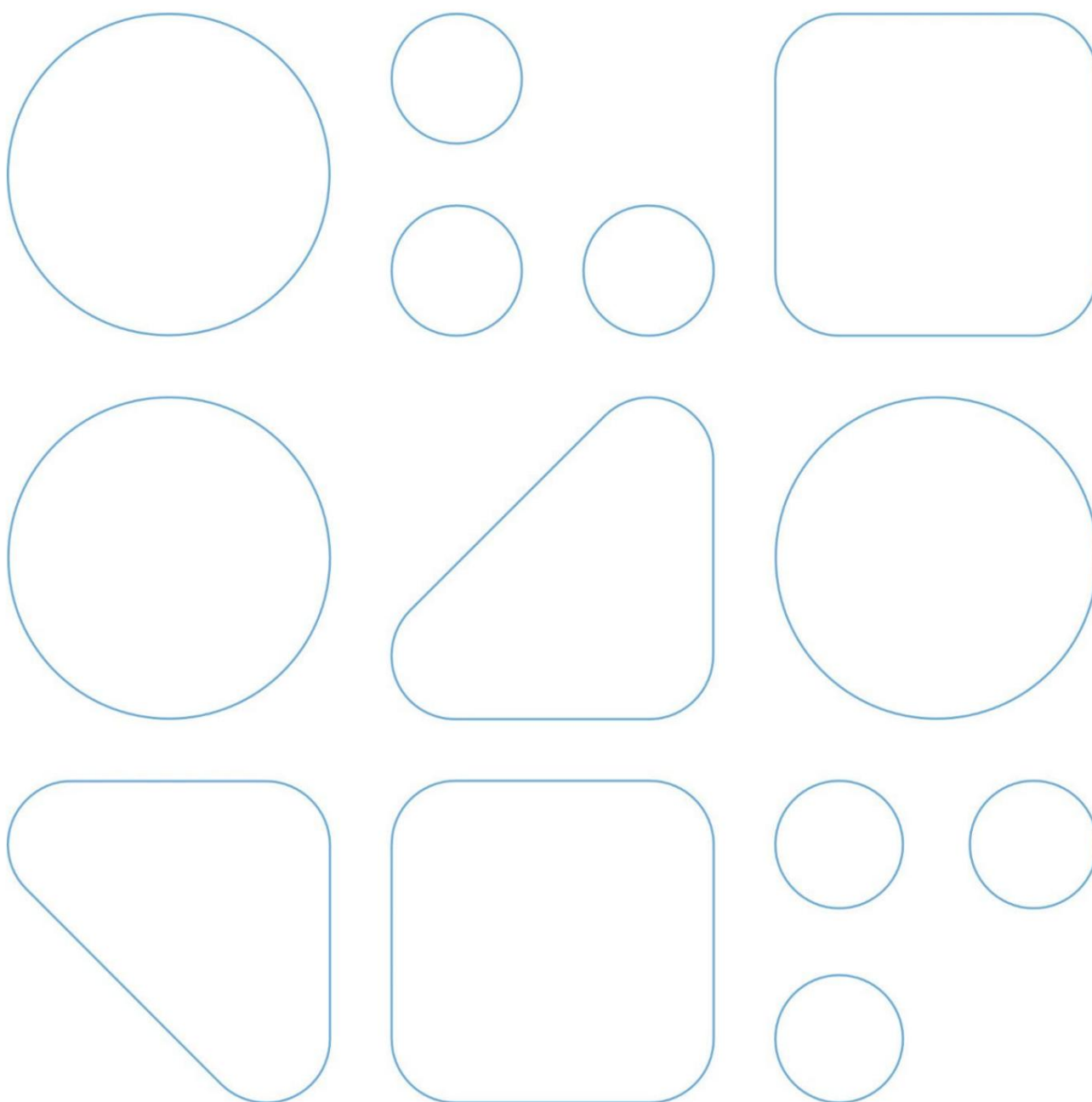


## Sub-plan 3: Cancer

2022-2026

20.04.2022



## **Development plan 2040**

### **Sub-plan 3: Cancer**

This plan is one of nine sub-plans under [Development Plan 20240, which describes Akershus University Hospital's \(Ahus\) main goals and plan for the development of the hospital up until 2040](#). The sub-plans describe specific projects and development initiatives that are planned for the next four years. The partial plans are rolled out and updated annually, as part of the company's prioritization and budget process.

Nine sub-plans have been drawn up:

Subplan 1: The elderly patient

Sub-plan 2: Acutely and critically ill patients

#### **Sub-plan 3: Cancer**

Sub-plan 4: Mental healthcare and substance abuse treatment

Sub-plan 5: Children and young people

Sub-plan 6: Competence and education, recruiting and retaining

Sub-plan 7: New tasks and further development of patient services

Sub-plan 8: New work processes and technology

Sub-plan 9: Research and innovation

## About the investment area

Akershus University Hospital has drawn up a cancer plan for the period 2017-2030 which lays down guidelines for how the health institution should work to develop its cancer care.

Cancer care must be organized within the framework of an accredited thematic cancer center with holistic patient processes and with research integrated into the processes.

A new building will be completed towards the end of the planning period where new treatment modalities in the form of radiotherapy will be established. Economic sustainability is an important foundation for all future development and activity.

### Goal setting

The partial plan provides a thematic overview of necessary projects and processes that must be carried out to realize the cancer plan within the plan period. The partial plan deals with the necessary measures for the next five years. Broader involvement in the partial plan work is planned from spring 2022.

### What has been achieved so far

Project title	Results (key words)	Implementation year
Training in clinical communication	4 Good habits established	2017
Establishment of robotic surgery	Established 2 operating robots in operation	2018
Establishment of PET-CT	Established in operation	2020
Establishment of an oncology bedside post	Construction and occupancy in the final phase 2022	
Project framework KSB	Approved in HSØ 21.10.21	2021

## Plan for the period 2022-2026

The cancer plan is the basis for the partial plan. The partial plan is intended to contribute to an operationalization of the Cancer Plan and describes overall projects and measures intended to be carried out in the time period 2022-2026. The sub-plan is divided into four overall effort areas with associated projects.

- **Area of focus 1** deals with project plans for the organization of cancer care for the realization of the target image "thematic cancer center with radiotherapy".
- **Area of focus 2** deals with project plans for the establishment of "Complete patient processes for cancer" within the framework of a thematic cancer centre.
- **Effort area 3** deals with project plans towards the target image "accreditation of a thematic cancer center".
- **Area of focus 4** deals with project plans for the establishment of a new cancer and somatics building at Ahus Nordbyhagen.

## Area of focus 1: Thematic cancer center with radiotherapy

### Project cancer program board

Cancer care at Ahus is to be developed strategically and managed holistically and coordinated across professional pillars, on the way towards a thematic cancer centre.

There is a need for an operational decision-making level under the hospital management, which, in addition to preparing proposals for strategic decisions, can coordinate the development of holistic cancer care at Ahus. It is planned to prepare a responsibility and decision-making mandate for a program management.

The cancer program board should coordinate operational management between clinics, and strategic management of Ahus in relation to cancer-related topics within patient care, research and education/competence development.

The following areas of responsibility should be covered:

1. strategic development of cancer care,
2. target achievement of patient-perceived quality of cancer care, 3. target achievement of medical treatment quality in cancer care,
4. accreditation of the cancer centre, 5. target achievement within the defined progress times in the package processes.

### Project expert council for cancer

To ensure a strong professional voice in the strategic development work, a forum will be established with clinical professionals. The expert council for cancer shall be a body that assists the cancer program board with regard to the development of cross-cutting activities in the area of cancer related to diagnostics, treatment, education/competence development and research. The composition of the professional council must take into account both patient-related and subject-specific perspectives. It will ensure that the subject-specific development within the various subjects that treat cancer patients is taken into account in the strategic development of cancer care, while at the same time making possible synergistic effects visible.

A project is being established to establish a specialist council for cancer and to define which responsibilities should be added to this.

The following investment areas should be covered:

1. development of clinical practice,
2. development of patient history etc.
3. development of transversal research projects,
4. development of synergy effects.

### Project progress manager

The project aims to establish a function as progress manager for each patient progress, as they are defined in the package progress.

Progress organization of standardized patient progress is based on a coordinated effort across departments and divisions, and with municipalities and districts.

Line organization presents challenges related to good transitions internally.

The process manager's main tasks include implementing strategic decisions related to the patient process, measuring patient-perceived quality, improvement measures, coordinating collaboration between internal and external actors, as well as integrating research into patient processes. In the further work, it will be central to establish meeting forums for discussion of goal achievement and improvement of interaction in the process. The progress supervisor will lead this work and be responsible for goal achievement.

Close cooperation must be established with the municipalities regarding transitions between the levels of care and joint initiatives to improve patient processes. It must be clarified what role the healthcare communities should play have in such a collaboration.

In the work to establish a process manager, it must be clarified with the specialist departments how responsibilities and tasks are to be distributed, and which form of collaboration is suitable for improving patient processes.

### **Project progress coordinator**

Most package courses currently have course coordinators, but not all. In addition, there is great variation in how this role is exercised. The main aim of the project is to establish separate process coordinators for all 26 organ-specific package processes with defined function descriptions. The course coordinator will be the patient's contact person and guide through the course of treatment and ensure the operative implementation of the transitions between treating departments in the patient course.

### **Project collocation of services**

Several projects are being established to make gains from co-locating services. Co-location should be investigated within a breast diagnostic centre, a prostate centre, shared infusion unit, collection of diagnostic services and co-location of inpatient care for cancer patients. In addition, there will be a closer look at any gains linked to collocation of palliative care patients and patients in curative cancer treatment.

### **Establish radiotherapy services**

Ahead of the establishment of the radiation centre, there will be a project for competence building in radiation therapy, in consultation with the oncology department and the competence and education department.

## **Area of focus 2: Comprehensive patient processes for cancer**

A main goal of the development of cancer care at Akershus University Hospital is to develop holistic patient processes. This means expanding the definition of package progress to also include diagnostics, prehabilitation, treatment, rehabilitation and palliation. Learning and mastery training is an integral part of both pre- and rehabilitation.



**Project package progress home, collaboration on the transitions from specialist healthcare to primary healthcare**

The Norwegian Directorate of Health has drawn up a home delivery process for cancer patients to be implemented nationally in 2022. The purpose of the home delivery process is to ensure predictability for patients and quality in assessment and treatment in the specialist health service and in municipal health and care services. In the project work, it must be described how the patient's needs are to be mapped and interaction between primary and specialist healthcare is to be established.

**Project prehabilitation in the course of cancer**

The patient processes should be built around the defined package processes. In principle, patient courses should be built up with the main components *diagnostics, prehabilitation, treatment and rehabilitation*.

Both prehabilitation and rehabilitation should contain nutritional guidance, physical training guidance and a learning and mastery offer, adapted to the individual package course. The main goal of prehabilitation is to mobilize the resources in and around the patient to put them in the best possible condition to withstand the treatment physically and mentally. This will be investigated and adapted to the individual cancer package course, since the onset of symptoms, investigation, treatment and course times vary between the cancer package courses.

The work will have several sub-projects linked to the existing package processes. In order to be able to include more patients in prehabilitation, it should be investigated to what extent prehabilitation can be offered in the patient's home municipality under guidance from the health authority. A collaborative project with municipalities will be implemented to establish principles from prehabilitation in the home municipality.

**Establish learning and coping services in all cancer processes**

A project will be launched for the establishment of learning and coping services in those cancers that currently do not have such an offer. It includes surveying training needs, obtaining a knowledge base and experiences from other healthcare organisations, as well as developing content in collaboration with municipalities and districts.

**Establish a Care center for peer work**

A project for the establishment of a Care Center is planned to be carried out in collaboration with the Norwegian Cancer Society. The care center will be able to supplement Pusterommet as an arena for both prehabilitation and rehabilitation. In addition, it will be an arena for peer work.

**Establish cancer rehabilitation**

Establishing cancer rehabilitation as an offer to all cancer patients is being investigated in a separate project.

The rehabilitation offer should at least include nutrition guidance, adapted physical training and learning and coping services. In addition, consideration will be given to setting up a delayed injury outpatient clinic for patients with late injuries after cancer treatment.

**Quality targets must be established**

Measurement of patient-perceived quality in addition to medical treatment quality will be an important basis for further improvement work and development of the service offer. A project will therefore be established in collaboration with the specialist departments to establish routines for regular measurement and follow-up of both treatment quality and patient-perceived quality for all cancer package courses.

### **Area of focus 3: Accreditation**

Another main goal is to achieve accreditation as a cancer center by the Organization of European Cancer Institutes (OECI) to ensure an external evaluation of the quality of cancer care at Akershus University Hospital.

#### **Facilitate thematic research and establish new meeting places**

A project is being established to investigate measures for increased thematic research around the major patient processes and as part of the patient processes. The project is linked to a sub-plan for research and innovation and a sub-plan for new tasks and further development of patient services.

#### **Establish a strategic platform for the cancer center that contains goals and measures for patient progress, research and quality work**

A project is being established to develop a strategic platform for the cancer centre. The following focus areas should be included: (i) targets and measures for patient progress, (ii) targets and measures for research, (iii) targets and measures for quality work. This work will take over the prerequisites for accreditation defined by the Organization of European Cancer Institutes

### **Area of focus 4: New cancer and somatics building with radiotherapy capacity**

In order to meet the future projected need for somatic treatment capacity and to organize cancer care within the framework of a thematic cancer centre, Akershus University Hospital has planned to erect a new cancer and somatic building (KSB). The work is connected to the property strategy.

#### **Concept phase KSB**

Concept phase work will be carried out in line with the early phase guide for hospital construction.

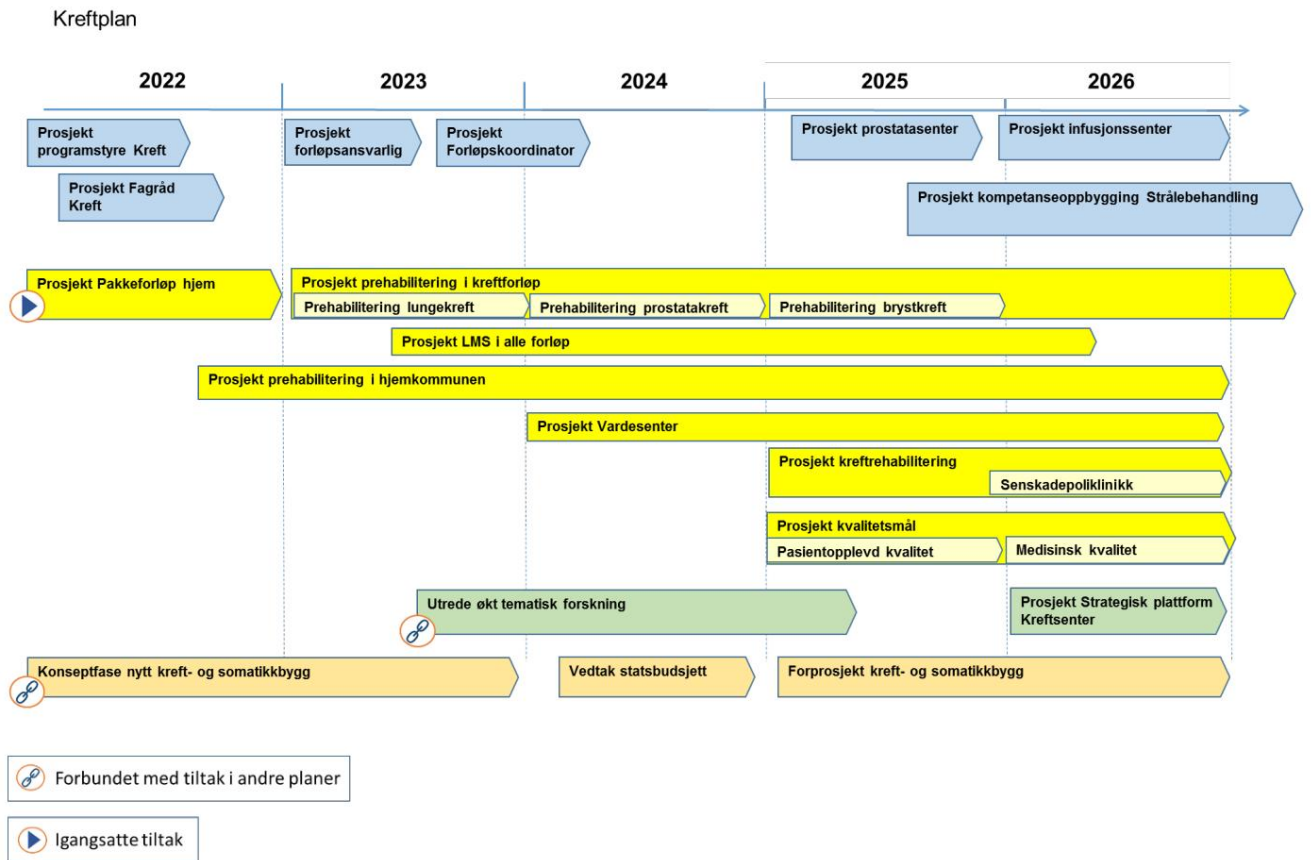
#### **Pre-project phase KSB**

The pre-project phase work will be carried out in line with the early phase guide for hospital construction.





## Process drawing



Sub-plan 3: Cancer

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