



West of Scotland Cancer Network

High Level Regional Delivery Plan 2023-24 (v1.0)

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Key	RAG Status
G	On track
A	Some delay but expected to complete (< 6 months)
R	No progress or major delay in implementation (> 6 months)
B	Complete

Progress with actions will be reported via the Regional Cancer Advisory Group.

NB This draft work plan is aligned to the pre-publication National Cancer Strategy 2023 and 1st 3-Year Action Plan and may be amended following publication of the final Strategy Document .

Key Issue	Specific Action Required	Lead	Due Date	RAG	Deliverables
Earlier and Faster Diagnosis					
1	Support Primary Care Services				
1.1	Scottish Referral Guidelines for Suspected Cancer Input to the national review of the Scottish Cancer Referral Guidelines: <ul style="list-style-type: none"> • Provide expert clinical advice/guidance. • Peer review. 	PCCG/ MCNCLs	In line with Nat Prog		Regional input to guideline content, assurance of awareness.
2	Diagnostics				
2.1	qFIT (Colorectal) Continue to promote adoption of a, nationally recommended, standardised process to provide equitable Primary Care access to qFIT across all WoS NHS Boards and monitor local application.	PCCG	Ongoing		Equitable service and standard process across the region.
2.2	Rapid Cancer Diagnostic Centres Review learning across early adopter sites and share best practice (within region – NHS A&A and Lanarkshire - and across NHS Scotland).	Board Leads/ RMC/ PPM	Dec 23		Effective and efficient RCDC services.
3	Faster Diagnosis				
3.1	Implementation of the National Optimal Lung Cancer Pathway (NOLCP) Work with WoS Boards to promote adoption and implementation of the NOLCP: <ul style="list-style-type: none"> • Complete regional analysis of existing diagnostic pathways. • Ensure the pathway is visible across the region. • Facilitate engagement of all specialities required to achieve the NOLCP. Prepare a regional report on gap analysis to understand the requirements between existing local/regional pathways and the NOLCP. Provide information and work with Boards, as required, to progress initiatives where	RMC PPM MCNCL MCN&IM PPM MCN&IM	Ongoing June 23 Ongoing		Fully informed approach to allow for effective implementation and subsequent evaluation of national diagnostic pathways across the WoS.

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	<p>local/regional/national funding has been secured, sharing best practice across Boards.</p> <p>Re-audit pathway and provide regional report to assess improvements in pathway.</p>	Board Mgrs/ PPM	Dec 23		
3.2	<p>Development & Implementation of the National Optimal Head & Neck Cancer Pathway NOH&NCP</p> <p>Identify regional clinicians to participate in national work.</p> <p>Undertake preparatory regional analysis of diagnostic pathway, benchmarking Board performance and identifying areas for improvement using data available.</p> <p>Multi-professional input to national work streams.</p> <p>Prioritised areas for investment identified to inform funding bids, should funding become available.</p>	<p>MCN&IM</p> <p>MCNCL/ MCN&IM</p> <p>H&N MCN</p> <p>Board Mgrs/ PPM</p>	<p>April 23</p> <p>April 23</p> <p>tbc</p> <p>tbc</p>		Fully informed approach to allow for effective implementation and subsequent evaluation of national diagnostic pathways across the WoS.
3.3	<p>Maintain oversight of cancer performance metrics for services delivered regionally and cancer waiting times across the region</p> <p>Input to the newly established national Cancer Performance and Delivery Group and, if necessary, initiate discussion with regional Acute Directors to facilitate mutual aid between/across Boards where required.</p> <p>Monitor cancer waiting times performance for USOC and 31 day targets, reporting to RCAG on challenged pathways and using data to inform prioritisation of any national funding allocations.</p>	RMC/ RCCL	<p>Ongoing</p> <p>Quarterly</p>		Oversight of cancer performance across the WoS allowing for regional discussion and action as required.

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4	Innovation					
4.1	Imaging in Lung Cancer	Engage with the Accelerated National Innovation Adoption (ANIA) and Centre for Sustainable Delivery (CfSD) teams to support and facilitate rapid roll-out of an artificial intelligence (AI) decision support tool.	RCCL/ Lung MCNCL/ Rad Leads	Ongoing		Awareness of progress to ensure readiness to support roll out across the WoS.
Best Preparation for Treatment (Pre-treatment)						
5	Prehabilitation					
5.1	Establish and embed models of good practice	<p>Raise awareness and establish referral pathways to universal prehab services offered through Maggie's Centres in conjunction with MCNs and continue to monitor uptake and impact in conjunction with service providers.</p> <p>Recruit Prehab Advocates in each WoS Board and establish active Regional Prehab Network to lead the development of Prehab for Cancer Patients in conjunction with local service providers and MCNs. This will include, for example:</p> <ul style="list-style-type: none"> • Embed national principles of prehab into cancer pathways. • Delivery of education sessions. • Development of referral processes to local providers of services. • Evaluation of interventions. <p>Develop prehab pathway for active systemic anti-cancer therapy within Beatson WoS Cancer Centre.</p> <p>Develop and deliver Awareness and Education Sessions for staff across the region to enhance understanding of prehab within the context of cancer</p>	<p>LWCCCL QSIM/ MCN&IM</p> <p>QSIM LWCCCL</p> <p>QSIM LWCCCL</p> <p>QSIM LWCCCL</p>	<p>June 23</p> <p>Dec 23</p> <p>Ongoing</p>		Joined up approach to prehab, regionally and nationally, ensuring service users are fully informed of services available in order to optimise the benefits of treatment.

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	<p>care.</p> <p>Develop marketing materials to support the delivery of local campaigns and awareness raising.</p> <p>Work with national colleagues to develop and test options for digital solutions which support delivery of prehabilitation within clinical setting.</p> <p>Engage with clinical, public, private and third sector services to deliver and embed prehab services.</p>	<p>QSIM LWCCL</p> <p>QSIM LWCCL</p> <p>QSIM LWCCL</p>	<p>Aug 23</p> <p>Mar 24</p> <p>Ongoing</p>			
5.2	Improving Cancer Journey (ICJ)	Embed ICJ/support for people affected by cancer from the point of diagnosis into clinical pathways.	MCNs	Ongoing		Equitable access to the ICJ programme across pathways in the region.
6	Genomics					
6.1	Molecular Pathology	<p>Input to the work of the Scottish Strategic Network for Genomics Medicine to ensure Regional priorities and work streams are aligned with their Strategy and Implementation Plan.</p> <ul style="list-style-type: none"> Identify via MCNs at the earliest opportunity new testing requirements to inform planning. 	RMC PPM MCN&IM MCNCLs	Ongoing		Optimisation of molecular pathology, to ensure that services that are responsive to developments nationally.
7	Multidisciplinary Team (MDT) Meetings					
7.1	MDT Improvement	<p>Review and update regional MDT Constitution template for adaptation by local/regional MDTs.</p> <p>Streamlining MDTs</p> <ul style="list-style-type: none"> Determine which MDTs could potentially be streamlined through protocolisation in line with CMGs outwith full MDT review. <ul style="list-style-type: none"> Implement fully within Gyn Onc. 	<p>QSIM</p> <p>CL MDTs QSIM</p>	<p>Aug 23</p> <p>Dec 23</p>		<p>An agreed template for use across cancer MDTs in the WoS.</p> <p>Clear criteria for protocolisation within MDTs.</p>

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7.2	<p>Management of patients from the private sector</p> <ul style="list-style-type: none"> Ensure that clear and transparent standard operating procedures are in place for management of patients who move between NHS/private sectors for part of their care. 	RCCL	Oct 23		Clarity of the processes required for patients who receive care in both the private and NHS setting.	
7.3	<p>Complete MDT-FIT peer review programme for all cancer MDTs in the WoS.</p> <p>Develop improvement plans in conjunction with each MDT, working with boards or escalating via regional groups as required.</p>	<p>QSIM PF</p> <p>PF</p>	<p>Feb 24</p> <p>Ongoing</p>		Practical and effective actions identified to improve MDT processes and enhance the opportunities of team working.	
7.4	<p>Review and reconfigure MDTs to support improved clinical decision making in line with potential service reconfiguration:</p> <ul style="list-style-type: none"> Upper GI (support 2 centre model). Bladder (support 2 centre model). 	RCM RCCL MCN&IM MCNCL	Determined by service reconfig plans		MDT services that are responsive to service reconfiguration.	
Safe, Realistic and Effective Treatment						
8	Surgical Services					
8.1	<p>Robotic assisted surgery (RAS)</p>	<p>Work with Regional Planning to: Evaluate outcomes of early implementation pathways:</p> <ul style="list-style-type: none"> Prostate Partial nephrectomy Cystectomy Endometrial Colorectal <p>Take forward implementation of Phase 2 pathways:</p> <ul style="list-style-type: none"> TORS Upper GI 	<p>RCCL RMC Dir Reg Plan, MCNCL MCN&IM</p>	<p>In line with QPI reporting</p> <p>Aug 23 tbc</p>		Optimal and equitable RAS services across disciplines throughout the WoS.

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	Ensure equitable access, resilience and sustainability of services.		Ongoing		
8.2	Development of a sustainable 2-centre upper GI (UGI) surgical service model in the WoS	Work with NHS Lanarkshire and NHS Ayrshire and Arran to develop a single service model for UGI surgical services: <ul style="list-style-type: none"> Understand planning implications, effects on general surgery, and interface with other specialties/clinical adjacencies across the WoS. Ensure alignment with 2nd centre already established – GGC and FV. 	RMC PPM NHS Boards Dir Reg Plan	tbc	Detailed clinical proposal and implementation plan for a 2-site for UGI surgical services in WoS.
9	Systemic Anti-Cancer Therapy				
9.1	Ongoing implementation and refresh of the recommendations of the strategic review of SACT services in the WoS	Revisit SACT strategic review to ensure that all action that can be taken to optimise resource utilisation is being taken. <ul style="list-style-type: none"> Identify any potential new approaches to optimise capacity and use of resource in SACT services across the WoS. Progress areas of innovation identified - developing service specifications and service remodelling as required. Support implementation of local delivery of remodelled services to ensure these are high quality, safe and sustainable. 	PPM NHS Boards PPM RSESG Board Mgrs	June 23 Ongoing Ongoing	Adaptable and sustainable SACT services in the WoS.

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9.2	Compliance with CEL30 DL (2023) 12	Assure SACT Services across the region are operating in line with safety and governance requirements. <ul style="list-style-type: none"> Development of a new regional strategy for assuring compliance following publication of updated CEL guidance and as directed by Healthcare Improvement Scotland (HIS): audit; risk assessment; mitigation and escalation. 	RSESG PPM RSESG PPM	tbc dependant on new national compliance guidance		SACT services in the WoS that are compliant with the CEL, with processes in place to address any action required.
10	Chemotherapy Prescribing and Administration System (CEPAS)					
10.1	Chemocare V6.06	Complete upgrade of Remote User Access Software for Boards outwith GGC.	CEPAS Team	June 23		Robust and reliable remote access to central database from across the West of Scotland.
		Procure and implement worksheet and labels module across the region.	CEPAS Team	Dec 23		New system functionality scoped and implemented and benefits that will enhance clinical and service delivery realised.
10.2	National Toxicity Recording	Participate in national work stream to inform toxicity recording requirements.	CEPAS Team PPM	Ongoing		Single national toxicity recording mechanism agreed nationally and implemented regionally.
		Implement toxicity recording within Chemocare.		Mar 24		
11	Models of Care					
11.1	Introduction of New Cancer Medicines	Deliver regional process via Prescribing Advisory Group, for acceptance of new Scottish Medicine Consortium/National Cancer Medicines Advisory Group guidance on new systemic anti-cancer therapy medicine indications.	RCCP	Ongoing		Robust regional process for acceptance of new SACT.
11.2	Implementation of new SACT regimens	Review governance arrangements for consistent implementation of NCMAG/SMC advice.	RCCP	Jul 23		A regional evaluation process that enables earlier planning to define service and budgetary implications associated with the

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		Horizon scanning to maintain a financial forward look while developing service impact information to inform planning.	RCCP	Ongoing		introduction of new SACT.
		Identify a review process for new SACT indications, aligning capacity and infrastructure, to inform both impact on service and resource requirements to ensure safe introduction.	RCCP/ PPM	Oct 23		
11.3	Management of SACT protocols	Maintenance of a comprehensive suite of SACT protocols, developed in line with WoS SOPs, ensuring they are up to date and responsive to new medicines advice issued.	RCCP	Ongoing		Assurance of a safe prescribing infrastructure.
12	Acute Oncology (AO)					
12.1	Acute oncology service provision	Input to national planning regards future oncology service provision, reviewing regional business case and submitting funding bid against any available national funding that may become available.	RMC RCCL	Ongoing		AOS service specification with minimum dataset for use nationally.
		Retain links with UK AO groups to align practice and reporting of future outcome measures where possible.	PPM			
Support after Treatment						
13	Follow Up					
13.1	Risk stratified follow up in the management of men with prostate cancer	Develop and support network of support workers to deliver risk stratified model of follow up.	LWCCL MCN Man	April 23		Consistent approach to a digital risk-stratified follow up model.
		Continue to develop IT solution for implementation across the region, building on work undertaken in A&A.		Ongoing		

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	<ul style="list-style-type: none"> Roll out to GGC Roll out to Lanarkshire Roll out to Forth Valley <p>Collate data to enable evaluation of service and patient experience of new method of follow up.</p>		June 23 tbc tbc Jan 24			
13.2	Risk stratified follow up in men with germ cell cancer	Define the IT specification to support risk stratified follow up for germ cell cancer across the region/NHS Scotland in conjunction with key stakeholders.	LWCCL MCN&IM	Nov 23		Agreed specification for development of a functional IT programme that supports risk stratified follow up.
Sustainable and Skilled Workforce						
14	Oncology					
14.1	Oncology	Alignment of regional action with the objectives of the National Oncology Transformation Programme. Participation in the oversight group seeking to manage current pressures in clinical and medical oncology to effectively deliver the programme.	S Groom /D Dodds	Ongoing		Efficient and effective oncology services across the WoS, in line with the national programme.
14.2	Advanced Practice	Explore the potential for further development of advanced practitioner roles to enhance overall service capacity.	Board Mgrs	Ongoing		Maximisation of the positive opportunities available by advanced practice roles.
14.3	Non-Medical Prescribing	Continue to invest in non-medical prescribing training, monitoring and promoting the upward trend in service provision.	Board Mgrs/ PPM	Ongoing/ Quarterly		Efficient and sustainable NMP service to support SACT services.
14.4	Other Specialties	Actively input to National Oncology Transformation Programme and national workforce planning groups around key specialties, including role development. <ul style="list-style-type: none"> Engagement with recommendations made for transformation of services, identifying specific action required in the WoS. 	RMC RCCL Board Leads	Ongoing		Services that are prepared and responsive to transformation recommendations.

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Person Centred Care for All					
15	Patient Reported Outcome Measures (PROMS)				
15.1	<p>Strategic approach to developing and implementing PROMs</p>	<p>Continue to input and advise on national work programme and developments.</p> <p>Work with clinical teams to identify opportunities within existing services and pathways to utilise PROMs to support clinical management. Commence PROMS for:</p> <ul style="list-style-type: none"> • Prostate cancer • Lung cancer <p>Identify appropriate delivery model and tools, as needed, and set out operational process to be followed for introducing PROMS into practice.</p> <p>Evaluate use of PROMS to build case for continuation of funding and use in routine practice.</p>	<p>LWCCCL QSIM</p>	<p>Ongoing</p> <p>Ongoing</p> <p>Dependent on above</p> <p>Dependant on above</p>	<p>PROMs data capture embedded into clinical pathway to inform patient management in two clinical pathways, while enabling evaluation to inform wider roll out.</p>
16	Treatment				
16.1	Treatment Summaries (TSUM)	<p>Extend trial of TSUM prototype within Gynaecology services across the Region.</p> <p>Work with regional and national colleagues to take forward development of TSUM for other cancer types and facilitate engagement with MCNs in the future rollout of TSUMs through establishment of:</p> <ul style="list-style-type: none"> • Engagement plan • Development plan • Implementation plan 	<p>MCN&IM MCNCL</p> <p>QSIM</p>	<p>Dec 23</p> <p>Dependant on national programme</p>	<p>Understanding the feasibility of wider roll-out and use of the TSUM prototype in practice.</p> <p>Informed implementation plan for TSUM regionally and nationally.</p>

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17	Single Point of Contact (SPoC)					
17.1	New innovative SPoC posts	Design and develop a function to help patients navigate services, particularly where pathways involve movement between different specialties and across NHS Boards.				Joined up services for patients, with enhanced support to navigate the pathway.
		<ul style="list-style-type: none"> • Gynaecology: <ul style="list-style-type: none"> ○ Surgery ○ Oncology 	MCN&IM MCNCL	May 23		
		<ul style="list-style-type: none"> • Lung: <ul style="list-style-type: none"> ○ Early Diagnostics 	MCN&IM MCNCL	May 23		
Mental Health as a Part of Basic Care						
18	Psychological Therapies Support Framework (PTSF)					
18.1	Mental health support	Continue regional work to support ongoing implementation and delivery of the national PTSF.	QSIM PTSF Grp	Ongoing		Action plan for tackling gaps in service and process in place for monitoring progress.
		In response to 2022-23 benchmarking exercise and analysis, produce a report highlighting areas of development and gaps in service provision.	QSIM	Jun/Jul 23		
		Undertake benchmarking exercise across PTSF Network.	QSIM	Mar 24		
Clinical Trials and Research						
19	Clinical Trials	Promote and monitor the uptake of clinical trials through the MCN: <ul style="list-style-type: none"> • Maintain clinical trial maps. • Build clinical trial decision making into MDT system. 	CL (MDT) MCNCLs MCN&IM	Ongoing		Maximise recruitment to and opportunities available by participation in clinical trials.

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20	Research	Promote and participate in local/regional/national/international research: <ul style="list-style-type: none"> Encourage participation through research sub groups in MCNs. Encourage collaborative research projects to be established. Support publication and presentation of work. Participation in national/international groups. 	MCNCLs MCN&IM	Ongoing		Active participation in, and awareness of, areas of research and innovation.
Cancer Information and Intelligence Led Services						
21	MDTs					
21.1	MDT System Development and Implementation	Continue to progress and implement a standardised information management system to support the MDT review and decision making process across all MDTs. Implement system for: <ul style="list-style-type: none"> Molecular Tumour Board Head and Neck Tailor requirements for: <ul style="list-style-type: none"> HPB Urology Lung Breast Develop a training module for the MDT system.	CL (MDT) eHealth	May23 Mar 23 Aug 23 Oct 23 Dec 23 Feb 24 Ongoing		A fully functioning, adaptable, system to support MDT discussion and decision making across cancer types in the WoS.
22	Electronic Cancer Audit System – eCase					
22.1	Work with National Services Scotland (NSS) to ensure	Lead on the national operational management of eCASE. Ensuring routine developments are prioritised	IM	Ongoing		Stable and accurate data collection and reporting application to support the routine

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	that a sustainable model of support is developed to underpin national clinical audit	appropriately, bugs are resolved in a timely manner and ensuring appropriate input from the National eCASE User Group.				monitoring and reporting of patient outcomes.
		Work with NSS to develop a cancer QPI datamart, to facilitate more streamlined QPI reporting, data linkage and direct access to data for PHS.	IM	Dec 23		Efficient and consistent data reporting across Scotland. Improved access to data for linkage to support national cancer improvement programmes.
		Coordinate User Acceptance Testing.	IM	Dec 23		Robust, consistent and accurate QPI reports.
		Lead national Super User Group to develop processes in relation to governance, business as usual report maintenance and management of change requests for the new national reporting system.	IM	Dec 23		Suite of nationally agreed Standard Operating Procedures so support the transition to a new QPI report maintenance process.
		Work with NSS to input to a full options appraisal for redevelopment of the eCASE QPI data collection application.	IM	Sept 23		Options appraisal document to support decision making in relation to the development of a robust QPI application to ensure a robust system is in place for QPI data collection which meets current and future technical standards.
23	Cancer Quality Performance Indicators (QPIs)					
23.1	Delivery of the National Cancer Quality Programme on behalf of the Scottish Government working in partnership with other Networks, PHS and HIS	<p>Ensure continued relevance and applicability of QPIs with consistent implementation and reporting across Scotland.</p> <p>Complete formal review of QPIs (3rd cycle) for the following tumour types (c/f from 2022/23):</p> <p>Breast Cancer Prostate Cancer UGI Cancer</p>	NCQPC MCNCLs			Suite of nationally agreed QPI documents based on current evidence and up to date clinical practice to report on tumour specific quality outcomes in cancer care.
				Apr 23 Apr 23 Apr 23		

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		<p>Mesothelioma HPB Cancers</p> <p>Continue with the 3rd cycle reviews in line with agreed timetable for the following tumour types:</p> <p>Lymphoma Brain/CNS Cancer Ovarian Cancer Head & Neck Cancer Melanoma</p> <p>Work with the Scottish Cancer Network to develop new QPIs for Thyroid Cancer – commencing Feb 23.</p>		<p>May 23 May 23</p> <p>Jan 24 Feb 24 May 24 July 24 July 24</p> <p>Dec 23</p>		<p>Development of nationally agreed quality indicators and a national dataset which will enable data collection and reporting to commence in order to assess quality outcomes for thyroid cancer patients across Scotland.</p>
23.2	External review process for Cancer QPIs	Work with Healthcare Improvement Scotland and other Networks to participate in the external review process for Cancer QPIs, submitting regional data and reports for external scrutiny in line with HIS review schedule, and identifying any areas where action is required in response to review findings.	IM	Ongoing		Assurance of the ongoing regional process.
23.3	External review findings	In response to HIS external review findings, work with NHS Boards to determine and agree action plans, responsible leads and timelines for delivery.	RMC IM	In line with review schedule		Assurance of action being taken as required.
Governance						
24	Data Analysis & Reporting					
24.1	Annual QPI audit programme delivery	Deliver a programme of annual QPI audit reports in line with WoSCAN agreed reporting schedule, undertake clinical risk assessment via Regional Cancer Oversight Group, initiating regional actions where				Suite of cancer specific audit reports with identified actions to address areas of variance.

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	<p>required and monitoring delivery of local actions, escalating where required.</p> <p>Bladder/Testicular/Lymphoma/Prostate/Endometrial/Cervical</p> <p>Brain/UGI/Ovarian</p> <p>Lung/Mesothelioma/HPB/Sarcoma/ Breast/Head and Neck/Colorectal</p> <p>Renal/Renal Pelvis & Ureter/Melanoma</p>	<p>IM</p> <p>IM</p> <p>IM</p> <p>IM</p>	<p>Q1 23</p> <p>Q2 23</p> <p>Q3 23</p> <p>Q4 23</p>		
24.2	<p>Optimisation of audit activity across the region</p>	<p>Working with clinical colleagues, regularly report the agreed tumour specific set of additional background information analysis measures, to provide additional context to QPI analysis and allow MCNs to explore regional variation and develop action plans accordingly.</p> <p>Work with PHS to agree mechanisms for incorporating additional contextual analysis into National QPI dashboards.</p>	<p>IM</p> <p>IM</p>	<p>Ongoing</p> <p>Ongoing</p>	<p>Well defined suite of analyses to provide further assurance around the quality and consistency of care provided across the region.</p> <p>Clinically meaningful data available nationally and presented in an accessible format.</p>
24.3	<p>National survival analysis</p>	<p>Submit regional data in line with PHS schedule of analysis.</p> <p>Co-ordinate clinical meetings to review survival analysis output and determine action required.</p> <ul style="list-style-type: none"> • Head and Neck • Lung • Upper GI • HPB 	<p>IM</p> <p>MCN&IM MCN CL/ IM</p>	<p>Ongoing</p>	<p>Routine monitoring of patient outcomes to provide assurance or identify unwarranted variation.</p>

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	Co-ordinate the regional clinical commentary to be published alongside official PHS survival publications. Respond to the findings of the recently published Ovarian Cancer Survival Analysis and work with NHS GGC to address any issues identified that require to be addressed.	MCN&IM MCNCL/ IM RMC RCCL MNCCL	Oct 23		Clinical context to support published survival analysis and action plans to address areas of variance.
24.4	Input to UK-wide audits	IM	Oct 23		Routine benchmarking of performance and identification of areas requiring action.
24.5	30 Day Mortality Reporting SACT	CEPAS analyst Site Leads SACT Leads	Quarterly		Assurance of a systematic approach to the review of deaths or complications, to improve patient care and enhance professional learning.
24.6	MDT Reporting	CL MDT	Dec 23		Maximisation of the opportunities available within the new MDT system.
25	Pathways				
25.1	Maintenance of regional Clinical Management Guidelines (CMGs) and Clinical Guidance Documents (CGDs)	MCN&IM Relevant Clinicians	Ongoing		Accessible guidance in the WoS that is current and is also responsive to national developments.
	Review, update and maintain the comprehensive suite of regional CMGs and CGDs in line with standard operating procedures (SOPs), and aligning to the Scottish Cancer Network's (SCNs) Clinical Management Pathway (CMP) work stream.				
	Impact assess new guidance documents prior to publication for consideration by Boards.				
	During this reporting period a number of CMGs/CGDs, across multiple tumour groups, are due				

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	to be updated (<i>this progresses in line with individual MCN work plans</i>).				
25.2	Once for Scotland approach, liaison with SCN	SCN RCCL	Ongoing		Full engagement with the CMP development process, and a clear understanding of the requirements for transition from regional to national guidance.
	Implementation of a new process for transition from CMGs to CMPs where interim solutions are required during phased release of CMP information.	SCN RCCL	Aug 23		

Lead Abbreviations

Bd Leads	Board Cancer Leads	MCN&IM	Managed Clinical Network & Improvement Manager	RCCP	Regional Cancer Care Pharmacist
Bd Mgrs	Board Cancer Managers	NCQPC	National Cancer Quality Programme Coordinator	RLCC	Regional Lead Cancer Clinician
CEPAS Analyst/ CEPAS Team	Chemotherapy Electronic Prescribing and Administration System Analyst / Team	NHS Boards	NHS Boards	RMC	Regional Manager (Cancer)
CL (MDT)	Clinical Lead (MDT Development)	PCCG	Primary Care Cancer Group	RSESG	Regional Systemic Anti-Cancer Therapy(SACT) Executive Steering Group
Dir Reg Plan	Director of Regional Planning	PF	Project Facilitator	SCN	Scottish Cancer Network
IM	Information Manager	PPM	Projects and Planning Manager	SACT Leads	NHS Board SACT Leads
LWCCL	Living With Cancer Clinical Lead	PTSF Group	Psychological Therapies Support Framework Group	Site Leads	Tumour Site Leads
MCNs	Managed Clinical Networks	QSIM	Quality and Service Improvement Manager		
MCNCL	Managed Clinical Network Clinical Lead	Rad Leads	Radiology Leads		

Weblinks to MCN and Primary Care Cancer Group Work Plans:

[Breast Cancer MCN Workplan](#)

[Haemato-oncology Cancer MCN Workplan](#)

[Skin Cancer MCN Workplan](#)

[Colorectal Cancer MCN Workplan](#)

[Head and Neck Cancer MCN Workplan](#)

[Upper GI Cancer MCN Workplan](#)

[Gynaecological Cancer MCN Workplan](#)

[Lung Cancer MCN Workplan](#)

[Urological Cancer MCN Workplan](#)