



NLCFN Newsletter

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MESSAGE FROM THE NEWS EDITOR

Welcome to the Spring Newsletter

Now is as good a time as any to do our professional spring cleaning and look back and see how far we have come and make refreshed plans for the future.

This year is already almost half way through and the committee members have been busy. This edition has focused on some of our activity behind the scenes.

There was a good nursing presence in Dublin at BTOG and posters in abundance. The Nursing sessions were well attended and the feedback positive overall suggest it was well received. As always the networking element was high on the feedback and if you haven't attended to date please contact us and we can advise how you might access sponsorship.

The deadline for IASLC World Lung Cancer Conference has now passed but if you have had abstracts/posters accepted please let Diana know so we can ensure you have NLCFN support and we will then showcase it in a future newsletter.

Many of you will be taking place in the NMC Revalidation pilots and I am hoping that we might have a reflection on this process in the next newsletter so that we are better place in approaching what is expected of us at the end of the year. Details of the story so far are included in this edition.

Finally, the committee members had a recent discussion about the completion of DS1500 forms by nursing staff. I have had a conversation

with the DWP Special Rules Medical Officer and have been told that providing you inform them in writing of your intention to complete them, what your position is (i.e. Macmillan Lung Cancer Specialist Nurse) with your bank details, completed in section 2 on page 2 of the claiming your fee form, the payment can be made to the signatory or a fund of their choosing. Please note you will be allocated a reference number by the DWP which you will have to attach to each DS1500 form completed to ensure the payment is directed appropriately. Without this you will not receive payment. Note you will be liable for tax on any payments received and also that you need to check with your NHS Organisation that they are happy for this to happen as for some doctors /Managers they may present objection. I am certain many nurses complete these forms in part or flag them up to Medical colleagues for completion with their signature! Many CNS who have access to this money use it for study leave/training purposes and it may help in these times of reduced funding opportunities.

Please consider offering a contribution to our next newsletter and let us know what you want to know more about.

Thanks,
Naomi Horne
Newsletter Editor



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LUNG CANCER – PAST, PRESENT AND FUTURE NATIONAL LUNG CANCER FORUM FOR NURSES ANNUAL CONFERENCE 2015



The NLCFN is delighted to announce details of the Annual Conference, which is taking place on 19th-20th November 2015. Come and share best practice with your colleagues and learn all about the latest developments in the diagnosis and management of lung cancer and mesothelioma.

This conference, offers you the chance for focused updates specifically for lung cancer nurse specialists offering you high quality sessions by experts in the field all suitable for your professional development helping you to prepare for revalidation.

An excellent conference enabling me to share experiences with peers

Full programme for your professional development portfolio

Our jam-packed programme this year takes a look back to help us see where we have come from and provides you with a glimpse of the future for lung cancer diagnosis and management helping you to get to grips with immunotherapy and how it will impact on the management of your patients.

Great mix of presentations

With key plenary sessions on mesothelioma, key oncology issues, managing patients on new treatments and sessions on bone management, management of breathlessness and improving nutrition there is something for all lung cancer nurse specialists.

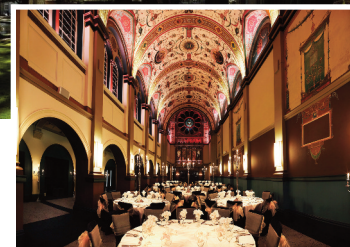
This year's speakers include Richard Steyn (UKLCC), Jesme Fox (Roy Castle Lung Cancer Foundation), Liz Darlison (Mesothelioma UK), Professor Dean Fennell (Chair of Thoracic Medical Oncology, Leicester), Gerry Slade (Specialist Nurse Practitioner, Papworth), Dr Tom Newson-Davis (Lead Clinician Acute Oncology, Chelsea and Westminster, London), Dr James Spicer (Medical Oncology Guys and St Thomas', London) and Tim Benepal (Nursing Lead, Acute Oncology St George's, London).

A fabulous conference with every session relevant and informative. So positive to listen to clinicians with a strong passion for excellence in lung cancer care. Plenty of information to being back to practice, Extremely well organised and fantastic venue/ accommodation. Thank you.

Location

Set in 40 acres of groups this year's conference will take place on the beautiful Beaumont Estate near picturesque Old Windsor within easy access of London Heathrow and the major M25 motorway network.

Renowned for its grand spaces and conference facilities, and noted as a leading UK conference venue, Beaumont Estate offers a fantastic festive conference venue for NLCFN. Located conveniently close to the M3, M4 and M25, as well as 3 main rail links into London and just 15 minutes from Heathrow Airport, this hotel & conference venue is ideal for bringing everyone together whilst also enjoying close proximity to the stunning town of Windsor.



Excellent speakers, very entertaining creating a good learning environment

Savings of over £130 for members of NLCFN

Registration starts from just £199 for members of the organisation to register before 12th September 2015, so register now to take full advantage of this early bird rate. Registration includes conference registration which includes attendance for both 19th and 20th November, plus dinner and accommodation for the night of 19th November 2015.

To register for the conference visit the website at <http://www.nlcf.org.uk/annual-conference>. Make sure you log-in first to ensure you get the rate you are eligible for.

To download a copy of the conference programme visit <http://www.nlcf.org.uk/programme>

Really enjoyed the mix - best I've been to!

We've listened to your feedback from last year

We have ensured this year's venue has excellent parking facilities and we have ensured that there will be healthy options for this year's lunches.

FOR MORE INFORMATION AND TO REGISTER VISIT
<http://www.nlcf.org.uk/annual-conference>

Tricia Bryant
Operations Team

Call for Abstracts for 2015 Annual Conference

Submit an abstract for poster presentations on the following categories:

- Examples of achievement in improving patient care
- Developing good practice
- Implementing evidence based care
- Symptom management
- Nurse led initiatives
- Clinical leadership



See our website for full details and instructions on how to submit your abstract <http://www.nlcf.org.uk/content/submit-abstract>

Closing date for submissions: 26th September 2015

Posters will be judged at the conference and the winner(s) will receive a prize.

NLCFN Annual Award – opportunity to win £1500 and share your project experience

NLCFN members are invited to submit an abstract outlining a project or initiative devised by individuals or as a team, describing how the project affected patient care and outcomes. The work may have been adapted from other therapy and treatment areas but will be new to the lung cancer team. The initiative or project must have been implemented within the last 12 months. Visit our website for information on application criteria and to download the guidance notes and application form <http://www.nlcf.org.uk/content/AnnualAward>.

Closing date for applications 26th September 2015

Watch out for the next newsletter to learn more about last year's winners.

LUNG CANCER NEWS AND PUBLICATIONS

NLCFN Best Practice Pre-habilitation Guidance for LCNS

This new document, published following the 2014 Annual Workshop and led by Karen Clayton, aims to provide best practice guidance for Lung CNS and allied healthcare professionals, to enable improvements of local services in the pre-habilitation of patients with lung cancer in the diagnostic pathway.

Members can access the document at <http://www.nlcf.org.uk/prehabilitation-guidance-lcns>

British Thoracic Oncology Group Conference 2015

723 delegates (519 Health Care Professionals / 204 Industry) attended BTOG this year with 190 posters presented. The event was a great success.

Fantastic mix of all aspects of Thoracic Cancer management - BTOG feels like all the good bits of a massive MDT meeting with added social aspects

I like the multidisciplinary aspect and opportunity to learn from other specialties

Excellent conference with a good range of speakers from all the different disciplines and audience members

An excellent learning forum, with pertinent and up-to-date presentations which were evidence based topics and news on current studies and trials

The 14th Annual BTOG Conference 2016 will take place on Wednesday 27th January 2016 to Friday 29th January 2016. Dublin.

The conference lead is

Dr Sanjay Popat. Poster submission opens 1st August 2015 and closes 1st October 2015 (it is widely known that submission

deadline for poster abstracts is NOT being extended due to the amount of work needed to be done by BTOG steering committee in order to get published in a recognised journal). Registration and hotel booking opens 1st September 2015.

Vanessa Beattie
Lung CNS, Aintree University Hospital

The National Peer Review Report

The National Peer Review Report for Lung Cancer Services is now available via the NHS Cancer Quality Improvement Network System at <http://www.cquins.nhs.uk/documents/resources/reports/2013/Lung%20September%202013.pdf>. This 13-page report outlines overall performance and highlights areas of risk and concern.





Roy Castle Lung Cancer Foundation - Update

We are about to reprint our *Answering Your Questions* pack, including a more detailed Lung diagram postcard thanks to your suggestions. New supplies will be with us by April.

We have also commenced work on a new information resource on Small Cell Lung Cancer. From the results of the survey this was the item that was seen as the biggest information gap. Following this we will look at a pre-diagnostic/ simplified guide. We will progress onto other information gaps as we move on in the year. We always appreciate your feedback on information that is not currently available.

We have now finalised our two Patient Decision Aids regarding adjuvant chemotherapy after surgery. These will be available on our new website in April.

Campaigns & influencing

We are working on a Business Case template as a follow up to our Report on The Value of Lung Cancer Nurses. This is currently in draft and will be launched on our website health care professionals section.

Also as part of our work to raise the profile and acknowledge the dedication of Lung Cancer Nurses we will be launching patient nominated awards in the spring edition of *The News and Inspire*. We know many of you are naturally modest about the work you do, but if you can encourage patients to share their views of the difference made by good nursing support this will help raise the profile of the essential work that you do. The intention is to present the awards at the Nurse Forum in November.

Getting involved

All our information is evidence based and produced with input from our Expert Panel. We welcome interest from CNS's who would like to help shape our patient information.

We now have over 50 groups across the UK, which we help fund, promote and support.

We are currently planning training for facilitators for this year. If you would like to find out more and reserve a place on one of our 2 courses this year, each of which takes place over 2 days approximately 6 weeks apart, do

let us know. Training is provided by an experienced Nurse Specialist with a training background and is accredited. Thanks to the support of our donors we provided the training and travel free of charge.

Support for your patients

We are running 4 sessions this year open to patients/ carers and CNS. We are looking for locations across the UK to host these ½ day sessions which will include expert speakers; facilitated discussions and provide a forum to explore how to get involved. Watch our website or rsvp if you want to find out more.

Our patient grant service is open again for 2015. We have been able to distribute £150,000 since this service started just three years ago.

We appreciate your support of our work and hope we can involve you in this year's activities.

Lorraine Dallas
Director of Information & Support
www.roycastle.org

MESOTHELIOMA NEWS

After years of 'standing at a bus stop' watching the rest of the cancer world go by it now feels that mesothelioma is at the centre of the station! So much is happening it is hard to keep pace.

The results of the mesothelioma Priority Setting Partnership (PSP) were announced back in December. The process involved an extensive consultation which was launched in December 2013 and brought together patients, carers and clinicians to contribute equally to identify and prioritise future mesothelioma research topics. From a list of 52 verified unanswered questions, 30 were taken to a final priority setting workshop on 10 November where the 'top 10' most important questions about mesothelioma for researchers to answer, were agreed. To read more please visit: www.psp.nihr.ac.uk/mesothelioma/results

I am delighted to report that last October in Cape Town the UK team, led by Professor Dean Fennel won the bidding process to host the International Mesothelioma Interest Group meeting in May 2016. Birmingham will provide the venue and the Local Organising Committee (LOC) are already teleconferencing fortnightly to try and pull together a state of the art program. There will be sessions of interest throughout the whole 3 days for nurses and the NLCFN and Mesothelioma UK are looking at the possibility of an additional pre event nurse meeting on Sunday May 1st just



MESOTHELIOMA UK
CHARITABLE TRUST - 1126083
Supporting People With This Asbestos Cancer

Helpline: 0800 169 2409

Website: www.mesothelioma.uk.com

prior to the main event opening ceremony. To follow event progress please see <http://imig2016.org/> or follow us on twitter.

Many of you will know Meso UK has been involved in an NHS England Specialist Cancer Workgroup focused on Peritoneal Mesothelioma, chaired by Sean Duffy. We had hoped the group would lead to commissioned funds to support the treatment offered by the Basingstoke team. Following a thorough review of the evidence it became clear this was not likely to be the case. We appealed for restricted funds to allow the Basingstoke team to treat a fixed number (?20) of patients and collect rigorous data but this was not picked up and certainly does not appear in a recently published draft Clinical Commissioning Policy:- Cytoreductive Surgery and Hyperthermic Intraoperative

Chemotherapy for Peritoneal Mesothelioma. The policy is out for public consultation. I am making a plea to everyone to respond on behalf of this

vulnerable and overlooked group of patients. Please respond stating it is not reasonable to remove access to this treatment option when it is not only available but is considered standard practice in other developed countries. The consultation is now live, it will run for 12 weeks from the 1st of February and can be accessed via: <https://www.engage.england.nhs.uk/consultation/specialised-services-policies>

Action Mesothelioma Day will be held as always on the first Friday in July. Many groups and organisations are already planning their events, the common theme for all is going to be funding for research and promoting IMIG 2016. Mesothelioma UK will be circulating a newsletter about events taking place in the weeks leading up to July 3rd.

The volume of clinical trials seems to be growing each month. To help clinical teams keep pace Mesothelioma UK now prepares a pull out centre spread that lists all trials open or about to open in the UK. Please ensure you are registered with Mesothelioma UK to receive our newsletter.

The Charity now supports 10 Mesothelioma Nurse Specialist Posts. They are based in Portsmouth (Anne Moylan), London (Sally Moore), Oxford (Hannah Ball), Bristol (Gerry Slade), Cardiff (Naomi Horne), Leicester (Liz Darlison), Sheffield (Helena Stanley), Manchester (Lorraine Creech), North East (Leah Taylor) and Glasgow – start date TBC (Jan Devlin). For this year we plan to support a 2nd London based nurse and hope to recommence the agreement with Papworth in Cambridge. With such a rapid growth in

our number as a team we are only just getting our 'act together' but watch this space. The level of passion and commitment is phenomenal; it is inevitable that in time the MUKNurses are going to make a tremendous difference in terms of support, equity and outcomes across the UK for those affected by mesothelioma.

Mesothelioma UK will soon award its first research grant. £150k each year for the next three years has been set aside for research grants. We are delighted to be working in partnership with the BLF to ensure applicants and recipients are thoroughly peer reviewed. The successful applicant will be announced during the summer.

This year the NLCFN annual conference sees the return of the Mesothelioma Session and the program is currently being put together.

For any support and information or if you have comments or questions regarding anything related to mesothelioma or Mesothelioma UK please do not hesitate to contact us via the website: www.mesothelioma.uk.com or email mesothelioma.uk@uhl-tr.nhs.uk or free phone 0800 169 2409.

Liz Darlison
Macmillan Consultant Nurse
The Glenfield Hospital
Leicester

RESEARCH NEWS

Small Grants Scheme

For the last few years the NLCFN has run a small grants scheme. This is to promote new, exploratory research that will inform nursing practice and improve the quality of patient care. The intention is to support the development of research skills and experience of Forum members.

Two grants were offered this year. Both projects address priority areas for the Forum and provide an opportunity for the applicants to develop their research skills and leadership.

The projects are:

John White, Leeds

Impact of an exercise intervention (yoga) for people who have undergone lung resection for lung cancer

This is a small, feasibility study that could inform the development of a larger grant application and future interventional research project.

Josie Roberts, Rotherham

What do people living with and surviving lung cancer and mesothelioma want and need from a recovery care package?

This is a mixed method study exploring patient needs and preferences regarding the recovery care package.

IASLC World Conference on Lung Cancer, Denver 6-9 September 2015

This year the International Association of the Study of Lung Cancer will take place in



Denver. The NLCFN aims to repeat the impact and presence they had at the previous IASLC conference in Sydney 2013.

Three forum members have been invited to speak as part of the main programme, John White, Maria Guerlin and Angela Tod.

The NLCFN is considering funding the registration fees of a limited number of people who have abstracts accepted. The Forum would like to support those new to presenting at conferences. Further information will follow. There is support and education sponsorship available from organizations (law firms and pharma companies) that can help cover travel, registration and accommodation. Do contact the forum for more information and advice.

Good luck to all of you who have submitted an abstract. Please let the Forum know if you are successful.

Angela Tod
National Lung Cancer Forum for Nurses Research Interest Group (RIG)
Angela Tod, RIG Chair
Florence Nightingale Foundation Chair of Clinical Nursing Practice Research
School of Nursing, Midwifery and Social Work/Central Manchester University Hospitals NHS Foundation Trust

Cancer Research UK

In a study published in *Cancer Cell* in April 2015, CRUK scientists have reported that a vital self-destruct switch in cells is hijacked making some pancreatic and non-small cell lung cancers more aggressive. The team at the UCL Cancer Institute found that mutations in the KRAS gene interferes with protective self-destruct switches, known as TRAIL receptors, which usually help to kill potentially cancerous cells. The research shows that in cancers with faulty versions of the KRAS gene these TRAIL receptors actually help the cancer cells to grow and spread to new areas in the body.

Two surveys of children in Wales has revealed that only a minority of teenagers who try e-cigarettes go on to become regular users and the majority of those who use the devices regularly were already smokers according to the study published in *BMJ Open*. The research suggests that e-cigarettes are unlikely to be increasing nicotine addiction rates in young people at pres-

ent. Nicola Smith, CRUK, stated, "It will be important to keep an eye on these trends and make sure the ban of sales to under 18s is enforced".

The CRUK Lung Cancer Centre of Excellence at Manchester and UCL brings together world class basic, transitional, clinical and imaging research, with the overall vision of improving outcomes for lung cancer patients. For information on the eight key research themes visit the CRUK website at <http://www.cruk-lungcentre.org/Research>

CRUK TRACERx

The TRACERx (Tracking Cancer Evolution through therapy (Rx) lung study is a £14 million pound research project, the biggest single investment in lung cancer research by CRUK, taking place over nine years, which aims to transform our understanding of non-small cell lung cancer (NSCLC) and take a practical step towards an era of precision medicine. The



study will uncover mechanisms of cancer evolution by analysing the intratumour heterogeneity in lung tumours from approximately 850 patients and tracking its evolutionary trajectory from diagnosis through to relapse. The study brings together a network of experts from different disciplines to help integrate clinical and genomic data and identify patients who could benefit from trials of new targeted treatments. Additionally it will use a whole suite of cutting edge analytical techniques on these patients tumour samples giving unprecedented insight into the genomic landscape of primary and metastatic tumours and the impact of treatment on this landscape.

For more information visit <http://www.cruk-lungcentre.org/Research/TRACERx>

Research Interest Group (RIG)

The National Lung Cancer Forum for Nurses (NLCFN) is keen to develop research and evaluation activity to help improve care and services within lung cancer. With this goal in mind the NLCFN established a Research Interest Group (RIG) in 2010. This RIG aims to facilitate collaboration and dialogue between clinical and academic colleagues and bring together experienced researchers and nurse specialists with a declared interest in lung cancer and research. Any Forum member is welcome to attend or be on the circulation list for RIG activity. It doesn't matter whether people are research active or not, simply email us at info@nlcfn.net to express your interest in joining the group. We will welcome input and ideas from any Forum member.

PROFESSIONAL DEVELOPMENT AND SUPPORT

Using Your Voice (UYV) Project 2015

We are pleased to announce the repeat of a joint working initiative between Lilly Oncology and NLCFN which has developed with the aim to help improve the contribution of the Lung Cancer Nurse Specialist in the MDT meeting.

Save the date:

21st and 22nd September - UYV Workshop, London

The workshops will cover topics including:

- Impact of the Lung Cancer Nurse Specialist in the MDT Meeting
- Communication Skills – managing difficult situations
- Assessment of Performance Status
- Improve your Presentation Skills
- Reflection process

18th November – How You were Heard Closing Meeting, London

- Discuss reflections
- Feedback sessions
- Going forward



Offers for application will soon be invited. We look forward to receiving yours.

Lavinia Magee
NLCFN Committee member, on behalf of
the UYV Workshop Group

NMC Revalidation Reminder

In designing the new process for regulation the NMC has spoken to patient groups, nurses and professional bodies.

It asked some difficult questions and found that PREP, the old system for monitoring nursing performance, had a number of flaws. Under PREP we were required only to count the number of hours we spent in practice and those spent on continuing professional development. There was no attempt to assess the quality of our learning.

In making the assumption that everyone learned at the same pace, we were taking for granted that hours spent on learning would translate into practical change. Without showing our learning, when it came to professional development, we were asking the NMC to take our word for it.

There are currently more than 670,000 nurses and midwives providing care in the UK. It's a busy profession with many competing priorities, and this approach to learning simply wasn't enough. For this reason, revalidation will apply to all of us and the first nurses and midwives to go through the process will be those due to re-register from early 2016.

Revalidation may seem a long way off, but each of us will need to start preparing now, so that we

are in a position to comply with the requirements when the time comes.

The main changes are as follows:

- Under revalidation we will complete a mandatory 40hrs of continuing professional development every three years, and crucially, we will also reflect on some of our activity to ensure that our practice has improved or been updated as a result.
- Some of the 40hrs can be self-directed, but some will be learning with others, which could involve completing an in-house training course or shadowing another nurse or midwife.
- Skills stay relevant through use. In order to remain registered, we will need to show that we have completed 450 hours of practice over three years or 900 hours to revalidate as both a nurse and a midwife.
- We will collect and review feedback from our managers, colleagues and patients.
- This is part of a new reflective culture where nurses and midwives are encouraged to embrace feedback and view it as an opportunity to learn, to make changes and prevent mistakes from happening again.
- Someone who is NMC registered and oversees our work will need to confirm we have met the requirements of revalidation. This

will probably be at our appraisal where our practice is assessed against the NMC code of conduct and its values.

- If the person who oversees our practice is not NMC registered, we will need their opinion to be backed up by a nurse who is familiar with our practice.

As part of the initiative, the NMC has published the new code.

<http://www.nmc-uk.org/Documents/NMC-Publications/revise-new-NMC-Code.pdf>

Finally, we may be asked to present our evidence to the NMC online, providing a paper-free record of our continuing professional development.

And that you are qualified to deliver the best possible care for all of our patients.

The Future

Plans are afoot with MacMillan sponsorship for a new LCNS, we hope an addition to our team will enable us to develop our own roles but also develop and improve the service we offer our patients; we have many ideas to bring to fruition over the coming months/years.

**Adapted from RCNi brief
Naomi Horne**

Pharmaceutical companies and fees. What nurses need to know

The RCN have recently published new guidance for nurses on payments received from pharmaceutical companies. These payments may be for speaker fees, attendance at an advisory board or if a pharmaceutical company have covered the costs of a nurse attending a conference.

From January 2015 all nurses need to keep a record of any work carried out for a pharmaceutical company for which they receive payment, this needs to include name of company, date work carried out and amount paid.

The aim is to encourage transparency about working relationships between the pharmaceutical industry and health care workers. These guidelines have already been implemented in the USA and received positive feedback from health care workers, industry and the general public who can access these records. One thing it has stopped is Dr's being paid to go on foreign trips all expenses paid to promote the prescribing of a certain drug. As health care professionals our prescribing decisions should be evidence based on clinical trial data and expert consensus rather than on material gain. Some Dr's now have charitable accounts at their Trusts where these payments can be paid into and then this can be used to fund conference attendance for all staff in the directorate and to fund research.

A note of caution nurses need to be aware that the HMRC will also be able to access these records of payments as they will be in the

public domain. All fees received from pharmaceutical companies are counted as a second income and nurses need to declare each payment to the HMRC. This is in fact a very simple process that only requires a phone call to HMRC providing NI number, amount of money paid to you and date of payment. The HMRC will then adjust your tax code accordingly, if you receive a payment late in the tax year you may need to pay an extra bill as the tax code adjustment will not be enough. They will inform you of this on the phone and be able to give you the approximate amount owing so that you can put this money to one side. Then in April the HMRC will send you a bill for this amount. You do not need to complete a tax return if the earnings in one year do not exceed £2000, but you must make the phone call to declare earnings.

Nurses should not be put off from working with pharmaceutical companies due to these regulations if anything it makes the whole process more transparent and means we are acting within the duty of candour.

Please find below the RCN link for you to have a read through and the RCN have also listed a phone number should you have any questions.

http://www.rcn.org.uk/development/professional_standards/pharma_fees_what_health_professionals_need_to_know

Rachel Thomas, Guys and St Thomas

TOOLS AND INFORMATION FOR PATIENTS

NEW...Roy Castle Lung Cancer Foundation – Patient Decision Aids

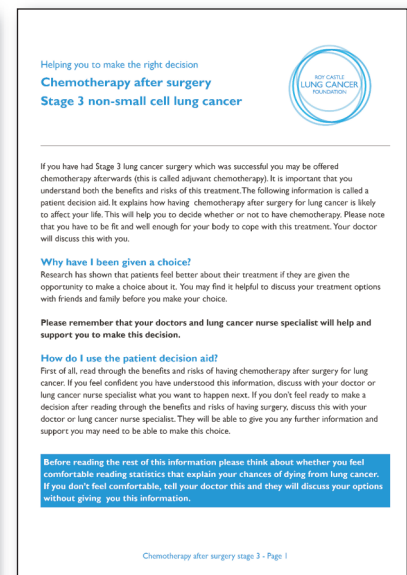
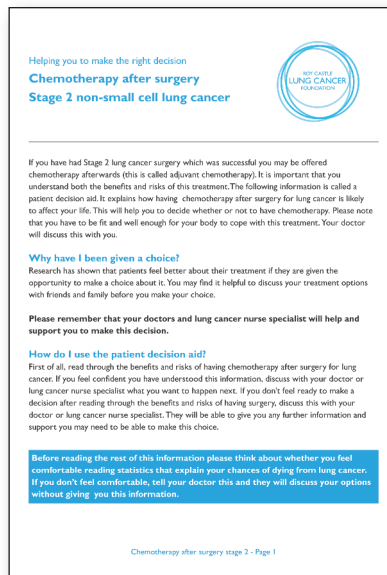
Roy Castle have produced two patient decision aids on adjuvant chemotherapy for those with Stage II and III lung cancer. These have been created in partnership with the NLCFN and British Thoracic oncology group and have been sponsored by Lilly.

The use of a Patient Decision Aid (PDA) will encourage conversations between a patient and their clinician, help the patient make an informed decision, and ensure that doctors share information about the available treatment options in a standard and unbiased way. This will allow the doctor to give the patient a list of options based on their medical history, test results, preferences and circumstances.

The process will aid patient and clinical partnership in decision making. Involvement of patients promotes person centred care.

The benefits for patients include informed choice, increased knowledge, confidence and involvement in decision making. Naomi Horne, Lung Cancer Nurse said “These Lung Cancer PDA’s are welcome tools for helping to explain the complex and difficult choices we share with patients in decision making. The visuals help introduce and demonstrate statistics in a more meaningful way”.

Each PDA has been developed using systematic process which follows International Patient Decision Aid Standards Collaboration guidance and was launched in Autumn 2014.



They can be downloaded from our website
<http://www.roycastle.org/how-we-help/lung-cancer-information/our-services-and-materials/factsheets/treatments-for-lung-cancer-factsheets>

or up to 10 copies can be ordered by calling us on
0333 323 7200 (option 2) or by e-mail info@roycastle.org.

RCLCF will be evaluating the impact of these PDAs prior to developing any further material, so feedback is welcomed.

NEW to NHS Inform (Scotland)

Info For Me is where you'll find all of the cancer information patients need, in a way that suits. Patients can get detailed information on different cancers, make their own customised cancer leaflet, find support groups and more.

Visit <http://www.nhsinform.co.uk/cancer/infoforme/>

MEMBERS NEWS NEWS NEWS NEWS NEWS

Annual Workshop 2015

This meeting supported by Lilly Oncology took place on 11th/12th May, Radisson Blu Hotel, Birmingham.

17 delegates are taking part in this year's workshop which aims develop a framework to support LCNS in the development and evaluation of nurse-led clinics. To help the group establish a baseline of current practice members are being asked to complete a survey available at <https://www.surveymonkey.com/r/AW2015NLC>. If you have not yet completed the survey please do so before 5th June 2015.

Thoracic Surgical Group (TSG)

There are now 42 members in the group with work focusing on a project with Heartlands in Birmingham on nutrition in patients undergoing lung resection both pre- and post-surgery.

The next meeting is planned for 6 July 2015 with an invited guest speaker to talk about enhanced recovery and pre-treatment optimisation. The group have also found that it is useful to hear about their peers services. Ian Collins (Hull) has offered to provide a presentation at the meeting on 6th July.

Irwin Mitchell continues to support venue/travel costs and refreshments for the TSG meetings.

Vanessa Beattie, NLCFN Deputy Chair

NLCFN and Red Hot Irons – One Year On

It has been our absolute pleasure to serve the NLCFN in 2014 and we look forward to a long a productive relationship. As we move in to the second year of working with NLCFN we thought we would provide you with an update of the activities we have undertaken in the last year and review future plans.

Membership Management

Prior to this year the NLCFN was not operating using a formal database, but instead maintained a spreadsheet from which to manage the membership data. In order to improve communications with the membership, streamline the processing of membership subscriptions and delegate registrations the NLCFN committee agreed that Red Hot Irons should develop a new database to work in line with a new website to facilitate greater online interactivity and streamlined processes. In order to proceed Red Hot Irons undertook a full data cleanse of the membership data in order that it could be imported into a database. This involved taking content from a spreadsheet and standardising the data line by line in preparation for import into the database.

The data was successfully imported into CiviCRM a new relational database. All emails are now sent out electronically with a formal header and footer promoting the organisation branding. Emails can now easily be sent out to groups and sub-groups via an online search and grouping capacity including geographical mapping.

At the same time Red Hot Irons developed a new website using open source Drupal website platform to support the facilitation of automated member emails, automated membership management processes and online payments by members. A series of web pages were designed and the website was cleaned and streamlined making it clearer for visitors to the site to understand that the website is for healthcare professionals and also improving the content to act as a “shop window” for users. Online membership registration is now automated alongside online conference registration.

Inevitably there are teething problems in the first year of any new database and website but we are confident as members get used to the new software they will find it easier to navigate and manage their own account information.

We are continuing to develop the website with plans for a new Professional Development section of the site and also a new directory allowing members to communicate directly with each other whilst ensuring privacy is maintained.

Members Newsletter

In 2014 Red Hot Irons introduced a standardised format for the newsletter and supported Naomi Horne, Newsletter Editor, in the development of a sophisticated newsletter template which is formally typeset using a graphic designer. We hope you like the format of the newsletter and we welcome any contributions and suggestions, please contact us at info@nlcfn.net with your feedback

Corporate Governance and Finances

In 2014, Red Hot Irons introduced business gold-standard, double-entry, book keeping using SAGE Line 50 software for all NLCFN accounts, created a nominal code structure to code all transactions to meet the requirements of the Charity Commission. We have now also introduced the formal process of accruals ensuring that the finances for each year are accounted for in the year the activity took place for both income and expenditure.

Red Hot Irons has worked with the committee and the accountants to produce a high quality application for Charitable Incorporated Organisation. This was achieved on 19 Jan 2015. Red Hot Irons supported the committee in the EGM to agree the creation of the CIO and the subsequent creation of the board of trustees. We have also secured appropriate insurance cover for the organisation to protect the organisation and the trustees.

In 2014 Red Hot Irons were able to raise £103,665 in conference and corporate sponsorship allowing the organisation to make a small profit for the year of £11,084 in spite of the investment required to set up the new website, database and new investment in the conference. This compares to £54,560 achieved in sponsorship in 2013 with an operating loss of £27,050.

Red Hot Irons worked with the committee to produce supporting papers and material for the working committee to help ensure the smooth running of committee meetings including the development of a representation report.

Conference

Red Hot Irons worked with the committee to deliver a high quality conference. In 2014 we aimed to support the NLCFN to raise the bar and delivered a new visually appealing stage set and banners, signage, conference handbook, conference branded materials and we also ensured there was a high presence of onsite staff to support the event and its smooth running. In addition we utilised a professional AV crew to ensure high quality audio-visual material with a speaker support system before and during the conference.

We are passionate about the cause of NLCFN and look forward to a long and productive partnership during which we aim to continue to support the business and charitable activities of the organisation to grow and thrive. If you have any suggestions on how we can improve our services please do not hesitate to get in contact with us via info@nlcfn.net.

Tricia Bryant
Operations Team



COMING SOON...

**Help us plan for the
future of the NLCFN**

It's your organisation, please play your part in helping to shape the future of the NLCFN

We will shortly be launching a major survey of the membership to help us better understand your needs and requirements as a member of the organisation. Full details will be made available shortly.

DATES FOR THE DIARY



**6th-9th
September 2015**

16th World Lung Cancer Conference

Denver, Colorado, USA
<https://www.iaslc.org/events/16th-world-conference-lung-cancer> :-

- Online Registration & Housing Opened - January 14, 2015
- Abstract Notifications - June 22, 2015
- Early Registration Deadline - June 26, 2015
- Late-Breaking Abstract Submission Deadline - June 30, 2015
- Regular Registration Deadline - July 24, 2015

**11th
September 2015**

BTOG Bone Disease Study Day 2015

Hotel Russell, London
BTOG Lead: Dr Tim Benepal.
Registration is free for health care professionals involved in thoracic oncology and travel bursaries will be available (for travel within the UK and Ireland). Amgen has provided sponsorship and a travel bursary to enable this study day to take place.

**14th
October 2015**

Royal Marsden NHS Foundation Trust Palliative Care Update

One day workshop on end of life care.
Online booking at <http://www.royal-marsden.nhs.uk/palliativeupdate>
Course fee £120

**19th-20th
November 2015**

NLCFN National Conference

Windsor, UK

**27th-29th
January 2016**

BTOG 2016 - 14th Annual BTOG Conference

Dublin
Poster submission opens 1st August 2015/
closes 1st October 2015. Please note there will not be an extension to the closing date.
Registration and hotel booking opens 1st September 2015

The 1st Annual Macmillan Lung Cancer Charity Ball

Live music, auction, spot prizes, raffle

6.30pm, Saturday 14th November 2015
Hardwick Hall Hotel, Sedgefield, Co. Durham, TS21 2EH

Tables of 10 or 12 are available

For tickets contact 01642 624106 or 0789 996 1437

All proceeds to Macmillan Cancer Support and
North Tees Lung Cancer Trust Fund

**WE ARE
MACMILLAN.
CANCER SUPPORT**

North Tees and Hartlepool 
NHS Foundation Trust



National Lung Cancer Forum for Nurses

Address: Unit 2, Warwick House, Kingsbury Road, Curdworth, Warwicks, B76 9EE
Telephone: 01675 477607 Website: <http://www.nlcfn.org.uk> Email: info@nlcfn.net

The National Lung Cancer Forum for Nurses is grateful to its corporate sponsor Lilly Oncology for the provision of an educational grant to support the activities of the organisation. Lilly Oncology have had no input to the production of this newsletter. Click <http://www.nlcfn.org.uk/content/sponsorship-opportunities> for the NLCFN information on sponsorship including our statement on funding