

Nuffield Trust: Independent Advice to Velindre University NHS Trust on the Planned Regionally Integrated Network Clinical Model for non-surgical tertiary cancer services

Terms of Reference

<u>Aim:</u> to provide independent advice to Velindre University NHS Trust on the planned regionally integrated network clinical model for non-surgical tertiary cancer services across South East Wales.

Scope:

Clinical: planned regionally integrated network clinical model for non-surgical

tertiary cancer services

Geographical: South East Wales

Outputs:

- Provide a report and recommendations to Velindre UNHST taking account of the following questions
- What are the benefits of the planned regionally integrated network clinical model for nonsurgical tertiary cancer services?
- What are the risks inherent in the planned regionally integrated network clinical model including the location of the main non-surgical tertiary cancer centre on the Northern Meadows? i.e. managing the acute care interfaces/optimising the quality and acuity of clinical support for cancer services across all networked sites.
- Are the strategies proposed to manage these satisfactory, and what else might be considered with regard to:
 - o additional opportunities to strengthen planned arrangements;
 - o prioritising/accelerating any specific areas of planned work;
- What are the risks and benefits of the planned regionally integrated network clinical model with regard to research, development and innovation?

- How does the network model support high quality research and development and promote innovation?
- o How might any risks be mitigated?
- How could the benefits/opportunities be further optimised with learning from other health care systems? Are there any broader development opportunities related to cancer/related healthcare that could be considered to maximise the opportunity?

The work should take into account:

- Synthesis of existing international evidence;
- Emerging trends e.g. new medicines and technology; policy emphasis on improving access to services/reducing health inequalities; development of digital services; requirements for pandemic resilience.

Method

- Literature and evidence review across UK, Europe and international healthcare systems.
- Information and intelligence gathering.
- Interviews with a cross-section of interested parties.
- Interviews and consideration with external experts.

Timings

Commencement: September 2020

Completion: November 2020