



North SACT Governance Group (NSGG) Terms of Reference (Revised December 2018)

Aim

The overall aim of the **North SACT Governance Group** is to work collaboratively across the region to provide assurance and governance of compliance with CEL 30 (2012) Guidance for the Safe Delivery of Systemic Anti-Cancer Therapy (SACT).

Objectives

The key objectives of the group are:

1. To provide overall governance to the SACT programme within the North including the risk register
2. To ensure delivery of the regional SACT work plan of the **North SACT Governance Group**
3. To provide oversight and governance of the work plan of the **North SACT Delivery Group (NSDG)**
4. To approve and govern the effective, collaborative approach by the NSDG, to the development of regional, evidence based-guidelines and policies including those detailed in CEL 30 (2012)
5. To provide governance in the process of audits of SACT services in accordance with CEL 30 (2012) (including mandatory audits) including risk identification and appropriate escalation
6. To discuss generic issues affecting SACT service delivery across the North and highlight issues to the **North Region Cancer Clinical Leads Group** including themes
7. To share best practice and learning across the region with regards to SACT delivery
8. To consider other areas, as and when required, relating to SACT delivery

Membership

Membership is aimed at representing the whole North region in units where SACT services are delivered across adult and paediatric services and is mainly comprised of SACT Clinical Leads although others will be invited for specific areas as and when required.

Chair: Ian Rudd, Director of Pharmacy, NHS Highland

- SACT Clinical Lead from each Cancer Centre including paediatric representation
- North Cancer Alliance (NCA) Clinical Lead
- Regional Lead Pharmacist
- Regional Manager Cancer (NCA)
- Administrative support

Expectations of Members

- a) To ensure regular attendance at meetings
- b) Membership and individual responsibilities of membership should be included in local job plans as per CEL 30
- c) To reflect the view of their constituent Health Boards/units at meetings (being clear when individual views are being presented) and respect the views and opinions of others

- d) To approve NCA policies and guidelines as identified and prioritised by NSDG within the work plan
- e) To work collaboratively to facilitate the approval of the identified regional guidelines
- f) To ensure timely communication within constituent Health Boards, the NSGG, and sub-groups or short-life working groups of the NSDG
- g) To ensure that group minutes or key actions are shared appropriately with local teams
- h) Where asked, to participate in agreed regional and national audits of compliance with CEL 30 (2012) within their own Health Board or as an external reviewer in audits of compliance of other constituent Health Boards within the North
- i) To declare any private interests or interests of their organisation relevant to their involvement in meetings

Meetings

- a) Meetings will be chaired by a Director of Pharmacy. If regular chair is not available, another Director of Pharmacy may deputise.
- b) The group will meet 3 times per year by video-conference and administrative support will be provided by the North Cancer Alliance.
- c) Dates of meetings will be identified a minimum of 3 months in advance
- d) For meetings to be quorate, the chair must be present, with at least one SACT representative from each board or appropriate deputy.
- e) The agenda and papers will be circulated no less than 5 working days in advance of the meeting and a call for items will be circulated to all members beforehand
- f) The draft action tracker will be circulated to members within 10 working days of each meeting
- g) Email communication will take place if decisions are required in a shorter timescale and additional meetings may be convened to consider urgent issues if appropriate
- h) The chair will provide an update of the group's work plan to the **North Regional Cancer Clinical Leads Group**.
- i) The terms of reference and membership of the group will be reviewed annually
- j) Resolutions of issues and disputes will be facilitated by the Regional Cancer Clinical Leads Group.

Governance and Accountability

The **North SACT Governance Group** is accountable to the **North Regional Cancer Clinical Leads Group**.

The North SACT Governance Group will invite a HIS representative to the meeting annually to discuss progress.