

# Facilitating access to novel and highly specialised treatments



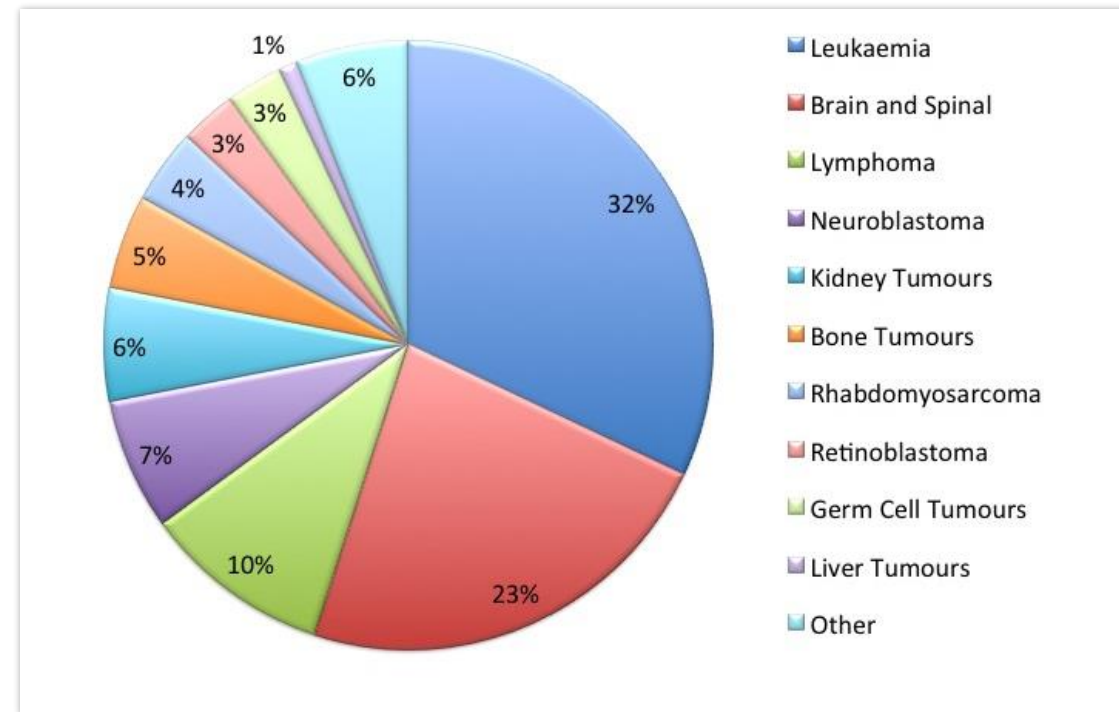
Dr Richard Mitchell

Director, Kids Cancer Centre SCH

ACCN Innovations Showcase 21<sup>st</sup> May 2024

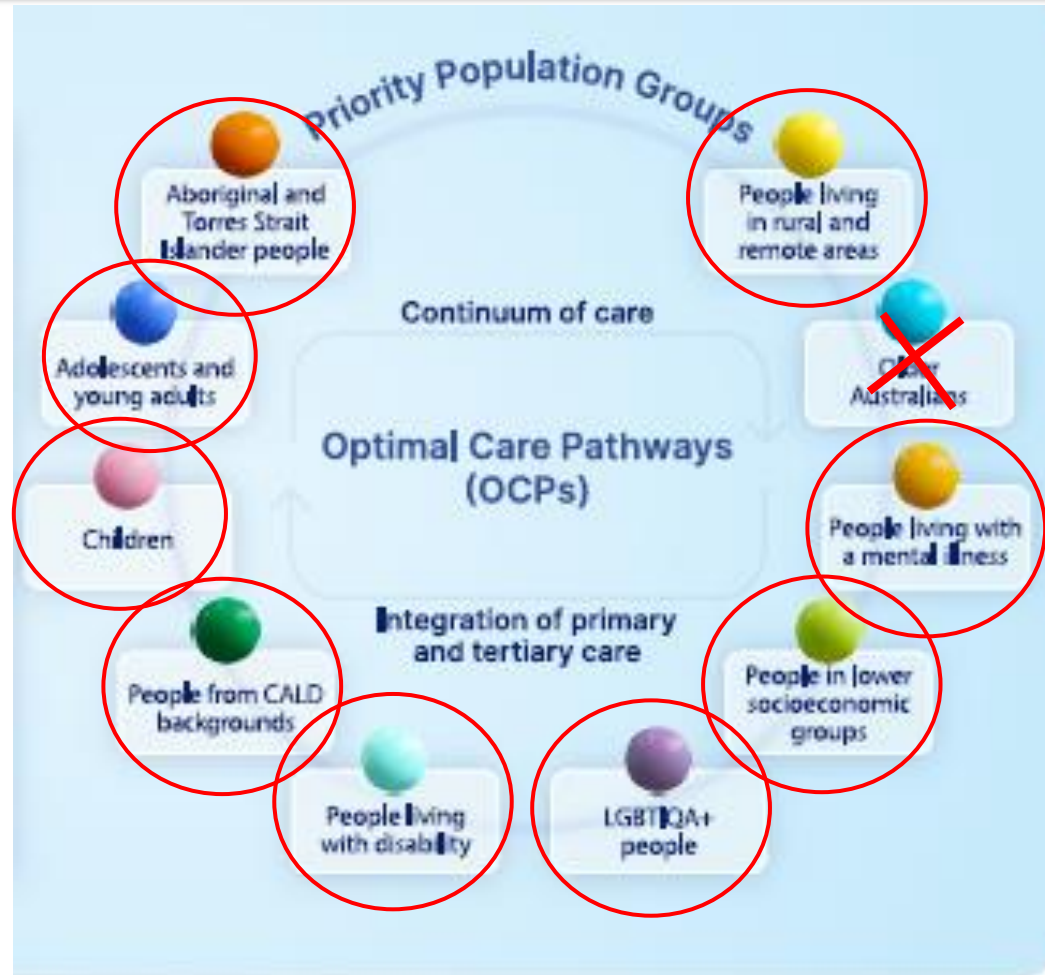
# Paediatric cancer

- 1000 patients/ year in Australia
- Different pathology to adult disease
- Most treatment led by med onc
- Relevance to wider audience?





# Australian Cancer Plan – Priority populations



# Patients in rural and remote areas

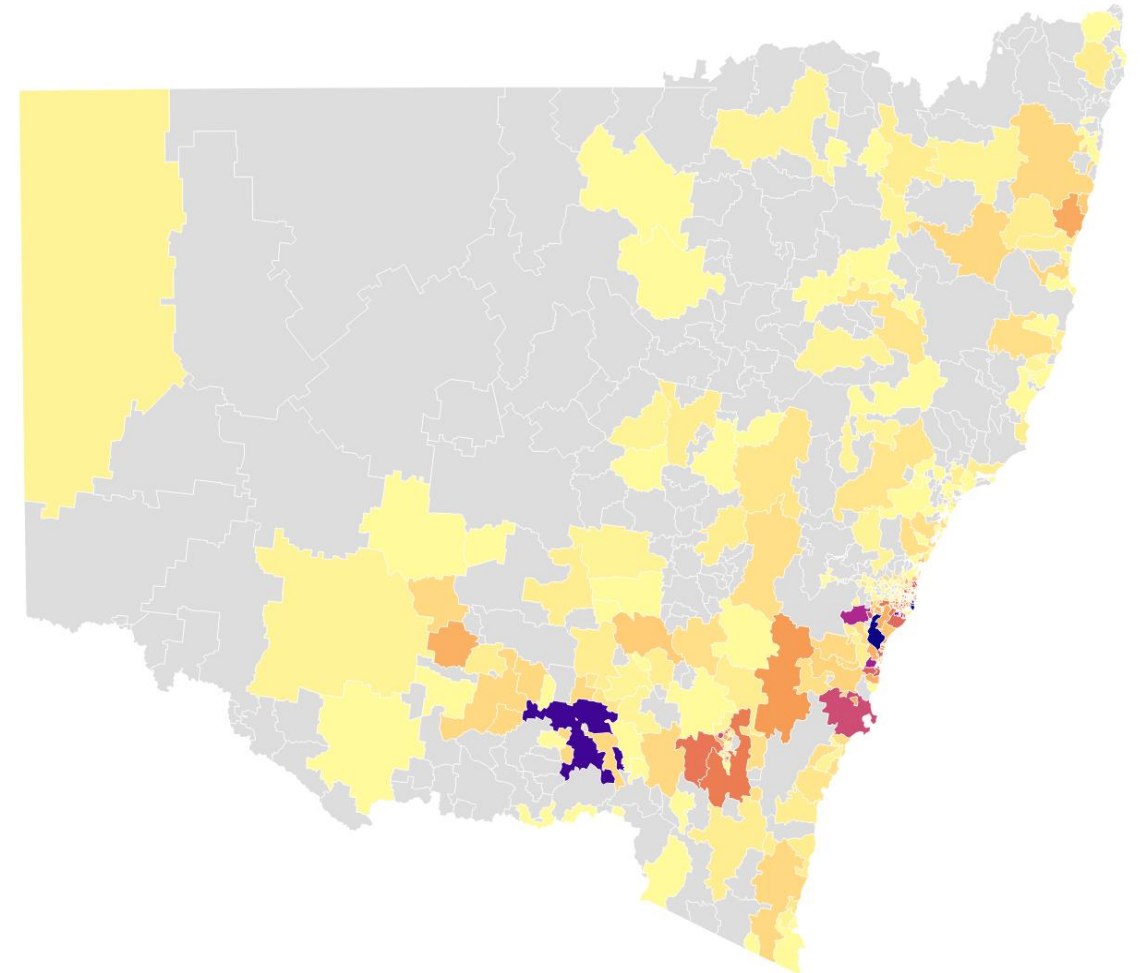
- 9 tertiary centres across Australia
- Highly specialised workforce
- Need to ensure equity of access
- Each state has various capabilities



# KCC outreach program

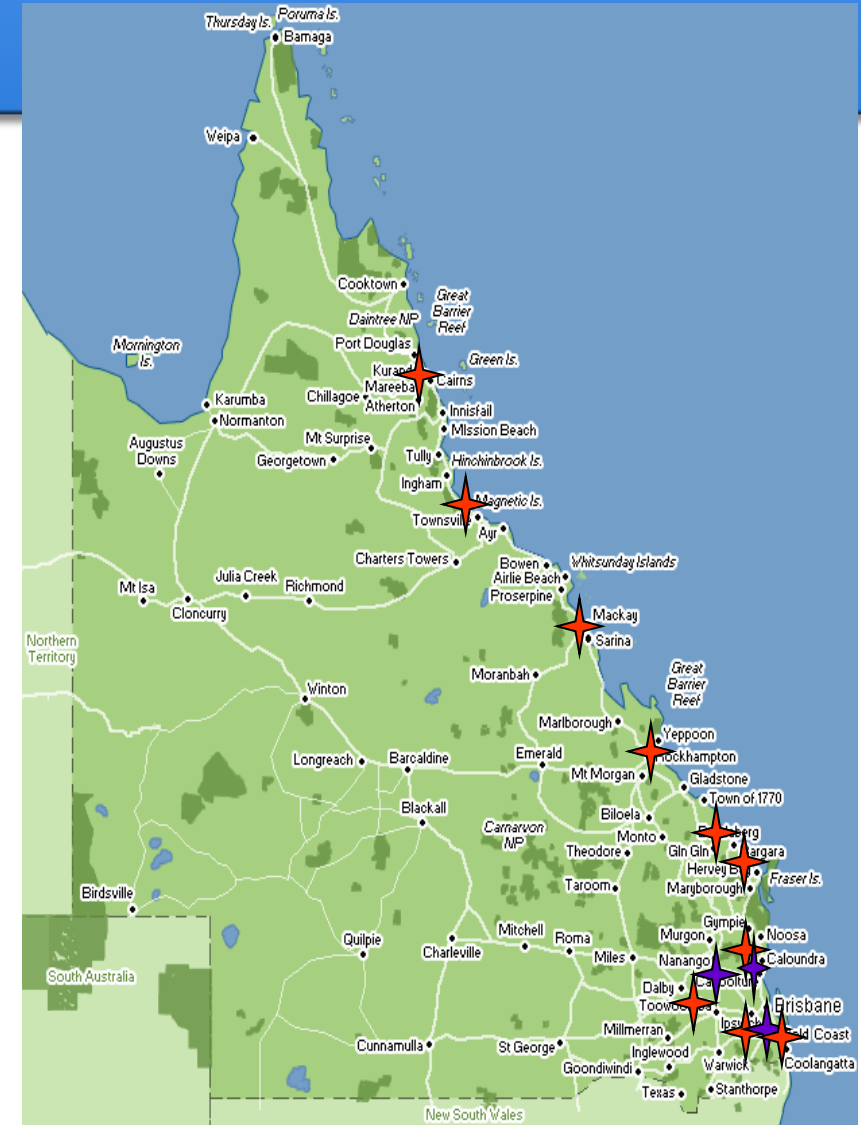


- Principles of program
  - Increase skills of local providers
  - Multidisciplinary outreach clinics
  - Deliver therapy in local hospital where safe to do so
- Lead hospitals identified in each LHD
- Education F2F and virtual
- Currently 44 clinics per annum



# Queensland Paediatric Palliative care Haematology and Oncology Network (QPPHON)

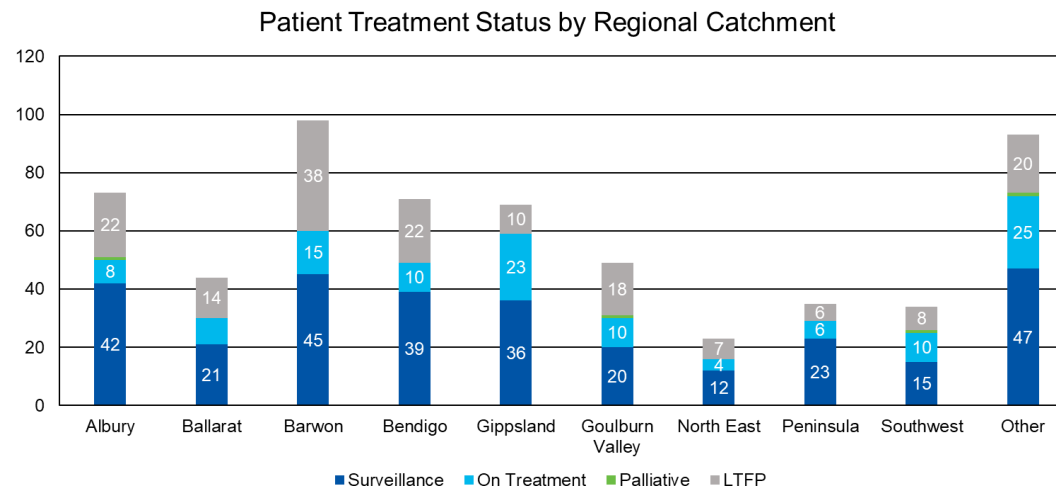
- 10 Regional centres supported by oncology unit at QCH
- 4 metropolitan units under service development
- Regional centre has:
  - Lead paediatrician
  - Regional case manager
  - Local allied health
- QPPHON is subnetwork of Statewide Child and Youth Network
  - Links with Statewide Cancer Network



# The Victorian PICS Regional Outreach Shared Care Program.

**The program is a nurse-led (1.4 FTE) model, managed by PICS, supported by Sporting Chance.**

1. One in three families treated for cancer at the RCH are from regional Victoria.
2. The program facilitates a formal service agreement with nine regional health services.
3. The service agreement is informed by the statewide PICS Service Capability Framework
4. There is a defined scope of practice, including chemo, supportive care and surveillance reviews.
5. PICS facilitates care coordination, governance, 22 outreach clinics and onsite education.





# ACP Strategic objectives



- **Strategic objective 3: World class health systems for optimal care**
  - 3.2.2 Develop a national framework for networked, distributed comprehensive cancer care, to facilitate provision of services as close as safely possible to where patients live
- **Strategic objective 5: Workforce to transform the delivery of cancer care**
  - 5.2.2 Build on existing capability of the primary care workforce to collaboratively and sustainably support the needs of consumers

# ZERO Childhood Cancer Program

- National personalised medicine research platform available to every child with cancer in Australia
- Principle: diagnostic platform that better informs treatment
- Funded by MRFF and philanthropy
  - 2020-2025; \$67 million





A child gets sick and goes to hospital



The child is diagnosed with cancer



Child begins standard treatment



Child's treatment is potentially refined



Child's treatment is potentially refined



Better outcomes for children with cancer



Tumour sample sent to Children's Cancer Institute



Multi-disciplinary tumor board review results and share with the child's doctor



Multi-disciplinary tumor board review results and share with the child's doctor



In-depth genomic analysis



Further testing conducted for high-risk children (where possible)

DNA Whole Genome Sequencing (WGS)

RNA Whole Transcriptome Sequencing (WTS)

Methylation Profiling

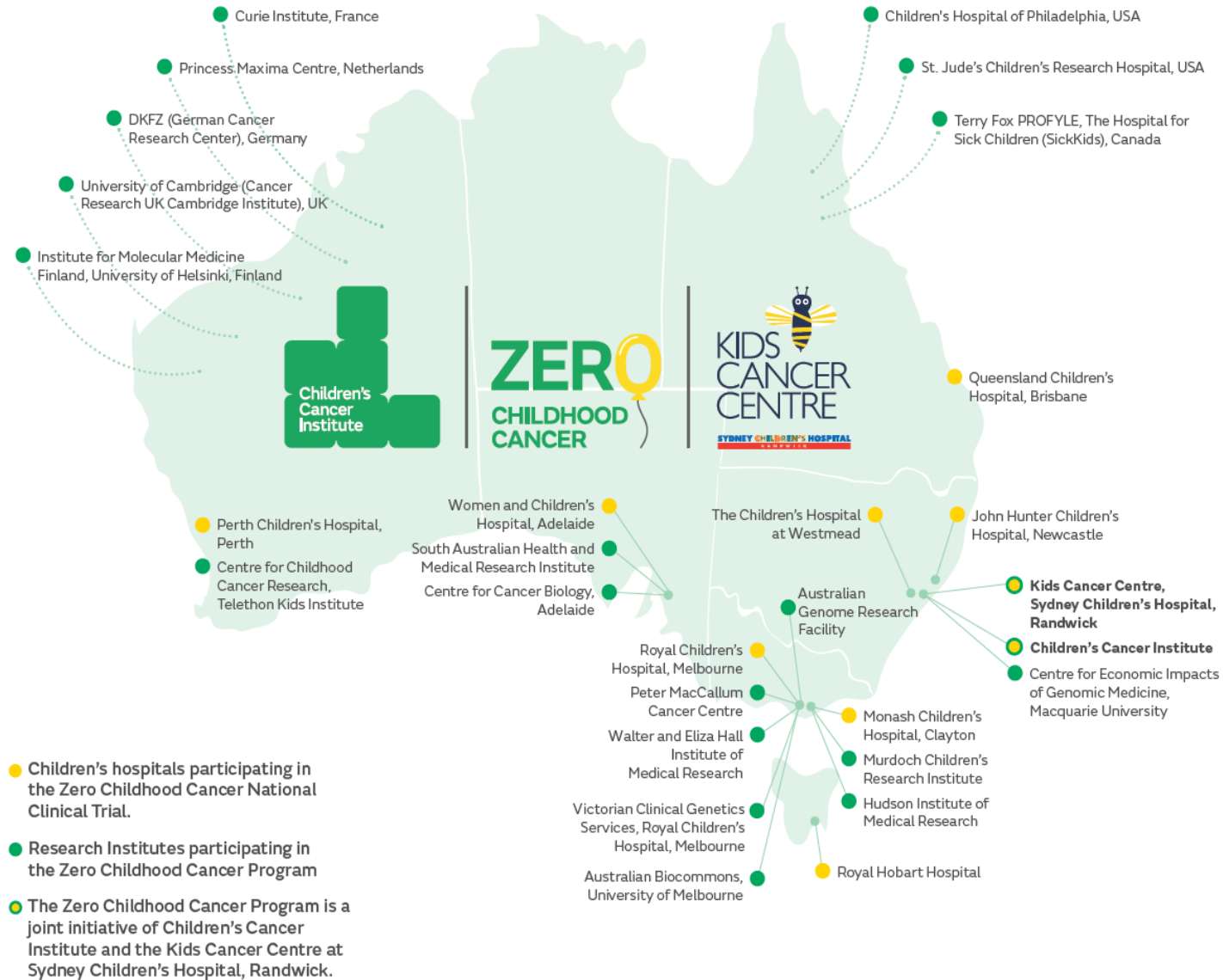
Liquid biopsy monitoring

Drug screening in test tubes (in vitro)

Drug screening in biological models (in vivo)



# ZERO program collaborators



# Molecular tumour board

- Weekly virtual meeting
- Clinicians, researchers, trainees, and ZERO team
- Patient reports presented and discussed, including potential treatment options



# Enrolment to date

>1600  
children

## CLINICAL DATA

TARGET,  
PRISM,  
ZERO2



Cancer  
diagnosis/prognosis  
clinical information



## GENOMIC DATA

WGS      RNAseq



methylation  
H<sub>3</sub>C      CH<sub>3</sub>  
>130M  
variants  
analysed

Genetic variants

>2500 genetic  
variants  
identified

## BIOLOGICAL MODEL DATA

PDX      HTS      Drugs



>200 cancer  
models  
established      >160  
curated drug  
screens      Up to  
150  
drugs

Public annotation



Integration API



## BIOSPECIMENS



>2300 tumour  
samples  
>1100 germline  
samples

Published data



# Increasing genomic infrastructure

- Tumour specific pipelines, customised software platforms
- Supporting large scale genomic precision medicine nationally
- Over 1000 patient data sets
  - ~1 pentabyte of data



# Integrated research programs



## Target identification

- Functional Genomics
- Cancer Predisposition



## Matching target to treatments

- Preclinical Testing
- Immunoprofiling
- Liquid biopsy



## More treatment options

- New genomically guided clinical trials
- Drug access taskforce
- PROSPeCT (Omico)



## Preparing the health system

- Psychosocial sciences
- Health economics
- Health implementation
- Public health, Ethics, Legal



# Cancer prevention in children

- Germline analysis for cancer predisposition syndromes
- Current rate of CPS estimated 16%
  - 3 times previous literature
  - Prevalence of adult cancer genes being found in children
- ZERO funding genetic counsellors at every Australian site
- Planning for national registry for children with CPS



# Training the next generation



- Biennial workshop
- 3 monthly virtual education



# Australian Cancer Plan

Strategic Objectives and 10-year ambitions

## Maximising Cancer Prevention and Early Detection

A cancer control system that seeks to eliminate racism, proactively reduces cancer risk and supports all Australians to access personalised, evidence-based cancer prevention and early detection strategies

## Enhanced Consumer Experience

People affected by cancer are partners in culturally safe, equitable and responsive cancer care, and health services and systems are trusted and supported for optimal experience, quality of life and cancer outcomes

## World Class Health Systems for Optimal Care

Integrated, coordinated, data-driven, high quality health service systems that consistently deliver optimal cancer care and excellence in outcomes

## Strong and Dynamic Foundations

A modern, fit for purpose cancer control infrastructure, advanced by the innovative application of technology, research and data to improve Australia's cancer outcomes

## Workforce to Transform the Delivery of Cancer Care

An engaged, capable and future-focused cancer workforce that is culturally safe and responsive, well-equipped, well-supported and driven by collaboration, continuous improvement and diversity to enable the best care for all Australians affected by cancer

## Achieving Equity in Cancer Outcomes for Aboriginal and Torres Strait Islander People

Supporting Aboriginal and Torres Strait Islander knowledge, strength and sovereignty in a health system that achieves equity for Aboriginal and Torres Strait Islander people affected by cancer

5-year goals and actions

Culturally safe prevention and screening approaches to reduce cancer risk are embedded, and evidence-based and personalised cancer prevention and early detection strategies are incorporated into standard of care

Strengthen the policy and regulatory environment to address known modifiable lifestyle factors and social, cultural, commercial and environmental determinants of health

Expand access to culturally safe and responsive immunisation programs to reduce risk of cancers, including in partnership with Aboriginal Community Controlled Health Services and community-led priority population groups

Implement new, and improve existing, evidence-based, risk-stratified cancer screening programs

Develop a policy framework for genomics in cancer control across the cancer care continuum  
Increase access to and uptake of health assessments through Medicare for cancer prevention and early detection for Aboriginal and Torres Strait Islander people

Personalised models of navigation in cancer care are widely available to all Australians affected by cancer – engaging consumers in culturally safe, equitable and responsive cancer care, and driving re-orientation of health service systems, including training and distribution of cancer health workforce

Evaluate, adapt and scale nationally integrated care navigation models across the cancer care continuum

Require health services to provide co-designed, culturally responsive resources to enable healthcare providers to communicate respectfully with consumers

Ensure multidisciplinary cancer care teams for Aboriginal and Torres Strait Islander people are trauma-aware and healing-informed

Networked high-quality comprehensive cancer care systems that deliver optimal cancer care and better outcomes

Integrate Optimal Care Pathways (OCPs) as routine cancer care using a monitoring and evaluation system that links the implementation of OCPs to patient outcomes and experience

Establish an Australian Comprehensive Cancer Network (ACCN) to ensure connectivity and sharing of expertise between Comprehensive Cancer Centres, other cancer services, regional hospitals, community and primary care. The establishment of an ACCN will increase equity of access across services for all patients, deliver cancer care close to home, and monitor evidence-based system performance

Improve equitable access to evidence-based, innovative models of integrated multidisciplinary care across the cancer continuum

Implement sustainable approaches to improve access to accepted, traditional healing practitioners within cancer services to enable an integrated, trauma-aware, healing-informed oncology approach for Aboriginal and Torres Strait Islander people

A national cancer data ecosystem supporting evidence-based, innovative models of care which incorporate national uptake of advanced technology and infrastructure, underpinned by world-class research and a clinical trials landscape in which all Australians have equal access

Design and embed patient reported experience and patient reported outcomes into national performance monitoring and reporting for all providers, to assess services for all population groups and establish an evidence base

Expand access to digitally enabled cancer care to improve equity and access to quality cancer care, particularly in regional, rural and remote areas

Explore and test innovative approaches to health service funding models to address areas of need, and system improvement, in cancer care

Expand the use of technology and virtual care to increase access for Aboriginal and Torres Strait Islander people and to support communities across the cancer care continuum

Strategies implemented to enable a culturally safe, responsive, and capable multidisciplinary workforce that is working at the top of their scope of practice and ability to deliver high-quality cancer care

Implement a cancer care workforce pipeline that meets demand for optimal cancer care, with diversity measures in training, recruitment and talent management to ensure the cancer workforce represents the diversity of patient populations

Assist the sector to support all cancer care practitioners to work at the top of their scope of practice, increase retention and ensure ongoing access to continuing professional development

Routinely integrate cultural safety training programs for cancer service providers, including through community-based partnerships with priority population groups

Support national coordination and implementation of a plan to recruit, train and retain the Aboriginal and Torres Strait Islander cancer care workforce

Priority is given to accountability for the delivery of culturally safe services by all health professionals; training opportunities and support programs are established for Aboriginal and Torres Strait Islander health professionals in the cancer sector

Establish ongoing place-based engagement with Aboriginal and Torres Strait Islander people to understand emerging needs across the cancer care continuum

Implement strategies to embed culturally safe care within cancer-related services for Aboriginal and Torres Strait Islander people

2-year goals and actions

Access to culturally safe prevention and screening approaches to reduce cancer risk is improved, and evidence-based and personalised cancer risk assessment strategies are identified

Deliver cancer prevention and health promotion activities, including healthy lifestyles, immunisation, and population screening participation, co-designed and tailored to a range of settings

Strengthen cancer prevention in broader health strategies and public health partnerships

Promote translational research on the impact of social, cultural, commercial and environmental determinants of health on cancer outcomes for priority populations to inform policy and practice

Undertake ongoing assessment of the evidence for risk-based, cost-effective population cancer screening

Strengthen health literacy for Aboriginal and Torres Strait Islander people through co-designed health promotion and lifestyle strategies for cancer prevention

Person-centred models of integrated navigation in cancer care are nationally defined, co-designed, developed and tested with consumers, to incorporate culturally safe cancer care

Develop a national framework for and implement integrated multi-channel, multi-disciplined navigation models that ensure the right support at the right time for every consumer across the cancer continuum

Improve availability of co-designed, tailored information and care for consumers to improve health literacy and reduce cancer-related stigma

Support health services to provide co-designed, culturally responsive resources to enable healthcare providers to communicate respectfully with consumers

Frameworks for high-quality comprehensive health service systems established to deliver better cancer care and improved outcomes

Develop and implement a national framework that standardises the development, update, evaluation and uptake of Optimal Care Pathways (OCPs), including for priority population groups

Develop a national framework for networked, distributed comprehensive cancer care, to facilitate provision of services as close as safely possible to where patients live. This will include the role of Comprehensive Cancer Centres to enhance patient outcomes, strengthen transparency and accountability, and drive continuous improvements for all patients across the network regardless of where the care is provided

Implement innovative, evidence-based and cost-effective models of care for people living with and beyond cancer

Develop and refine integrated care models to maximise access to high-quality, timely and evidence-based palliative and end-of-life care, including voluntary assisted dying

Lead a national approach to identifying and reporting Indigenous status in cancer care

Nationally agreed frameworks for collection and reporting of comprehensive cancer data, and implementation of new technologies into routine cancer care, with a focus on research priorities that drive innovation and fast-track opening of cancer clinical trials in Australia

Develop an agreed national cancer data framework to improve accessibility, consistency and comprehensiveness of integrated data assets

Ensure targeted and innovative research investment into areas of unmet and emerging need; and improve clinical trial design and equitable access

Identify opportunities to improve equitable cancer care through the digital health ecosystem

Establish Aboriginal and Torres Strait Islander-led initiatives which strengthen Indigenous Data Sovereignty and governance of cancer data

National strategies developed to enhance clinical and cultural safety training and accreditation processes, build workforce diversity, expand multidisciplinary roles and determine retention strategies

Identify current and emerging workforce undersupply in line with cancer workforce modeling and other national health workforce strategies, and initiate planning with the sector towards building future workforce capacity and capability

Build on existing capability of the primary care workforce to collaboratively and sustainably support the needs of consumers

Evaluate and extend cultural safety training programs to cancer service providers, including through community-based partnerships with priority population groups

Identify priority areas of need for Aboriginal and Torres Strait Islander cancer care workforce and develop a plan to recruit, train and retain the Aboriginal and Torres Strait Islander cancer care workforce

Collaborative partnership and cross-sector approaches are developed and enhanced at the system, service and individual level; Individual and institutional racism and discrimination across cancer services are identified and addressed

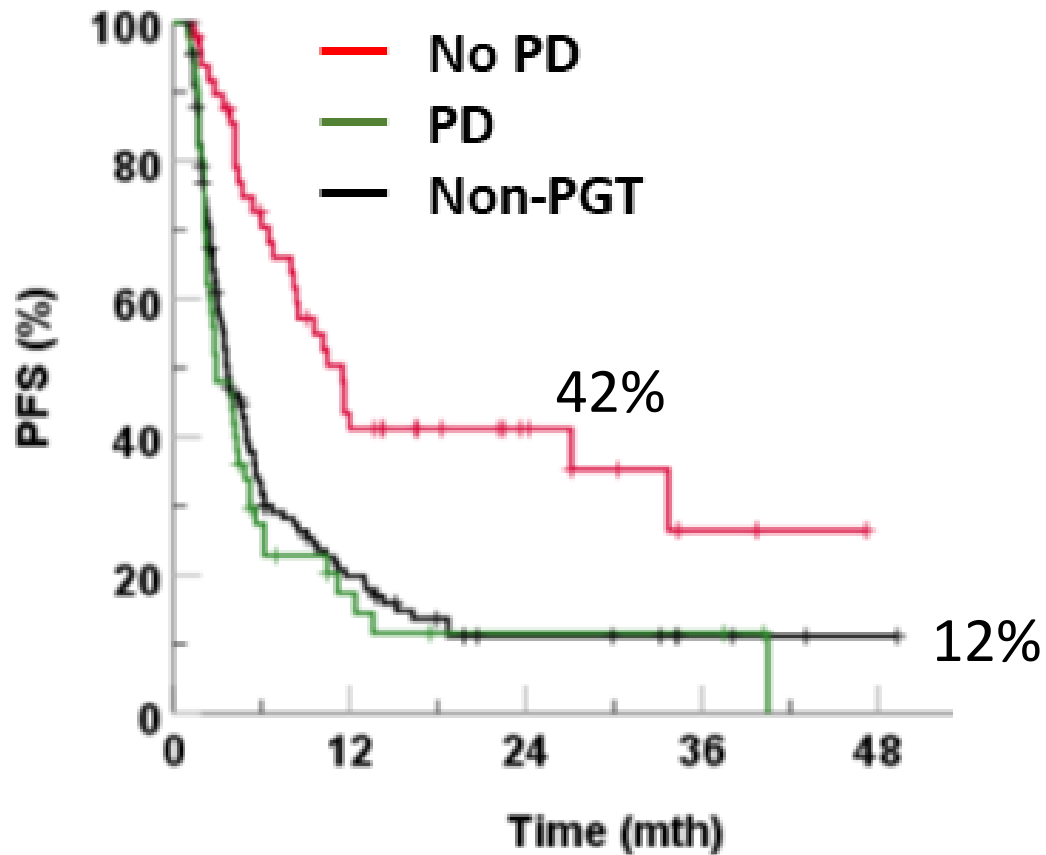
Embed Aboriginal and Torres Strait Islander voices in policymaking on cancer prevention, care delivery and standards through leadership, collaboration and co-design processes

Strengthen collaboration with service providers, regulatory authorities and the Aboriginal and Torres Strait Islander cancer workforce to establish clear accountability for culturally safe care and compliance with national standards

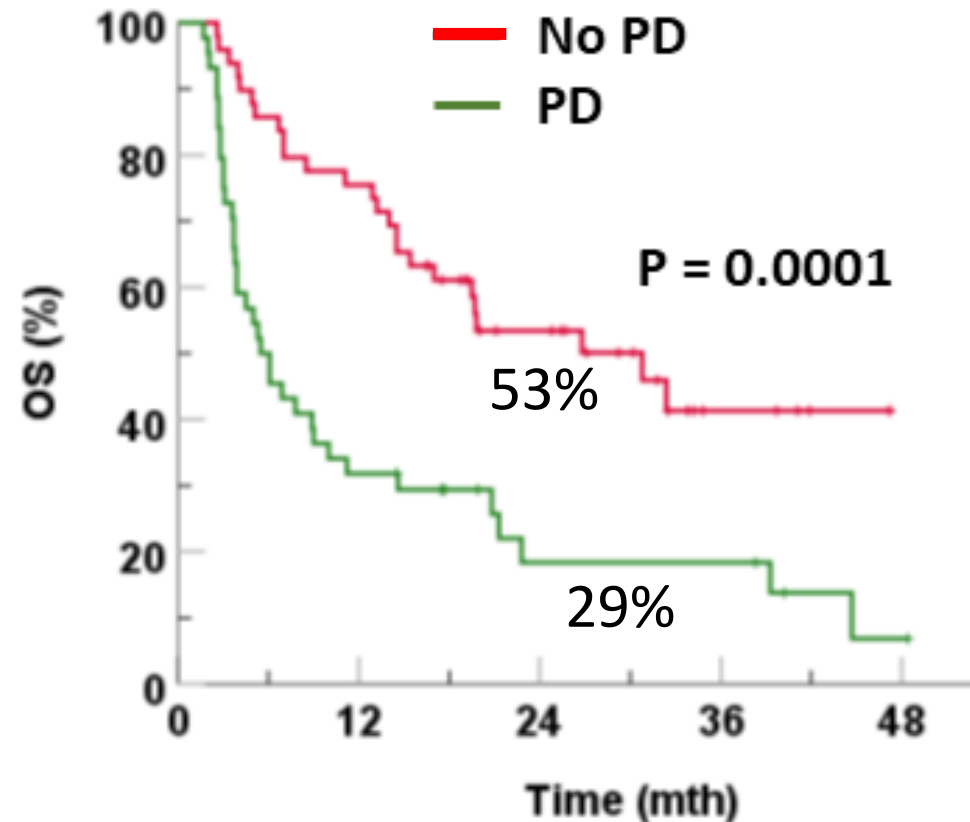
Establish and enhance collaborative partnerships with communities and Aboriginal and Torres Strait Islander-led organisations

# Improving outcomes

## 2 year Progression Free Survival



## 2 year Overall Survival



Lau et al Nat Med 2024

# Future challenges

- Determine who needs what testing
- Continuous improvement of the platform
- Integration into the health system
- Sustainable funding model



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The children and their families

All staff at ZERO trial sites

All collaborating researchers and organisations



# ZERO Supporters

## Program Partners

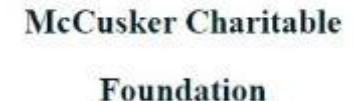


## Lead Funding Partners



Australian Government  
Department of Health

Medical Research  
Future Fund



Capacity Campaign Board & Supporters