

The lymphoma summit recommendations

The following recommendations have been formulated based on the priorities identified by the lymphoma summit attendees. The recommendations 1-4 are presented to the Victorian Integrated Cancer Services (VICS) directors and managers for action. The Lymphoma Summit Working Party will continue to engage clinicians on progressing recommendations 5-7.

1. Multidisciplinary Meetings (MDMs)

MDMs are an integral component of best practice cancer care. At the lymphoma summit a number of challenges were raised about ensuring that lymphoma clinicians do access MDMs for prospective treatment planning for their patients.

Recommendation 1

That VICS collect baseline data on the proportion of lymphoma patients with documented MDM recommendations and communicate to clinicians via their respective ICS.

Recommendation 2

That VICS enable MDMs within their region to routinely document MDM recommendations in patients' central medical records.

Recommendation 3

That VICS agree a collective action plan to ensure that evidence of MDM activity contributes to hospital accreditation; clinician participation is included in job descriptions and metropolitan and regional are linking via MDMs in a systematic way.

2. Improve access to lymphoma clinical trials

Clinical trials are an important aspect of developing new and improved health care initiatives. Data from 2013 indicates that only a small proportion (less than 10%) of lymphoma patients were enrolled in lymphoma trials. Achieving a higher percentage of clinical trial enrollments is a significant challenge due to lack of reliable source of data to monitor trials activity and convenient channels for timely communication of trials information.

Recommendation 4

That VICS enable their lymphoma clinicians to routinely document and monitor consideration for clinical trials for all patients presented at MDMs.

3. Optimize accuracy and completeness of VCR incidence and mortality data for lymphomas

Questions about accuracy and completeness of the VCR data in relation to lymphomas are an important step in ensuring access to high quality data for improving care. A number of steps have been taken by the working party to understand the VCR data collection processes, accuracy and completeness of data.

Recommendation 5

That the working party formulates advice to the VCR on optimizing data including a request to pathology services that all secondary lymphoma pathology reviews be routinely reported to the VCR.

4. Adolescent and Young Adult

The adolescent and young adult population requires support and guidance as they transition into adult care settings. The summit participants identified this as an important area to continue focusing on and build on a number of state-wide initiatives in this space.

Recommendation 6

That the working party engages with key clinicians interested in this topic and formulate actions to drive improvements in this area.

5. Supportive Care

Early identification and management of supportive care needs for lymphoma patients affects the patient experience across the disease continuum.

Recommendation 7

The lymphoma working party endorses all efforts that focus on implementing systemic processes to identify supportive care needs for lymphoma patients early and across the disease continuum.

Recommendation 8

That the working party to engage with the Haematology Society of Australia and New Zealand (HANZ) Nursing Group in relation to their role in promoting systematic and fair access to supportive care for lymphoma patients.