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**Executive Board Meeting**

**Wedndesday 7 October 2015**

**CTICC, Cape Town, South Africa**

**15:00-18:00**

**Agenda**

**1. Welcome and communication Giorgio Perilongo 15:00 – 15:05**

1.1 Welcome

Thank you Dan for the idea of Online community – I want to add the St Barldriks

1.2 Communication

JJ Divino is leaving Kenes due to personal issue. A replacement has been identified.

Great annual report that enables to communicates inside and outside SIOP. Thank you Susanne Wollaert for her great work.

**2. Overview BoD Meetings**

Confusion and overlapping of Advocacy and PODC. Aim of the meeting is to have them talk to each other.

PR: I was at PODC, they are doing an amazing job – we need to improve communication without being too bossy. Someone from the Board should always ensure to keep this link and continental Presidents

EB: PODC is very important and should be included in the Executive Board. PR: PODC Is ad hoc member of the BOD (see management structure)

Issue of PODC not being member:

DR: let them be a community

GP: what if they become independent?

GR: we should keep them whithin SIOP but if they don’t become members they will become more and more independent. We don’t provide them much of what they need. So we need to make sure that what they try to get to outside partners is provided by SIOP.

EB: SIOPE Document? GP: they can become independent as well.

Chestnov meeting: he commited to:

* SIOP becoming official NGO relations with WHO
* Set a trust funds for paediatric oncology that SIOP could manage
* Network of countries created by WHO

**3. Site Selection SIOP 2018**

PGR: the SSR is only a factual and logistics document.

* Doha
* Kuala Lumpur
* Kyoto
* Sydney
* Singapore

Venues very different and it is difficult to give a preference. Sydney comes first with the best grade.

PR: strength of local committee is very important – Doha and KL is not known as a strong destination.

GP the National paediatric oncology is also a major factor. Japan is ready to play a major role

PR: exclude Doha given that the participation is likely to be not well attended. EB: the leaders are changing very often… they have a big hospital called airport…. They go get cured abroad… Exclude Australia

GR: I would be in favour for Kyoto given the work that has been done by the LOC. Now what about KL? DR: they are not really organized, their way of working is an enigma

PGR: FD says Kyoto.

**4. Kenes Contracts**

GP: there are currently 2 contracts: one for congress and one for the society for historical reasons. The aim was to merge the two in one.

Contract of congress started in 2013 for a 3 years cycle so until 2015. A 120 days timeline is allowed to cancel the fourth congress. 120 days after CT will include 2018 congress preparation.

GP: some items of the new contract will need to be discussed.

GR: we should have a simple contract. Both contracts need to be reviewed. We need to have a meeting within SIOP Board to discuss this.

AM contract continues until 2018 but the confirmation of continuance must be done in December 2017. Goal: to have the contract ready to be signed in Jan 2016.

DR: please tell us about what we need to change in the contract.

PGR: officially Kenes is not in charge of 2018 until

**5. UICC relationship**

GP: I am not clear on what is going on. Here’s what I understand: the current president of UICC is a really nice guy that I know for a long time and I have no reason not to trust them.

As UICC President, he’s quite money oriented. They started a project on Essential Medicines. there's a fight with GC but I don’t understand what is going on.

GR: I don’t understand what is UICC role really. What are their deliverables? Ess. Medicins issue is h

GP: UICC wants to play a political role. They network

PR: they try to assist worldwide on developing cancer control on a national level. They only playing on a high level but not on a ground work.

EB: they have no access to families and patients.

GP: the issue arose when we started working on a political level. We should talk to Teizer directly. OC decided that SIOP would be the only partner on childhood cancer and not UICC.

SIOP submitted its programme for the meeting. GC and JJ are informed.

**6. Financial considerations**

6.1 Congress

1375 delegates so far. We are waiting for on-site registration, we should go over 1400.

Final budget was based on 1375 so any additional registration will be a benefit. In addition, due to the exchange rate, we are earning more than expected.

EB: I used another registration system that was cheaper. DR said that the Kenes contract was differently organized as it covers the registration, the abstract submission system etc.

GR: SIOP Budget for 2016 was shared and include some funds for Advocacy however this didn’t bring money as we were expecting it. We are now using our reserves and we need to address this issue.

6.2 Advocacy

6.3 Strategic consulting

**7. Various relationships**

7.1 PODC

Will be discussed later

7.2 IPSO

PR: work in progress. I am confident that we should reach an agreement on the way thing are organized. We are hoping to reach an consensus on membership.

Idea of creating a

7.3 PROS

**8. Any other business**

8.1 SOSIDO

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| Action | Accountable | Deadline | Status |
| SIOP EB to raise the contract item that are to be discussed | SIOP Executive Board |  |  |
| SIOP EB and Kenes to review the congress budget (set-up a meeting) | SIOP Executive Board |  |  |
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SIOP Advocacy meeting:

With JJ GC, Ramandeep, Julia, scientific committee.

SIOP has a great appreciation of PODC work but the need for communication and for PODC to advise on what SIOP can provide to support this committee.

There was a sense of overlapping between Advocacy and PODC hence this meeting today. It’s more a maturation problem than anything else. Thank you for reporting in the annual report but please tell us what SIOP can do.

GP: there are some confution about the UICC.

PODC:

Julia: we need to talk about scholarship.

Raman: we welcome any feedback you want to give. We are engaged in the PODC programme: it is quite straight forward. We would only need to now quicker which are the abstracts that are selected for the other sessions so we can pick on time. We don’t mind picking last. They can provide alternatives.

PR: write something on how things should be done and this will be included in the congress handbook.

PGR: I need to have how we build the PODC programme within the programme. This I don’t have for PODC. FD: we ask the other organisation (IPSO, PROS, PPO, …) to provide their programme on 31st January.

GP: we would like to have SIOP has a large umbrella –

Raman: there was a text add on the welcome message to PODC committee. I have no other idea.

PR: Request lead author and lead author to be SIOP members

Julia: Scholarship: we had no idea of where the money is coming from?

PGR: this year was a bit different because of we got money from 4 different funds and so they had they own requirements.