

PAN BIRMINGHAM CANCER RESEARCH NETWORK**MINUTES OF RESEARCH COMMITTEE**

Held on Monday 15 November 2010 in Meeting Room 1,
PBCN Offices, Birmingham Research Park, 97 Vincent Drive

Present:

Ms Andrea Docherty	AD	NHS Birmingham East & North	BENpct
Dr Jocelyn Bell	JBe	Sandwell & West Birmingham Hospitals NHS Trust	SWBH
Ms Gina Dutton	GD	Pan Birmingham Cancer Research Network	PBCRN
Dr Daniel Ford	DF	Pan Birmingham Cancer Research Network	PBCRN
Dr Ye Lin Hock	YLH	Walsall Hospitals NHS Trust	WHT
Karen Metcalf	KM	Pan Birmingham Cancer Network	PBCN
Ms Jo Plumb	JP	University Birmingham Hospital NHS Foundation Trust	UHBFT
Ms Jackie Sears	JS	Pan Birmingham Cancer Research Network	PBCRN
Ms Suzanne Sumara	SS	Operations & Development Manager	PBCRN
Mrs Maggie Hope	MH	Pan Birmingham Cancer Research Network	PBCRN

1. Apologies:

Ms Liz Adey	LA	Walsall Hospitals NHS Trust	WHT
Ms Jenny Barnwell	JBa	Cancer Research UK Clinical Trials Unit	CRUK
Ms Bethan Bishop	BB	Heart of England NHS Foundation Trust	HEFT
Professor Don Milligan	DM	Pan Birmingham Cancer Network	PBCN
Ms Lesley Devaney	LD	University Birmingham Hospital NHS Foundation Trust	UHBFT
Mr Rob Grimer	RG	The Royal Orthopaedic Hospital NHS F Trust	ROHFT
Mrs Fran Gurney	FG	User Group Representative	User
Kelly Hard	KH	Birmingham Women's Hospital Foundation NHS Trust	BWHFT
Professor Nick James	NJ	University Birmingham Hospital NHS Foundation Trust	UHBFT
Dr Bruce Morland	BM	Birmingham Children's Hospital NHS Foundation Trust	BCHFT
Ms Theresa Morton	TM	BBC CLRN	CLRN
Dr Kai Ren Ong	KRO	Birmingham Women's Hospital Foundation NHS Trust	BWHFT
Prof Sue Wilson	SW	Primary Care Clinical Trials and Research Unit, University of Birmingham.	UoB

		ACTION
2.	Minutes of Last Meeting held on 15 July 2010	
	These were agreed as a true record.	
3.	Matters Arising	
	SWBH Trust Report AD requested an update regarding the transfer of the University employed Research Nurse to SWBH. JB reported that the matter is under discussion, as the University Research Nurse Pay Scale means that the current occupant of the post falls between Band 6 and 7 of the NHS Payscale and the Job Description is being finalised. A report will be tabled at the next meeting.	DW/JB
	Training Budget GD advised that a full report will be given when the central T&E Group has completed organisation.	GD

	<p>ROHFT Attendance</p> <p>GD informed the meeting that DM had written to RG. A reply was received stating that he would try to attend in future. AD requested GD to write to RG asking for the name of a Deputy and endeavouring to secure availability when ROH could be represented.</p>	GD
4.	Network Update	
	<p>Staffing</p> <p>GD stated that SS started on 25 October 2010 as Operations and Development Manager and will be taking over delivery of Industry Portfolio, Recruiting to Time & Target and Portfolio Balance. Other strands will become clear over the next few months. GD's two day per week secondment to the NCRN is continuing. The new Network Data Manager Richard Cawthraw, started on 31 August and is hosted within the Core Team to ensure control of the HR and Honorary Contract process.</p> <p>Hosting Arrangements</p> <p>GD reminded the Group that PBCRN are hosted by South Birmingham PCT (commissioning) and, therefore, will need to move host organisation. It is intended to coordinate the change to a new host with the Cancer Network.</p> <p>Children's Cancer and Leukaemia</p> <p>GD reported that it has now been agreed that CCL will fall within the remit of NCRN with expectations that Cancer Research Networks will work closely with the Medicines for Children Research Networks.</p> <p>Historically, CCL had some protected funding from Cancer Research UK but will, there will not be hypothecated funding from April next year, as such will form part of the annual funding cycle with the Research Networks.</p>	
5.	Trust Reports	
	<p>BCHFT</p> <p>No Report received.</p> <p>BWHFT</p> <p>Report tabled at the meeting.</p> <p>GD reminded the Group that BWHFT predominately recruit to Clinical Genetics studies. Several studies had been very slow to start but are now recruiting well. Total recruitment is as expected.</p> <p>HEFT</p> <p>Report circulated prior to meeting.</p> <p>As there was no Trust Representative present, GD will feed back to the Trust requesting a Senior Manager oversees the production of the Report, ensuring relevant comments are added. Generally, the Report is completed by a Data Manager.</p> <p>ROHFT</p> <p>Report, completed by a Data Manager, circulated prior to meeting</p>	GD

	<p>GD added that ROHFT is very portfolio dependent and recruit well to studies they open. The Research Nurse is now on maternity leave and cover has been arranged.</p> <p>SWBH Report completed by Jo Dasgin, Research Nurse, was tabled at the meeting by Gina Dutton. Haematology figures have not been included. The Trust was requested to ensure these are included in the next Report.</p> <p>AD requested that, in future, the Report be overseen by DW, Trust Nominated Cancer Research Lead, so that strategic comments can be added. JB will inform DW of this request.</p> <p>JB reported that a problem with long-term sickness in nuclear medicine was now resolved, so delays should improve.</p> <p>GD stated that the Trust should concentrate on recruiting to RCTs, as the patient population of SWBH is a large proportion of PBCRN and the Trust is not achieving their potential.</p> <p>UHBFT Report completed by Lesley Devaney, Cancer Research Business Manager, circulated prior to meeting.</p> <p>UHBFT were complimented on a comprehensive report. GD added that Trusts have been requested to include recruitment targets in the Report, to enable target setting to be improved. The 'red' figures probably reveal poor target setting rather than low recruitment.</p> <p>DF asked what policies are in place to monitor low recruiting trials and to close studies where patients are not recruited.</p> <p>AD requested that UHBFT bring an update from the Cancer Research Facilitation Group to the next meeting regarding the process of closing non-recruiting trials.</p> <p>JP will discuss these matters with the Trust and ensure a report will be made to the next meeting.</p> <p>WHT Report circulated prior to meeting.</p> <p>YLH reported recruitment is increasing, the Research Team has appointed to the new posts, R&D problems have improved and the Trust have been successful in applying for FSF funding for radiology support.</p> <p>UoB-Primary Care Clinical Trials and Research Unit No-one present</p> <p>UoB-Cancer Research UK Clinical Trials Unit No-one present</p>	<p>JB</p> <p>NJ</p>
6.	PBCRN Report to Network Governance Committee	

	<p>R&D Approval Times A copy of the Report on R&D Approval times sent to the PBCN Governance Committee had been circulated prior to the meeting. The Governance Committee have not requested any further updates. GD reminded the Group that Trusts are requested to record study set-up times in the signed Service Level Agreement. The amount of data received is not yet mature enough to analyse, but she highlighted that a high proportion of studies 'in set-up' were yet to have the SSI form submitted to R&D.</p> <p>Risk Register GD reported that the Cancer Network has always maintained a Risk Register, but that this was the first time the Research Committee were seeing the risks flagged by the Research Network. Most risks have been on the register a long time and reflect the nature of short term posts, cyclical funding and the introduction of the changes in R&D funding. Two new risks had been added. The risk relating to the failure to agree funding between BBC CLRN and UHBFT has been rated a red status and a complementary risk relating to the cancer research funding for all Trusts is currently at amber.</p>	
7.	Performance	
	<p>Performance Measures Internal Trust Accountability Portfolio/Trial decision making processes</p> <p>This item was deferred to the next meeting.</p> <p>Recruitment A Recruitment Report was circulated.</p> <p>DF reported that recruitment has increased and is presently at 9.00% into RCTs, although recruitment into non-RCTs was down a little. UHBFT and SWBH have increased whilst HEFT appears to have reached a plateau.</p> <p>GD reminded the meeting that as a devolved Network, we cannot instruct Trusts in what studies they must open. The Operations & Development Manager will work with Trusts to ensure succession planning.</p> <p>Industry Studies A Report was circulated</p> <p>GD gave an update on the Industry Portfolio, which is now a very high DH priority. Historically, there has been a very good relationship between Pharma and Investigators in this area and target-setting has begun to improve. The monthly reports received by PBCRN now show red/amber/green in respect of national recruitment.</p>	
8.	CLRN Report	
	This item was deferred	
9.	Financial Update	
	<p>FSF – 2010/11 Allocations GD had circulated a summary of the agreed bids for funding in October 2010. No objections had been received. A second call for bids will be</p>	

	issued shortly. Central Region training allocation in future years GD informed the group that the NCRN had re-arranged the Training & Education Funding and allocated to regional training collaborative. The Central Region had funded an Administrator through centrally held flexibility and sustainability funding which needs to be picked-up from April 2011. The Research Network Managers in the region believe this is an important post which should be continued at a cost of approx £1500 per Network. The group approved.	
10.	Performance and Peer Review -feedback	
	DF reported that there had been positive feedback at the Network's Performance Review with the NCRN Co-ordinating Centre, with particular praise concerning recruitment across a broad portfolio and integration with the Cancer Network and Trusts. It was felt that there could be more User involvement. Therefore, a meeting has been arranged with several members of the User Partnership with a view to establishing a small panel of users who would be available to the Research Network.	
11.	Any Other Business	
	There was no other business	
12.	Date of Next Meeting:	
	t.b.a.	