

NATIONAL CANCER STRATEGY 2017-2026

Implementation Report 2021

#	Recommendation	Lead Agency	2021
1	The Department of Health will ensure that policies under the <i>Healthy Ireland</i> framework are implemented in full and that opportunities to address cancer prevention measures under those policies are maximised. In particular, measures aimed at further reducing smoking levels will be pursued.	DOH	<p>Pre-legislative scrutiny of the General Scheme of the Public Health (Tobacco & Nicotine Inhaling Products) Bill began in November 2021. This Bill will prohibit the sale of tobacco from vending machines, temporary or movable premises and locations intended for children. It will also introduce a licensing system for the retail sale of tobacco and nicotine inhaling products, prohibit the sale of nicotine inhaling products to those under 18 and prohibit the sale of tobacco and nicotine inhaling products by those under 18.</p> <p>Section 15 and 16 of the Public Health (Alcohol) Act came into force in November 2021. These provisions prohibit alcohol advertising on a sports area during a sporting event or at events aimed at children. Alcohol sponsorship of events aimed at children or events involving driving or racing motor vehicles is also prohibited.</p>
2	The National Cancer Control Programme (NCCP) will develop a cancer prevention function, working in conjunction with the broader <i>Healthy Ireland</i> initiative, and will lead in relation to the development and implementation of policies and programmes focused on cancer prevention.	NCCP	<p>The NCCP cancer prevention function continues to participate in, and actively supports, Healthy Ireland and HSE public health programmes.</p> <p>The Irish Cancer Prevention Network, comprising the NCCP, Irish Cancer Society, Marie Keating Foundation and Breakthrough Cancer Research, delivered on its 2021 objectives. This included the publication of three newsletters, two webinars (Ageing Well: How to reduce your Cancer Risk and Food for thought: Eating for Health to Reduce Cancer Risk) and supporting health promotion events, for example on alcohol and cancer, Men's Health week and Ovarian Cancer Awareness.</p> <p>In 2021, the NCCP enhanced its prevention function with an additional full time Cancer Prevention Officer, funded under Sláintecare. The NCCP Cancer Prevention webpage has been further developed in 2021 to act as a repository for cancer prevention resources.</p> <p>In 2021, the NCCP established a National Cancer Awareness survey advisory group and commenced work to develop a National Survey on Cancer Awareness and Attitudes for completion in 2022.</p>
3	The Department of Health will develop a national skin cancer prevention plan and oversee its implementation as a priority. It will prioritise children, outdoor workers, sunbed users and those who pursue outdoor leisure activities.	DOH	<p>A National Skin Cancer Prevention Plan was launched in 2019. Meetings of the Prevention Plan's Implementation Group continued in 2021, with a particular focus on children, outdoor workers, those who pursue outdoor leisure activities and sunbed users.</p> <p>In 2021, the NCCP, in conjunction with Healthy Ireland ran radio adverts to raise awareness of the annual SunSmart campaign, engaged in public events to promote sun protective behaviours, incorporated sun protection messages into existing educational programmes and created resources to support organisations in promoting better sun protection practices.</p>
4	The NCCP will develop a systematic, evidence-based mechanism to ascertain the potential benefits and the cost-effectiveness of various initiatives (including chemoprevention) which will inform future cancer prevention programmes.	NCCP	<p>The NCCP, in conjunction with the Irish Cancer Prevention Network, is continuing to monitor new emerging evidence, international initiatives and developments in cancer prevention. In 2021, implementation of a more formalised process of assessment was delayed due to Covid-19, for progression in 2022.</p>
5	The HSE will ensure that the appropriate endoscopy capacity is provided in hospitals to allow for the expansion of BowelScreen to all aged 55-74 by end-2021.	HSE	<p>The BowelScreen programme is currently planning to extend the eligibility age range to those between 55–74 years of age, initially to extend age eligibility downwards on a gradual basis. Covid-19 placed ongoing pressures on endoscopy capacity in 2021 and the programme is working to address capacity in conjunction with the National Endoscopy Programme. The priority focus for the programme in 2021 was on the recovery of BowelScreen participation to pre-Covid levels, maximising the uptake of those currently eligible to take up BowelScreen, through targeted communication and promotion.</p> <p>In 2021, approximately 4,442 patients were referred for further treatment (index, surveillance, planned procedure) from the BowelScreen Programme. This was an increase on the previous year (2020) figure of 3,441.</p>
6	The NCCP will draw up a plan by end-2017 for the development of an integrated cancer control and surveillance service for defined population subgroups with an inherited familial predisposition to cancer (e.g. breast, ovarian and colorectal).	NCCP	<p>In 2021, the NCCP undertook a BRCA population needs assessment focused on the identification and assessment of those with possible hereditary cancer risk for completion in 2022. Results will be used to inform the work on the further development of a Hereditary Cancer Model of Care.</p>
7	The NCCP and the HSE Health & Wellbeing Directorate, in partnership with the voluntary sector, will develop a rolling programme of targeted multi-media based public awareness and education campaigns, aimed at the early detection of specific cancers and with particular focus on at-risk populations.	NCCP	<p>In 2021, an 'early detection' webpage was created on the NCCP website – resources developed to date include public-facing leaflets, factsheets and videos aimed at increasing awareness of the signs and symptoms of various cancers and encouraging people to seek timely medical review.</p> <p>In 2021, the NCCP collaborated with CHO9 Health and Wellbeing on the development of early detection of lung cancer resources for community health workers. A national social media public awareness campaign commenced in October 2021.</p> <p>The NCCP, in collaboration with UCC, produced a number of publications in relation to lung cancer awareness and help-seeking behaviour among high-risk individuals in Ireland. In 2021, the NCCP commissioned further research into barriers to early diagnosis of lung cancer experienced by primary healthcare professionals in Ireland.</p> <p>In 2021, NCCP completed public consultation on the NCCP Early Diagnosis of Symptomatic Cancer Plan 2022-2025 and the Framework for Prioritising Cancers for Early Diagnosis Initiatives in Ireland.</p>
8	The NCCP, working with the ICGP and the National Clinical Effectiveness Committee, will develop a three year plan to enhance the care pathways between primary and secondary care for specific cancers. The plan will set out criteria for referral to diagnostics and incorporate the requirements for additional Rapid Access Clinics.	NCCP	<p>The updated GP Guidelines for Referrals to the Symptomatic Breast Disease Clinics were launched in January 2021. The NCCP has worked with stakeholders including GPs, Symptomatic Breast Disease Clinics and charities to communicate the changes to the guidelines. The NCCP continued to monitor the implementation of these new guidelines on an ongoing basis throughout 2021.</p> <p>In 2021, the NCCP continued to monitor the referrals of cancers that fall outside existing Rapid Access Clinics, including through the pilot Rapid Access Haematology Clinic in Roscommon University Hospital and supporting the National Women and Infants Health Programme in the development of the General GP Gynaecology Referral Form to Ambulatory Gynaecology Clinics.</p> <p>Furthermore, a working group for the development of a non-melanoma skin cancer pathway between primary and secondary care was established in 2021.</p>
9	The NCCP will ensure that cancer referrals from a GP into a hospital will be made electronically. Each Hospital Group will facilitate the phasing in of e-referral. This will be completed by the end of 2022.	NCCP	<p>A total of 52,719 electronic cancer referrals were received in 2021 (a 31% increase on 2019). The NCCP also implemented a weekly reporting process for GP e-Referral to inform mitigation efforts during the Covid-19 pandemic, as a proxy measure of the number of patients presenting to their GP with any cancer-related concerns.</p> <p>The implementation of GP electronic referral to pigmented lesion clinics continued during 2021.</p>
10	The Department of Health will liaise with the Health and Education authorities with a view to increasing places in Third Level Institutions for the training of radiographers and sonographers.	DOH	<p>In 2018, the number of places on the undergraduate degree programme on radiography provided by UCD was increased from approximately 45 to 100 per year, in line with increasing demand. This will start to impact on availability of radiographers from mid-2022.</p>
11	The NCCP, working with the other Directorates in the HSE, will develop criteria by end-2018 for the referral of patients with suspected cancer, who fall outside of existing Rapid Access Clinics, for diagnostic tests. The NCCP will ensure, through these criteria, that GPs will have direct access to cancer diagnostics within agreed timelines.	NCCP	<p>The improvements made for GP access to diagnostics, generally, in the context of Covid-19 and Winter Plan, have impacted positively on cancer patients. The NCCP continues to work with the Radiology Programme to develop direct access to radiology diagnostics nationally. Direct access to MRI, CT, X-Ray and DEXA scans is available to GPs in each of the nine Community Health Organisations nationally for GMS patients.</p> <p>Throughout 2021, the NCCP has worked closely with the community diagnostics teams to examine GP access to diagnostics, and with the National Women and Infants Health Programme on the establishment of Ambulatory Gynaecology services. In 2021, NCCP commenced work on an audit of pathways to diagnosis for lung cancer, and this work is expected to be progressed in 2022.</p>

12	The NCCP will further develop the model of care for cancer to achieve integration between primary care and hospital settings at all stages of the cancer continuum, from diagnosis to post treatment care.	NCCP	<p>The National Cancer Survivorship Needs Assessment was published in 2019. The Needs Assessment outlines key areas in which integration between primary care, the community sector, and hospital settings can be improved. The NCCP has worked to progress issues arising from the Needs Assessment in 2021 and has ongoing GP support for the integration effort.</p> <p>In 2021, the Model of Care for Psycho-Oncology was circulated to Cancer Centres and Cancer Support Centres. Work is currently underway to establish formal psycho-oncology MDMs in the designated cancer centres. Work has also commenced in 2021 on the development of a Paediatric/CAYA Model of Care for Psycho-Oncology, which is expected to be published by end-2022.</p> <p>A self-assessment and peer review pilot was carried out on the Best Practice Guidance for Community Cancer Support Centres in 2021, with 10 cancer support centres, to undertake a baseline assessment of services provided in centres nationally. Recommendations from the pilot study will be incorporated into the self-assessment and peer review process going forward.</p> <p>Proposals on the Systemic Anti-Cancer Therapy (SACT) Model of Care (for launch in 2022) were signed off by the SACT Steering Group in 2021 and these proposals will range across hospital, primary care and home settings.</p> <p>26 acute oncology nurses appointed in 2021 to ensure prompt telephone triage and management of side-effects of treatment ensuring hospital avoidance, linking with community resources as appropriate.</p>
13	Patients diagnosed with cancer will have their case formally discussed at a multi-disciplinary team meeting. The NCCP, working with the Hospital Groups, will oversee and support MDT composition, processes and reporting of outcomes.	NCCP	<p>All common tumours are discussed at multi-disciplinary team (MDT) meetings. The rollout of the National Cancer Information System (NCIS) will allow for the collection of MDT information on an ongoing basis. By end of 2021, NCIS was rolled out to 5 hospitals (St. Luke's Rathgar, University Hospital Galway, Mayo University Hospital, St. James's Hospital and Beaumont Hospital), with a further four hospitals (CHI Crumlin, University Hospital Kerry, Midlands Regional Hospital, Tullamore and Letterkenny University Hospital) in advanced implementation phase.</p> <p>In 2021, Standard Operating Procedures (SOPs) were in place for Haematology, Gynaecology, Melanoma and Lung cancer. SOPs are also under development for Adolescents and Young Adults (AYA), Complex Non-Melanoma Skin Cancer and Skull base cancers. Work began on the development of a Multi-Disciplinary Meeting SOP, and will be progressed in 2022 allowing for the alignment of all current and future SOPs.</p>
14	The NCCP, working with the other Directorates in the HSE and with the Department of Health, will develop a rolling capital investment plan, to be reviewed annually, with the aim of ensuring that cancer facilities meet requirements.	NCCP	<p>Capital funding under the National Development Plan 2018-2027 will facilitate the development of cancer facilities in line with the National Cancer Strategy. The plan includes the continued development of Radiation Oncology to meet patient demand, expansion and improvement of medical oncology units and day wards, improvements in diagnostic facilities and investment in aseptic compounding infrastructure, as well as the development of a comprehensive cancer care centre.</p> <p>In 2021, in preparation for the repatriation of PRRT services, single-photon emission computerized tomography (SPECT) and CT equipment was replaced in St. Vincent's University Hospital. The NCCP has also supported the Stereotactic Ablative Radiotherapy (SABR) expansion in SLRON with the acquisition of Surface Guided Radiation Therapy (SGRT) equipment.</p>
15	The Department of Health will ensure that investment in infrastructure, facilities, personnel and programmes in the designated cancer centres will have a goal of ultimately developing at least one comprehensive cancer care centre that will optimise cancer prevention, treatment, education and research during the Strategy period.	DOH	The development of a comprehensive cancer care centre has always been seen as a matter for the latter part of the Strategy period. It is included in the National Development Plan 2018-2027. In 2021, the Department and the NCCP continued to consider the steps required towards the implementation of this recommendation. In 2021, Ireland became involved in a European Joint Action under the Europe's Beating Cancer Plan on the development of national comprehensive cancer centres and networks across the EU (CRaNE), which will complement ongoing work regarding the development of a comprehensive cancer centre in Ireland over the coming years.
16	The NCCP will ensure that consultant appointments for radiology, endoscopy and histopathology, where necessary, are made in conjunction with appointments in other disciplines such as surgery and medical oncology.	NCCP	<p>The NCCP has continued to allocate radiologist and pathologist posts in consultation with the hospital groups and clinical lead groups as appropriate. In 2021 a number of positions for radiographers and medical scientists have been included to support these functions.</p> <p>The NCCP is represented on the Consultant Applications Advisory Committee (CAAC), which allows for the needs of cancer services to be incorporated into the work of this Committee.</p>
17	The NCCP will appoint a National Lead for Cancer Molecular Diagnostics for solid and liquid malignancies.	NCCP	<p>Work was on-going at end 2021 in the HSE to progress the recruitment of a National Lead in Genomics.</p> <p>When the National Lead in Genomics is in place, the NCCP will be in a position to better define the role of a National Lead for Cancer Molecular Diagnostics for solid and liquid malignancies.</p>
18	The NCCP will establish a Steering Group for Cancer Molecular Diagnostics, chaired by the National Lead. This Steering Group will set out the framework for the organisation, location and delivery of cancer molecular diagnostic services.	NCCP	The NCCP established a Cancer Molecular Diagnostics (drugs) Advisory Group in 2017 comprising of representatives from pathology, haematology, medical oncology, genetics and laboratory science to advise on the relevant cancer molecular diagnostic testing requirements. The focus of this group is molecular diagnostics tests predictive for drug use and the NCCP Framework for Decision Making for Tests (Predictive for Systemic Anti-Cancer Therapy Treatment) in the Irish Molecular Pathology Service was developed. In 2021, PD-L1 testing working groups have been established to recommend testing pathway for PD-L1 testing in Breast, Head and Neck, Lung and Gastric Cancer in parallel with reimbursement approval for indications across these tumour types.
19	The NCCP will further develop the Programme for Hereditary Cancers to ensure that evaluation, counselling, testing and risk reduction interventions are available as appropriate, and that services are available to patients on the basis of need.	NCCP	<p>In 2021, the NCCP undertook a BRCA population needs assessment focused on the identification and assessment of those with possible hereditary cancer risk, for completion in 2022. This will inform the work on the development of a Hereditary Cancer Model of Care.</p> <p>Initial planning has also been carried out in 2021 for Consent Training for Health Care Professionals delivering mainstream BRCA testing. While further work on this had been delayed due to subject matter expert availability, this training is expected to be progressed in 2022.</p>
20	The HSE will ensure that the existing cancer genetics services are amalgamated into one National Cancer Genetics Service and will identify the most appropriate site for its location.	HSE	The NCCP has completed scoping of cancer genetics services in all designated cancer centres. The identification of a site for a National Cancer Genetics Service has been impacted by Covid-19 and will be progressed as soon as practicable.
21	The NCCP will draw up a plan setting out the number/location of designated cancer centres in which surgery will take place for the various tumour types. Timescales for the implementation of the plan will be included for each tumour type.	NCCP	<p>A plan is in place regarding the centralisation of cancer surgery to the designated cancer centres. The NCCP continues to implement this plan and it is kept under ongoing review. In 2021, the NCCP further progressed the development of a national penile cancer surgical centre at Beaumont Hospital.</p> <p>In light of the impact of the pandemic on theatres, ICU and HDU capacity, much public time-sensitive cancer surgery was protected and accommodated with private hospital support in 2021.</p>
22	In line with the National Plan for Radiation Oncology, public sector radiation oncology facilities in Dublin, Cork and Galway will be expanded to meet patient demand and a planned National Programme of Equipment Refreshment and Replacement will be implemented across the Strategy period.	NCCP	<p>The construction of a new Radiation Oncology Unit at Galway continued in 2021 and full opening of the new facility, including clinical commissioning is expected in 2023.</p> <p>Design work was progressed for the planned expanded radiation oncology facilities in Beaumont Hospital.</p>
23	The NCCP will examine the model of care for patients receiving oral anti-cancer medicines and recommend steps to ensure that all patients receive such medicines in a safe and effective manner, with appropriate and proportionate supports, both in the hospital and community setting.	NCCP	An Implementation Group is continuing to ensure implementation of the Model of Care for Oral Anti-Cancer Medications. In 2021, a community pharmacist resource page has been developed to support community pharmacists involved in the care of patients with cancer, with particular focus on the safe dispensing of oral anti-cancer medicines (OAM), counselling of patients with cancer and supportive care for systemic anti-cancer therapy (SACT), including OAM and hospital administered SACT.
24	The NCCP will develop appropriate MDT, centralisation and treatment arrangements to meet the diverse needs of patients with haematological cancers.	NCCP	<p>The standard protocol for haematology multi-disciplinary teams in hospitals has been agreed. A Haemato-Oncology Expert Advisory Group is in place and a Project Lead has been assigned.</p> <p>In 2021, data gathering took place to support the objective of better meeting the diverse needs of haematological cancer patients. While progress was delayed due to Covid-19, a draft paper on outcome-focused groups was prepared in line with the National Cancer Strategy, and will be progressed in 2022.</p>

25	The NCCP will develop a systematic, evidence-based mechanism to prioritise the establishment of MDTs for further rare cancers. The centralisation of diagnosis, treatment planning and surgical services for these cancers will be organised in line with best international practice.	NCCP	<p>Standard Operating Procedures (SOPs) have been developed for a number of cancer MDMs. These include Colorectal, Lung, Melanoma, Gynaecology, Upper Aerodigestive Tract, and Haematology. A standardised SOPs is being developed to ensure consistency across all cancers. Further individual cancer MDM SOPs are under development including rare cancers e.g. Skull base and related tumours, Adolescent and Young Adult (AYA) cancers and complex non-melanoma skin cancer.</p> <p>In 2021, the NCCP worked to update the 'Diagnosis staging and treatment of patients with Gestational Trophoblastic Disease (GTD) (National Clinical Guideline no 13)' (rare cancer), with emphasis on registering of all GTD patients with the national GTD registration monitoring advisory centre in CUMH. This includes linkage to an international centre for GTD in Charing Cross Hospital for specialist advice.</p> <p>In 2021, the NCCP further progressed the development of a national penile cancer surgical centre at Beaumont Hospital and this will continue in 2022. This will include the development of referral pathways, SOPs and MDT structure. The Urological Cancer Programme will work closely with the NCCP Evidence and Quality Hub in relation to this.</p> <p>In 2021, research work was progressed for the development of a systemic evidence-based approach for further rare cancers.</p>
26	The HSE will ensure that an age appropriate facility is designated for adolescents and young adults with cancer within the new children's hospital.	HSE	<p>The new Children's Hospital will provide age-appropriate facilities and will increase inpatient cancer capacity by 50%.</p> <p>Adolescent and Young Adult beds will increase from 2 to 6. The facilities will feature a den for Adolescent and Young Adult patients, which is aimed at meeting some of the particular needs of this age group.</p>
27	The HSE will develop closer links, on a hub and spoke model, between the National Centre for Child and Adolescent Cancer and the other designated cancer centres to provide appropriate and flexible transition arrangements for adolescents/young adults. This will include the joint appointment of adolescent/young adult oncologists and haemato-oncologists and the provision of age-appropriate psycho-social support for these patients.	HSE	<p>The NCCP Clinical Lead for Children Adolescents and Young Adults (CAYA) was appointed in 2019 and a NCCP CAYA Cancer Clinical Leads Group was set up in April 2019 to oversee and implement the recommendations of the National Cancer Strategy and enhance the practice and delivery of CAYA with cancer nationally. The National Clinical Lead for CAYA presented to the Disability Access Route to Education/Higher Education Access Route (DARE/HEAR) Steering Group in November 2021 regarding eligibility access for CAYA Cancer Patients.</p> <p>In 2021, the Health Research Board approved funding for Children's Health Ireland Cancer Trials Group, led by the NCCP National Clinical Lead for CAYA, for 5 years.</p> <p>The inaugural Childhood, Adolescent, Young Adult Cancers & Survivorship (CAYAS) Virtual Conference was held in September 2021.</p> <p>In 2021, a successful pilot of sharing patient laboratory results between CHI at Crumlin and Our Lady of Lourdes Hospital, Drogheda via the National Healthlink Messaging System commenced and was shortlisted for Spark Ignite Award for Healthlink Sharing of Laboratory Results Project.</p>
28	Links between cancer services and geriatric services will be strengthened, facilitated by the appointment of a National Clinical Lead in Geriatric Oncology in the NCCP.	NCCP	It is intended that progress on the National Clinical Lead in Geriatric Oncology be progressed when pressures arising from the Covid-19 pandemic have eased. The NCCP has appointed a Geriatric Advanced Nurse Practitioner (ANP) to support the specialised geriatric oncology service at Waterford University Hospital.
29	The NCCP will appoint a National Clinical Lead for Psycho-oncology to drive the delivery of networked services.	NCCP	A National Clinical Lead for Psycho-Oncology was appointed in December 2019 and chairs the Psycho-Oncology Advisory Group, established in 2020. The Group met four times in 2021, to advance work in the area of psycho-oncology, particularly in relation to the implementation of the Psycho-Oncology Model of Care.
30	Each designated cancer centre will establish a dedicated service to address the psycho-social needs of patients with cancer and their families. This will operate through a hub and spoke model, utilising the MDT approach, to provide equitable patient access.	NCCP	<p>The Model of Care for Psycho-Oncology was approved in September 2020 and implementation progressed in 2021, with funding allocated for 19 Psycho-Oncology MDT posts in the 2021 Service Plan. Work also commenced in 2021 on the development of a Model of Care for Paediatric/CAYA Psycho-Oncology.</p> <p>In response to Covid-19, a virtual psycho-oncology service (Together 4 Cancer Concern) was established in April 2020 by the NCCP in conjunction with Cancer Care West and the Irish Cancer Society. This service provided psychological support for cancer patients and their families throughout 2021 and has been extended into 2022.</p> <p>In 2021, NCCP Guidance on the safe re-opening of the Cancer Support Centres was further updated and circulated to support centres.</p>
31	Designated cancer centres will have a sufficient complement of specialist palliative care professionals, including psycho-oncologists, to meet the needs of patients and families (such services will be developed on a phased basis to be available over seven days a week).	NCCP	<p>A Palliative Care Programme has been established in the HSE. The NCCP has engaged with the National Clinical Director for Palliative Care with regard to ensuring alignment between NCCP work streams and the Palliative Care Programme.</p> <p>In 2021, funding for 19 psycho-oncology posts was allocated across four disciplines: psychiatry, psychology, social work and nursing, with all post at various stages of recruitment.</p> <p>In 2021, a new palliative care consultant post was confirmed for the Mater Hospital.</p> <p>Furthermore, the Model of Care for Psycho-Oncology has been published and circulated to the designated Cancer Centres and the Cancer Support Centres. This will help to increase the awareness of all supports available to help ensure that patients and families are able to access services when needed.</p>
32	Oncology staff will have the training and education to ensure competence in the identification, assessment and management of patients with palliative care needs and all patients with cancer will have regular, standardised assessment of their needs.	HSE	Implementation of the Palliative Model of Care is being progressed by the HSE's Palliative Care Programme and the NCCP is linking in with this work.
33	The HSE will oversee the further development of children's palliative care to ensure that services are available to all children with a life limiting cancer.	HSE	<p>The NCCP CAYA Programme works very closely with HSE Palliative Care Programme. In 2021, there has been significant investment in children with life limiting conditions by the HSE Palliative Care Programme via the National Service Plan 2021, as was recommended in the HSE Report "Clinical governance and operational arrangements for supporting a model of care for children with life limiting conditions towards the end of life in the community in Ireland".</p> <p>A Palliative Medicine Adolescent and Young Adult Fellowship also commenced in 2021</p>
34	The NCCP will ensure that each hospital has a clearly defined framework for cancer patient safety and quality.	NCCP	A national framework on cancer patient safety and quality is in place. The National Cancer Quality Steering Committee oversaw the implementation of a pilot project at St James's Hospital Lung Cancer Service in 2020 and this has been evaluated. In 2021, this pilot project was internationally reviewed in advance of a second pilot project being planned. The second pilot project is expected to be progressed in 2022.
35	The NCCP will define focused cancer patient experience surveys to incorporate treatment and survivorship in line with HIQA's standard approach for the National In-Patient Acute Care Patient Experience Survey.	NCCP	The National In-Patient Acute Care Patient Experience Survey is conducted in May each year in a partnership involving HIQA, the HSE and the Department of Health. Cancer treatment and survivorship was selected as a priority area for inclusion in the National Care Experience Programme for 2021. However, due to Covid-19, the programme has been delayed and it is now likely that the survey on cancer patient experience will be progressed as part of the National Care Experience Programme's programme of work for 2022-2024.
36	The NCCP will develop, publish and monitor a programme of national quality healthcare indicators for cancer care, involving both process and outcome measures, in line with international standards.	NCCP	<p>The Quality Indicators Working Group (Department of Health, NCCP and NCRI) has undertaken a national review of available data and is considering the optimum national quality health indicators for cancer care in Ireland.</p> <p>The NCCP has reviewed international quality healthcare indicators for cancer, and in 2021 has identified potential Quality Indicators that were used at a European level through the iPAAC EU Joint Action on Cancer Control for colorectal and pancreatic cancers and how these can be mapped to current NCCP KPIs.</p>
37	The NCCP will develop further guidelines for cancer care in line with National Clinical Effectiveness Committee (NCEC) Standards. Audits will also be developed in accordance with the NCEC Framework for National Clinical Audit.	NCCP	<p>The NCCP continues to develop further guidelines for cancer care in line with National Clinical Effectiveness Committee (NCEC) Standards. Audits will also be developed in accordance with the NCEC Framework for National Clinical Audit.</p> <p>In 2021, the NCCP updated the diagnosis and staging section of the 'Diagnosis staging and treatment of patients with prostate cancer (National Clinical Guideline no 8)' and circulated it for national and international review ahead of final sign-off and publication in line with National Clinical Effectiveness Committee processes.</p> <p>The NCCP also worked on updating the 'Diagnosis staging and treatment of patients with Gestational Trophoblastic Disease (GTD) (National Clinical Guideline no 13)', and the Radiation Oncology Section of the 'Diagnosis, staging and treatment of patients with Breast Guideline (National Clinical Guideline no 7)' in 2021.</p> <p>Throughout 2021, in response to Covid-19, the NCCP rapidly developed, adapted and disseminated national guidelines on cancer care to support cancer services across systemic anti-cancer therapy delivery, radiation oncology, surgical oncology and diagnostic services. This work facilitated the continuation of cancer services through the pandemic.</p>

38	The Department of Health will ensure that patient representatives are involved in policy making, planning, practice and oversight of cancer services at local, regional and national levels.	DOH	<p>The Department of Health strives to ensure that patient representatives are included in the oversight of the development and implementation of all cancer policies and services, particularly through the Cancer Patient Advisory Committee. At a local level, Patient Advisory Liaison Services (not limited to cancer) have been established to offer support, advice and information on hospital services to patients, family members, the general public and hospital staff.</p> <p>Patients participate on the NCCP's Community Oncology, Survivorship and Psycho-Oncology Working Groups, with wider consultation and collaboration with patient groups and advocacy organisations taking place on an on-going basis. An NCCP Forum which aims to match patients/patient representatives with appropriate groups and projects within the NCCP continued its work throughout 2021.</p> <p>In 2021, the National Cancer Registry Ireland established an Advisory Council which includes patient representatives. The purpose of the Advisory Council is to offer advice and to bring challenge to the National Cancer Registry in delivering on its strategic plan, the implementation of the recommendations of the Scoping Inquiry into CervicalCheck report and the National Cancer Strategy.</p>
39	The Department of Health will establish a Cancer Patient Advisory Committee to provide input into the development of programmes for patients with cancer. Membership of this committee will reflect the diverse nature of patients living with the effects of cancer, and will ensure that the needs of patients living in more remote areas are represented.	DOH	<p>The Cancer Patient Advisory Committee met four times in 2021. In 2021, the Committee provided input on issues including the development of a Systematic Anti-Cancer Therapy Model of Care, the development of personalised and risk-stratified follow-up and surveillance strategies for cancer patients, and "Life and Cancer – Enhancing Survivorship" educational workshops for patients post-treatment. The Committee also met with the Minister for Health at its December 2021 meeting.</p>
40	All hospitals will offer patients a Patient Treatment Summary and Care Plan as part of their support. These plans will allow patients to store information about their cancer, their cancer treatment and their follow-up care. The plans will also inform future healthcare providers.	NCCP	<p>Work on a Minimum Data Set for Treatment Summary was progressed in 2020 in consultation with designated cancer centres. This process will support the development of Patient Treatment Summary and Care Plans for specific tumour sites.</p> <p>In 2021, a Colorectal Patient Passport was in pilot phase in 7 hospitals. Evaluations at patient level and service level took place at 6 months and 12 months, after which minor changes to the passport design were made. A patient and staff evaluation completed in 2021 has had very positive feedback, and the passport is currently being rolled out nationally.</p> <p>The NCCP also engaged with breast teams and their information management colleagues at the cancer sites to progress the template design for a Breast Cancer Treatment Summary & Care Plan throughout 2021. While progress has been delayed due to the cyber-attack and access to IT resources, a minimum dataset of the essential components for inclusion on the breast Treatment Summary & Care Plan has been finalised and endorsed by the NCCP Executive & the Clinical Leads.</p>
41	The NCCP, in conjunction with the ICGP, cancer centres, the Irish Cancer Society and cancer support centres, will conduct a Cancer Survivorship Needs Assessment to ascertain the most suitable model of survivorship healthcare. The Needs Assessment should be completed by the end of 2018.	NCCP	<p>The National Cancer Survivorship Needs Assessment (August 2019) was used in 2021, to inform the development and implementation of policy and services to meet patient needs. The needs assessment includes a model of care for Cancer Survivorship and details actions to develop cancer survivorship care in the lifetime of the National Cancer Strategy and beyond.</p>
42	The NCCP, in conjunction with the cancer centres, will develop shared care protocols for patients with cancer following treatment. These protocols will span the hospital and primary care settings.	NCCP	<p>The issues pertaining to patients following treatment are being considered by the NCCP's Survivorship Working Group. In 2021, the Group developed a consensus statement on the standardisation of follow-up/surveillance protocols for colorectal cancer and this has been published on the NCCP website. Further Risk Stratification Frameworks for follow up and surveillance care for breast and prostate cancers have been finalised in 2021 and will be progressed in 2022.</p>
43	Designated cancer centres working with the NCCP, the ICGP, primary care services, patients and voluntary organisations will develop and implement survivorship programmes. These programmes will emphasise physical, psychological and social factors that affect health and wellbeing, while being adaptable to patients with specific survivorship needs following their treatment.	NCCP	<p>The Cancer Thriving & Surviving (CTS) Programme is being implemented across acute and community settings. In 2021, four training sessions in delivering the programme online were run for Cancer Support Centres, with a number of Cancer Support Centres now delivering the CTS programme online. In-person training for new CTS leaders ran in November 2021 and an impact monitoring pilot of the CTS programme is planned with pilot sites in 2022.</p> <p>The NCCP has collaborated with the Irish Cancer Society to establish peer-supported End of Treatment Survivorship Workshops (LACES - Life After Cancer Enhancing Survivorship) in designated cancer centres, and in 2021 the Cancer Patient Advisory Committee inputted into their development. In 2021, an online workshop commenced at pilot sites in Galway, Letterkenny and Beaumont, with referrals being accepted from all hospitals across the country.</p> <p>Pilot Women's Cancer Survivorship Clinics were established at Cork University Hospital and the Mater Hospital in 2020 as part of the Women's Health Initiative, which aims to improve health and wellbeing for women cancer survivors at all stages of their journey. The initiative continued throughout 2021 and will run until 2023, co-ordinating the delivery of a range of general and specialist health supports for female cancer survivors while also using latest technology to make the services more widely accessible for women regardless of their location.</p>
44	The central role of the NCCP in ensuring that the National Cancer Strategy 2017-2026 is implemented across the health service will be strengthened, including through the use of Service Level Agreements, and through a direct role in financial allocations to Hospital Groups under Activity Based Funding.	NCCP	<p>The National Director of the NCCP has worked closely with the Chief Clinical Officer (CCO) in the HSE, Department of Health and relevant parts of the HSE, including Acutes, Community Services, Strategy, Estates and Finance, to improve the integration of developments related to cancer care.</p> <p>In 2021, the NCCP, reporting directly to the Chief Clinical Officer in the HSE, continued to work on enhancing NCCP governance over its separate budget and all funding allocations, continuing its central role in the HSE in ensuring the implementation of the National Cancer Strategy, with funding being utilised in a targeted way to maximise improvements in the quality and accessibility of cancer services.</p>
45	The NCCP will work with the private sector providers to achieve voluntary participation in cancer data collection, audit, compliance with guidelines and reporting of outcomes.	NCCP	<p>It is envisaged that cancer data from private sector providers will be more accessible when legislation covering the licensing of hospitals is enacted.</p> <p>In 2021, the Faculty of Pathology, Royal College of Physicians of Ireland and the NCCP worked with partners in the National Histopathology Quality Improvement (NHQI) Programme, National GI Endoscopy Quality Improvement (NEQI) Programme, National Radiology Quality Improvement (NRQI) Programme, DATA-CAN - the UK's Health Data Research Hub for Cancer, Queen's University Belfast, Northern Ireland Cancer Registry (NICR) and National Cancer Registry Ireland (NCRI) to publish a paper entitled 'Cancer care in 2020 – The impact of the COVID-19 pandemic'. Data provided by the Quality Improvement Programmes and the NCRI cover both public and private healthcare services.</p>
46	The NCCP will establish a National Cancer Research Group by end-2017 to improve the coordination of cancer research, to foster a supportive environment for research within the health service and the universities, to set research priorities in line with the overall cancer strategy, to seek to ensure that funding allocation is linked to these priorities and to work to achieve continuity of funding.	NCCP	<p>The National Cancer Research Group is in place and includes representatives of the Department of Health, NCCP, Health Research Board and Irish Cancer Society. While progress in 2020 and 2021 was limited due to the focus on the response to the Covid-19 pandemic, the NCCP will ensure that all relevant stakeholders are included in its membership.</p> <p>The NCCP has been an active participant in the All-Island Cancer Research Institute (AICRI) steering group and the AICRI Living with and Beyond Cancer working group throughout 2021.</p>
47	The HSE will ensure that clinical cancer research, and the staff who deliver it, become a fully integrated component of cancer care delivery.	HSE	<p>The NCCP continues to work with the central research function in the HSE to promote an increased focus on research and is endeavouring to ensure the inclusion of time for the pursuit of research interests in contracts for relevant consultant and advanced nurse practitioner posts.</p> <p>The NCCP supported the development of nursing/allied health professional research through the Cancer Nursing Research Award 2021 in collaboration with the Irish Cancer Society. The NCCP survivorship programme collaborates with the Irish Cancer Society in regard to the latter's research grant calls, with a view to supporting on-going work on cancer survivorship.</p>
48	The NCCP and the National Cancer Research Group will examine mechanisms to ensure that newly appointed cancer consultants and Advanced Nurse Practitioners have protected time to pursue research interests in their new posts.	NCCP	<p>Time for the pursuit of research interests has been included in the job specifications of several relevant consultant and advanced nurse practitioner posts. The NCCP has interacted directly with some of the newly hired Advanced Nurse Practitioners to consider how best to incorporate research into their work. However, with the focus on the continuation of cancer services during the Covid-19 pandemic in 2021, protected time for research was necessarily limited.</p> <p>In 2021, the NCCP awarded a cancer nursing education grant to Portiuncula/NUIG. An Irish Cancer Society/NCCP Covid Cancer Rapid Response Award with a focus on survivorship and Covid-19 was awarded in Q4 2021.</p>

49	The NCCP will appoint a National Clinical Lead for Cancer Nursing. This person will work with other Directorates in the HSE and with the Department of Health to determine an integrated nursing leadership infrastructure for cancer nursing services at national, regional and local levels to support practice and research.	NCCP	<p>A National Clinical Lead for Cancer Nursing is in place. In 2021, her role included working with stakeholders to develop a National Systemic Anti-Cancer Therapy (SACT) Nursing Competency Programme for Nurses, and establishing a number of initiatives to drive national standardised cancer nursing practices. In 2021 she also collaborated with the Irish Cancer Society on a collaborative nursing education grant (€160,000).</p> <p>In 2021, the National Clinical Lead for Nursing was part of an International Project Team bidding for an EU Erasmus Grant application focusing on a common European Education programme for primary care nurses caring for cancer patients and further built on international nursing collaborations with the UK Oncology Nurses Society (UKONS) and the European Oncology Nursing Society (EONS).</p>
50	The NCCP, aided by a cross-sector group, will draw up a comprehensive workforce plan for cancer services. This will include an interim assessment of staffing needs at medical, nursing and health & social care professional levels by mid-2018.	NCCP	<p>Current workforce, the supply of skilled personnel, and projected future demands are all subject to continual assessment and revision. Developments in clinical guidelines, pathways, practices and technologies, existing and projected skills supply, the timing of commencement of new initiatives, and external factors serve to influence the profile of resource requirements. The NCCP works closely with a range of bodies in planning the cancer services workforce.</p> <p>In 2021, the NCCP utilised Covid-19 funding to provide support packages to support diagnostic services, virtual clinics & triage, organisation of treatment services, minor capital works and psycho-social supports. The NCCP also worked closely with clinical programmes on the allocation of staff under the 2021 Service Plan and the requirements of cancer services in the context of the Service Planning process for 2022.</p>
51	The HSE will ensure that all hospitals provide the National Cancer Registry with data related to cancer in an appropriate timeframe to allow for sufficient surveillance of cancer rates and outcomes in Ireland.	HSE	<p>A Data-Sharing Agreement between the HSE and the National Cancer Registry is in place covering all public hospitals. Individual data-sharing agreements are also in place with the majority of voluntary and private hospitals (98%), and work was progressing at end-2021 to finalise the outstanding cases.</p> <p>2020 and 2021 saw significant advances in electronic data transfer. From mid-2020 the NCRI has been collecting data remotely from all public hospitals. This has facilitated the continued collection of data during the Covid-19 pandemic and has increased the completeness and timeliness of NCRI data.</p>
52	The Department of Health will review the scope of the National Cancer Registry with a view to increasing and optimising the use of available data to drive improvements in cancer care for patients.	DOH	<p>The National Cancer Registry Strategic Plan 2020-2022, launched in September 2020, sets out the high-level goals of the NCRI over 3 years. The Plan facilitates an enhanced contribution to the development of cancer policy by the NCRI and will enable the NCRI to more effectively address its core functions, while expanding the cancer patient data it collects.</p> <p>The Strategic Plan focuses on increasing and optimising the uses of available data to drive improvements in cancer care for patients. The Plan supports the delivery of the recommendations of the <i>Report of the Scoping Inquiry into the CervicalCheck Screening Programme</i>, as they pertain to the NCRI.</p>