

Action Plan

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| Service Name: | Raigmore Hospital |
| Service Provider: | NHS Highland |
| Date of inspection: | 25-26 February 2025 |

| Ref | Action Planned | Timescale | Responsible Person | Progress | Date completed |
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| Recommendation a | The non-medical line management arrangements for Cancer Services have always been through the Cancer Services Manager and there have been no changes to these arrangements. However, the line management arrangements for the Cancer Services Manager have been reviewed and changes made through an organisational change process. Previously Cancer Services was hosted through the Medical Directorate with the responsibility for Cancer services – Oncology and Haematology being through the Medical Directorate Leadership Team until 2023 As an interim and whilst the organisational change process was progressing the line management was temporarily realigned to the Chief Officer Acute. The organisational change process has now concluded and the Cancer Services manager now reports to the Deputy Chief Officer Acute. The process highlighted the medical leadership structure should be strengthened with a dedicated post of Clinical | Aug 2025 | Service Manager (Derick MacRae), Operational Medical Director, Acute (Elaine Henry) | Post of Clinical director for cancer services currently in recruitment | |

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| | Director for Cancer being introduced. The introduction of this post would support the service Clinical leads for Oncology and Haematology who in the current configuration report to the Operational Medical Director Acute. | | | | |
| Requirement 1 | QAP018 will be amended to reflect that the ultimate responsibility lies with the practitioner, but all of those associated with patient pathway must be aware and be able to advise. | Jul 2025 | Head of Radiotherapy (Susann McCracken) | | |
| Recommendation b | Current documentation and work instructions are written in such a way as to enable pieces of work to be undertaken by different staff groups to aid flexibility. Ultimately it is the signature on the form which indicates who has taken individual responsibility on any specific occasion. Work instructions and documentation will be audited for clarity and compliance | Jul 2025 | Head of Radiotherapy (Susann McCracken) | | |
| Recommendation c | The quality assurance programme in NHS Highland is under constant review to ensure that necessary checks are undertaken as efficiently as possible. The information to provide assurance is embedded within the documentation that supports the QA programme. To support improvement the department has also just invested in software to further improve the management and recording of QA. In addition assurance on a compliant and adequate programme of QA is delivered at the Radiation Safety Committee in standard reports, | N/A | Head of Radiotherapy Physics (Steve Colligan) | No further specific action proposed, review indicates assurance and controls are in place. | 10/04/2025 |

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| | which would enable highlighting of any gaps. | | | | |
| Recommendation d | <p>It is acknowledged that peer review is the accepted standard of care as per Royal College of Radiologist guidance.</p> <p>However, because the oncologists in NHS Highland are single-handed and there are ongoing consultant staffing shortages this has been difficult to deliver consistently within job planned hours and requires support from other Boards which has implications for their job plans, funding and recruitment.</p> <p>There is some peer review of complex radiotherapy volumes in place both in house and with liaison with colleagues in other centres using remote meetings such as TEAMS.</p> <p>The method used for documentation of peer review is currently inconsistent so an agreed location within ARIA documents will be used as a temporary measure pending departmental implementation of Raycare oncology information system in the near future where it can form part of the patient pathway.</p> <p>The feedback from the review has been escalated for the attention of the Chief Officer (Acute) with a view to exploring how the expected standard required can be facilitated given the resource constraints currently within the NHS Highland Oncology service. Practical implementation would require the ongoing and increased support of other centres.</p> | N/A | Chief Officer Acute (Katherine Sutton), Radiation Policy Lead (Peter Cook) | | |

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| | Recommendation has been added to the Issues list of the IR(ME)R Steering Group. | | | | |
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Name: Peter Cook

Designation: Head of Medical Physics (and Radiation Policy Lead)

Signature: 

Date: 07/05/2025

In signing this form, you are confirming that you have the authority to complete it on behalf of the employer.