

NLCFN Newsletter

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MESSAGE FROM THE NEWS EDITOR

Welcome to the December Newsletter

Well firstly I would like to thank Naomi Horne for all her hard work in getting these newsletters out keeping all the NLCFN members updated. Myself and Lavinia Magee from the committee are now joint editors and have taken this job over from Naomi, who sadly left our committee in November to take up her new role in Acute Oncology. We wish her well and know that the lung cancer patients will always be well looked after in her care.

I would also like to thank Naomi on behalf of all our members for the tireless work she has done while being a Lung CNS and NLCFN committee member. Naomi has written a short piece (on page 12) to reflect on her work and to encourage other lung nurses to consider putting themselves forward for the NLCFN committee someday. Alison Bennett also stepped down from her committee work after ten years' service and on behalf of the committee I would like to thank Alison for her encouragement and inspiration over the past 10 years. Alison too will be missed and we all wish her well in her future work.

We welcome Helena Stanley onto the NLCFN committee and Karen Clayton who will soon join us in January. Both Helena and Karen have a wealth of experience in lung cancer and mesothelioma and will be very welcome to help with the on-going work of the NLCFN.

The NLCFN Conference, *Past Present and Future* held on 19th-20th November 2015 at Windsor was a great success and well attended. The programme was excellent and well received and highlights included a great session from Alison Leary on the role of the Lung CNS, Dr Richard Steyn talking on the UKLCC ten years on, a mastermind quiz session in immunotherapy and Mavis and Ray Nye giving a patient perspective. What a great double act they were!

I wish all NLCFN members a Happy Christmas and productive and prosperous New Year for 2016.

Thanks,
Jackie Fenemore
Newsletter Co-Editor



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

This year's conference proved a great success once again. The conference feedback has been very positive with more than 90% of delegates scoring the sessions as good or excellent. We've received some great feedback and suggestions for next year's conference and we'll try and incorporate as much feedback on topic suggestions and also explore larger exhibition space as a priority.

Next year, because of VAT implications and risk management we are aiming to have our conference in the Midlands though outside of Birmingham city centre but within easy access of road and rail networks.

This year, the NLCFN offered ten travel bursaries to support NLCFN members to attend the conference in Windsor. Here's just some of the feedback from those who were successful in receiving a bursary:-

Lucy Heycock, Inverness

'Well, you two certainly seemed to be enthused after that conference!'

This was the response of one of our respiratory consultants when my colleague and I returned from the recent NLCFN conference in Old Windsor. And he was right. I attended the conference last year having just come into post and found it incredibly useful then as it gave me an excellent overview of lung cancer and best prac-



tice and the potential of what can be achieved as a lung cancer nurse. Before I went again this year, I slightly wondered if I would find it so useful. I need not have had any fears. I came back having reinforced connections and friendships with colleagues, having learned about exciting projects and research being carried and even gained a better and new understanding of the emerging immunotherapies. Perhaps most of all, I came back more enthusiastic and motivated; full of plans on how I can take our service forward.

Quotes from two separate talks resonated with me and captured much of what the conference was about.

'If you think it's expensive to hire a professional to do the job, wait until you hire an amateur' Red Adair

'The secret of change is to focus all your energy not on fighting the old but on building the new' Socrates

Quotes from two different millennia, but both very apposite to much of what was discussed at the recent NLCFN conference. The first quote was from an excellent talk from Alison Leary about the role of the Clinical Nurse Specialist and the very real and unique contribution to patient care that we can make. The talk was both extremely motivating and thought-provoking in its message on how essential to our profession it is to make that contribution visible to others.

Following sessions showed us just what that contribution to patient care could look like with different examples of award winning projects and research, as well as sessions on how we, as individuals can make it happen—'the secret of change'. For example, who could not be energised and enthused by Angela Todd's challenge to us all to become more engaged in research? Themes ran through the conference, especially the value of nurses becoming involved in research and the opportunities for funding for research, audit and setting up projects from organisations like the NLCFN and charities were highlighted. We have no excuse now!

There is a lot I could write about this conference, such as the really useful session on practical tips on looking after ICPs, networking opportunities,

and of great dinners and socialising of course, but overall, I would like to summarise what I felt I gained from attending. I came away with a real sense of the strength and influence of lung cancer nurses across the UK. We are a cohesive, committed group of highly professional people driving services for our patients forward. I came away motivated and enthused and feeling more equipped to care for my patients and to take forward service developments.

I would like to thank the NLCFN for awarding me the travel bursary enabling me to attend from a very distant and snowy Scotland.

Sarah Morgan, Camarthen

I have been in post as a Lung Cancer Specialist Nurse in Carmarthenshire since 2008 and I have attended all but two of the NLCFN conferences. I consider attending the conference an essential part of my job. The conference is always well organised and always has excellent and relevant speakers. I think every lung cancer specialist nurse should attend the conference as part of their job plan. My colleague Pat Rees came to the conference with me she is new in post in Carmarthenshire and this was her first conference.

This year I was presenting at the conference with another colleague Sharon Savory. We presented in the LCNS session on the results of the Lilly workshop project "A Framework for the development of Nurse Led Clinics". This can be found on the NLCFN website. We were a bit nervous about presenting

so we met up the night before the conference to prepare our talk; we had a good meal, a few glasses of wine and a good night's sleep, so this set us up well for the next two days.

It is so important that we are able to meet and share information like this. It is vital information that makes a real difference to our patients. Even the smallest amount of information can change things for people.

The first day of the conference got off to a good start with coffee and pastries and a look around the stalls. I picked up a lot of useful information from the various stalls along with a good few post-it note pads & pens etc and I entered a few competitions to win various prizes. Sadly I did not win anything this time but in the past I have won an IPod.!!. The conference programme commenced with an inspiring key note speech from Alison Leary. She highlighted the great work of the LCNS using the 6 C's to define our role:- care, compassion, competence, communication, courage and commitment "keeping patients safe" and providing value for money.



i took a note of a great quote she gave from a chap called Red Adair, an Oil Well Fire-fighter form the USA in 1964 "if you think it is expensive to hire a professional to do the job, wait till you hire an amateur". We were all now feeling very enthused and ready to enjoy a full day of excellent speakers. The conference dinner that evening was held in a beautiful hall. The hall looked like the Great Hall at Hogwarts School of Witchcraft and Wizardry in the Harry Potters stories.

The evening was a wonderful opportunity to meet with colleagues I rarely see and to network with colleagues form all over the UK. Sharon and I went to bed early as we were giving our presentation first thing the next day. The second day of the conference was as excellent as the first. Pat and I learned so much and had such a good time we are already looking forward to next year.

Sharon Savory, Leicester

I attended the NLCFN conference this year at Windsor. It was the second time I have been lucky enough to attend.

This year I have been part of the annual project sponsored by Lilly Oncology. As part of the project, I was a team leader for one aspect of the project which involved co-ordination of my group's contribution to the project. At the end of the project we were asked who would like to present our work at the conference. Myself and a colleague volunteered. We were so supported by the committee and colleagues.

The conference felt very different this year to when I last attended three years ago. I think attending the work shop has given me new found confidence.

The conference itself is fantastic for networking, we share ideas, and projects that we are all working on that can benefit others and it is an ideal place to gain confidence and to speak amongst a committed audience.

Very informative and well facilitated conference, well done! It was also very interesting to be able to talk to the solicitors who were in attendance as we could discuss how they can support our patients. Also good to be able to speak to the pharmaceutical representatives who produce the products our patients are given.

I found the conference informative; the Mastermind session with the two doctors and the nurse was excellent and also fun!

Having dinner in the chapel felt like we were in a Harry Potter movie! Lovely food and the staff were all very helpful, as were Red Hot Irons. Ben from the technology team was so supportive and encouraging to us as novice presenters.

I would recommend the forum conference to all LCNS new and old as it is a great platform to share good practice.

Clemency Butler, Cambridge

I have been employed in my post as a lung cancer CNS for a little over a year. Although previous to this I had 20 years of nursing experience, 8 years of which as a sister on an oncology ward, I feel I am only just starting to get to grips with the complexities and demands of the role. As such I was really looking forward to attending my first conference and the opportunity that it would provide to meet other nurses working in similar positions. I wasn't disappointed.

The conference was well organised, with a packed programme both relevant and topical. The use of "past, present and future" effectively formatted the sessions and provided insights into how our role has developed and aspirations for how we can continue to best influence and enhance the outcomes for our patients.

The display of posters highlighted the varied and excellent work of nurses from around the country. They enabled me to find out what has been developed or implemented elsewhere and then to consider what might work within my own service. This afforded me the chance to

Felt conference well structured informative and enjoyable. Ist time attendee."

speak directly with the teams involved and gain a better understanding of the practicalities or difficulties they encountered from their first hand experiences. Most importantly perhaps, going forward, it provided me with the contacts I can potentially call on if I need help within my own work. The emphasis on shared learning and experience is deeply embedded within the NLCFN conference both formally, within the timetabled sessions, and more informally during refreshment breaks. This ability to network and touch base with people who are in a position to assist continues in the exhibition area. I was able to pick up valuable resources including written information for patients and professionals regarding targeted and immuno-therapy. Not just pens and post-its!

I found the fundamental importance of the patient was never forgotten amongst our own development needs. I was both humbled and inspired by the patient and carer perspective. We were privileged to be allowed intimate insights into their journey together and their ongoing crusade for equitable access to clinical trials. I certainly gained a more balanced perspective and understanding of the willingness of patients to put up with the inconvenience of both travel and time commitments in order to participate. Within my own practice I am going to try and challenge the oft-held assumption that a patient would not be up for it. In order to facilitate this I need to ensure I am more aware of available trials and then actively promote referral by clinicians.

It was enlightening to discover how many variations of our role within services there are. No one nurse works or has the same work-load as another. However, we all face the same pressures of time and funding and need to be adaptable and resourceful in order to maintain patient care we can be proud of.

I left the conference exhausted but with far greater resolve and optimism.

Patricia Swann, Hertford

To apply or not to apply for a travel bursary that was the question!

I was successful in receiving a travel Bursary to attend the conference in Windsor. Part of the agreement in me receiving this was that I had to give some feedback. The benefit of doing this meet two needs for me

- 1. Framework for feedback for my portfolio for revalidation
- 2. I had the train fair paid for me to attend the conference

I used the SWOT analysis framework to help me feedback

Strengths

Having attending previous conferences this conference appeared to have a more professional feel. The Red Hot Irons team appear to have raised the bar again this year. Three words spring to mind about this conference

- I. Interesting
- 2. Provoking
- 3. Mindful

The two days provided up to date information . Give me the time to network and share ideas with other nurses. The presentations encouraged and provoked thoughts for future developments of the national lung cancer service. I reflected a lot about the role of the CNS and how it's evolved over the years. As we know someone dies every 15 minutes from lung cancer. The CNS provides stable consistent care as part of the MDT I enjoyed the talk from Mavis and Ray on the patient's perspective. Always inspiring.

Immunotherapy and the Mastermind session. This was great and amusing, it helped me understand this difficult and amazing new treatments in a fun way.

Weaknesses

The main issue for me was not enough time to network/share ideas. I also found having so many solicitors supporting the meeting a little overwhelming at times.

Having reflected on the role of social media can we use this in lung cancer care? Not sure I can but perhaps we should explore this more.

Opportunities

The time away from the work environment enabled me to reflect on the current service we are providing .How are we doing? Could this be improved? Since coming back from conference I have asked for a team meeting to look at patient pathways and service developments.

With the ageing population, with multiple long term conditions we will have to look at how we deliver cancer care in the future. 7 day working will come to us all.

Research in Lung cancer appears to be coming higher up the agenda with many grants now available.

As I am new to the role of lung cancer nurse this conference has been invaluable in helping me understand my role and the impact I can have on patients

Threats

Every changing landscape of the NHS may change the role of the CNS in the future. But evidence is power.

In 2012 40% of patient still presented to hospital via A+E .How can we address this?

Early awareness campaigns appear to work so WE as nurses do need to be more involved in this work.

I in 8 people with lung cancer have never smoked.

How has my practise changed since attending the conference? I have become more familiar with the trials available for Mesothelioma patients and will continue to signpost patients. Social media friend or foe. I have set myself a challenge to become more familiar with twitter and look at its benefits.

Overall a great conference which meet all my expectations looking forward to the next one.

Maria Guerin, Liverpool

As the end of the year approaches I always look forward to the NLCFN annual meeting, being a past committee members I recognised the hard work and commitment that members put into the planning and running of the event.

The programme certainly covered all relevant topics and for many it served as a refresher but to less experienced CNS the speakers provided an excellent insight into changes in clinical practice and advice on tools with which to formulate these changes.



There was a general feeling of energy around the meeting with faces old and new collaborating on the events over the past twelve months since they last met at the conference.

Alison Leary set the scene, with a thought provoking presentation on how far the role of the CNS has developed over the last decade with discussion around how to demonstrate what a good return of investment we are. As always Alison left the audience feeling proud of what we achieve and how valuable we can be (we just need to use her advice and articulate this in the coming months)

I particular enjoyed the recap of UKLCC and the Roy Castle foundation as we often lose sight of where we began and how far we have moved forward –it left me again with a real feel good factor about lung cancer services and the ongoing commitment to improve.

Having the two patient representatives on board throughout the meeting could have been potentially damaging to the meeting, with both delegate's and patients at risk of being conscious of what was said and not speaking out but actually it enriched the two days and brought reality into the sessions — both patients were fantastic and should be congratulated on their input.

The mastermind sessions was really enjoyable with lots of important points highlighted in a very entertaining manner.

The highlight for me was seeing one of my oldest (in years served NOT in age!!!) colleagues receive the very well deserved inaugural NLCFN award well done to a very emotional Lorraine Creech.

I left the meeting exhausted but energised with fresh ideas and new momentum to bring back to my workplace, encouraged by the ongoing work carried out by my peers.

Look forward to 2016 NLCFN meeting – thank you to the committee



We have also received this report from a member who attended the conference for the first time this year:-

Laura Goodman, Macmillan Lung cancer Clinical support nurse Kettering General Hospital

I attended my first NLCFN conference in November 2015. I didn't really know what to expect and so attended with an open mind.

My initial impression was how well organised and efficient the event was. I was travelling on my own and was met at the station by a NLCFN representative and taken to the venue by minibus, where I was met by more NLCFN representatives.

The first session was Lung cancer- past, present and future. This was a perfect opening session for me as it set the scene given I am new to the role. I particularly enjoyed the role of the CNS. It gave me lots to think about with regards to my own practice and how to develop. The rest of the day continued to be just as interesting and thought provoking with the patient experience from Mavis and Ray Nye being a highlight.

The evening gave an opportunity to meet peers and network in a relaxed atmosphere with dinner and dancing. This again was very important to me being new, but I could see others found this part of the event as important as listening to the sessions as it was an opportunity to seek peer support and share ideas in a relaxed environment.

The second day was as well organised as the first with more thought provoking and interesting discussion around supporting patients undergoing new treatments and alternative ways of managing symptoms. For me, the symptom management sessions were invaluable and have definitely affected my practice since.

The whole event was educational, thought provoking, energising and inspiring and I would recommend anyone who is thinking of attending a conference in the future to do so. I will definitely be attending again.

The NLCFN is grateful to all the sponsors, exhibitors and those who provided educational grants in support of the conference which allowed us to provide substantial registration discounts for members to attend.

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	Roy Castle Lung Cancer
	Foundation

Do you feel strongly? Have your say....

Do you feel strongly about something related to the NLCFN conference? Is there a specific topic you want included in the programme?

Make sure you tell us about it. We will listen and explore options.

Please email us at info@nlcfn.net on or before 20th January 2016



LUNG CANCER NEWS AND PUBLICATIONS



Lung cancer treatment rates and the role of the lung cancer nurse specialist: a qualitative study

We are delighted to report that Angela Tod's research into the role of the LCNS and its impact on treatment rates has now been published in BMJ Open. The study demonstrates how the LCNS role may open doors to positive patient outcomes, including treatment. The reference for the paper is BMJ Open 2015;5:e008587. You can access the paper at http://bmjopen.bmj.com/content/5/12/e008587.abstract?sid=aa5bdd54-b9d8-4ec6-a527-7c9a09f5034b

Latest national lung cancer audit report sets new level of ambition for lung cancer care in the UK

The 11th annual report of the National Lung Cancer Audit (NLCA), published today by the Royal College of Physicians (RCP), reveals that despite significant progress in lung cancer care during the first 5 years of the audit, very little has changed since then.

Surgery offers the best chance of a cure for lung cancer patients. However, the audit demonstrates that since 2010, the proportion of lung cancer patients treated with surgery has not improved from 15%. Furthermore, this can vary across the country from 10 to 24% and this difference does not appear to be due to the patients' background, age or stage of lung cancer.

The RCP has brought together a new team of lung cancer experts to improve lung cancer care over the next 5 years. The team has set higher standards that take into account the use of new treatments for lung cancer. These treatments specifically targeting lung cancer cells without harming normal lung and tissue, allow more patients to receive them safely. The team will also undertake detailed reviews

in areas where lung cancer treatments are underused

The full report can be found at: www.rcplondon.ac.uk/nlca2015

Participation in the audit by lung cancer services in England, Guernsey, Scotland and Wales have been outstanding, collectively contributing data on 37,000 patients diagnosed with the disease in 2014.

Dr lan Woolhouse, senior clinical lead for the NLCA, said:

I am encouraged by the continued participation and support of the audit by lung cancer services across the country. However, now is the time to take lung cancer care to the next level by ensuring that all lung cancer patients receive the most upto-date treatments so that the UK can achieve the outcomes currently reported internationally.

Lung cancer is the second most common cancer in the UK after breast cancer. In 2012, there were over 44,000 new cases of lung can-

cer in the UK and more than 35,000 people died from the condition. Current survival rates for lung cancer are the second lowest out of 20 common cancers in England and Wales (CRUK, 2015).

The NLCA is commissioned by the Healthcare Quality Improvement Partnership (HQIP) as part of the National Clinical Audit Patient Outcomes Programme (NCAPOP). The NLCA aims to review the quality of lung cancer care, highlight areas for improvement and reduce variation in practice. It is managed by the Clinical Effectiveness and Evaluation Unit of the RCP, working in partnership with nurses who specialise in lung cancer care, surgeons, oncologists, public health workers, academics, and patients through the Roy Castle Lung Cancer Foundation.*

For more information or to arrange an interview, please contact Joanna Morgan, communications manager, RCP Care Quality Improvement Department on 020 3075 1354.

Roy Castle Lung Cancer Foundation Thinking of You Cards

The Roy Castle Lung Cancer Foundation have recently had some new sympathy cards designed, which they send out to families who have made a donation in memory of a loved one.

Several lung cancer nurses regularly contact RCLCF to order these cards directly, and RCLCF wanted to make sure that every lung cancer nurse knew they could have access to this resource if they wanted. There is no fundraising message on the card, just the phrase "Thinking of You" and contact details for the charity on the back of the card.



If you want to obtain some cards simply email Emily Grint for copies at emily.grint@roycastle.org

Awareness Events held

On November 3rd, the Macmillan Lung Nurses organised a lung cancer awareness day and smoking cessation event. The mayor of Rotherham was invited to promote the event and generate as much publicity as possible.

The day was supported by the Roy Castle Lung Cancer Foundation and the Megalungs as well as by our respiratory colleagues, BreathingSpace and smoking cessation.

MESOTHELIOMA NEWS

Mesothelioma UK is delighted to announce the launch of its 2016 research grant. Working in collaboration with the NLCFN up to £25,000 is available for a NLCFN member or group of members to undertake a small scale research study, a complex audit or a preliminary enquiry to support a larger grant application. For full details of the grant and to download the application form please visit the research page at

http://www.nlcfn.org.uk/mesothelioma-uk-nlcfn-research-award-1-2016



Helpline: 0800 169 2409
Website: www.mesothelioma.uk.com

Mesothelioma UK's Meso 100 Challenge MESO 100

Going for a winter walk over Christmas / New Year? Then please do the first 100 steps and donate £1.00 (a penny a step) to the Meso 100 winter walk campaign which is raising awareness and money for Mesothelioma UK.

TEXT – SWPX78 £1.00 TO 70070
Follow the campaign on:
Twitter: @Meso100Campaign
Facebook: Meso100Campaign
A link to the fundraising page is on both these social media pages.
Please share.

RESEARCH NEWS

The Research Interest Group - Angela Tod, Chair NLCFN Research Interest Group, University of Sheffield

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. We will welcome input and ideas from any Forum member. The RIG advises members to liaise with an academic colleague to support them in making an application and conducting the project. We can signpost you to a relevant academic if you would like.

Research grants

There are increasing opportunities for funding for small research, audit and practice development projects. These are a great opportunity of Forum members to develop and conduct a project related to their practice and that can improve care of lung cancer patients. Some current schemes are listed below:

NLCFN 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 re-

search skills and experience of Forum members.
See http://www.nlcfn.org.uk/smallgrants for more details

Mesothelioma UK Research Grant

For the first time Mesothelioma UK are offering grants of up to £25000 to fund a project to improve care of people with the disease. Forum members are encouraged to apply. See http://www.nlcfn.org.uk/mesothelioma-uk-nlcfn-research-award-1-2016 for more details.

Roy Castle Lung Cancer Foundation Research Grants

The Foundation invites research applications from professional groups, such as nurses and Allied Health Professionals who are very involved in the patient experience of lung cancer. They will fund pilot studies up to £25000 and larger projects up to £75000. For more details see: http://www.roycastle.org/how-we-help/research/research-grants

Research Training

The NLCFN RIG is aware that some Forum members lack confidence and experience regarding research. However, many Forum members are keen to get more involved in research in different ways, for example, generating relevant research questions, helping to develop a study, leading or being a co-applicant on a study, or by being a clinical link. In order to help Forum members with these roles we would like to highlight the following research training and development opportunities.

Research Grant Workshop - Writing a Quality Research Grant Application

This workshop will be run by the Roy Castle Lung Cancer Foundation and will be held at the British Thoracic Oncology Group Conference in Dublin on Wednesday 27 January 2016 from 1.00pm until 2.30pm. For more details see: http://www.roycastle.org/how-we-help/research/research-grants/how-to-apply

BIL Torch for Nursing Research Workshop. Over the last year the NLCFN RIG has been working with Boehringer Ingelheim Ltd (BIL) to develop a training workshop for Nurses. NLCFN members will have priority for places on the workshop. It aims to increase the confidence and skills of nurses working in lung cancer regarding research. BIL TORCH for Nurses will provide an introduction to identifying, justifying, shaping and communicating a research question and help you to develop a greater understanding of what it means to be part of research activity. The workshop is designed to be highly interactive and enjoyable. It will be held on 22nd and 23rd April 2016 in Birmingham (Venue tbc). For more details see:

http://www.nlcfn.org.uk/torch-programme-0



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



This year the International Association of the Study of Lung Cancer took place in Denver. The NLCFN aims to maintain the impact and presence they had at the previous IASLC conferences and encourages Forum members to start planning now for IASLC 2016. It will be 4-7 December in Vienna. Key dates are:

Online registration opens: JANUARY 20, 2016
Abstract submission opens: JANUARY 20, 2016
Abstract submission deadline: JUNE 30, 2016
Author notifications: SEPTEMBER 14, 2016
Early registration: SEPTEMBER 23, 2016
Late-breaking abstract: SEPTEMBER 30, 2016
Submission deadline for regular registration: OCTOBER 21, 2016

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

Wishing you all a happy Christmas and all the best for 2016.

PROFESSIONAL DEVELOPMENT AND SUPPORT

The LEAD (Lung Cancer Expert Achievement and Development) programme:

A novel approach to continuing professional development for lung cancer nurse specialists

Lung cancer nurse specialists (LCNS) in the UK possess an immense range of skills and expertise in managing patients though their treatment journey. It is essential that nurses are able to share this knowledge with one another and are given the opportunity to further develop their broad range of skills relevant to their day to day clinical practice



The LEAD programme was designed

by a Steering Committee of experienced LCNS to facilitate the sharing of clinical experience and best practice in the management of patients with lung cancer. After identifying four areas which the Steering Committee felt covered a range of key aspects that are important and were of relevance to the LCNS, a National meeting was held. The themes included enhancing communication and presentation skills, understanding the changing landscape in advanced NSCLC as well as demonstrating and articulating the value of the LCNS. In addition we were lucky to have a patient who gave us insight into the value of our role from his perspective. With the help of Professor Lesley Fallowfield and Dr Pauline Leonard we identified and addressed some of the key challenging situations the LCNS comes across.

Fifteen nurses attended the programme over 2 days. Initial feedback has been extremely positive and it is hoped to repeat this again next year. In addition we are hoping to disseminate this education regionally.

Below are some of the comments/feedback from those who attended.

"Excellent Course. Could do with a whole day on communication. Patient speaking was invaluable"

"Thank you. Really fantastic, well-organised event. Patient perspective is invaluable – validates the most simple things we are able to do."

"The 2 days have given some incredible high points and a great oversight of our current position and very supporting."

"Fantastic meeting, relevant and very supportive"

"Really valuable meeting. Enjoyed + + +"

"Fantastic meeting. I really enjoyed meeting other lung CNS' from other regions. Sessions excellent. Great overview and update"



MEMBERS NEWS NEWS NEWS NEWS

This year, more than any previous year, the NLCFN has worked hard to support its members and offered a huge range of exclusive benefits. These included:-

- Travel bursaries in support of members attending World Conference on Lung Cancer
- Travel bursaries in support of members attending NLCFN annual conference
- Support with scientific poster production
- Further development of NLCFN website including member professional development area with supported collaborative projects such as Using Your Voice and Torch in addition to the annual workshop
- Substantial discounts (more than £100) for members to attend our conference
- · Regular e-news to help keep you up to date with current lung cancer news
- 3 newsletters per year
- New Award for outstanding achievement
- Small grants scheme allowing members the opportunity to apply for grants of £5,000 to support small research/audit programmes
- Annual Award scheme to support lung cancer projects with the opportunity to secure £1,500 in support of your project

NLCFN Award for Outstanding Achievement



I am sure that many of you would like me to congratulate the Forum Committee supported by Red Hot Irons on the Annual Conference, "Lung cancer -past, present and future". As a past committee member I know how difficult it is to incorporate all the added tasks throughout the year to very busy work schedules. The programme was varied and inclusive of where we are now and future developments. The Annual General Meeting was well attended and outlined necessary plans to take the Forum into 2016. What happened to that year!

As day one came to a close everyone's focus was on the evening ahead. The setting for the evening was absolutely amazing and as attendees turned the corner to look at the Chapel phones and cameras sprung into action to capture the fabulous sight. It really was special.

Dinner came to an end and the awards were given out. Well done everyone. I cannot start to explain how shocked I was to receive the NLCFN first Lifetime Achievement Award. As one of the trustees I should have been tasked to judge this award but this completely skipped my mind in the build up of the conference, thinking that we would possibly be asked to judge during the conference timetable.

As my biography was read out, I suddenly realised that Diana Borthwick was talking about me. It was quite surreal and such a lovely experience. It is not like me to be stuck for words but this was truly the case on this occa-

sion. Thank you to all who voted for me and all the well wishes and messages which I received on the evening and since the event. It was so kind of you to take the time to make the nomination. It is not until you look back on your career that you contemplate that you may really have made a difference.

My career as a Macmillan Lung Cancer Nurse, Macmillan Lung Cancer Lead Clinician and now as a Mesothelioma Clinical Nurse Specialist has always been interesting and challenging in so many ways. I have endeavored to continually develop myself and the services in which I have worked. I have worked and continue to work with some amazing people. I feel privileged to have had them by my side and sometimes the bond has been so close. It has been so important to know how each other tick! So perhaps the achievement is not just my own but also those who have supported me along the way.

With thanks Lorraine Creech

Annual Award 2015

Congratulations to Sally Moore on being awarded the NLCFN 2015 Annual Award. The funds will go to support a collaboration between three London hospital trusts to develop and evaluate Health and Wellbeing Events for people affected by lung cancer.

In the UK, Health and Wellbeing Events have developed as part of the National Cancer Survivorship Initiative and form one component of the 'Recovery Package' developed for people who have undergone cancer treatment. Health and Wellbeing Events are aimed at supporting people living with and beyond cancer to live as healthy and active lives as possible for as long as possible (Richards et al 2011). They are designed to provide an opportunity for patients and their family members/close friends to gain information and support, to help them manage the consequences of cancer and make positive life-style changes where appropriate (NCSI 2013).

Early pilot work suggests that events of this kind may not only provide benefits in terms of improved levels of knowledge, confidence and physical and emotional wellbeing, but may also lead to more appropriate use of services, and potentially reduce unplanned consultations and admissions. However, to date, much of this early work has been in the context of breast and urological cancers, and there has been little exploration and evaluation of events aimed specifically at helping people affected by lung cancer (Office for Public Management/Macmillan Cancer Support 2011).

Within the London Cancer Alliance (LCA) (one of two strategic networks delivering cancer services across the capital), trusts are now being measured on the number of patients who are offered a Health and Wellbeing Event at the end of primary treatment (LCA 2014). In response, this project was established to begin the process of developing Health and Wellbeing events for people with lung cancer, and evaluate their feasibility, acceptability and usefulness from the perspective of the people involved (i.e. those affected by lung cancer (patients and their family members/close friends) and the professionals engaged in developing and delivering the events).



World Conference on Lung Cancer, Denver, Colorado US Feedback

In 2015 NLCFN introduced a special travel bursary support scheme for NLCFN members who had had abstracts accepted and were planning to attend the WCLC. Eight lucky members received a travel bursary in support of their attendance. Here's just some of the feedback we have received...



Sally Moore, Royal Marsden, Sutton

In September I was privileged to attend the 16th World Conference on Lung Cancer in Denver Colorado. My thanks go to the National Lung Cancer Forum for Nurse, Boyes Turner, Irwin Mitchell and Fentons Solicitors for providing financial support.

The conference provided an opportunity to present some recent work that I and colleagues from the Royal Marsden, Royal Brompton & Harefield, and the Chelsea and Westminster NHS Foundation Trusts have been involved in. The work aims to develop and evaluate health and wellbeing events for people affected by lung cancer.

As many of you know, health and wellbeing events are a recent initiative of the National Cancer Survivorship Initiative aimed at improving the lives of people living with and beyond cancer, and helping them 'to live as healthy and active lives as possible for as long as possible' (Richards et al 2011).

The events provide an opportunity for people with cancer, and their family members to gain information and support to help them manage the consequences of cancer and make positive life-style changes. Benefits are said to include improved knowledge, confidence, and physical and emotional wellbeing, as well a more appropriate use of services, for example reducing unplanned consultations and hospital admissions.

An interim analysis of two of the three events we have planned for 2015 demonstrates that these events can provide benefits for people with lung cancer. For example, 78% of attendees (35/45) reported the event 'quite' or 'very' helpful, 100% (47/47) learned new information and 93% (42/45) would recommend the event to others.

However, only 7% of those patients invited attended an event and significant resource is required to develop and run each event. Work is ongoing to evaluate the events further and identify how their appeal and attendance might be improved.

Paula Tindale-Paul, Guy's & St Thomas' NHS Foundation Trust, London

Submitting my abstract for a poster presentation at World Lung at the beginning of the year feels such a long time ago now. I wasn't really sure it would be accepted but was eager for the opportunity and the challenge, as well as being keen to share the work we have been doing at Guy's and St Thomas' NHS Foundation Trust around survivorship and Lung cancer patients.

We clearly need to have more self-belief as the abstract was accepted and a colleague and I were given study leave to attend. Funding the trip was a challenge but gradually fell into place. I was fortunate enough to be awarded a travel bursary by the National Lung Cancer Forum for Nurses (NLCFN).

The conference was huge in every way with several thousand delegates and was held in the most enormous convention centre in the middle of Denver. We thought poster looked great and despite the footfall being a bit sparse we had a good amount of interest. It caught the attention of doctors and nurses who were interested to hear of our programme

that equips and supports patients to take an active role in self management of their symptoms. A professor in Heidelberg, Germany was so impressed that we have been invited to a symposium in Germany in April 2016 to present our work.

There was time for networking and of course socialising. 'Kool and the Gang' played after the gala dinner on the penultimate evening and were so good. Everyone was on their feet for the whole set.

Representation of UK nursing was strong amongst the small numbers of nurses attending overall and I came away feeling very proud of what we have achieved. I went with the view that other nations, particularly America, would be so much further ahead than us but found things to be quite the opposite. And yes, in terms of some medical research and actual use of new drugs others are further ahead and it is always exciting to learn about what is on our horizon, but in terms of nursing itself and the holistic care of the patient we have so much to celebrate and be proud of in UK nursing. It was so encouraging to hear that we are at the forefront of so much in Lung cancer nursing.

It is so easy to get bogged down in the day to day and not consider what we do to be worth shouting about and sharing with others but we need to start doing just that. If you are implementing any innovation or change to you practice and enhancing patient care and experience then share it. Put in an abstract for a poster presentation, an oral presentation or even write it up — you will be surprised!

I am very grateful to the NLCFN and would like to thank them for their support and the travel bursary which covered my conference registration and accommodation for the conference duration. It was a great help and ensured I was able to attend. It also opened the door to contacts of other UK nurses attending. I wouldn't have got their without it! Heidelberg here we come!



Jenny Mitchell, Oxford

I was delighted to be offered the opportunity to attend the World Lung Cancer Conference in Denver, Colorado from 6th to 9th September 2015. I presented an abstract on the 'Guideline for Patient Information on Enhanced Recovery'.

The guideline was produced by the Thoracic Surgical Group, a sub-group of the National Lung Cancer Forum for Nurses. It provides guidance on the information that should be provided to patients undergoing thoracic surgery on an enhanced recovery pathway. Enhanced recovery is an approach to the care of patients undergoing surgery that aims to ensure that patients are in the best possible condition for surgery, have the best possible management during and after their operation, and experience the best post-operative rehabilitation. Patients on enhanced recovery programs are partners in their care pathways. Guidance is provided about:

- Thoracic surgery enhanced recovery program information
- Written patient information
- Verbal patient information
- Information about the enhanced recovery pathway
- · Information about thoracic surgery
- Patient diary
- Quality assurance and patient information

Central to the enhanced recovery concept is the involvement, empowerment and partnership with the patient. Evidence shows that patients participating in enhanced recovery programs have fewer post-operative complications and reduced rates of readmission. To increase understanding of the enhanced recovery pathway it is vital that patients are provided with relevant information. The aim of this guideline is to support the provision of patient information regarding enhanced recovery programs so that patients are in partnership with healthcare professionals thereby improving patient experience and clinical outcomes. This guideline is based on evidence available and identified best practice in UK thoracic surgical centres. It includes examples of patient information and enhanced recovery diary. The feedback from the discussant after my presentation was very positive, highlighting work that can be shared and adapted to other areas.

During the conference there were presentations on all aspects of care and treatment of patients with lung cancer including a nursing and allied health professional stream in which UK lung cancer nursing was very well represented. In addition I found presentations on the new 8th edition of the lung cancer staging and on the management of ground glass opacities to be particularly helpful. The bursary from the NLCFN with some additional commercial sponsorship allowed me to present at this event, my presentation along with other from NLCFN members highlighted the excellent work being undertaken by lung cancer nurses in the UK on an international stage.



Karen Clayton, Macclesfield

I received a travel bursary from NLCFN to attend the World Lung Cancer Conference in Denver, Colorado in September 2015. I had two abstracts accepted for oral presentation: Improving Survivorship through Prehabilitation at the start of the journey for thoracic malignancy (NLCFN workshop 2014) and Performance Sta-

tus is their Correlation between Doctor and Patient, an audit conducted at East Cheshire NHS Trust.

It was the first time I had attended the World Lung Conference and travelling to the USA was exciting and as a little overwhelming. The city of Denver had really embraced the conference with over 6000 delegates attending.

The nursing presentations were excellent and the representation from the UK outstanding. It is not until you see other countries presentations, you realise how advanced we are in the UK with regards to patient care and how we push the boundaries to improve outcomes for our patients. My presentations were well received (unless they were just being kind) and although a very nerve wracking experience it is one that has increased my confidence and knowledge of the wider lung cancer community worldwide.

The NLFCN is envied by other countries and we are extremely lucky to have such a proactive and dedicated Forum. Thank you to the Forum for providing the travel bursary that went to towards my attendance at World Lung. I would encourage anyone to submit abstracts for next year's event, you never know you could be presenting at Vienna in December 2016



Lavinia Magee, Papworth

It was an honour to attend WCLC in September, partially funded by a travel bursary from NLCFN for which I am extremely grateful. At an elevation of 5,280 feet above sea level, Denver is truly the "mile high" city and a wonderful location with over 300 days of sunshine per year which were

evident during the conference. Over 4 days the conference program included more than 500 keynote speakers, session chairs and abstract discussants with more than 500 oral and mini oral abstract presentations. More than 1,500 poster presentations were displayed. As you can imagine, it was only possible to see and hear a fraction of what was on offer.

Along with the support and help from colleagues at NLCFN and Papworth Hospital, 4 abstracts were submitted for review. 2 were accepted for oral presentation and 2 for poster presentation. The prospect of an oral presentation at such a venue with such an audience is daunting. Thankfully both presentations were in the same nursing session, back to back. Presentations were over 10 minutes with time for questions and the contents of each session reviewed by a discussant.

The first presentation, Using Your Voice (UYV) - How to Use Your Nursing Voice at the Multi-Disciplinary Team (MDT) Meeting highlighted the value and impact of a collaborative project between Lilly Oncology and NLCFN. Many of you will be aware of this project now as 2 courses have been completed. The workshops were developed in response to evidence that patients who are seen by a LCNS are more likely to receive treatment and have a better outcome than those who are not. As MDT meetings move at a fast pace, with a variety of dynamic characters, it can be difficult to get your nursing point across in a time-pressured setting. The UYV program gives nurses the skills and confidence to do this, improve accurate assessment of Performance Status, and act as the patient advocate. The talk was well received with interest taken in the Insights Discovery Personal Profile (www.insights.com) which enables individuals to understand their working style and how it impacts on others, develop interpersonal skills and create a more productive, positive environment. The audience could appreciate the value of this, suggesting all MDT members should be encouraged to undertake this form of assessment to understand themselves! The UYV course is now an annual event, so keep a look out on NLCFN website for workshops in 2016.

The second presentation, A Prospective Audit on Smoking Cessation and Lung Cancer Nurse Specialist Intervention within a Thoracic Oncology Service highlighted the work of the LCNS team at Papworth with Maureen King as project lead. This was a very appropriate subject and well received as lung cancer prevention and screening was given priority at the conference with a plenary session. The presentation highlighted the positive impact of the LCNS in assessing readiness to stop smoking, having undertaken level 1 smoking cessation training, when completing a holistic needs assessment. A care plan documented information given and signposting to appropriate smoking cessation service. All members of the LCNS team are now trained to offer level 2 smoking cessation advice, which is now a local CQUIN.

Poster presentations received interest from UK and international delegates promoting discussion of services offered and how they could be improved: Prospective Audit of Lung Cancer Nurse Specialists Telephone Link Line Call to Surgical Patients 30 Days Post Hospital Discharge

Living With Lung Cancer - Preferred Sources of Patient Support and Information: The Papworth Experience

May I encourage you all to promote your work and collaborate with colleagues. 2015 has flown by and it won't be long until NLCFN conference 2016 and WCLC in Vienna 5-7 December 2016. Perhaps you will be lucky enough to receive a NLCFN travel bursary in the future. Go for it.

Thank you Lavinia Magee Nurse Consultant Thoracic Oncology, Papworth Hospital



A Reflection on my time as a NLCFN member and being part of the NLCFN Committee

I first took on a Lung Cancer CNS role in 2001 based in Queens Medical Centre, Nottingham.

Being part of the Forum has developed opportunities for me to network and share good practice across the UK at a pace right for me. In the early days I attended the then Lilly workshop and learned about project management and presenting work. The networking aspect is invaluable and has earned me many lifelong friends.

I applied to be nominated as a committee member after feeling strongly that Wales needed to be represented and there was no-one more shocked to have sufficient votes from the membership to be elected, than me!

There have been numerous educational and leadership openings. The Forum offer amazing support from experienced colleagues who gain satisfaction from providing a nurturing environment and investment in developing others. This was particularly helpful in my role as a single handed CNS in a DGH and more so when I took on a committee role. I felt out of my depth and wasn't sure what I had done, but the other committee members acknowledged the ups and downs and provided me with a strong lead.

Looking back at my time as a committee member I had opportunity to collaborate with Pharma and the Third Sector. Being able to be a part of working groups to develop patient information and guidance for management of specific treatments has helped me to stay up to date with the evolving world of lung cancer. Shaping training for CNS specifically both locally and nationally has been incredibly satisfying as it has empowered colleagues to manage their patient caseload in an optimal way and allowed me to disseminate the skills and knowledge I have had the privilege to access.



Naomi Horne, Wales

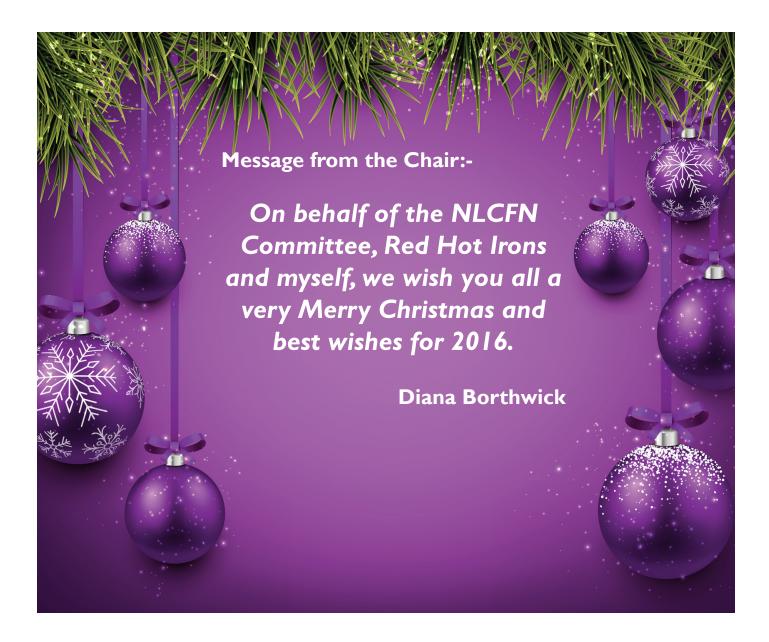
I have been able to contribute to policy and strategy, through representing the Forum at NICE consultations and through the UKLCC clinical group. I have worked with Roy Castle Lung Cancer Foundation and the Welsh Lung Cancer CNS contingent to raise awareness of lung cancer within the Welsh Government, and on another level established a Mesothelioma UK post in South Wales. I am certain with the forum activity this wouldn't have been so easily achieved. Becoming the Newsletter Editor was a challenge, particularly taking it on from Diana, but the feedback received from colleagues and the willingness of peers to contribute gave me the encouragement I needed. I think it is fair to say that Tricia Bryant is the driving force behind this role and she delivered on a professional edition each time.

I have had many opportunities to present (reluctantly) at conferences and meetings (something that still fills me with fear and dread) but that have helped me to gain confidence and is a huge benefit to me in the context of patient advocacy at a strategic level, which is where I have found myself of late.

The forum membership is varied and there are representatives from large teaching hospitals to small DGH's and Cancer Centres. The expertise within the group is immense as a collective and the willingness to share widespread.

DATES FOR THE DIARY - 2016 27th-29th BTOG 2016 - 14th Annual 16th/17th May **NLCFN Annual Workshop BTOG Conference January** Birmingham, Venue tbc. Invitations will follow in the New Year Dublin http://www.btog.org/annual-conference.htm 29th May -24th European Conference 16th-19th April **European Lung Cancer** Ist June on General Thoracic Surgery **Conference** Naples, Italy Geneva, Switzerland http://2016.estsmeetings.org/ http://www.esmo.org/Conferences/ELCC-2016-Lung-Cancer 4th-7th **International Conference on** Cancer Nursing (ICCN 2016) **S**eptember **Current Issues in Palliative** 20th/21st April Hong Kong, China Care http://www.isncc.org/?page=ICCN2016 London http://www.mahealthcareevents.co.uk/cgi-4th-7th **World Conference on Lung** bin/go.pl/conferences/detail.html? **December** Cancer conference_uid=492 Vienna. Austria https://www.iaslc.org/events/17th-world-1st-4th May International Mesothelioma conference-lung-cancer Group Birmingham http://imig2016.org/







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