands were 8<sup>th</sup> out of 15 nationally for recruitment to Breast trials.
- The NICE Quality Standards for Breast Cancer were ratified.
- Working in partnership with ROCHE to map out the Breast Pathway. It is currently based on two pilot sites which are DTHFT and UHL.
- 3 audits were conducted by the ECAG:
  - Audit Compliance with Breast Cancer risk stratified follow up pathway: compliance and adoption through the East Midlands
  - Oncotype Dx Audit for East Midlands
  - Neoadjuvant Chemotherapy

## 3.0 Challenges

- National 62 day wait cancer performance.
- Data collection.
- Stricter Consultant job planning from Trusts is limiting attendance at such meetings despite attendance of MDT lead mandated from peer review.

#### **4.0 Group Priorities 2017/18**

- Further work to ensure Risk stratified follow up pathways are implemented across the region.
- Timed Pathway to support Cancer Waiting Times and allow deficiencies in service to be identified.
- Patient pathway mapping to allow complete and accurate pathway commissioning.
- More detailed patient experience/survey review required and deficiencies rectified.
- Increasing opportunity for clinical trial entry across the region.
- Development of useful and deliverable programme of audit across the network.

#### **Recommendations:**

- Specialist nursing group to feedback around patient survey findings annually so that issues can be identified. Empower Clinical Nurse Specialists to set up local group so that good practice can be shared.
- Data collection at Trusts requires funding support and personnel trained for deliverables. It is challenging and near impossible to engage Trusts in Network wide audit programmes without availability of data collection.