

Happy New Year! The NSWOG team have been busily preparing for 2008, with an emphasis on the strategic direction of NSWOG for the next two years. Keep an eye on your inbox for the NSWOG progress survey, to help us with our planning. This newsletter features highlights from the end of 2007, including the Lung Cancer Clinical Forum, initiated by NSWOG Lung, and summaries of the final NSWOG meeting rounds.

Lung Cancer Clinical Forum

NSWOG Lung launched Lung Cancer Awareness Week in NSW with a full-day Lung Cancer Clinical Forum at Australian Technology Park on 2 November 2007.

Over 115 healthcare professionals from across the State attended the forum, designed to improve the provision of healthcare delivery to patients with lung cancer. Representation was strong within the rural and regional sector, and included participants from radiation and medical oncology, nursing, palliative care, surgical and respiratory medicine.

The forum kicked off with the results of a recent lung cancer patterns of care study, which compared patterns of diagnosis, staging and initial treatment of lung cancer in NSW with key clinical practice indicators.



With the scene set, an expert panel were introduced to work through a hypothetical scenario with an actor presenting as a patient with a persistent cough. The panel included two GP's, a Respiratory Physician, Thoracic Surgeon, Medical and Radiation Oncologist and Lung Cancer Nurse Coordinator, who each consulted the patient on her journey from symptom presentation to lung cancer diagnosis.

Following the diagnosis of lung cancer, a new panel of allied health and nursing representatives worked through the case study focussing on healthcare treatment and palliation.

Professor Stewart Dunn facilitated the lively discussion, which emphasised the role of the GP in screening and early diagnosis and the importance of communication and multidisciplinary care.

Key forum messages for GPs:

1. The importance of early referral to a cancer specialist linked to a multidisciplinary team for all cancer patients.
2. Surgical resection of non-small cell lung cancer gives the best results of any form of treatment and all patients must be assessed for this possibility. Radiation and chemotherapy for patients with non-small cell lung cancer needs to be carefully aligned to stage of disease based on new treatment approaches recently established in clinical trials.
3. Small cell lung cancer is rarely a surgical disease.

A Highlights Report of the forum is available to NSWOG members by contacting the NSWOG Secretariat NSWOG@cancerinstitute.org.au or 02 8374 5600. A DVD featuring highlights of the day is also available.



November & December Meetings



Dr Andrew Brooks

NSWOG Urology were provided an overview of The Cancer Council NSW patient support program for urological cancers. The group were updated on the progress of their NSWOG Project - a Strategic Urology Oncology Plan for NSW and One Year Operational Plan. The project will be extended to maximise stakeholder input and ensure the private sector is included. Updates were also provided on the synoptic pathology reporting and MDT development projects.

Dr John Collins presented an overview of the Children's Hospital Westmead paediatric palliative care service to **NSWOG Palliative Care** at their last meeting of 2007. Professor Paul Glare also updated the group on the Sydney Cancer Centre Health Services Innovation project to establish a pilot program to evaluate weight loss prognostic indicators. Updates were provided about two new organisations in the palliative care area; Statewide Centre for Improvement in Palliative Care (SCIP) and the Cunningham Centre for Palliative Care. SCIP is a stand alone unit which will provide project/strategic support in palliative care for NSW Health. The Cunningham Unit is an academic unit housed at Sacred Heart Hospice, which is charged with enhancing research and training for the palliative care sector.



A/Prof Richard Chye

Barrie Cassileth, Director of Integrative Oncology at Memorial Sloan Kettering Cancer Center, presented to **NSWOG Complementary Therapies** on their current research into complementary therapies and cancer, through their Integrative Oncology Program. Dr Cassileth highlighted the importance of conducting research into this area and identifying therapies where there is an evidence base in people with cancer. The role of the newly established National Institute for Complementary Medicine was also discussed.



Prof Stephen Clarke

NSWOG Neuro-oncology enjoyed a busy agenda under new Chair, Dr Kerrie McDonald. The group was provided an update on the establishment of a new national Neuro-Oncology Collaborative Trials Group (COGNO) funded by Cancer Australia. An update was also provided on their Project "Addressing the Cognitive and Behavioural Sequelae of Adults with Brain Tumours: Trialling a Behaviour Consultancy Model". A research assistant has been recruited to assist with the data collection. A number of patients and carers have been interviewed, and the intervention phase has commenced.



Dr Kerrie McDonald

At their final meeting in 2007, the **Radiotherapy Joint Advisory Committee** considered opportunities for sustaining the benefits gained through the Radiotherapy Business Process Improvement Project. The group were updated on the development of the NSW Radiotherapy Services Plan to 2011 and received a presentation from the Cancer Institute NSW Standard Cancer Treatments (CISCat) team on the development of radiotherapy specific protocols. The Committee also discussed their Terms of Reference and membership for 2008/2009.



Dr Michael Hughes

Professor John Thompson handed over the **NSWOG Melanoma** chairmanship to Dr Michael Hughes, with Dr Andrew Spillane taking the post of Deputy Chair. The group acknowledged the contribution of Prof Thompson over the past two years. The meeting kicked off with presentations from Professor Jim Bishop and The Cancer Council NSW, who provided an overview of their melanoma-specific patient support program. There was continued discussion around clinical indicators for melanoma and the Cancer Institute NSW funded MDT development project.



Dr Matthew Peters

The Cancer Council NSW presented an overview of their patient support program to **NSWOG Lung**, highlighting lung-specific call-in data. The group were updated on the changes to the ethics review process in NSW and provided feedback on the draft Clinical Indicators for Lung cancer. There was discussion on the progress and direction of the NSWOG Lung priority project to develop treatment algorithms for the management of lung cancer.

The first **Gynae Oncology** Nursing course in Australia will be conducted from 11-15 February 2008 at University of Sydney, and is expected to include good rural representation. The Psychosocial Support Committee completed a successful program of rural residential retreats and one day forums for gynaecological cancer patients in 2007. Additional funding support from The Cancer Council NSW will assist the program to continue in 2008. Local clinicians have also benefited by attending the one day events to learn how best to support these women nearer home. Active Committees are working on Models of Care resource packs, Palliative Care Guidelines, and a systematic review of existing clinical GO Guidelines.



Kathryn Nattress & Dr Chris Dalrymple



The November **NSWOG Head and Neck** meeting began with an update on the new ethics review model presented by the Cancer Institute NSW. Dietician Merran Findlay updated the group on an international sabbatical tour she recently undertook to the USA and UK, highlighting the population and treatment differences across the continents. The committee also discussed the progress of their NSWOG project to create an information resource for head and neck patients and their carers.



Dr Gary Morgan

NSWOG Haematology field officer, Peter Murray, presented progress on his clinical trials project, which included visits to every site involved in haematology trials in NSW, as well as pharmaceutical companies. Comprehensive data has been gathered to capture the status of haematology trials in NSW, as well as identify barriers to clinical trial participation from a patient and clinical perspective. The group also briefly reviewed a draft suite of clinical indicators presented by the Cancer Institute NSW Health Information Systems team, and will undergo a process of consultation in the field in order to provide feedback on the haematology-specific indicators.



Prof. Ken Bradstock

At their final meeting of 2007, **NSWOG Colorectal** discussed a draft suite of clinical indicators for colorectal cancer and received a progress report on their dataset extension pilot, including the implementation of synoptic pathology reporting for colorectal cancer in SESIAHS. The Committee received an update on the National Bowel Cancer Screening Program and discussed a proposal for multidisciplinary meetings or master classes in colorectal cancer.



Dr Tony Eyers



Prof Michael Kidd

NSWOG General Practice discussed and identified the gaps in Aboriginal and Torres Strait Islander cancer services and agreed that accurate data is crucial to service planning. Updates were provided on the development of multidisciplinary team (MDT) treatment plans, key MDT development projects, the development of an online training module for GPs on bowel screening and the Cervical Screening media campaign. The Committee discussed a proposed BreastScreen NSW Fact Sheet for GPs and cervical screening article.



Prof Robyn Ward

A major focus of **NSWOG Cancer Genetics** will be to develop and review clinical guidelines/protocols, with the staff of the Cancer Institute NSW - CISCaT program (Cancer Institute NSW Standard Cancer Treatments). The program provides online access to available evidence for a number of cancer streams. The website was originally developed by the Chair of the group, Professor Robyn Ward, with the support of The Cancer Council NSW, and subsequently extended within SESIAHS. Professor Ward remains the Program Director, and the site is now managed by the Cancer Institute NSW.



Dr Luciano Dalla Pozza

Gosford Hospital played host to the **NSWOG Child and Adolescent** in December, where Dr Luciano Dalla Pozza and Dr Verity Ahern were welcomed as the new Chair and Deputy Chair. The group received a comprehensive review of the activity of its subcommittees, including the Nursing Research Collaboration subcommittee and recent Adolescent and Young Adult priority project workshop. The group were updated on the MDT projects for childhood and adolescent cancer and continued discussion around insurance issues for child cancer patients.



Prof Kate White

The **NSW Joint Patient Support and Information Advisory Committee** continue to make good progress on two priority projects. The first draft of the "Cancer in the School Community: A resource for teachers, Principals and school counsellors" was sent to reviewers from diverse settings and is due for launch this month. The resource will be available through The Cancer Council Helpline - 131120. The Resource Kit for Psycho-oncology Health Professionals is under development, with research being undertaken to ensure the contents of the kit reflects user needs.



Prof Phil Crowe

NSWOG Bone and Soft Tissue Sarcoma continued with their data focus and resolving plans to create a national database, as well as working with the Cancer Institute NSW to develop a dataset extension specific to bone and soft tissue. The group are also working on expanding the number of sites contributing to the existing tissue bank at Prince of Wales Hospital and discussed the ethics process and consent form options.



Dr. Stephen Begbie

Key projects discussed by **NSWOG Rural Oncology** included the literature review of rural outreach service models, which is currently underway. The review will initially examine successful outreach models in Australia and internationally, before conducting a Statewide review and gap analysis. Professor Afaf Girgis, from the Centre for Health Research and Psycho-Oncology (CHERP), presented an overview and preliminary results from the "My Cancer Care Diary" project. The Cancer Council NSW presented on their Community Advisory Committees and Networks throughout NSW. Other key agenda items included updates on the NSW CanNET Project, the Primary Care Project to be undertaken in partnership with Cancer Australia and CI-SCaT and usage of the Isolated Patients Transport & Accommodation Assistance Scheme (IPTAAS) by cancer patients.

NSWOG Upper GI were updated on their priority project to establish an internet database for patients with Upper GI malignancy. There were presentations on the draft clinical indicators for Upper GI cancer, MDTs and the accreditation system. The Hepatocellular Carcinoma Advisory Committee updated the group on their progress, and discussion was held around secondary liver cancer and how the committee can begin work around this disease.

February Calendar

- 4 February: NSWOG General Practice**
4:30pm – 6.30pm: ATP Boardroom
- 11 February: NSWOG Head and Neck**
6:00pm – 8.00pm: ATP Boardroom
- 13 February: NSWOG Upper GI**
7:00pm – 9.00pm: ATP Boardroom
- 18 February: NSW Joint Patient Support and Information Advisory Committee**
11.00am - 1.30pm: ATP Boardroom
- 20 February: NSWOG Breast**
6:00pm – 8.00pm: ATP Boardroom
- 21 February: NSWOG Cancer Genetics**
4:30pm – 6.00pm: ATP Boardroom
- 25 February: NSWOG Bone and Soft Tissue Sarcoma**
6:00pm – 8.00pm: ATP Boardroom
- 27 February: NSWOG Haematology Oncology**
4:00pm – 6.00pm: ATP Boardroom
- 28 February: GMCT Gynaecological Oncology Committee**
3.30pm – 5.30pm: Macquarie Hospital, North Ryde
- 29 February: NSWOG Neuro-Oncology**
7:30am – 9.00am: Cancer Institute NSW Boardroom
- 29 February: NSWOG Rural Oncology**
1:30pm – 5.00pm: Rural Doctors Network

Community Corner

It has been really rewarding to see the increased involvement of consumers in health decision-making processes over the past ten years. As a journalist, my special interest was in health and local government issues and I grew up in a generation where "doctor knows best" was certainly the norm. A more equal partnership, where the wishes and expectations of patients and their immediate circle are taken into consideration, certainly leads to better outcomes for all concerned. It is a pleasure to sit on NSWOG Neuro-Oncology and to share ideas for making the medical process a little less confronting for those faced with serious illness. I continue to be impressed by the genuine concern clinicians and health professionals take in the welfare of their patients. On a personal note, I am a former journalist, and now a business woman. I am currently National Chair of Brain Tumour Australia and have been a palliative care volunteer for the past 17 years. I have a special interest in the health issues of those with a disability, mental health issues, chronic disease and those marginalised through poverty and lack of opportunity.



Kaye Duffy OAM
NSWOG Neuro-Oncology

Cancer Institute NSW Current Funding Opportunities

Cancer Institute NSW International Sabbatical Grant 2008

Closes: Round 1 - Friday 7 March 2008 and Round 2 - Friday 4 July 2008

Medical registrars in training, cancer nurses, clinical trials nurses, data managers, cancer nurse coordinators, social workers, psychologists, radiation therapists, medical physicists, Cancer Institute NSW Clinical Fellows and other health professionals (e.g. cancer genetic counsellors, occupational therapists or speech therapists) working in cancer services in NSW are eligible to apply for travel grants to attend national or international conferences. Registration fees, air travel and reasonable accommodation costs will be covered for the conference, which must be at least eight weeks prior to the application closing date. For application details and conditions, the funding opportunities page under Health Professionals at www.cancerinstitute.org.au

Cancer Institute NSW Health Services Innovation Grants

Closes: Friday 15 February 2008

The Cancer Institute NSW is pleased to invite Expressions of Interest under the Health Services Innovation Grant Program Round 2. Under this program, pilot projects will be identified and developed to improve cancer service delivery in NSW. For more information visit the website or contact Tasia Malinowski on Tasia.Malinowski@cancerinstitute.org.au or 02 8374 5634