Recovery and Redesign: An Action Plan for Cancer Services (2020-23)

Scotland's National Cancer Plan: Final Report



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Background

Following publication of the progress report <u>National cancer plan: progress report - August 2022</u>, this final report has been prepared following the end of the 2020 national cancer plan <u>Recovery and redesign: cancer services - action plan</u>, in March 2023.

This report provides a brief summary of progress against the outstanding actions as from August 2022.

Summary of actions

Actions and progress:

- Completed at progress report (to August 2022): 24
- Completed since progress report (August 2022 to March 2023): 23
- Met in part: 9
- Facing delay: 12

Actions completed since progress report

Work to address some of these actions will continue under the new 10-year cancer strategy and accompanying action plan.

Action 1: Rollout the Transforming Cancer Care (TCC) programme across Scotland

Action 2: Adapt the TCC programme to services changes

All bar one of the Health and Social Care Partnerships in Scotland to date have agreed to the 'Improving the Cancer Journey' (ICJ) model. It is anticipated that the remaining Health and Social Care Partnership will be confirmed in 2023. Scotland is now the first country in the UK where all cancer patients will have access to a key support worker to receive dedicated financial, practical and emotional support.

In terms of Holistic Needs Assessments (HNA), year on year growth can be seen across Scotland (Fig. 1). HNAs are conducted by the key support worker around a person's physical, emotional, family, practical, lifestyle and spiritual needs.

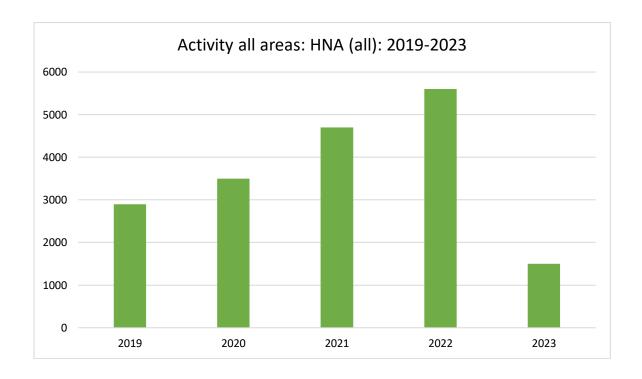


Figure 1: Total Holistic Needs Assessments (initial and subsequent assessments) completed in Scotland since 2019 to end of March 2023. Source: Macmillan Cancer Support.

Annual funding to continue the Scottish Government partnership with Macmillan Cancer Support has been agreed. This should ensure that a range of outcomes will be delivered across health and social care (HSC) in Scotland, including:

- better integration and co-ordination of services across HSC partners to meet the needs of people affected by cancer, aligned with national digital developments and placing the patient at the centre of communications
- efficient & effective cancer follow up pathways, ensuring patients are seen in the right place, at the right time and by the right person to meet their needs
- implementation of a process for the identification of holistic needs and planned care to respond to identified needs
- robust systems and processes to assist local planning and ensure continuous improvement in service delivery in future years.

Action 3: Work towards a single point of contact for cancer patients

All of the 12 pilot projects are now live. Progress to December 2022 was sought from all pilots which provided brief information on early learning and impact. Early indications are that the pilots are impacting positively on patient experience and clinical workload.

For example, in the NHS Western Isles project, two Healthcare Support Workers have been introduced into the Macmillan Cancer Nursing Team. The Macmillan Nursing Service is now available 7 days per week, ensuring improved local access to oncology/specialist palliative and end of life care support across the islands and across all care settings, including hospital. NHS Fife has created a Single Point of Contact Hub (SPoCH) for patients referred with urgent suspicion or diagnosed with cancer. The Hub enables patients to contact the service by telephone and/or email. So far, almost 90% of calls have been resolved by the Hub and do not need to be signposted to other services. NHS Forth Valley has introduced two oncology-based support workers to provide support throughout the cancer pathways to patients from seven tumour groups. Informal feedback has been positive from both staff, who have more time to concentrate on clinical work due to reduced admin and non-specialist calls, and patients, who have found the service helpful, with quick resolution of enquiries and welcoming the consistency of speaking to the same person each time they call.

Funding will be made available to continue the pilots under the new cancer strategy.

Action 7: Update information on cancer services with the Scottish Cancer Coalition

The Scottish Government continues to collaborate with the <u>Scottish Cancer</u> <u>Coalition</u>. The Coalition have been invited to sit on the recently established Scottish Cancer Strategic Board, with one of the Board's key functions being oversight of the new cancer strategy and action plan delivery. This will ensure that the third sector will continue to provide live information sharing and input into national conversations around cancer services.

Action 9: Deliver the Screening Inequalities Fund

The <u>National Screening Oversight</u> (NSO), with the support of Scottish Government, has developed the <u>Equity in Screening Strategy</u> which, combined with an action plan, was published on 27th July 2023. The vision of the strategy is for access for all eligible individuals, across the full screening pathway.

The Strategy launched alongside the Equity in Screening Network which will support the strategy by capturing local and third sector research activity and allow individuals that work across screening to share evidence, best practice, and learning around screening inequalities.

This complements the ongoing work to address inequalities through the Screening Inequalities Fund. Annually, since 2018, £1 million has been provided, which is split into £650,000, allocated locally between each of the NHS Boards, and £350,000, which is used for national projects.

Several national projects are already being supported by the Inequalities Fund. This includes changes to national IT systems to improve engagement with participants (e.g., better use of text messaging). Research and learning from past projects have shown some ways to increase access to screening and uptake, including appointment reminders and targeted follow-up with non-responders.

Action 11: Develop guidance for surveillance of at risk patients

The Scottish Government continues to work with Health Boards and relevant stakeholders to identify if national guidance is needed on the delivery of services for high risk cancer surveillance and follow-up screening checks. To date there have been no areas of concern agreed so no national guidance has been developed. New Clinical Management Pathways developed by the Scottish Cancer Network include guidance on appropriate follow up.

Action 21: Increased oversight of cancer waiting times (CWT) to improve performance of both standards

Increased scrutiny continues through weekly cancer performance calls with all mainland Health Boards (monthly for island Boards) to identify challenges, explore solutions and ensure full adoption of the Framework for Effective Cancer Management. The most recent CWT report was published by Public Health Scotland in June 2023: Cancer waiting times - 1 January to 31 March 2023.

Action 22: Review new pathways to incorporate in the Framework for Effective Cancer Management

Work continues to embed 'Once for Scotland' pathways in the Framework for Effective Cancer Management. A National Effective Breach Analysis and Escalation Standard Operating Procedure (SOP) was officially launched on 3rd February 2023. This SOP will ensure robust processes are in place to mitigate breaches.

National referral regrading guidance is also under development; this guidance will help ensure that the right patients are put on the right pathway at the right time.

Action 24: Test and evaluate a programme of prehabilitation

The Maggie's prehabilitation pilot <u>Prehabilitation for cancer patients</u> saw over 1522 people affected by cancer access this service by the end of March 2023. A final report on the projects was published in May 2023: <u>Maggies Prehab pilot report</u>.

Further funding has been made available to March 2024 for the extension and embedding of this prehabilitation programme. This funding should ensure that more people affected by cancer each year across Scotland will receive prehabilitation sessions, while demonstrating the value and effectiveness of prehabilitation for people with cancer and their families/carers, in terms of both immediate and longer-term impact. It will also build capacity to support individual needs throughout the whole patient pathway from prehabilitation to rehabilitation and will establish a sustainable programme that is well understood by clinicians and patients.

Action 25: Develop digital resource to raise awareness of prehabilitation

Work is ongoing to track the impact of the <u>Prehabilitation for Scotland</u> website launched in Summer 2022. Future work will focus on increasing usage through embedding the appropriate information and resources within pathways of care.

Action 26: Convene a nutritional cancer care advisory group

The advisory group was established and led on development of the framework for nutritional care. The <u>Nutrition Framework for People Affected by Cancer</u> was published and made available online in November 2022. Implementation of this framework will be carried forward into the new cancer strategy and action plan.

Action 27: Identify 'best learnings' from the West of Scotland's Psychological Therapies and Support Framework

The national <u>Psychological therapies and support framework for people affected by cancer</u> was published in April 2022. Implementation of this framework will be carried forward into the new cancer strategy and action plan. Investment in clinical leads and project co-ordinator will ensure that further work is fully embedded, supports benchmarking, and establishes capacity and demand.

Action 36: Support awareness of weight management services

This action will continue to progress in tandem with Prehabilitation / Pre-treatment actions, specifically Action 26.

The importance of body weight and nutrition information is highlighted in the Nutrition Framework for People Affected by Cancer and referral pathway embedded within.

Action 39: Support expansion of RT peer review

This action has been incorporated into the <u>National Radiotherapy Plan for Scotland</u> published in March 2022.

Action 41: Continue and expand the delivery of oral SACT

This action is progressing via the work of National Cancer Medicines Advisory Group (NCMAG) Programme (see action 45). Twenty treatments were approved under the COVID-19 NCMAG framework and 4 have now been approved on the new business-as-usual NCMAG framework.

A public facing webpage has been created which details the remit of NCMAG and hosts published and upcoming advice. NCMAG advice documents (healthcareimprovementscotland.org)

Action 44: Review and update CEL 30

CEL 30 (2012) (Revised 2023) - Guidance for the safe delivery of systemic anticancer therapy - has been completed. It has come into force on 5th June 2023 and is published on Scotland's Health on the Web (SHOW).

Action 49: Enhance the Clinical Nurse Specialist (CNS) role

Following publication of the Review of Clinical Nurse Specialist and Nurse Practitioner roles within Scotland report, work continues to identify the role and reallocation of tasks for CNSs working in the cancer specialty. Actions 1, Transforming Cancer Care, and 3, Single Point of Contact, are part of various workstreams supporting delivery of this action.

Action 56: Continue support of NHS Scotland Cancer Managers Forum

The Cancer Managers Forum continues to meet once every quarter to ensure key learnings and best practice are shared. The Forum has recently announced a new Chair, NHS Grampian's Cancer Manager.

Action 58: Promote the use of the Scottish Health Technologies Group (SHTG)

We will continue to promote the <u>Scottish Health Technologies Group</u> where relevant.

Action 59: Introduce and deliver innovative solutions, like Near Me

A number of innovations were delivered through this action plan. Examples include the <u>Scottish Capsule Programme</u> (SCOTCAP) enabling upscaling of Colon Capsule Endoscopy (CCE), and increased use of <u>Near Me</u>, a video consulting service; Non-Medical Prescribing (NMP) and <u>Connect Me</u>, offering various services for patients to communicate with healthcare professionals.

Action 63: Map data and develop technical solutions for treatment summaries

A minimum viable product - Cancer Treatment Summaries (TSUM) Application - was completed and piloted in gynaecological services in the West of Scotland. The work will continue to be developed and scaled up over the next cancer strategy.

Action 64: Assess the potential of Patient Reported Outcome Measures (PROMs)

Scottish Cancer PROMs Advisory Group and Forum continue to meet on a six-monthly basis. <u>Key learning and recommendations</u> from the second meeting of the Forum were published in November 2022. Core principles for the collection of cancer PROMs will be developed under the new cancer action plan.

Action 67: Consider how the Cancer Quality Performance Indicators (QPIs) can best drive forward recovery

The National Cancer Quality Programme continues, with QPIs under regular review to ensure ongoing improvement and better outcomes for patients. The National Cancer Quality Steering Group will transition to a National Cancer Quality and Improvement Board during 2023-24. This transition will support a refreshed approach to measuring and improving quality in cancer services and encompasses a significant role for Healthcare Improvement Scotland (HIS).

Since the 2022 progress report, HIS has <u>updated the following QPIs</u> following formal review:

- Breast cancer
- HepatoPancreatoBiliary Cancer
- Mesothelioma
- Oesophago-Gastric Cancer
- Prostate Cancer
- Sarcoma
- Testicular cancer

Actions met in part

Work to address these actions will continue under the new 10-year cancer strategy and accompanying action plan.

Action 10: Develop a programme of work and pilot approaches to cervical self-sampling

We committed to develop a programme of work and pilot approaches to vaginal self-sampling.

The Short Life Working Group continues to work with NHS National Services Division (NSD) colleagues to lay the groundwork for introducing cervical self-sampling, in preparation for a recommendation from the UK National Screening Committee (NSC).

Action 35: Identify opportunities to improve recovery after treatment

We committed to monitor and explore new initiatives and service changes to improve recovery after surgery.

The Centre for Sustainable Delivery continues to have over-arching responsibility for this action. Work continues to set up similar programmes within Ear Nose and Throat (ENT), Urology and Gynaecology. This is linked to and will benefit from work to progress the Prehabilitation Actions (24-27).

Action 42: Develop a national approach to non-medical SACT prescribing

We committed to develop a national approach to support the non-medical prescribing of SACT, to make best use of the existing workforce and help patients receive safe and timely treatment.

There is broad agreement for a national framework and a draft of the framework is nearing completion. Two models for non-medical prescribing have become apparent. Guidance has been developed and is near finalisation to address the model of a prescriber working autonomously on one or two cancer types only. This will continue to be discussed at the SACT Programme Board.

Action 46: Support nationally acute oncology services to cope with potential increased demand

We committed to support nationally acute oncology services, where required, to meet increased demand.

The <u>Principles of an Acute Oncology Service (AOS) in NHS Scotland</u> were published in November 2022. A commitment in the Health and Social Care Workforce Strategy

outlined an increase in funding for SACT and Acute Oncology Services. This money is being rolled out on a phased approach and will reach £10 million by 2026/27.

Action 47: Optimise the provision of diagnosis, treatment, and prevention through precision medicine

We committed to look at the opportunities presented by precision medicine to optimise cancer services, and ways to implement precision medicine to enhance person-centred service delivery.

Within the Scottish Strategic Network for Genomic Medicine (SSNGM) we will be working closely with partners including the Cancer Research UK Scotland Centre, the Experimental Cancer Medicine Centres, the Scottish Cancer Network, the Scottish Pathology Network and the regional cancer networks to support precision medicine, including embedding testing within clinical pathways. Critical within this area is also engagement with pharmacy colleagues around the use and optimisation of different medicines and the interpretation of genomic information within these settings.

Action 48: Improve alignment of access to molecular pathology testing with new treatments

We committed to work to improve the alignment of access to molecular pathology testing with new treatments, to offer the opportunity to personalise medicines for individual patients and provide long-term remission.

The Scottish Government wants to ensure that genomic medicine in Scotland supports diagnosis and access to the right treatment and management, at the right time for the right person, with a national genomic test directory that is harmonised with clinical management pathways.

As service commissioners, NHS National Services Division (NSD) currently maintain two genomic test directories: the <u>Scottish Cancer Test Directory</u> and the <u>Scottish Rare and Inherited Disease Test Directory</u>. Through our upcoming genomic medicine strategy, we will ensure that the Scottish test directories are comprehensive, taking account of developments in genomic medicine and staying responsive to clinical need. To support our longer term service development, these directories will be aligned as far as possible with both the other nations of the UK and relevant international standards.

We recognise that an improved streamlined process for the implementation of new genetic tests linked to a Scottish Medicines Consortium (SMC) approved medicine is required. The SMC currently provides early information to NSD on cancer medicines in clinical development that are expected to require a companion diagnostic through regular horizon scanning reports. To support financial and service planning, the SMC also provides Health Boards with information, on a confidential basis, on medicines that may require a companion diagnostic through regular Forward Look reports, which include emerging new medicines, including Advanced Therapy Medicinal Products (ATMPs).

A key function of the Scottish Strategic Network for Genomics Medicine (SSNGM) is to horizon scan for new medicines to prevent delays for patients getting access to advanced therapies. To support this, the SSNGM has established Scottish Genomics Testing Assessment Groups (SGTAG) for cancer and rare disease. The SGTAG will work with the SMC and others to approve the availability of companion diagnostic tests in the genetic laboratories.

In addition, the Chief Pharmaceutical Officer is establishing a Horizon Scanning Oversight Board (HSAB) to identify and analyse new medicines currently in licensing and in the SMC's appraisal pathway/pipeline that are due to be considered by the SMC for routine access in the next 18-24 months. The HSAB will use the SMC's horizon scanning report, Forward Look, and its Advanced Therapy Medicinal Product report to consider high profile medicines/indications which potentially have a disruptive impact, to support advance planning for their managed introduction in Scotland.

Action 60: Standardise patient consent for Systemic Anti-Cancer Therapies (SACT) across Scotland

We committed to ensure that a consistent approach to patient consent, including electronic consent, for SACT is used across Scotland

Good progress has been made, with the use of standardised paper forms well established. An outline business case on the implementation of an electronic consent solution for Systemic Anti-Cancer Therapy (SACT) on a 'Once for Scotland' basis was finalised and presented to the SACT Programme Board in March 2023. The decision has been made not to continue with the project in the short-term due to the significant financial cost, the capacity to take forward at a time of significant pressure on SACT services throughout Scotland, and the need to align with broader digital health innovations.

Action 61: ChemoCare upgrade support

We committed to upgrade all five instances of ChemoCare (the electronic prescribing system) to Version 6 by the Chemotherapy Electronic Prescribing and Administration Systems (CEPAS) User Group to achieve a uniform approach across the country.

The upgrade to version 6 continues to progress well in the South East Cancer Network (SCAN) and West of Scotland Cancer Area Network (WoSCAN). Tayside cancer centre, one of the three North Cancer Alliance (NCA) cancer centres, has also upgraded to version 6. NCA continues to progress towards single implementation across other cancer centres.

Action 62: Integrate SACT and radiotherapy data into Scottish Cancer Registry and Intelligence Service (SCRIS)

We committed to continue to develop and prioritise the integration of Systemic Anti-Cancer Treatment (SACT) and radiotherapy (RT) data into the Scottish Cancer Registry Intelligence Service.

There is now a direct SACT data feed into the cancer registry. Weekly, monthly and annual activity reports are generated from the <u>SACT data platform</u> held by Public Health Scotland (PHS).

There are still some data issues in integrating RT data into SCRIS but PHS is working to resolve this. PHS continue to collect, quality assure and report on RT datasets to enable meaningful benchmarking of RT services in Scotland with rUK services.

Actions facing delay

Action 4: Deliver the next iteration of the Scottish Cancer Patient Experience Survey (SCPES)

We committed to develop and deliver, with Macmillan Cancer Support, the third Scottish Cancer Patient Experience Survey, benefitting from benchmarking against previous surveys to further understand COVID-19 impacts on cancer patients.

We are continuing to progress this action however approvals and associated information requests have delayed the start of fieldwork. We anticipate approvals will be in place by the end of 2023 with fieldwork commencing early in 2024. Reporting is expected in autumn 2024.

However, the Scottish Government continues to utilise <u>Care Opinion</u> as a source of experience, regularly reading about cancer care in Scotland and using these stories as a learning opportunity. Monthly summary reports were produced and shared with the National Cancer Recovery Group members to inform discussions.

Action 14: Every Health Board in Scotland will have a GP direct access to CT pathway

We committed to continue to work with, and encourage, Health Boards to increase GP direct access to CT scans for people with symptoms potentially indicative of cancer, helping more people be tested more quickly.

This continues to be area of focus for the National Diagnostic Lead for Radiology. To assist primary care clinicians, guidance on Direct Access to CT for patients with non-specific symptoms suspicious of cancer was published in March 2023: <u>SCIN Direct</u> Access to Imaging – Scottish Clinical Imaging Network

Action 15: Evaluate the efficiency of Cytosponge and Colon Capsule Endoscopy (CCE)

We committed to introduce Colon Capsule Endoscopy and Cytosponge™ across Scotland and evaluate their efficacy and impact on patient outcomes.

Following the recommendation to adopt these procedures, work to progress adoption continues in the remaining health boards where they are not yet in use.

Action 17: Completion of roll out of gallium scanners

We committed to invest an initial £2 million in Gallium services to detect advanced prostate cancer across four Health Boards.

Glasgow & Aberdeen sites were aiming towards use of gallium scanners for neuroendocrine tumours from June 2023. Other Health Boards already have them in service. Patients in the two outstanding sites are currently referred to another health board or treated with a different radiopharmaceutical at present. However, all sites in Scotland have PSMA imaging available for prostate cancer.

Action 19: Audit of Scottish Referral Guidelines for Suspected Cancer

We committed to undertake an audit of the adoption of the <u>Scottish Referral</u> <u>Guidelines for Suspected Cancer</u> in Spring 2021.

The University of Aberdeen was funded to undertake an analysis of National Cancer Diagnosis Audit data to allow a comparison of primary care before and after the refresh of referral guidelines. Challenges in accessing and transferring data has delayed delivery.

Action 23: Form the urology optimal pathway

We committed to explore ways to reduce variation in urology pathways and ensure equitable access from the point of suspicion of cancer to post-treatment follow-up.

The £70m Endoscopy and Urology Diagnostic Plan was published on 30 November 2021. The Plan supports the redesign and implementation of Urology Diagnostic Hubs and 'One Stop' clinics. There are currently six one-stop Urology Diagnostic Hubs in NHS Scotland, supporting rapid access to cystoscopy and same day diagnosis. Other hubs are expected to come on stream.

Action 30: University of Edinburgh feasibility of lung health checks in Scotland research underway

We committed to appraise the options, opportunities, harms and benefits of targeted lung health checks in Scotland through exploratory research carried out by the University of Edinburgh.

As of 29th September 2022, the UK National Screening Committee (UK NSC) has now recommended for all four UK nations to move forward with introducing targeted screening for lung cancer in adults aged 55-74 with a history of smoking. The UK NSC also acknowledged the significant complexities that must be worked through ahead of implementation, including development of the screening pathway, the delivery model, and identification of the eligible population. Scotland will play an active part in that work.

The Scottish Government will also follow the advice of National Screening Oversight (NSO) and Scottish Screening Committee (SSC) who will consider how the recommendation can best be taken forward in Scotland.

In the meantime, the Scottish Government has agreed to fund an extension, through to September 2023, to the University of Edinburgh's feasibility study, LungScot, into targeted lung health checks for high risk individuals. This feasibility study into lung screening in Scotland will add to the evidence base and could potentially be used to inform future approaches and ambitions for scaling up screening activity in Scotland.

Action 32: Review data on access to specialist surgery

We committed to work with clinicians and Health Boards to assess new ways of improving equity of access across all specialist surgical pathways.

The Centre for Sustainable Delivery (CfSD) is playing a central role in driving innovation in collaboration with Health Boards. Launched in 2021, CfSD was established to pioneer and deliver new, better and more sustainable ways of delivering services and improving access for patients. The work of the CfSD is key to supporting NHS recovery and aims both to reduce unnecessary demand for services, and also to develop new pathways of care that are more efficient and better for patients. This includes enhanced delivery of services in community settings, reducing the variation across Health Boards and improving overall patient experience. Not only does this maximise value for patients by avoiding waste, it also provides access to consistently high quality healthcare across Scotland.

Action 37: Continued investment in improving our radiotherapy equipment

We committed to invest £45 million in the Linear Accelerator (LINAC) Procurement Programme to ensure access to the most up to date radiotherapy equipment across Scotland's cancer centres.

The LINAC replacement programme continues to ensure that patients attending the 5 radiotherapy centres in Scotland benefit from modern technology and treatments. The Technical Specification and Evaluation Group oversees all replacements to ensure we plan for the future and embrace opportunities for collaboration in procurement to maximise public value for these cost-effective treatments.

Greater provision of Magnetic Resonance Imaging (MRI) in radiotherapy has not yet been realised but this continues to be pursued for all cancer treatment centres. Continued planned investment in this programme is essential to meet increasing demand, increasing complexity, and to facilitate more personalised radiotherapy treatment in the future.

Action 40: Increase community based phlebotomy services

We committed to explore how an approach that increases numbers of pre-treatment and follow-up tests can be embedded across Scotland.

Initial scoping by the Centre for Sustainable Delivery (CfSD) identified wide variation in community phlebotomy across and within health boards. It also revealed the challenge of addressing a single task (phlebotomy) for a single health area (SACT) that depended on and related to work on community services more widely (Community Treatment and Care (CTAC) services). In November 2022, the Systemic Anti-Cancer Therapy Programme Board (SACT PB) agreed to pause activities due to other competing pressures.

Action 43: Utilise and enhance the delivery of SACT through community pharmacists

We committed to work with pharmacy leaders to optimise the potential of community pharmacy and build on the successful pilots of community pharmacy dispensing of Systemic Anti-Cancer Therapies (SACT).

Limited progress has been made to address challenges related to community pharmacy infrastructure challenges, particularly in relation to several areas which would require clearance from UK Government.

Action 68: Complete phases 3-5 of the Cancer Intelligence Platform

We committed to implement a phased approach to developing a Cancer Intelligence Platform, in order to provide a centralised space for data linkage and analysis.

Public Health Scotland (PHS) have commenced user acceptance testing (UAT) for the first three datasets (cancer waiting times, DCE and pathology). Some issues have been identified, with delay in completing, but are being addressed. Some of the development work on the reference files, such as populations, geography and deprivation have been brought forward. The next three datasets to focus on are deaths, acute and registry data.

Next steps: 10-year Cancer Strategy for Scotland 2023-33

Following the end of the 2020 national cancer plan in March 2023, a new strategy was required to continue with and improve on the services available to all those affected by cancer, which includes people living with cancer and their families and carers, as well as the workforce. The progress on each of these 68 actions have informed the development of the new strategy.

The Cancer strategy for Scotland 2023 to 2033 and Cancer action plan for Scotland 2023 to 2026 were published on 15 June 2023. The new strategy will be in place for 10 years and will be underpinned by action plans which will evolve with the changing landscape while remaining consistent with the overarching aims. This approach helps to set out a longer-term vision and goals while addressing the different stages of recovery and rebuilding what will be necessary, alongside the continuing advances in cancer services.

The strategy will provide a common direction to all affected by cancer, defining a clear strategic intent - **improve cancer survival and provide excellent, equitably accessible, care** - along with a range of priority ambitions to help meet that aim.

Annex: Actions completed at progress report

- Action 5: Develop guidance on outpatient visiting
- Action 6: Test patients for COVID-19, where clinically appropriate
- Action 8: Tailored information for individuals that are at increased risk of poor outcomes from COVID-19
- Action 12: Early Cancer Diagnosis Centres
- Action 13: Additional 6 mobile MRI scanners & 3 CT scanners go live
- Action 16: Convening of the oversight group to develop the Endoscopy Renewal Plan
- Action 18: National Cancer Diagnosis Audit
- Action 20: Refresh of the Framework for Effective Cancer Management
- Action 28: Launch of Detect Cancer Early lung campaign
- Action 29: Review of COVID-19 related primary care urgent suspicion of cancer referral management guidance
- Action 31: Monitoring one-stop lung clinics across NHS Scotland
- Action 33: Work with National Services Scotland (NSS) through their Robotic Assisted Surgery Framework
- Action 34: Promote and review the Framework for Recovery of Cancer Surgery
- Action 38: Publish a national radiotherapy plan
- Action 45: Embed long term rapid decision making for off-label medicines
- Action 50: Health Care Worker (HCW) testing for COVID-19 as the risk persists
- Action 51: Work with NHS Healthcare Improvement Scotland (HIS) Healthcare Staffing Programme to appropriately plan workforce requirements

Action 52: Provide guidance to Health Boards on how to improve and foster clinical leadership

Action 53: Endorse the Flying Finish workforce challenge across cancer services

Action 54: Review the national cancer governance landscape

Action 55: Create a national resource to deliver 'Once for Scotland' approach

Action 57: Establish the Cancer Clinical Trials Subgroup

Action 65: Support phase 2 of the Cancer Medicines Outcomes Programme (CMOP)

Action 66: Retrospective audit of CWT data undertaken



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