West of Scotland Cancer Network

Upper GI Cancer MCN Work Plan 2023/2024

	Actions Required	Lead	Due Date
1.	**Continue to engage with the Regional MDT Improvement Programme to optimise operational efficiency and effectiveness of the MDT**		
1.1	Agree actions arising from the MDT-FIT QA process and engage with local MDTs to deliver against these.	MDT FIT Project Facilitator MCN Clinical Lead MCN & Improvement Manager Local MDT Leads and members	September 2023
1.2	Finalise data requirements for effective MDT review; develop upper GI cancer data sets and definitions, built around the agreed 'core' data set for the application.	MCN&I Manager MCN Clinical Lead Local MDT Lead MCN & Improvement Manager	Ongoing
1.3	Continue to work closely with eHealth colleagues to progress MDT system ready for regional implementation.		
2.	**Continue to engage with Service Development and Review Programmes**		
2.1	Continue to support the use of cytosponge in the early detection of Upper GI cancers.	MCN Deputy Clinical Lead MCN & Improvement Manager Board Leads	Ongoing
2.2	Participation and support as required to implement the recommendations of the national robotic surgery programme.	MCN Clinical Lead MCN & Improvement Manager MCN Advisory Board	Ongoing
2.3	Provide support to implement the recommendations of the Upper GI regional service review as the work stream progresses.	MCN Clinical Lead MCNAB Members MCN & Improvement Manager	Ongoing
3.	**Input to Regional Living with Cancer Programme**		
3.1	Work with clinicians and service managers to explore the potential of extending access to Prehabilitation services currently based at BWoSCC to Upper GI cancer patients across WoS region. • Facilitate exploratory discussions to establish potential for physiotherapists in NHS Lanarkshire to receive training in prehabilitation practice from BWoSCC staff.	MCN Clinical Lead MCN & Improvement Manager MCN Network Service Managers	October 2023

	Actions Required	Lead	Due Date
4.	**Develop and maintain regional guidelines to optimise patient care**		
4.1	**Clinical Management Guideline (CMG)** • Oesophageal cancer – Squamous Cell Carcinoma • Oesophageal Cancer – Adenocarcinoma • Gastric Cancer	MCN Clinical Lead SACT Lead MCN Manager MCN & Improvement Manager	July 2023
4.2	**Clinical Guidance Documents (CGDs)** • Upper Gastro-intestinal Cancer Regional Follow-up Guideline	MCN Clinical Lead MCN Advisory Board MCN & Improvement Manager	July 2023
5.	**Maintain regional service configuration map**		
5.1	Update activity data	Information Team MCN Manager	June 2023
5.2	Refresh as per any changes in configuration	MCN Manager	
6.	**Deliver national Upper GI education event which facilitates review of clinical audit data as required, and promotes shared learning of current best practice and innovation**		
6.1	In consultation with SCAN & NCA, develop a focused programme for the event, addressing relevant key issues • Organise event speakers, venue and agenda • Issue meeting details and encourage registration of MCN members from all regions.	MCN Clinical Lead MCN Manager	November 2023
6.2	Establish data requirements for the event, and any arising as a result of the event • Liaise with information team regards audit presentation requirements • Liaise with information team if any further audit opportunities identified • Ensure appropriate data sharing agreements issued, completed, agreed and passed to information team	MCN Manager Information Team	November 2023
6.3	Develop action plans arising from event. Monitor progress of agreed actions • Record actions arising from discussion at event • Develop action plans of same • Issue action plans as appropriate • Monitor progress of actions recorded	MCN Manager Information Team	December 2023
7.	**Use clinical data to drive improvement in quality of care and outcomes**		
7.1	Review QPI audit findings (2022 data) to identify variation in practice and highlight exceptions • Performance Summary Returns Assessed • RCOG exception report produced • Governance review and Interrogation of QPI exceptions • Agreement of actions for inclusion in annual audit reports • Input to the production of Annual Audit Report	MCN Clinical Lead MCN Manager Information Manager	December 2023

	Actions Required	Lead	Due Date
7.2	Identify requirements for further data analysis to aid understanding of variance, and develop action/ improvement plan or focussed audit.	Information Manager MCN Clinical Lead MCN Manager	
7.3	Monitor and ensure progress with regional and local board action/improvement plans. Carry out agreed action/improvement plans (From 2021 QPI results): • All NHS Boards across the WoS to relaunch the Endoscopy Quality Improvement Plan to ensure ongoing improvements in the timely histological diagnosis of patients. • All NHS Boards across the WoS to explore documentation solutions and identify a single point for recording MUST score early in the patient pathway, for example as a mandatory field in electronic patient records, mandatory field for MDT referral or a stamp for clinic notes.	MCN Clinical Lead MCN Manager Board Clinical Effectiveness Leads/RCOG	
7.4	Continue to contribute to the national formal QPI review process ensuring appropriate engagement and feedback across all specialties in the MCN. • Promote regional input to national engagement process	MCN Clinical Lead MCN Manager Advisory Board	May 2023
8. Survival Analysis			
8.1	Utilise the findings of Public Health Scotland survival analysis of Upper GI cancer patients to understand local, regional and national differences, and ensure consistency in outcomes and treatment approach.	Clinical Lead MCN Manager Information Team Board Leads	December 2023
9. Watching Brief in line with Actions outlined in Overarching Regional Work plan			
Maintain watching brief on development of a national digital solution for Treatment Summaries, and provide input or support where requested.			
Maintain watching brief on roll out of the Regional prehabilitation workstream in line with the actions outlined in the WoSCAN Regional Delivery Plan for Best Preparation for Treatment (Pre-treatment), and provide input or support where requested.			
Maintain watching brief on roll out of Regional PROMS workstream in line with the actions outlined in the WoSCAN Regional Delivery Plan for Person Centred Care for All, and provide input or support where requested.			