

**HEALTH INSPECTORATE WALES REPORT OF THE REVIEW OF CANCER NETWORKS IN WALES
SUMMARY OF RECOMMENDATIONS AND ACTION REQUIRED BY THE 3 CANCER NETWORKS IN WALES**

STRUCTURE AND ORGANISATION:							
	Recommendations	Lead Accountability	Assessment of Risk	Action required	Milestones	Relationship to Organisational Plans	Completion Date
1.	The Cancer Services Co-ordinating Group should clarify its relationship with the Regional Cancer Network.	Cancer Services Co-ordinating Group with Network Directors	Medium	Network Development Event to be confirmed with: <ul style="list-style-type: none"> ▪ Network Core Teams; ▪ Policy Adviser to Welsh Assembly Government; ▪ All Wales Cancer Lead Clinician. 	Discussed at Cancer Services Co-ordinating Group Core group meeting May 2006 and there will be reaffirmation of the role of the CSCG which will follow the commissioning agreements	Accountability agreements	December 2006
2.	The Welsh Assembly Government should ensure that the establishment agreements detailing accountability for the Regional Cancer Networks are written to fully comply with the guidance in Annex 1 of the Welsh Health Circular (2005) 051	Welsh Assembly Government – Regional Directors	High	Revised Statement of Accountabilities & responsibilities submitted to Welsh Assembly Government in 2005 for all three Cancer Networks	Board members (who represent Commissioners and Providers) agreed Network Statement of Accountabilities & Responsibilities	Accountability agreements	December 2005
3.	The Regional Cancer Networks should agree a process to ensure that members and stakeholders comply with actions and changes agreed at Network meetings.	Network Chair	High	Ongoing programme for Network Board Development	First stage complete in North, South East and South West Wales Cancer Networks	Accountability agreements	December 2007

COMMISSIONING OF CANCER SERVICES:							
	Recommendations	Lead Accountability	Assessment of Risk	Action required	Milestones	Relationship to Organisational Plans	Completion Date
1.	The process for commissioning cancer services should be reviewed by Local Health Boards and Health Commission Wales and the role of the Network Officers in the commissioning process should be clarified.	Health Commission Wales & Local Health Board	High	Welsh Assembly Government to clarify Health Commission Wales lead areas of responsibility.	Draft regional commissioning guidance endorsed	Network Action Site Specific Cancers Plans	March 2007
2.	Following this review, the Welsh Assembly Government should take the lead in ensuring that an appropriate commissioning framework is developed and implemented ensuring the most effective use of resources, this framework should involve the Regional Cancer Network	Welsh Assembly Government – Head of Health and Social Care Strategy	High	Role of Networks clarified in context of 'Transforming Commissioning' guidance	Network involvement in formal commissioning process	Network Action Site Specific Cancers Plans	March 2007
3.	Health Commission Wales and Local Health Boards in conjunction with Cancer Networks, should clarify what cancer services each are responsible for commissioning	Network Chair Chair Commissioning Advisory Group Lead Clinician	High	As per 2 above	As per 2 above	Network Action Site Specific Cancers Plans	December 2007
4.	In the interests of full representation of all commissioning organisations Health Commission Wales should attend Regional Cancer Network Board/Commissioning Groups	Chief Executive Health Commission Wales	High	Monitor attendance at meetings	Dependent on clarity on 2 above	Network Action Site Specific Cancers Plans	December 2006
5.	Regional Cancer Networks in collaboration with all	Network Directors Lead Clinicians	High	Undertake annual audit of National Cancer Standards	Monitoring tools published and audit	Network Action Site Specific Cancers Plans	December 2006

commissioning organisations should formally review the quality of cancer services			and Targets	period confirmed		
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TRUST STRUCTURE:							
	Recommendations	Lead Accountability	Assessment of Risk	Action required	Milestones	Relationship to Organisational Plans	Completion Date
1.	All Trusts should review their Cancer Management Teams to ensure they are fully compliant with the 2005 Cancer Standards	NHS Trust Chief Executives	High	Trusts to report following audit of compliance with cancer standards	Monitoring tools published and audit period confirmed	Network Action Site Specific Cancers Plans	December 2006
2.	All Trust Cancer Lead Clinicians should have job plans that clearly indicate their dedicated sessional time to carry out the Lead Clinician role and this should be supported by adequate dedicated administrative and management support	NHS Trust Chief Executives	High	Trusts to report following audit of compliance with cancer standards	Monitoring tools published and audit period confirmed	Network Action Site Specific Cancers Plans	December 2006
3.	The Regional Cancer Networks should review the input of Trust Lead Clinicians within the Network to ensure appropriate participation in Network meetings	Network Directors Lead Clinicians	High	Monitor attendance at meetings/events	Report to Network Board (including Commissioners and Providers)	Network Action Site Specific Cancers Plans	December 2006
4.	Trusts should ensure that action plans to address non-compliance with the Cancer Standards are drawn up in collaboration with the Regional Cancer Networks	NHS Trust Chief Executives	High	Action plans submitted to Network Commissioning Advisory Group	Report from Commissioning Advisory Group	Network Action Site Specific Cancers Plans	December 2006

PATIENT EXPERIENCE AND INVOLVEMENT:							
	Recommendations	Lead Accountability	Assessment of Risk	Action required	Milestones	Relationship to Organisational Plans	Completion Date
1.	<ul style="list-style-type: none"> ▪ Patient cancer information complying with the best practice standards should be produced on an All Wales basis co-ordinated by the Regional Cancer Network. ▪ Adequate resources should be identified to address this. 	<ul style="list-style-type: none"> ▪ Network Directors and User Carer Project Manager ▪ Welsh Assembly Government 	Medium	<ul style="list-style-type: none"> ▪ Scope of project agreed ▪ Welsh Assembly Government confirmed availability of funding to launch project 	<ul style="list-style-type: none"> ▪ Project Proposal Completed ▪ Welsh Assembly Government funding confirmed 	Designed for Life Regional reviews of acute services National Cancer Standards and Targets	September 2006
2.	The Macmillan project should be fully supported to allow patient/users/carers to become fully involved in the Regional Cancer Networks.	Welsh Assembly Government	Medium	Welsh Assembly Government to confirm availability of recurring funding to support implementation of user carer involvement strategy	Welsh Assembly Government funding confirmed	Designed for Life National Cancer Standards and Targets	September 2006
3.	Formal processes should be in place for the Regional Cancer Networks to obtain the views of patients/users/carers.	Network Directors	Medium	Welsh Assembly Government to confirm availability of recurring funding to support implementation of user carer involvement strategy	Welsh Assembly Government funding confirmed	Designed for Life Regional reviews of acute services National Cancer Standards and Targets	December 2006

CLINICAL EFFECTIVENESS AND MONITORING:							
	Recommendations	Lead Accountability	Assessment of Risk	Action required	Milestones	Relationship to Organisational Plans	Completion Date
1.	The Cancer Networks and their membership should agree the process for the development, dissemination and monitoring of clinical guidelines and at what level these should be developed	Lead Clinicians	High	Establish process with Network Advisory Groups	Report to Board	National Cancer Standards and Targets Site Specific Cancers Action Plans	December 2007
2.	The Regional Cancer Networks should define and agree their role in the monitoring of compliance with the Cancer Standards	Network Directors	High	Process clarified	Process for monitoring confirmed and audit tools distributed	National Cancer Standards and Targets Site Specific Cancers Action Plans	May 2006
3.	The Cancer Services Co-ordinating Group should ensure that there is feedback to all Trusts and Local Health Boards on compliance with the Cancer Standards in timely fashion	Network Directors	High	Timescale for audit confirmed	Monitoring tools distributed	National Cancer Standards and Targets Site Specific Cancers Action Plans	May 2006
4.	The Regional Cancer Networks should ensure the routine sharing of best practice between the Networks.	Network Directors Lead Clinicians	High	Confirm process	Network and all-Wales learning events dates confirmed	National Cancer Standards and Targets Site Specific Cancers Action Plans	March 2007

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