This action plan is provided as a template only and should be adapted for local use with further actions as relevant to the specific service implementation initiative(s). The template includes actions relevant to the service options included in this toolkit. Where actions are specific to one pathway only, this is clearly indicated.

**Template action plan for molecular radiotherapy service implementation**

|  |  |  |  |
| --- | --- | --- | --- |
| **Action** | **Responsibility** | **Due date** | **Date completed** |
| **Project initiation and stakeholder engagement** | | | |
| Confirm stakeholder involvement, make contact and track responses |  |  |  |
| Organise kick off meeting with project team |  |  |  |
| Assign a project manager |  |  |  |
| Agree project scope |  |  |  |
| Map current treatment/patient pathway |  |  |  |
| Plan service evaluation and data collection |  |  |  |
| Stakeholder consultation (NHS colleagues [in-Trust or external], and patients) |  |  |  |
| Contact example Trusts to gain advice/share best practice (e.g. obtain draft SOPs, reports, and service evaluation forms etc) |  |  |  |
| **Service evaluation and data collection** | | | |
| Finalise project plan, gain relevant local approval and collect data |  |  |  |
| Evaluation metric 1 |  |  |  |
| Evaluation metric 2 etc |  |  |  |
| Analyse data and prepare findings for service implementation meeting |  |  |  |
| **Service redesign implementation planning** | | | |
| Organise service implementation/redesign meeting with all key stakeholders |  |  |  |
| Agree service delivery model. Determine feasibility of a centralised or blended service, if appropriate |  |  |  |
| Map out the target patient pathway and journey, including all aspects of service delivery |  |  |  |
| Develop comprehensive action plan and next steps, including responsibilities for key actions and project milestones |  |  |  |
| Business case development |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Funding considerations** | | | |
| Clarify funding arrangements and tariff use with business managers |  |  |  |
| Develop formal business case |  |  |  |
| If VAT savings are included, ensure that consideration is given to ensure that the eligibility requirements are met and that the project is not dependent on them |  |  |  |
| *Outreach only* |  |  |  |
| Agree what outreach service will be provided if any and how this interacts with the main service |  |  |  |
| Discuss commissioning arrangements with regional specialist commissioners and/or local CCG commissioners as relevant |  |  |  |
| **Staff and training requirements** | | | |
| Assess staff resourcing required to provide the service. Perform a gap analysis to determine what skills are available and what is needed |  |  |  |
| Recruit new staff (if necessary) |  |  |  |
| Review training requirements and create a training plan for new and existing staff referring to gap analysis |  |  |  |
| Develop training materials for clinical, scientific, technical, nursing, administration and radiopharmacy staff, and patient information leaflet(s) |  |  |  |
| Pharmacy guide for compounding (if required) and storage |  |  |  |
| Patient information leaflets |  |  |  |
| **Pharmacy considerations** | | | |
| Ensure radiopharmacy staff are trained on reconstitution and storage. This may be needed for both diagnostic and therapeutic radiopharmaceuticals |  |  |  |
| Ensure non radioactive drugs such as anti-emetics and amino acid infusions are on hospital formulary and available |  |  |  |
|  |  |  |  |
| Ensure that there are appropriate storage and transportation facilities (e.g. temperature-controlled vehicles and/or radiopharmacy cool boxes if required) |  |  |  |
| **SOPs and policy management** | | | |
| Agree with stakeholders the SOPs and policies required for implementation of molecular radiotherapy services |  |  |  |
| Develop and approve required policies (note not all policies below will be required for each service model). Ensure plans have been reviewed by hospita/Trust clinical governance system and if relevant New Drugs Committee |  |  |  |
| Adverse event management |  |  |  |
| Environmental agency licenses |  |  |  |
| Staff training including ARSAC IRMER licences |  |  |  |
| Secure treatment administration setting including treatment area, toilets and if in-patient shower facilities |  |  |  |
| Risk assessment, radiation exposure and radioactive waste management |  |  |  |
| Methods of contact with patients (e.g. use of email, text service, video conferencing) |  |  |  |
| Administration information (e.g. premedication, administration rate, etc) |  |  |  |
| Clinical escalation procedures and emergency procedures (i.e. understanding of local protocols on drugs used and adverse event management/dose changes) |  |  |  |
| **Service evaluation** | | | |
| Finalise evaluation plan, gain relevant local approval and collect data |  |  |  |
| Evaluation metric 1 |  |  |  |
| Evaluation metric 2 etc |  |  |  |
| Analyse data and assess findings |  |  |  |
| Disseminate findings to project team and agree any follow-up actions and/or service refinements |  |  |  |