Multidisciplinary Cancer Conference (MMC) Setup Checklist:
Items to Consider when setting up a MCC

This checklist includes numerous items that should to be considered when initiating a regular MCC meeting. This list is not exhaustive and site-specific requirements should be considered.

It is important that these items are discussed and planned for in advance of the first MCC meeting so that participants can recognize the value of the meeting from the beginning. Discussing these items with participants and other management will ensure everyone's expectations and responsibilities are clearly identified. Laying this ground work can improve the chances of having a successful meeting, leading to great patient care and outcomes.

1. MCC Focus and Purpose
- What disease site will be the focus of the MCC?

- How does the focus of your MCC impact other MCCs in the region?
  - Is there any duplication?
  - Are there disease sites missing coverage?
  - Are there opportunities to partner with hospitals in and outside the region?

- Should your hospital link (videoconference/attend) into a regional MCC? (dependent upon referral patterns and local resources)
  - Has this been discussed with the Regional Vice President (RVP)?
  - Should the MCC link into another hospital MCC?
  - Should you invite other hospitals to link into your MCC?

- What are the objectives of your MCC?
  - ensure that all appropriate diagnostic tests, all suitable treatment options, and the most appropriate treatment recommendations are generated for each cancer patient discussed prospectively in a multidisciplinary forum
  - provide a forum for the continuing education of medical staff and health professionals
  - contribute to patient care quality improvement activities and practice audit
  - contribute to the development of standardized patient management protocols
  - contribute to innovation, research, and participation in clinical trials
  - contribute to linkages among regions to ensure appropriate referrals and timely consultation, and optimize patient care
  - provide opportunity for improvement of MCC processes and functioning

- How will you shape the MCC to meet these objectives?
  - input should be encouraged from all members of the multidisciplinary team
  - all cancer patients in the region, independent of their geographic locale, should have the opportunity to have their case reviewed in an MCC
  - identify training and education opportunities that will increase knowledge and understanding of the MCC members and hospital staff
  - identify clinical trials available to patients by either having a research representative join the MCC or having a updated list of trials and criteria for the MCC

- hold annual meeting to discuss/brainstorm service or quality improvements for cancer services within the hospital or regional centre (e.g. looking at how a cancer patient could have a better experience at the hospital such as by decreasing visits and waiting times or improving outcomes or efficiency)
- develop and document standardized patient management protocols
- encourage adoption of Cancer Care Ontario's Standards and Guidelines
- other

- How will hospital management (administrative and clinical) support and encourage the ongoing success of the MCC?
  - provide financial support (e.g. Coordinator position)
  - recognition of MCC and members
  - monitor success
  - encourage team cohesion

2. Patient Identification

- Which patients will be discussed?
  - all patients
  - all recently referred patients
  - all patients not responding well to current treatment program
  - all relapsed patients
  - consider CCO guidance/advice document regarding patients that would most benefit from MCC discussion (see **MCC Disease Site Attendance Criteria and Guidance on Patient Case Selection for Discussion**)
  - unique cases (not recommended)
  - other

- Who is responsible for identifying patients for discussion?
  - surgeon
  - medical oncologist
  - radiation oncologist
  - pathologist
  - interns
  - other

- How will one refer patients to be discussed at a MCC?
  - submit patient case summary via email or fax to Coordinator by deadline
  - other

- Will patients need to be prioritized for the meeting, such that certain cases are discussed?
  - establish priority categories (e.g. 1,2,3: 1-required to discuss, 3-if enough time, will discuss)
  - establish criteria for prioritization categories
  - assess priority cases based on disease site guidance for patient discussion

- How will the required patient information that needs to be reviewed at the MCC become available?
  - Who will arrange for the radiology images and/or pathology reports to be available?
  - Who will correlate the patient case specifics for MCC participants to review?

- What is the minimum amount of information that needs to be summarized for the patient to be effectively reviewed at the MCC?
    - □ complete a template of the required information the clinician needs to submit so that the MCC members can understand the patient case

- How will the team handle cases that need a treatment recommendation prior to the next MCC?
    - □ email discussion (with anonymous patient info)
    - □ phone calls
    - □ retrospectively at next MCC (not recommended)
    - □ other

3. Roles and Operational Issues
- Who will be the Coordinator and what will his or her responsibilities be?
    - □ collect patient summaries
    - □ create the list of patient cases, based on the cases forwarded by individual physicians.
    - □ setting and distributing the agenda
    - □ book the meeting, set up the meeting room, and ensure the availability/functioning of all necessary equipment
    - □ notify all core members, invite guests, and post in-hospital meeting notices
    - □ ensure all relevant up-to-date patient information, particularly slides and all imaging (including related electronic imaging) entered in the computer prior to the meeting
    - □ maintain attendance records
    - □ distribute attendance records annually for physicians/surgeons to collect Continuing Professional Development (CPD) credits
    - □ track issues and actions (minutes) such as operational and quality improvement (not specific patient information)
    - □ track minimum data requirements, such as how many cases were forwarded to and how many were discussed at the MCC by disease site

- How late can one identify a patient for review in the next MCC?
    - □ provide a deadline (e.g. 4 p.m. Wednesday deadline for the weekly Friday meeting)

- When will the meetings be held and how often?
    - □ weekly
    - □ biweekly

- How long should the meeting last?
    - □ one hour
    - □ two hours
    - □ other

- Where will the meeting be held?
    - □ in-person (meeting room)
    - □ teleconference
    - □ videoconference

- How will you accommodate participants that cannot attend in person? (e.g. hospitals with smaller volumes that need to link to your MCC)
  - ☐ teleconference
  - ☐ videoconference

- What equipment and facilities will be needed for the meeting?
  - ☐ dedicated, secure meeting room with adequate facilities
  - ☐ projection equipment for displaying x-rays and pathology slides
    - ▪ secure, interactive computer systems with scanning, storing, and computer-generated image display capabilities
  - ☐ videoconferencing equipment (consult with Ontario Telemedicine Network to ensure needs are met)
  - ☐ teleconferencing equipment
  - ☐ information technology (IT) support

- Who will be invited to attend the meetings?
  - ☐ nursing oncology
  - ☐ surgical oncology
  - ☐ medical oncology
  - ☐ radiation oncology
  - ☐ diagnostic radiology
  - ☐ pathology
  - ☐ palliative/pain representation
  - ☐ social services
  - ☐ dietician/nutritionist
  - ☐ geneticist
  - ☐ clinical trials representation
  - ☐ psychology
  - ☐ occupational therapy / physiotherapy
  - ☐ others

- What members are required to attend?
  - ☐ consider CCO guidance document for required versus preferred participants (see **MCC Disease Site Attendance Criteria and Guidance on Patient Case Selection for Discussion**)

- What is the protocol if one or more of these required members are not at the meeting?
  - ☐ contact their assistant to find them
  - ☐ contact their delegate
  - ☐ postpone the meeting
  - ☐ develop tentative treatment recommendation and ensure the missing member reviews recommendation to finalize prior to submitting to medical record

- Who are the MCC member delegates that will attend in case the primary person cannot make it?
  - ☐ collect contact information

- Who will be the Chair/Facilitator of the meeting?

- Will there be a rotation process for the Chair/Facilitator role?
    - ☐ rotate every 6 months
    - ☐ rotate every 12 months
    - ☐ other

- What are the responsibilities of the Chair?
    - ☐ facilitate the MCC
    - ☐ ensure all forwarded cases that have been selected for presentation get discussed within the allotted time
    - ☐ encourage participation of all MCC members
    - ☐ ensure patient confidentiality is maintained by reminding participants of privacy issues and permitting only appropriate attendance
    - ☐ record any minutes that pertain to treatment policies discussed at the MCC

- How will the Chair promote the importance of patient confidentiality?

- How will each member of the MCC ensure patient confidentiality?
    - ☐ remove patient names from pathology slides and images

- How will the Chair promote participation from all members?

- How will the Chair handle conflicting treatment recommendations within the MCC?
    - ☐ agreement on how to handle this in advance of the situation may diffuse potential problems

- How can a team environment be fostered?
    - ☐ create team name and/or logo
    - ☐ optional lunch out once or twice a year
    - ☐ rotate list of who brings a snack for the group
    - ☐ provide opportunities for engagement (e.g. acquire input for MCC improvement)
    - ☐ other

4. Terms of Reference (ToR) & Evaluation
- Who will complete the first ToR that guides the MCC operations and conduct?
    - ☐ person to draft a document
    - ☐ MCC members and other management to discuss and comment
    - ☐ finalization of ToR document

- How often will the ToR be reviewed?
    - ☐ annually
    - ☐ biannually
    - ☐ consistent lack of attendance (one member or more) impacts ability to consider all appropriate treatment options, consequently preventing suitable treatment recommendations
    - ☐ other

- How/When will the MCC be evaluated?
    - ☐ circulate MCC evaluation form to MCC team to complete

- summarize and discuss results
- incorporate changes
- discuss implementation plan for changes to MCCs

- What is the most appropriate data to collect to monitor MCC success?
    - quality outcomes (e.g. appropriate attendance, frequency, patient case review)
    - patient outcomes
    - patient MCC treatment recommendations and final treatment decision, record decisions for differing treatments
    - patient case data to determine if initiation of a clinical trial is warranted

5. Miscellaneous
- How will the success of MCCs be measured?
    - attendance record goals
    - percent of patients discussed at the MCC versus all possible patients who were not discussed
    - percent of patients following the MCC treatment recommendation versus another treatment plan (physician plan, patient wishes, etc.)
    - monitor clinical trial participation
    - number of new trials initiated/originated from an MCC
    - MCC member satisfaction survey
    - patient satisfaction survey

- What are the long-term data capturing requirements? What information is the hospital interested in for monitoring MCC progression?
    - consider measures of success
    - consider auditing requirements
    - establish how data be easily captured (electronically)?
        - database
        - web-based tracking system
        - electronic form of patient summaries (confidentiality considered)

- Is the MCC accredited through the Royal College of Physicians and Surgeons of Canada (RCPSC)?
    - see the RCPSC for details regarding how to log these credits: http://rcpsc.medical.org/

    Note: For additional information on how to accredit a MCC, please refer to the MCC Accreditation Information Package (http://www.cancercare.on.ca/toolbox/mcc_tools/)