## **Minutes**

## **Cancer Control Advisory Council**

Date:	3 December 2019
Time:	9:30 am – 12:30 pm
Location:	1N.3, Ministry of Health, 133 Molesworth St, Wellington
Chair:	Dr Ashley Bloomfield, Director General of Health (arrived late)
Attendee members	Professor David Tipene-Leach, Dr Richard Sullivan, Dr Christopher Jackson, Dr Nina Scott, Ailsa Claire, Graeme Norton, Professor Diana Sarfati, Shelley Campbell
МОН	Deborah Woodley, John Whaanga (arrived late)
Cancer Control Agency	Dawn Wilson, Jordan Jansen (secretariat)

**NOTE:** Due to item 3, Official opening of the Cancer Control Agency and the Prime Minister's involvement and ad-hoc preparation the times below indicate when item discussions took place. There were flight cancellations due to weather, so NS and SC joined by teleconference from 10:50am.

	Agenda Item	Discussion				
1.	Welcome	10:50am The Director General (DG) welcomed the council and thanked them and the cancer team for their efforts contributed to the Cancer Control Agency (the Agency) opening				
	Minutes of previous meeting	Accepted with no changes.				
	Declaration of Interests Register	Update to be inclusive, not just cancer-related activities.				
	Actions from previous meeting	Noted actions completed or covered as Agenda items.				
	ACTION: Update Interests Register and circulate to members.					
2.	Cancer Agency progress and priorities (Note updated 100 Day Plan)	Outline of 100 day plan presented.  The Agency will develop a monitoring plan to monitor its progress against the 100 Day Plan and work on the cancer plan for next year. It is working to identify channels to engage with its consumers and will progress work on patient reported outcomes. Three priority cancers will have QPI work completed by the end of year one for the Agency.  Work is also underway for upper GI cancers (esp stomach, pancreatic) which are in the top 5 for mortality among Māori and for which there are major inequalities. Also NZ is not doing well in relation to survival comparatively at an international level.  • There was a discussion on how the Agency prioritises its work. A prioritising framework is underway and will be needed to ensure clear and transparent decision making. Equity is a primary focus.  • There was a discussion about the QPI and cancer data work, and how				

lung cancer screening. The DG clarified that policy decisions in relation to screening will remain with NSU, although this does not preclude the Agency supporting this work and providing input.

- The CHIS Board will continue to provide advice and support to the Agency, most likely primarily to the data, monitoring and evaluation group. Concern was expressed about quality of emerging clinical registry's and AS suggested CHIS to pull this together to develop guidelines around it.
- The SACT project was discussed and its relationship to MOSIAC and the need for a National solution. Potential for a national approach to procurement was discussed. DS outlined a meeting that she had with DHB COOs, who were also keen to progress this. The Agency is already in the process of developing information that could form the basis of a business case. Council supported a national approach. DS will follow up with Shayne Hunter on the agreed approach to progress this.

**ACTION:** Progress noted.

**ACTION**: Work with CHIS to consider developing guidelines for clinical registers.

**ACTION:** DS to follow up with Shayne Hunter on the possibility of an agreed approach to procuring MOSIAC. A business case may be required.

3. Official opening of Cancer Agency

10:39am After this item the council returned to start their meeting from item 1. Before this a brief conclusion of the event was provided to Nina and Shelley who joined by teleconference (late apology).

10:41am - JW joins meeting

- Council introduced to John
- The DG thanked DS for taking on interim CE position
- DS thanked cancer team for their work towards setting up the Agency acknowledging their professionalism and skill.

**ACTION:** Early access schemes and Minister's advice as agenda item on next meeting.

**ACTION:** Drug listing and de-listing process as future agenda item.

Māori
partnership
and proposed
Māutaranga
framework
process

11:15am Structure of the agency will include senior equity lead, to be a leadership role.

- CE accountability acknowledged on pro-equity. Partnership needs to be on multiple levels and to consider a shared resource. Monthly meetings with Hēi Āhuru Mowai (HAMo) chair and CE of the Agency will be established.
- HAMo has developed an engagement plan to be presented at next meeting.
- There was a discussion regarding role, and mandate of HAMo in terms of being representative, and their current proposed process to establish that.
- There was also discussion about the respective roles and responsibilities of the Agency and HAMo in relation to engaging with Māori. HAMo is a key partner for the Agency and is leading an engagement process. It will be important to involve the Agency in this process. Chair of HAMo and CE of Cancer Agency will continue to work through this. DS will be meeting with HAMo on 13 Dec.
- Network Māori cancer groups will also be key groups to link in with, and ensure ongoing links.
- The DG summaried that HAMo was established by MoH to inform cancer prior to the Agency's establishment. Acknowledged that HAMo is currently seeking mandate to continue doing their work at the Agency's leadership level. The DG noted that there is a lot of work to establish Crown Maori relationships in health, post Waitangi Tribunal findings in relation to Wai 2575 claim.

## 11:38am GN leaves

 Draft plan to develop Mātauranga Māori framework tabled. NS feels confident in the framework and that the Agency will deliver this

		successfully. HAMo is working to develop the framework and process, with ongoing discussions between NS and DS. Will need to identify the right person to lead the work. Agency equity lead will also be important in this work.  11:42am Teleconference cuts out 11:43am GN and teleconference returns  huru Mowai's engagement plan to be discussed at next meeting.  nd NS to meet regarding framework. Final framework plan will be presented to exagenda item.				
5.	National Networks	<ul> <li>11:46am - DS provided memo outlining progress to date on engagement with Regional Networks,</li> <li>Workshops with each of the Networks are scheduled</li> <li>Important to build regional engagement framework after these workshops.</li> <li>Aim to develop a discussion document on new structure incorporating Regional and National functions early in 2020.</li> </ul>				
	ACTION: Coun	cil noted.				
6.	Cancer Health Information Strategy	See notes under 2. above				
7.	Terms of Reference and Chair	<ul> <li>11:50am – The DG outlined the process to get to the Agency and interim CE.</li> <li>Council is intentionally small and is skill based, not interest/representation based.</li> <li>Council agrees to keep Council skills based and confirms current size and skill mix.</li> <li>Terms of Reference updated and will be finalised before next meeting.</li> <li>Need to establish permanent Chair. DG prepared to be interim Chair and to attend meetings ex officio.</li> </ul>				
	<b>ACTION:</b> Terms of reference to be updated and circulated before next meeting.					
8.	New Zealand Cancer Action Plan  ACTION: None	<ul> <li>Cancer plan has been finalised, and will be going to Cabinet for approval on 16 December.</li> <li>Noted that timeliness of access to treatment needs to be monitored.</li> <li>CJ had concerns about PHARMAC which he had sent to the Cancer team for consideration.</li> </ul>				
9.	Determine	Recommendation to invite Shayne Hunter to next meeting to discuss				
3.	meeting dates for 2020	<ul> <li>various IT related issues (including tele-chemotherapy, e prescribing).</li> <li>Council agrees to meet quarterly with a progress report and hold interval teleconferences if necessary. Meetings to be held on a Friday and should be held two weeks prior to CHIS.</li> <li>A doodle poll should be put together to determine final meeting times.</li> </ul>				
	<b>ACTION:</b> Schedule quarterly meetings for 2020, and run poll to finalise times. AC suggested that the CHIS Board may like to meet at least two weeks prior to the first Council meeting. <b>ACTION:</b> Invite Shayne Hunter to next meeting to discuss IT issues.					
10.	Other business	<ul> <li>Top three priorities for discussion at next meeting.</li> <li>12:2pm DS thanked members for their time. Meeting closed.</li> </ul>				
	ACTION: Top three priorities to be an item at next meeting.					

National Cancer Control Agency Advisory Council meeting actions as at 3/12/19					

No.	Action	Lead	Date raised	Due Date	Status
1	Update Interests Register and circulate to members	Jordan	3/12/19	Next meeting	Completed
2	Terms of reference to be updated and circulated before next meeting	Jordan	3/12/19	Next meeting	Completed
3	Include on meeting agenda: Mātauranga Māori plan, relationship with Hei Āhuru Mōwai, Māori cancer hui and engagement, CHIS and expectations for focus/delivery, progress on national network and alignment with Agency	Diana	19/11/19	Agenda items	Discussions underway and items on-going
4	Board to consider top three priorities for the Agency before next meeting.  To include overall prioritisation approaches in a future Board Agenda.	Diana	22/10/19	Next meeting	Agenda item
5	To invite Chairs of Social Investment and Te Arawhiti to provide guidance, learnings and examples of how to work and engage to upcoming Board meeting.	Jordan	22/10/19	Next meeting	
6	Include discussion on targets/measures in a future meeting	Jordan	22/10/19	Next meeting	
7	Diana to follow up with Shayne Hunter on the possibility of an agreed approach to procuring mosaic. A business case may be required	Diana	3/12/19	Next meeting	
8	PM asked group of early access schemes, pharmaceuticals and Bowel Cancer Screening age extension, to be agenda items	Diana	3/12/19	Next meeting	
9	Schedule drug listing and de-listing process as future agenda item.	Diana	3/12/19	Next meeting	
10	Hēi Āhuru Mowai's engagement plan to be discussed at next meeting	Nina	3/12/19	Next meeting	

11	Terms of reference changes: needs to change to work not decision making, provide support and advice to CE of the Agency under 4 Indemnity, Cancer Action Plan is not 2025, acronyms to be introduced, title for Diana on council as CE or National Director to be determined. Key relationships section needs to be fixed (not agencies), additions from Nina on UNDRIP.	Jordan	3/12/19	Next meeting	Completed
12	Schedule quarterly meetings for 2020, and run poll to finalise times. AC suggested that the CHIS Board may like to meet at least two weeks prior to the first Council meeting.	Jordan	3/12/19	Next meeting	Completed
13	Invite Shayne Hunter to next meeting to discuss IT issues	Jordan	3/12/19	Next meeting	Completed
14	Top three priority cancers to be an item at next meeting	Jordan	3/12/19	Next meeting	Completed
15	Work with CHIS to consider developing guidelines for clinical registers	Ailsa	3/12/19	Next meeting	