

Victorian Tumour Summits

Data-dialogue-agreement-action

March 2016

Key messages

- The Victorian Tumour Summits (the summits) create opportunities to scale up innovation and clinician engagement in the cancer reform agenda.
- The summits support consistent implementation of the diagnosis and treatment sections of the Optimal Care Pathways.
- Though hosting the summits, the Victorian Integrated Cancer Services (VICS) demonstrate their value as an important state-wide platform for improving services.

Background

The summits are an initiative of the VICS, delivered in collaboration with the Department of Health and Human Services - Cancer Strategy and Development (DHHS-CSD) and Cancer Council Victoria - Clinical Network (CCV-CN).

Three summits - colorectal, lung and lymphoma – were held in 2014 and 2015, engaging clinicians from across Victoria in identifying actions to address unwarranted variations in care. A total of 193 participants attended the three events with many expressing interest in attending similar events in future. After the successful pilot, the initiative is transitioning into a three year program of work.

Clinician- led forums

Each summit follows a format of:

- *Data presentation* – showcasing multidisciplinary clinical practice and clinical outcomes across the state presented against the relevant Optimal Care Pathway and evidence based guidelines
- *Facilitated group discussion* – identifying important variations in care and outcomes
- *Agreement on priority areas for improvement* – agree on where variation exists and which ones are most important to address from clinicians' point of view, in the short-term of one-to-two years.

These clinician led forums are designed to foster clinician engagement through regular (every 2-3 years) state-wide network meetings. The events are professionally facilitated. Each summit is evaluated on the day with feedback used to inform subsequent summits.

Clinical leadership

Multidisciplinary tumour stream working parties are formed to guide the planning of each summit, oversee data analysis and refine summit recommendations.

The working party comprises respected clinical leaders and clinical representatives from regional ICS. After the summit, the working party members are asked to continue their involvement as change agents and clinical champions in driving post summit action. Smaller, task focused working parties may be formed to undertake specific pieces of agreed work.



Implementation of summit recommendations

Individual ICS will play an important role in the implementation of summits' recommendations and monitoring of progress including:

1. Communication with partners and multidisciplinary team members in the tumour streams.
2. Local coordination of data analysis and initiatives to improve data quality including the monitoring of key indicators linked to each tumour stream action plan.

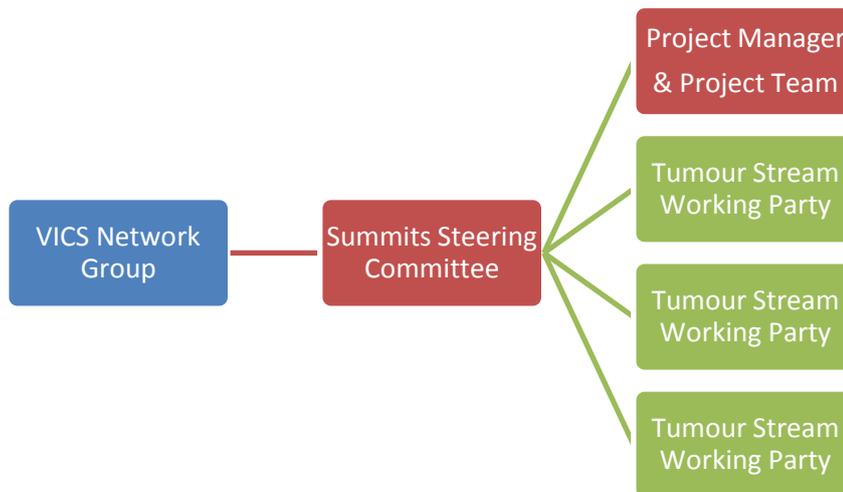
The CCV-CN would act as a communication channel to amplify and reinforce the message from the VICS.

Data analysis

DHHS CSD auspices data linkage and analysis for the planning and delivery of each summit. Data sources used for previous summits included the Victorian Cancer Registry (VCR), the Victorian Admitted Episode Dataset (VAED), the Victorian Radiotherapy Minimum Dataset (VRMDS) and the existing cancer clinical quality registries. Available state-wide data sets are analysed initially at an ICS level. Relevant data analyses will be made available to each ICS to assist them in targeting variations at a local health service level.

Governance

The Summits Steering Committee is responsible for leadership, project implementation and oversight and communication of project outcomes. The membership is to be drawn predominantly from the ICS Directors & Managers and include representation from DHHS CSD, CCV-CN and clinical leaders of tumour stream working parties.



Resourcing

A core team of a Project Manager, Administrative Officer and Data Analyst will be appointed and a budget allocated for funding core activities of the program including; secretariat support for the Summits Steering Committee and working parties, summit planning and delivery, data analysis, coordination of summit activities, communication and marketing.

Stakeholder groups and their roles

VICS Network Group	<ul style="list-style-type: none">•Funder•Strategic overview•Facilitate problem solving if issues encountered
DHHS-CSD	<ul style="list-style-type: none">•Vision, leadership for state-wide clinical networks•Data custodian•Data linkage analysis support
Victorian ICS	<ul style="list-style-type: none">•Leadership - hub for the initiative•Networking and communications•Guiding and driving service improvement activities at a local and regional levels (embedded into core work)•Data collection and medical record audits
Tumour Stream Working Parties	<ul style="list-style-type: none">•Clinical champions•Link with MDM chairs•Leading and engaging their peers in practice review and improvement activities
CCV Clinical Networks	<ul style="list-style-type: none">•Communication•Advocacy•Project work (if resources available)
Health services, clinical units and quality units, MDTs	<ul style="list-style-type: none">•Involvement in improvement projects or activities as part of their participation in the ICS

Communication

Regular updates on the progress of this initiative will be provided to ICS Directors and Managers, DHHS CSD and CCV-CN via the VICS Network Group. A communication strategy for clinical engagement is being developed.