PURPOSE

The principal goal is to advise on the development of patient centred, evidenced based, sustainable and effective clinical services across the continuum of care, based on population need, as outlined in the SA Health Care Plan and the Statewide Cancer Control Plan.

ROLE

1. Represent and advocate for South Australia at national and state forums
2. Provide advice and leadership in the co-ordination, planning and development of state-wide cancer services. This will include but not be limited to the co-ordination of a consistent approach to state-wide implementation of Cancer plan recommendations, policies and priorities.
3. Oversee the development and implementation of a state-wide Quality and Safety framework for cancer.
4. Receive reports from SACS Committees and oversee the progression of recommendations.
5. Respond to issues raised by the SACS Committees.
6. Identify, select and prioritise activities and projects for the SACS Strategy, Operational and Reform Committees, which support the implementation of change.
7. Advocate and define workforce redesign models and support the implementation of the Cancer Nurse Practitioner program across the state.

REPORTING RELATIONSHIPS

- SA Cancer Service reports SA Health CEO via the Chief Executive Officer of the Central Adelaide Local Health Network (CALHN), who acts as the Lead CEO for the SA Cancer Service on behalf of all LHN CEOs.
- SACS provides direct or indirect reporting line for staff employed to support or progress state-wide programs, projects and initiatives.
- SACS provides a single point of contact across SA Health for cancer-related activities.

MEMBERSHIP

Membership will be determined by the SACS Service Director in conjunction with the Chief Executive, Department of Health. SACS will work collaboratively with Chief Executive Officers and Cancer Service Directors within the Local Health Networks, and with the Department of Health. The SACS Executive Committee will have a core membership comprising of the following:

- Service Director, SA Cancer Service
- Professional Nurse Lead SA Cancer Service
- Manager SA Cancer Service
- Executive Assistant SA Cancer Service
- Chairperson Operational Committee
- Chairperson Strategy Committee
Chairperson Reform Committee
The Chair, may invite persons who are not members to any meetings
The Deputy Chair shall be Professional Nurse Lead SA Cancer Service

REVIEW
Evaluation of SA Cancer Service will occur in November each year with ongoing evaluation of SACS incorporated within an annual report provided to SA Health and LHN CEOs via the CEO CALHN.

OPERATING PROCEDURES
Meetings
- Meeting frequency is at the discretion of the group, but initially monthly.
- Out of session advice and briefings will be tabled and noted formally.
- As out of session communication will be required for urgent issues between meetings. Feedback and/or review of documentation responses are to be provided within requested timeframes. No response will be viewed as consent or agreement.
- Resolution of dissenting issues shall be achieved by a vote of members present and the Chairman shall have the casting vote.
- Quorum: 50% of the members constitute a quorum.
- If a declaration of conflict of interest is required (competing professional or personal interest such as services that can only be provided by a member), the member will on advice of the Chairman either refrain from voting/participation in consensus decision making or retire from the room at that point.
- Members shall respect the confidentiality of SACS business where this requirement is conferred by the Chairman.
- Member communication of SACS business within the public arena should be coordinated with and authorised by the Chairman prior to publication.
- Members have a responsibility to canvas views and provide feedback to constituent groups as appropriate to their role and as directed by the group.
- The group, through or at the direction of the Director, is able to co-opt/seek expert advice on a needs basis.
- The Secretariat will issue agendas and supporting material at least seven days in advance and prepare minutes from each meeting.
- Attendance will be audited, with an expectation that members attend 75% of the scheduled meetings each year.
- The issue of proxies will be addressed at the first meeting in 2014.

EXPECTED OUTCOMES
The South Australian Cancer Service will bring to the South Australian health system:
- An increased level of clinical leadership and involvement in the development and planning of health services across the continuum.
- A more flexible workforce with opportunities to work within a broader team-based environment and an ability to implement evidence-based practice changes more quickly.
- A reduction in professional isolation and competition through a partnership approach to service delivery.
- Focus on the continuum of care across the life span from prevention and primary health care through to ‘in hospital’, to ‘out of hospital care’, chronic disease management and community-based care.
- More rapid response to changing service demands based on population needs and consumer involvement.
- Increased participation in research and improved education (recognising that these are inseparable from enhanced clinical care).