

Supplementary Submission to Senate Community Affairs References Committee hearing on Supply of chemotherapy drugs such as Docetaxel (Sydney 28 March 2013)

My supposed position re private sector outcomes

I would like to add some supplementary remarks to evidence I gave to the Inquiry on 28 March.

I did not say that cancer services in the public sector had better outcomes than those in the private. I am sorry to see that some later contributors have interpreted it that way and may be offended.

The record states "*We have had, am sorry to say, some pretty grim stories of experiences in the private sector*" (Hansard p4). This comment was made in response to Senator Smith's direct question, and was by no means the main thrust of our submission or my opening statement. It was influenced by Cancer Voices Australia's having received some concerning reports about treatment in the private sector, and one in particular, of which we have taken serious note being made by a patient who is also a Registered Nurse. This can be provided.

It is our job to take such stories seriously and to raise with decision-makers the issues they illustrate. We recognise that they represent only a very small part of cancer experiences. Hopefully our raising them will mean that others will not have similar problems, in whichever sector they are treated. We are working in this area with the Cancer Council NSW.

I want to state clearly that Cancer Voices Australia (CVA) is not in any way anti-private sector and recognises the value of its safe, viable and efficient operation, especially in the delivery of chemotherapy services. May I repeat, our interest in this aspect of the Inquiry is simply to assist discussion with decision-makers to arrive at some way whereby patients receiving cancer treatment can be assured that they are receiving best practice care wherever their treatment takes place.

Incomplete statistics re private sector chemo

We are glad that the question of the extent of chemotherapy treatment undertaken in the private sector was raised during the Hearing.

Cancer Voices South Australia (CVSA) has already asked for it to be noted that inaccurate statistics were provided to the Inquiry by Submission 14. This has significantly misrepresented the proportion of chemotherapy provided by the private sector in South Australia and also in other states. This could impact on interpretations for this Inquiry.

CVA has asked the Medical Oncology Group Australia (MOGA) and Cancer Australia for Australian and Cancer Institute NSW for NSW for the "correct" statistics. We hope that DOHA, on behalf of government, will take responsibility for addressing this issue as a necessary part of their discussions with the Pharmacy Guild.

CVA would like to see a set of agreed statistics as to what extent chemo treatments are provided in both sectors and by state. We recommend that the Inquiry's report asks for clarification as to which statistics are to be recognised, and if there is not currently a reliable database that it recommends this be gathered as part of an audit by DOHA for immediate and future cancer services planning and funding.

It was very encouraging to read that so many parties are in agreement that a transparent fair system needs to replace the present opaque labyrinthine one. This will need to be based on a better information base.

Additional Comment

There is a complex mixture of systems for reporting chemotherapy delivery, with some facilities recording chemotherapy delivery as an outpatient service while others record it as an 'admitted, same day' inpatient service. We believe it is worth providing details of this to the Senate Inquiry to help illustrate this complexity. It should also be noted that even this is not the 'full picture', as chemotherapy delivery is not the same as chemotherapy preparation. The pharmacy service preparing the chemotherapy may be a private service although located within a public facility delivering chemotherapy.

According to the AIHW Australian Hospital statistics 2010-2011

(<http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=10737421722> see pages 217-218), admission practices vary between public and private sectors, states and territories, and over time. This applies to services such as chemotherapy. People receiving chemotherapy may be counted as same-day admitted patients in some hospitals and as non-admitted patients in other hospitals. Over the past decade, a number of hospitals (mainly in the public sector) in New South Wales, South Australia and the Australian Capital Territory changed their admissions practices so that not all patients who receive same-day chemotherapy services are admitted to hospital and instead receive treatment on an outpatient basis. Before 1 July 2007, chemotherapy was treated as same-day admissions in South Australian public hospitals. From 1 July 2007, these services have been treated as outpatient occasions of service in South Australia.

Information on outpatient chemotherapy services is included in the AIHW National Outpatient Care Database (NOCD) <http://www.aihw.gov.au/national-outpatient-care-database/>. NOCD is limited to public hospitals. The table below combines information from these sources to show a fuller picture.

Consideration of both same-day services and outpatient services is required when looking at chemotherapy. This gives a very different picture from the one provided by Submission 14. Even then, these data are not completely accurate as outpatient private data are not available (although likely to be small). The table from Submission 14 provided a global number for same-day private services in TAS, ACT and NT 5456 private services) but these data were not published in the AIHW Australian Hospital statistics 2010-2011. Even if we include the 5456 private services in these 3 states, it does not change the global result (43%, not 60% of services provided by the private sector).

	NSW	VIC	QLD	WA	SA	TAS	ACT	NT	Total
Same-day services Public	3282	79847	29907	27171	92	1683	950	560	143492
Same-day services Private	39813	53799	63777	27131	18928	NA	NA	NA	203448
Outpatient public	80 956	0	2338	0	22446	14845	6033	3209	129827
Outpatient private	?	?	?	?	?	?	?	?	?
Total	124051	133646	96022	54302	41466	16528	6983	3769	476767
Private share	32%	40%	66%	50%	46%	0	0	0	43%

Sally Crossing AM 8 April 2013

Cancer Voices Australia is the independent, volunteer voice of people affected by cancer since 2000.

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