



Action points from meeting 11th March 2014

Attendance: Sian, Rob. Richard Kim, Colin, David Whiting, Roger Fallon, Rachel Redgrave (part),

Apologies: David Rees, ray Dowling, Ian Barnes, Moray,

Volunteering opportunity to take forum minutes. Sian left a voice mail for Hannah Roy but has had no response.. Emailed Helen Knight at Macmillan, but the email was returned.

Patient entitlement leaflet Sian has tracked down the original of this leaflet with a logo, however it needs amending to one page as per Moray's recommendation.

Health & wellbeing events David W advised group of current suggestion to run two events in Telford (meeting Point House) and two in Shrewsbury (Hamar Centre). Focusing on psychology and healthy eating. To be run in daytime, to make it viable for professionals long term. Discussion was had re cost of parking at SaTH, suggestions were made on using the hospice as a location. Roger fed back on his attendance at the Midlands Prostate Cancer Survivorship Conference. (see separate sheet). It was agreed there was value in holding tumour specific events, but without admin and clinical support this was not viable.

Roger agreed to check with Prostate UK what they could offer regarding holding the same event locally, is it just funding or do they do the admin, advertising, speakers etc.

Sian to arrange to raise question with Strategic clinical network expert patient advisory group regarding MRI scans prior to biopsy. Appears to be gold standard treatment happening in USA, Canada and Australia and the Queen Elizabeth in Birmingham are possibly doing a scan prior to surgery.

Discussion continued regarding PSA testing and events that had previously been held offering 'mass' testing for men in several areas.

Roger agreed to check with Prostate UK on their views regarding PSA testing and whether they were supportive of similar events.

Discharge from active treatment summary This is 'ongoing' with negotiations on including it formally within the contract for SaTH.

Giving you a voice in your healthcare consultation – cancelled due to lack of interest. Interesting discussion by the group on how to reach patients. It was recognised the support of SaTH was critical in this. **Agreed to ask Rachel how this can be achieved in future.**

Ask 3 questions material. Following discussion it was agreed that having the clinical team engaged with this would help to make it more successful and effective. **Agreed to ask Rachel how this can be achieved.**

Further discussion was had regarding reaching cancer patients and representing the cancer patient. And how the Cancer Forum can act to positively influence the present cancer care and treatment presently provided by SaTH. **Following which David W was asked which groups/meetings he attended that had patient representatives. Currently none of them have patient representation. David agreed to take the question away as to whether it was possible for patient representatives to attend these meetings. David also advised that as from January SaTH had started having a Cancer Board meeting, agreed to ask Rachel if we can send a representative and to ask** how the Cancer Forum can act to positively influence the present cancer care and treatment presently provided by SaTH.

Aims and objectives the initial list of 'headings' was briefly discussed. See separate document.

End of Life event on 14th May at Wroxeter hotel during dying matters week. Flyer to be circulated when available.