

National Assembly for Wales

[Health and Social Care Committee](#)

[Inquiry into the progress made to date on implementing the Welsh Government's Cancer Delivery Plan](#)

Evidence from National Cancer Trials Network – CDP 32

Cancer Delivery Plan Consultation

Contribution from NISCHR Clinical Research Centre Senior Management Team

As a Network with responsibility for supporting cancer research activity across Wales, NISCHR CRC welcomes the revised clinical trials target (15% overall with 7.5% into more complex interventional studies) being included in the CDP. This helps give research the profile it needs in the context of service delivery.

NISCHR CRC contributes to increasing the numbers of patients in trials, the access of patients to trials and supports cancer research across the NHS in Wales through direct staff support, information, communications, portfolio management, involving the public and providing Wales-wide research training. The Network has had a significant impact. Patients with cancer in Wales had a 1 in 35 chance of taking part in research when the Network was established in 1998 and this is now 1 in 7. Research aimed at improving treatments are now a much more routine part of patient care and this is very encouraging.

The governance structures for delivering, communicating about and monitoring the CDP are not always robust enough to ensure that a national issue like research stays on the agenda consistently. There is a need for national oversight and co-ordination of the operational response to policy. The regional cancer service networks do not currently fulfil this role.

A priority issue that would benefit from national co-ordination from our perspective is linking information about research participation with Local Health Board, MDT and clinical data. This would help monitor activity and patient referrals in relation to the research targets in the CDP.

With regard to progress on implementing the Cancer Plan, the report acknowledges that the Cancer Research UK Stratified Medicine Programme has 'contributed significantly' towards overall recruitment, therefore without it, 15% of overall recruitment may be difficult to sustain. Our Senior Management Team's view is that 7.5% interventional recruitment target may also be challenging to achieve by 2016. This is due a range of factors, clinical capacity in support departments (specifically radiology & pathology) being the main one, but also the capacity of clinicians and our own Network staff. The development of targeted therapies over the last few years has also had an impact. Trials are becoming increasingly complex and time consuming with lower numbers of patients needing to be recruited per trial. We now need to be opening many more trials to be able to recruit the number of people

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required to reach a 7.5% target. Clinical capacity will need to be addressed if we are to continue to make good progress in cancer research.

Continuing reorganisation and restructuring of the Health service in Wales over the last few years has not helped cancer research to become as embedded as we would have liked. Research needs cancer services to be stable in order to thrive.

Lucy Seago

Director of Operations, NISCHR CRC on behalf of Senior Management Team

April 2nd, 2014