



greater metropolitan clinical taskforce

15 June 2006

The Secretary
Senate Community Affairs References Committee
Parliament House
Canberra
ACT 2600

TO WHOM IT MAY CONCERN

SENATE COMMUNITY AFFAIRS REFERENCES COMMITTEE: INQUIRY INTO GYNAECOLOGICAL HEALTH IN AUSTRALIA

Thank you for the opportunity to submit information to the Inquiry.

The establishment of a Gynaecological Oncology Specialty Service Network by the NSW Greater Metropolitan Clinical Taskforce in 2002 and ongoing support from GMCT has enabled us to:

- Create functional networks across greater metropolitan NSW with cross appointment of staff and close liaison between hospitals, rural areas and palliative care services;
- Publish clinical practice guidelines - reviewed on an ongoing basis.
- Support annual clinical education initiatives;
- Provide psychosocial support to women diagnosed with gynaecological cancers; and
- Take forward work with the Cancer Institute NSW towards the establishment of a statewide data collection on gynaecology cancer cases, their treatment and outcomes.

Information about our initiatives is attached. We have forwarded a submission from our Psychosocial Support Project under separate cover (6th June 2006). Additional background information is available at the GMCT website: <http://www.health.nsw.gov.au/gmct> and from our psychosocial support website at: <http://www.gynaecancersupport.org.au/>

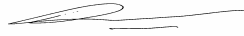
We believe that a networked approach and ongoing financial support are essential to bring about and maintain improvements to services, helping to ensure that the care provided to all women with gynaecological cancers is optimal.

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If you need to discuss our submission, please do not hesitate to contact us. (Email: d.marsden@unsw.edu.au; kathryn.nattress@email.cs.nsw.gov.au).

Alternatively you may contact our GMCT Network Manager, Annie Hutton on 9887 5541 or email: ahutton@nscchahs.health.nsw.gov.au

Yours sincerely,



DON MARSDEN

Co-Chair



KATH NATTRESS

Co-Chair

cc: Kate Needham, Executive Director, GMCT

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Input from the GMCT Gynaecological Oncology Executive Committee

The NSW Greater Metropolitan Clinical Taskforce (GMCT) established a Gynaecological Oncology Specialty Service Network in 2002. The Network receives approximately \$1m in annual recurrent funding through GMCT to support clinical enhancements, clinical education and country support systems.

The Network is open to all clinicians working in public hospitals in greater metropolitan NSW that provide care to women with gynaecological cancers. Current membership stands at 130 and includes all members of the multidisciplinary team that provide care to women with gynaecological cancers:

- Anatomical Pathologists
- Cancer Services / Familial Services
- Care Coordinators
- Clinical Psychologists
- Data Managers / Clinical Trial Coordinators
- Gynaecological Oncologists
- Medical Oncologists
- Nurses
- Palliative Care Specialists
- Radiation Oncologists
- Social Workers

The Network is steered by an Executive Committee made up of gynaecological oncologists, nurses, a trainee, two consumers, the Psychosocial Support Project Coordinator and invited representatives from the Cancer Institute NSW and the NSW Clinical Excellence Commission. The Executive Committee meets bimonthly and produces regular newsletters which are issued to all members of the Network updating on its work.

Patient access to multidisciplinary care

Since the establishment of a Gynaecological Oncology Specialty Service Network by GMCT, four gynaecological oncology networks have been identified to provide links between major centres and local treatment centres to increase patient access to quality care:

- (1) *Central/ South Western*: Royal Prince Alfred, Liverpool and associated hospitals
- (2) *Hunter/Central Coast*: John Hunter and Gosford Hospitals
- (3) *Northern/Western and Wentworth*: Royal North Shore, Westmead and Nepean Hospitals
- (4) *South Eastern/Illawarra*: Royal Hospital for Women, St George and Wollongong Hospitals

Surgical services are based at major hospitals with functional links between radiation and medical oncology services in comprehensive cancer centres. Doctors are cross appointed to work across hospitals and there is close liaison and referral between hospitals. Links have also been set up with palliative care services and rural areas. Research indicates that outcomes, including survival rates, of women treated in such specialist gynaecological oncology units are improved.

Directory of Services

In conjunction with the Life Force Cancer Foundation and NSW Health, the Gynaecological Oncology Executive Committee has contributed to the development of a "Directory of Gynaecological Oncology Treatment and Support Services". A searchable version of this essential resource is available on the Network's own psychosocial support website at (<http://www.gynaecancersupport.org.au/>) and the NSW Health website at (http://www.health.nsw.gov.au/pubs/2004/gynae_oncology.html).

Clinical Education

The GMCT Gynaecological Oncology Executive Committee has placed an emphasis on continuing professional development. Each of the four gynaecological oncology networks hold regular study days for their multidisciplinary teams.

The Executive Committee is also committed to holding an annual multidisciplinary forum. In April 2006, a two day forum was held jointly with the Sydney Institute of Palliative Medicine on palliative medicine for patients with gynaecological cancer. Evaluation of the event has reinforced a need for further education. With the help of funding from the Cancer Institute NSW, the Executive Committee is planning to develop a resource booklet on palliative medicine for clinicians, in particular those working in the community, that care for women with advanced gynaecological cancers.

Annual Nurses Study Days have been established since 2004. Delegates attend from all NSW Area Health Services including rural, ensuring equity of access to care regardless of patient location, through upskilling. A needs analysis was conducted after the 2004 Study Day. This confirmed that many nurses lacked confidence and would welcome further guidance in the common procedures used in gynaecological oncology. This led to the development of an essential resource for nurses, "Gynaecological Cancer Care - A Guide for Practice", by nurses within the Network, which was launched in March 2006.

Clinical Practice Guidelines

The publication of the Gynaecological Oncology Clinical Practice Guidelines in July 2004 was the culmination of many years of meetings involving gynaecological oncologists, radiation oncologists, medical oncologists, gynaecological pathologists, palliative medicine consultants and nurse oncologists. The guidelines are intended to be evidence based but are not intended to be prescriptive. The Executive Committee has established a Working Group to review one guideline per annum, starting with ovarian cancer.

Psychosocial Support¹

The GMCT Gynaecological Oncology Executive Committee believes that it is essential to provide psychosocial care to women with gynaecological cancers. A Gynaecological Oncology website (<http://www.gynaecancersupport.org.au>) has been developed to allow women in NSW diagnosed with a gynaecological cancer to receive psychosocial support online. The website contains a variety of important tools and information for women with gynaecological cancer and health professionals involved in their care including a virtual community for women with a gynaecological cancer and a health professionals' on-line network. Available resources highlight the complexity of emotional and social issues women face following a gynaecological cancer

¹ Please also see our submission on psychosocial support forwarded 6th June 2006.

diagnosis. A key achievement in 2006 has been the development of an accredited eLearning course on psychosocial support for primary carers. This course has been accredited by the Royal Australian College of GPs. All participating GPs receive 30 CPD points for completing the course.

Access to clinical data

The GMCT Gynaecological Oncology Network is keen to establish ongoing access to clinical data across NSW on cancer cases, their management and outcomes. Working closely with the Cancer Institute NSW, the GMCT Gynaecological Oncology Information Management Working Group is working to complement the Minimum Data Set (MDS) for clinical cancer registration with a set of data items specific to gynaecology.