

Management Committee Thursday 10th November 2022

Present: Vicky Coyle, Fiona Davey, Alan Jackson, Sion Parry, Martin Wiseman, Steve Wootton

	Notes		
Minutes of the last meeting	Edit to minutes - Judith Williamson will help us to put together the bid for PPIE funding. The minutes were approved pending the edit.		
Matters arising	<p>Nutrition Society An edited version of the EOI was presented. Action: SAW and AAJ to edit further and submit to Nutrition Society next week. The short term goals are about bringing people together from the Nutrition Society.</p> <p>Pancreatic Cancer UK A meeting was held with PCUK in October about identifying areas of common interest. They have suggested setting up a Steering Committee for a workshop on supportive care in pancreatic cancer and will be in touch with us to arrange the meetings. We will meet between ourselves before their steering group meetings to ensure we have a clear intent for the meetings.</p> <p>A question was raised about how we engage with site-specific matters as nutritional management may differ depending on the disease. We will draft a framework of where we feel research is required before further meetings. The support might differ in terms of when in their treatment they need support, as well as the different kinds of support. Action: produce one pager of initial thoughts</p> <p>An algorithm on the principles of care was proposed as an objective. This would outline principles to aid clinicians in decision making processes and where they need to seek help from dietitians.</p> <p>Feedback from Sam It would be useful to find out from Sam what he has learnt in general or in a specific sense of the LWBC group in his experience and any insights or guidance he could offer so we can build upon his experience in this new phase Action: request feedback from SA</p> <p>BRC Communication via NOCRI</p>	<p>SAW/AAJ</p> <p>SAW/VC</p> <p>FD</p>	<p>15/12/22</p> <p>25/11/22</p>

	<p>This has been pushed back as the contracts are not being issued until December. They will be contacting BRCs who aren't currently involved with TRCs, and also the ones who have a direct relevance to us.</p> <p>There are a few BRC anomalies that don't fit with DART who may be interested in working with us.</p> <p>Kate Holmes will be the NOCRI link for us after Sion leaves.</p> <p>Mike Grocott has offered to be BRC Champion.</p>		
Liaison committee	<p>A paper was presented which sets out the background as a starting point to go to the Collaboration and ICONIC.</p> <p>AAJ attended the WCC. It was clear that nutrition was mentioned a lot in clinical, policy and planning discussions but there was no attempt to say what it is in a meaningful way. What is needed to get the international cancer community to embrace nutrition how we think it ought to be embraced, and to be embraced at the highest levels of international funding and at all levels of service delivery.</p> <p>If we had a group of people who were related to the cancer community who were adequately sympathetic to nutrition, to start to promote a dialogue against the background of our experience and feeding back into what we're trying to do. This will provide the sort of opportunity to focus on our area of interest and enable structure.</p> <p>KCL has a major cancer policy group that has awareness of the importance of nutrition. This group is very closely aligned with UICC and WCC. Julie Torode has been appointed to this group.</p> <p>Elio Riboli, who set up EPIC and has extensive experience in this field. Such people will play a supportive and important role in helping to create the argument and a stronger umbrella to work under. Bringing a small group together on a regular basis to consider cancer and nutrition and the opportunities would have mutual benefit.</p> <p>Action: edit document to include broader ambition as well as more specific goals, and thoughts about composition.</p>	FD/MJW	

	It will need to go to the Executive Committee and ICONIC's committee first but can double up as invitation to the proposed group members.		
Toolkit	SAW has spoken to Laura Miller and has started the conversation about involvement in work stream leadership of the Toolkit group.		
Collaboration strategy	Work streams would benefit from stronger direction from the Executive Committee. Over time the Collaboration has evolved and covers a comprehensive selection of areas. In order to generate bigger impact for the benefit of patients, it would be useful to focus activities on some key headline topics so there is a clearer direction of travel. The areas of focus have been proposed as: - developing a quality assurance framework - prehabilitation and its mechanisms - Novel aspects of nutrition in CTYA cancer.		
Annual report	The template for the report was approved. Action: MJW and FD to allocate sections of the report for writing		
Succession planning	An option paper was presented on succession planning for the committees. Option 2 was agreed upon for the Executive Committee. <ul style="list-style-type: none"> Extend Executive Committee Chair term by one year to be a three-year term. The Deputy Chair would act as the Chair elect and would have a definitive time frame for stepping up to this role. We will allow each work stream to decide if they would prefer a co-chair or chair/deputy model. This will be formally reviewed after 5 years. Management Committee leadership Action: review role description	MJW/FD	
Work stream leads meeting	Items for agenda <ul style="list-style-type: none"> - Make aware of new strategy - Succession planning - Internal communication between groups - Feedback at end rather than beginning - Use example of algorithm of care as an idea of a collaborative project Action: produce briefing of change of strategy for work stream leads	MJW/FD	
WCRF Partnership	FD is currently working with WCRF to find a new date for the Steering Group.		
PPIE	Action: SAW to arrange meeting with Judith Williamson, invite MJW, FD and AAJ.	SAW	

	Action: remove limit on number of panel members from PPIE panel TOR	FD	
ICONIC	Quality assurance framework in Ghana – starting to explore the extent to which the quality assurance activity can be recognised as a national standard through the Ghana Standards Authority and a defined competency in the health care professional training agenda. This will become the reference standard.		
Work stream updates	<p>LWBC</p> <p>Clare Shaw shared with the group that David Bowrey stepped down from the Chair role and she will be stepping up to the role of Chair. An advert has been circulated for a co-chair. An expression of interest has been received for a deputy to train as a future co-chair.</p> <p>Maria Pufulete has continued on the analysis of the data of from the prehabilitation service FOI request. A group will convene this month to work on the publications from this project.</p> <p>Molecular Mechanisms</p> <p>The group is looking at how they can work better with the Nutrition Society and also how they can explore the evidence that underlies prehabilitation.</p> <p>The group will also be exploring opportunities for collaboration under the CRUK biology to prevention research call and will be having a specific meeting about this. We will invite members from the population health group to the meeting.</p> <p>Professionals</p> <p>Lucy Elridge has agreed to chair the group and will work with Elisa Mills, identified through UKONS, as co-chair.</p> <p>Toolkit</p> <p>The group will be meeting next week. The question was raised of how we will engage with ICONIC on their similar activity. Our ambition ought to be to have it as a wider regulatory framework and applied in services.</p> <p>SAW will act as the link between the groups.</p>		
AOB	FD met with a new business development manager from NOCRI about how the team can support the collaborations in engaging with industry. BD’s responsibility is bringing industry into the NIHR.		

	SAW would be the liaison point for this. Action: Invite Rebecca to come to a future meeting to set out landscape on what they can offer and the expectations on the Collaboration.		
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