

Delivery Plan

Milestones are in line with RCAG meetings and reporting

Cancer Action Plan													
Category	Chapter	Action No	Title	Description	Update Against Current Milestone - Aug 24	RAG	Milestone 1 April/May/June 24	Milestone 2 July/Aug/Sept 24	Milestone 3 Oct/Nov/Dec 24	Milestone 4 Jan/Feb/Mar 25	Milestone 5 April/May/June 25	Milestone 6 Jul/Aug/Sept	Lead(s)
Realistic Medicine	Earlier and Faster Diagnosis	15	Refresh of Scottish Referral Guidelines for Suspected Cancer	Input to the national review of the guidelines to provide expert clinical advice and promote regional implementation	WoS representatives for all national peer review sessions identified. Draft guidelines developed for breast, head & neck, lung, gyn, haematology, prostate, colorectal, skin and upper GI. Commenced for kidney, bladder, neuro and TYA.		Regional input to national peer review: Breast; Head & Neck: Lung (April) - Gyn; Haematology; Urology & Prostate (May) - Colorectal; Skin; Upper GI (June)	Regional input to national peer review: Kidney & Bladder (Aug)	Regional input to national peer review: Malignant Spinal Cord Compression (Oct) - Non Specific Symptoms (Oct) Support national consultation process	Implementation of revised guidelines Awareness sessions in primary care via Lead Cancer GPs	Monitor implementation compliance in conjunction with Cancer Managers through Cancer Manager Forum		Primary Care Cancer Group MCN & Improvement Managers Regional Manager (Cancer)
Realistic Medicine	Earlier and Faster Diagnosis	27 28	Optimal Pathways for Cancer: Development an Implementation - Lung - Head & Neck - Colorectal	Work with WoS Boards to promote adoption and implementation of National Optimal Pathways for lung, head and neck, and colorectal cancers	Regional clinicians to be identified to participate in development of the national optimal pathway for colorectal cancer Re-audit of the lung cancer pathway undertaken to establish impact of the NOLCP, analysis of data underway Investment priorities agreed for lung and head and neck cancer and implementation and redesign work ongoing Boards continuing to progress head and neck pathway improvement utilising SGHD funding		Initiate regional reaudit of lung pathway to assess improvements post redesign work and investments Undertake regional analysis of existing colorectal cancer diagnostic pathway and report findings, identifying potential areas for future improvement Work with Boards to progress head and neck pathway improvement bids that secured SGHD funding, sharing learning through MCN	Work with Boards/local teams to take forward improvement work identified for lung and head & neck Potential funding bids identified for colorectal and prioritised (dependant on SGHD funding announcement timelines)	Work with Boards/local teams to take forward improvement work identified. Report of findings from lung pathway re-audit, with areas for further improvement identified, submitted to RCAG.	Work with Boards/local teams to take forward improvement work identified	Work with Boards/local teams to take forward improvement work identified	Work with Boards/local teams to take forward improvement work identified	MCN Clinical Lead MCN & Improvement Managers Projects & Planning Manager
Innovation	Earlier and Faster Diagnosis	25	Rapid Cancer Diagnostic Centres	Continue to engage with the on-going development of RCDCs in the WoS	RCDC Outcomes Report of pilot sites published February 2024. Funding for existing sites (Ayrshire and Lanarkshire) extended for 1 year. Bids for development of new RCDCs being sought.		Assessment of outcomes from pilot sites undertaken and discussion with constituent Boards at RCAG to assess viability of continuing/expanding to other sites						Board Cancer Leads Regional Manager (Cancer) Projects & Planning Manager
Realistic Medicine	Safe, Realistic and Effective Treatment	57	Clinical Management Pathways (CMPs)	Continued collaboration with the Scottish Cancer Network in the development of CMPs and their governance processes	Development of head and neck cancer pathway underway Prostate cancer pathway development in initial stages Process for full integration of the CMPs for breast, lung and adult neuro cancers in the WoS pathway developed and approved by RCAG Breast CMG not yet retired, discussion ongoing with PASG and SCN SCN Editorial Group meeting being convened in September 24. ToR to be finalised. Proposed collaboration with SIGN and meeting Chair will be external to SCN		Regional CMGs replaced by national CMPs for breast, lung and adult neuro cancers Engagement with head and neck and prostate CMP development teams underway Cascade information and updates to MCNs as required Promote patient-facing information and CMPs	Continued engagement with the development of head and neck and prostate cancer CMPs	Maintain oversight of development process via MCN Advisory Boards Engage in consultation/ feedback process prior to publication by SCN on the RDS website.	Archive appropriate existing regional CMGs Embed appropriate CMPs across the region Engage with the SCN CMP Editorial Group as required	Continued participation with the national CMP programme	Continued participation with the national CMP programme	MCN Clinical Lead MCN & Improvement Manager Projects & Planning Manager
Delivery	Earlier and Faster	43	Cancer Performance and	Maintain oversight of cancer performance metrics for services delivered regionally and cancer waiting times	Representation at the National Cancer Performance and Delivery Board continues		Review of performance across the region: identification and	Review of performance across the region: identification and	Review of performance across the region: identification and	Review of performance across the region: identification and	Review of performance across the region: identification and	Review of performance across the region: identification and	Regional Manager (Cancer) Regional Cancer Clinical Lead

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Operational Dr	Diagnosis		Delivery	across the region Facilitate cross-Region working to improve performance through sharing practice/innovative practice	Monitoring within WoS Boards and meetings with SGHD ongoing, urology and colorectal remain the most challenged Cross-Board discussion and sharing of issues and innovative practice initiated Discussions have taken place with Boards and MCN Leads. No additional specific work has yet been identified over and above work ongoing within Boards to look at management of USOC - discussion ongoing		progression of specific regional improvement actions Monitoring and reporting of surgical backlog data to SGHD Data used to inform investment bids Targeted work to appraise cross-Board solutions	progression of specific regional improvement actions Explore feasibility of progressing regional work to support Boards to manage increase in USOC referrals across the Region within defined specialties Monitoring and reporting of surgical backlog data to SGHD	progression of specific regional improvement actions Monitoring and reporting of surgical backlog data to SGHD	progression of specific regional improvement actions Monitoring and reporting of surgical backlog data to SGHD	progression of specific regional improvement actions Monitoring and reporting of surgical backlog data to SGHD	progression of specific regional improvement actions Monitoring and reporting of surgical backlog data to SGHD	
Innovation	Earlier and Faster Diagnosis	33	Innovation in Lung Cancer Imaging	Continued engagement with the Accelerated National Innovation Adoption (ANIA) and the Centre for Sustainable Delivery (CfSD) to support and facilitate rapid roll out of an artificial intelligence support tool.	Continued engagement with national teams to ensure readiness to support and facilitate rapid roll of tool as required.		Watching brief	Watching brief	Watching brief				MCN Clinical Lead MCN & Improvement Manager Projects & Planning Manager
Service Redesign	Best Preparation for Treatment	50	Prehabilitation	Actively work with WoS NHS Boards to establish and embed models of good practice to support improvement in outcomes for both patients and services, and with national colleagues to develop and test options for digital solutions to support prehab.	Engagement with WoS Boards continues to expedite recruitment to prehab advocate and active SACT practitioner roles, and to raise awareness of the programme. Lanarkshire post and Active SACT Practitioner post still to be appointed. A&A prehab event was rescheduled until 19th August 2024.		Prehab advocates appointed in GGC and Forth Valley Prehab education/awareness event held in Ayrshire & Arran Awareness sessions with MCNs regarding referral pathways to existing services	Prehab advocate appointed in Lanarkshire and network of advocates established across the region Active SACT practitioner appointed in GGC	Prehab education/awareness event held in Lanarkshire Prehab awareness/engagement event held with charity, industry and partner organisations	Prehab marketing materials to promote Getting Better Faster approach developed Programme for introducing across cancer types developed	Prehab introduced as component part of surgical pathways across specialties		Living With Cancer Clinical Lead Quality & Service Improvement Manager
Innovation			MDT Improvement - System Development & Roll Out	Continue to progress and implement a standardised information management system to support the MDT review and decision making process across all MDTs.	Head and neck module implemented. Some work to be completed to ensure full implementation re referrals to north MDT. HPB module nearing implementation phase. Urology - scoping work underway with clinical teams Lung - third party supplier identified to support development work Foundation module being finalised Reporting requirement being defined with users MDT Improvement Board meeting regularly		Complete head and neck module development Complete HPB development Commence Urology development - agree datasets Commence Lung development - allocate project manager - agree dataset Finalise foundation module Steering Group update/meeting	Commence HPB implementation Further develop reporting functionality	Commence Urology implementation Commence Lung implementation Complete HPB implementation Prepare and agree specification of system admin module Agree on next phase of development Steering Group update/meeting	Complete Urology implementation Complete Lung implementation	Undertake evaluation of Urology module		MDT Clinical Lead MDT Project Managers MCN & Improvement Managers

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Service Redesign			MDT Improvement - FIT	Complete the MDT-FIT peer review programme for all WoS Cancer MDTs.	NHS A&A - plan for completion identified and remaining MDTs actively participating in programme Plan agreed to progress GGC MDTs and support through programme has been successful, all MDTs engaged, only 4 remain to have observation meeting date identified Output to be written up Other MDTs across Scotland interested in participating in programme - meetings being scheduled to share learning. Potential to be linked in to national framework for cancer performance management.		Complete peer review of all Ayrshire & Arran MDTs Finalise and commence programme for GGC MDT reviews Regional MDT reviews initiated Develop plan for progression of all regional actions identified from reviews already undertaken	GGC process underway, action plans produced in line with project progression Regional MDT action plans produced and actions progressed	GGC process underway, action plans produced in line with project progression	All GGC MDT reviews completed and action plans produced End of programme report produced and learning shared			Quality & Service Improvement Manager Projects & Planning Manager MCN & Improvement Managers
Innovation			Robotic Assisted Surgery: Pathways and Outcomes	Support Regional Planning models of delivery of robotic assisted surgery	Principles for cancer RAS being refreshed taking account of additional systems available in the region Data items identified and being finalised Presentation on outcomes to August RCAG and Board CEOs Meetings with Boards and MDs re Urology Robotics Aug/Sept 24		Work with National Cancer Quality Group to finalise data items for inclusion in national datasets for robotic surgery. In conjunction with Regional Planning/Boards agree clinical pathways/service models for cancer RAS services for the region	Oversee and report outcome and quality performance indicators to Board MDs/CEOs and MCNs through established governance frameworks Review referral patterns to TORS service between regional MDTs, reporting on any variance in clinical practice that may exist Review activity data for prostate robotic services	Oversee and report outcome and quality performance indicators to Board MDs/CEOs and MCNs through established governance frameworks	Oversee and report outcome and quality performance indicators to Board MDs/CEOs and MCNs through established governance frameworks	Oversee and report outcome and quality performance indicators to Board MDs/CEOs and MCNs through established governance frameworks	Oversee and report outcome and quality performance indicators to Board MDs/CEOs and MCNs through established governance frameworks	Regional Cancer Clinical Lead Regional Manager (Cancer) Director of Regional Planning
Service Redesign			Rectal Cancer Surgical Service Redesign	Explore the possibility of further sub-specialisation and rationalisation of surgical services for rectal cancer to improve outcomes for patients.	Utilisation of prospective clinical data to help support rationalisation of specialist surgical provision for rectal cancer; evidence indicates improved outcomes are linked to increased patient volume and activity.				Scoping exercise, to identify patient numbers and determine resource and capacity requirements, complete and documented for MCN review and endorsement. Initiate discussion on standards required. Identification of sub-specialists initiated.	Updated local referral processes and MDT operational arrangements identified and introduced, ensuring patients, requiring specialist surgical intervention, are identified and managed appropriately. Agreement reached and standards or practice set.	Ensure that revised processes and operational procedures are clearly understood and now established within local MDT practice; utilise local activity data to confirm		MCN Clinical Lead MCN & Improvement Manager
Service Redesign			Oesophagogastric Cancer Surgical Service Redesign	Reduction in the number of centres delivering OG cancer resection surgery in the West of Scotland from three to two through merger of the services delivered from NHS Ayrshire & Arran and NHS Lanarkshire.	MDT reconfiguration underway - resection cases now being discussed at Lanarkshire MDT with input from A&A clinicians Contact will be made with both Boards during August to identify timeline further MDT reconfiguration Clinical service model being defined and scoped locally.		Reconfiguration requirements for Lanarkshire/A&A MDT agreed to enable discussion of surgical cases at Lanarkshire MDT to be progressed. Options paper setting out service requirements to enable reconfiguration of Lanarkshire/Ayrshire to a one site model prepared for consideration by both Boards and regional CEOs. Paper submitted to WoS Health and Social Care Delivery Programme Board	Support further reconfiguration of Lanarkshire/Ayrshire MDT to enable discussion of wider range of OG/HPB cases supported via upper GI MCN	Review progress with options appraisal in conjunction with NHS Ayrshire & Arran and NHS Lanarkshire	HPB cases referred to Regional MDT (Glasgow Royal Infirmary) for discussion as standard practice	Evaluation of change implemented		NHS Board Clinical Leads & Service Managers Projects & Planning Manager Regional Planning Manager
ality	Safe, Realistic	62	Regional Oncology	Identification of an efficient and resilient model to	Baseline information gathering exercise underway to		Analysis of WoS Service data	Baseline position, action taken	Outline proposal for future	Continued refinement of	Agreed regional service model		Regional Cancer Clinical Lead

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Service Redesign & Sustainability	and Effective Treatment	63	Services Review	address immediate, medium, and long term oncology service pressures to reach agreement on a plan for redesign and improvement of services across the WoS.	understand service provision across the Region, specifically outpatient services in the first instance. Further interrogation of the data undertaken, Boards liaising to complete the information. Current WoS position against Strategic Review ascertained, RCAG/WoS Chief Execs paper being prepared for review at Aug meetings.		complete and opportunities for innovation and redesign identified Current position against regionally agreed Strategic Review service model collated and reported to RCAG and WoS Chief Execs	and improvements initiated reported on Outline proposals for future service model in development	service model agreed Engagement with stakeholders underway	proposed future service model following engagement. Identification of workforce and resource requirements.	with workforce plan and high-level resource plan to support finalised		Regional Manager (Cancer) Director of Regional Planning
			Sentinel Lymph Node Biopsy (SLNB) in gynaecological cancers	Reestablishment of a standard approach to SNLB as part of operational service delivery in the management of vulval cancer	Engagement with MCN membership and service management to re-establish SLNB as a standard approach for nodal assessment in the surgical management of vulval cancer ongoing. Initial assessment and high level resource impact still required.		Agreed clinical criteria to identify target patient population; initial assessment of numbers and (high-level) resource impact	Clearly defined patient pathway with confirmed patient numbers and detailed impact and service capacity assessment	Final proposal, in format specified, detailing resource requirements, time scales, deliverables and expected outcomes for re-established regional service				MCN Clinical Lead MCN & Improvement Manager
				Scope requirements and produce a proposal for introduction of SLNB as an alternative to lymphadenectomy specialist surgical management of endometrial cancer	Agreement in principle within WoS MCN to develop this aspect of practice within specialist surgical team; update July 2024 - focussed workshop event scheduled (September) to consider clinical and operational requirements.		Engagement with MCN members and service management to identify of a standard approach to SNLB complete.	Clinical criteria to identify target patient population defined; initial assessment of numbers and (high-level) resource impact complete Clearly defined patient pathway with confirmed patient numbers and detailed impact and service capacity assessment	Production of an outline proposal for SLNB as an alternative to lymphadenectomy, in those patients where the MDT has agreed a need for nodal assessment	Final proposal developed, detailing resource requirements, time scales, deliverables and expected outcomes for re-established regional service			MCN Clinical Lead MCN & Improvement Manager
Realistic Medicine	Safe, Realistic and Effective Treatment	65 66	SACT - New Cancer Medicines	Deliver regional process via Prescribing Advisory Group, for acceptance and implementation of new Scottish Medicine Consortium/National Cancer Medicines Advisory Group guidance on new systemic anti-cancer therapy medicine indications	WoS Pharmacy Task and Finish Group established, ToR and work plan identified. Focus of this work is around reviewing current processes and any opportunities to test new ways of working which may ease SACT capacity pressures. Regional Service Impact Report developed and issued to all WoS Boards.		Develop and maintain comprehensive suite of Clinical Management Guidelines and Protocols for new cancer medicines introduced into practice Undertake capacity planning for new cancer medicines to support introduction into practice Review and refresh Standard Operating Procedures	Develop and maintain required Clinical Management Guidelines and Protocols for new cancer medicines introduced into practice Undertake capacity planning for new cancer medicines to support introduction into practice	Develop and maintain required Clinical Management Guidelines and Protocols for new cancer medicines introduced into practice Undertake capacity planning for new cancer medicines to support introduction into practice Produce and publish Forward Look	Develop and maintain required Clinical Management Guidelines and Protocols for new cancer medicines introduced into practice Undertake capacity planning for new cancer medicines to support introduction into practice	Develop and maintain required Clinical Management Guidelines and Protocols for new cancer medicines introduced into practice Undertake capacity planning for new cancer medicines to support introduction into practice	Develop and maintain required Clinical Management Guidelines and Protocols for new cancer medicines introduced into practice Undertake capacity planning for new cancer medicines to support introduction into practice	Regional Lead Cancer Pharmacist

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Quality Assurance			SACT - Governance Review	Continued participation in national assurance of SACT services, to evidence that services across the WoS are operating safely and in line with governance requirements	WoS SACT representatives actively participating in Healthcare Improvement Scotland working groups to refresh governance processes Further information awaited on the future of the programme		Annual SACT risk assessment undertaken by WoS sites Regional response to national SACT services report presented to RCAG and submitted to HIS	WoS site SACT action plans monitored and updated	WoS site SACT action plans monitored and updated	WoS site SACT action plans monitored and updated			Projects & Planning Manager Regional SACT Executive Group
Innovation	Person Centred Care for All	95	Risk Stratified Follow Up	Facilitate ongoing regional roll out of the digital platform for follow up of radically treated prostate cancer patients in NHS Lanarkshire and NHS Forth Valley	Continue to support the six HCSWs via Regional Peer Support Forum Oversight of progress via Regional Steering Group maintained Regional project support documentation updated and developed as required NHSLAN go live delayed due to SCI-Store update issues. NHSFV go live delayed due to scheduling challenges with end to end testing HIS led SPOC Scalability Evaluation meetings being scheduled with NHSAA and NHSGGC		NHSLAN go live Continue to engage with NHS NSS and regional boards on pathway developments Maintain oversight via Regional Steering group meeting forum Provide requested quarterly progress updates to Scottish Government Engage with HIS SPOC Scalability Evaluation	NHSFV go live Engage with SCAN and NCA colleagues and offer expertise and guidance for proposed national roll out	Evaluation of service and patient experience Consider options for wider roll out to other tumour groups if outcome of HIS Led scalability assessment is favourable and additional funding is allocated by Scottish Government				Living With Cancer Clinical Lead MCN Clinical Lead MCN & Improvement Manager
Operational Delivery	Safe, Realistic and Effective Treatment	67	Chemotherapy electronic prescribing and administration system	Oversee and progress development and upgrade of regional chemotherapy electronic prescribing and administration system to enable safe prescribing of systemic anti-cancer therapy	Existing contract extended for a 2 year period - April 26 Prior information notice released by NSS to market - 5 responses - to be reviewed end July Additional resource secured to support CEPAS regionally through national SACT funding 0.6wte pharmacist No decision taken as yet re moving forward with worksheets and labels module. Assessment being undertaken to inform CEPAS Exec decision. Work has not yet commenced nationally to defined detailed specification for new national system		Refresh model for regional/local systems admin WoS input to assessment of PIN responses Reassess SACT reporting requirements	Conclude assessment of options for progressing worksheets and labels within current system WoS requirements identified and fed into development of national specification of requirements for future system to support SACT prescribing and administration	Scope requirements of upgrade to next version Input to national specification requirements				CEPAS Team
Workforce	Sustainable and Skilled Workforce	77	Workforce - Oncology	Develop detailed understanding of oncology workforce across disciplines to inform regional and national workstreams, building on work previously undertaken	Baseline information collection underway regionally, retirement projections being included. Quarterly NMP monitoring continues, Q2 2024 issued 30/07/24 New and emerging roles information available via Regional Planning		Assess oncology pipelines against WoS baseline for medical staffing Quarterly monitoring and reporting of NMP activity across specialties Source information on new/emerging roles in place elsewhere in UK and wider	Assess and determine value of re running SACT capacity model for WoS Boards Quarterly monitoring and reporting of NMP activity across specialties	Quarterly monitoring and reporting of NMP activity across specialties	Quarterly monitoring and reporting of NMP activity across specialties	Quarterly monitoring and reporting of NMP activity across specialties	Quarterly monitoring and reporting of NMP activity across specialties	Regional Manager (Cancer) Regional Cancer Clinical Lead Director of Regional Planning Projects & Planning Manager

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Innovation	Cancer Information and Intelligence Led Services	126	ePROMS	Support implementation of prostate cancer ePROMS process for patients treated with radical radiotherapy or radical brachytherapy based on the system already implemented for radical prostatectomy patients and reported via prostate cancer QPI 8	Engagement with key stakeholders at BWoS CC regarding implementation for radiotherapy and brachytherapy patients now that these groups are live in the ePROMS system Access to REDCap database facilitated and training arranged as required Process is underway for REDCap implementation within NHSAA and NHSLAN for RALP undertaken out with the existing regional service. Impact of decentralisation of regional prostate service on QPI attainment being assessed and working with Boards to develop/agree on implementing failsafe protocols		Assess compliance via WoSCAN clinical audit data	Assess compliance via WoSCAN clinical audit data National comparison of QPI attainment	Consider any revisions to QPI at next formal review scheduled for 2025				Living With Cancer Clinical Lead MCN Clinical Lead MCN & Improvement Manager
Innovation	Person Centred Care for All	95	Single Point of Contact (SPoC)	Assess added value to patients, and service improvement delivered from the introduction of the SPoC function into the regional gynaecological cancer pathway Gain an understanding of existing SPoC/support worker roles in haemato-oncology to identify opportunities for further development in the service	Haemato-oncology information currently being collated, data awaited from NHSGGC. Intention to discuss at MCNAB on 21/08/24, further update to follow this meeting		Map of existing provision of SPoC-type roles in haemato-oncology .	Areas to support service development identified. Sub-group established to take forward improvement from shared learning.	Assess the role of gynaecological SPoC				MCN Clinical Leads MCN & Improvement Managers
Quality	Safe, Realistic and Effective Treatment	69	National Cancer Quality Programme QPI Formal Reviews: carried forward	Lymphoma and Brain/CNS cancer: Development of nationally agreed quality performance indicators and a national dataset / measurability document which will enable data collection and reporting to commence in order to assess quality outcomes for thyroid cancer patients across Scotland works and core principles to deliver initiatives.	Lymphoma - QPI document with HIS for publication - delayed due to changes in HIS website. Supporting documents delayed due to resource/process issues within PHS.		Lymphoma QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.					National Cancer Quality Programme Co-ordinator	
					Brain/CNS Cancer - QPI document with HIS for publication - delayed due to changes in HIS website. Supporting documents delayed due to resource/process issues within PHS.		Brain/CNS Cancer QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.				National Cancer Quality Programme Co-ordinator		
Quality	Safe, Realistic and Effective Treatment	69	National Cancer Quality Programme QPI Formal Reviews	Development of nationally agreed quality performance indicators and a national dataset / measurability document which will enable data collection and reporting to commence in order to assess quality outcomes for thyroid cancer patients across Scotland works and core principles to deliver initiatives. Ovarian Cancer; Head & Neck Cancer; Melanoma; Acute Leukaemia; Bladder Cancer; Cervical and Endometrial Cancers; Lung Cancer; Colorectal Cancer; and Thyroid Cancer	Ovarian Cancer - Engagement exercise complete and finalisation meeting scheduled to take place on 19th August 2024.		Ovarian Cancer - engagement of revised QPIs and finalisation meeting.	Ovarian Cancer QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.					National Cancer Quality Programme Co-ordinator
					Head & Neck Cancer - Final draft QPI document with the Formal Review Group for comment. To finalise changes to dataset/measurability document.		Head & Neck Cancer - finalisation of QPIs and supporting documents for publication.	Head & Neck Cancer QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.				National Cancer Quality Programme Co-ordinator	

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					Melanoma - revisions underway to prepare for engagement.		Melanoma - Initial meetings to take place and revisions progressed.	Melanoma - Engagement (if required) and finalisation meetings to take place.	Melanoma QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.				National Cancer Quality Programme Co-ordinator
					Acute Leukaemia - Meeting taken place in June 24 and revisions to QPIs underway.		Acute Leukaemia - Initial meetings to take place and revisions progressed.	Acute Leukaemia - Engagement (if required) and finalisation meetings to take place.	Acute Leukaemia QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.				National Cancer Quality Programme Co-ordinator
					Bladder Cancer - Formal Review meeting taken place (23/07/24). Actions being written up and QPI revisions to commence.		Bladder Cancer - Initial meetings to take place and revisions progressed. Review meeting scheduled for 23/07/24	Bladder Cancer - Engagement (if required) and finalisation meetings to take place.	Bladder Cancer QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.				National Cancer Quality Programme Co-ordinator
					Cervical and Endometrial Cancer - Templates have been received from SCAN/WoSCAN - awaiting NCA. Meeting date to be arranged.		Cervical and Endometrial Cancers - Submission templates to be completed.	Cervical and Endometrial Cancers - Initial meetings to take place and revisions progressed.	Cervical and Endometrial Cancers - Engagement (if required) and finalisation meetings to take place.	Cervical and Endometrial Cancers - QPI Reviews to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.			National Cancer Quality Programme Co-ordinator
					Lung Cancer -Submission templates been circulated to MCN Leads for completion.			Lung Cancer - Submission templates to be completed.	Lung Cancer - Initial meetings to take place and revisions progressed.	Lung Cancer - Engagement (if required) and finalisation meetings to take place.	Lung Cancer QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.		National Cancer Quality Programme Co-ordinator
					Colorectal Cancer - N/A not yet started			Colorectal Cancer - Submission templates to be completed.	Colorectal Cancer - Initial meetings to take place and revisions progressed.	Colorectal Cancer - Engagement (if required) and finalisation meetings to take place.	Colorectal Cancer - QPI Review to be completed - publication of QPIs on HIS website / updating and publication of supporting documents by PHS.		National Cancer Quality Programme Co-ordinator
					Thyroid Cancer - QPIs finalised and approved by the Development Group. Unable to progress with national group approval and implementation until data collection arrangements are confirmed by the Thyroid MCN/Scottish Cancer Network.		Thyroid Cancer - Finalise QPIs for approval and publication. Finalise draft dataset/measurability for testing and publication. Agree data capture model and plan for eCASE development.						National Cancer Quality Programme Co-ordinator

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Quality			HIS 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.	Update as HIS programme progresses.								National Cancer Quality Programme Co-ordinator Regional Manager (Cancer) Regional Cancer Clinical Lead Information Manager
Realistic Medicine	Mental health as part of basic care	108	Psychological Therapies Support Framework	Annual revalidation of quality statements by undertaking self assessment.	All relevant stakeholders issued with self assessment tool and 12 responses returned. Analysis of the responses commenced.		Data collection method reviewed and updated as required. All relevant stakeholders issued with self assessment tool.	Collated report of WoS response prepared.	Liaison with national programme to share WoS position complete.				Quality & Service Improvement Manager MCN & Improvement Manager
Workforce			Education	Programme of education to facilitate review of audit data, and to identify, share and promote current best practice and innovation, utilising the learning from events to drive improvement within the Regional Network.	Specific updates on improvements and areas for action will be given in line with the educational programme schedule.		Data requirements established, programme developed and post event actions noted for Neuroendocrine education event (May) Areas for improvement and innovation identified	Data requirements established, programme developed and post event actions noted for: Areas for improvement and innovation identified	Data requirements established, programme developed and post event actions noted for: UGI National Event (November) Areas for improvement and innovation identified	Continued programme of education and improvement; schedule to be identified			MCN Clinical Leads MCN & Improvement Managers
Quality			Accreditation of Neuroendocrine Tumour (NETs) Service	Support clinicians at the Beatson West of Scotland Cancer Centre to ensure their status as a European Neuroendocrine Tumour Society centre of excellence is revalidated.	Annual online submission of service information to ENETS complete. Meetings with various specialities to coordinate gathering of required documents and evidence underway. Complete, CMGs have been circulated to NET MDT distribution list for comment and subsequently submitted for ratification at August PASG meeting.		NET patient data and clinical trial participation validated Regional organisation structure for NETs documented Liaison with pharmacy to complete update of NET guidance	Collation and submission of additional evidence as required complete	On-site audit process complete				Quality & Service Improvement Manager MCN & Improvement Managers
Cancer Intelligence	Cancer Information and Intelligence Led Services		Electronic Cancer Audit System - eCASE	Work with National Services Scotland (NSS) to ensure a sustainable model of support is developed to underpin national clinical audit. Lead the operational management of eCASE, ensuring appropriate prioritisation of work and user consultation. Support NSS to complete the development of a cancer QPI datamart to streamline cancer data reporting.	<ul style="list-style-type: none">• Routine report and application developments prioritised and completed in a timely manner.• Bugs prioritised, investigated and resolved in line with routinely scheduled sprints.• Development of the cancer QPI datamart continues with slow progress from NSS in setting up a robust test environment to facilitate UAT.• BO reports complete and available for test for cervical/endometrial/colorectal cancers. Reports for lung/head and neck cancer nearing completion.• Plan in place to reconvene super user group for testing once NSS fully set up the test environment.		Delivery of routine developments in line with the schedule of QPI formal reviews Timely investigation and resolution of system bugs Support ongoing development of the cancer QPI datamart	Co-ordinate national UAT for cancer QPI datamart Develop BAU report maintenance and governance process for national QPI reporting via new datamart. Delivery of routine developments in line with the schedule of QPI formal reviews Timely investigation and resolution of system bugs	Input to NSS full options appraisal for redevelopment of the eCASE application Delivery of routine developments in line with the schedule of QPI formal reviews Timely investigation and resolution of system bugs	Delivery of routine developments in line with the schedule of QPI formal reviews	Timely investigation and resolution of system bugs	Information Manager	
Cancer Intelligence	Cancer Information and Intelligence Led Services		Data Analysis and Reporting	Deliver annual QPI audit reports for 15 cancer types in line with Regional Analysis Schedule, undertake clinical risk assessment for all cancers via regional Cancer Oversight Group, escalating issues where required and monitoring delivery of local actions.	<ul style="list-style-type: none">• Audit and Exception Reports produced in line with Regional schedule.• Meeting held with SCN to discuss exception reporting process for national networks. SCN are in the process of developing governance structures to ensure actions are progressed and exceptions scaled appropriately, and a further meeting with regional networks is scheduled for August.		Cancer specific audit and clinical exception reports published with actions to address areas of variance for - Bladder, testes, acute leukaemia, lymphoma, prostate, endometrial, cervical	Cancer specific audit and clinical exception reports published with actions to address areas of variance for - Upper GI, ovarian. Liaison with Scottish Cancer network to produce clinical exception report for mesothelioma, HPB and brain/CNS cancer	Cancer specific audit and clinical exception reports published with actions to address areas of variance for - Lung, breast, head and neck, colorectal. Liaison with Scottish Cancer network to produce clinical exception report for sarcoma	Cancer specific audit and clinical exception reports published with actions to address areas of variance for - renal, melanoma, acute leukaemia	Cancer specific audit and clinical exception reports published with actions to address areas of variance for - bladder, testes, lymphoma	Information Manager	

Delivery Plan

Milestones are in line with RCAG meetings and reporting

Cancer Action Plan													
Category	Chapter	Action No	Title	Description	Update Against Current Milestone - Aug 24	RAG	Milestone 1 April/May/June 24	Milestone 2 July/Aug/Sept 24	Milestone 3 Oct/Nov/Dec 24	Milestone 4 Jan/Feb/Mar 25	Milestone 5 April/May/June 25	Milestone 6 Jul/Aug/Sept	Lead(s)
Cancer Intelligence	Cancer Information and Intelligence Led Services		Optimisation of Audit Activity Across the Region	Work with MCNs to explore areas of variance highlighted through QPIs in more detail. Conduct comparison of outcomes across Scotland where appropriate and progress analysis actions highlighted via discussion at National Education Events. Lead on actions from the National QPI Governance Group to facilitate the release of data for external national audit requests. Support PHS to develop QPI data dashboards further to support national comparison of outcomes and service improvement activity. Explore the use of Power BI to streamline regional reporting processes and improve access to data	<ul style="list-style-type: none">• National comparative analyses on treatment rates across Scotland, and comparison with UK National Lung audit carried out for national Lung Cancer Education Event in May. Discussion ongoing wrt routine submission of Scottish data for UK wide benchmarking.• Actions from National QPI governance group progressed as required.• Scotland wide power BI session held and further actions agreed to explore how regions can improve access to data and streamline reporting processes.• Oncology data capture complete for head and neck cancer adjuvant treatment audit. Analyses is underway and internal report due to be shared with MCN August 24.• Draft regional colorectal cancer survival analyses complete and shared with MCN Clinical Lead and Manager for initial review, ahead of sharing with MCN Advisory Board in August. Further actions agreed in relation to linking with CEPAS data. Appropriate approvals will be sought for data linkage.• Discussion ongoing with UK national Bowel Cancer Audit wrt potential inclusion of Scottish data.• HPB PIP project evaluation analyses in underway after a short delay with NSS project team data updates.		Ongoing ad hoc analysis undertaken as required to support the work of the MCNs and Formal Review process Monthly reporting of surgical delays following the COVID-19 pandemic Support and provision of data for external analysis Progress actions from head and neck cancer national meeting to explore variance in time to adjuvant treatment following H&N surgery Co-ordinate Power BI session to share learning between Regional Networks across Scotland, Board Audit Leads and NSS Undertake final assessment of the impact of the first year of the HPB PIP project on patient pathways for publication	Ongoing ad hoc analysis undertaken as required to support the work of the MCNs and Formal Review process Monthly reporting of surgical delays following the COVID-19 pandemic Support and provision of data for external analysis Undertake colorectal cancer survival analysis at a regional level Prepare for colorectal cancer formal review by supporting the assessment of the feasibility of including QPIs for anal cancer and the harmonisation of data definitions and outcome measures with the National Bowel Cancer Audit					Information Manager
Cancer Intelligence	Cancer Information and Intelligence Led Services	128	National Survival Analysis	Submit regional data in line with PHS schedule of analysis, co-ordinate clinical review of national survival output, provision of supporting clinical commentary for PHS publication and determine action required. Develop regional survival analysis specifications to aid development or refinement of national specifications.	<ul style="list-style-type: none">• Phase 2 head and neck cancer survival analyses received from PHS 23/7/24. WoS will coordinate the supporting clinical commentary in conjunction with SCAN/NCA and will submit nationally agreed commentary with documented actions to PHS by 3/9/24.• Awaiting phase 2 analyses from PHS for UGI.• Work ongoing to refine lung cancer survival specification and national data request submitted to permit WoSCAN to carry out preliminary lung cancer survival analyses to inform PHS specification.		Progress phase 2 analysis for Head and neck/Upper GI cancers in conjunction with PHS.	Refine Lung and HPB survival analysis specifications to determine next steps. Develop a regional specification for colorectal cancer survival analysis to aid the progression of national survival work.					Information Manager
Cancer Intelligence	Cancer Information and Intelligence Led Services		Input to UK Wide Audits	Explore the feasibility of submitting lung and colorectal cancer data to England and Wales audits to facilitate UK wide benchmarking.	<ul style="list-style-type: none">• Discussions ongoing with NBOCA, with PHS exploring governance requirements if Scottish data were to be submitted for inclusion in the audit.• Contact made with NLCA as contract for national lung cancer audit is due to be renegotiated in 2025.		Revisit discussions with NLCA ahead of commissioning of the next E&W Lung Cancer Audit Continue to explore E&W measures for National Bowel Cancer Audit (NBOCA), to establish if datasets and QPI measurability in Scotland are directly comparable with those utilised for NBOCA	Explore the feasibility of sharing national colorectal QPI data with NBOCA to enable UK wide analysis of adjusted patient outcomes					Information Manager
Cancer Intelligence	Cancer Information and Intelligence Led Services	128		Participation in national 30 day mortality quality assurance exercise.	Initial download received from PHS and cross checked, almost 100% alignment with regional data, data being validated by clinicians.		Clinician review of initial data and feedback returned.	Validation of 2023 data complete for WoS ahead of official publication by PHS.	Regional progression of any actions as required.		Clinician review of initial data and feedback returned.	Validation of 2024 data complete for WoS ahead of official publication by PHS.	Regional Manager (Cancer) Regional Information Manager (SACT) Regional SACT Executive Group