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Australian Government

Cancer Australia

National Centre for
Gynaecological Cancers

THE GYNAECOLOGICAL CANCERS WORKFORCE INITIATIVE

COMMUNIQUÉ # 3 - 18TH MARCH, 2010

Welcome to the 3rd communiqué for the Gynaecological Cancers Workforce Initiative

The communiqué is a **key component of the National Communication and Collaboration Strategy** for the Initiative. It aims to streamline communication and will continue to be **circulated on a bi-monthly basis** throughout the duration of the Initiative.

For further information about this Initiative, or if you would like to contribute to the next communiqué, or if you require any project support please contact Gerry Cleary from the National Gynaecological Cancers Workforce Support Service (email: gerry.cleary@sigginsmiller.com.au)

The Gynaecological Cancers Workforce Initiative has been developed based on key learnings from Cancer Australia's Cancer Service Networks National Demonstration Program (CanNET). It has always been the intention that strong linkages be developed between the two initiatives and that project officers would keep abreast of CanNET in their state or territory.

As many of you have not been involved with CanNET, this third communiqué provides an overview of the initiative, including links to the CanNET website and key learnings from

CanNET's 2006-2009 phase. Project officers involved in the Gynaecological Cancers Workforce Initiative are urged to familiarise themselves with the CanNET project in their state or territory, and ensure they are not duplicating any work that has previously been undertaken or is to be undertaken over the next three years.

The CanNET website can be found at:

<http://www.canceraustralia.gov.au/cannet-homepage.aspx>

Overview of CanNET

Cancer Australia has developed CanNET to better link regional and metropolitan cancer services. CanNET will improve access to quality, clinically-effective cancer services throughout Australia, particularly for specific population groups that may currently have poorer cancer outcomes, including Aboriginal and Torres Strait Islander peoples and people living in rural and regional areas.

Similar to the model of MCNs from the National Health Service (NHS) in Scotland and England, the CanNET program was built around a number of key elements or building blocks (see the figure on Page 2).

In the initial phase of CanNET all of the States and the Northern Territory were funded to deliver a range of cancer services. Outcomes of the first phase included:

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- increased consumer participation in their MDT treatment plans
- increased consumer and health professional access to information about treatment pathways
- improved networks between regional and metropolitan cancer services

Cancer Australia is currently developing new funding agreements with all of the states and territories to build on, enhance and embed the successes of the first phase.

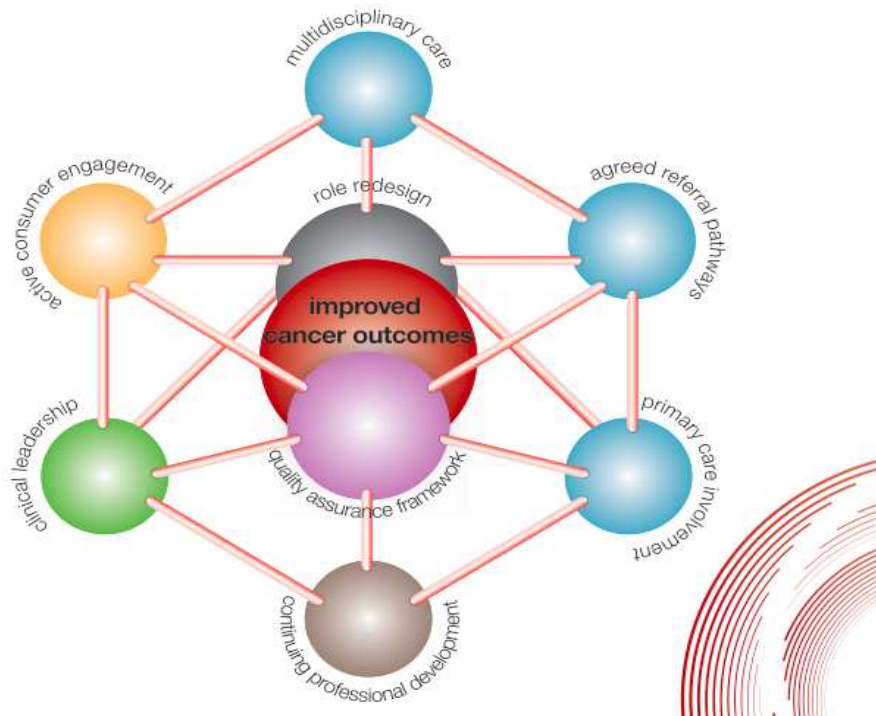
Key learnings from CanNET (2006-2009)

The evaluation of CanNET (2006-2009) identified achievements in relation to each of the key elements and higher level lessons about enablers of and barriers to effective network development.

Collectively, the development of the networks illustrates the need for and importance of a comprehensive change management strategy to support network development.

A comprehensive change management strategy requires:

- a top-down, bottom-up approach
- effective governance and multidisciplinary clinical leadership
- broad ranging stakeholder engagement and involvement mechanisms
- continued and varied communication processes
- establishing a sense of urgency and need for change using local data
- having realistic and achievable project plans that involve a phased or stepwise approach
- publicising early wins to offer stakeholders proof that the new model or way of working can provide results superior to existing practices.



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The National Gynaecological Cancers Service Delivery and Resource Framework

The development of the National Gynaecological Cancers Service Delivery and Resource Framework (the *National Framework*) is progressing well. A Project Working Group, chaired by Dr Gerry Wain (Westmead, NSW) has been established with membership from a wide range of disciplines and perspectives. A Consumer Reference Group met for the second time in early March.

The Consultation Paper recently circulated to key stakeholders brings together a wide range of evidence gleaned in the early phases of the Project.

The Paper raises many critical questions about service delivery models, workforce requirements and organisational structures and processes to optimise care across a range of services. These are complex issues and we welcome feedback from all key stakeholders **by Friday 19 March**.

Please feel free to circulate the Consultation Paper and the accompanying feedback sheet widely through your networks and **actively encourage** stakeholders to review the documents and provide their responses.

The drafting of the *National Framework* based on the Consultation Paper has commenced and will be guided by stakeholders' feedback. The completion of the service mapping tool from each jurisdiction will also help to understand the local workforce issues and to consider the resources (skills and estimated numbers) required to meet women's needs.

In addition, an electronic survey for consumers is now underway to elicit women's perspectives on current services. A small number of interviews with regional and rural women are planned to explore in more detail some of the challenges for them.

The project team looks forward to continuing to work with the jurisdictional project staff in order to achieve a high quality *National Framework* that will help to guide service improvement for women with gynaecological cancers across Australia.

For more information or any questions, please contact Sheila Hirst on 0409 258 223 or sheilahirst@iinet.net.au

An overview of the state and territory gynaecological cancers workforce projects

As part of the Gynaecological Cancers Workforce Initiative, the National Centre for Gynaecological Cancers has partnered with the jurisdictions to establish **five gynaecological cancers workforce projects** in Victoria and Tasmania, NSW and ACT, Queensland, SA and NT, and WA.

***Actions:** Become familiar with the design and intent and progress of each of the jurisdictional projects in order to identify any synergies with your state and territory gynaecological cancers workforce, and potential areas for collaboration.*

The Projects are in their early stages and project officers are on board, people are starting local consultations, project working groups are up and running, and the service mapping is underway.

One of the challenges is cross-jurisdictional working. We look forward to early learnings from the formation of those relationships, and how best to support those relationships so that the needs of each jurisdiction are met.

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New South Wales

Governance

The NSW gynaecological cancers workforce project is funded through an agreement between Cancer Australia (through the National Centre for Gynaecological Cancers) and the Cancer Institute NSW. A Project Working Group is responsible for coordinating strategies and activities.

Clinical Leadership

A Project Steering Committee, that includes representatives from all key clinical specialties and participating jurisdictions, serves as the governing body for the initiative. The Chair of this Committee is A/Prof Anthony Proietto. The Project Steering Committee is supported by the Project Working Group.

Key objectives

1. Promote awareness and uptake of existing resources (including clinical guidelines, patient information, available continuing professional development resources)
2. Further develop existing referral pathways and instigate clinical rotations and/or placements to improve access to medical and supportive care, regardless of location.

Update on meeting objectives

- Mrs Brooke Stapleton has commenced in the project officer position in NSW.
- The project Steering Committee has been established and has met several times.
- Work has begun on the evaluation framework for the NSW project, the service mapping activity and collection of data for the Online Cancer Service Directory.
- Cancer Australia is currently consulting with the ACT representatives to identify the ACT service needs for women with gynaecological cancers, to determine the best option for ACT involvement.

Contact person NSW

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South Australia & Northern Territory

Governance

The SA & NT gynaecological cancers workforce project is funded through an agreement between the National Centre for Gynaecological Cancers, Cancer Australia and SA Health. It is managed and implemented by the Statewide Service Strategy Division of SA Health, in partnership with NT Health and Family Services Department. The project officer for the SA & NT project is based in SA with responsibility for establishing and maintaining links between SA and NT.

Clinical leadership

The SA Cancer Clinical Network serves as the governing body for the project. It is supported by a Gynaecological Cancer Working Party chaired by Associate Professor Martin Oehler. Its membership includes clinical leaders and consumers.

Key objectives

- Develop a gynaecological oncology pathway that identifies the evidence-based clinical and supportive care requirements of SA and NT women with gynaecological cancers, their families and carers
- Implement strategies and activities to improve referral rates and access to best practice MDTs (as defined in the gynaecological oncology pathway),
- Conduct a gynaecological oncology workforce audit report (to identify the number of clinicians and trainees required to meet current and projected incidence of gynaecological cancers in SA and NT, as well as professional development requirements and opportunities).

Update on meeting the objectives

- Mrs Irene Schluter is the project officer for SA & NT (based in SA).
- The first Working Party meeting was held in February 2010. The Working Party endorsed the Terms of Reference.
- Liaison with key people continues.

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- A sub-group of the Working Party has been formed to consider data elements for gynaecological cancers. The group is chaired by Professor David Roder.
- The Working Party met on 11 March when members discussed prevention, early detection/screening, familial and psychological aspects of gynaecological cancers.
- Service mapping to inform the development of the *National Framework* has been completed in one service.

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Victoria & Tasmania

Governance

The Victorian and Tasmanian gynaecological cancers workforce project is funded through an agreement between Cancer Australia (through the National Centre for Gynaecological Cancers) and the State of Victoria through the Department of Health. Victoria's Department of Health, through its cancer and palliative care service, has collaborated with the Department of Health and Human Services Tasmania (DHHST), to develop a joint gynaecological cancers workforce project proposal. To support project development, implementation and evaluation, Southern Melbourne Integrated Cancer Service (SMICS) has been appointed as the project lead and project officers will be appointed for Victoria and Tasmania.

Clinical leadership

A Victorian and Tasmanian Gynaecological Cancers Workforce Project Board has been appointed to inform the direction and development of strategies relating to implementation of the gynaecological cancers workforce project. The Project Board is chaired by Spiri Galetakis. The Clinical Leader for the Project is Dr Tom Manolitsas.

Key objectives

- Identify the needs, referral patterns and outcomes of women with gynaecological cancers, their families and carers across the gynaecological cancers pathway
- Implement strategies that improve referral rates to gynaecological oncology services
- Assess and support the professional development and mentoring needs of the gynaecological cancers workforce
- Develop a Victorian and Tasmanian workforce plan that identifies the additional resources needed to ensure improved outcomes for women with gynaecological cancers are sustainable beyond the project.

The project approach takes into consideration the differing contexts and stages of cancer reform and clinical network development within Victoria and Tasmania.

Update on meeting the objectives

- A project officer has been appointed in Victoria. This project officer will commence on 22 March 2010. Tasmania is completing its recruitment process.
- The Project Board convened for its first meeting on 3 February 2010, and considered a first draft of Victoria and Tasmania data.
- Victoria is currently completing the service mapping tool to inform the *National Framework*.
- Tasmania has completed and submitted the service mapping tool.

Contact Victoria & Tasmania

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Western Australia

Governance

The WA gynaecological cancers workforce project is funded through an agreement between Cancer Australia (through the National Centre for Gynaecological Cancers) and the WA

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Department of Health. A Project Officer is responsible for conducting and coordinating project activities in collaboration with other jurisdictional project managers, and with oversight and support from the WA Cancer & Palliative Care Network (WACPCN) Executive.

Clinical leadership

In addition to the WACPCN Executive, a Project Reference Group chaired by Dr Yee Leung and comprising key stakeholders, is the governing body for the project.

Key objectives

1. Identifying the needs, current referral patterns and outcomes of women with gynaecological cancer consumers (particularly those from rural and remote areas, and Aboriginal and Torres Strait Islander and CALD backgrounds)
2. Implementing strategies to improve the referral rates to gynaecological services (including MDTs) for women living in rural and remote areas, and from Aboriginal and Torres Strait Islander and CALD backgrounds
3. Developing and implementing education and training resources for Aboriginal Health Workers (AHWs) to improve the referral and management of women with gynaecological cancers.

The project focuses particularly on those from rural and remote areas, and Aboriginal and Torres Strait Islander and CALD backgrounds.

Update on meeting the objectives

- Ms Kathleen O'Connor is the WA project officer.
- The Reference Group has been established. At its first meeting, the Reference Group endorsed the Terms of Reference and the evaluation plan, developed a project task list, and assigned key members for collaboration on the aspects of the project.
- The service mapping has been completed and the data provided to Sheila Hirst to inform the development of the *National Framework*.

- Mapping referral pathways for regional WA has begun.
- Meetings have been held with health promotion officers and rural health professional groups regarding a needs assessment to determine the education needs of and preferred learning methods for Aboriginal Health Workers and rural-based health professionals in order to make recommendations about priorities for development of resources and the best way to present these.

Contact WA

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Queensland

Governance

The Queensland gynaecological cancers workforce project is funded through an agreement between Cancer Australia (through the National Centre for Gynaecological Cancers) and the University of Queensland. The project will be managed and implemented by the University of Queensland in close consultation with the Queensland Department of Health. A Project Officer has been appointed to conduct and coordinate project activities.

Clinical leadership

A Steering Committee of gynaecological cancer clinical leaders will serve as the governing body for the project. The clinical leader for the project is Professor Andreas Obermair who is supported by a project Working Party that includes clinicians, consumers, and representatives from Queensland Health.

Key objectives

1. Develop and implement strategies to improve gynaecological cancer multidisciplinary care in Queensland
2. Develop and pilot referral pathways and supportive care strategies that will improve the quality of and access to multidisciplinary gynaecological cancer care including

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supportive care. The project approach takes into consideration the differing needs of women from rural and remote areas and the educational needs of members of gynaecological cancer multidisciplinary teams within Queensland.

Update on meeting the objectives

- Ms Danette Langbecker has commenced in the project officer position.
- Information from services, staff and members of the Statewide Cancer Clinical Network is being gathered to inform the project, eg sources of data and clinicians to involve.
- The Working Party membership has been identified, and the first meeting has been organised and will convene in mid-April.
- The methodology and data approach for the project plan has been developed in order to finalise it with the Working Party.
- The service mapping tool has been completed to inform the draft *National Framework*.
- Feedback on the revised draft national evaluation framework discussion paper and key performance indicators has been provided to Siggins Miller.

Contacts QLD

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Below are brief synopses of the key activities and strategies associated with the Queensland and the Victorian and Tasmanian gynaecological cancers workforce projects.

Synopses of the SA and NT and the WA projects were included in the 1st communiqué. A synopsis of the NSW and ACT project was included in the 2nd communiqué. The communiqués can be found on www.gynaecancercentre.gov.au

National Workshops in Melbourne 19 and 20 April 2010

The **National Workshop** for the *National Framework* will be held in Melbourne on Monday 19 April and aims to:

- review and discuss the draft *National Framework*
- identify practical and realistic solutions to addressing complex workforce issues
- agree on and support the overall directions of the draft *National Framework*.

On Tuesday 20 April Dr Mel Miller and Ms Gerry Cleary will work with project officers and jurisdictional representatives to reflect on and inform:

- progress, challenges and solutions across the jurisdictional projects
- the revised national evaluation framework, and agree on a small number of key performance indicators in common across all projects
- projects and their alignment with the *National Framework* and the resources that would support implementation of the projects.

NCGC newsletter and website

The NCGC circulates a regular electronic newsletter which provides an update on the Centre's activities and is a valuable resource for finding out what is new. It is also available on the NCGC's website:

www.gynaecancercentre.gov.au

**This communiqué was prepared by the
National Gynaecological Cancers Workforce
Support Service.**



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Gynaecological Cancers Workforce Update from the States and Territories

Synopses of the Queensland and the Victoria and Tasmania projects

Below are brief synopses of the key activities and strategies associated with the Queensland and the Victorian and Tasmanian gynaecological cancers workforce projects. Synopses of the South Australia and Northern Territory, and the Western Australia projects were included in the 1st communiqué. A Synopsis of the New South Wales and Australian Capital Territory project was included in the 2nd communiqué. The communiqués can be found on www.gynaecancercentre.gov.au

Project synopses

Queensland

The Queensland gynaecological cancers workforce project is funded through an agreement between Cancer Australia (through the National Centre for Gynaecological Cancers) and the University of Queensland. The project will be managed and implemented by the University of Queensland in close consultation with the Queensland Department of Health. A steering committee of gynaecological cancer clinical leaders will serve as the governing body for the project, supported by a project working party that includes clinicians, consumers, and representatives from Queensland Health. A Project Officer has been appointed to conduct and coordinate project activities.

The project aims to improve outcomes and support for women with a gynaecological cancer by improving multidisciplinary care and developing referral pathways and supportive care strategies. The project approach takes into consideration the differing needs of women from rural and remote areas and the educational needs of members of gynaecological cancer multidisciplinary teams within Queensland. The project has two main components that will support achievement of the project's overarching aims, including:

1. Developing and implementing strategies to improve gynaecological cancer multidisciplinary care in Queensland, by:
 - a. Identifying gaps in multidisciplinary gynaecological cancer care, motivators and barriers to multidisciplinary care and avenues to further improve patient care
 - b. Identifying areas of improvement within multidisciplinary care that can be addressed through education and training of health professionals
2. Developing and piloting referral pathways and supportive care strategies that will improve the quality of and access to multidisciplinary gynaecological cancer care including supportive care, by:
 - a. identifying the views and attitudes of women with gynaecological cancers to multidisciplinary care and supportive care provision in Queensland
 - b. developing consumer-based referral pathways for women with gynaecological cancers for supportive care and follow-up after treatment
 - c. developing and pilot testing innovative supportive care delivery models for women with gynaecological cancers, particularly for women from rural and remote areas.

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In addition to the above, the Queensland project will contribute to establishing an agreed approach to coordinated data collection as it relates to gynaecological cancers, and participate in the key elements of the national initiative, such as the development, implementation and evaluation of the National Gynaecological Cancers Service Delivery and Resource Framework.

Victoria and Tasmania

The Victorian and Tasmanian gynaecological cancers workforce project is funded through an agreement between Cancer Australia (through the National Centre for Gynaecological Cancers) and the State of Victoria through the Department of Health. Victoria's Department of Health, through its cancer and palliative care service, has collaborated with the Department of Health and Human Services Tasmania (DHHST), to develop a joint gynaecological cancers workforce project proposal. To support project development, implementation and evaluation, Southern Melbourne Integrated Cancer Service (SMICS) has been appointed as the project lead and Project Officers will be appointed for Victoria and Tasmania. A Victorian and Tasmanian gynaecological cancers workforce project board has been appointed to inform the direction and development of strategies relating to implementation of the gynaecological cancers workforce project.

The project aims to improve outcomes and support for women with a gynaecological cancer by supporting the gynaecological cancer workforce to provide care that is safe and of high quality whilst addressing the clinical and supportive care needs of the women, their families and carers. The project approach takes into consideration the differing contexts and stages of cancer reform and clinical network development within Victoria and Tasmania. The project has three components: Victorian-based strategies; Tasmanian-based strategies; and Victoria-Tasmanian strategies, which will support achievement of the project's overarching aim, including:

1. Identifying the needs, referral patterns and outcomes of women with gynaecological cancers, their families and carers across the gynaecological cancers pathway
2. Implementing strategies that improve referral rates to gynaecological oncology services including those of women living in rural and remote areas and women from CALD backgrounds, to ensure the identified needs of women with gynaecological cancers are met, and to facilitate increased continuity of care for women with gynaecological cancers
 - a. documenting referral patterns and needs of women with gynaecological cancers, and clinical support services and gaps
 - b. enhancing links between specialised metropolitan treatment centres and rural/primary care
 - c. formalising and strengthening links to enhance multidisciplinary care for women diagnosed with a gynaecological cancer
 - d. improving referral rates to an identified MDT, with a focus on links between health professionals in each region
 - e. scoping infrastructure requirements and models of care to effectively support women with gynaecological cancers, their families and carers in Tasmania and regional Victoria
3. Assessing and supporting the professional development and mentoring needs of the gynaecological cancers workforce in each region to ensure identified needs of women with gynaecological cancers are met
4. Developing a Victorian and Tasmanian workforce plan that identifies the additional resources needed to ensure improved outcomes for women with gynaecological cancers are sustainable beyond the project.

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In addition to the above, the Victorian and Tasmanian project will foster inter- and intra-state collaboration to support participation in the development and implementation and evaluation of the National Gynaecological Cancers Service Delivery and Resource Framework.

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