

# Clinical excellence in cancer care

## *A model for safety and quality in Victorian cancer services*

### Quality readiness assessment

October 2006

The Integrated Cancer Services (ICS) are the key platform through which improvements in the quality of cancer care will be implemented. To achieve visible improvements for patients, it is important that the ICS undertake sufficient planning and preparation to implement *Clinical excellence in cancer care*. This checklist is a guide to the foundation needed for improvements in cancer care to be achieved.

#### **Leadership**

- ✓ ICS Executive develop and agree a plan for the implementation of *Clinical excellence in cancer care*
- ✓ Sign the Memorandum of Understanding that includes the agreement to share data and information between health services
- ✓ The boards of each health service agree to the sharing of data and information between health services for the purposes of quality improvement
- ✓ Allocate resources to support local collaborating tumour groups in collecting and reviewing data and information

#### **Preparation**

- ✓ ICS staff understand the quality systems and mechanisms that are in place in health services
- ✓ Quality managers and staff aware of the quality work being undertaken in the ICS
- ✓ Source local data to assist evaluation of service delivery
- ✓ ICS staff have attended the training provided by DHS to understand what needs to be done
- ✓ ICS staff support local collaborating tumour groups to collect and review data and information

#### **Delivery**

- ✓ Audit against the Patient Management Frameworks
- ✓ Prepare data and information relevant to the tumour groups
- ✓ Local collaborating tumour groups analyse clinical audit, data and information pertaining to their tumour stream
- ✓ Plan and implement service improvement initiatives
- ✓ Communicate the outcome of service improvement initiatives to the ICS Executive, the relevant quality units and the relevant health service/s