LIVERPOOL AND MACARTHUR CANCER SERVICES

ANNUAL REPORT 2005 – 2006
STAFF OF CANCER THERAPY CENTRE
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director’s Report – Liverpool Cancer Therapy Centre</td>
<td>4</td>
</tr>
<tr>
<td>Director’s Report – Macarthur Cancer Therapy Centre</td>
<td>5</td>
</tr>
<tr>
<td>SSW Cancer Service – Organisational Chart</td>
<td>7</td>
</tr>
<tr>
<td>MEDICAL ONCOLOGY</td>
<td>8</td>
</tr>
<tr>
<td>- RADIATION ONCOLOGY</td>
<td>10</td>
</tr>
<tr>
<td>- Medical Physics</td>
<td>13</td>
</tr>
<tr>
<td>- Radiation Therapy</td>
<td>15</td>
</tr>
<tr>
<td>- GYNAECOLOGY</td>
<td>17</td>
</tr>
<tr>
<td>- RESEARCH</td>
<td>18</td>
</tr>
<tr>
<td>- Collaboration for Cancer Outcomes Research and Evaluation</td>
<td>18</td>
</tr>
<tr>
<td>- Clinical Trials</td>
<td>19</td>
</tr>
<tr>
<td>- SSWAHS Clinical Cancer Registry</td>
<td>20</td>
</tr>
<tr>
<td>- ADMINISTRATIVE SUPPORT</td>
<td>21</td>
</tr>
<tr>
<td>- PALLIATIVE CARE</td>
<td>23</td>
</tr>
<tr>
<td>- ALLIED HEALTH</td>
<td>24</td>
</tr>
<tr>
<td>Pharmacy – Liverpool and Macarthur</td>
<td>28</td>
</tr>
<tr>
<td>Nursing and Care Coordinators – Liverpool and Macarthur</td>
<td>29</td>
</tr>
<tr>
<td>- MULTIDISCIPLINARY CARE</td>
<td>32</td>
</tr>
<tr>
<td>- Tumour Groups</td>
<td>32</td>
</tr>
<tr>
<td>- FINANCE AND ACTIVITY SUMMARY</td>
<td>36</td>
</tr>
<tr>
<td>- FUND RAISING AND DONATIONS</td>
<td>38</td>
</tr>
<tr>
<td>- VOLUNTEERS</td>
<td>41</td>
</tr>
<tr>
<td>- Wig Library</td>
<td>42</td>
</tr>
<tr>
<td>- Look Good Feel Better</td>
<td>42</td>
</tr>
<tr>
<td>- ACHIEVEMENTS</td>
<td>43</td>
</tr>
<tr>
<td>- Academic/Publications</td>
<td>43</td>
</tr>
<tr>
<td>- Book Chapters</td>
<td>44</td>
</tr>
<tr>
<td>- Book Reviews</td>
<td>44</td>
</tr>
<tr>
<td>- Poster/Conference Proceedings</td>
<td>44</td>
</tr>
<tr>
<td>- Reports and Submissions</td>
<td>45</td>
</tr>
<tr>
<td>- Presentations and Invited Lectures</td>
<td>46</td>
</tr>
<tr>
<td>- Abstracts</td>
<td>47</td>
</tr>
<tr>
<td>- Awards and Examination Results</td>
<td>47</td>
</tr>
<tr>
<td>- Completed Degrees</td>
<td>47</td>
</tr>
<tr>
<td>- Higher Degrees by Research</td>
<td>47</td>
</tr>
<tr>
<td>- Education Initiatives</td>
<td>48</td>
</tr>
<tr>
<td>- Quality Projects</td>
<td>50</td>
</tr>
<tr>
<td>- Business Plan</td>
<td>51</td>
</tr>
</tbody>
</table>
As the Liverpool Cancer Therapy Centre entered its twelfth year since opening there was a need to reassess its direction in the light of the new operating environment. The Area Health Service had undergone a re-structure and major plans were underway for building expansion of Liverpool Hospital. The UNSW medical school had committed to increasing its presence in south western Sydney and the clinical school at the University of Western Sydney was preparing for its first intake in 2007.

The Liverpool Cancer Therapy Centre has become a multi-faceted, highly complex and sophisticated organisation. While delivery of high quality care for our patients is our fundamental purpose, the viability of our organisation is sustained through support for our staff and our education and research programmes.

At our planning day in February 2006, which was combined with the Macarthur Cancer Therapy Centre, we made a joint commitment to ongoing collaboration by sharing a common infrastructure and developing common approaches to clinical practice. Our new service configuration also included the departments of Haematology and Gynecological oncology. Five priorities were identified:

1. clarity of organisational relationships
2. integrating service and education
3. research and quality
4. raising the profile of cancer services
5. effective administration

This annual report maintains the tradition of providing a public record of the performance of the cancer service and highlighting past achievements and new directions. Most importantly, it gives the opportunity to acknowledge the contributions of the people who support and provide the service.

The staff of our cancer centre is our most valued resource. Our patients’ perceptions of their quality of care are directly related to the competence and attitude of the staff who they encounter in the course of their treatment. By maintaining a balance between clinical work and personal and professional development, we aim to provide an environment that encourages learning and fulfilment that translates into good patient care.

The year ahead will see completion of a number of projects including the long overdue ward refurbishment and installation of an improved electronic information system. Our service will undergo continued growth in concert with the planned population expansion in our region and the re-development of the hospital.

I have no doubt that on reading this report you will be impressed by what has been achieved and by the energy and commitment of our service to meet the challenges ahead.

Martin Berry
Director, Liverpool Cancer Therapy Centre
Conjoint Associate Professor, UNSW
This year saw further growth in the service with the commissioning of the second linear accelerator and subsequent increase of clinics in medical and radiation oncology.

The clinical service agreement between the Bowral Day Surgery and the Area Health Service saw increased activity within the Wingecarribee sector. Overall patient activity has increased by 25%, chemotherapy by 30% and radiation by 40% with these enhancements.

Additional medical oncology staff has allowed patients experiencing complications from chemotherapy to be admitted to hospital under the care of a medical oncologist, improving the level of care to these patients, and allowing improved education of medical and nursing staff within the hospital. This adds to the existing radiation oncology inpatient service and palliative care consultative service.

Our commitment to educating patients, their families and the community has continued with additional relaxation and education programmes occurring this year, with excellent feedback. Our second Centre Open Day was held in September 2005 coinciding with a cancer centre fundraising ultra marathon from the Hon Tony Abbott, Federal Minister for Health, and Pat Farmer, Federal Member for Macarthur.

The inaugural “24 Hour Fight Against Cancer, Macarthur” was held in October. This is a community driven fundraiser and raised over $170,000 in their first year. All of the funds go towards services and equipment for patients of the Macarthur Cancer Therapy Centre and the Camden Palliative Care Services. Feedback from patients, carers, our Macarthur Community Council and staff guide the purchases.

The centre continues to show leadership in provision of patient focused cancer services with massage and music therapy, innovative models of clinic nursing and involvement of community representatives in the management of the service. Our volunteers are essential to our work and their involvement is greatly appreciated. Staff retention has remained high within the unit and our ability to recruit radiation therapy, administration, nursing and pharmacy staff is a great achievement.

The patient questionnaires continue to show a very high satisfaction with the quality of our service, our staff, volunteers and our education and information services we provide. We welcome and react to the feedback we receive and this helps guide our future policies and services.

Dr Stephen Della-Fiorentina
Director, Macarthur Cancer Therapy Centre
The Cancer Services Planning Day was held on 3 February 2006 at the Shangri-La Hotel, Sydney, and was represented by senior management from Liverpool and Macarthur Cancer Therapy Centres.

To start the day off it was important to take stock of changes to the external environment particularly on the academic front. Professor Richard Henry, Senior Associate Dean in the Faculty of Medicine at the UNSW, presented an “Overview of the strategic direction for cancer at the UNSW and the impact on the clinical schools at the Area level”. The University of NSW has identified a cancer platform as one of five strategic foci. This will coordinate oncology teaching, research and funding. There will be a Professor of Radiation Oncology position established at Liverpool and a world wide search is currently in progress. The Cancer Institute, UNSW and the SSW Clinical School are working together to secure an attractive package.

A/Professor Michael Barton, Research Director of CCORE at Liverpool Hospital, spoke about the “Developments for research in the Western Zone”. He has been appointed interim Director of Research for the Western Zone and will be preparing a research plan.

A draft operational plan identified five areas for concrete and achievable goals followed by the strategies to realise those goals. This plan would become the agenda for our Executive to be used and referred to on a daily basis as the roadmap to guide our activity. “Plan the work and work the plan”.

Top row: Anthony Arnold, Vu Nguyen, Colleen Carter, Moira Stephens, Suzie Mazzotta, Denise Burns, Jenella Cottle, Sandra Avery, Kate Tynan, Nicole Cusack, Dr Allan Fowler, Dr Jennifer Wiltshire, Gary Goozee, Gerald Au, Seated: A/Professor Geoff Delaney, Dr Josephine Chow, Dr David Rosenfeld, Dr Stephen Della-Fiorentina, Alison Pryor, A/Professor Martin Berry and Zelda Jankovic.
The last year has again seen an increase in activity and workload across all three sites; Liverpool, Campbelltown and Bowral. Dr Adams and Dr Kho commenced with us in late 2005. Dr Goldrick returned from leave in Canada and Dr Moylan commenced a sabbatical in Ireland in February 2006, planning to return in October 2006. Professor Boyer of the Sydney Cancer Centre was appointed Director of Sydney South West Medical Oncology Department.

This was the first full year of amalgamation of South West and Central Sydney Health Services. A number of positive outcomes have started to emerge. 2006 saw the initiation of a shared two year registrar training scheme where they work and train at Liverpool, Campbelltown, Royal Prince Alfred and Concord. Accreditation by the College of Physicians in August 2005 approved our training programme at both Liverpool and Campbelltown. A meeting of all medical oncologists in February agreed to standardise treatment protocols, quality indicators and working towards shared clinical trial participation.

With the commissioning of the second linear accelerator at Campbelltown, increased clinics commenced at Campbelltown and this allowed us to commence an on-call service for the hospital and provide inpatient care. This has provided increased educational opportunities to basic physician trainees, junior medical and nursing staff. New patients seen at Campbelltown have increased by 20% this year, and 35% at Bowral.

Again, our staffs’ commitment to education and training has continued under the leadership of Dr Adams, Dr Hovey and Dr Moylan with the addition of sessions of evidence based medicine topics for our training registrars to our core clinical teaching. Involvement of all staff in educating our patients and community, general practitioners, medical students, junior medical staff, nursing, pharmacy and allied health staff continued.

Quality and safety activities are led by Dr Goldrick and Dr Kho with commencement of regular multidisciplinary morbidity and mortality meetings, review of policies and procedures and clinical incident management. The Lantis electronic patient record database of treatment side-effects has led to review and improvements in our chemotherapy and antinausea chemotherapy protocols. This was recognised by attainment of a NSW Cancer Institute grant to further enhance and investigate the applicability of this system to other medical oncology units.

Dr Eek has assumed leadership of the clinical trials research group and is piloting a unique assessment of pain from bone metastases, and touch screen technology of patients assessing their symptoms and quality of life. The enrolment of patients in clinical trials continues to increase and we continue to attain outstanding results recognised by the NSW Cancer Council and the Cancer Institute with a further two years of funding for two of our research officers.

Four of our registrars have presented research from the Department of Medical Oncology this year. Dr Asghari presented research on colorectal cancer treatment decisions to the American Society of Clinical Oncology. The national Medical Oncology Group of Australia meeting will see Dr Blinman present our outcomes on a new chemotherapy treatment for advanced breast cancer, Dr Moore on our Stage 3 lung cancer outcomes and Dr Ng present on the use of oral antiemetic use at the Macarthur Cancer Therapy Centre.

In summary this year has seen last years increase in medical staff lead to improvements in more patients being seen, a reduction in waiting times, more presentations at conferences and broader
education of staff. The cohesion of the group, the sharing of ideas and the joint commitment to an improved service has been central to our achievements this year.

MEDICAL ONCOLOGY STAFF

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Executive, Director of Medical Oncology Liverpool

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Director of Macarthur Cancer Therapy Centre, A/ Director of Medical Oncology

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Dr Richard Eek  
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Medical Oncologist

Dr Amanda Goldrick  
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Medical Oncologist

Dr Elizabeth Hovey  
MMBS, FRACP, MSc  
Medical Oncologist

Dr Patricia Kho  
MBBS, FRACP  
Medical Oncologist

REGISTRARS

Dr Mahmood Alam  
Dr Ray Asghari  
Dr Prunella Blinman  
Dr Geraldine Lake  
Dr Melissa Moore  
Dr Weng Ng
Approximately two years ago, the average waiting time for radiation oncology was 12 to 14 weeks. We are now able to treat most patients within four weeks of referral. This has been due to improvements in resources and efficiency in using resources.

Due to significant increases in radiation therapist university positions and the development of medical physics registrar positions, our service is in a much stronger position to be able to provide a timely radiation oncology service to the Sydney South West Area Health Service patients.

This is reflected in the activity statistics that show that there has been a steady growth in workload. We are now able to offer a radiation oncology service to most cancer patients in our area without patients having to travel to other areas for their radiation oncology. This has also meant a dramatic reduction in waiting times for radiotherapy.

**Staffing**
The numbers of radiation therapists, medical physicists, radiation oncologists and radiation oncology nurses has risen over the past year. Staff retention remains a focus. We have had substantial uptake of graduate scholarship positions in radiation therapy, which remain funded from the Radiation Oncology Private Trust Fund and have led to the recruitment of high quality new radiation therapy graduates. In addition, we have participated in the medical physics registrar training program and have attracted high quality medical physics trainees.

**Education**
We have a very strong education program in radiation oncology, radiation therapy and medical physics. Our most recent radiation oncology registrars have passed the final examination at their first attempt. This means that we have had a total of 11 radiation oncology registrars sit the final examination in the past 10 years and all have passed at their first attempt. This makes the radiation oncology service at Liverpool and Campbelltown Hospitals a highly sought position for trainees in radiation oncology. In addition, we have two radiation therapy educators who have enhanced the radiation therapy training program.

**Quality**
A significant focus remains on treatment quality and there have been a large number of initiatives that have been focussing on treatment quality.

Three initiatives deserve highlighting. The Director of Radiation Therapy, Mr Anthony Arnold, has been the principal driver of a new incident reporting tool in radiation oncology that has received national interest. He has established the worth of such a project in our department and plans are currently to roll this process out nationally once funding has been identified. Anthony recently was awarded the Chris Atkinson Quality Assurance Award at the Scientific Meeting of the Royal Australian and New Zealand College of Radiologists (RANZCR).

Ms Lynette Cassapi, Deputy Director of Radiation Therapy, has been responsible for a re-development of our imaging policy in radiation oncology and this has also received national interest. Recently, Dr Rowena Martin, a Senior Radiation Oncology Registrar, has completed a review of radiation oncology QA requirements that has been forwarded to the RANZCR as a background document for their recent quality improvement programme.
The strong focus in quality assurance recently culminated in a day seminar held at Liverpool Hospital on quality assurance in radiation oncology that attracted over 100 delegates from across Australia.

**Planning**
Our extended radiation oncology executive (the senior staff of the radiation oncology service) met for their annual planning day at Craigieburn in Bowral in March 2006. A number of initiatives have resulted from this planning day and has resulted in the strategic plan for 2006/2007. The areas that will be concentrated on include:

- Standardisation of nursing roles and procedures
- The development of standard performance benchmarks for the department
- Improve our efficiency using process review methodology
- Pilot a competency programme in radiation oncology

**Research**
Our interest in radiation oncology research continues to strengthen and highlights are listed in the research section of this report.

We were delighted to be offered a research partnership with Siemens to investigate the benefits of Mega Voltage Cone Beam CT (MVBCT). MVBCT is an attachment on the Linear Accelerator (the machine that delivers radiation therapy) and allows staff to monitor the patient position throughout treatment and also the position of the area of the body that is being targeted with radiotherapy. It is potentially a significant technology improvement compared to traditional methods of visualisation. We are one of the first five departments in the world to have MVBCT and I believe that the reason why the partnership was formed is our growing reputation for innovative radiation oncology research.

Significant work is currently being done on the development of our Intensity Modulated Radiotherapy Program. This is a new way of delivering radiotherapy, which may allow us to give tumours a higher dose of radiation and/or reduce the side effects associated with radiotherapy. Our department is working very hard at the present time to have a clinical program up and running within the next three to four months. This initiative is part-funded by the NSW Cancer Institute.

Another major innovation that has occurred in our service in the past 12 months has been the availability of image fusion. This allows us to fuse the images that we obtain from CT scans, MRI scans and PET scans and to put them all together to give us the best image of the tumour that we are aiming the radiotherapy at. This program is now available clinically for appropriate patients (this technology is usually used in patients with lung cancer, lymphoma, brain tumours and head and neck cancers). This will allow us to better target the tumours and reduce side effects from treatment.

Our radiation oncology service is also working towards complete electronic oncology records for all of our patients. We have had a program over the past five years of developing a radiotherapy and medical oncology information system that allows us to access all patient data electronically. This improves the timeliness of access to treatment and also allows consistency of data. This program has been recognised by other states and also international departments as being an innovative approach to record keeping and we continue working on this program.

In addition, our health services research arm – Collaboration for Cancer Outcomes Research and Evaluation (CCORE) goes from strength to strength under the leadership of Associate Professor Michael Barton as shown in other parts of this annual report.
Our research profile has been suitably recognised by the NSW Cancer Institute and the University of NSW providing funding for a Professor of Radiation Oncology for Liverpool Hospital. Appointment to this position is imminent as we go to press.

The challenges for the next 12 months include:
- Replacement of our oldest linear accelerator
- Completion of our Intensity Modulated Radiotherapy Program
- Replacement of our current radiotherapy information system with a new radiotherapy information system
- Developing a structure for radiation oncology nursing positions including developing a training program

RADIATION ONCOLOGY STAFF

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Executive, Director of Radiation Oncology

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Deputy Director of Radiation Oncology, Director of CCORE

A/Prof Martin Berry
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Dr Andrew Kneebone
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Dr Mark Sidhom
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Radiation Oncologist

Dr George Papadatos
MBBS, FRANZCR
Radiation Oncologist

Dr Shalini Vinod
MBBS, MD, FRANZCR
Radiation Oncologist

REGISTRARS

Liverpool and Macarthur Cancer Therapy Centres held their Radiation Oncology Planning Day on 24 March 2006 at Craigieburn Bowral. The day started with a series of presentations and discussion on achievements that resulted from the 2005 Planning Day. This brought home just how much has been achieved by the Radiation Oncology departments in 2005 with major achievements reported in all the areas. These areas included improving work processes and efficiency in planning and simulation, developing the information system to help identify blocks to efficient care developing a research plan and staff recruitment and retention.

The 2006 Planning Day groups were Radiation Oncology Nursing/Care Coordinators, Planning, Quality Assurance and treatment Workflow, Quality/Benchmarking, Education and Competency. An action plan for 2006 will be developed from the group discussions.
The Medical Physics Team has had another extremely busy year providing routine clinical physics support as well as a number of research, development and implementation projects. Just some of these projects worked on over the year include:

- Compensators at Liverpool and Macarthur
- Lantis upgrade to v6.1h6
- Planning system upgrades
- Fusion of PET and MRI image data for treatment planning
- Spiral CT commissioning
- Installation and commissioning of the new Siemens Oncor Impression linear accelerator (M3)
- Implementation of MVision Cone Beam CT on M3
- IMRT commissioning
- CT-based brachytherapy planning trial

In addition to progressing the capabilities of the department, a number of the team are currently pursuing higher degrees for their own personal and professional development. Two are enrolled in PhDs and five in MSc programs. Also of significant note, Gwi-Ae Cho was recently successful in gaining ACPSEM Accreditation.

The past year also offered a number of professional development opportunities for physicists with Commonwealth and NSW Health CPD grants being offered to individuals that enabled a number of staff to attend conferences and courses, garnering skills and ideas to bring back to the Service.

The physics group as a whole was also successful in two bids for video conference infrastructure funding from Commonwealth Institution CPD funds and NSW Cancer Institute New Technology grants. These funds enabled the purchase of new video conference units for Liverpool and Macarthur Cancer Therapy Centres.

The Physics and Radiation Therapy groups also combined to bid for Commonwealth CPD funds for the provision of IMRT courses to the Australian Radiation Oncology workforce. This bid was successful and a team of SWS Cancer Service Physicists, Therapists, and an Oncologist managed the organisation of two general IMRT courses in Sydney and Adelaide, and a further seven vendor-specific IMRT courses, covering specific IMRT requirements for each of the major treatment planning and linear accelerator vendors.

The year ahead will continue to be challenging with critical shortages in the Medical Physics workforce across the State and recent vacancies arising in the group likely to impact the department significantly.
### MEDICAL PHYSICS STAFF

#### SENIORS
- **Mike Bailey**
  BSc, MACPSEM
- **Gwi-ae Cho**
  BSc, MSc
- **Robin Hill**
  BSc (Hons), MSc, MCPSEM, MIPEM
- **Lois Holloway**
  PhD, MACPSEM

#### DEPUTY DIRECTOR LIVERPOOL
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- **Gwi-ae Cho**
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- **Robin Hill**
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- **Lois Holloway**
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#### DIRECTOR LIVERPOOL
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- **Gwi-ae Cho**
  BSc, MSc
- **Robin Hill**
  BSc (Hons), MSc, MCPSEM, MIPEM
- **Lois Holloway**
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#### MEDICAL PHYSISTS
- **Ming Kong**
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- **Vinod Nelson**
  BSc, BScMed, Grad Dip, Rad Phys
  MACPSEM, AIP
- **Guangli Song**
  BSc (Hons), MAppSc
  ACPESM
- **Jamie Varas**
  BSc(Hons), MSc

#### REGISTRARS
- **Jason Aarts**
  B MedRadPhys (Hons)
- **Tania Bartrum**
  ACPSEM, IOP, AIP, APESMA
- **Jessica Hughes**
  BAppSc, GradDipAppSc

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Visit by ELEKTA (IMPAC Medical Systems) to Liverpool Hospital Cancer Therapy Department

Jo Jachinowski, Director Elekta/IMPAC Development (Worldwide) and Vice President of Product Creation for the Elekta Group, and Melissa Carson, IMPAC Sales Manager for Australia and New Zealand, along with Robyn Cooke from NSW Health Technology Department visited the Liverpool Cancer Therapy Centre on 9 November 2005. They were part of a Swedish Trade Delegation that was in Australia for the Swedish Business Awards. The delegation took the opportunity to visit because we utilise the IMPAC software for some of our business functions, namely the Lantis oncology system and the SSWAHS Clinical Cancer Registry project.

Picture: Jo Jachinowski, Melissa Carson, Angela Berthelsen, Anthony Arnold, Dr Val Poxon, Gary Goozee and Sandra Avery.

The above group spent the morning discussing the issues around the software use and functionality and demonstrating our major achievements from this usage. The delegation was suitably impressed by the high quality of work done in the CTC through the use of the software and the CTC team was rewarded by a commendation from Jo for their efforts. Liverpool CTC has certainly raised the bar for IMPAC users worldwide and no doubt our expertise will be in demand in the future.
Radiation Oncology remains a fundamental part of cancer management. SSWAHS has now overcome the previous staff shortages in Radiation Therapy and the service has achieved full staffing for the Service (two Planning departments and five linear accelerators). These numbers were further supplemented during the year by several experienced locum Radiation Therapists on short term contracts recruited from overseas, which have helped to fill the posts held by staff absent on maternity leave. During 2005 there were also six Professional Development Year (PDY) staff who successfully gained their full accreditation after spending the year with us and five of these staff were successfully retained at the end of the year.

The service has been very busy over the past 12 months, expanding the facilities to fully utilise the five linear accelerators across both the Liverpool and Macarthur centres. One of the original linacs at Liverpool was replaced during this year and the linac bunker was redeveloped to accommodate a multi-modality dual energy linac. The new Siemens Oncor has the latest technology including an upgraded imager and the first Megavoltage Cone Beam CT facility in the Southern Hemisphere. This means that we are now able to take verification CT scans on the linac couch in the treatment delivery position in order to verify and correct for any positioning or patient variables on a daily basis. Along with the linacs at Macarthur, routine on-line imaging has also been implemented on this linac for a selected group of prostate patient as part of our new implanted fiducial marker programme.

Radiation therapy staff have been working with the other professional groups within the centre throughout the past 12 months to improve patient care and develop better practices through quality projects. There have been over twenty projects in progress during the past year involving Radiation Therapists. These include:

- Fusion of Planning CT and Diagnostic MRI or PET images for use in patient planning.
- Development and refinement of imaging protocols and progress towards a department wide imaging training package.
- Ongoing progress towards implementation of Intensity Modulated Radiation Therapy (IMRT).
- Developing and streamlining many of the quality procedures in radiation therapy Planning and treatment delivery.
- The introduction of electronic treatment bookings and prescriptions, all progressing towards the goal of complete electronic treatment records in RT.
- Design, implementation and improvement of Lantis Quality Checklists, enabling streamlining of checking procedures, planning QA processes and improved audit.
- Formation of a dedicated multi-disciplinary team which has investigated and developed CT based Planning for the Brachytherapy service.

All of these advances continue to carry the radiation therapy group forward. This team has continued to grow in strength and confidence, underpinned by the peer support and dedication of all the members of the group, whether working on educational issues, professional development, new processes and technologies, quality systems or direct patient care improvements.
On 13 December 2005 staff of the Liverpool Cancer Therapy Centre gathered in Radiotherapy treatment room 3 to officially welcome the clinical release of a new Linear Accelerator. The Siemens Oncor machine replaces a 10 year old machine, and has now been in clinical use since 5 December 2005.

The new machine brings state of the art technology to Liverpool, complementing and matching the recently installed treatment machines at Macarthur Cancer Therapy Centre. This linear accelerator gives Liverpool the capability of delivering multi-modality Radiation therapy beams using multileaf collimators and also adds the capability for on-line and off-line treatment imaging and image reviews using the most up-to-date flat panel technology.
The gynaecology oncology service at Liverpool Hospital is the only such service for the SSWAHS (WZ). Women with ovarian, uterine, cervical, vaginal or vulval cancers are guided through the trajectory of their cancer journey via a multidisciplinary approach. The team consists of gynaecological oncologists, medical and radiation oncologists, histopathologists, pelvic fellow, clinical nurse consultant, social worker and clinical psychologist.

Treatment with external beam radiotherapy is available at both Liverpool and Campbelltown Cancer Therapy Centres; however, intracavity and interstitial brachytherapy is only performed at Liverpool Hospital, as it is a highly specialised procedure requiring dedicated equipment.

A weekly multidisciplinary team (MDT) meeting is held to discuss patient diagnosis and future care planning. A Support and Education Group is conducted monthly.

The team works very closely with The Sydney Gynaecological Group at Royal Prince Alfred Hospital. A peer review (videoconference) meeting is held monthly. The service is also well supported by The Greater Metropolitan Clinical Taskforce.

Staff: Associate Professor Felix Chan, Acting Director of Medical, and Rosemary Craft, Clinical Nurse Consultant.
RESEARCH

The Collaboration for Cancer Outcomes Research and Evaluation

The Collaboration for Cancer Outcomes Research and Evaluation (CCORE) has had a productive year with many peer-reviewed publications, contributions to National Tumour Guidelines and commissioned reports. Our report on the optimal utilisation of radiotherapy has been published as a series of papers in Cancer and the benchmark we have set has been adopted by the European Union and the International Atomic Energy Agency for planning radiotherapy services in Europe and the developing world. We have also completed commissioned work on melanoma, chemotherapy service guidelines and radiotherapy for low and middle income countries.

One member of staff has completed a higher qualification and two have enrolled for PhDs and one for MPH. CCORE has the highest number of PhD students in SSWAHS Western Zone.

A/Professor Michael Barton was appointed interim Research Director for SSWAHS Western Zone and is chairing the national brain tumour guidelines for the Australian Cancer Network.

Our current projects include the distance learning course in the applied sciences of oncology. We ran the final coordinators’ meeting in Manila in January 2006 and hope to deliver the final CD in August 2006. It will then be used in developing countries around the world as part of radiation oncology training and may be translated into French, Spanish and Chinese. We have received funding to develop a model of the optimum utilisation of chemotherapy and will be hiring a medical oncology fellow to assist with the project. Internationally we are collaborating with groups in Toronto to develop a bone metastases Quality of Life Scale for the EORTC.

The Cancer Institute is funding CCORE to work with NSW radiation oncology departments to enable the departmental databases to be combined for the extraction of high level statistics. Together with the new data linkage unit of NSW Health we will create a powerful radiotherapy service use database that will allow us to examine actual radiotherapy utilisation in great detail. 2005-2006 has seen a broadening of our base of collaborators and an increase in involvement with Cancer Therapy Centre members resulting in more and better research. We hope that we continue to expand these alliances over the next year.
Clinical Trials

During 2005-2006 the Cancer Therapy Centre Clinical Trials Department was able to initiate eight new studies, including:

Three pharmaceutical sponsored clinical trials:

- **Odessey** - Evaluation of two doses of SR31747A (75 mg and 125 mg) in non-metastatic androgen-independent prostate cancer. Randomised, double-blind, placebo controlled Phase II study. *Principal Investigator is Dr Elizabeth Hovey.*
- **CLL8** - Phase III trial of combined immunochemotherapy with Fludarabine, Cyclophosphamide and Rituximab (FC-R) versus chemotherapy with Fludarabine and Cyclophosphamide (FC) alone in patients with previously untreated chronic lymphocytic leukaemia. *Principal Investigator is Dr Lindsay Dunlop.*
- **Inflammatory Breast Cancer** - A phase II study to evaluate the efficacy, safety and pharmacodynamics of Lapatnib in combination with Paclitaxel as neoadjuvant therapy in patients with newly diagnosed inflammatory breast cancer. *Principal Investigator is Dr Stephen Della-Fiorentina.*

Four Multicentre Collaborative Group clinical trials:

- **AZURE** - Does adjuvant Zoledronic acid reduce recurrence in patients with high risk localised breast cancer. *Principal Investigator is Dr Stephen Della-Fiorentina.*
- **MAX** - A Randomised phase II/III study to evaluate the role of Mitomycin C, Avastin and Xeloda in patients with untreated metastatic colorectal cancer. *Principal Investigator is Dr Eugene Moylan.*
- **TROG 03.01 Oegophasus** - A randomised phase III study in advanced oesophageal cancer to compare quality of life and palliation of dysphagia in patients treated with radiotherapy versus chemo-radiotherapy. *Principal Investigator is Dr Andrew Kneebone.*
- **TROG 03.02 Gastric** - A feasibility study to evaluate adjuvant chemoradiotherapy for gastric cancer. *Principal Investigator is Dr Andrew Kneebone.*
One Investigator Initiated study:

- **Intravesical Gemcitabine** - Phase II trial of intravesical gemcitabine in patients with transitional cell carcinoma of the bladder. *Principal Investigator is Dr Elizabeth Hovey.*

The CTC Clinical Trials department also continues to be recognised for its level of patient participation in clinical trials and have successfully met all the recruitment targets set by the NSW Cancer Council in its NSW Cancer Trials program. Commitment to promoting clinical trial participation and awareness continues to be the main focus of the CTC Clinical Trials Department.

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**Clinical Trials Staff**

**Research Manager**
Vu Nguyen

**Research Officers Liverpool Cancer Therapy Centre:**
- Radhika Butala
- Sen Rattanavong
- Seini Taufa

**Research Officer Macarthur Cancer Therapy Centre:**
- Anne Whatman

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**SSWAHS Clinical Cancer Registry**

Data collection is now well underway and the first quarterly report of new cancer cases found for the period July – September 2005 has been produced. Just over 1,200 cases have been found that were diagnosed and/or treated in Sydney South West Area Health Service (SSWAHS) public hospitals. The highest number of cases found in SSWAHS for this period were Genito-Urinary, Breast, Lung and Haematological Cancers. The case finding process developed by the Registry team is now more refined and the team are finding cases much easier and quicker than at first. However, the team do rely heavily on clinician input to assist with diagnostic, staging and treatment data for accuracy and completeness and are very appreciative of all the help and support that is given.

Our aim is to collect and provide high quality, reliable data that can assist clinicians, researchers, managers and planners undertake their work.

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**SSWAHS Clinical Cancer Registry Staff**

**Project Manager**
Dr Val Poxon

**Kirsten Dyball**
Lung, Central Nervous System and miscellaneous

**Sandra Farrugia**
Haematopoietic, Melanoma, Head and Neck

**Sue Josikovic**
Breast and Gynaecological

**Jared Morris**
Genito-urinary

**Mahbuba Sharmin**
Upper Gastro Intestinal Tract and Colorectal

**Isobelle Anscombe**
Administrative Assistant

*Pictured: Angela, Sandra, Kirsten, Mahbuba, Jared, Val, Sue and Isobelle*
Liverpool and Macarthur Cancer Services

The Cancer Services Planning Day on 3 February 2006, created some great ideas for developing the structure of the service. The Cancer Services’ operational plan was developed from the findings of the planning day, which is now incorporated into the peak committees reporting structures.

Oncology services in Bowral have been setup for improved administration of patient records and fees reporting.

Finance and activity reporting continue to be key performance areas for the department, and work on benchmarking and comparative data will be the focus for the year.

Staff Development

Clerical staff development has been ongoing with 8 of our team graduating with Business Administration Certificates and Diplomas. In-services that have been completed are: Customer Service, Scanning, Interacting with Grieving Relatives and Lantis training. More have been planned as part of the overall extension program such as: Being aware of different multicultural backgrounds, team building and the accounts processes.

Early in 1995, with the approval of the Executive Staff of Liverpool and Macarthur Cancer Therapy Centres, a proposal was put forward to the HR Department of Western Zone. This proposal dealt with the new VTAB accredited courses looking at the work-based education of many of the clerical staff within the various hospitals throughout the Area.

The proposal put forward was for a centre-based training program specifically aimed at the clerical staff employed within the Cancer Therapy Centre. This was the first time anything of this magnitude had been attempted by the HR Department. Approximately 27 members of staff across both centres began a 7 month training program at varying entry levels. The culmination of this was the graduation on 13 December 2005 of the first eight clerical staff.

Picture: Teresa Mathis, Leanne Aarts, Ashti Bibani, Maree Cain, Rachel Newell, Holanda Bentancor, Rose Atkin, Salma Badr and Heather Patchett

The Management Development Program meetings have continued this year and have expanded to incorporate all the managers in the Cancer Therapy Centre. Currently the focus is on mentoring.

Workflow improvements include staff rotations through all support functions and allocation of clinics to dedicated staff. New workstations and process reviews have resulted in better workflow. A re-structure has created a career pathway through which our staff can progress, helping us to retain staff for longer, reducing costly recruitment and retraining. Increased transcription staff and closer working arrangements between Liverpool and Macarthur has increased and stabilised the output across centres.

To further attract staff, we have been actively involved in providing supervision to a range of super-numery staff, including: Management College Students, Immigration work placement staff, work experience students and Return to Work programmes.
Achievements and Projects

Our integrated oncology service uses an electronic patient record for all its patient services. This Lantis system underwent a complete system upgrade this year, including server upgrade, proving a tricky exercise for the Information Management Technology team. Many reports were required to be re-written, and detailed trouble-shooting took place over several weeks – but the technologically-savvy team surged through with flying colours. The system is constantly evolving, to meet our growing desire for information, and the administrators refine the way we use the technology for each patient episode.

Sandy Avery, Operations Manager, was given the award “Employee of the Month” for Liverpool Hospital on 7 February 2006. She received the award for her dedication, leadership and initiative towards the development and improvement of the Cancer Therapy Centre.

Overall staff numbers have increased from 163 in 2004/2005 to 175 in 2005/2006. We expect over 200 souls next year to provide the additional services in Macarthur. Accommodating all these additional staff has been a challenge that has been accepted by the NSW government, culminating in our involvement in planning for the Stage II capital developments over the next 10 years.

Our education and quality programs rely heavily on video conferencing, and after a review of utilisation, we applied our funding grants from Commonwealth and NSW governments to upgrade to Tandberg units. These were installed in June, and will facilitate simple and clear communication between the centres.

BUSINESS ADMINISTRATION STAFF

Sandra Avery
Ambulatory Care Operational Manager

LIVERPOOL CANCER THERAPY CENTRE

Information Manager
Phan Sayaloune

IT Support
Adam Stanzione

Secretarial
Zelja Jankovic
Narelle Barnett
Leanne Aarts
Judith Walker
Deborah Young
Lyn White

Transcription
Gail Adams
Heather Patchett
Karen Singh
Shelley Wrath

Administration
Maree Cain
 Brigida Sbezzi
Therese Mathis
Nisveta Hasanbegovic
Rosalie Alkin

Cleaning Support
Monica Tibbles

MACARTHUR CANCER THERAPY CENTRE

IT Support
Janice Warner

Secretarial
Suzie Mazzotta
Colleen Reynolds
Ann See

Administration
Rosalyn Frederic
Sandra Kirkman
Michelle Moors
Kelly Parker

Transcription
Suzanne Campbell
The Future

Administrative support staff are committed to continuous improvement. To achieve this, our policies and procedures, workflow and competency continue to be reviewed and audited.

- We will develop performance indicators to assist in developing better work practices and service provision.
- Competency based assessment and training program will be created to adequately up-skill staff.
- Orientation will be refined to better equip new staff and new patients in their interactions with the service, including generic trainee programs.
- Website will be updated and published, providing accessible and relevant information for staff, patients and referring clinicians.

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PALLIATIVE CARE

Colleen Carter
Clinical Nurse Consultant

The Palliative Care Service provides a consultancy service to the inpatients of Liverpool Hospital who have a life threatening illness which may be cancer or non-cancer.

The major achievement for the service this year has been its involvement in the End of Life Care Pathway Project. The pathway was developed following an audit of patients’ notes who had passed away in the hospital. Following the audit several forums and focus groups were held to identify issues around the provision of quality End of Life Care. Education sessions were held with the Medical, Nursing and Allied Health teams including two Grand Rounds presentations. This process has lead to the trial of the Pathway on three wards in Liverpool Hospital, Grimson 2 West, Clinical Building 5 East and the Aged Care Unit.

The Palliative Care outpatient clinics continue to run on Wednesday afternoons and it is hoped that this will increase within the next year.

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<th>Palliative Care Staff</th>
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<tr>
<td>Staff Specialists</td>
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<tr>
<td>Dr Louise Elliott</td>
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<tr>
<td>Dr Meera Agar</td>
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<td>Dr Frank Formby</td>
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<td>Clinical Nurse Consultant</td>
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<td>Registered Nurses</td>
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<tr>
<td>Naomi Ellis</td>
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<tr>
<td>Sharon Loudon</td>
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<tr>
<td>Jodie Peronchik</td>
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<tr>
<td>Laura Woodlands</td>
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Allied Health staff of the Macarthur and Liverpool Cancer Therapy Centres include Social Workers, Dietitians, Occupational Therapists, Speech Pathologists, Clinical Psychologists and Physiotherapists. All play an integral part in providing care for Cancer Therapy Centre patients, their families and carers, and together with other Cancer Therapy staff, work as a team to meet the range of patient needs and continually strive to provide a quality service. Their work and achievements throughout the past year is outlined below.

**PLANNING**

- Allied Health has been involved in Cancer Services planning for the upcoming Business Plan.
- Regular Allied Health meetings have been consolidated both at a site level, and across Liverpool and Macarthur, assisting with communication and facilitating the amalgamation.
- Allied Health and psycho-social support representatives sit on the Area Cancer Services Council.
- The Clinical Psychology Service has attended the planning meeting of the Haematology Department.
- An Allied Health Representative attended the Radiation Oncology Executive Committee planning day.
- Liaison has occurred between Liverpool Cancer Therapy Centre (LCTC) and Macarthur Cancer Therapy Centre (MCTC) Occupational Therapy and Physiotherapy, regarding lymphoedema service provision for patients living in SSWAHS.
- Social Work and Clinical Psychology have developed a 2006-2016 Psycho-Social Support Services Work Plan.
- A Social Work working party has been set up at Macarthur to look at the Social Work service delivery model for oncology clients in Macarthur.
- The Clinical Psychology Service continued to develop its services using its “Model of Psycho-social Service and Strategic Plan” as a blueprint to address patients’ and families’ psycho-social needs.
- Based on its successful pilot project, the Clinical Psychology Service has been collaborating with stakeholders across the centre in establishing routine assessment of patients’ quality of life (QOL) and associated needs as an integral part of the centre’s standard clinical practice. An objective of this plan is to establish a systematic process of monitoring patients’ QOL and psycho-social needs to inform care management by the multidisciplinary teams (MDTs).
- An electronic referral system is being developed in Lantis, to facilitate Allied Health referrals, create consistency across sites and professions, and ensure a user-friendly process for referring staff.
- Macarthur Allied Health have been able to order new equipment and resources to assist in their service development and patient care.
- Resources and clinical support packages continue to be developed and utilised. Some resources currently being developed include:
  - a breast cancer poster for post-menopausal women to provide access to information for dietary management post therapy, being created by the LCTC Dietitian, Social Worker, and Breast Cancer Care Co-ordinator.
  - a head and neck (H&N) patient education resource, which is a multidisciplinary project involving a range of Allied Health and co-ordinated by the H&N Care Co-ordinator, after identifying there is no resource currently available for this patient population.
  - education resources created by the LCTC Dietitian for patients taking Procarbazine and requiring a Monoamine Oxidase Inhibitor diet, and dietary information and bowel obstructions.
PATIENT FOCUS

- Allied Health continue to provide individual consults, groups, and specialised clinics to service the wide range of patient groups that access cancer services.
- Referrals are made between MCTC and LCTC lymphoedema services to improve access and reduce waiting lists.
- The LCTC Speech Pathology/Dietetics H&N Clinic for the assessment, management, and monitoring of swallowing and nutrition problems for patients with H&N cancer during and after treatment, continues, while service expansion at MCTC has lead to this patient group now also being able to access Dietetic and Speech Pathology services at MCTC. Close contact between Macarthur and Liverpool staff facilitates seamless patient care where necessary.
- Cover of specialist Speech Pathology services (such as voice prosthesis management) is provided between LCTC and MCTC when required.
- Social work involvement in the Macarthur Cancer Community Council has opened lines of communication and input between MCTC and the community.
- LCTC Speech Pathology established a multidisciplinary voice clinic (in conjunction with ENT Department), allowing H&N cancer patients with associated voice disorders access to improved assessment and treatment using nasendoscopy.
- Continuing to build links with transport providers in the Macarthur area improves access and equity for patients.
- Allied Health continues to have involvement in community and support groups.
- Both sites continue to conduct patient and family groups, involving a range of Allied Health disciplines as well as other staff, with evaluation leading to continual improvement. The Cancer Education Program and the Relaxation Program are run at MCTC, while LCTC runs the Dealing with Cancer, and Living with Breast Cancer, Education Programs; and Lymphoedema, Gynaecological Oncology, Prostate Cancer, Haematology, and Brain Tumour, education and support groups.
- LCTC have commenced a seven week Fatigue Management Exercise Class catering for oncology patients in managing their fatigue post treatment, with a successful pilot programme. This is a joint initiative of the Physiotherapist, Social Worker, Dietitian, and Haematology Clinical Nurse Coordinator.
- LCTC Social Work, along with other staff, were involved in running new groups, including Italian Living with Cancer, run with the NSW Cancer Council; a Lung Cancer patient and family seminar; and an Assyrian woman’s breast cancer group, coordinated by Fairfield community health centre.
- LCTC Social Work, with funding from the NSW Leukaemia Foundation, initiated a new program for haematology patients involving a visiting art therapist, which has particularly benefited long stay patients.
- Dietetics has evaluated their MCTC service through patient questionnaires to assess patient satisfaction.
- The Occupational Therapy service has been collecting Key Performance Indicators on patients seen within appropriate time frames at LCTC. Other Allied Health are collecting clinical indicators where appropriate.
- MCTC Allied Health developed and carried out a QI project on their Allied Health brochures. The brochures were then reviewed and improved on, based on the results of this.
- The Macarthur and Liverpool Dietitians have developed an assessment template in Lantis to allow more efficient data collection and identify patient outcomes.

PROFESSIONAL STANDARDS

- Policies and protocols have been developed by each Allied Health discipline in accordance with best practice guidelines, and are reviewed regularly.
- The LCTC Clinical Psychology Service is reviewing its referral policy and procedures to take into account the upcoming electronic referral system.
• Dietetics is currently using the Peter Mac Cancer Institute guidelines for identifying patients at high nutritional risk, for prioritising patient referrals and for determining timeframes to see patients.
• LCTC Social Work provided representation on the End of Life Care Pathway Project, targeting palliative care on general medical and surgical wards.
• Planning stages have begun on the development of a network interest group across SSW Occupational Therapy Cancer Services.
• Individual regular meetings with the Director and Service Manager provide professional support to Allied Health staff in MCTC.

ORGANISATIONAL DEVELOPMENT
• Allied Health staff use Lantis to book patients and record documentation, improving communication between service providers.
• Allied Health representation at management level, and on various committees, assists communication channels and information sharing.
• Speech Pathology and Dietetics attend the H&N MDT meeting with the view to improve patient management.
• Significant vacancies in Speech Pathology and Physiotherapy over the last 12 months have impacted on the service provided to clients at MCTC. Since the commencement of staff in February the MCTC Speech Pathology is being re-establishing.
• The LCTC Dietitian position remains a concern for the continuity of service and specialist care, as it is a rotational position, and inadequately funded for the increasing demand for dietetics services. Regrading to a specialist position and increased staffing is recommended. Sources of funding need to be identified.

POPULATION FOCUS
• Seminars for the Open Day at MCTC 2005 were developed and presented by Allied Health.
• At LCTC, Social Work have supervised the Biggest Morning Tea and Daffodil Day national fundraising activities.
• Allied Health have been involved in various community groups and events, such as giving talks to Encore, a breast cancer community group.
• Preventive information and education is provided to patients as relevant. For example, Physiotherapy providing early introduction shoulder exercises to post mastectomy patients to prevent post-operative stiffness.

ACADEMIC FOCUS
• Allied Health have attended outside training and conferences, including national oncology conferences, around various topics including complementary therapies, nutrition and cancer, tracheostomy, end of life care planning, psycho-social aspects of oncology and care, lymphoedema, and student supervision.
• The LCTC Dietitian attended the Cachexia Conference in Rome and presented the conference highlights to various staff groups within Liverpool Hospital and at the NSW DAA Oncology Interest Group.
• Allied Health Staff attend relevant CTC Education Programs and inservices.
• Allied Health attend H&N cancer, breast cancer, brain tumour, haematology, lymphoedema, general oncology, and palliative care related interest/support groups.
• Together with other haematology Social Workers, LCTC Social Work undertook an evidence based review of psychosocial issues around bone marrow transplants.
• LCTC Social Work have participated in a number of Cancer Council projects, such as the ‘Parent with Cancers: Talking with your Children’ booklet, and Take a Holiday from Cancer project.
• Allied Health have presented at inservices centre-wide and within separate allied health departments, around their service and issues faced by clients and their families. Some topics have included patient education and support programmes and promoting awareness and
referrals among staff, communicating with grieving families, stress management, and conflict resolution.

- Allied Health has supported clinical education of students from their own and other disciplines, such as medicine and radiotherapy.
- A Head and Neck research proposal has been submitted to the University of Wollongong for a student project – a retrospective descriptive study looking at tube fed H&N patients.

### ALLIED HEALTH STAFF

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<thead>
<tr>
<th>Liverpool Cancer Therapy Centre</th>
<th>Macarthur Cancer Therapy Centre</th>
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<tr>
<td><strong>Clinical Psychologist</strong></td>
<td><strong>Dietitian</strong></td>
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<tr>
<td>Gerald Au</td>
<td>Katherine Pronk</td>
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<td>Astrid Przedziecki</td>
<td>Merran Findlay</td>
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<td>Dallas Rae</td>
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<td><strong>Occupational Therapist</strong></td>
<td><strong>Physiotherapist</strong></td>
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<td>Megan Jones</td>
<td>Josephine Tamara</td>
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<td>Monica Vasquez</td>
<td>Jerric Leav</td>
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<tr>
<td><strong>Social Worker</strong></td>
<td><strong>Speech Pathologist</strong></td>
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<tr>
<td>Alison Pryor</td>
<td>Meredith Porter</td>
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<td>Heather Aldis</td>
<td>Katherine Kelly</td>
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<td>Teresa Simpson</td>
<td>Trudy Lynch</td>
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<td>Thomas Law</td>
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<td><strong>Dietitian</strong></td>
<td><strong>Social Worker</strong></td>
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<td>Rebecca Phillips</td>
<td>Jenella Cottle</td>
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<td><strong>Physiotherapist</strong></td>
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<td>Glenda Taylor</td>
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<td>Clare Seidel</td>
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<td>Luisa Stewart</td>
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2005/2006 has seen an enhancement in staffing levels since February 2006. The team now comprises 1.5 FTE Pharmacists with a 1.0 FTE Pharmacy Technician. We welcome Brett Ly to our team. The Pharmacy team work closely with the oncologists, nursing and administrative staff to provide a patient focussed chemotherapy delivery service.

Following on from the chemotherapy prescribing audit undertaken in 2003/2004, we continue to monitor chemotherapy prescribing in our centre in order to detect potential errors before they occur. We continue to participate in the Multi Disciplinary Team meetings discussing patient care, contribute to protocol development, provide drug information to patients and staff and provide patient counselling and drug interaction checks. Also, this year has seen an increase in clinical trials participation and pharmacy involvement in their implementation.

Pharmacy Staff at Macarthur Cancer Therapy Centre

Pirkko Boyd  Brett Ly  Debra Vandine
Senior Oncology Pharmacist  Clinical Pharmacist  Pharmacy Technician

The Cancer Therapy Centre pharmacy has gone through a major amount of transition during 2005-2006. Staff have come and gone and the extent of service has ebbed and flowed. Fariba Khosravan (Oncology Pharmacist) moved on late 2005 to take up family commitments and we had Sugantha Thumbadoo competently step-in in the interim. As of April 2006 we appointed Neil Reynolds who has taken up the post as Senior Oncology/Haematology Pharmacist. With David House as the ever-trusty technician and the new addition of Vivien Tran as an Oncology Pharmacist in training. We have an all new team that are committed and clinically astute.

Pharmacy has since seen a flurry of activity and training. Pharmacy has returned to attendance of clinical ward rounds for both Oncology and Haematology. Support for research activities has been positive and we are currently involved in thirteen trials with near to another fifteen being considered. These value added services have been re-introduced with the consistent solid performance of our core manufacturing and dispensing function.

We continue to ensure that clinical review occurs for cytotoxic medication orders and the pharmacy maintains it’s advisory role for nursing, doctors and patients alike. Quality assurance and GPM is maintained in production and service delivery is timely. We are reviewing and considering improvements to patient care and education and have a commitment to clinical service improvement.

Pharmacy Staff at Liverpool Cancer Therapy Centre

Neil Reynolds  Vivien Tran  David House
Senior Oncology/Haematology Pharmacist  Clinical Pharmacist  Pharmacy Technician
The past year in nursing has been a little disjointed with quite a number of senior staff either resigning their post or being seconded to other departments. This has created inconsistencies in learning and development of new staff members, with many relying on a 'search and find' method to determine their roles. This is currently being addressed with improved communications between departments.

Despite these ups and downs many nurses have still managed to gain accreditation with the following: cannulation and Venepuncture, picc line and port access/care and chemo delivery.

- Betty Silaphet has gained her accreditation in picc line insertion and has been very busy since.
- Aura Serrano has been working with Anne-Marie Griffin in breast care co-ordination and earlier this year commenced as the breast clinic nurse. Aura is also currently doing her Oncology nursing course.
- Sally Carey has commenced her Masters in Advanced Nursing which she may find a little more difficult with a new-born.
- Carol Doherty has been appointed as the clinic nurse and is undergoing further education/courses to increase her skill and role.

The refurbishment of Grimson Ground East ward finally commenced and the ward moved smoothly over to it's temporary home in Grimson Ground West. Everyone adapted well with minimal storage and four extra beds. The Apheresis Unit also learned to adapt to it's new environment in the outpatient department.

Two nurses from the ward are undertaking the Graduate Certificate in Oncology Nursing and one nurse is approaching completion of her Masters. There have been a high number of undergraduate students coming through the unit and staff are working hard to engender a love of oncology and haematology in them.

Nurses had three poster presentations accepted at Clinical Oncological Society of Australia and two at Haematology Society of Australia and New Zealand (HSANZ) this year with Moira Stephens being an invited speaker at HSANZ last October. Moira also saw published this year her four chapters in two books and has been commissioned to write a journal article.

We have enjoyed the addition of an increased number of Care Coordinator positions this year bringing the total to five with Doris Dadic and Patricia Ryan commencing to join Sharon Casser, Luci Dall'Armi and Anne-Marie Griffin.

Liverpool is represented by nurses on a number of GMTT and Cancer Institute reference group and committees.
# STAFF AT LIVERPOOL CANCER THERAPY CENTRE

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
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<tbody>
<tr>
<td>Clinical Nurse Consultant</td>
<td>Moira Stephens</td>
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<td>Clinical Nurse Educators</td>
<td>Karl Jobburn</td>
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<td>Lenore Knapman</td>
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<tr>
<td>Clinical Nurse Specialist</td>
<td>Sally Carey</td>
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<tr>
<td>Acting Nurse Unit Managers</td>
<td>Carol Ryman</td>
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<td></td>
<td>Phillip Weardon</td>
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<tr>
<td>Registered Nurses</td>
<td>Doris Dadic</td>
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<td>Rhonda Eke</td>
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<td>Kelly Follers</td>
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<td>Monica Fowler</td>
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<td>Meghann Lang</td>
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<td>Danielle Martens</td>
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<td>Karen Nicholas</td>
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<td>Agnieszka Nowak</td>
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<td>Mayra Reyes</td>
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<td>Victoria Rutten</td>
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<td>Aura Serrano</td>
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<td>Betty Silaphet</td>
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<td>Enrolled Nurses</td>
<td>Amanda Baldwin</td>
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<td>Carol Doherty</td>
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<td>Michael Estepa</td>
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<td>Yvette Furney</td>
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<td>Christine Robinson</td>
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# GRIMSON GROUND EAST STAFF AT LIVERPOOL HOSPITAL

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<td>Margaret Wilkes</td>
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30
The past year has been a time of further change and development within our nursing team. Our staffing levels have fluctuated periodically due to engagements, weddings, pregnancies and deliveries.

**Achievements:**

- Development and implementation of medical oncology and radiation oncology nursing checklists has resulted in a more streamlined “patient process” from the patient’s initial visit to the centre to follow-up post completion of treatment.
- Macarthur Cancer Therapy Centre nursing staff has actively participated in providing input into the development and review of Lantis care plans, assessment/toxicity fields and the Lantis generated Chemotherapy Chart.
- An Implanted vascular Access Device eg Portacath training program is being developed in conjunction with the Campbelltown Hospital Emergency Department. This will facilitate Emergency Department staff being trained and accredited in the management of Implanted vascular Access Devices and therefore they will be able to provide the best quality care to cancer patients who have such devices when they attend the emergency department.
- Patient information sheets have been developed and implemented by the nursing staff that provide standardised information to the patients in regards to the treatment they are being provided.
- Further development of the role of the nurse in clinic has resulted in both a medical and nursing continuum of care to achieve the best quality of care for the patient and their carers.
- Nursing in-services have been developed in a multidisciplinary format in which presenters from the medical, nursing, and allied health provide lectures from their perspective to the nursing staff.
- All of the nursing staff as part of the quality process have been reaccredited and obtained documented competency in cytotoxic drug administration and the management of central venous access devices.
- Annual chemotherapy reaccreditation has been commenced, this quality activity will ensure that the nursing staff who administer cytotoxic agents are aware of and practicing best practice in regards to the administration of cytotoxic drugs and also have demonstrated and documented competency.
- Nursing education.
- Jodie Stewart completed a College of Nursing Breast Cancer course in December 2005.
- In July 2006 Karl Jobburn joined our team as our long awaited Clinical Nurse Educator.

**Nursing Unit Manager**
Denise Burns

**Registered Nurses**
Carly Allen
Diana Aston
Elspeth Carson
Linda Craig (*part-time*)
Gail Dwyer (*part-time*)
Kelly Jackson
Jennifer Mitchell (*part-time*)
Jodie Stewart (*part-time*)

**Clinical Nurse Educator**
Karl Jobburn

**Enrolled Nurse**
Mary Causer
MULTIDISCIPLINARY CARE

The services within the Cancer Therapy Centre have also been integral to the development of multidisciplinary care for most cancers presenting within the area. Most clinicians involved with the various tumour sites have developed multidisciplinary teams and treatment protocols to better standardise care and to allow forum for discussion and debate about the latest innovations in cancer care. Each multidisciplinary group has been successful in achieving most of their aims and present short summaries below of their major achievements to date. Plans are already in place to improve most services and integrate our multi-disciplinary model with the plans of the NSW Cancer Institute.

Breast Cancer

Anne-Marie Griffin
Breast Cancer Care Co-ordinator

Breast cancer remains the most common cancer in women. Over the past 10 years our department has managed approximately 2,500 new cases of breast cancer. Our centre provides consultative services at Liverpool, Campbelltown, Bankstown and Bowral. Our multidisciplinary team meetings provide video-links between both sites. The unit has a full-time care coordinator, which has helped improve the cancer journey of our patients.

We are active in recruiting patients to clinical trials, both national and international, exploring the role of new drugs as well as different surgical and radiotherapy techniques. We are currently in the process of analysing the large database of patients treated in our centre. Our plan is to record this valuable information into an electronic format that will allow outcomes to be measured and foster ongoing research within the centre. This initiative will also allow us to perform quality control audits, which in turn, will allow us to better document the high standard of care that our patients deserve.

Colorectal Cancer

Dr Andrew Kneebone
Radiation Oncologist

The South Western Sydney Colorectal Tumour group continues to progress though there are always ongoing challenges. The cornerstone of it's success continues to be a prospective database of all colorectal patients operated in Sydney South West Hospitals from 1997 onwards. More than 2,200 patients are registered onto the database documenting excellent outcomes for our patients compared to national averages. The database is now managed by the new area registry though the resources of the new registry are very stretched.

High quality research is now being produced from this database with multiple publications looking at overall outcomes, the impact of emergency versus elective surgery, radiotherapy and chemotherapy utilisation and other factors impacting on outcome such as radial margins, ethnicity, surgeon experience and female menopause.

The group has the services of a colorectal care co-ordinator (Sharon Cassar) and holds regular fortnightly multidisciplinary meetings at Liverpool Hospital and has also involved itself with the regular Bankstown oncology meeting which has a high colorectal load. Since the formation of the new area health service, there has been excellent good will and collaboration with the colorectal units at Concord and RPAH. The western zone is receiving due recognition for it’s experience in
advanced surgical techniques such as laparoscopic colorectal surgery and Trans Endoscopic Micro Surgery (TEMS).

Significant challenges however still exist including the lack of stomal therapy resources in the Western Zone, the lack of funding for a colorectal surgical unit including a surgical fellow, no genetic counselling services for high risk colorectal families and the lack of funding to support collection of colorectal specific data items. Further work also needs to be performed in developing site specific protocols and promoting educational colorectal programmes.

**Urology Oncology Program SWS**

Kate Tynan
Project Officer

The Urology Oncology Program SWS covers prostate, bladder, renal and testicular cancers and has a dedicated multidisciplinary group working to improve patient outcomes. The team leader is Dr Lawrie Hayden who is to also be congratulated as the current National President of the Urological Society of Australasia. Two team additions this year are a clinical psychologist with a special interest in prostate cancer psychosocial outcomes and a data manager with the Area Clinical Cancer Registry who will track individual patient treatment and outcomes. Some notable achievements this year are:

- A report on "Outcome of conformal radiotherapy program for prostate cancer in South Western Sydney" written by Dr Andrew Kneebone. This work was undertaken to evaluate the safety of radiotherapy with a view to increasing the radiation dose; 416 patients were included in the study from 1999 to 2006.
- Implementation of the ‘fiducial marker’ program. A treatment issue for prostate cancer radiotherapy is that the prostate is not a fixed structure and can move from day to day. The fiducial marker program involves placing three gold seeds into the prostate so that at each treatment the radiation therapists can easily visualise the prostate and adjust the fields as necessary. This minimises radiation to adjacent organs such as the bladder and bowel to reduce side effects.
- The patient support group is growing and continues to meet at 6.00pm on the second Tuesday of the month at the Thomas and Rachel Moore Education Centre. A variety of speakers have presented to assist patients with education and support needs. We will be working with the Prostate Cancer Foundation Australia to develop and pilot evidence-based media resources to assist the groups and encourage a uniform syllabus appropriate to the patients various treatment stages.
- Treating cancer is the major proportion of the urology workload. Over the next year cancer services will work with the SSW urologists to develop a service plan for urology that will include urology oncology. A senior nurse will be seconded to assist.
- Telephone follow-up for prostate cancer patients. Patients who have been treated in the centre are commonly followed up for five or so years with regular PSA blood tests and specialist doctors appointments. Patients are now offered the choice of a ‘face to face’ consultation or a telephone consultation for follow-up. The patients electronic medical record can be updated at the clinicians desk enabling consultation with many more patients than possible in the actual clinic setting. The telephone follow-up will be extended to a pilot nurse model.
- An important state-wide initiative is the establishment of the Urological Oncology Program (UOP) NSW. Through working parties, the 67 strong membership consisting of radiation and medical oncologists, pathologists, surgeons and scientists, all with a specialist interest in urological cancers have given their time to improve patient treatment and outcomes. Associate Professor Martin Berry is the Deputy Chair and Dr Andrew Kneebone is Chair of the Education and Radiotherapy Protocol working parties.
Head and Neck Cancer

The Head and Neck Tumour Program has undergone several changes in 2005-2006. Dr Jonathan Clark is an experienced head and neck surgeon and has commenced practice at Liverpool, following return from Toronto, Canada. Luci Dall'Armi has commenced as the Head and Neck Care Coordinator and is now an integral member of the head and neck team.

A multidisciplinary tumour board discussion meeting is held every two weeks and video-linked between Liverpool and Macarthur. A separate clinical session is held weekly at Liverpool where patients with biopsy proven malignancy of the head and neck are assessed.

Patients with head and neck cancer can now be treated at either Liverpool or Macarthur campuses depending on their preference. The Campbelltown community generously donated funds through the 24 hour Relay for Life to enable purchase of sophisticated nasendoscopy equipment for the assessment of patients with head and neck cancer. Progress involving many participants has been made towards implementing a more technically advanced radiation therapy treatment - intensity modulated radiation therapy (IMRT).

Lung Cancer

Doris Dadic
Care Co-ordinator

The multidisciplinary lung cancer group meet weekly with video-conferencing between Liverpool and Campbelltown Hospitals. The group consists of respiratory physicians, cardiothoracic surgeons, radiation and medical oncologists, palliative care physicians, radiologists, nuclear medicine physicians, registrars, allied health care workers and the care coordinator.

Services for lung cancer patients include the introduction of image co-registration of PET and CT imaging, cardiothoracic surgery, respiratory medicine, radiotherapy (including endobronchial brachytherapy), chemotherapy, allied health and palliative care.

The group are active in lung cancer research and education, with the radiation and medical oncologists enrolling a large number of patients into clinical trials that test new drugs and radiotherapy treatments. In regards to education, the General Practitioner seminars in lung cancer and patient education and support sessions continue to be run regularly to ensure optimal care of patients with lung cancer and their carers.

Haematological Malignancies

Patricia Ryan
Care Co-ordinator

Multi-disciplinary care is an integral part of treatment planning in haematology. The Haematology tumour group is lead by Dr John Gallo, and Patricia Ryan has been instrumental in streamlining care planning and documentation, and patient education since she joined the group in the role of Care Coordinator in November 2005. The group meet weekly at Liverpool Hospital to discuss patient care and treatment planning for patients from across SSWAHS WZ. The group comprises of haematologists, radiation oncologists, nuclear medicine, radiologist, registrars, social worker, specialist nursing staff.

The aim of the Haematology Tumour group is to provide a comprehensive service for people diagnosed with a haematological malignancy. The team endeavours not only to provide patients
of the area with timely diagnosis, treatment and ongoing management, but also to deliver psychosocial assessment and support. The group has the services of a full-time Care Coordinator, Patricia Ryan. Patricia works with the Haematology team to help patients travel as smoothly as possible through the hospital and community health system and along their individual treatment pathways. An exciting addition to our team in September is Tom Lawson, Data Manager, and this will facilitate our active involvement in clinical trails.

A haematology patient education group continues to be run monthly, despite the temporary absence of our social worker, Heather Aldis. Our Clinical Nurse Consultant, Moira Stephens, speaks at the Myeloma Foundation support group held in Liverpool.

Outside of the department, there is strong representation by various clinicians on state and national initiatives including the Cancer Institute Bone Marrow Transplant (BMT) and Haematology reference groups, NSWOG Haematology group, the Cancer Institute Patient Education working party and BMT Network committees and working parties. We have established area BMT meetings video-linked monthly with Royal Prince Alfred and Concord Hospitals and are working towards joint protocols and care pathways.

An exciting development this year has been Haematology’s involvement in Lantis and work is underway to have all haematology protocols available on Lantis.

**Gastro-intestinal Cancer**

There are both upper and lower gastro-intestinal tumour groups, both with regular multi-disciplinary meetings to discuss patient care. Upper gastro-intestinal meetings are held every Monday. Members are surgeons, surgical teams, oncologists, radiology, nuclear medicine, pathology, gastroenterologist and surgical dietitian.

**Neuro-Oncology Multi Disciplinary Team**

The Western Zone Neuro-Oncology Multi Disciplinary Team (MDT) continues to meet fortnightly (30 minutes educational presentation, 30 minutes discussion of all new and active patients) in addition to weekly radiology meetings and monthly pathology meetings. The Western Zone and Eastern Zone Neuro-Oncology teams had the first combined meeting in March, and have decided to meet annually. The Brain Tumour support group continues to run, but meetings have been reduced from fortnightly to monthly due to staff shortages. The meetings have had an average attendance between 6 and 12 people with higher numbers attending social outings. In October 2005 Dr Elizabeth Hovey became the Tumour Stream Leader for Neuro-Oncology for SSWAHS Western Zone.

Members of the MDT are actively participating in the NSW Neuro-Oncology group, with Associate Professor Michael Barton appointed as Chairperson and Dr Elizabeth Hovey appointed as Secretary. Associate Professor Barton and Dr Elizabeth Hovey have been appointed to the National Brain Tumour Guidelines working party as Chair and Project Officer respectively. Kylie Wright, Neurosurgical Clinical Nursing Consultant, and Teresa Simpson, Oncology Social Worker, have been awarded a grant of $80,000 from the Cancer Institute of NSW to pilot a Behavioural Consultancy Model to treat the cognitive and behavioural sequelae of Brain Tumour.
Liverpool/Macarthur Cancer Services finished the year with a favourable balance of $1.8m. The service was awarded new and enhancement funding of $1.4m through the government’s “2004 - 2008 strategic Way Forward” initiative for 2005/2006, as well as cancer institute grants awarded of up to $2.1m. The average staffing over the year was 175 FTE. Contracts for equipment maintenance is undergoing review, delaying some payments until next financial year. Revenue reporting is no longer available to the department.

The financial boost to the service has been reflected in increased activity. Increases in all services are expected to continue to grow into 2006/07.
### Staff vs Patients

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FUND RAISING AND DONATIONS

Fundraising and donations fill funding needs not supported by government grants and insurance reimbursement. The following are a few examples of how this support has helped:

- Research (Clinical Trial) Fund – support ongoing research into prevention, detection, treatment and supportive care for patients with cancer.
- Education Fund – sponsoring cancer staff to attend specialised training; funding cancer-training courses offered at Liverpool.
- Patient Care Fund – purchase of equipment and resources for patient and visitors comfort on the ward and CTC.

Fundraising activities for 2005 to 2006 period include: 10 years Anniversary Dinner, Relay for Life, morning teas and raffles.

These organisations and people have generously donated to the Liverpool Cancer Therapy Centre:

<table>
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<th>Clinical Trials Donations</th>
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<tr>
<td>Amgen Australia Pty Limited Beryl Nelson, Yvonne Davis and Betty Nelson</td>
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<td>Crimson Ground East Fundraising Donations</td>
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<td>A J Woods Celebration Royal Arch Chapter No 81</td>
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<td>All Saints Catholic Girls College Macquarie Bank Foundation</td>
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</table>
These organisations and people have generously donated to the Macarthur Cancer Therapy Centre:

Thelma Betts
Maureen Booker
Doreen Bouverie
Bowral Womens Bowling Club
Trudi Caldwell
Camden Golf Club
N and G Carter
Linda Chew
G and LCTC Chew

Joanne Chew
Anne Maree Cooke
Lyn Crow
Tracey Freeman
Barbara Gough
Leisa Henderson
Nicole Jackson
Macarthur Cancer Support Group
Suzanne Marks

Jean Mills
Helen O’Toole
Our Lady Help of Christians
Pamela Randall
Trevor Simpson
Elizabeth Sinclair
G and B Tetley
Geoff Thomas
J and B White

Ten years of achievement were celebrated on 19 August 2005. 300 people attended including Minister Frank Sartor OA, staff sponsors and the community to support and raise awareness of this worthwhile cause. The result of the fundraising activities was $33,497.00. Congratulations to Sandy Avery and her organising committee for an action packed evening.

Pictured: Dr Teresa Anderson, Dr Mark Sheridan
A/Professor Martin Berry and Dr Mary Berry

Pictured: Sandy Avery and Dr Eugene Moylan

Professor James Bishop and Professor Chris O’Brien

A/Professor Geoff Delaney, Dr Elizabeth Hovey, A/Professor Michael Barton and Minister Frank Sartor OA

The 10 Year Anniversary Fundraising Dinner hosted on 19 August 2005 at the Liverpool Macquarie Function Centre was a huge success to raise funds for the Patient Care Trust Fund. The entertainment included: Crystal Clear (MC), Ricky Daniele (a repertoire of favourite melodies), Rick Sassin (Greenway Rotary, calling the auction) and the “Infamous Band” who provided tunes to dance to. Our talented Medical staff also entertained the audience with an Elvis impersonation by Associate Professor Delaney and a blues-brothers guitar duet by Associate Professor Berry and Dr Eek. Unique fishbowl table centres by Creative Aquariums and the cake donated by Cake Central were part of the theme “Life, Growth, Survival” – a theme that represented 10 years of growth, giving life to so many survivors. Several patients donated their time and comments towards a ‘testimonial video’ which we really appreciate.

The momentum of the fundraiser has left us with so many donations that we will be running many more raffles this year. The Liverpool Greenway rotary also donated a café bar for our patients in the waiting area.
The Macarthur Cancer Therapy Centre (MCTC) held its 2nd Open Day on 24 September 2005. 80 people attended and listened to lectures on cancer prevention, treatment and available services. There were guided tours of the centre and Calmessence, NSW Cancer Council, Quota Club, Rotary and Zonta set up stalls to help inform the community about their services.

On the same day, Federal Health Minister Tony Abbott and Federal MP Pat Farmer ran 100km from Mona Vale to MCTC to attend Open Day and raise funds for the inaugural 24 Hour Walk Against Cancer Macarthur. The walk was held at the Leumeah Sports Ground on the weekend of 15-16 October. Patients, families and staff from the MCTC and Camden Palliative Care Units attended this 24 hour fundraiser for these two units.

Together the walk and the Open Day raised $150,000.00.

Right: Local Federal MP Pat Farmer and Federal Health Minister Tony Abbott.

On the weekend of 15-16 October 2005, the inaugural Liverpool Relay for Life was held to raise funds for the Cancer Council NSW. Four teams from Liverpool Hospital comprising of doctors, nurses, administration staff, physicists and volunteers were joined by family members for the event which commenced at 10.00am, Saturday. After the official speeches, the ribbon was cut and the relay commenced with Cancer Carers and Survivors doing the first few laps.

Throughout the day team members walked (or ran) around Woodward Park. Entertainment was provided by various organisations including dancing by the Liverpool Line Dancers and cultural dancing by the East Timorese community. The Narellan Congregational Church Band also performed.

The ladies of the Italian community provided a pasta making demonstration as well as cooking mountains of pasta to feed weary walkers. The Liverpool Lions Club also provided a tasty barbecue.

At 7.00pm everybody gathered together and a memorial service was held where we remembered those who had lost their battle with cancer. During the minute silence, candles were lit around the track and the word “HOPE” was illuminated on the small hill above the track. Everybody joined in for a lap of remembrance before the relay commenced.

During the night the temperature dropped but many braved the cold and stayed on. The relay concluded at 9.30am on Sunday morning with the drawing of the various raffles. A final lap around the field was walked by everybody holding hands.

The 23 groups raised $25,000 for the Cancer Council NSW. Special thanks go to the organising committee which included Tania Luxford, Lenore Knapman and Carol Doherty from Liverpool Hospital. It was a job well done and set the standard for the coming years.

Pictures: The ribbon is cut and the relay commences, candles lit with the word “HOPE” and volunteers Carol Keogh, Elaine Gregory and Vicky McCarthy.
On Friday, 2 December 2005, an opening ceremony was held to introduce a new Café Bar to the Radiation Therapy waiting area, Liverpool Cancer Therapy Centre. The café bar was kindly donated by Rotary Greenway and Rick Sassin was there to represent the organisation and cut the ribbon. The café bar will help to improve and make the surroundings for the patients more comfortable.

Sandra Avery visited the All Saints Catholic College Senior College on Thursday, 24 November 2005, and received a cheque for $3,100.00 from Stephen for the Liverpool Cancer Therapy Centre.

VOLUNTEERS

Liverpool and Macarthur Cancer Therapy Centres are fortunate to have a dedicated group of volunteers who give up their time to be a vital team member to the success of the Centres. They make the patients more comfortable during their visit and are tireless in their efforts to fundraising: raffles, cakes stalls and morning teas.

Volunteers
Liverpool Cancer Therapy Centre
Joan Blunt
Fawzia Daahd
Enid (Dutch) Day
Elaine Gregory
Carol Keogh
Elizabeth Lowe

Joy Maloney
Vicky McCarthy
Val Spruce
Apii Tangi
Elizabeth Van Ommen

Volunteers
Macarthur Cancer Therapy Centre
Beatrice Attwell
Elvira Bertolissio
Cath Bourke
Kathleen Forshaw
Keith Glover

Dorothy Kwasniak
Kerry Lowe
Denise McCartney
Margaret Southwell
Carrie-Anne Warn

A Volunteer Morning Tea was held Friday, 2 December 2005, at the Liverpool Cancer Therapy Centre to honour the Volunteers. AProf Martin Berry acknowledged them for their time and dedication towards the patients and presented them with a Certificate of Appreciation.

Picture: top row: Teresa Simpson (Social Worker), Elizabeth Lowe, Carol Keogh, Elaine Gregory, Val Spruce, Enid (Dutch) Day, AProf Martin Berry (Director), Sandy Avery (Business Manager), seated: Vicky McCarthy, Joan Blunt and Joy Maloney.
The Biggest Morning Tea was held 9.30am – 12.00pm, Thursday, 25 May 2006, Ground Foyer, Liverpool Cancer Therapy Centre. Lots of home made cakes and slices were baked by the staff and volunteers and enjoyed with a cup of tea or coffee for a gold coin donation. Michael Norris provided entertainment for the patients, staff and volunteers. Over $900.00 was raised for the NSW Cancer Council.

Wig Library

The Wig Library is a service that helps to retain patient self-esteem and relies on donations to maintain the service. This is one of the most appreciated services provided to chemotherapy patients who lose their hair as a result of their treatment. The volunteers see around 500 patients a year, matching them to wigs and ensuring there is a variety of quality wigs available.

VOLUNTEERS

Fiona Gould Victoria Nasso

Look Good Feel Better

The ‘Look Good Feel Better’ program is dedicated to helping women, men and teenagers faced cancer with confidence and boost their self-esteem. Experienced beauty industry volunteers teach patients beauty techniques including skincare, makeup application and creative ways with scarves, turbans, hats and wigs. All these help to minimise the appearance-related side effects from some treatments and explain some of the changes that occur during treatment.

VOLUNTEERS

Joanne Meehan, NSW Manager
Kim Beard     Kim Cawthone     Carolyn Georgensen
Fay Hocking   Neta Holyoake
Maggie Moore  Norah Raslan
Jo Tappendan   Maureen Thackeray
Jan Wright
ACHIEVEMENTS

Academic Publications


Delaney GP, Shafiq J, Jalaludin B, Barton MB. The development of a new basic treatment equivalent model (BTE) to assess linear accelerator throughput. Clinical Oncology, August 2005; 17: 311-318


Hill RF, Holloway LC, Baldock C. A dosimetric evaluation of water equivalent phantoms for kilovoltage x-ray beams. Physics in Medicine and Biology, November 2005; 50 (21): 331-344


Barton M, Frommer MS, Shafiq J. The role of radiotherapy in cancer control in low and middle-income countries. Lancet Oncology; 7(7): 584-595, 2006


Book Chapters

Barton M, Fox R. Specific issues in the palliative management of lymphomas. Editor: Fox R, Ellis D. Book Title: Clinical Practice Guidelines for the Diagnosis and management of Lymphoma Australian Cancer Network, Sydney, December 2005


Delaney GP, French B. Decision-making in lung cancer. Editor: KN Syrigos, C Nutting, C Roussos. Publisher: Springer-Verlag, Book Title: Tumours of the Chest: Biology, Diagnosis and Management, 2006, Denmark


Quinn B, Stephens M. Bone Marrow Transplant. Editor: Kearney N & Richardson A. Publisher: Churchill Livingstone. Book Title: Nursing Patients with Cancer: Principles and Practice, J

Book Reviews


Posters/Conference Proceedings


Vinod SK, Kaplan A. Growth of non-small cell lung cancer from diagnosis to radiotherapy treatment. 11th World Conference on Lung Cancer, Barcelona, Spain, July 2005

Vinod SK. Audit of data collection from lung cancer multidisciplinary team (MDT) in South Western Sydney Area Health Service. 11th World Conference on Lung Cancer, Barcelona, Spain, July 2005

Vinod SK, O’Connell D, King D, Armstrong B. Patterns of care for lung cancer in New South Wales, Australia. Preliminary results, 11th World Conference on Lung Cancer, Barcelona, Spain, July 2005

Graham P, Vinod SK, Hui A. Outcomes from a patterns of care study and a high dose concurrent end-phase boost accelerated radiotherapy protocol for treatment of state 1 non-small cell lung cancer. 11th World Conference on Lung Cancer, Barcelona, Spain, July 2005

Estall V, Vinod SK, Barton MB. Patterns of radiotherapy re-treatment in lung cancer patients: a retrospective longitudinal study. 11th World Conference on Lung Cancer, Barcelona, Spain, July 2005

Berry MP, Tynan K, Kricker W. Facts or fiction? Monitoring compliance to cancer services standards. Canadian College of Health Services Executives, 6th International Conference on the Scientific Basis of Health Services, Montreal Canada, September 2005

Berry MP, Harris P, Burns J. The radiation oncology postgraduate curriculum development project of the Royal Australian and New Zealand College of Radiologists. Canadian Association of Radiation Oncology (CARO) 2005 Annual Meeting, Victoria Canada, September 2005

Thode RJ, Barton MB. Successful pilot of an interactive distance learning course in Radiation Oncology. Public Health Association of Australia Inc Annual Conference, Perth, September 2005

Vincent D, Arnold A, Delaney GP. Implementation of an electronic cancer record. Annual General and Scientific Meeting of the Royal Australian and New Zealand College of Radiologists, Sydney, Australia, October 2005

Berry MP, Tynan K, Kneebone A, Wilcox N, Sayalone P, Kricker W. Developing a Team-Based Service Model for Prostate Cancer. The Royal Australian and New Zealand College of Radiologists 56th Annual Scientific Meeting, Sydney, Australia, October 2005

Arnold A, Cassapi L, Delaney GP. Successful Design and Implementation of a comprehensive Radiation Oncology Incident Reporting System. The Royal Australian and New Zealand College of Radiologists 56th Annual Scientific Meeting, Sydney, Australia, October 2005


Cassapi L, Arnold A, Barton MB, Shafiq J. We can see clearly now – Implementation of a comprehensive Radiation Therapy Imaging Policy in South Western Sydney Cancer Services. The Royal Australian and New Zealand College of Radiologists 56th Annual Scientific Meeting, Sydney, Australia, October 2005

EPI2K6 9th International Meeting of Electronic Portal Imaging, Melbourne, April 2006

AIR 3rd Annual Scientific Meeting of Medical Imaging & Radiation Therapy, Hobart, April 2006

Pavlakis N, Mccowatt S, Lewis C, Marx G, Abell F, Della-Fiorentina S, Boyce A, Briggs P, Horwood K, Karapetis C. Randomized Phase II study of first-line docetaxel (D)/gemcitabine (G) doublet chemotherapy versus fixed duration (3 cycles) sequential single agent chemotherapy (D then G) in Stage IIIIB/IV non-small cell lung cancer (NSCLC) – Final Results. A study by the NSW and Australian Lung Cancer Trial Groups. World Lung Cancer Conference, Barcelona, Spain, 3 August 2005

Brooks A, Hayden L, Berry MP. NSW Genitourinary Oncology Group: Implementing a multidisciplinary approach to the genitourinary cancers. The Urological Society of Australasia, November 2005

Stephens M. Post Transplant. The lived experience: A phenomenological study. 32nd Annual Scientific Meeting on the Clinical Oncology Society of Australia (COSA), Brisbane, November 2005

Vincent D, Meighan S. Lantis - The Electronic Medical Record. 32nd Annual Scientific Meeting on the Clinical Oncology Society of Australia (COSA), Brisbane, November 2005

Shafiq J, Jacob S, Shipman F, Manning D. Overview of ongoing professional cancer education in NSW. Cancer Education Survey. 32nd Annual Scientific Meeting on the Clinical Oncology Society of Australia (COSA), Brisbane, November 2005

Davis AJ, Lewis C, Moylan EJ, Panis F, Ackland S. A phase II multicenter study of combination chemotherapy with capcitabine (C) and intravenous (iv) vinorelbine (v) in patients (pts) with pretreated metastatic breast cancer (MBC). Clinical Oncology Society of Australia (COSA), Brisbane, 1 November 2005

Patel V. Role of QA program in radiotherapy, 27th National Annual Conference of Association of Radiation Oncologists of India, Ahmedabad, India, December 2005


Ng W, Gabriel G, Moylan E. Predictive factors for the underutilization of adjuvant chemotherapy in colon cancer in South Western Sydney. ASCO Annual Meeting, Atlanta, June 2006

Griffin A-M, Pryor A, McDonald A. Aim - To have consumer input into quality improvement and service development within Breast Cancer Services. Formalising consumer feedback after initiating MDT and Care Coordination in Breast Cancer Services, COSA Brisbane, 2005

Frommer MS, Heinke M, Barton MB. The credentialing of cancer clinicians in Australia. Australian Cancer Network, Sydney, August 2005

Barton MB, Frommer MS, Shafiq J. A study of the role of radiotherapy in cancer control in low and middle - income countries. Institute of Medicine, Sydney, September 2005


Barton MB, Gabriel G Frommer MS, Holt PE, Madronio C. Surgical procedures for melanoma in
Delaney G. The role of radiotherapy in the management of DCIS. Auckland, November 2005

Delaney G. The complexities of radiotherapy planning in breast cancer. Auckland, November 2005

Berry MP. The NSW Radiation Oncology Clinical Trials Forum, Sydney, November 2005

Berry MP. Prostate Cancer Foundation Arabic Awareness Campaign (General Practitioners Forum), The Lebanese Community Council of NSW and Prostate Cancer Foundation of Australia, Sydney 23 November 2005

Davis AJ, Lewis C, Moylan E, Panis F, Ackland S. A phase II multicenter study of combination chemotherapy with capectabine (C) and intravenous (iv) vinorelbine (V) in patients (pts) with pretreated metastatic breast cancer (MBC). COSA, Brisbane, November 2005

Patel, V. Prevention of accidents in radiotherapy. 27th National Annual Conference of Association of Radiation Oncologists of India, Ahmedabad, India, December 2005

Delaney G. Genetics and breast cancer in the Radiation Oncology Clinic. Sydney, February 2006

Berry MP. Poster “Are Urological Cancer Patients Receiving Care in Accordance with Good Practice?” 59th Annual Scientific Meeting Urological Society of Australasia, Brisbane, March 2006


Poxon V. Setting up a cancer registry down under. Arlington, Virginia, May 2006


Beatson Oncology Centre, Western Infirmary, Glasgow, May 2006


Delaney G. The difficulties of breast radiotherapy planning and virtual simulation. Cookridge Hospital, Leeds, May 2006

Delaney G. The implementation of an electronic oncology record. Beatson Oncology Centre, Western Infirmary, Glasgow, May 2006
Abstracts

Cassapi L, Arnold A, Barton MB, Shafiq J. We can see clearly now - the implementation of a comprehensive radiation therapy imaging policy in South West Sydney Cancer Service (SWSCS). Annual General and Scientific meeting of the Royal Australian and New Zealand College of Radiologists, October 2005

Asghari R, Hovey E, Moylan E, Delaney G, Barton M. Estimation of an optimal chemotherapy utilisation rate in newly-diagnosed rectal cancer. Liverpool Hospital Cancer Therapy Centre, Collaboration for Cancer Outcomes Research and Evaluation (CCORE), 32nd Annual Scientific Meeting for the Clinical Oncological Society of Australia (COSA), 2006

Goldrick AJ, Olivotto IA, Alexander C, Speers CH, Barnett J, Allan S, Truong PT. Anemia is a common and neglected complication of adjuvant chemotherapy for early-stage breast cancer. 28th Annual San Antonio Breast Cancer Symposium, Texas, December 2005

Fuller M, Shafiq J, Berry MP, Field N, Sampson D, Fleet M, Barton MB, Miles S, Gabriel G. Improving patient care with the use of an interactive touchscreen computer. AIR 3rd Annual Scientific Meeting of Medical Imaging & Radiation Therapy, Hobart, April 2006

Awards and Examination Results

Runner up – SSWAHS Quality Week 2006 Quality Improvement Activity Poster Competition
Cassapi L, Arnold A, Barton MB. Shafiq J. We can see clearly now – Implementation of a comprehensive Radiation Therapy Imaging Policy in South Western Sydney Cancer Services

Chris Atkinson Prize at RANZCR, October 2005.
Arnold A, Cassapi L, Delaney GP. Successful Design and Implementation of a comprehensive Radiation Oncology Incident Reporting System

Completed Degrees


Higher Degrees by Research

Thode R – Regional Course Coordinator, Distance Learning, CCORE, Graduate Certificate in Health Economics. Curtin University of Technology, Perth, 2006

Thompson S – Clinical Research Fellow CCORE/CTC, Radiation Oncologist. Enrolled PhD, 2005

Jacob S – Project Officer, CCORE. Enrolled PhD, University of New South Wales, School of Public Health, 2006

Shafiq J - Commenced Advanced Training in Public Health Medicine leading to Fellowship. Australasian Faculty of Public Health Medicine
Education Initiatives

In a centre delivering something as complex as quality cancer care, there are a wide range of educational activities that has occurred in the last year for staff, patients and carers.

The Education Committee, which has been running at Liverpool Cancer Therapy Centre for a number of years now, encompasses Liverpool and Macarthur Cancer Therapy Centres and the Oncology/Haematology ward at Liverpool. It publicises the range of staff education and training occurring in the Cancer Therapy Centres. Most of the cancer services staff are also involved in continuing professional development in their specific profession through external courses, conferences, research and professional reading. The cancer service also offers a significant number of group based education and support opportunities for patients and their family and friends (see list below).

Some of the highlights for 2005 – 2006

Creation of the Cancer Service Education Calender, this lists all the educational opportunities for each month for staff or patients. For example for July 2006 there were 27 sessions covering nursing, radiotherapy, medical, physics and clerical education as well as 6 different sessions for patients and carers. Nursing and Radiation Therapy in particular have in-service training opportunities organised by the Nurse Educators or Radiation Therapist Tutors.

A two day seminar – “Cancer for Non-Specialists”, was conducted by the Liverpool Cancer Clinical Nurse Consultant, for nurses and allied health staff across SSWAHS working in areas that would regularly look after cancer patients but not cancer centres or unit, such as respiratory wards, community nursing, surgical wards etc.

Changes in the curriculum of undergraduate medical program meant that the Cancer Service needed to refocus the oncology clinical experience provided for 3rd and 4th year medical students. A new program has been developed involving a significant number of the medical specialists and registrars and other cancer staff. Thanks also go to the cancer patients who have allowed a student to sit in on their consultation or examination.

The cancer centre liaises with the NSW Cancer Council, Leukemia Foundation and other organisations to ensure a full range of patient information about cancer are available in clinics, treatment areas and the ward.

In terms of patient group programs Liverpool Macarthur Cancer Service runs over ten different programs – aimed at different stages of the cancer journey or different tumour groups. ‘Living with Cancer’ Education Group now runs a couple of times a year at Macarthur. The Lung Cancer Coordinator and Social Workers have developed a Lung Cancer Seminar for patients and carers, run every six months that alternates between Macarthur and Liverpool Cancer Therapy Centres. One of the patient education and intervention groups that was researched, planned and conducted for the first time this year was the ‘Cancer Recovery Program’ which focused on reducing fatigue that often lingers after the completion of cancer treatment. This had ten patients attending for a number of weekly sessions. The exercises were led by the cancer physiotherapist aimed at increasing physical activity endurance, muscle strength and a relaxation practice each week working on mental fatigue. The working group is looking forward to running another program later in the year.
Dealing with Cancer is a five week education program which has been developed for patients who have been diagnosed with cancer and their families. Program runs three times a year: March, July and November. Contact: 9828 5180 to talk to a Social Worker or Clinical Psychologist

Living with Breast Cancer runs as a two day seminar in March, July, August and November. It is an education and support program for women who have been diagnosed with breast cancer. Contact: 9828 5180 to speak to the Social Worker or the Breast Cancer Care Co-ordinator

Gynaecological Cancer Support and Education Group is a monthly meeting for women living with cervical, uterine, endometrial, ovarian, vulval, vaginal or related cancers. Contact: 9828 5688 Care Co-ordinator, 9616 4721 Clinical Nurse Consultant

Haematology Support and Education Group is a monthly meeting for patients and their families living with leukaemia, lymphomas, multiple myeloma, Hodgkins disease, Aplastic Anaemia and related blood and bone marrow disorders. Contact: 9828 5492 or 9828 6716 Social Worker

The Laryngectomee Group meets monthly to provide education and support for patients and their families adjusting after head and neck surgery. Contact: 9828 4766 Speech Pathologist

The Brain Tumour Education and Support Group is run monthly by the Department of Neurosurgery and the Cancer Therapy Centre at Liverpool Hospital to provide education and support for people diagnosed with a brain tumour. Contact: 9828 6716 Social Worker, 9828 4078 Clinical Nurse Consultant

The Prostate Cancer Support and Education Group meets monthly and is for men with prostate cancer. Contact: 0400 302 292 Clinical Psychologist

The Liverpool Lymphoedema Support Group provides information and support to people living with lymphoedema. Seminars are conducted four times a year for ½ day. Contact: 9828 4709 Physiotherapist or 9828 4741 Occupational Therapist

Look Good Feel Better Workshops are ½ day workshops focusing on the changes in physical appearance that can occur due to cancer treatment which can affect your confidence. The workshop covers wigs, turbans and other ways of dealing with hair loss, as well as make-up and skin care. An application form is essential.

The Cancer Fatigue Recover Program is a new initiative which was piloted in May 2006. It is exercise and relaxation programs promoting physical recovery after the completion of cancer treatment. Contact: 9828 5180 Social Worker

Multicultural Groups is run in conjunction with the NSW Cancer Council or SSWAHS Multicultural Health. The Assyrian Breast Cancer Group is a new group which commenced February 2006 at the Fairfield Neighbourhood Centre. Contact: 9828 5180 Social Worker
Quality Projects

The Quality committee’s terms of reference are to document and implement quality activities, review policies and procedures and incident review. The committee also reviews it’s obligations under the Cancer Services and departmental operational plans and quality calendar. The quality committee has indexed and linked all documentation to the minutes on the accessible network drive including 15 quality projects, and 26 reviewed policies this year. Results from audits, process and workflow improvements, competency assessment programs, education programs are published for all staff to view. Corporate initiatives include a review of the new cancer service structure, it’s peak committees, and their terms of reference.

Cancer Services scheduled 14 visits from the EQuIP surveyors, keen to show the results in the quality arena.

The committee administered Patient satisfaction surveys, which have been collated with the help of an external consultant, and the results will be the basis for future planning and improvements for patient care. Next year, the committee will also be collecting and reporting benchmarks on patient activity.

The Visible Management meetings with executive members have continued this year. It provides two-way feedback on operational issues. The Communications meetings are held quarterly, and in conjunction with the Visible Management meetings, these initiatives are designed to establish a culture of communication and feedback from staff, as well as recognition of outstanding performance and updates on the decisions and progress of the cancer services management group.

Many organisations have visited the centres to view for themselves how an efficient service operates, including project developers and planners from our Northern NSW and Queensland colleagues, and some International Visitors from Packer Policy Fellows and Senior Research Association, Population Health and Use of Medicines Unit.
WZ Cancer Services
Operational Plan 2005/06

Liverpool and Wirral Cancer Services will achieve results over the next 12 months in the following priorities:

**Priority 1: CLARITY OF ORGANISATIONAL RELATIONSHIPS**

- 1.1 Form single management group: 100%
- 1.2 Clear Reporting relationships: 56%
- 1.3 Transparent direction: 66%
- 1.4 Structure clear to stakeholders: 64%
- 1.5 Effective administration: 66%

**Priority 2: INTEGRATED SERVICE AND EDUCATION**

- 2.1 Common procedures across centres: 43%
- 2.2 Resource allocation determined by management group: 44%
- 2.3 Combined staff development: 31%
- 2.4 Stakeholders contribute to planning: 30%

**Priority 3: RESEARCH AND QUALITY**

- 3.1 Staff participate in research and innovative practice: 37%
- 3.2 Recognition of innovations: 62%
- 3.3 Benchmark performance: 66%
- 3.4 Methodically report achievements: 65%
- 3.5 Efficient, safe workflows: 75%

**Priority 4: PROFILE OF THE SERVICE**

- 4.1 Appropriate access: 70%
- 4.2 Recruitment and retention of staff: 33%
- 4.3 Community confidence: 29%

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*Score Card:
ID = Initiation
P = Planning/Development
I = Implementation
E = Evidence of progress/through implementation
F = Documentation/Feedback/Workshop/Reporting
M = Maintenance*

14 June 2006