



NATIONAL CHEMOTHERAPY BOARD

ACP/RCP/RCPPath/RCR/UKONS/BOPA

August 2016

Dear Colleague,

30 Day SACT mortality

The importance of having mortality meetings to review deaths within 30-days of SACT has been established and most Trusts have developed their own system for deciding which cases to discuss.

The National Chemotherapy Board had recognised that while there are many examples of good practice that there was inconsistency of approach between centres which may limit sharing of learning. In September 2015 we sought examples of the good practice which has been developed to date in each Trust. We received information from 24 sites from England, Northern Ireland, Scotland and Wales. There was much to learn from the good practice in different Trusts. We have summarised the key details of the processes used and have developed a proposed template for an operational policy and proforma. Organisations may decide to use all or a combinations of sections of the proforma.

This document was discussed at the National Chemotherapy Board meeting initially in October and then in January 2016 prior to review by the parent organisations, before being made more widely available.

It is recognised that in order to deliver this important work each Trust will need to ensure provision of adequate administration support and that additional time is allocated for consultants within their job plans.

This document coincides with the first publication of the SACT data for 30 day mortality due in August 2016.

We hope that you find this guidance helpful in improving the quality and learning from 30 day mortality from SACT in your Trust.

Dr Paula Scullin Consultant Medical Oncologist, National Chemotherapy Board
Dr Janine Mansi, Consultant Medical Oncologist, National Chemotherapy Board
Professor Finbarr Cotter, Chair National Chemotherapy Board