



Institiúid Ailse Choláiste
na Tríonóide/San Séamas

Trinity St James's
Cancer Institute

Compassionate care, revolutionary research

Trinity St James's Cancer Institute Annual Report 2023



OECD

RPMN 0473647634

Certificate of Accreditation and Designation

OECD

Hereby certifies that the Trinity St James's Cancer Institute, Dublin, Ireland meets the quality standards for cancer care and research and it is, therefore, designated as an **OECD**.

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Introduction From Directors



It gives us great pleasure to introduce the 2023 Annual Report of the Trinity St James's Cancer Institute. This document summarises the extensive collaborative work of the administrative, clinical, educational and research staff of TSJCI as they seek to provide the very best of modern treatment to our patients.

The quality of services provided, in the context of ever increasing demand, is remarkable. This is reflected in a series of recent initiatives in a variety of areas designed to improve outcomes for our patients. These range from the expansion of next generation sequencing by the Cancer Molecular Diagnostics Laboratory, significantly reducing the clinical burden of serial testing and the time to diagnosis for patients, through the establishment of a Pelvic Oncology MDT which provides a national forum for discussion and planning of treatment for patients with complex pelvic malignancies, such as recurrent gynaecologic, bladder or rectal cancers. Further developments in 2023 outlined here include the establishment of a Geriatric Oncology Clinic specifically for elderly patients about to commence chemotherapy, the creation of a passport for patients with gynaecologic cancers outlining important supportive information, resources and visual aids related to their diagnosis and care plan, and the rapid expansion of the Home Enteral Feeding Service provided by colleagues in clinical nutrition.

The quality of our research continues to be recognised by funding agencies. We are particularly proud that 2023 saw the initiation of CLuB – a €4 million research “Hub of Excellence” including Trinity College Dublin/TSJCI, Queen's University Belfast, and the University of Galway and funded by the Government of Ireland via the HEA, under the North-South Research Programme and led by Prof Lorraine O'Driscoll, TSJCI Research Lead. Success continued with the funding of AllCaN a programme led by Prof Jacintha O'Sullivan, TSJCI Education Lead, which will establish for the first time an all-Ireland oesophageal cancer consortium, bringing together experienced scientific, clinical and industry teams to develop improved detection, intervention, diagnostics and therapeutics for this most important disease.

The rapid expansion and aging of the population, combined with the ever-increasing complexity, cost and reach of novel therapies continue to place demands on all services. Welcome appointments of new staff to critical areas such as survivorship, innovative approaches to follow-up and patient-driven demand for more complex therapies have not been matched by improved resourcing of core services such as radiology, laboratory medicine, operating theatres and inpatient facilities in general. We are putting in place mechanisms to systematically address these deficiencies but the success of this approach remains dependent on the availability of funding through the NCCP.

Our key priority for 2024 will be to successfully complete OEI accreditation as a comprehensive cancer centre. We are confident that, with the support of the extensive network of colleagues in TCD, St Lukes and SJH, TSJCI can clearly demonstrate that we have the services, focus, innovation and national leadership to achieve this milestone.

Prof John Kennedy
Medical Director

Prof Maeve Lowery
Academic Director

Trinity St James's Cancer Institute Governance

The Trinity St James's Cancer Institute (TSJCI) is a collaboration of St James's Hospital (SJH), Ireland's largest hospital, and Trinity College Dublin (TCD), Ireland's premier university. In 2019, TSJCI was designated as a Cancer Centre by the Organisation of European Cancer Institutes (OECI), the first in Ireland. The TSJCI is formally constituted under a memorandum of understanding (MoU) between the institutions, agreed and signed by the CEO of St James's Hospital and the Provost of Trinity College Dublin in June 2021.

The TSJCI Governance Committee was established in 2021. The committee is chaired by an external chairperson, jointly appointed by the CEO of St James's Hospital and the Provost of Trinity College. The principal functions of the Governance Committee are to promote, encourage and foster the establishment and maintenance of high standards and best practice in the conduct and delivery of research, cancer care, cancer clinical trials and education, and to develop and oversee the implementation of the TSJCI strategy for approval by the boards and for delivery by the executive. The committee carries out its work under an agreed terms of reference (ToR). The Committee Chair provides update and progress reports to the Board of St James's Hospital (via the CEO) and to the Board of TCD (via the Provost).

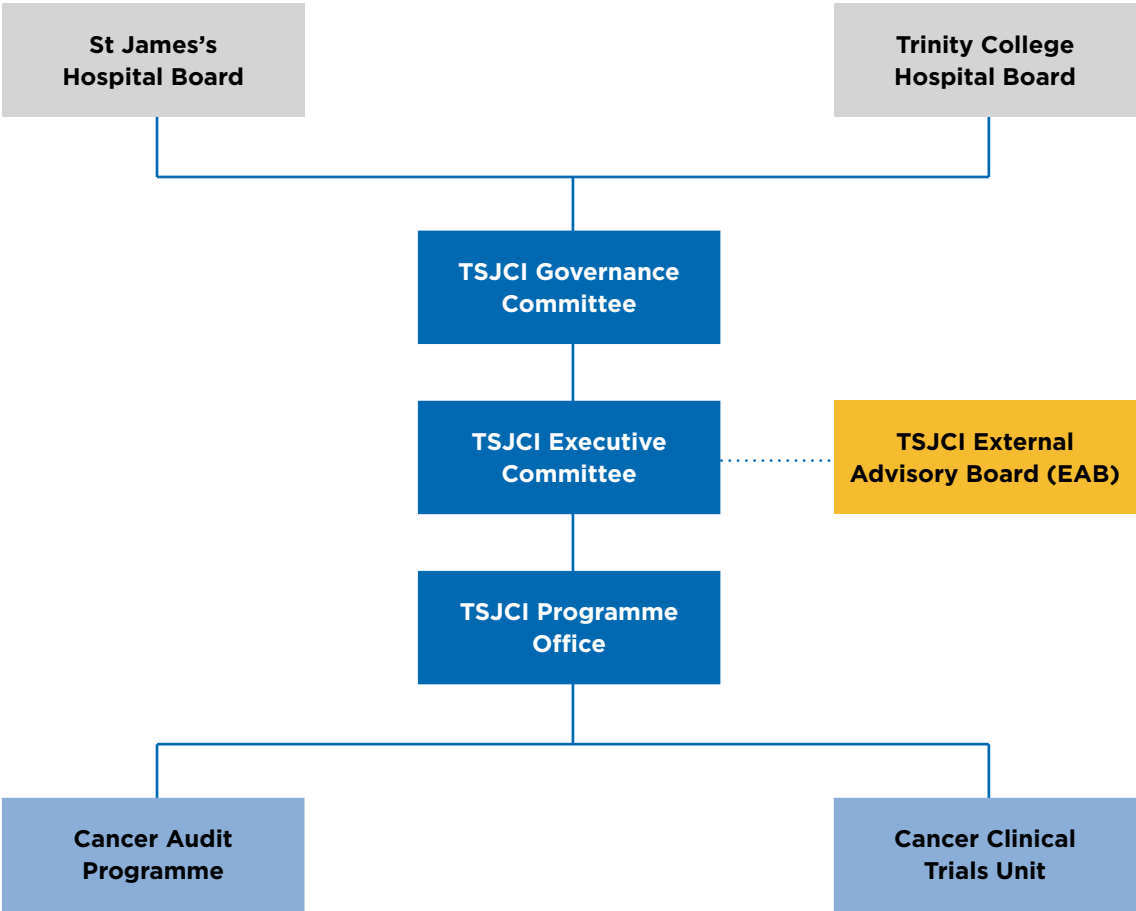
The Academic and Medical Directors, Prof Maeve Lowery and Prof John Kennedy, were appointed by the boards of TCD and SJH in 2021. The Co-Directors provide leadership in setting and delivering the agreed strategic direction of the TSJCI, reporting on progress and challenges to the Governance Committee, CEO of SJH and Provost of TCD.

The TSJCI Executive Committee, under the leadership of and chaired by the TSJCI Co-Directors, held its first meeting in July 2021. The role of the executive committee is to deliver on the objectives and targets outlined in the TSJCI strategy. The committee has a broad membership with representation across the pillars of TSJCI and stakeholders from Trinity College Dublin, St James's Hospital and St Luke's Radiation Oncology Network. The Executive Committee reports via the Directors to the Governance Committee. The TSJCI Pillar Leads (Clinical, Cancer Clinical Trials, Research and Education) work through the executive and their organisations to implement the strategy for the TSJCI.

The TSJCI External Advisory Board (EAB) membership was established in 2022. The EAB has representation from leaders in the field of scientific and clinical research, medicine, education, management, nursing and patient advocacy and involvement. The role of the EAB is to provide strategic advice to the TSJCI Executive Committee.

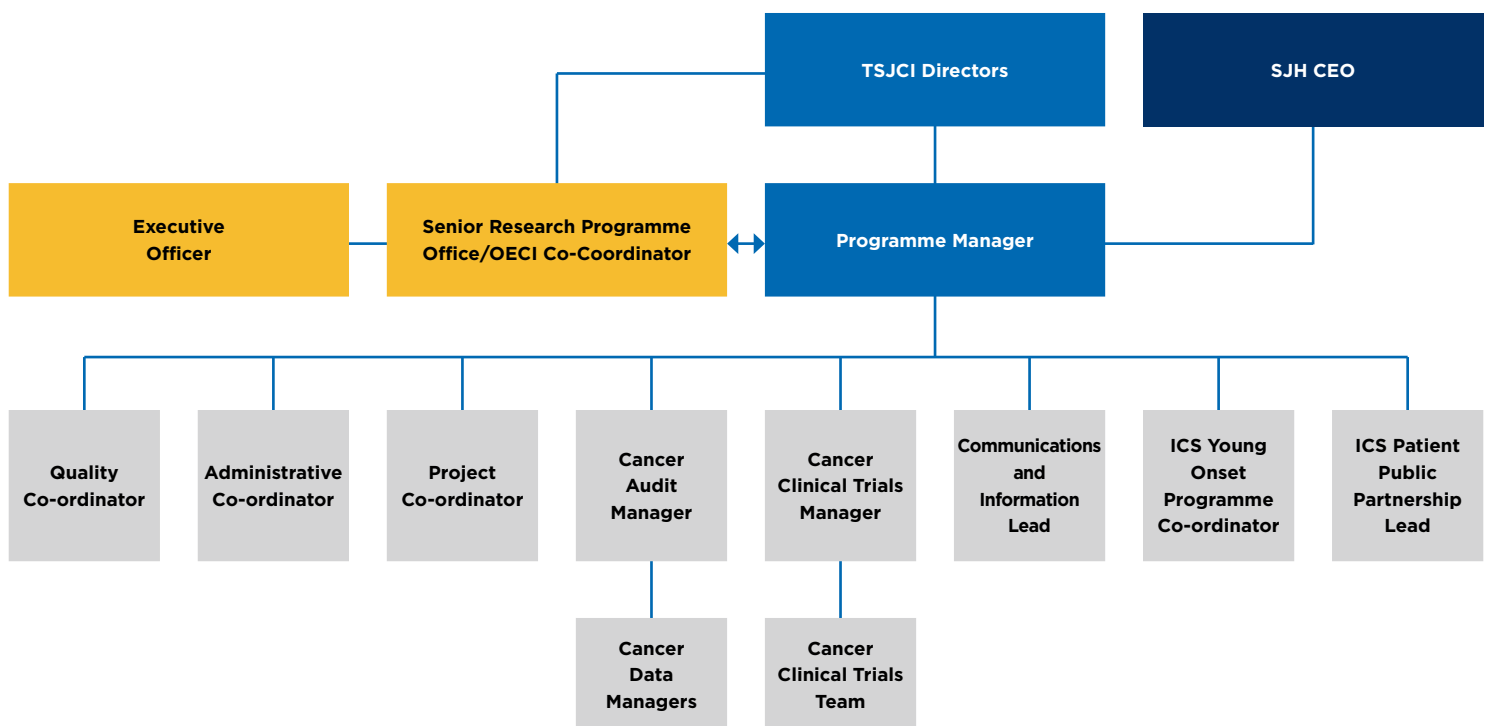
The TSJCI Programme Office team, led by the TSJCI Programme Manager and Directors, oversees and supports the delivery of a variety of work streams including accreditation, strategic partnerships, patient partnership and involvement, infrastructure, communications, quality, clinical trials and audit. It is responsible for the implementation of the TSJCI strategy, and collation and submission of evidence for re-accreditation by OECI in 2024 in collaboration with the directors, pillar leads, multidisciplinary teams at SJH and TCD, and patients.

TSJCI Governance



TSJCI PROGRAMME OFFICE

- Prof Maeve Lowery, TSJCI Academic Director
- Prof John Kennedy, TSJCI Medical Director
- Ms Paula Corby, TSJCI Programme Manager (retired February 2023)
- Ms Cathy Enright, TSJCI Programme Manager (March 2023)



Key Developments in 2023

OECI Re-Accreditation

The TSJCI Quality Co-ordinator and OECI Co-ordinator co-chaired the first OECI Implementation Group in September 2023. The group brings together representatives across all directorates involved in the delivery of cancer services at SJH and TSJCI. The purpose of the group is to collectively develop and implement a plan for gathering information related to the more than 300 OECI standards and create a forum for addressing challenges and sharing experience. The implementation group is key to ensuring a complete submission to OECI in 2024 that showcases the exemplary work across SJH and TCD.

TSJCI Strategy Implementation

A key goal of the TSJCI Strategy 2023-2028 is the development of comprehensive cancer infrastructure. Following on from completed needs assessments, the TSJCI Programme Office in collaboration with the Capital Projects and Estates team coordinated a series of stakeholder meetings to inform master planning of infrastructural developments on the SJH site.

TSJCI Partnerships and Philanthropy

On the 16th May 2023, the Irish Cancer Society (ICS) and the TSJCI announced details of a five-year collaboration and partnership. The five-year collaboration will see the society invest €4.5 million in several specific exemplar programmes aimed at delivering a new model of cancer care for patients in Ireland.

In June 2023, the clinical trials leadership team met with ICON and Accellacare to explore the development of a partnership that would support the expansion of clinical trials to patients. We continue to work towards a master service agreement.

In Q1 2023, early career clinician researchers were invited to apply to the Joly Cancer Leadership Programme 2023-2025. The programme aims to support the successful applicants to dedicate 30% of their time to develop their research programme. Mr Michael Kelly, Consultant Colorectal Surgeon, and Dr Nina Orfali, Consultant Haematologist, were the recipients of the first awards.

European Actions and Grants

TSJCI is the Irish lead for the Comprehensive Cancer Infrastructures for the European Union (CCI4EU), an EU initiative to develop recommendations for structuring future capacity building projects and scaling up National/Regional Comprehensive Cancer Infrastructures. [CCI4EU](#)

TSJCI is also one of eight cancer centres in Ireland represented in the CraNE Joint Action [CraNE4Health European Network of Comprehensive Cancer Centres](#).

TSJCI is a partner and beneficiary of the EUonQoL. Ms Claire Donohoe, Consultant Upper Gastrointestinal Surgeon, is PI for TSJCI on this project. The programme aims to contribute to the EU initiatives against cancer by developing the European Oncology Quality of Life Toolkit, a patient-centred unified tool for the assessment of quality of life among cancer patients and survivors.

TSJCI Communications

The TSJCI Communications and Information Lead led a branding exercise in collaboration with the multidisciplinary team across TCD, SJH and partners. This extensive process delivered a visual identity for the TSJCI, a hand-illustrated logo inspired by common Irish moths and butterflies symbolising hope and rebirth, with four strands to communicate the four integrated pillars of the TSJCI: Patient Care, Cancer Clinical Trials, Research and Education.

TSJCI Patient Representative Group


The TSJCI Patient Representative Group continues its impactful work, collaborating with cancer researchers, clinical and operations staff across the pillars of the TSJCI.

Key Priorities for the Programme Office in 2024

- Inaugural OECl Networking Day in January 2024
- Continue to work towards Comprehensive Cancer Centre designation by OECl in Q4 2024
- Realising impact of key partnerships including the Irish Cancer Society and ICON/Accellacare
- Developing the TSJCI Programme Office team
- Continuing to work with the SJH directorates and structures of TCD to link the work streams of the programme office
- Recruitment to the all programmes within the ICS/TSJCI partnership
- Continue to support protected time for research for cancer clinicians
- Continue to monitor progress of and implement the TSJCI strategy

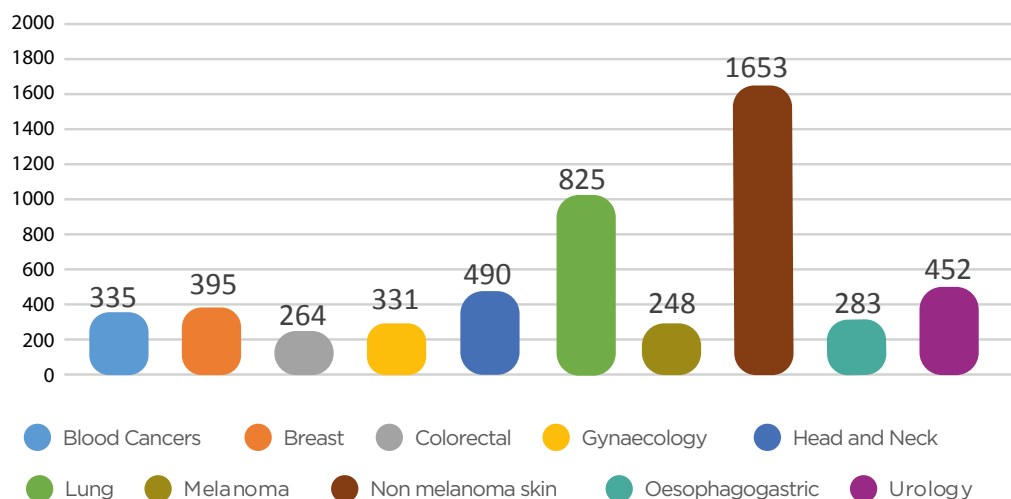
Acknowledgements

In February 2023, we bid a fond farewell to Ms Paula Corby, TSJCI Programme Manager and long-serving member of St James's Hospital Operations team. Thank you, Paula, for your many valuable contributions to the development of the TSJCI. We are very grateful for all you did.



Patients

5,276 Newly diagnosed and/or treated cases 2023



Clinical Care

Number
of systemic
Anti-Cancer
Treatments
(SACT)

16,466

Stem Cell
Transplant
(SCT) Activity
Autologous

97

Stem Cell
Transplant
(SCT) Activity
Allogeneic

100

Stem Cell
Activity DLI
Infusions

42

CAR-T

33

Infusions

Number of
Radiotherapy
Fractions

18,262

(in SLRON at
St James's)

Histopathology

NUMBER OF PATIENTS
CMD lab = 8,094 patients
Cryobiology: SCT and
CAR-T = 302 patients
Histopathology lab = 31,938

**NUMBER OF NEWLY
DIAGNOSED AND/OR
TREATED PATIENTS**
Cryobiology: SCT and
DLI and CAR-T patient
treatments n= 269

**CANCER MOLECULAR
DIAGNOSTICS
REQUESTS PER
DAY 2023**
422 requests per day
n= 269

STEM CELL ACTIVITIES (ALL)
Cryobiology:
198 transplants
(101 allogeneic transplants;
28 BM and 95 PBSC products
processed)
(97 autologous transplants;
111 patients had 133 PBSC
collections)
(40 donor lymphocyte
infusions)

**CAR-T
ACTIVITY**
46 patients
collected;
31 treated

**HISTOPATHOLOGY
AND CYTOLOGY
REQUESTS PER
DAY 2023**
130 requests
per day

**CRYOBIOLOGY
LAB
PROCEDURES
PER DAY 2023**
1322 requests per
annum; ~ 5 per day

Radiology

**Overall
Activity
(Cancer and
Non Cancer)**
209,232

Cancer
Mammogram PET/CT
10,243 3449

Cancer and Non Cancer
CT Ultrasound MRI
36,054 27,614 14,416

Research

**Research
Funding**
€11.8 million

**Interventional
Clinical Trials**
67

**Recruitment to
Interventional Clinical Trials**
388

**Peer Reviewed
Publications**
283

Education

Doctor of Philosophy PhD
28

Master of Science MSc
1

Doctor of Medicine MD
3

Clinical Care Services

HOPE DIRECTORATE

- Dr Cliona Grant, Clinical Director
- Ms Paula O'Reilly, Operations Manager
- Ms Jane Murphy, Assistant Director of Nursing

Key Developments in 2023

Haematology Oncology Day Centre (HODC) Lean project

The Haematology Oncology Day Centre Lean project is a continuous project to reduce waiting times and delays, and improve efficiencies for patients which has been ongoing throughout 2023 with positive feedback from staff and patients.

AYA Service

The AYA Cancer Service at St James's Hospital (SJH) provides specialised supports for patients aged 16-24 who have had a cancer diagnosis. International research shows that AYAs experience challenges related to cancer differently to their paediatric and adult counterparts; including access to clinical trials, fertility considerations, transition to survivorship care, psychosocial support, and progression with life goals and pursuits. The AYA cancer service seeks to enhance patients' quality of life and provide supports with a developmentally appropriate focus and with the young person at its centre. St James's Hospital was designated in 2023 as one of three cancer centres with an AYA unit and the team has grown with the appointment of a Clinical Nurse Specialist (CNS) and a grade V administrator. Multi-disciplinary clinics are running and the AYA MDT has commenced. Adolescent and Young Adult (AYA) Cancer Service at SJH has expanded considerably.

Chimeric Antigen Receptor T Cell Therapy (CAR-T)

The Cartitude-5 CAR-T clinical trial for patients with multiple myeloma has opened in SJH. In 2023, 33 patients received CAR-T infusions, an increase from 22 in 2022.

Cancer Genetics

We have permanent administrative staff and genomic associates to support the clinical workflow of the genetic counselling team in place. Recruitment of genetic counsellors remains difficult due to lack of a training programme in Ireland.

Cancer Genetics has moved to a new location at 40 James's Street with hybrid outpatient clinics facilitating in-person, virtual and remote genetic testing.

We commenced working with the National Treatment Purchase Fund to reduce our waiting list. An electronic referral form has also been introduced.

Palliative Medicine

Palliative Medicine has been very busy in 2023 despite significant challenges in staffing. A new consultant post was approved and a locum, Dr Conor White, is in position. Rory Wilkinson, ANP in palliative medicine retired in 2023 after a long career in SJH. A second registrar was approved for 2023 to help the service with a big focus on hospital avoidance.

Volunteer Service HODC

The volunteer service has been in existence since 2021 and is growing from strength to strength. The volunteers provide an invaluable service for patients attending the Haematology Oncology Day Centre (HODC). The role includes providing a friendly welcoming meet and greet service, assisting with communications between staff and patients, providing general hospital information and providing support to patients.

TCP Home Care

HOPE are outsourcing patients to TCP for immunotherapy treatment to help manage capacity in HODC and improve efficiencies for patients. The initiative commenced in September 2023 and feedback from staff and patients is very positive.

Psycho-oncology

The psycho-oncology service continues to play a large part in the AYA service and runs sessions in The Hangout, the inter-professional clinic for AYA cancer patients located in the Guinness Enterprise Centre. Working with TSJCI the multi-disciplinary survivorship group continues to improve and develop survivorship care and services for cancer patients.

Key Priorities for 2024

- The Directorate is working with TSJCI to achieve accreditation as an OECD designated Comprehensive Cancer Centre.
- A communications training programme has been developed and commenced with patient-facing administrative staff.
- Improved staff recruitment and retention across all specialties is a priority for 2024 with a focus on developing innovative ways to manage workload such as the development of physician associates for Oncology/Haematology.
- Continuing the improvement project in HODC, moving to an electronic scheduling system that will maximise capacity and allow prospective planning.
- Continue working with TCP for outreach administration of chemotherapy to increase capacity in HODC and explore community phlebotomy options to reduce hospital visits.

Highlights

- Cancer genetics has received an ICS ANP grant to build a digital platform for predictive testing.
- The Haematology service is due for reaccreditation by JACIE in 2025.
- Rosie O'Shea, Principal Genetic Counsellor received an AHP leader award from the Irish Cancer Society.
- Catherine O'Brien, ANP, Cancer Survivorship received a cancer nurse research award from the Irish Cancer Society

Geriatric Oncology Programme

Key Developments

- A pilot geriatric oncology service was initiated in December 2023. This was a joint initiative between the Departments of Geriatric Medicine and Medical Oncology.
- The clinic conducts pre-treatment comprehensive geriatric assessment (CGA) for patients aged 65 and above commencing systemic anticancer therapy with evidence of frailty or geriatric impairments on the G8 screening tool.

Key Priorities for 2024

- To further develop the geriatric oncology service, including transitioning roles to a permanent funding basis.
- Service development to include:
 - **Expanded Outpatient Department (OPD) Slots:**
 - Increase the number of OPD slots from current maximum of 2-3 new patients per week to include follow-up appointments.
 - **Implementation of a Geriatric Oncology Ward Consulting service:**
 - Offer a consulting service to medical oncology radiation oncology, haematology and surgical patients 65 years and older with cancer admitted to the hospital.
 - **Expansion of Eligible Tumour Cohorts:**
 - To include further medical oncology tumour cohorts and haematological malignancy, including transplant.
 - **Shared Research Agenda and Collaborations:**
 - Develop collaborations between the Irish Longitudinal Study on Ageing (TILDA) and the Trinity St James's Cancer Institute (TSJCI) Survivorship Committee.
 - Prospective studies in cognitive trajectories with immune checkpoint inhibitors and on autonomic function in patients undergoing platinum and taxane chemotherapy.

MEDICAL DIRECTORATE

- Prof Caroline Daly, Clinical Director
- Ms Michelle Maher, Operations Manager
- Ms Clodagh Quinn, Assistant Director of Nursing

Dermatology/Plastic Surgery/Dermatopathology – Skin Cancer

Endocrinology – Thyroid Cancer

Key Developments in 2023

In 2023, 130 new patients with thyroid cancer joined the existing cohort of 1,325, all of whom require life-long follow up due to the well-documented risk of late recurrence.

Radio-Iodine Treatment

- The Endocrinology Service manages radio-iodine treatment, reserved for high risk and selected intermediate risk thyroid cancer patients. Forty patients were admitted to the iodine suite for this treatment following MDT review in 2022.
- 22 patients attended for the three-day surveillance program post-radio-iodine treatment.

Key Priorities for 2024

- The Endocrinology service will continue to strive to provide an excellent service by urgently seeking to secure funding for a dedicated database manager. Our cohort of over 1,000 patients has no unified data base, and this is a high-risk situation. In addition to potential loss to follow up, we are unable to develop a model of service delivery that reflects clinical demands. There is also a missed opportunity to audit clinical outcomes, participate in international research and examine long-term survivorship data for a unique cohort who require lifelong review.
- The Endocrinology service is currently supported by a Thyroid Cancer Clinical Nurse Specialist. Our aim is to secure a candidate ANP for thyroid cancer care delivery. The ANP would be responsible for establishing a holistic survivorship programme, as well as supporting access to the service and to treatment with RAI where required.
- Thirty of our new patients entering the service in 2023 have relocated from outside of Ireland, and have had treatment in other centres. This brings challenges linguistically, and in importing clinical data including histopathology. These patients will require enhanced support with communication and coordinated follow-up.

Highlights

- Prof Marie Louise Healy represented SJH as a member of the Programme Organising Committee for the World Thyroid Cancer Congress held in London in June 2023.
- Research output for the unit has been presented both at national and international meetings.
- Complexity of referrals will continue to increase.


Hepatology

Key Developments in 2023

There is a growing incidence of HCC worldwide. In the United States, the rate of HCC deaths has increased by 40% over the period 1990-2004, relating to the emergence of cirrhosis due to hepatitis C as a risk factor for HCC, but additionally also to an increase in HBV-related HCC. Obesity, diabetes and fatty liver disease are recognised aetiological factors for HCC development. In the US in 2020, NAFLD-related HCC was the primary liver cancer indication for liver transplantation. HCC arises in a cirrhotic background in up to 90% of cases, and cirrhosis itself is a progressive disease that affects patient survival. The presence and staging of cirrhosis therefore influences the opportunity for anti-HCC treatment, thus rendering early diagnosis of HCC even more crucial.

- The Hepatology Department provides diagnostic and loco-regional therapeutic interventions supportive therapies to patients who develop liver cancers (HCC, cholangiocarcinoma), and supportive care to patients requiring liver transplantation.
- Up to 4% of patients with cirrhosis develop HCC annually. Patients with cirrhosis who attend the Hepatology department receive HCC Screening services every six months for surveillance.
- Non-clinical HCC care materials for patient and family support, linked to ARC services under going publication at present.
- Liver cancer CNS role ongoing revision of care pathways and improve delivery of service with a focus on survivorship and nursing research.
- Primary works have commenced to implement a fit for purpose data capture system i.e., Red Cap.

Key Priorities for 2024

- Development of a dedicated cancer database to capture all liver cancer data in real-time.
 - Finalise and roll out a data capture system.
 - Staff training on new cancer data management systems.
 - Development of a dedicated multi-disciplinary meeting for patients diagnosed with liver cancer.
- 

SURGICAL DIRECTORATE

- Mr Vincent Young, Clinical Director
- Mr Jeff Virgo, Operations Manager
- Deborah Cross, Assistant Director of Nursing

Head and Neck Cancer

Key Developments in 2023

- Appointment of a new Head and Neck CNS in Sept 2023. This will bring about an important addition to our service. This will help improve our service and support our newly-diagnosed head and neck cancer patients and those undergoing oncological resections. Due to our patient cohort our patients need an abundance of support post-op due to life changing surgeries altering airway, speech, swallow and body image. We also hope to commence doing more research within our Head and Neck CNS team.
- Participation in monthly journal club with ENT medical.
- Attendance and participation in monthly morbidity and mortality meetings.
- Involvement in world head and neck cancer awareness day at SJH. We had an awareness and health promotion stand with members of the MDT and patient interviews in the SJH Times.
- Our CNS team attended the Irish Head and Neck Society conference in Kilkenny.
- Presentation of head and neck cancer surgical overview at the Fundamentals of Cancer Nursing course at SJH.
- Presentation on free flap care ICU fundamentals course at SJH.
- 2023 also saw the appointment of a new plastics and reconstruction service with the primary focus on supporting the Head and Neck reconstruction service.
- Mr Kevin Mellan, consultant prosthodontist was appointed also to support the reconstructive pathway.

Key Priorities for 2024

Retention of our fourth Head and Neck CNS role and it being made permanent. This will enable prospective development of our service and enhance our patients' experience on their journey through head and neck cancer.

- Developing a head and neck cancer patient passport.
- Involvement in research project with Trinity and Maxfax service which will audit a patient concerns inventory on an app called eAltra.
- We are aiming to commence weekly education for ward staff.
- Intention to complete micro-credentials course in Nurse Authority to Refer for Radiology Procedures.
- One CNS to complete Radiation Oncology short course in St Luke's Hospital.
- To start developing patient information leaflets specific to their head and neck cancer surgeries in order to help patients be more informed and prepared for surgery and therefore enhance their experience within our service.

Highlights

Three of our CNS' attending the annual Irish Head and Neck Cancer two-day conference run by IHNS. This enables us to network with other Head and Neck CNS' from around the country and also keep up to date on developments and new treatments in head and neck cancer.

Cardiothoracic Surgery

Key Developments in 2023

- Two clinical leads were appointed to this department: Mr Saleem Jahangeer as the new Cardiac Surgical Clinical Lead and Mr Gerald Fitzmaurice as the Thoracic Surgical Clinical Lead, which will facilitate smooth functioning of the department, as a working collaborative team.
- We have successfully collaborated with a surgical ward (Private 3), which has increased bed capacity and capability.
- Three new ANPs joined the ANP team, one of whom is assigned to thoracic cancer.
- In 2023, 62 individual education sessions were run in Keith Shaw unit with 385 attendees in total with the average six staff per session.

Key Priorities for 2024

- Continuation of the enhanced recovery programmes ERAS and ERATS for cardiothoracic surgical patient cohort.
- Staff wellbeing survey and programme to promote staff wellness throughout the year with multiple initiatives scheduled.
- Maintain a robust quality and safety processes in operation by conducting a monthly quality meeting to review Datix and Medication Safety Events.
- Collaboration with P3, optimising bed flow, patient safety, staff education and team building.
- Monthly Critical Care Journal Club to promote evidence-based care.

Highlights

- In 2023, the thoracic MDT team were finalists in the Irish Healthcare Centre Awards. Dr Saleem Jahangeer was awarded the St James's Hospital Patients' Choice Award.
- Healthy competition such as the 'Battle of the Boards' takes place across critical care areas. Keith Shaw Unit won the 2023 prize for sepsis education board.
- Thoracic Foundation Course (TCPhi Level 8 accredited) is well-established in Keith Shaw Ward.
- Official Keith Shaw vision, purpose and values were updated alongside with Shaw Unit logo.
- Our unit is in the process of getting accredited by the European Society of Thoracic Surgeons.

Breast Care Nursing Service

Key Developments in 2023

- E. Breen and A. Dunne – CNSs to replace permanent and maternity positions.
- Certificate in prescribing medicinal products and referring for radiological procedures by N. Byrne (CNS).
- Postgraduate Diploma – Adult Cancer Nursing by E. Breen (CNS).
- Cancer Genetics Course – Guys and St Thomas' Hospital by A. O'Driscoll (CNS).
- Certificate in Cancer Genetics (RCPI) – Y. Hanhauser (ANP) and commenced by C. Spillane (ANP).
- Nursing research "Development of a Risk Reduction Patient Decision Aid for Women with a BRCA+ Gene" in usability testing phase.
- Presentation by C. Spillane (ANP) at The Marie Keating Annual BRCA Seminar.
- Oral presentation by Y. Hanhauser (ANP) at ESMO Cancer Conference.
- A locum consultant was appointed within the Plastics and Reconstruction service to support the Breast Surgery team with the focus on BRCA and family history.

Key Priorities for 2024

- Continued pre-operative combined education clinics provided by physiotherapy and Breast Care Nursing team.
- Support for more nurses to attend courses and conferences both presenting and receiving updates/education.
- Completion of nurse-led research projects with official launch of Decision Aid for unaffected BRCA carriers to be used on the SJH website.
- Development of the ANP-led high-risk family history clinic to include the possibility of prescribing risk reducing medications and mainstream genetic testing.

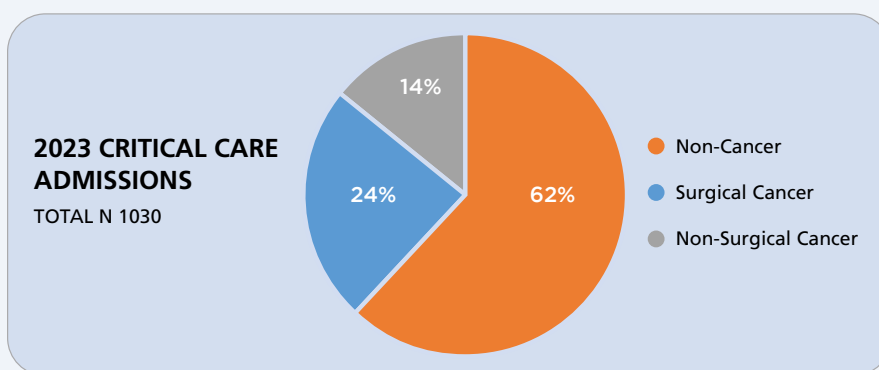
Highlights

- Marie Keating quiet room officially opened and is proving to be a valuable asset to the service providing a quiet confidential non-clinical room to support patients receiving diagnosis and treatment plans.
- ANP-led family history/high-risk group information sessions continue monthly for newly-identified BRCA gene carriers.
- Inpatient ward education sessions provided to >40 staff in latter half of 2023.
- Audit of pre-operative combined education clinics provided by physiotherapy and Breast Care Nursing team continue.
- Audit of ANP-led services including the management of the high-risk family history service and symptomatic patient review (post-operative and rapid access symptomatic patients).

Critical Care: General ICU

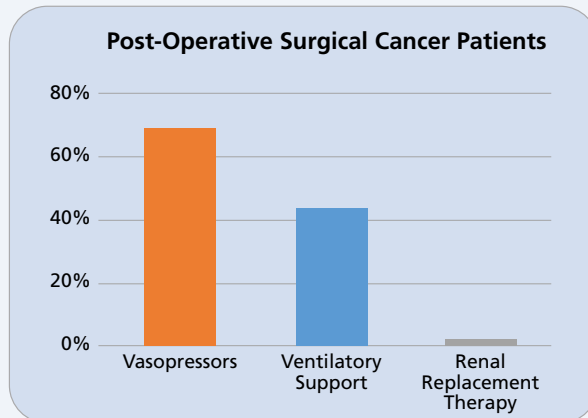
Key Developments in 2023

In 2023, we admitted 391 patients with a primary cancer related diagnosis to Critical Care. This represents 38% of our total patient admissions. Of these 391 patients, 245 were admitted electively post-operatively, and the remaining 146 were emergency admissions with medical or surgical complications, including seven (of 31) patients with complications associated with CAR-T therapy. The non-surgical admissions had a mean APACHE2 score of 22.7 which signifies a high severity of illness.



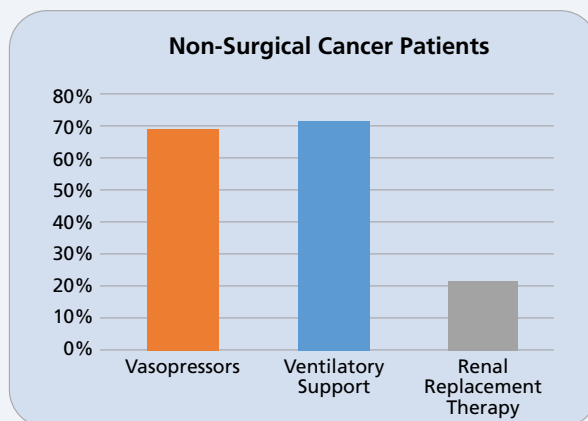
Post-operative surgical patients: 245 patients

Solid tumour with metastases: 17
 Ventilatory support: 109 patients (44.5%)
 Vasopressor support: 173 patients (70.6%)
 Renal replacement therapy: 5 patients (2%)
 Mean LoS: 5 days
 Survival to discharge from Critical Care:
 241 patients (98.4%)



Non-surgical patients: 146 patients

Haematological malignancy related: 50
 Solid tumour with metastases: 27
 Ventilatory support: 104 patients (71%)
 Vasopressor support: 101 patients (69%)
 Renal replacement therapy: 31 patients (21%)
 Mean LoS: 6.6 days
 Survival to discharge from Critical Care:
 96 patients (65.8%)



A significant challenge has been, and will continue to be, access to a sufficient number of critical care beds. Ultimately, the new Critical Care build will help address these problems. In the interim, innovations such as a continuously available resuscitation beds, collaborative work with the Bed Management team, and the introduction of our team of Advanced Nurse Practitioners, have greatly improved timely access to a critical care bed for elective surgical patients, and for the unexpected urgent critically-ill patients. In sharp contrast to previous years, as of 2023, we now consistently meet our national KPI on time to admission for all Critical Care patients.

Key Priorities for 2024

Goals for 2024 include opening a further three critical care beds. This is primarily with a view to improving critical care bed availability for elective post-operative surgical patients, and will come on-line by Q4 2024.

Attraction, addressing staffing deficits and retention of skilled medical, nursing and allied health colleagues is a priority. Education at SJH is a key factor, and we provide a broad spectrum of learning opportunities specific to the management of solid tumour and haematological cancers to undergraduate students and postgraduate trainees at SJH, Trinity College Dublin, and in association with the postgraduate training bodies of Ireland in both medicine and nursing.

We continue to admit approximately 25% of CAR-T therapy patients to ICU. Ideally, we would like to be able to review all CAR-T patients on admission and review all deteriorating CAR-T patients, however we currently lack the resources to do so. The Critical Care team have strong links with international CAR-T centres and had hoped to contribute data to critical care international research and international CAR-T data registries. Critical care support for the CAR-T programme was not provided by the NCCP. We intend to try to source funding to allow the Critical Care team to improve support for the CAR-T programme and to take part in international research.

Highlights

Our first Critical Care Haematology Study Day will be held in 2024, championed by Dr Enda O'Connor, accredited by the RCPI and the Joint Faculty of Intensive Care Medicine of Ireland (JFICMI). This is unique to SJH, and will add to the specialist training available nationally. In 2023, Dr O'Connor presented critical care management of post-bone marrow transplant complications in the National Critical Care Grand Rounds.

Critical care nursing now has a CNM3 for education, which includes education for the care of cancer patients. This is a new and exciting progression of critical care nursing education in SJH. Many of our nursing staff attend both the Fundamentals of Oncology Nursing programme and the Fundamentals of Haematology Nursing programme. All critical care nurse education programmes have a strong focus on cancer nursing and the specifics of looking after these patients in ICU. Local themed educational months cover a broad range of subjects – all of which are very relevant to ensure cancer patients receive high quality care. We recorded two podcast episodes in relation to cancer care ("Critical Conversations" podcast) – bone marrow transplantation and CAR-T therapy.

Our critical care research programme, headed by Professor Ignacio Martin-Loeches continues to deliver. In 2023, 15 of his 78 peer-reviewed publications were cancer related or immunocompromised related. He continues to supervise postgraduate MD and PhD candidates, and presents at prestigious world forums, including the annual international French-run Blood Disorders in ICU course which has a heavy emphasis on haematological malignancy. Continuing to deliver world-class care mandates a commitment to research and education. TSJCI is in a unique position to undertake treatment changing collaborative research, and we intend to contribute to this ground-breaking research.

Urology Service

Key Developments in 2023

- On the back of a major drive to improve access and capacity, funding was received to facilitate the appointment of an additional consultant. This enabled the recruitment of Mr John O'Sullivan, Consultant Urologist, with a special interest in andrology and survivorship care.
- Through the Modernised Care Pathway programme, funding was received to enable the recruitment of two new ANPs for haematuria and lower urinary tract symptoms (LUTs).
- After its positive introduction into the hospital in 2022, urology has continued their extensive use of the Da Vinci robot to perform many types of surgery.

Key priorities for 2024

- Development of exenteration surgery with Colorectal and Gynaecology.

Upper Gastrointestinal Service

Key Developments in 2023

In line with the hospital's development of robotic surgery, Ms Claire Donohoe, consultant in upper GI surgery, begun the use of the Da Vinci robot for patients undergoing upper GI surgery. The plan will include use of the robot in performing oesophagectomies.

2023 also saw the recruitment of the first ANP in the upper GI service for oesophageal cancer survivorship.

Key Priorities for 2024

- Continued roll out in the use of the robot for robotic surgery.
- Inclusion in the new Sarong II trial.

Colorectal Service

Key Developments in 2023

- In 2023, Mr Michael Kelly, consultant colorectal surgeon, was appointed into the team. With a special interest in pelvic exenteration surgery, Mr Kelly has engaged with the National Pelvic Exenteration Programme. In August 2023, he established a pelvic oncology MDT which meets monthly and discusses cases of advanced colorectal, urological and gynaecological cancer that require multi-visceral resection. The MDT serves patients from SJH, Cork University Hospital and Limerick University Hospital with further island-wide expansion planned for 2024. Since August, the MDT has facilitated the discussion of several complex cases that have proceeded to surgery. It has been strengthened by its multi-disciplinary approach involving prehabilitation services, perioperative medicine, plastics/reconstructive surgery and the allied health services. This has highlighted the strength of a national collaborative approach in managing these complex cases.
- The recruitment of Mr Kelly has also seen the roll out of the use of robotic surgery within the specialty.

Key Priorities for 2024

- With the pending location of Children's Health Ireland (CHI) onto the SJH site, the service would like to develop a role with their colleagues in CHI for a transitional care post.

Plastic and Reconstructive Surgery

Key Developments in 2023

- In 2023, Mr Eamon Francis, Consultant Plastic and Reconstructive Surgeon, was appointed with a focus on supporting the Head and Neck cancer service from a reconstructive perspective.
- Ms Christina Buckley, Consultant Plastic and Reconstructive surgeon, was appointed on a locum basis to support Breast Care with its delivery of the Family History and BRCA service.

Key Priorities for 2024

- Continued development of the head and neck and breast cancer surgery services.



LABMED DIRECTORATE

- Dr Niamh Leonard, Clinical Director
- Ms Fiona Kearney, Operations Manager
- Ms Christina Ryan, Quality Manager

SJH Centre for Laboratory Medicine and Molecular Pathology

In LabMed, our Histopathology and Cytopathology laboratory, our Cancer Molecular Diagnostics laboratory and our Cryobiology Stem Cell laboratory are significant contributors to cancer care, supported by our Haematology teams for chemotherapy monitoring and our virology laboratory supporting post-bone marrow transplant patients. Overall, all laboratory disciplines provide cancer services to our hospital patients, to patients located in external hospitals throughout the country, and to our community patients via their general practitioners.

Key Developments in 2023

Cancer Molecular Diagnostics (CMD) Laboratory

The CMD laboratory increased its annual testing output by 35% to approximately 105,497 tests reported in 2023. As with previous years, this increase was due to a combination of both increasing sample numbers from patient referrals but also an adoption of next generation sequencing which has enabled the service to increase the number of tests it can perform for each patient request. The laboratory continued to deliver advanced diagnostics and moved to a front-line next generation sequencing panel for myeloproliferative neoplasms which significantly reduces the clinical burden of serial testing and the time to diagnosis for patients.

While laboratory output did increase significantly, and service developments were delivered, the laboratory has faced major headwinds in the form of continued staffing difficulties.

Histopathology Laboratory

In 2023, the histopathology laboratory began major renovations of the Histopathology Cut-Up Room where all specimens that enter the laboratory are assessed and sampled. This will provide additional workspace for our increasing workload. A range of new and advanced immunohistochemistry (IHC) and fluorescence in-situ hybridisation (FISH) tests were also introduced in 2023, further advancing the excellent repertoire of tests provided to patients and other service users. The Histopathology Departments introduced one additional Chief Medical Scientist and three Specialist Medical Scientist positions to further develop and advance the service. In addition, two additional Consultant Pathologists post were filled, expanding the medical team within the department.

Cryobiology Department

The Cryobiology Laboratory Stem Cell facility, as part of the St James's Hospital Tissue Establishment, collects, processes and cryopreserves stem cells for transplantation. In 2023, a total of 309 stem cell units were processed and lab procedures were increased by 20% on 2021. For allogeneic transplant, 28 bone marrow products and 95 peripheral blood products, (including 58 product imports) were analysed and issued. In the autologous programme, 110 patients had 131 PBSC units cryopreserved, with 98 patients receiving 116 stem cell infusions. In 2023, the laboratory expanded the offsite storage of stem cells by movement of a LN2 storage vessel to create more facility space on site. This small space enables the packing of incoming/outgoing CAR-T cells.

In 2023, the Cryobiology Laboratory Stem Cell facility, as part of the National Adult CAR-T Programme, received authorisation for the collection of stem cells for manufacture and the acceptance, storage and infusion of genetically modified CAR-T product as part of the Janssen CARTITUDE clinical trial. Authorisation for Kymriah (Novartis) and Yescarta (Kite Pharma, Gilead) have been previously obtained and updated to procedures implemented in 2023. The CAR-T patient programme is now fully active and 46 patients had 53 units of mononuclear cells collected and processed by the laboratory, and shipped for CAR-T manufacture. CAR-T products were received and stored on behalf of SJH Pharmacy and 31 patients received CAR-T cells thawed at the bedside and infused in 2023.

Key Priorities for 2024

CMD Laboratory

- The laboratory will expand its repertoire of testing to include homologous recombination deficiency (HRD), comprehensive genomic profiling and a broader range of next generation sequencing panels for haematological malignancies.

Histopathology Laboratory

- Completion of the Histopathology Cut-Up Room renovations.
- Introduction of Digital Pathology; this will be a small-scale project but a step forward in revolutionising histopathology and how a pathologist examines specimens.
- Implementation of new Immunohistochemistry (IHC) instruments creating a multiplatform IHC laboratory. This will also allow us to expand the Histopathology Department's IHC and in-situ hybridisation (ISH) repertoire, thus allowing us to introduce advanced testing not currently performed in Ireland.
- Introduction of rapid tissue processing for endoscopic biopsies to streamline the processing of these tissue samples with the goal of decreasing turn-around-times.

Cryobiology Laboratory

- Participation in CAR-T clinical trial (Janssen CARTITUDE).
- Initiation of CD34 count order on EPR.
- Establishment of electronic reports for stem cell products.
- Installation and validation of a new flow cytometer.
- Ongoing PhD study and presentation of research work.
- Celebration of 40 years of stem cell transplantation programme in Ireland.

Highlights

In 2023, the LabMed Directorate workload overall exceeded 12 million tests in one calendar year, setting new records in our overall activity.

The Histopathology Department saw an increase of 7% in total histology workload and 21% in total cytology workload compared to 2022. Endoscopic biopsies continued to challenge the department in 2023 (40% of cases processed in Histopathology) with the hope that new staff due to start in 2024 will provide further support to streamline this service and increase turn-around times. The demands on the service have become very challenging with extra pressure added by additional clinics and theatre space utilised by the hospital to combat extensive waiting lists. This added to the difficulties in recruiting and retaining medical scientific staff and poses significant risks.

In relation to our cryobiology laboratory, the Cellular Therapy Research Group, (established in 2021 and comprising SJH Medical scientists and clinicians, with IBTS staff and Trinity College (TTMI) scientists), continues to develop a common interest group in establishing research projects. This group has evolved into a routine meeting with input from 18+ internal and external contributors with an expansion of the research collaborations of the group. A PhD research project (Year 2 in 2023) seed funded by an IBTS research agreement, based on detailed laboratory monitoring of patients in the early post-stem cell transplant and post-CAR-T treatment has commenced and is running concurrent with an MD project monitoring patient outcomes. Multiple oral and poster presentations were presented by the group in 2023. The Haematology Biobanking of consenting patient samples from this study group is ongoing, with 54 patients currently having serial samples collected following stem cell transplantation (35) or CAR-T therapy (15). A final year medical scientist student project investigating the detection and exhaustion of CAR-T cells post therapy by Niamh Casey was awarded the best project 2023 by Technical University Dublin.



PHARMACY

- Ms Gail Melanophy, Chief Pharmacist

Key Developments in 2023

- Over 90% of systemic anti-cancer treatment (SACT) is now prescribed on the National Cancer Information System (NCIS) with 1,516 patients treated on NCIS during 2023.
- Pharmacy involvement in the LEAN process review on the Haematology and Oncology Day Ward, establishing a new two-day review and treat model and new workflows, to maximise efficiency within the MDT, thus aiming to improve the service for our day ward patients.
- Proseal, a new closed system drug-transfer device (CSTD), was rolled out in the AC, HODC and inpatient units.
- Arrival and installation of the Chemotherapy Compounding Robot and undertaking setup and validation processes in preparation for the robot go-live.
- New Chief II Pharmacist for Cancer Clinical Trials role was established.

Key Priorities for 2024

- Implementation, training and go-live for the compounding robot.
- Establishing a pharmacy oral SACT medication service.
- Pharmacist involvement in the Geriatric Oncology Clinic as part of a wider MDT, for SJH patients over 70 with a new cancer diagnosis who are about to begin SACT.
- Training and development of new pharmacy staff.
- To have full SACT electronic prescribing, verification and administration on NCIS for HODC, and continued roll-out for more complex regimens on inpatient services.

Highlights

- 2023 was a challenging year due to staff changes within the HOPE team. Thank you to our dedicated pharmacy team for their unwavering commitment to providing a safe service to our cancer patients.
- Two HOPE pharmacists completed their Master's in Clinical Pharmacy.
- HOPE pharmacist participated in the promotional Janssen video, in conjunction with the CRF in showcasing our work on the CARTITUDE clinical.

DIAGIM DIRECTORATE (RADIOLOGY)

- Professor Peter Beddy, Clinical Director
- Ms Suzanne Dennen, Operations Manager

Key Developments in 2023

- Reconfiguration of Ultrasound and Procedure Waiting Area:
 - The reconfiguration of the ultrasound department to provide additional ultrasound procedure rooms and a dedicated recovery area for all procedures in the department was completed in mid-2023. These works, when supported by staffing resources, will provide increased capacity for oncology imaging and direct day ward access for image guided oncology procedures.
- Weekend MR Service:
 - Weekend MR sessions for inpatients and outpatients commenced providing additional MR capacity. This initiative has reduced the waiting time for inpatients supporting earlier discharge.
- Equipment Replacement:
 - A number of equipment replacement projects were undertaken during 2023. A general X-ray room was replaced and Trophon systems for decontamination of ultrasound probes were introduced in Ultrasound. The replacement of the fluoroscopy room commenced late 2023.
- Consultant Radiologist Appointments:
 - Dr Roisin Heaney, with a specialist interest in breast imaging joined the department in January 2023 and Dr Stephen Dolan, with a specialist interest in breast and interventional radiology joined in June.

Key Priorities for 2024

- Radiology Day Unit Staffing:
 - The provision of staffing resources for the Radiology Day Unit (RDU) will provide direct day ward access for image guided oncology procedures. The RDU brings significant benefits since it decreases bed occupancy, shortens radiology procedure waiting lists and cancellations, while maintaining low complication rates and high patient satisfaction.
- Imaging Capacity Off Site:
 - It is planned to develop off-site imaging capacity in 2024 at Mount Carmel Hospital.
- Equipment Replacement:
 - The fluoroscopy room replacement will be completed. The new fluoroscopy room will provide additional IR capacity, in particular for PICC line insertions. A SPECT/CT scanner and general X-ray room will also be replaced during 2024.
- Expansion of PET/CT services:
 - During 2024, opportunities exist to develop the service further by increasing PET/CT PSMA capacity and introducing new radiopharmaceuticals.

Highlights

In 2023, the DiagIm Directorate commenced a pilot of a new national staff grade, the radiography assistant. Two radiography assistant posts, one in Breast Imaging and the other in General Ultrasound were introduced for twelve months initially.

The radiography assistants are successfully supporting service delivery and assisting with maximising imaging capacity by covering some duties previously undertaken by Radiographers, Nurses and Radiologists, e.g., preparing patients for exams, decontaminating ultrasound probes, etc. It is hoped to continue these positions after the pilot is completed in 2024.

In 2023, the directorate introduced a new initiative for suitable inpatients to be discharged and managed as outpatients with a dedicated discharge pathway for diagnostic imaging. This initiative has enabled earlier discharge and a reduction in the inpatient waiting time for specialised imaging, in particular CT, MR and ultrasound.



SCOPE DIRECTORATE

Health and Social Care Professionals (HSCP)

- Ms Alison Enright, Director, SCOPE Directorate

Key Developments in 2023

- Home enteral feeding (HEF) service saw a 60% increase on 2022 activity while home parental nutrition activity increased by 25% compared with 2022.
- There was a 24% increase in inpatient occupational therapy (OT) activity in 2023 compared with 2022 and out-patient referrals rose by >100% from 72 to 150.
- Physiotherapy (PT) treated 6343 haematology-oncology in-patients and 737 outpatients in 2023.
- PT cancer rehabilitation service activity rose from 482 patients in 2022 to 595 in 2023.

Survivorship Services

- SCOPE team members played an active role in the ongoing development of the successful TSJCI Survivorship Network.
- A SCOPE service was successfully introduced for AYA patients attending The Hangout in the Guinness Enterprise Centre. A senior social worker was appointed on a joint appointment basis with CHI to support this service and in-patient AYA care.
- An OT-led Fatigue Clinic was initiated to provide specialist fatigue management for outpatients and outcomes demonstrated significant improvements in self-management of fatigue symptoms.
- Head and neck cancer services were expanded, supported by a small uplift in resources.
- A PT-led haematology service was initiated for pre-transplant assessment for patients, the first of its kind in Ireland. 126 patients received the service in 2023.
- The speech and language therapy (SLT) led Laryngectomy Peer Support Group was re-established in 2023 and featured on RTÉ News. Patient education videos were published for laryngectomy patients.

Research

- We are delighted that two SCOPE team members – Dr Gráinne Sheill and Naomi Algeo – together with their TCD research partners commenced their translational research projects, funded through the first ever ICS AHP Research Grant.
- SLT PhD candidate, Michelle Hayes progressed her investigation of prevalence, nature and trajectory of dysphagia post-oesophageal cancer surgery.

Key Priorities for 2024

Clinical Nutrition:

- A subset of patients on diagnosis of oesophageal cancer requires a dietary downgrade to liquidised consistency as a result of severe dysphagia. A key priority is the development of a pathway in conjunction with our surgical colleagues for the early identification of patients requiring prophylactic feeding tube insertion to ensure best patient care throughout neoadjuvant therapy, 'Right tube, right patient, right time'.
- Focus on introducing nutrition prehabilitation in outpatient gynaecological oncology as part of multi-modal prehabilitation programme.

Occupational Therapy:

- Continued implementation and evaluation of OPTIMAL self-management programme for cancer survivors including the exploration of its application to other cancer groups.
- Audit, evaluation and review of the Occupational Therapy Fatigue Clinic.
- Focus on data analysis phase of the ICS AHP cancer research project to establish the support needs of AYA reintegrating to school, higher education and/or employment.

Physiotherapy:

- Focus on creating a physiotherapy clinical lead position – to oversee cancer services within the hospital and to act as a clinical leadership resource nationally.
- Development of a permanent physiotherapist in early detection for lymphoedema – one of only three physiotherapists nationally providing this service.
- Development of a pelvic health physiotherapist to support the prostate and gynaecological patient cohort.
- Development of the support to the Geriatric Oncology Clinic to a permanent, funded service.

Speech and Language Therapy:

- Introduction of Salaso digital solutions to support prehab in the head and neck cancer population, aiming to enhance accessibility of information and therapy.

Highlights

Clinical specialist dietitians are working collaboratively with our academic partner, TCD, on two randomised controlled trials of the impact of individualised dietetic care on patients pre- and post-surgery for oesophageal and gastric cancer (PREHIIT and ReStOre).

Haematology inpatient dietetic service demands continue to increase rapidly – 15% increase in new referrals to clinical nutrition in 2023 compared to 2022, 36% increase since 2021.

The dedicated home enteral feeding dietitian service has saved an estimated 773 surgical bed days by expediting discharge of patients on HEF and troubleshooting feeding tube issues, avoiding admissions and ED presentations. These data were presented nationally and internationally (ESPEN 2023).

Occupational Therapy:

The OT service completed an accessibility project in 2023 to assess and make recommendations for environmental adaptations to improve access and functional performance for service users staying at the SJH Bone Marrow for Leukaemia Trust apartments at Kilmainham.


A national acute oncology OT network was established in 2023, led by OT SJH, with a focus on practice development and clinical audit.

Physiotherapy:

2023 awards included:

- TSJCI Cancer Research Stimulus Award: Early Detection of Lymphoedema in High-Risk Gynecological Cancers.
- TSJCI Cancer Research Stimulus Award: Intervention to Improve Functional Outcomes in Head and Neck Cancer.
- Dr Gráinne Sheill – ISCP Fellowship Award for her work in cancer and cancer rehabilitation in Ireland and throughout Europe.

Speech and Language Therapy:

- In the context of very high demand for SLT in head and neck cancer and medical oncology, patient need can be unmet despite rigorous clinical prioritisation.
 - SLT team at SJH continues to act as a national leader in cancer care, with members of the team lecturing both at an undergraduate and postgraduate level at TCD and abroad.
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NURSING

- Ms Sharon Slattery, Director of Nursing

Key Developments in 2023

Breast Care

- Ms E. Breen and A. Dunne – CNSs to replace permanent and maternity positions.
- Certificate in prescribing medicinal products and referring for radiological procedures by Ms N Byrne (CNS).
- Postgraduate Diploma – Adult Cancer Nursing by Ms E. Breen (CNS).
- Cancer Genetics Course – Guys and St Thomas' Hospital by Ms A. O'Driscoll (CNS).
- Certificate in Cancer Genetics, Royal College of Physicians in Ireland (RCPI) – Ms Y. Hanhauser (ANP) and commenced by Ms C. Spillane (ANP).
- Nursing research "Development of a Risk Reduction Patient Decision Aid for Women with a BRCA+ Gene" in usability testing phase.
- Presentation by Ms C. Spillane (ANP) at The Marie Keating Annual BRCA Seminar.
- Oral presentation by Ms Y. Hanhauser (ANP) at ESMO Cancer Conference.

Urology

- During 2023, we welcomed several new CNSs and ANPs to the Urology nursing team. In light of this staff turnover, and working alongside the ADON, CNM III and ANPs, the CNSs developed an orientation booklet to aid future CNSs joining the urology service in SJH.
- We have seen 61 inpatients, 1542 outpatients and 2541 virtual reviews.
- Following the recruitment of an additional RANP and a cANP, nurse-led clinics were developed for haematuria, lower urinary tract symptoms, and sexual dysfunction. In addition, the existing prostate cancer ANP service launched the Prostate Cancer Survivorship Clinic in August 2023.
- Improvements were made in 2023 to the vetting processes for Rapid Access Prostate Clinic referrals, using EPR functionality to improve safety and communication between nursing and clerical teams.

Upper GI – Oesophageal

- The oesophageal cancer coordinator cared for and coordinated the care of 242 patients diagnosed with oesophageal cancer in 2023. Of these 88 underwent surgery +/-chemo/radiation, 38 had Radical CRT, 34 had chemo/stent/palliative care and 56 had stent/palliative care. All new referrals were seen and staged in one week. All new patients were phoned on referral and had direct access to phone oesophageal cancer nurse for any concerns and counselling needed.
- The oesophageal cancer nurse attends the OCF bi-annual cancer support group meetings in Talbot Hotel – increasing patient care for patients and families in survivorship.

Upper GI – Gastric

- Total number of gastric radical treatment intent patients seen in 2023 – 56. This includes 13 who received endotherapy, 4 who received endotherapy and went on to have surgery, 14 who went straight to surgery, 21 who received neoadjuvant treatment and surgery and 4 who went straight to surgery and received adjuvant treatment. 29 patients were deemed palliative.
- Recruitment of patients to the CARDIA trial. Patients who have oesophago-gastric-junction (OGJ) type II carcinoma whose tumour can be resected by transhiatal oesophagectomy and transhiatal extended gastrectomy are screened by endoscopy and staging PET CT scan. If they meet criteria and are happy to partake, then recruitment will take place.
- Development of endomucosal resection (EMR) patient information leaflet.

Upper GI cANP

- Appointment of a new candidate ANP in September 2022. This has allowed for a more seamless post-operative recovery. This will help improve our service and support our newly diagnosed upper GI cancer patients with a particular emphasis on those undergoing oncological resections.
- Designed and implemented an enhanced recovery after surgery protocol. This is now used on all oesophageal and gastrectomy surgery patients. Posters available in ICU and on surgical wards. Ongoing educational sessions given.
- Rounds daily in ICU and on the surgical ward. This allows for greater visibility of a senior nurse presence on rounds.

Stoma Care

- Two staff members presented at the Irish Stoma Care and Colorectal Nurses Association conference in November 2023.
- Served as treasurers for the Irish Stoma Care and Colorectal Nurses Association.
- Represented Ireland at the Coloplast Ostomy Forum.
- Been a member of PCRS Ireland approving and reviewing products for the Irish Market.
- Trained 60 community HCA colleagues to provide stoma care for patients leaving SJH.
- Presented at The Fundamentals of Cancer Care, FETAC course, Endoscopy course, Medical/Surgical Nursing course.
- Presented at the “What does a... do” open day for aspiring health professionals.

Head and Neck

- Appointment of a new CNS in Sept 2023. This will bring about an important addition to our service.
- Presentation of head and neck cancer surgical overview at the Fundamentals of Cancer Nursing Course at SJH.
- Presentation on free flap care ICU fundamentals course at SJH.
- Participation in monthly journal club with ENT medical.
- Attendance and participation in monthly morbidity and mortality meetings.
- Involvement in world head and neck cancer awareness day at SJH.

Colorectal

- We have a new consultant surgeon with a special interest in locally advanced rectal cancers who is now fully established in the colorectal service. We have assisted him in setting up a pelvic oncology MDT.
- We are in the process of setting up an electronic shared information system to allow consultants and CNSs to have access to a patient's treatment pathways in real time. This information sharing forum will improve patient flow and enable better planning. This is currently a paper process.

Gynaecology

- In our service recently, there has been the welcome addition of another full-time CNS to our nursing team. This brings us to a full quota of nurses on our CNS team – two full-time posts with two part-time posts. This will enhance the level and improve the already high quality of care and support that is provided to the patients with gynaecological malignancies in St James's Hospital. The support is provided to the patients from first clinic visit, throughout their surgical treatment and afterwards in clinical follow-up.
- In addition to this our ANP-led survivorship clinic has recently been established. This has already proven to be a hugely beneficial source of support to our patients who require advice, management or referral to other services to help them with any long-term difficulties and challenges that have arisen due to their cancer diagnosis and/or treatment.
- Another very notable event in the gynaecology oncology service in 2023 was the launch of the patient passport. This document aims to improve the patients experience within our service by providing all of our patients with gynaecological malignancies a document containing details of their diagnosis, relevant contact personnel, treatment plans, etc.

Key Priorities for 2024

Breast care

- Continued pre-operative combined education clinics provided by physiotherapy and Breast Care Nursing Team.
- Support for more nurses to attend courses and conferences both presenting and receiving updates/education.
- Completion of nurse-led research projects with official launch of Decision Aid for unaffected BRCA carriers to be used on SJH Website.
- Development of the ANP led high-risk family history patients to include the possibility of prescribing risk reducing medications and mainstream genetic testing.

Urology

- The CNSs have initiated a QIP, collectively working alongside the research and innovation team to develop a training needs questionnaire. This data will highlight where CNSs can provide their expertise, education and support to members of staff on the surgical wards.
- The team have commenced a Urology Nursing Journal Club during which time research articles are reviewed, microtopics examined, and research goals discussed. In 2024, we hope to solidify this newly established initiative, and to expand it within DMHG to our colleagues in Midlands Regional Hospital Portlaoise (MRHP) and Tallaght University Hospital (TUH).
- As a team we aim to develop and implement catheter passports in 2024, which would allow safe and efficient care to patient with short- and long-term catheters.

Upper GI – Oesophageal and Gastric

- Recruitment of a CNS who could focus on the trial recruitment and manage this workload.
- Completion of micro-credentials course in Authority to Refer for Radiological Procedures by May 2024.

Upper GI cANP

- cANP currently in final year of PhD. Her thesis is in the definition and severity of pneumonia in the transthoracic oesophageal surgical patient.
- ERAS implemented and for audit this year (cANP).
- Audit of pre-operation venous thromboembolism (VTE) by candidate ANP.
- Audit of re-intubation of postoperative oesophageal and gastrectomy patients (cANP).
- A second ANP role in survivorship. There is an unmet need regarding survivorship in a clinic setting. Also, for those patients that have had definitive chemoradiotherapy and a registry of these that could well end up requiring a salvage oesophagectomy. A registry of complications following definitive treatment is warranted.

Stoma Care

- Relaunch the Stoma Care Foundation Course for Nursing and HCA staff.
- Attend site visit to St Mark's Hospital in UK – leading international centre in stoma care and intestinal failure.
- We will have the “suppository and enema administration via a stoma” guideline approved.
- Complete the stoma care standard operating practice (S.O.P).
- Hold four Stoma Care education days for public health nurses and HCAs in the community.

Head and Neck

- Developing a head and neck patient passport.
- Involvement in research project with TCD and maxillofacial service which will audit a patient concerns inventory on an app called eAltra.
- We are aiming to commence weekly education for ward staff.
- Intention to complete micro-credentials course in Authority to Refer for Radiology Procedures.
- One CNS to complete Radiation Oncology short course in St Luke's Hospital.
- To start developing patient information leaflets specific to their head and neck cancer surgeries in order to help patients feel more informed and prepared for surgery and therefore enhance their patients experience within our service.

Colorectal

- We have been invited by the NCCP to be part of a national clinical review of total neoadjuvant treatment for rectal cancer. This will go to national and international review. This forum is made up of Surgical Consultants, Medical and Radiation Oncology Consultants, Colorectal Nurse Specialists and Patient Representatives.
- In 2023, we were part of a full overview of the 'Watch and Wait' protocol. The aim of this overview is to examine our resources required for this protocol. It is an evolving area. The outcome of this audit is outstanding but we expect to have the results complete by end of Q1 2024.
- We plan to present our research on a patient satisfaction survey on our Nurse-Led Phone Clinic at a major conference in 2024.

Gynaecology

- We have given presentations on gynaecological malignancies on the fundamentals of cancer care study days, held twice yearly in SJH for nursing staff, where we discuss the post-op care of patients undergoing major pelvic surgeries. It is our aim to continue these presentations to assist in staff education.
- We attend the annual meeting of the Irish Society of Gynaecology Oncology (ISGO) to keep up-to-date on latest research and data relating to gynaecological cancers and to stay informed of any new patient related initiatives that our patients could benefit from. Of note this year, the IGCS (International Gynaecologic Cancer Society) is holding its annual global meeting in Dublin. We aim to attend this to enhance our knowledge of gynaecology oncology cancer management internationally as this meeting aims to include a wide range of topics.
- We continue to promote awareness of gynaecological malignancies on the various annual awareness days that are promoted onsite in association with the Irish Cancer Society.

Highlights

Breast Care

- The Marie Keating quiet room officially opened and it is proving to be a valuable asset to the service, providing a quiet confidential non-clinical room to support patients receiving diagnosis and treatment plans.
- ANP-led family history/high risk group information sessions continue monthly for new BRCA gene carriers.
- Inpatient ward education sessions provided to >40 staff in latter half of 2023.
- Audit of pre-operative combined education clinics provided by physiotherapy and Breast Care Nursing Team continue.
- Audit of ANP led services including the management of the high-risk family history service an-matic patient review (post-operative and rapid access symptomatic patients).

Urology

- In 2024, our main priorities are to continue our research and QI activities, including the roll out of our survey with subsequent development of an education programme, and the establishment of an NCCP remote follow-up pathway for prostate cancer survivors.
- We also anticipate welcoming new members of staff in 2024, including a CNS and a urology healthcare assistant. We aim to continue our collaborative work with our urology colleagues, TSJCI, and the wider SACC network.

Upper GI – Oesophageal and Gastric and cANP

- PREHIT/PREHAB (pre-high intensity interval training/pre-habilitation) physio programmes and Restore Programme enhance patient fitness to withstand treatment regimens and improve recovery time.
- Expert upper GI clinical dietitian service work tirelessly to optimise patient nutritional status to withstand treatment and recovery.
- Developing an upper GI patient passport.
- The best outcomes are achieved with detailed MDT treatment planning – careful and considered decisions are made with regard to surgery, chemotherapy and radiation therapy.
- Patients have direct access to contact oesophageal cancer coordinator at any stage of their journey – from diagnosis to post-five-year survival.

Stoma Care

- In 2023, we saw – 507 inpatients, 524 outpatients (multiple episodes with each patient).
- 197 new stomas were formed.

Head and Neck

- Retention of our fourth head and neck CNS role and it being made permanent. This will enable ongoing development of our service and enhance our patient experience on their journey through head and neck cancer.
- Three of our CNS' attending the annual Irish head and neck cancer two-day conference run by Irish Head and Neck Society (IHNS). This enables us to network with other head and neck CNS' from around the country and also keep up to date on developments and new treatments in head and neck cancer.

Colorectal

- We have submitted a business case to the NCCP for an ANP in colorectal cancer survivorship. The addition of this potential post holder would greatly enhance the service and would lead to new initiatives and improve the overall colorectal cancer service within SJH.
- We intend to complete the micro-credentials course in Authority to Refer for Radiology Procedures.
- We have identified needs within the service which we intend to focus on in 2024. These include being more proactive at ward level in educating staff members on Colorectal Cancer Pathway.

Gynaecology

- Throughout 2023, we have had a number of improvements within our service through charitable donations, in particular the Crosby family, who continue to fundraise throughout the year for the gynae oncology service to directly benefit our patients. They are currently in the process of funding a bladder scanner for our clinic.

Nursing Evidence-Based Research and Innovation

Key Developments in 2023

In July 2023, Ms Julie O' Grady was appointed as Assistant Director of Nursing for Evidence-Based Research and Innovation. This new role was created to develop and lead on implementing the strategic priorities of Nursing Research and Innovation in line with the SJH Nursing Strategy 2023-2026. A key purpose of this role is to enable, support, mentor and educate all grades of nursing staff in the area of evidence based practice as we work towards the hospital's strategic ambition of becoming an Academic Health Science Campus as well as our journey towards Pathway to Excellence/OECl accreditation.

Key Priorities for 2024

The key priorities are to:

- Provide education (workshops, seminars, short courses) in the area of EBP.
- Support and enable staff in all aspects of the research/QI process (from completion of application forms to ethical approval support).
- To support staff in the development of poster/oral presentations for local, National and International conferences.
- To lead on strategic projects which will raise the profile of nursing practice via peer-reviewed publications, fellowship/PhD opportunities.
- To positively impact on the application of evidence in care provision to improve patient outcomes/experience.
- Build a rigorous and impactful research culture within SJH nursing team.

Highlights

While the post is primarily for the purpose of supporting nursing staff, the combined interdisciplinary approach across the organisation (and with our academic partners) will harness combined, collaborative, solution-focus, evidence-based care which will ultimately improve patient-related outcomes/experience measures.

CANCER CLINICAL TRIALS

- Prof Grainne O'Kane, Director, Cancer Clinical Trials
- Ms Ingrid Kiernan, Manager, Cancer Clinical Trials

Introduction

The Cancer Clinical Trials Unit (CCTU) consists of a multidisciplinary team of Research Nurses, Clinical Trial Co-ordinators, Research Assistants, Research Registrars, a Clinical Trial Pharmacy team and a management team led by the Clinical Trials Director. The remit of the unit is to conduct solid Oncology and Haematology clinical trials to the highest international standards. We work with international academic institutions and large pharmaceutical companies. The unit has experience in all trial phases from phase I to phase IV. We continue to expand our portfolio and have increased our participation in early phase trials.

We provide an end-to-end service to Principal Investigators (PIs) from trial feasibility all the way through to trial closure. The team as a whole has a total staff of 23 a mixture of WTE and part-time. We comprise of a Research Manager, CNM III Nurse Lead, Chief II Cancer Trials Pharmacist, set-up specialist and research nurses, clinical trial coordinators, research assistants and pharmacy technicians. We work collaboratively to deliver on all the clinical trials in the different cancer specialties.

The unit works with a diverse group of PIs and has opened and recruited patients in the following disease areas: Breast, Lung, Head and Neck, Skin, Upper and Lower GI, Gynaecology, Lymphoid and Myeloid Haematology cancers.

Key Developments in 2023

- 20% increase in patient recruitment compared to 2022.
- In 2023, 44 trials were open to recruitment.
- Of these 17 were new trials in 2023.
- We recruited four patients to the first CAR-T trial in Ireland, in conjunction with our colleagues in the SJH CRF. This was the first combined trial with the CRF and has been a great success.
- We continue to have positive feedback from three sponsor audits with no major findings.

2023 saw some staff changes and developments within the unit. In April 2023, Prof Grainne O'Kane took over from Prof Elisabeth Vandenberghe as the Director of the unit. Deirdre Lehwald started in September 2023 as the CMN3 Team Leader and Olga Crehan started in August 2023 as the Chief II CCTU Pharmacist. Staff turnover saw some changes in both the administration team and the nursing team with new colleagues joining the team. This came with its challenges but the team have grown in strength from the changes.

Key Priorities in 2024

The key priorities for 2024 are to increase patient recruitment to cancer clinical trials and to increase the number of trials that we are conducting. We also want to continue to broaden the portfolio whilst choosing trials that we know we can deliver on. We are also keen to increase our participation in Phase 1 trials. In order to facilitate this plan, we will be increasing our workforce on both nursing and administrative to achieve these goals safely while continuing to deliver to a high standard.

In 2024, we will be opening our first surgical trial in melanoma with Ms Marlese Dempsey as PI.

In 2024, we aim to further improve our staff training and development in order to equip the team with the knowledge and skills to work in what is a highly regulated environment. We will hold regular, themed training sessions for the research staff in all areas of conducting a clinical trial in order to increase our knowledge base and provide continuous learning opportunities for the team, including our research registrars. We are expanding our teaching to the wider workforce in the HOPE directorate with teaching sessions on the importance of clinical trials in the established SJH postgraduate training programs (in the areas of consent, clinical trial documentation, adverse event reporting and many more). We have many new team members and we need to ensure that all receive continuous training and support. We are increasing the use of the SJH electronic patient record (EPR) with the aim of improving efficiencies within the unit. The first step in this process is to start recording our key performance indicators (KPI) data in the EPR so that business intelligence reports can be generated at hospital board level. In 2024, the transition of prescribing of clinical trials from paper-based prescribing to electronic prescribing is planned.

The ultimate goal for the unit is to be paperless and we hope to start on that journey in 2024.

Highlights

Our aim as a team is to promote research to the public and as such, we have taken part in two video projects. We took part in the RTÉ documentary Inside St James's highlighting the work we do in the Cancer Clinical Trials Unit. The team also were interviewed for a promotional video for Janssen on our work on the CARTITUDE Trial.

We were the highest recruiters both here in Ireland and the UK for the WAYFINDER Trial, this highlighted the hard work and dedication of the team to deliver research.

One of our team has also completed their Master's in Cancer Care and Haematology.

Our dedication to our patient population was also recognised through the receipt of the St James's Daisy Award.

St Luke's Radiation Oncology Network (SLRON)

- Prof Charles Gillham, Medical Director, SLRON
- Ms Jennifer Carey, General Manager, SLRON

Key Developments In 2023

St Luke's Radiation Oncology Network (SLRON) continued to provide high quality radiotherapy treatment and specialised treatment services. Key achievements in 2023 include:

- Clinical treatment
 - Expansion of advanced stereotactic ablative radiotherapy (SABR) treatments to include abdominal sites. These treatments maintain or improve outcome for patients while at the same time reduce the number of patient treatment attendances.
 - Introduction of Artificial Intelligence systems to optimise efficiency in organ at risk and tumour volume delineation prior to treatment plan design. This is the initial step to further integrate such systems to reduce the overall time for patients to start treatment.
 - Continued refinement of processes to improve the patient experience while maintaining quality and accuracy, including the removal of tattoos as a requirement for breast radiotherapy and introduction of point of care devices for eGFR monitoring ahead of CT scanning.
 - Establishment of site specific, multidisciplinary tumour groups. These groups are being established to focus on keeping pace with international developments, driving the development of relevant technology and techniques for that tumour site and produce clinical guidelines and treatment protocols.
 - Managed the referral of 46 patients for proton treatment abroad. These comprised 34 patients considered by the clinical proton referral panel including members across SLRON.
- Research and Development
 - Building on the experience in the Irish Research Radiation Oncology Group (IRROG) and the St Luke's Clinical Trial Unit to recruit 52 patients into 9 clinical trials.
 - In cooperation with St. Luke's Institute of Cancer Research and Cancer Research Fund the Fellowship team was expanded to include a radiation oncologist, radiation therapist and medical physicist for a 2 year programme to develop and introduce additional advanced treatments into SLRON.
 - The launch of the refurbished and equipped Michael Moriarty Research Radiobiology Laboratory onsite in St Luke's Hospital, funded by The Friends of St Luke's. The Scientific Committee of the laboratory includes representatives from Trinity and St James's and is committed to integrate laboratory science, onsite radiotherapy treatment equipment and clinical trials to advance radiotherapy related research.
- Education and Training
 - Ongoing training, placement and education of students across a range of disciplines including nursing, radiation therapy and medical physics.
 - Assessment of SpR Training by /International Training body; strongly endorsed.
 - Graduation of one Medical Physics PhD student and addition of further MP PhD student

Key Priorities in 2024

- Working with HSE Estates and the national cancer control programme (NCCP) to issue the Tender for the replacement of all major radiotherapy and imaging equipment in SLRON by year end.
- Further expand the availability of SABR treatments for prostate and spine.
- Complete the introduction of MRI for radiotherapy treatment planning across the SLRON network.
- Finalise the introduction of interstitial brachytherapy. This advanced technology benefits approximately 30-40% of women with very locally advanced cervical cancer that, based on international data, will significantly improve local control and lessen late morbidity.
- Introduction of simultaneous boost techniques in breast and prostate treatment.
- Introduction of liver SABR treatment.
- Completion of the re-irradiation pathway for patients returning for further treatment.
- Submission of a business case to initiate Lu-177 (Lutetium) treatments in St Luke's Hospital for men with metastatic castrate resistant prostate cancer.
- Appointment of Prof. Gerry Hanna as the Marie Curie Professor of Clinical Oncology – SLRON/Trinity College Dublin joint collaboration.

Highlights

Started 5,241 radiotherapy treatment patients on treatment, including new and return patients (1,278 in SLRON at SJH). This required the delivery of 76,896 radiotherapy treatment fractions (18,262 in SLRON at SJH).

Increased the delivery of specialised treatments including 123 total body irradiation (an increase of 40%) and 811 stereotactic ablative therapy treatment (SABR) fractions in SLRON at SJH – (an increase of 11%).

Treatment of 56 paediatric patients as SLRON provides the only paediatric radiation oncology service in Ireland.

Education

- Prof Jacintha O'Sullivan, Education Lead, TSJCI

Key developments in 2023

- Many successful postgraduate courses ran again in 2023, including MSc in Translational Oncology and MSc in Cancer Survivorship. These courses are attracting graduates from different disciplines both nationally and internationally. Some of these graduates are then going on to pursue PhD research in oncology within TSJCI and/or bringing back the skills they have learned to clinical practice.
- Within the Nursing division, many courses ran again in 2023 in the areas of fundamentals in oncology, specialist palliative care, fundamentals in haematology to name just a few.
- 28 PhDs, 3 MDs and 1 MSc by research successfully completed their postgraduate degrees in a cancer-related discipline.
- In 2023, TSJCI was a partner in a successful application to the Health Research Board for an All-island US National Cancer Institute Joint Doctoral Training Programme in Precision Cancer Medicine. This will be led by Prof Mark Lawler (Queen's University Belfast). Prof Jacintha O'Sullivan, the TSJCI education lead, will direct the TCD training element of this programme. The first set of trainees should start in 2024/25. This will broaden TSJCI PhD oncology training at an international level.
- In 2023, the two medical student awardees of the Drechsler Bursaries, Eoin Mc Dermott and Saoirse Morrin successfully completed the MSc in Translational Oncology.
- In 2023, the Joan McCormick PhD Scholarship was awarded to Mr Joshua Flynn, who started his PhD in lung cancer with Prof Stephen Finn and Dr Anne Marie Baird. A Provost PhD was awarded to Ms Julie David who will work on Haematological cancer with Dr Tony McElligott and Prof Danny Ziester. These scholarships were open calls and the shortlisting and interviewing of the candidates was directed by the TSJCI Education Advisory Board, chaired by Prof O'Sullivan.
- In 2023, Prof O'Sullivan and Dr Melissa Conroy in collaboration with Breakthrough Cancer Research ran two open nights where the public and patients were invited to the labs to learn about the type of cancer research we do and how it can impact patients. Other educational outreach activities included a weeklong transition year programme for school children.

Key Priorities in 2024

- Hire an education coordinator to work with Prof Jacintha O'Sullivan and the education advisory board.
- Build on our strengths in education through delivering the cancer modules in our successful MSc courses to a broader audience either in person or online.
- Attract further philanthropy donations to support oncology education at the PhD level and research fellow levels.
- Work in collaboration with other accredited cancer centres in Ireland in developing joint cancer education offering for trainees, offering flexible, personalised education opportunities for those involved in delivering cancer care and conducting cancer research.

Research

- Professor Lorraine O'Driscoll, Research Lead, TSJCI
- Dr Patricia Doherty, Senior Research Programme Officer/OECI Coordinator

TSJCI Research Day

TSJCI held its inaugural Research Day on June 23rd 2023 in the Davis Coakley seminar room in MISA. The event was an internal forum to highlight the depth and breadth of cancer research across TCD and SJH and to bring people together to share ideas and foster new collaborations. The event was opened by TSJCI Research Lead, Prof Lorraine O'Driscoll. Prof O'Driscoll stated 'It was truly rewarding to hear progress updates on the new research collaborations established between scientists and clinicians across the university and hospital sites, made possible by the Cancer Research Stimulus (CREST) Awards. We are very grateful to philanthropic donors for their support of this TSJCI Research initiative'. Special invited guest was Kay Duggan-Walls, Policy Officer at the European Commission who briefed attendees on the funding landscape for cancer at EU level. The event comprised of four sessions, one for each research theme at TSJCI; namely Cancer Prevention (led by Prof John O'Leary, Dr Cara Martin and Prof Karen Cadoo), Molecular and Precision Oncology (led by Prof Adrian Bracken, Prof Lorraine O'Driscoll and Prof Maeve Lowery), Cancer Immunology (led by Prof Clair Gardiner and Prof Joanne Lysaght) and Cancer Survivorship (led by Prof Juliette Hussey and co-chaired with advanced nurse practitioner Catherine O'Brien). Each session was opened by the research theme leads and consisted of research project updates from the CREST (Cancer Research Stimulus Awards) recipients, followed by short elevator pitch style presentations from researchers affiliated with the theme. Sessions concluded with a discussion on challenges in the field and opportunities for collaboration within TSJCI. This inaugural TSJCI Research Day had over 120 registrants and we hope that there will be many new collaborations arising from the event.

TSJCI Christmas Research Blitz

The TSJCI Research Blitz, held in the Durkan Lecture Theatre on 8th December, was a great success. The event was opened by Prof Lorraine O'Driscoll who gave an overview of TSJCI Research and announced round 2 of the CREST Research Stimulus Awards. This was followed by Dr Patricia Doherty presenting on TSJCI Research Supports. Prof Clair Gardiner and Prof Joanne Lysaght, along with Dr Stephen Maher, expertly chaired the sessions which included twenty excellent presentations – many by early career researchers – exemplifying our fundamental, translational and clinical cancer research. The very interactive audience made the event enjoyable, as well as informative. Already, new collaborations are stemming from this event. We are grateful to sponsors Astellas Pharma Inc who very generously supported the Festive Reception that followed.

Visiting Research Professor

Prof Yvonne Wengström, Director of Nursing Development at the Karolinska Comprehensive Cancer Centre, Sweden, met with TSJCI staff on October 19th and 20th in a visit funded by the Faculty of Health Sciences Visiting Professors Fund. Prof Wengström is an oncology nurse and has worked in cancer care since 1989 and holds a PhD in Oncology and is Professor in Nursing.

Prof Wengström discussed nursing research strategy with the Director of Nursing and lead cancer nurse in SJH. She discussed research with advanced nurse practitioners in cancer. Prof Wengström visited with Prof Anne Marie Brady and nursing PhD students from the School of Nursing and Midwifery in TCD. In addition, she presented at the SJH Nursing Conference with a talk entitled: "There are Actually no Boundaries for Developing Nursing!"

The All-Ireland Cancer Liquid Biopsies Consortium (CLuB) Symposium 2023

Founded and led by Prof Lorraine O'Driscoll, CLuB – a €4 million research “Hub of Excellence” including Trinity College Dublin/TSJCI, Queen's University Belfast and the University of Galway and funded by the Government of Ireland via the HEA, under the North-South Research Programme – initiated on 1st January 2023.

On October 25th, the All-Ireland Cancer Liquid Biopsies Consortium (CLuB; clubcancer.ie) held its inaugural symposium in the Tercentenary Lecture Theatre, Trinity Biomedical Sciences Institute, TCD. The event was opened by Prof Lorraine O'Driscoll. The keynote talk by Prof John O'Leary, and Ms Jacqueline Daly (PPI Advocate) delivered a presentation on “Science for Advocates”. The morning session included an array of stimulating presentations delivered by CLuB-funded researchers, while the afternoon session was dedicated to a series of company talks and presentations. The event was closed by PI at Queen's University Belfast, Prof Paul Mullan. Members of the HEA attended the event and interacted with the researchers.

Since its emergence as a Hub of Excellence in January 2023, CLuB Scientists have presented at both National and International Conferences e.g., the TTMI Conference 2023, the TSJCI Inaugural Research Day 2023, TSJCI Research Blitz 2023, the 6th ACTC Congress 2023, the 5th Annual Congress of Liquid Biopsy (ISLB23), the 2023 Pittsburgh-Ireland International Lung Conference, the ISGO Conference 2023, the EMBL Liquid Biopsies Meeting in Heidelberg, as well as multiple invited talks including those at University of Oxford and University of Cambridge.

CLuB has also hosted both online and in person PPI events, where CLuB personnel were given the opportunity to explain and present the role of the liquid biopsy and their research; in turn, patients and members of the public gave their perspective and advice. By showcasing at the Balmoral Show in NI and the European Researchers Night in Trinity College Dublin, the team also engaged and educated the public on their research in an informal way. Transition year students (>40) and visiting students from Singapore also visited CLuB laboratories during 2023 to learn more about its research.

External Research Funding Secured (selected)

Several large-scale competitive research grants/awards were secured in the 2022/2023 academic year.

These include:

1. The All-Ireland Cancer Network (AllCaN) Programme

Led by Prof Jacintha O'Sullivan and Co-Led by Prof Juliette Hussey (TSJCI) and Prof Helen Coleman (QUB), the €1 million AllCaN Programme (funded by Breakthrough Cancer Research with co-funding from the Oesophageal Cancer Fund and the CROSS charity) represents a new, focused effort to implement advances in oesophageal cancer research as rapidly as possible through the creation of a collaborative, translational cancer research network. The most talented and promising researchers across Irish institutions will be assembled into AllCaN forming an optimal configuration of expertise needed to solve key problems in Oesophageal Cancer research with the aim to positively impact patients. AllCaN will establish, for the first time, an All-Ireland Oesophageal consortium, bringing together experienced scientific, clinical and industry teams with international recognised experience in Barrett's oesophagus (BO) and Oesophageal Adenocarcinoma (OAC) research and will work across four different work packages to achieve this: Improved Detection and Prevention, Co-Created Interventions, Targeted Diagnostics and Novel Therapeutics. In addition to generating new knowledge, AllCaN will support the development of Ireland's oesophageal cancer community and will strive to advance evidence-based policy making and clinical guidelines. The programme is carried out with collaboration from Queen's University Belfast, University College Dublin, University of Galway and University College Cork. The impact of this programme will significantly advance knowledge in designing new cancer prevention strategies, implementing lifestyle intervention changes, stratify those who are at risk of disease progression and finally identify new strategies to increase treatment response. This will have improved outcomes for BO and OAC patients. The programme is also in the process of launching a brand-new website in the coming months (www.allcan.ie).

2. Comprehensive Cancer Infrastructures for the EU (CCI4EU)¹

Funded under the **Horizon Europe Cancer Mission**, [CCI4EU](#) is a European initiative, implemented in all Member States, based on a **capacity building programme (CBP)** that will help reduce inequalities, supporting Europe's Beating Cancer Plan's goal of 90% of eligible cancer patients accessing Comprehensive Cancer Centres by 2030. Prof Maeve Lowery (TSJCI Co-Director) is the Irish Principal Investigator in this consortium.

The capacity building programme is a complex intervention that requires multiple and integrated actions delivered to relevant stakeholders. It will be designed with an inclusive approach, capable of creating a change and improvement in research and care, with greater integration between them, supported by an education programme.

The project will implement the following steps:

1. **Define CCI Maturity Model** including quality indicators
2. **Profile the CCIs in each Member State and a few associated countries** in terms of CCI presence and levels of maturity
3. **Design tailored CBP interventions** giving priority to EU countries without any CCI
4. **Deliver online training courses** open to all EU Member States and associated countries, and **implement targeted onsite interventions**
5. **Scale up and sustain development** disseminate, exploit and report results

The project will maximise impact by bridging with the work of ongoing EU cancer research projects. The project is coordinated by the [Organisation of European Cancer Institutes](#) (OECI). The project network consists of 55 partners, including major European cancer organisations, cancer centres and other representatives from all EU Member States and several associated countries.

3. EU-Navigate

EU NAVIGATE officially launched a Horizon Europe-funded project aiming to develop a navigation intervention for older people with cancer and their family. Lead by Vrije Universiteit Brussel, Prof Andrew Davies secured funding as the TSJCI partner. As there is a fast-growing number of older people with cancer, it is essential to develop high-quality, equitable and cost-effective care across the continuum of supportive, palliative, end-of-life and survivorship care for both cancer patients and their family caregivers. Navigation interventions offer a well-recognised potential to support, educate, and empower patients and address individual and community barriers to their timely access to the services and resources that they need. The core component of this intervention is a patient navigator, who is a dedicated person engaging with patients on an individual basis².

Effectiveness and cost-effectiveness will be evaluated through an international pragmatic randomised controlled trial, performed across six European countries (Belgium, Ireland, Italy, The Netherlands, Poland and Portugal). This experimental study will be conducted among 532 cancer patients aged 70 years and older and their family caregivers. A detailed study of cost-effectiveness of patient navigation as part and beyond the project's trial will also be undertaken, as well as subgroup and cross-country analyses to best understand and optimise its impact. Based on the evaluation of the project's pilot navigation system, on a mapping study of already existing navigation systems across Europe and on wide stakeholder consultation, the project will ultimately result in the publication of high-impact recommendations on wider implementation of patient navigation in Europe and addressing of associated policy needs, targeting European decision-makers as well as the European supportive and palliative care community.

1 <https://www.europeancancer.org/eu-projects/resource/cci4eu#:~:text=Funded%20under%20the%20Horizon%20Europe,accessing%20Comprehensive%20Cancer%20Centres%20by>

2 <https://eunavigate.com/press-release-eu-navigate-officially-launched-a-horizon-europe-funded-project-aiming-to-develop-a-navigation-intervention-for-older-people-with-cancer-and-their-family/>

4. Investigating the effectiveness of *Work and Cancer* for women with breast cancer

Prof Deirdre Connolly secured funding via the DIFA (Definitive Interventions and Feasibility Award) Programme with the Health Research Board. Over half of women diagnosed with breast cancer in Ireland are below the age of 64 years. Although cancer treatment is very successful, and women are now living longer with cancer, many women have persistent symptoms that interfere with their ability to return to work.

Going back to work is an important milestone in recovery from cancer. However, up to 40% of women do not go back to work because of physical and psychological difficulties that interfere with their ability to meet the demands of their work. These include fatigue, 'chemo-brain', pain and distress.

Collaborating with women with breast cancer and healthcare providers, Prof Connolly and team designed a unique online programme, *Work and Cancer*, that provides women with breast cancer with strategies to manage post-treatment difficulties and information on their work entitlements and supports. No similar programme is available for cancer survivors nationally or internationally. This is the first programme specifically designed to prepare people with cancer to successfully return to work.

This funding will enable us to test the effectiveness of *Work and Cancer* with a larger group of women with breast cancer and to evaluate the cost effectiveness of the *Work and Cancer* programme. If we find that *Work and Cancer* is effective in supporting women with breast cancer to return to work, we hope it will be available as routine cancer survivorship care in Ireland.

Other Examples of Research Progress Made

Prostate Cancer Screening/Diagnostics

An international team of scientists in Trinity College led by **Professor John O'Leary, Consultant Histopathology, School of Medicine, and Professor Doug Brooks at the University of South Australia (UniSA)** has made a landmark breakthrough which will assist pathologists when visualising prostate cancer in patient tissue samples. The research has been published in the international journal, *Pathology Cancers*. The team has identified three new biomarkers which will allow pathologists to determine which patients require immediate, radical treatment compared to those who need close monitoring. https://www.tcd.ie/news_events/articles/2023/new-prostate-cancer-biomarkers-provide-hope-to-millions-of-men/

Eurofins/TCD Partnership

The Molecular Pathology Research Group led by Prof John O'Leary at Trinity College, Dublin have partnered with Eurofins Biomnis, to develop an extensive repertoire of molecular tests for clinical genetics and cancer genomics. A state-of-the-art next generation sequencing laboratory has been developed in the Trinity Translational Medicine Institute at St James's Hospital. This facility offers molecular testing and research opportunities for TSJCI researchers.

CUPID Workshop: Cancer – Understanding Prevention in Intellectual Disabilities

In April 2023, researchers from TSJCI, Dr Martin Mc Mahon, School of Nursing, and Dr Cara Martin, School of Medicine, together with Dr Mairead O'Connor, Research Officer, National Screening Services, held a key stakeholder workshop at Trinity College Dublin. The workshop explored issues around cancer prevention, cancer diagnosis and treatment among people with intellectual disabilities in Ireland. It was being conducted as part of the CUPID network, a European-wide COST Action (European Cooperation in Science and Technology) with a key goal to establish a research agenda and exchange information regarding cancer prevention in the intellectual disability population. The workshop focused on gaining the perspectives of experts and key stakeholders working in the areas of cancer and intellectual disabilities. The findings from the workshop will help shape research priorities going forward. A similar workshop was held in Turkey and the findings are being collated to publish a report. You can find out more about CUPID at <https://www.cost.eu/actions/CA21123/>

Key Priorities in 2024

In addition to progressing the recently funded projects outlined above, and also aligned with the TSJCI Strategic Plan, we will seek opportunities to fund:

- Key equipment to further expand the Liquid Biopsies Core.
- Key equipment to development a Functional Genomics Core.
- Increase human resources dedicated to TSJCI's research programme.
- Nurture successful relationships with industry partners, patients' advocacy groups, research funders, and charitable groups.
- Continue to build collaborative fundamental, translational and clinical research programmes across our four research themes.
- Integrate patient-focused research across the island of Ireland that studies samples kindly donated by cancer patients.
- Establish fora for clinicians, allied health professional and academic research to meet.
- Establish more research collaborations between personnel on TCD campus and SJH campus.
- Expansion of existing Family Risk Registry (led by Dr Sarah McGarrigle, Prof Liz Connolly, Ms Yvonne Hanhauser and Mr Colin Farrington). The Breast Care department's family risk registry captures data on patients who are at elevated risk of developing breast cancer due to a strong family history of the disease and/or a known breast cancer predisposing variant, such as a germline mutation in BRCA1, BRCA2, PALB2, TP53 or other genes. Recorded data includes patient characteristics, data on risk management interventions such as surveillance imaging and risk-reducing breast and ovarian surgery, as well as follow-up data on cancer incidence and clinical outcomes. A key quality improvement project for 2024 is migration of this existing registry to a modern bespoke database with integrated patient risk-assessment tools. This initiative will result in enhanced quality, security and scalability of our registry data. Furthermore, this project will streamline patient risk assessment and management and will facilitate collaborative research.
- Continue developing new approaches and technologies for current cancer screening programmes, to support both prevention, early detection and chemoprevention of cancers.
- Support the WHO and, specifically, Ireland's roadmap to cervical cancer elimination through research evaluating the impact of HPV vaccination in Ireland.

- Focused research on new cancer screening approaches.
- Expansion of our understanding of genetic drivers of adult cancers to maximise cancer prevention opportunities.
- Further strengthening our research as a centre of excellence for liquid biopsies research, we will establish niche collaborations to help us to add additional novel assays and methodologies – based on Raman and FTIR spectroscopy as well as surface enhanced approaches such as SERS and surface enhanced infrared absorption (SEIRA) – for analysis of component of the liquid biopsy, including extracellular vesicles and circulating tumour cells.
- Expand our efforts to including studies of liquid biopsies/extracellular vesicles from other cancer types including gastrointestinal and pancreatic cancer and leukemias.
- Expand on biomarkers for cancer associated venous thrombosis to include other pro-thrombotic cancers e.g., lung cancer.
- Further our understanding of anti-cancer drug resistance, immune suppression and metastasis including the contribution of the tumour hypoxic microenvironment and cellular metabolism.

Example Awards Received

Fellowship Award from the Irish Society of Chartered Physiotherapists

Dr Gráinne Sheill was awarded a Fellowship Award from the Irish Society of Chartered Physiotherapists (ISCP) in recognition of her outstanding contribution and leadership in cancer rehabilitation in Ireland and in Europe. The ISCP Fellowship Awards are prestigious awards celebrating the achievements of individual ISCP members' service to the profession and the wider physiotherapy community. Gráinne was appointed as Ireland's first Clinical Specialist Physiotherapist in Cancer Rehabilitation at SJH in October 2021 and in 2022 she was awarded an Allied Health Leadership Award from the Irish Cancer Society to develop a cancer rehabilitation programme for patients with head and neck cancer. Gráinne has been a true leader in driving implementation of cancer rehabilitation research into practice in Ireland and is uniquely positioned as a senior and respected colleague with both clinical and research teams. We congratulate Gráinne on her well-deserved recognition from the ISCP and wish her every success as she continues to drive change in practice to improve patient outcomes.

Irish Healthcare Awards

Work spearheaded by Professor Catherine Hayes has been Highly Commended in the Public Health Initiative of the Year category at the 2023 Irish Health Care Awards. The research entitled 'We Can Quit2 randomised controlled trial of smoking cessation in disadvantaged women smokers' was a pilot trial of a smoking cessation programme 'We can Quit' (WCQ) in socio-economically disadvantaged (SED) women. WCQ, a theory-informed programme, comprises group-based behavioural support, optional access to combination nicotine replacement therapy (NRT) without charge, and individual follow-up between sessions. It is delivered in local communities by trained community facilitators (CFs), most of whom are ex-smokers.

The incidence of lung cancer in Irish women is the second highest in Europe. Smoking-related lung cancer is now the leading cause of cancer death in Irish women, having overtaken breast cancer. The highest smoking rates are among socio-economically disadvantaged (SED) women.

Women engaged well with both smoking cessation treatments and almost half provided follow-up data at six months. Establishing community-organised local advisory groups and their direct involvement in the trial design and implementation was key to strong and sustained engagement. Women who quit smoking in each group attended over twice as many sessions than those women who continued smoking. More women who received WCQ were abstinent from smoking than those who received the control treatment at the end of programme delivery. The results of this work provide important evidence on the enablers and barriers to delivering a tailored smoking cessation service to marginalised groups in Ireland.

The HSE Tobacco Control Programme have taken over running the We Can Quit programme. It is included the current Healthy Ireland implementation Plan 2023-2027 as one of the core group of services currently being rolled out in the Sláintecare Healthy Communities selected for delivery of enhanced community services. It may have also influenced a policy decision to extend access to free NRT to all HSE smoking cessation services.

“...that lady she taught me one thing that I didn't know and I taught her something that she wouldn't have known so that's the way that it went around in the meetings, we all found out something different to help us and if one fell off the wagon, we'd turn around and say 'don't worry about it.'” – Participant



Quality

- Ms Catherine Buckley, Quality Coordinator, Trinity St James's Cancer Institute

At TSJCI we continue to strive to provide high quality, safe, compassionate care with an emphasis on continually improving the experience and the outcomes for people with cancer and their support networks.

Key Developments during 2023

- Work continued on the development of new patient pathways and the review of existing patient pathways across TSJCI.
- Pathway-centric biannual review meetings have now been held for every pathway in collaboration with all cancer specialities.
- The external advisory board (EAB) to TSJCI had an annual review meeting with the team in TSJCI focusing on the progress with the TSJCI strategy and the road map to accreditation to Comprehensive Cancer Centre status.
- A three-year quality strategy (2023-2026) was developed for TSJCI. This is aligned with the TSJCI Strategy 2023-2028 and underpinned by National Standards for Safer Better Healthcare (HIQA, 2012).
- In September 2023, the OECl Implementation Group was formed. The group has representatives from across TSJCI who will represent/lead out on the OECl accreditation process for their areas of speciality.
- Further work continued on the development of the Complications Registry and the Cancer Clinical Outcomes Group (CCOG).
- Quality Improvement plan updated.
- Three OECl inspectors on the TSJCI team continued to support OECl by providing audit support to inspect other European cancer centres.

Key Priorities for 2024

- The main focus in 2024, will be on TSJCI preparation for and undertaking of the accreditation process to achieve OECl Comprehensive Cancer Centre status.
- 2023 Annual quality report for TSJCI.
- Further improving the quality reporting structures across TSJCI.

Preparation for Accreditation

We would like to thank all staff members across TSJCI for their support and engagement in the OECl accreditation process preparation work.

The TSJCI Cancer Survivorship Network

- Catherine Buckley
- Dr Emer Guinan
- Mr John Sullivan

The TSJCI Cancer Survivorship Network is a supportive, collaborative environment that links healthcare professionals, researchers, educators, patients, and their supporters who work together to achieve innovation, integration and advancement in survivorship care to enhance the lives of people living with and beyond cancer.

The Network includes 85 members across 39 areas of specialty from SJH, TCD, SLRON at SJH, Children's Health Ireland (CHI)@Crumlin, Dublin Dental University Hospital, Stewarts Care Palmerstown, Our Lady's Hospice and Care Services, Harold's Cross and the TSJCI Patient Representative Group.

The objectives of the network include:

- To share and publicise information sources and references relevant to cancer survivorship.
- To promote research and facilitate networking and communication amongst members.
- To provide educational opportunities relevant to the needs of the membership, as well as assist with the organisation of scientific or patient events in the area of cancer survivorship.

The governance structure of the network comprises of three co-chairs with a representative from SJH/SLRON; a representative from the TSJCI Programme Office and a representative from Trinity College Dublin. Those in post currently are Catherine Buckley (TSJCI Programme Office representative), Mr John Sullivan (SJH/SLRON representative) and Dr Emer Guinan (TCD representative). The wider group is then divided into three working groups, each dedicated to the delivery of one project in 2023/2024. Specifically, these ongoing projects are:

1. The development of a Directory of Survivorship Services available at SJH.
2. The organisation of both patient and staff orientated educational events.
3. The establishment of multidisciplinary survivorship clinical structures.

The priorities for 2023/2024 were developed during a Networking Day, made possible by funding obtained through an Irish Cancer Society Cancer Research Networking Award (SCRNA22SHE) which enabled us to invite Nikki Cannon, Transformation Lead, Personalised Care and Cancer Survivorship, Guy's and St Thomas' NHS Foundation Trust to the TSJCI to facilitate an in-person workshop.

Key deliverables from 2023/2024 arising from this Networking Day include:

- Data collection is complete for the Directory of Survivorship Services and a report is being prepared.
- *Understanding Cancer Survivorship* – an educational event for hospital staff and students delivered on 18th December 2023.
- *Living Well with and Beyond Cancer* – an educational event for patients delivered on 1st Feb 2023 (World Cancer Day) comprising three sessions throughout the day that covered a range of treatment related and survivorship issues.
- *Living Through the Cancer Experience* – a patient information day delivered on Saturday March 2nd 2024 in the Hilton Hotel Kilmainham, funded through the Health Services Staff Credit Union.
- Visiting Professor Awards funded by the Trinity College Dublin, Faculty of Health Sciences, Visiting Professorships and Fellowships Benefaction Fund to bring Dr Maarten Cuypers and Associate Prof Nicolas Hart to visit in summer 2024.

Patient Representative Group

- Ms Catherine Buckley, Quality Coordinator, TSJCI

Introduction

This TSJCI Patient Representative Group (PRG) annual report provides an overview of the activities and achievements of the patient representatives during 2023. It includes insights into their advocacy efforts, their contribution through feedback, their collaboration with healthcare professionals and researchers and initiatives that they have been involved with, in their effort to optimise the patient voice across TSJCI. They attended ten meetings over the year, all of which were held virtually.


Key Developments during 2023

- The group developed an 'Innovation Summary Form' and 'Service Development Summary Form', for innovators and health care professionals to complete, prior to meeting with the group. The PRG members have also developed a formal 'Innovator Proposal Feedback Form' and a 'Service Development Proposal Feedback form' to provide their comments and suggestions to the health care professionals/innovators after their presentation pitch and discussion. The informal feedback from the researchers and innovators of these Summary forms has been very positive as it guides them to provide the key information as requested by the PRG members.
- The PRG members have also worked with teams in the haematology and oncology services to review many survey tools this year.
- The members have co-authored an article for publication on Exercise in the Haematology setting.
- We welcomed three new members to the group this year.
- The members became more involved in the working groups associated with the Cancer Survivorship Network and in project-related working groups within research.

Learning Opportunities during 2023

- Group members participated in a HIQA led focus group on a revision of the HIQA National in-patient experience survey.
- Members have participated in a research workshop where they participated in the PERCS study protocol review.
- Members attended several conferences and information days including the National PPI meeting hosted by the Irish Cancer Society, they represented TSJCI at the Precision Oncology Ireland meeting and they participated in the Networking Day for the TSJCI Cancer Survivorship Network hosted by Ms Nikki Cannon Survivorship and Personalised Care Transformation Lead, Guys and St Thomas's Hospital, NHS Trust, UK.
- Members have also contributed to the education of staff by presenting at the inaugural healthcare assistant education day, the SJH Communications course and the Fundamentals in Oncology course.
- They have contributed to the curriculum review of the Schools of Radiation Therapy and Physiotherapy departments in TCD.
- Members also started new initiatives, i.e., by being involved in podcast development.

Key Priorities for 2024

- Expand membership of the group.
 - Launch the TSJCI PRG Strategy 2024-2027.
 - Participate in the OECl reaccreditation process.
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Appendix 1: Glossary of Terms

Term	Descriptions
AYA	Adolescent and Young Adults
BRCA	Breast Cancer Predisposition Gene
cANP	Candidate Advanced Nurse Practitioner
CH	The Coombe Hospital
CMD	Cancer Molecular Diagnostics
CNM	Clinical Nurse Manager
CNS	Clinical Nurse Specialist
CREST	Cancer Research Stimulus Awards
CSTD	Closed system drug-transfer device
EPR	Electronic Patient Record
ERAS	Enhanced recovery after surgery
ERATS	Enhanced recovery after thoracic surgery
FISH Test	Fluorescence in situ hybridization test
HIQA	Health Information and Quality Authority
HODC	Haematology Oncology Day Centre
IHC	Immunohistochemistry
IHNS	Irish Head and Neck Society
ICU	Intensive Care Unit
JACIE	Joint Accreditation Committee of the International Society for Cellular Therapy and the European Group for Blood and Marrow Transplantation
JFICMI	Joint Faculty of Intensive Care Medicine of Ireland
KPI	Key Performance Indicator
LUTS	Lower Urinary Tract Symptoms
MDT	Multi-Disciplinary Team
MRHP	Midlands Regional Hospital Portlaoise
NCCP	National Cancer Control Programme
NCIS	National Cancer Information System
OECI	Organisation of European Cancer Institutes
OGJ	Oesophago-gastric-junction
PREHIT/PREHAB	Pre-high intensity interval training/pre-habilitation
PPI	Public Patient Involvement

QIP	Quality Improvement Plan
RANP	Registered Advanced Nurse Practitioner
RCPI	Royal College of Physicians of Ireland
PRG	Patient Representative Group
SABR	Stereotactic Ablative Radiotherapy
SACT	Systemic Anti-Cancer Therapy
SCT	Stem Cell Transplant
TCP	TCD Homecare
TSJCI	Trinity St James's Cancer Institute
TUH	Tallaght University Hospital
VTE	Venous Thromboembolism
WTE	Whole Time Equivalent

