



National Cancer Control Programme

Role description

National Clinical Lead – Psycho-Oncology



1. Overview of National Cancer Control Programme and policy context

The National Cancer Control Programme (NCCP) was established in 2007. The purpose of the NCCP is to implement the recommendations of the National Cancer Strategies, the most recent of which was published in 2017¹. The NCCP is responsible for the planning, organisation and support of publicly funded cancer services in Ireland. The NCCP works with health service providers to prevent and treat cancer, and increase survival and quality of life for those who develop cancer, by converting the knowledge gained through research, surveillance and outcome evaluation into strategies and actions.

The incidence of cancer is projected to double in the next 25 years. As cancer treatments improve and become more targeted, more people are living with and beyond cancer. The National Cancer Strategy 2017-2026 identified the significant challenge facing the cancer service in the coming decades. The Strategy set out a demanding programme of recommendations aimed at reducing the cancer burden, providing optimal care to address current deficits and future demand for cancer services in Ireland, maximising patient involvement and quality of life for those who have or have had cancer and developing a robust approach to enabling and measuring change. Government has invested annually in the 2017 Strategy and it is expected that investment will continue to be made on an incremental basis for the remaining years of the current Strategy. The Strategy provided a renewed focus and impetus for the work of the NCCP to realising its central role in cancer services in Ireland.

2. Psycho-Oncology as a focus of the National Cancer Strategy 2017-2026

The National Cancer Strategy 2017-2026 recommended the development of psychosocial support and psycho-oncology to address the needs of cancer patients and their families. Psycho-oncology is a multi-disciplinary speciality focusing on the psychological, physical and mental health care of people affected by cancer, their carers and families. Psycho-oncology recognises that cancer has a significant psychological impact on patients and families and that this can occur at any point - from the time of diagnosis onwards. It is recognised that between 20-52% of patients show a significant level of distress with 10% to 15% of that group experiencing clinically significant levels of distress (NCCN, 2019). The integration of psycho-oncology into routine care for cancer patients and their families represents a major step forward in terms of care for the whole patient. Cancer is not just a medical illness but can also have significant psychological and social consequences for both the family and patient. Quality cancer care today must integrate the psychosocial domain into routine cancer treatment and survivorship.

¹ National Cancer Strategy 2017-2026. Available www.health.gov.ie . See Appendix for key recommendations relevant to this role.



3. Scope & purpose of post

The purpose of the post is to:

- Work with the National Director, Senior Leads and other colleagues and partners to advise on the development and implementation of a programme of work for psycho-oncology **by providing clinical leadership to the NCCP**. This may include developing evidence-based models of care, care pathways, guidelines and quality indicators, governance oversight as appropriate.
- Work with cancer providers in acute and community settings and across sectors to improve the provision of psycho-oncology to patients with cancer.
- Advise on education and training in psycho-oncology (for medical, nursing and other oncology team members) in collaboration with national training bodies.
- Utilise national and international academic, clinical and health system evidence and expertise to advise on continuous improvement in the cancer psychosocial care pathway.

The National Clinical Lead for Psycho-Oncology will work with the National Director, members of the NCCP National Executive and Internal Management Forum, relevant NCCP programmes (in particular due to cross cutting aims the Survivorship and Nursing programmes), and other relevant stakeholders within and external to the HSE, to develop and implement a programme of work for psycho-oncology.

The National Clinical Lead will work within the context of an overall agreed national governance structure as set out for all NCCP Programmes. It is through this governance structure that Programme models of care, documents, guidelines and support tools will be approved.

The Post holder's location will be agreed prior to commencement of the post for two days per week (0.4 WTE). The role is for four clinical sessions per week (14 hours approximately)(Monday-Friday). The initial commitment may vary over the course of the work of the programme. For example, in some cases, a greater commitment may be appropriate, particularly in cases of new programmes and projects, while a lesser commitment may be appropriate as programmes become more established.

4. Responsibilities

It is the responsibility of the Clinical Lead to work with relevant stakeholders to review and update the national model of care for psycho-oncology with associated national clinical guidelines, care pathways, care bundles and other tools and resources as required.

In conjunction with the NCCP's National Director and Senior Leads, the National Clinical Lead for Psycho-Oncology will be responsible for:

- Providing clinical leadership for the Psycho-oncology programme, by advising on the work of the Psycho-oncology programme and collaborating amongst clinical colleagues including other clinical leads, CHOs, patients and patient advocacy organisations and other relevant stakeholders.

The prioritised implementation of relevant elements of the National Cancer Strategy, in line with the NCCP Strategy Implementation Plan. The Clinical Lead will be expected to contribute to on-going planning for

- Implementation and also will be expected to work strategically with other areas of NCCP programming to improve patient psychological and social wellbeing and to improve patient outcomes.
- Implementation of relevant elements of the HSE National Service Plan and Operational Plan and contributing to the development of the annual Estimates and Service Plan process in relation to psycho-oncology services.
- Adopting a strategic and integrated approach to planning and developing cancer services that will meet the needs of the population of Ireland over the coming years and decades.
- The development of evidence-based patient pathways and models of care/service delivery relevant to psycho-oncology.
- Collaborating to develop services to meet the International Paediatric Psycho-Social Oncology Standards of Care for children with cancer and their families.
- Ensuring that psycho-oncology services are developed in a way that is equitable, accessible, quality driven and effective.
- To align developments with evolving models of care in mental health services across the HSE.
- Ensure the robust and evidence-based development of standards of care, national guidelines, SOPs, quality standards, quality assurance processes etc. within the area of psycho-oncology and in line with HSE, NCEC, HIQA and PPPG² standards and in conjunction with relevant external bodies, as appropriate.
- In conjunction with the NCCP's Head of Cancer Intelligence, development of robust performance and quality indicators, data collection and generation of intelligence to inform planning and implementation.
- Developing core competencies and CPD criteria for professionals and service providers, in conjunction with external bodies, as appropriate.
- Continue to provide expert guidance in view of changing clinical practice.
- Act as a spokesperson for the NCCP/HSE in relation to psycho-oncology as required
- Advise on the ongoing development of the Best Practice Guidance for Community Cancer Support Centres and Services.
- Work with relevant patient groups and patient representatives to ensure the voice of the patient is considered as practices and guidelines are defined.
- The development of evidence-based patient pathways and models of care/service delivery relevant to psycho-oncology, across primary care services, regional health authorities and the community cancer support sector, as appropriate to the nature of the service.
- Provide regular updates to the NCCPs IMF and National Executive on progress, successes and challenges.
- Adhere to the HSE communications protocol for any interaction with the press or media and in relation to any public relations events or queries.
- Make information available to programme managers or assigned person in respect of parliamentary questions or representations from Oireachtas members through the office of the National Director of NCCP.
- Comply with Freedom of Information and Data Protection legislation.
- Comply with the Ethics in Public Office and the Controls Assurance Statement process as required.

² National Framework for developing Policies, Procedures, Protocols and Guidelines (PPPG)



The above Job Description is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.

5. Reporting relationships

The National Clinical Lead for psycho-oncology will report to the National Director of the NCCP. The Lead will ensure that the National Director, the NCCP National Executive and the Internal Management Forum are provided with all necessary information to exercise good governance and implement policy responsibilities as required in relation to psycho-oncology services.

The National Clinical Lead will work closely with other clinical leads in the NCCP, Assistant National Directors, Senior Programme Leaders, project managers and other staff of the NCCP. The Lead will be supported by and chair the national psycho-oncology advisory group, of relevant multidisciplinary and patient stakeholders. This group may be supported by additional experts on specific issues as required.

6. Terms and conditions of office

The appointee's current terms and conditions of employment will be retained with their primary employer(s). The Clinical Lead role is for four clinical sessions per week (14 hours approximately) (Monday-Friday). The Clinical Lead role is for two days per week (0.4 WTE) Monday-Friday for a fixed period of three years, on the basis of a formal HR arrangement with the appointee's primary employing authority. There will be a review after six months in the role. The post is structured in such a way so as to facilitate the post-holder to maintain a clinical commitment. The post will be re-advertised at the conclusion of the three year period.

During the term, a performance and development plan will be prepared by the Clinical Lead, in line with goals and parameters that are mutually agreed with the National Director of the NCCP. This plan will be monitored by the National Director.

The NCCP will provide funding to the appointee's base location for the approved time commitment on a pro-rata basis, on the basis of a formal HR agreement between the NCCP and the base location. It is the responsibility of the appointee to seek approval from their current employer to facilitate their role with the NCCP.

A Clinical Lead may be re-appointed, following the conclusion of a recruitment process, for a second term, to a maximum of two three-year terms.

As the Health Service is going through structural changes with the emergence of the Regional Area's, the structures of the programmes and the working relationships may require amendment over the period of this term.

7. Eligibility Criteria

Prospective candidates must:

- Be from one of the disciplines of the multidisciplinary psycho-oncology model of care (psychiatry, psychology, social work, specialist nursing) with no less than 10 years of post-professional qualification experience in a clinical setting.
- Be an employee of the HSE, other public funded health sector agency (i.e Section 38³/39)
- Be a registered member of (or eligible for) the relevant professional body of their respective discipline.
- Demonstrate experience of service design, service improvement and change management.
- Demonstrate a willingness and commitment to partnering with patients in the development of high quality cancer services and a track record in this area would be highly advantageous.
- Having some clinical experience in Paediatric Psycho-Social Oncology Care and/or the willingness to engage with the unique challenges of a child-centered service.
- Have a profile of peer recognition at national and/or international level.
- Have the ability to recognise and respect the expertise and contribution of team members and harness this for the achievement of programme aims.
- Have demonstrated capacity in knowledge generation, transfer and application.
- Have the capability to identify health care needs and address inequalities in health care provision.
- Demonstrate commitment to fostering partnerships, multi-professional and multi-disciplinary relationships, multi-institutional relationships, and collaborative, programmatic development across primary, community and tertiary constituencies.
- Have demonstrated alignment with population-based approaches to improved health outcomes, including the deployment of evidence as a basis for 'best practice', prioritisation and resource allocation.
- Demonstrate excellent inter-personal skills, including experience and familiarity with patient, public, professional, media and political communications and stakeholder relations.
- Demonstrate acceptance of environments characterised by ambiguity, change management, continuous development and a requirement for flexible and creative approaches to resolution.
- Demonstrate capability to effectively engage in the development of a transparent and objective resource utilisation model.

³ Section 38 of the Health Act 2004



Knowledge & Skills

- Have the ability to recognise and respect the expertise and contribution of team members and harness this for the achievement of service aims.
- Have the capability to identify health and health care needs and address inequalities in health and health care provision.
- Demonstrate working knowledge of health service structures and governance with regard to service development and resources

- Demonstrate commitment to fostering partnerships, multi-professional and multi-disciplinary relationships, multi-institutional relationships, and collaborative, service development across primary, community and tertiary constituencies.
- Have demonstrated alignment with population-based approaches to improved health outcomes, including the deployment of evidence as a basis for 'best practice', prioritisation and resource allocation.
- Demonstrate excellent inter-personal skills, including experience and familiarity with patient, public, professional, media and political communications and stakeholder relations.
- Demonstrate acceptance of, and comfort with, environments characterised by ambiguity, change management, continuous development and a requirement for flexible and creative approaches to resolution.
- Demonstrate capability to effectively engage in the development of a transparent and objective resource utilisation model.

8. Application process

Interested candidates should submit a cover letter and CV to Ms. Alison Kiersey, Human Resources, NCCP, by email: human.resourcesscc@cancercontrol.ie no later than 12noon Friday, 10th January, 2025. Please include the name of the post you are applying for in the subject title of the email. Candidates will be selected for skills match by a panel representing the speciality and NCCP.

Informal Enquiries about the role can be directed to :

- Professor Risteárd Ó Laoide, National Director NCCP risteard.olaoide@cancercontrol.ie
Tel: 0868233412

- Ms. Louise Mullen, National Lead for Cancer Survivorship –louise.mullen@cancercontrol.ie
Tel: 0867810307

Interviews are expected to be held in early February, 2025, date to be confirmed

Appendix

Key elements of the National Cancer Strategy 2017-2026 as relevant to the role

29	The NCCP will appoint a National Clinical Lead for Psycho-oncology to drive the delivery of networked services
30	Psycho-Oncology - Each designated cancer centre will establish a dedicated service to address the psycho-social needs of patients with cancer and their families. This will operate through a hub and spoke model, utilising the MDT approach, to provide equitable patient access.
43	Survivorship - Designated cancer centres working with the NCCP, the ICGP, primary care services, patients and voluntary organisations will develop and implement survivorship programmes. These programmes will emphasise physical, psychological, and social factors that affect health and well-being, while being adaptable to patients with specific survivorship needs following their treatment.
27	Childhood Cancer - The HSE will develop closer links, on a hub and spoke model, between the National Centre for Child and Adolescent Cancer and the other designated cancer centres to provide appropriate and flexible transition arrangements for adolescents/ young adults. This will include the joint appointment of adolescents/ young adults oncologists and haemato-oncologists and the provision of age appropriate psycho-social support for these patients.
31	Palliative Care - Designated cancer centres will have a sufficient complement of specialist palliative care professionals, including psycho-oncologists, to meet the needs of patients and families (such services will be developed on a phased basis to be available over seven days a week).
12	The NCCP will further develop the model of care for cancer to achieve integration between primary care and hospital settings at all stages of the cancer continuum, from diagnosis to post-treatment care.