

**OCCAMS Steering Group**

**Terms of Reference**

**Purpose:**

This document described the terms of reference, membership and methods of communication for the Steering Group of the OCCAMS Study.

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**Background:**

OCCAMS was set up as a collaborative effort amongst clinicians and scientists from across the UK working in the field of oesophageal and junction adenocarcinoma to create a bio-resource of blood and tissue (Barrett’s, cancer, metastases) with clinical epidemiological data to characterise the molecular characteristics of oesophageal cancer and enhance clinical management.

*The overall aims of OCCAMS are to:*

* Better characterise the clinico-demographic risk factors
* Characterise the molecular genetic landscape (DNA, RNA, epigenome)
* Determine disease sub-types and develop new clinically relevant classification systems
* Develop and validate improved clinical staging and prognostic algorithms
* Ascertain new therapeutic targets for clinical trials

**Steering Group Terms of Reference:**

To discuss ideas for modifications to existing projects and suggestions for new projects which will advance the overall aims of OCCAMS and make best use of the finite biological resources.

To consider the implications for the OCCAMS bio-resources in terms of availability against the merits of the studies proposed and avoid duplication of efforts.

To appoint a Principal Investigator with responsibility for each sub-project from the Steering Group.

To ensure sub-projects fall within the remit of OCCAMS and are in accordance with the informed consent and ethical approval. Final governance review will be conducted by the sponsors of OCCAMS (Cambridge University Hospitals NHS Foundation Trust and the University of Cambridge) in line with sponsor responsibilities. Sub-studies do not automatically fall under OCCAMS ethical approval.

**Quorum and Decision Making:**

A minimum of 50% of the Steering Group are required for decision making purposes. The quorum must include the Chair. Decisions on new sub-projects shall be by majority vote. In the event of a tied decision, the Chair shall have casting vote.

**Steering Group Membership:**

Included is a list of current members which comprises of the PI or a nominated representative from each current OCCAMS centre, members of the ICGC project team and up to three external members. Representatives from OCCAMS sites will be invited to attend the Steering Committee meetings when they have contributed 20 sets of samples.

For the purposes of the International Cancer Genome Consortium (“ICGC”) whole genome sequencing project there will be a scientific oversight committee which will be distinct from this Steering Group.

**Frequency of Meetings:**

It is expected that the Steering Group will meet every 3-6 months. Participation can be by teleconference.

**Methods of Communications:**

An email distribution list will be established. The Project Manager will moderate posts to this list.

The Project Manager will also maintain a website on which all appropriate material will be available.

**Specific Issues:**

**Intellectual Property:** The IP for each sub-project will follow employment contract or funding terms and conditions. For ICGC whole genome sequencing CRUK holds the IP. Final review will be conducted by the sponsors of OCCAMS (Cambridge University Hospitals NHS Foundation Trust and the University of Cambridge) in line with sponsor responsibilities. Agreements for transfer of samples and data may be required as determined by the sponsors.

**Publication:** Publication policy is to include the whole OCCAMS group (written as on *behalf of OCCAMS*) with named authorship for those conducting the scientific work and contributing intellectually.

**Duplication of aims**: Where a project is deemed to overlap with existing sub-studies in terms of its aims or research question, the project or projects previously submitted will be prioritised

**Declaration of possible conflicts of interest of DMC members:** The independent members of this DMC have no involvements that might raise the question of bias in their reports to the sponsor or investigators in this study. Specifically, they have no financial interest in the outcome of this study, and they will not be authors on publications arising from this study.

**Steering Committee Members**

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| **Cambridge** | **Prof. Rebecca Fitzgerald** | **Chair** |
|  | **Mrs Nicola Grehan** | **Secretary** |
|  | **Mr Richard Hardwick** | **Upper GI Consultant Surgeon** |
|  | **Dr Maria O’Donovan** | **Consultant Histopathologist** |
|  | **Adam Freeman** | **OCCAMS Lab Manager** |
| **Southampton** | **Mr Tim Underwood** | **Upper GI Consultant Surgeon** |
| **Salford** | **Dr Ang Yeng** **Dr Stephen Hayes** | **Consultant Gastroenterologist****Consultant Histopathologist** |
| **Birmingham** | **Ms Sonia Puig** | **Upper GI Consultant Surgeon** |
| **Birmingham Heartlands** | **Ms Olga Tucker** | **Upper GI Consultant Surgeon** |
| **St Thomas** | **Mr James Gossage** **Professor J Lagergren** | **Upper GI Consultant Surgeon**  **Upper GI Consultant Surgeon** |
| **Edinburgh** | **Mr Richard Skipworth** | **Upper GI Consultant Surgeon** |
| **Nottingham** | **Mr Simon Parsons** | **Upper GI Consultant Surgeon** |
| **Norwich** | **Mr E Cheong**  | **Upper GI Consultant Surgeon** |
| **Guildford** | **Mr Shaun Preston** | **Upper GI Consultant Surgeon** |
| **UCL** | **Prof. Laurence Lovat** | **Consultant Gastroenterologist** |
| **Belfast** | **Dr Richard Turkington** | **Consultant Oncologist** |
| **Plymouth** | **Mr David Chang** | **Upper GI Consultant Surgeon** |
| **Imperial** | **Professor George Hanna** | **Professor of Surgery** |
| **Coventry** | **Dr S Sothi** | **Consultant Oncologist** |
| **Dundee** | **Prof. Russell Petty** | **Professor of Medical Oncology** |
| **Cardiff** | **Prof. Tom Crosby** | **Consultant Oncologist** |
| **External Members** | **Ivo Gut** |  |
|  | **Sean Grimmond** |  |
|  | **Robert Petty** | **CRUK Representative** |