Lung Cancer 2019 Summit Highlights

Summits are continuing to increase in size, with our largest clinician attendance and greatest patient/carer presence achieved to date. One hundred and twelve participants attended, including leading peak body Lung Foundation Australia. Participants rated the summit a nine out of ten, an improvement from seven out of ten for the first lung summit held in 2014.

‘Well-run event, great panels with... moving stories from cancer survivors. Some great ideas moving forward.’ Evaluation comment

Words most frequently used to describe the summit were ‘collaborative’ and ‘informative’. Participant evaluation of the summit demonstrated consumer presence had an immediate positive impact.

‘The day was made infinitely better by including patients and carers. It changed the content and nature of all discussions.’ Evaluation comment

A full evaluation is available. A summary report of all activities from the day will be distributed in the next newsletter — highlighted here are the first three presentations. Participants then undertook three facilitated small group work sessions to plan clinician-led investigation of and improvement to local variations, interspersed with two panel presentations of previous improvements to lung cancer care.
Patient advocate Lisa Briggs opened the summit with a video presentation, sharing treatment plan and health care system experiences by patients and carers. Suggestions from patients and carers for improvement are: two-way communication, care that is aligned with personal needs, and provision of information and support. Overwhelmingly, patients with lung cancer and their carers want a single point of contact in the health care system for their queries and needs. Presentation slides are available here.

Ms Melissa Arduca, Department of Health & Human Services, spoke on the summit’s policy context. Victoria has historically been committed to improving cancer care since 1936. Currently, there is statewide implementation of the Victorian Cancer Plan 2016–2020. This plan defines five priority areas for action: prevention, screening, treatment, wellbeing and support, and research — all underpinned by principles. Victorian Tumour Summits contributes to the principle of a care pathway focus in the priority area of treatment, and also wellbeing and support.

Of all possible health problems, a cancer diagnosis has the greatest detrimental impact on the individual and community in Australia, therefore working towards optimal cancer care is a nationwide aim. The Cancer Australia Lung Cancer Framework document, which aligns with the nationally-endorsed lung
cancer optimal care pathway, supports clinicians in achieving best practice in the health care system.

Optimal care pathways are a clinician and patient resource that guide both parties on what to expect in optimal care treatment planning. Optimal care pathways are available for Aboriginal and Torres Strait Islander patients with cancer who, along with regional and lower socio-economic patients, have significantly poorer outcomes.

A video of the policy context presentation will be available with the next newsletter.

Associate Professor Gavin Wright presented on patterns of care for lung cancer in Victoria (2013–2016). Data presented at the summit can be considered in the context of whether:

1. there is variation from the statewide average
2. a variation in a health service or Integrated Cancer Service region is unwarranted
3. the statewide average is sufficient or we should 'aim higher'
4. there is variation from the optimal care/best practice goal.
Facilitated small group work after the presentation focused on discussing health service and region variations for further clinician-led local investigation and action, rather than setting statewide prioritised unwarranted variations for improvement. Examples of previous clinician-led local improvements were presented in two panel discussions. Panel presentations will be summarised in the forthcoming summit report.

Summit data showed there is an overall decline in lung cancer and mortality but an increase in female lung cancer. Five-year overall survival has improved to 18% (2015), with a higher survival rate in metro areas. Fifty percent of lung cancer diagnoses are still stage IV. Overall tissue diagnosis has increased to 91% (2016), with a goal of continuing this upward trend. Documented MDM discussion of patients has an increased statewide average of 69% (2017), with a target of 80%. Documented supportive care screening has a low statewide average of 52% (2017).

The data presentation [video recording](#) and [PDF slides](#) are available on the NEMICS website.
9am–4pm Friday, 22 March @RACV, 1500 Midland Hway, Creswick

The Australia and New Zealand Lung Cancer Nurses Forum are holding a free workshop for nurses and health professionals working in lung cancer care. Dr Wasek Faisal will present an update from the summit at the workshop. Hours of learning certificates will be issued. Details here.

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Victorian Tumour Summits are an initiative of the Victorian Integrated Cancer Services delivered in collaboration with the Department of Health and Human Services - Cancer Strategy Development (DHHS - CSD) and Cancer Council Victoria - Clinical Network (CCV - CN).

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