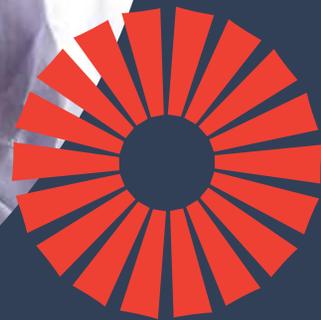


Annual Report
2018–19



BSWRICS

Barwon South Western Regional
Integrated Cancer Service



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Our governance

BSWRICS Governance Group

Member Name	Position & Organisation
Jackie Kelly	Chair, BSWRICS & Chief Executive Officer, Moyne Health Services
A/Prof Philip Campbell	Clinical Director, BSWRICS & Director Cancer Services, Barwon Health
Ros Alexander	Director of Nursing, Portland District Health
Jeff Anderson	Acting Director of Nursing, St. John of God Geelong Hospital
Sandra Anderson	Consumer Representative, Barwon
Jo Bell	Chief Executive Officer, St John of God Warrnambool Hospital
Fred Chatfield	Consumer Representative, South West
Julianne Clift	Director, Nursing Services, South West Healthcare
Dr Lucy Cuddihy	Chair, BSWRICS & Chief Nursing, Midwifery & Regions, Barwon Health
Rohan Fitzgerald	Chief Executive Officer, Western District Health Service
Jo Hall	Senior Program & Service Advisor, Health Services & Performance, Department of Health & Human Services
Dr Terri Hayes	Medical Oncologist, South West Oncology, Warrnambool
Lorraine Hedley	Director of Nursing, Western District Health Service
Matthew Hercus	Executive Director, Strategy, Planning & Partnerships, Barwon Health
Dr Michael Homewood	General Practitioner, Geelong
Leonie Lloyd	Director of Clinical Services, Epworth Geelong
Peter Logan	Acting Director, Nursing Services, South West Healthcare
Mr Greg Mitchell	General Surgeon, Geelong
Dr Graham Pitson	Director of Radiation Oncology, Barwon Health
Sue Riches	Program Manager, BSWRICS
David Walters	Director of Clinical Enterprise & Pharmacy, Colac Area Health
Donna Walter	Director of Nursing, St John of God Geelong Hospital

BSWRICS Clinical Advisory Group

Member Name

A/Prof Philip Campbell

Dr Jen Brotchie

Dr David Brumley

Dr David Campbell

A/Prof Ian Collins

Dr Michael Francis

Dr Ian Grant

Dr Michael Homewood

Mr Cheng Hon Yap

Sue Riches

Dr Angela Yates

Position & Organisation

Chair/Clinical Director, BSWRICS & Director Cancer Services, Barwon Health

Haematologist, South West Regional Cancer Centre

Palliative Care Physician, Geelong Cancer Physicians

Head of Medical Oncology, Barwon Health

Medical Oncologist, South West Oncology, Warrnambool

Radiation Oncologist, Barwon Health

Director Palliative Care, Barwon Health

General Practitioner, Geelong

Cardiothoracic Surgeon, Barwon Health

Program Manager, BSWRICS

Radiation Oncologist, Icon Cancer Centre Warrnambool

Our Partners

Balmoral Bush Nursing Centre

Barwon Health

Bellarine Community Health Ltd

Casterton Memorial Hospital

Colac Area Health

Dartmoor & District Bush Nursing
Centre Inc.

Epworth Geelong

Hesse Rural Health

Heywood Rural Health

Lorne Community Hospital

Moyne Health Services

Otway Health

Portland District Health

South West Healthcare

St John of God Geelong Hospital

St John of God Warrnambool Hospital

Terang & Mortlake Health Service

Timboon & District Healthcare Service

Western District Health Service

Message from the Chair

On behalf of the Barwon South Western Regional Integrated Cancer Service (BSWRICS) I am pleased to present the 2018-19 BSWRICS Annual Report.



This report highlights the range of initiatives undertaken by BSWRICS in partnership with our regional stakeholders over the past 12 months.

A major focus of our work continues to be the local implementation of the nationally-endorsed Optimal Care Pathways (OCPs). Work undertaken with our regional partners across the prostate and oesophagogastric tumour streams resulted in a number of key initiatives being implemented across the pathway. The OCP provides the framework to underpin our service development projects and this will continue to be a focus area in the coming year as we move towards implementing the head and neck, pancreatic and brain pathways.

The Evaluation of Cancer Outcomes Barwon South West (ECOBSW) Clinical Registry now has nine years of complete data and is a valuable resource to support regional planning and clinical quality and safety. We are seeing increased use of the registry data by health services and clinicians whilst also supporting core BSWRICS activities, such as analysis of referral pathways, OCPs and variations in care. A number of manuscripts and presentations have been produced this year and I would encourage all health services and clinicians to make use of this resource.

We have continued to work collaboratively with DHHS, Cancer Strategy and Development around the reconfiguration of the Integrated Cancer Services. A review was identified as part of the 2016-2020 Victorian Cancer Plan to ensure the best possible structure and mechanisms for cancer services are in place. As a Governance Group, the review provided us with an opportunity to consider how we respond to the challenges across our region. As a result, I am pleased to announce the appointment of a dedicated Service Development Project Manager based at South West Regional Cancer Centre in Warrnambool. This role strengthens our regional links and increases our capacity to implement cancer initiatives in the South West. This year also saw the establishment of the BSWRICS Clinical Advisory Group. This group is designed to provide multidisciplinary clinical advice with regards to regional planning and pathways.

BSWRICS is proud of its efforts in delivering a highly successful and informative Geriatric Oncology Forum this year. The event provided an opportunity for health professionals to come together to hear presentations from a number of leaders in the field.

The fourth Victorian Integrated Cancer Services Conference was held in May at the Melbourne Convention and Exhibition Centre. The theme for the conference was 'Partnering to optimise patient outcomes in cancer'. BSWRICS was well represented and supported a number of staff and consumers to attend. It was most pleasing to see a variety of BSWRICS projects represented through oral and poster presentations.

In closing, I would like to recognise the efforts of our outgoing Program Manager, Sue Riches, who provided unwavering leadership and support to the BSWRICS team over the past four years, particularly throughout the reconfiguration phase. I would also like to acknowledge the work of the past chair Dr. Lucy Cuddihy who recently retired from Barwon Health after 14 years as Executive Director of Nursing & Midwifery. Finally I would like to thank the consumers and clinicians who contribute their time and expertise to the activities undertaken by BSWRICS, and acknowledge the contribution of the BSWRICS Governance Group, Clinical Advisory Group and our regional partners. Together, we have been able to make a collective impact on cancer services offered across the Barwon South Western region.

A handwritten signature in black ink, appearing to read 'Jackie Kelly', with a stylized flourish at the end.

Jackie Kelly
BSWRICS Chair

About us

Established in 2005, the Barwon South Western Regional Integrated Cancer Service (BSWRICS) is funded by the Department of Health and Human Services.



BSWRICS works in partnership with health services to promote coordinated planning, system integration and improvement of cancer services across their respective regions.

BSWRICS is auspiced by Barwon Health and undertakes its role by consulting and collaborating with regional health partners and consumers. Our work is governed by a Governance Group comprising key regional stakeholders from the public and private sectors. In 2018 a Clinical Advisory Group was established to provide multidisciplinary clinical advice in relation to BSWRICS initiatives. In addition, a Memorandum of Understanding between health service providers across the Barwon South West region guides the collaborative effort towards cancer service improvement.

Further information is available on our website: www.bswrics.org.au

Our Vision

Improving patient experiences and outcomes by connecting cancer care and driving best practice.

Our Mission

BSWRICS will achieve the vision by:

- Understanding the needs of people affected by cancer;
- Building and supporting collaboration between health professionals, health services and consumers;
- Driving quality improvement in cancer;
- Supporting the development of the cancer workforce;
- Facilitating system-wide engagement in cancer research.

Strategic Priorities 2017-2020



BSWRICS is one of nine population-based Integrated Cancer Services that collectively support the consistent provision of high-quality cancer care for all Victorians.

A Networked Cancer Care System

- Link services involved in cancer care (across all sectors including cancer centres, health services, community organisations) and work with these health services and health professionals to align priorities.
- Strengthen linkages between metropolitan and regional cancer service providers.
- Engage consumers and communities in the work of the ICS.

High Quality Cancer Care

- Implement the Optimal Care Pathways including improvements to multidisciplinary care, supportive care and care coordination.
- Analyse available data and information of relevant clinical evidence/innovation and disseminate it to drive quality improvement.
- Support providers to apply cost-benefit considerations to care/service planning and delivery.
- Continue state-wide tumour summits to drive consistent cancer care across tumour streams.
- Continue to drive improvements in the patient experience of cancer care.
- Continue to support workforce development initiatives

A Research Informed Cancer Care System

- Encourage providers to participate in clinical trials programs.
- Support health services research.
- Foster robust evaluation of cancer programs, models of care and ICS initiatives.

Our region

The Barwon South West region of Victoria stretches from the tip of the Queenscliff Heads to the border of South Australia, covering a total area of 33,000 square kilometres.

It is geographically diverse and includes the large regional centres of Geelong, Warrnambool and Hamilton. The region's population is approximately 390,000 and is rapidly growing. There are an additional 90,000 people expected to call Barwon South West home by 2026 taking the population to approximately 480,000.



Cancer incidence

Victorian Statistics

On average 35,000 Victorians are diagnosed with cancer annually

Cancer is the leading cause of disease burden with an average of 95 new diagnoses each day

The five most common cancers are prostate, breast, bowel, lung and melanoma

An average of 30 Victorians die from cancer every day

Aboriginal Victorians (both men and women) had higher incidence rates than non-Aboriginal Victorians for cancers of the lung, liver, head and neck and stomach

It is estimated by 2030 the average annual incidence of cancer across Victoria will have climbed to over 45,000, an increase of 40% from 2017

Source: Victorian Cancer Registry

Barwon South West Statistics

On average, 2000 primary tumours are diagnosed in our region annually

19,992 primary tumours diagnosed between 2009-2018 in our region

Most common tumour type in MEN: 39% genitourinary, 12% colorectal, 10% lung, 12% haematological

68yrs is the average age of newly diagnosed cancer patients in our region

Survival rates for the Barwon South West region are 66%

Most common tumour type in WOMEN: 32% breast, 15% colorectal, 8% lung, 10% haematological

Source: ECOBSW Registry

A networked cancer system

BSWRICS Clinical Advisory Group

The BSWRICS Clinical Advisory Group was established in late 2018 to provide multidisciplinary clinical advice in relation to regional planning and implementation of BSWRICS initiatives. The group works collaboratively with existing and emerging regional groups, including engaging with other networks, to focus on quality and safety and maximising outcomes for regional patients. Representation comprises senior clinicians from across the region. The group is a sub-committee of the BSWRICS Governance Group.

South West Service Development Project Manager

A recent review of the Integrated Cancer Services highlighted the importance of ensuring we have the best possible structure to meet the growing needs of our community. In response, the BSWRICS Governance Group endorsed the appointment of a dedicated service development role to be located in the South West to support the implementation of regional and state-wide cancer initiatives. Dr. Nathalie Davis commenced in August 2018 as the Service Development Project Manager, and is located within the South West Regional Cancer Centre at Warrnambool. Nathalie has been instrumental in implementing many regional projects, whilst also focusing on local initiatives such as a review of the cancer rehabilitation program based at South West Healthcare, the establishment of the South West Region Cancer and Palliative Care Committee and coordinating the inaugural Great South Coast Community Cancer Expo to be held in October 2019.

South West Region Cancer and Palliative Care Committee

This newly established committee, a derivative of the former South West Healthcare Cancer and Palliative Care Committee, has been developed as a South West sub-regional committee with membership from key health services providing cancer care in the Warrnambool, Portland and Hamilton communities. The Committee is responsible for monitoring models of care, specifically service provision, safety, risk management and quality across the South West sub-region. The aim is to support the provision of an efficient and effective service system that meets the needs of consumers and ultimately provide integrated care. The Committee works in partnership with local health services for the purposes of planning and service improvement across the sub-region. BSWRICS is represented on this committee via our Service Development Project Manager.

VICS Conference – ‘partnering to optimise patient outcomes in cancer’

The fourth Victorian Integrated Cancer Services (VICS) Conference was held 9-10 May 2019 at the Melbourne Convention and Exhibition Centre. A total of 269 delegates attended the conference over two days. Two keynote presentations were delivered by international speakers; Professor Theresa Wiseman spoke about partnering to optimise care and using experience based co-design as a methodology in the cancer setting. Professor Bernard Rachet addressed inequalities in cancer care and outcomes.

BSWRICS was well represented and supported 12 staff and consumers to attend. BSWRICS presentations included:

- Population-based analysis of radiotherapy and chemotherapy treatment in the last month of life in regional Victoria (G Pitson, L Matheson, B Garrard, P Eastman, M Rogers)
- Improvement in short term survival for cancer patients in the Barwon South Western region (M Rogers, L Matheson, S Riches, M Kim, CH Yap, G Pitson, P Campbell)
- Prostate cancer online regional service directory (P Mullaly, H Cameron, L Matheson, M Rogers, B Garrard, S Riches)
- Mesothelioma in South West Victoria (G Pitson, L Matheson, S Riches, M Rogers)

BSWRICS Geriatric Oncology Forum

BSWRICS held its Annual Forum on 24th July 2018, presenting a focus on older people and cancer. Older people are the largest group affected by cancer. They are a diverse and growing group. Their appropriate care, during and beyond cancer, is an emerging field in cancer services worldwide.

This Forum was an opportunity for all health service staff across medical, nursing and allied health disciplines, in the BSW region, to hear and discuss how services could better meet the needs of this group.

Presentations from Oncology and Geriatric Medicine perspectives provided information on how these two specialty fields are working together to provide treatment and care to older people with cancer. An opportunity to engage in a panel discussion followed the presentations, offering important perspectives to take forward in the further development of this important area of health service delivery.



BSWRICS is supporting health services across the region to trial a resource for consumers to use during their cancer treatment and care. My Cancer Care Record supports people affected by cancer to store and record their medical and health-related information in one place. It also provides tips on questions and information to ask health professionals and a single place to record and recall specific details or instructions that can be hard to remember. My Cancer Care Record is a folder with eight key dividers to help the user organise medical information. My Cancer Care Record was developed by NEMICS (North Eastern Melbourne Integrated Cancer Service) and has been piloted in the North Eastern Melbourne and Grampians regions of Victoria. Initial results from an evaluation indicate consumers find the resource useful.

The 'WeCan' Framework

The Supportive Care Refresh Project has been jointly led by The Cancer Nursing Research Group (University of Melbourne) and Department of Health and Human Services. BSWRICS and clinical staff from across the region were involved in consultation sessions to support the development of a framework around supportive care resources for both clinical staff and consumers. The framework offers a system-wide, multi-faceted approach to influence consumer and clinician awareness, culture and value propositions; delivers operationally relevant and feasible resources, and includes social media presence, educational, consumer and clinician facing supportive care resources. More information can be found at www.wecan.org.au



The Barwon Health Foundation officially opened the Chemotherapy Day Ward and Oncology Pharmacy at Barwon Health's Andrew Love Cancer Centre in May 2019. This redevelopment was made possible through the ProjectLove fundraising campaign, support from the community including a generous bequest from the Allerton family, and continued support from Cancer After Care Group Geelong.

Both Allerton and her husband Cliff opened their first shoe factory, Allerton Shoes, in 1947. Cliff had a wealth of fashion experience and a talent for designing and producing footwear whilst both gave up his career in the insurance industry to dedicate his financial skills to Allerton Shoes. Their daughter Beverly also joined the business for a time.

Together they built a very respected and successful business manufacturing handcrafted leather quality shoes that offered 'comfort and style for the discerning woman'.

Both, as Mrs Allerton as she was widely known in the trade, was always immaculately dressed and an avid follower of fashion. After Cliff's death in 1971, she continued to drive the business until the factory closed in 1975.

The Oncology Pharmacy at the Andrew Love Cancer Centre is named 'The Allerton Family Oncology Pharmacy' in recognition of the generous gift left in the will of Edith Allerton.

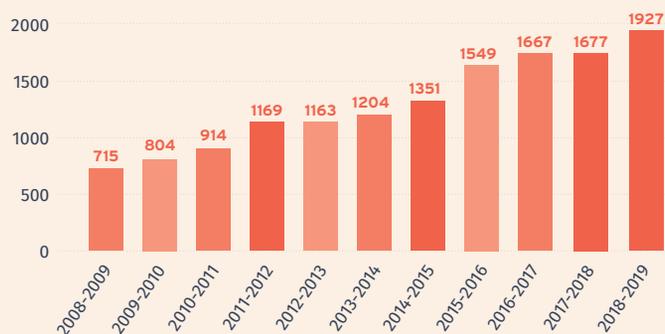
Edith Allerton passed away on 29th March 2012, aged 86 years.

High quality cancer care

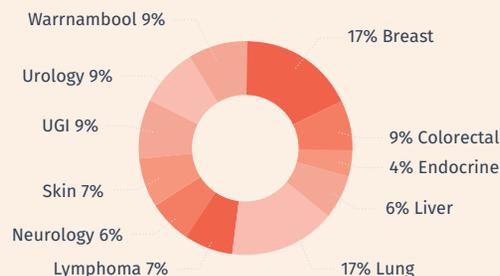
Multidisciplinary Care

The cancer Multidisciplinary Meeting (MDM) Program operates in Geelong and Warrnambool. There are eleven regular meetings, including a newly formed liver meeting, occurring across the region which bring a range of public and private health care professionals together for the purpose of treatment planning. This year a total of 286 meetings occurred with 1927 case discussions taking place, a 7% and 13% increase respectively. The operational and financial management of the MDM Program now sits within our regional health services.

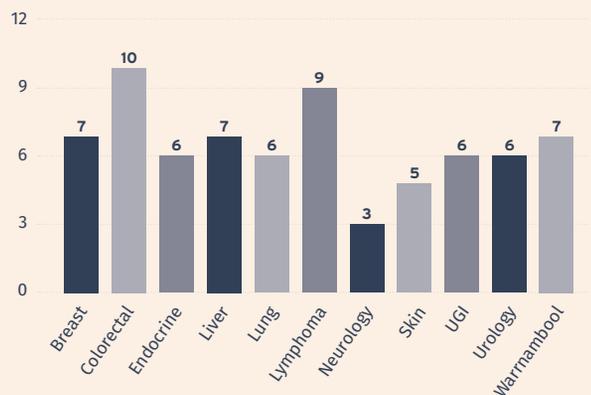
Total cases discussed per year



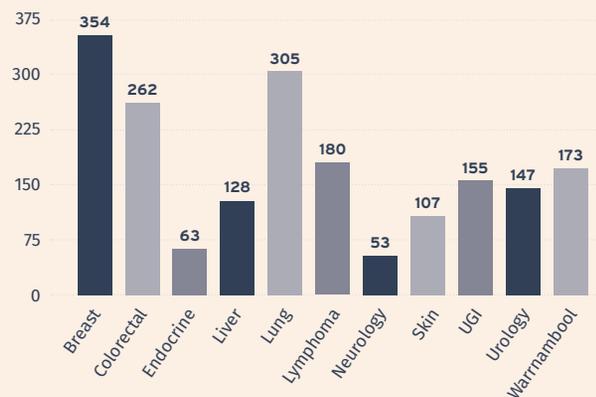
Meetings by tumour stream



Average case discussions



Number of cases discussed per MDM



Multidisciplinary Meeting Quality Framework

Cancer multidisciplinary team meetings (MDM) are regular meetings involving a range of health professionals with expertise in the diagnosis and management of cancer with the purpose of developing a recommended treatment plan for individual patients.

A state-wide survey of cancer MDMs highlighted the increasing maturity of MDMs across Victoria and variation in how they were operating. It was recommended that a quality framework be developed to support health services to measure their MDMs against state-wide quality standards.

The development of a MDM Quality Framework has been undertaken by the Victorian Integrated Cancer Services. The framework outlines a set of standards, indicators and measures, for all cancer MDMs in Victoria and provides a set of tools for monitoring quality. It has been drafted with reference to relevant peer-reviewed literature, DHHS policy and state-wide consultation including clinician interviews and surveys. The framework was released in April 2019.

BSWRICS recently supported two health services in the region to participate in the Statewide Quality Audit of Cancer Multidisciplinary Meetings. This DHHS initiative, led by Loddon Mallee Integrated Cancer Service, encouraged all major providers of cancer MDMs in Victoria to conduct an audit against the recently developed MDM Quality Framework. The audit also included a participant's survey, which collected information on the knowledge, perception and practice of attendees of audited meetings. A final report with de-identified state-wide results will be returned to all participating health services.



Tumour Summits Program

The Victorian Tumour Summits Program is being undertaken by the Victorian Integrated Cancer Services in conjunction with the Department of Health and Human Services (Cancer Strategy and Development) and the Cancer Council Clinical Network, to facilitate clinician led discussions around pathways of care.

These clinician led forums aim to identify and discuss unwarranted variation in clinical practice and cancer outcomes that could potentially be addressed via state-wide action. In 2018/19 tumour summits were held for head and neck and lung cancers. Priority action areas from the Head and Neck Summit include appropriateness of care, timeliness of care and the increased need for quality data. The Head and Neck Summit also highlighted an opportunity to collaborate with screening and prevention bodies. The Lung Summit, a repeat of the 2015 summit, provided the opportunity to examine any service improvement work underway, and measure differences in practice since the original summit.

To date, summits have been held for seven out of fifteen tumour types with an Optimal Care Pathway. The tumour types flagged for upcoming summits in 2019/20 include Central Nervous System and Melanoma.

Supportive Care

BSWRICS has continued its involvement with health services across the region to assist with the development of supportive care models and frameworks for service delivery. This collaborative work across all services ensures consumers are engaged with supportive care that is delivered within a structured, evidence based, and best-practice approach.

Supportive care includes five inter-related domains of care: physical, social, psychological, spiritual and information, and is an essential element of quality person-centred cancer care. The delivery of supportive care is a multidisciplinary team task, and positively impacts on patient experience and outcomes. Supporting people in their cancer experience leads to improved medical outcomes through better understanding and adherence to treatment; enhanced decision making and active participation in their care; improved responses to emotional and psychological challenges; and greater satisfaction with cancer care and care providers.

Oncology rehabilitation and survivorship education

BSWRICS has been supporting the implementation of the Cancer Council Victoria program, Wellness and Life after Cancer (WALAC). This education module is delivered by Health Services to people as part of their post-cancer treatment. BSWRICS funded and supported the training of facilitators across the region, and continues to support the ongoing development of the survivorship activities undertaken by each Health Service. Many of the programs are now providing joint oncology rehabilitation or exercise as part of the content and activity in the groups. This work is being led by exercise physiologists, physiotherapists, cancer nurses and other allied health staff in each of the health services, and is providing improved holistic treatment for people diagnosed with cancer.

Optimal Care Pathways

Optimal Care Pathways (OCPs) map the journey for specific tumour types to help increase understanding of the whole care pathway as well as its distinct components. The OCPs provide a framework for consistent, safe, high-quality and evidence based care for people with cancer and includes a set of evidence based recommendations for each step of the tumour specific pathways, from prevention and early detection, through to survivorship and end-of-life care.

A state-wide approach to OCP implementation is being undertaken across Victoria. Over the past 12 months, BSWRICS has worked collaboratively with regional stakeholders on a range of initiatives to support the Prostate and Oesophagogastric (OG) Cancer OCPs.

A Prostate Cancer Care Plan Patient Information Tool has been developed as part of the Prostate Cancer OCP initiatives. The Care Plan, a direct result of the VCCC Patient Experience Survey, provides patients with clear information on their diagnosis, treatment plan and available support networks. Comprising two parts, the Care Plan is completed by a Prostate Nurse Coordinator in consultation with the patient.

BSWRICS focus on oesophageal cancer strongly aligned with the Oesophagogastric (OG) Cancer Service Redesign Project. Several regional projects were implemented resulting in improved knowledge of referral pathways, increased engagement in multidisciplinary meetings and timely access to treatment.

The focus for 2019/20 will be head and neck, pancreatic and brain cancer.



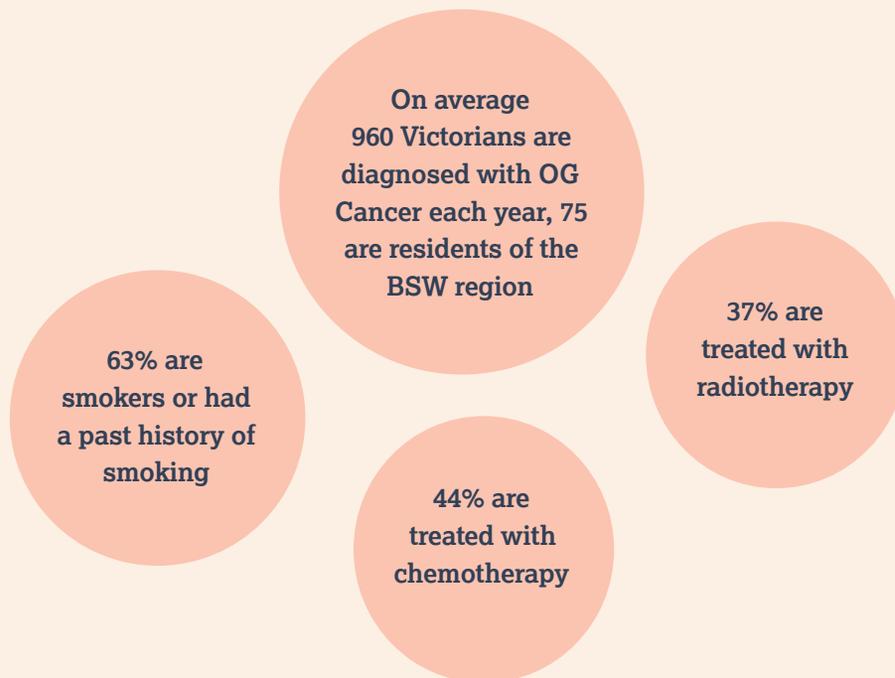
Pathways for cancer patients undergoing diagnosis and treatment is complex, involves multiple health care providers across a range of public and private institutions and is difficult to navigate for consumers and health care professionals.



Oesophagogastric Cancer Service Redesign

The Oesophagogastric Cancer Service Redesign Project was established via the Victorian Integrated Cancer Services to support local service redesign projects to improve the timeliness of oesophagogastric cancer care. The project was based on recommendations from the Oesophagogastric Tumour Summit where improving time from referral to treatment and evidence of multi-disciplinary discussion were identified as key areas for improvement. Barwon Health, along with a number of health services across Victoria who treat patients with oesophageal and gastric cancers, participated in the project. A final report, inclusive of a number of key recommendations, was submitted June 2019.

Oesophagogastric Cancer



Source: Evaluation of Cancer Outcomes Barwon South West Registry



A research informed cancer system

*Better access to
and use of data
and information to
drive continuous
improvements*



Evaluation of Cancer Outcomes Barwon South West (ECOBSW) Clinical Registry

The ECOBSW Registry supports health services within our region, particularly around quality and safety, service planning and redesign, by collecting a comprehensive dataset on all Barwon South West residents diagnosed with cancer.

Variation in timely access to cancer care remains a significant problem across the State. Over the past year, the ECOBSW Registry has supported numerous studies and projects to better understand and further explore referral pathways, timeliness and patterns of care. Our suite of clinical indicators, which allow us to measure the quality of care delivered, benchmark and drive quality improvement, and importantly measure key time points in the care pathway, have proven invaluable in providing key stakeholders with a better understanding of the patient journey.

Examples of collaborative studies/projects include:

- Management of neuroendocrine tumours in metropolitan and regional South West Victoria
- Prostate cancer outcome disparity in South West Victoria
- Optimal care pathways for pancreatic and head and neck cancers

2018/19 highlights

- 9 years of complete data (approximately 17,000 patients)
- Provision of data to support the State-wide Optimal Care Pathways project
- Provision of data to build on State-wide tumour summit data and support local initiatives and interventions
- Provision of data to support the State-wide Oesophageal Redesign Project

Manuscripts

- Rogers MJ, Kress R, Matheson L, Cameron H, Garrard B, Riches S, Pitson G, Yap CY, Kim M. Optimal care pathways for lung cancer South West Victoria. Australian Journal of Cancer Nursing.
- Rogers MJ, Kim M, Garrard B, Cameron H, Matheson L, Riches S, Yap C, Pitson G, Campbell P. Surgery and short term survival of cancer. Australian Journal of Cancer Nursing.
- Pitson G, Matheson LM, Garrard B, Eastman P, Rogers MJ. Population-based analysis of radiotherapy and chemotherapy treatment in the last month of life. Internal Medicine Journal.
- Collins I, Lum C, Versace V. Influence of socio-economic factors and distance to radiotherapy on breast-conserving surgery rates for early breast cancer in regional Australia; implications of change. Asia-Pacific Journal of Clinical Oncology.

Conference presentations

- Pitson G, Matheson L, Rogers M, Garrard B. Population based analysis of pleural mesothelioma patterns of care and outcomes in regional Victoria (2019 Victorian Integrated Cancer Services Conference, Melbourne)
- Pitson G, Matheson LM, Garrard B, Eastman P, Rogers MJ. Population-based analysis of radiotherapy and chemotherapy treatment in the last month of life (2019 Victorian Integrated Cancer Services Conference, Melbourne)
- Rogers M, Matheson L, Riches S, Kim M, Yap CH, Pitson G, Campbell P. Improvement in short term survival in cancer patients in the BSW region (2019 Victorian Integrated Cancer Services Conference, Melbourne)
- Rogers M, Matheson L, Riches S, Pitson G, Campbell P. Impact of clinical quality registries on clinical documentation (2019 Victorian Integrated Cancer Services Conference, Melbourne)



Financial report

Revenue	
Department of Health Victoria	1,230,108
Other Income	5,283
Total Revenue	1,235,391

Expenses	
Program office salaries	558,640
Contract/Other Agency salaries	111,381
Computer Software	19,683
Administration & Office Supplies	22,249
Education/MDM	137,433
Motor Vehicles & Travel	14,215
Corporate Management Charge	81,708
Conference Sponsorship	6,496
Contribution to State-wide Projects	61,505
Total Expenses	1,013,310
Operating Results	222,081

Our team



Jackie Kelly
Chair BSWRICS
Governance Group
Commenced November 2018



A/Prof. Philip Campbell
Clinical Director
Acting Chair July – November 2018



Sue Riches
Program Manager
Until May 2019



Leigh Matheson
Health Information Manager:
Data, Quality & Research
*Acting Program Manager (May-
August 2019)*



Amrit Dhillon
Service Development
Coordinator
Commenced February 2019



Angela Burns
Administration Officer



Bernard Howard
Data Collection Officer:
Data, Quality & Research
Commenced February 2019



Brooke Garrard
Data Collection Officer:
Data, Quality & Research
Until January 2019



Heather Cameron
Service Development Manager



Dr Margaret Rogers
Data Analyst: Data, Quality & Research



Dr Nathalie Davis
Service Development Project
Manager (joint appointment
with South West Healthcare)
Commenced August 2018



Phoebe Mullaly
Service Development
Coordinator
Until December 2018



Dr Violet Mukaro
Project Officer: Data, Quality
& Research
Until December 2018



Health
and Human
Services

*The Barwon South Western Regional Integrated Cancer Service
is supported by the Victorian Government*

Design by **grindstone**