



On behalf of the Victorian Paediatric Integrated Cancer Service, it gives me great pleasure to present the PICS 2022-23 Annual Report.

This comprehensive report showcases the accomplishments and diverse range of service improvement initiatives undertaken by PICS over the past year, in collaboration with our partner health services and stakeholder groups.

In alignment with the goals of the *Victorian Cancer Plan 2020-2024*, we have worked to improve patient experiences and outcomes in all that we do; and ensure cancer treatment and follow-up care can be accessed closer to home, when it is safe to do so. This has seen an expansion of the Regional Outreach and Shared Care Program, with further opportunities on the horizon, in Gippsland, Geelong and in partnership with Tasmanian health services.

We would not be able to achieve effectual change without the generous contributions of past and present patients and families, members of our governance, clinical advisory, and project committees, our sponsors, and the PICS team.

Together, we continue to make a meaningful difference in the lives of those affected by paediatric cancer.



Bernadette McDonald
RCH CEO and PICS Chair



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Clinical Director and Director's report

The PICS team had a highly productive and thoroughly enjoyable year during 2022-23. For the first time in many years, we were able to collaborate easily as a team and with our network face-to-face, and develop new partnerships and plans for the future.

As we enter the last year of the Victorian Cancer Plan for 2020-2024, we take a moment to contemplate all that we have accomplished in the past year, to meet the objectives of the plan, and the PICS strategic priorities. We hope you enjoy reading about these throughout the report.

The PICS team, together with our stakeholders and consumer representatives, take on ambitious service improvement projects each year, and over the past twelve months, these have included; the development of new resources for staff and families to better manage the nutritional impacts of childhood cancer treatment; publishing the nationally endorsed Adolescent and Young Adult Optimal Care Pathway in partnership with OnTrac, the youth cancer service based at PeterMac; expanding our education delivery with new e-learning modules and a new procedural pain management workshop being delivered in regional health services; and partnering with our adult counterparts in the VICS and the Australian Cancer Survivorship Centre (ACSC) to develop resources to support families at the end of treatment, navigating the return to 'normal life'.

From a state-wide perspective, our greatest focus this year has been on the expansion of the Regional Outreach and Shared Care Program, to ensure regional families can receive cancer treatment and supportive care closer to home when it is safe to do so. Throughout this period, we have established a Regionally based Nurse Coordinator role to support shared cancer care in North -East Victoria. Developed in partnership with PICS. This role was made possible with the financial support of the Albury-Wodonga Cancer Centre Trust, and the Albury-Wodonga Health Paediatric team who have introduced the role to better support local patients and families. We have also commenced discussions with several regional partners to support re-assessment of their Service Capability Level, in order to provide additional services locally.

We have a large volume of exciting service improvement projects planned for the year ahead, and our 'why' remains at the centre of each of them; improving patient and family experience of childhood cancer, and improving cancer outcomes.



Dr Greg Wheeler
PICS Clinical Director



Justine Carder
PICS Director



The Victorian Integrated Cancer Services (VICS)

The VICS are Victoria's cancer service improvement network.

The VICS vision is to improve patient experiences and outcomes by connecting cancer care and driving best practice. The nine Integrated Cancer Services (ICS) locally and collectively, collaborate with stakeholders to design and implement service improvement initiatives that lead to better experience, care and outcomes for Victorians affected by cancer.

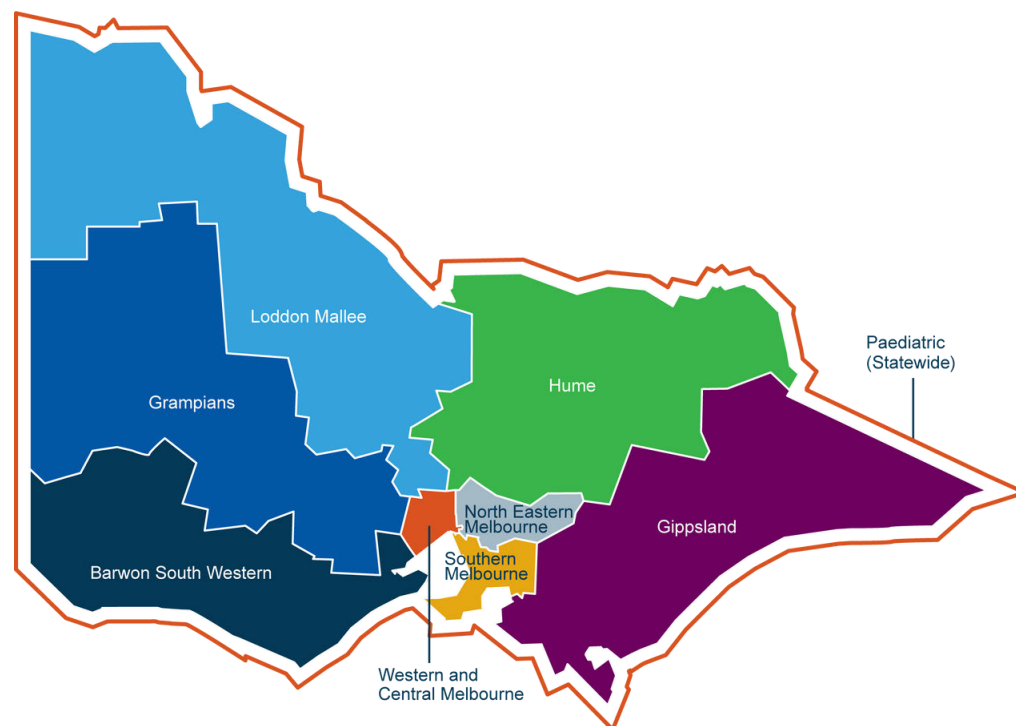
The VICS work to promote:

- System integration across structural boundaries
- Collaborative approaches to evidence-based service development
- Quality improvement at the local level.

The VICS build relationships between health services, partners and stakeholders to develop, implement and evaluate initiatives that improve the way Victoria's health services provide care and support. Work is delivered statewide and locally to improve cancer outcomes for all Victorians and aligned with **the Victorian Cancer Plan**.

Each of the nine Integrated Cancer Services (ICS) has a core role in implementing the Victorian Cancer Plan locally and statewide, to support three of the plan's five goals:

- Victorians know their risk and have cancers detected earlier
- Victorians with cancer have timely access to optimal treatment
- Victorians with cancer and their families live well.



The combined VICS, including PICS as the paediatric statewide service and 8 adult services across Victoria

The VICS Implementation Plan guides this work by providing a consistent statewide approach, built around nine areas of focus for service improvement work. These are adapted as necessary for paediatric relevance:

1. Adoption of quality cancer care closer to home
2. Alignment with the Multidisciplinary Meetings (MDM) Quality Framework
3. Addressing the needs of the older person in routine cancer care
4. Implementing the Optimal Care Pathways (OCP) for Aboriginal and Torres Strait Islander people with cancer
5. Addressing unwarranted variations against the OCPs
6. Monitoring and communicating alignment with the OCPs
7. Supportive care
8. Survivorship care
9. Referrals to palliative care and advance care planning.

Types of work undertaken by the VICS include:

- Implementation of a new model of care for improved cancer care closer to home
- Development and application of resources that inform improved delivery of cancer care for the older person
- Increased awareness and understanding by clinicians of the need for cultural awareness and practices to improve cultural safety for Aboriginal and Torres Strait Islander cancer patients and carers
- Policy implementation by health services to support best-practice survivorship care practices.

For more information visit <https://www.vics.org.au>.

VICS statewide activity spotlight 2022–23

Victorian Statewide Collaboration project to improve Cancer Survivorship Care.

This is a strategic partnership between the VICS and the Australian Cancer Survivorship Centre (ACSC). This work is still in progress and aims to:

1. Facilitate high quality survivorship care through supporting Victorian hospitals to ensure appropriate policies are in place.
2. Facilitate high quality survivorship care through collaborating to implement survivorship care models. This is supported by ICS working with member services to implement local change.
3. Improve VICS and member services' confidence, capacity and capability around survivorship through reducing the gap in survivorship education and training.

PICS - who we are

The Victorian Paediatric Integrated Cancer Service (PICS) is funded by the state Government to lead a networked paediatric cancer care system in Victoria. We are part of the Victorian Integrated Cancer Services (VICS) and align to the principles of the Victorian Cancer Plan in all that we do.

We achieve our goals through working with the Victorian primary diagnostic and treatment centres for children and adolescents:

- The Royal Children’s Hospital
- Monash Children’s Hospital;
- the state-wide paediatric radiation therapy service;
- Peter MacCallum Cancer Centre;

and our regional shared care partner health services.

Our role

To improve patient experiences and outcomes, by driving equitable access to consistent, high-quality cancer care.

Our vision

Paediatric cancer care will be family-centred and evidence-based for all children and adolescents receiving care in Victoria.

Our strategic priorities

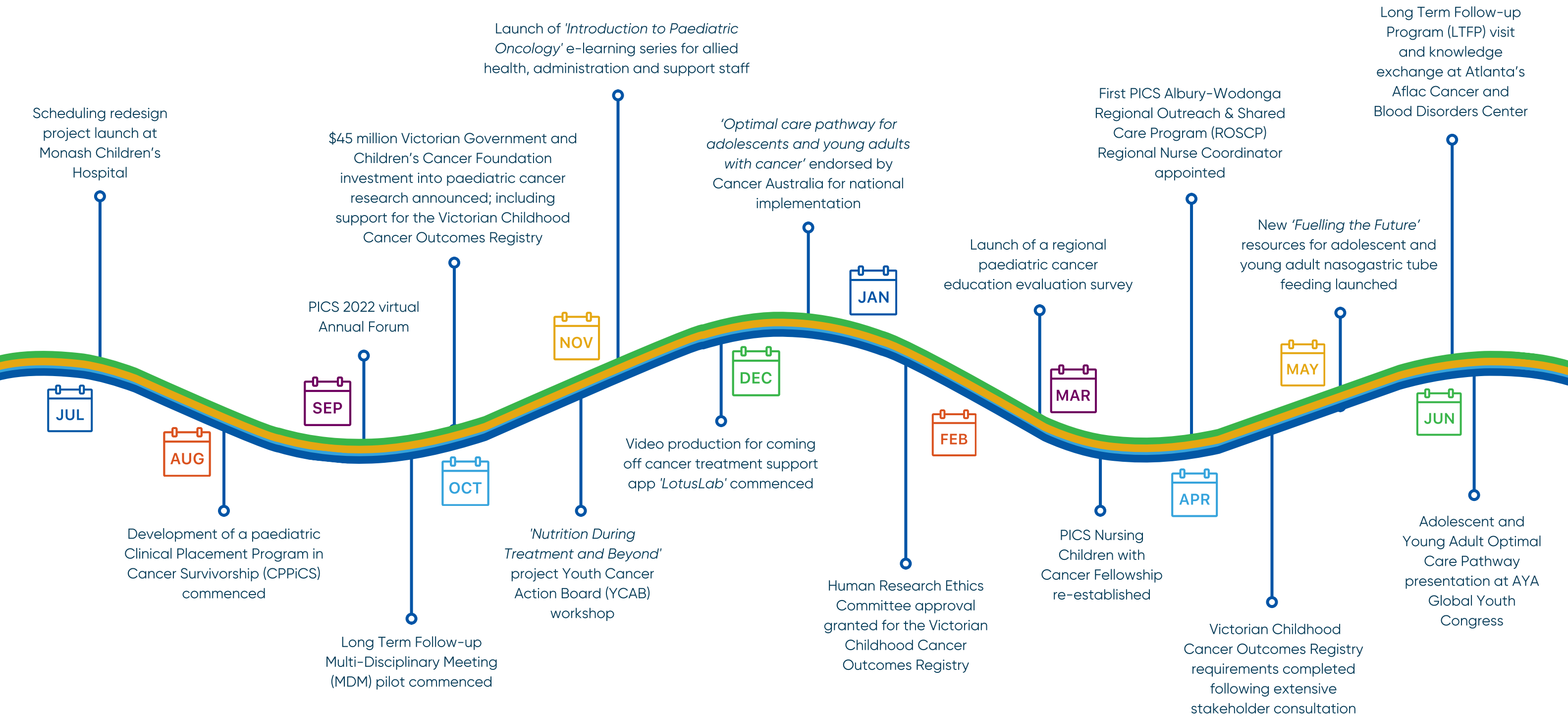
The Victorian paediatric cancer strategic priorities set out how PICS will contribute to the [Victorian Cancer Plan 2020-2024](#), and are designed to focus our attention on what is most important for paediatric cancer care.



To perform our role, we:

CONNECT	Building relationships between providers, health services and sectors in Victoria, to facilitate equitable access to paediatric cancer care
PROVIDE	Delivering an integrated statewide survivorship program for all children and adolescents following cancer treatment, across metropolitan and regional areas
COORDINATE	Building regional capability and capacity through PICS Regional Outreach and Shared Care Program's onsite education and clinics, and coordination of the delivery of low-complexity care
INFORM	Developing family-focused supportive care resources
STANDARDISE	Developing and delivering education forums and clinical resources to facilitate standardisation of best practice paediatric cancer care across our network
TRANSLATE	Providing data analysis services to translate data into organisational knowledge, and support statewide health services research and improvement
CO-CREATE	Engaging with consumers and clinicians to co-create service improvement projects and programs of work
EVALUATE	Evaluating completed service improvement projects and program changes to ascertain the impact locally, and potential for impact at scale
EMBED	Working with health services to implement project recommendations in a sustainable and effective way
MONITOR	Systematically monitoring processes and outcomes of cancer care to improve system-wide performance

Our year at a glance



Over the 2022-23 financial year



The PICS resources page was viewed over **2500** times, making it the 2nd most popular page on the entire VICS website.



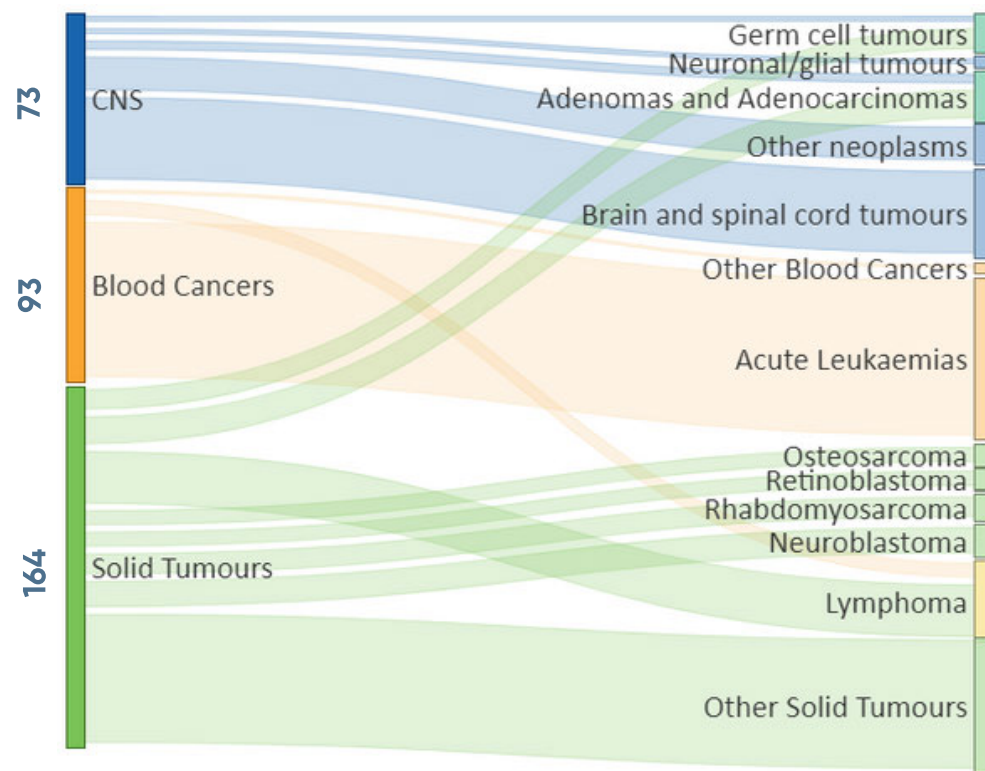
PICS e-learning modules were accessed over **2000** times across the world.



The number of followers across PICS communications channels grew to over **700**.

Paediatric cancer care in Victoria

324 children and adolescents (under 18 years old), newly diagnosed with cancer*, were treated in Victoria in 2022.



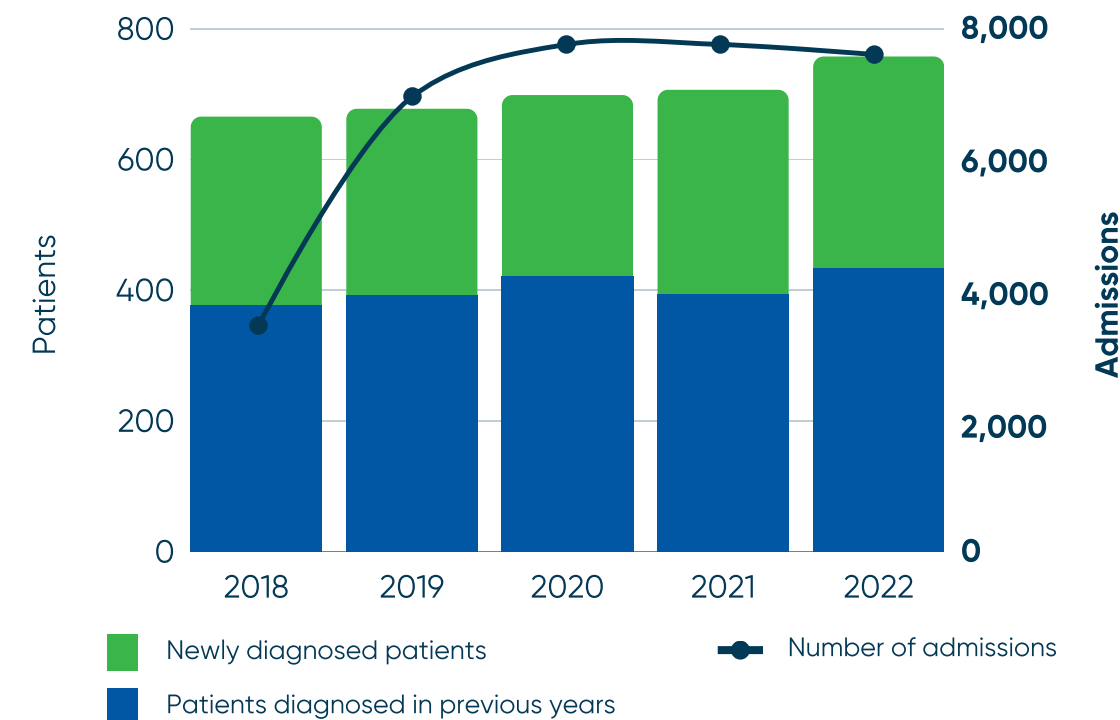
In total, 757 children and adolescents, including those newly diagnosed, received cancer care as an inpatient in a Victorian hospital in 2022.

At a glance: Patients by where they live

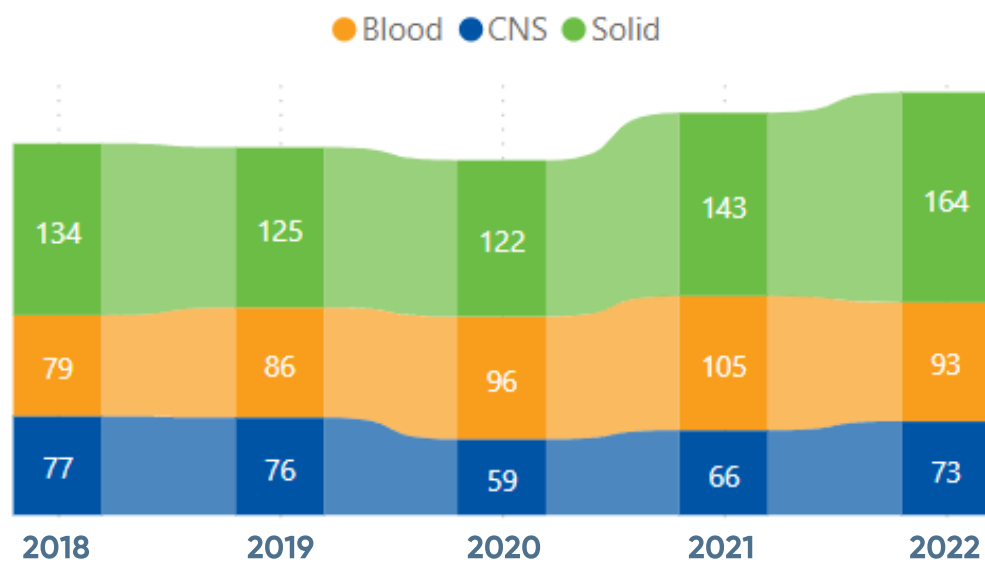


Admissions for childhood cancer care and treatment has more than doubled (113.43% growth) since 2018, up from 3574 admissions that year, to 7628 in 2022. 43% of the admissions in 2022 were for children and adolescents who were newly diagnosed last year.

At a glance: Child and adolescent admissions to Victorian public hospitals for cancer treatment over the past 5 years



At a glance: Trends for new diagnoses for this population across the main cancer streams over the past 5 years



* inclusive of non-malignant CNS tumours

Data source: Victorian Admitted Episode Dataset

Improving paediatric cancer care in Victoria

PICS service improvement projects

Long Term Follow-up Program improvement project

Over the past two years, the PICS Long Term Follow-up Program (LTFP) service model has been re-designed and enhanced through the implementation of **37 consumer-informed recommendations** ascertained from a [2020-21 service review](#). The recommendations centred around:

- improving consistency and quality of care throughout the survivorship journey
- increasing program capacity to meet increasing demand
- enhancing care provider capability to meet patient needs
- greater collaboration with program partners
- empowering patients and families.

Working with our health service partners, consumer representatives and our LTFP clinical and administrative teams, 51% of the review recommendations have been fully implemented (n=19), and another 38% are underway (n=14); many of which will be addressed through other programs or Information and Communications Technology projects under development:

Victorian Childhood Cancer Outcomes Registry development



Extension and enhancement of LTFP data collection

LotusLab app development



Ensuring equitable access to online resources and support, and improve access to clinic documentation

End of treatment programs



Explore opportunities to support transition from completion of treatment to LTFP

The remaining 4 recommendations will be addressed through the PICS program of work; which fall into the following themes:

- addressing unmet need in fertility information and support
- development of the GP and Paediatrician shared care model.

Evaluation of the project will include assessment of patient and family experience in 2020-21 compared to the current environment and utilise the newly implemented key performance indicator dashboards to ensure continuous improvement.

Examples of implemented recommendations, by focus area



Administrative processes

Increased utilisation of EMR to streamline wait list and clinic management; improved communication with families and allowing appointments to be booked further in advance.



Clinical governance

Worked with consumers and partners to develop LTFP clinical guidelines, policy, quality measures and our vision, values and goals, to ensure continuity of care.



Collaboration with partners

Trialled an LTFP multi-disciplinary meeting (MDM); mapped and published LTFP model of care and pathways; nursing, clinical fellow and allied health clinical observation opportunities with the LTFP to build capacity in the provision of best-practice survivorship care.



Transition into the LTFP

Collaboration with the RCH Survivorship CNC; linking with Emerge clinical trial and the LotusLab app to improve end-of-treatment experiences and provide information and support to families prior to referral to the LTFP.



Education resources

Consumer input for new and updated resources for families, including late effects fact sheets, a Welcome Letter to families, and a Q&A video about the LTFP.



Psychosocial & supportive care

Consumer informed updates to the pre-clinic questionnaire to better determine family support needs.



Shared care

Following consultations with consumers and healthcare providers, initial scoping of opportunities to develop the GP and Paediatrician shared-care model, increasing care closer to home where possible.



AYA provision

Collaboration with the LotusLab project to enable all AYA to have access to personalised documentation at the end of treatment.



Transition out of the LTFP

Exploration of joint transition clinic with The Royal Melbourne Hospital BMT service; documentation of transition process and pathways in the LTFP Standard Operating Procedure.



Data & research

Working with VCCOR project to enhance research capacity; development of service activity and performance dashboards to enable the program to meet increased demand and guide improvement activities.



Staff & MDT resourcing

Expanding the clinical and support teams; diversifying areas of expertise to meet the medical and psychosocial needs identified by families and healthcare professionals.

Improving paediatric cancer care in Victoria

PICS service improvement projects

Nutrition during treatment and beyond

When patients undergoing cancer treatment experience difficulties eating and drinking, nasogastric (NG) feeding tubes can be used to help them meet their nutritional and hydration needs. Despite the benefits of NG tubes, many adolescents and young adults (AYA) experience feelings of worry, concern and confusion when faced with the prospect of having an NG tube. A new resource, co-designed with AYA and key clinical stakeholders provides an opportunity to meet the unaddressed needs of this cohort, recognising their concerns while informing and empowering them through the experiences of their peers.

During the project's co-design phase, members of the Youth Cancer Action Board (YCAB) and Youth Cancer Action Advocates (YCAA) group were asked to complete a survey (n=11) and participate in a workshop (n=15), to share their experiences, and perceptions of NG tube feeding. Five key messages were identified by the group.

The resulting resource, the [Fuelling the Future: A Guide to Nasogastric Tube Feeding video](#), features the lived experiences of young people who were treated for cancer, and information from dietitians tailored specifically for this group, to improve understanding of the benefits of NG tube feeding and associated procedures. It was launched across Victorian healthcare services providing AYA cancer care in June 2023.



"I realised how amazingly helpful it was to have an NG tube instead of having to push through and force myself to eat at every meal, which was mentally and physically exhausting and distressing."

- AYA survey participant

Fuelling the Future - key messages

-  What an NG tube is and how it works
-  The benefits of NG tube feeding
-  The insertion procedure, and how to make it more comfortable
-  What day to day life is like with an NG tube, and how long it's needed for
-  That worries and concerns are normal

Access the video and other resources

In parallel to the patient-focused resource design and development, healthcare staff (n=28) from Victorian cancer services providing AYA cancer care completed a survey on their understanding of NG tube feeding, and their confidence supporting patients. It was established that while there was great confidence in knowledge of NG tube feeding and its rationale, standardised clinical guidance on the practical elements (such as when to initiate discussions, how to support AYA concerns, or seek more information) would be beneficial.

An NG tube feeding guide for healthcare staff was also developed, to accompany *Fuelling the Future*. This guide answers common questions to help staff support their AYA patients; and is designed to be utilised in conjunction with the video.

The project has been supported by YCAB, YCAA, and a working group of dietitians and physiotherapists from Monash Children's Hospital, Peter MacCallum Cancer Centre and The Royal Children's Hospital.

The project was presented as a poster (right) at the 2023 ANZCHOG Annual Scientific Meeting in Perth, Australia.



The poster details the project's objectives, methods, findings, and conclusions. It highlights the co-design process with AYA patients and the development of a resource to improve staff confidence and support for AYA patients. Key findings include the need for more information on NG tube feeding, the importance of standardized clinical guidance, and the impact of the resource on staff confidence and knowledge.

PICS service improvement projects

Monash Children's Hospital day oncology unit appointment scheduling project evaluation

Monash Children's Hospital Day Oncology Unit (Reef ward) were facing daily operational pressure to meet service demands, with rising patient numbers and increasing complexity in paediatric oncology treatments.

To support the unit, and improve patient and family experience and staff well-being, in the 2021-22 financial year, PICS [conducted an investigation](#) to better understand workflow, process and other bottlenecks. With the support of Monash Health, this resulted in the implementation of a new scheduling system and clinic flow. Areas for improvement focused on ease of use and adherence to new processes; smoothing patient arrival times; and challenges booking patients with their primary consultants.

During the 2022-23 financial year, PICS has continued to work with Monash Children's Hospital to monitor and evaluate these changes. As part of this, staff were surveyed approximately four months following the implementation of the new system.

Staff across the multidisciplinary team were invited to contribute. The survey respondents (n=33) included a mix of allied health, administrative, medical and nursing team members. Two-thirds of respondents had worked on the ward for at least three years.



Monash Children's Hospital Day Oncology Unit (Reef ward)

Key findings include:

- The majority of staff feel that the new system meets their needs.
- The changes have improved clinic management and flow, and increased capacity across the multidisciplinary team, to plan the care and support they provide to patients and families.
- The changes have supported the clinical nursing team to be able to take their allocated shift breaks, and nursing overtime costs have been significantly reduced.

69%
noted improved
capacity to plan care
and support for
families

"[The new system] has helped manage bookings for treatment in the day oncology unit; especially for other activities such as dressings and line change."

- Medical staff member on Reef Ward

"The nurses appear more calm and the flow is a lot more predictable and orderly."

- Parent of a patient on Reef Ward

PICS presented the survey and findings to the Reef team, and together identified further efficiencies and solutions that have since been implemented. These include further changes to the standard operating procedures, clinic communication tool, and unit calendars. In addition, a broader review of the service model is being considered.

At least one regional family has reported being able to utilise the [Angel Flight](#) transport service for the first time, thanks to improvements in appointment scheduling.



PICS service improvement projects

Education evaluation of paediatric oncology education in regional Victoria

During quarter four 2022-23, PICS undertook an evaluation of paediatric oncology education that is currently being delivered across regional centres in Victoria (see *Education*, page 15).

A survey was developed to determine whether what is currently delivered is what is wanted and needed in regional Victoria. The results of the survey will help to direct future education creation and delivery across the state.

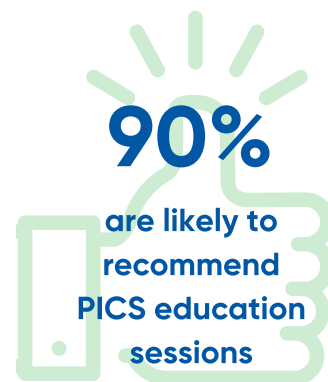
The survey was circulated to the nine regional health services that PICS partners with, to facilitate the successful shared care between primary and regional treating centres for children and adolescents with cancer (see *The Regional Outreach & Shared Care Program*, page 12).

The survey questions were broken in to five sections, and covered topics including education delivery currently and into the future, the preferred education learning styles and delivery methods of the respondents, and basic demographics.

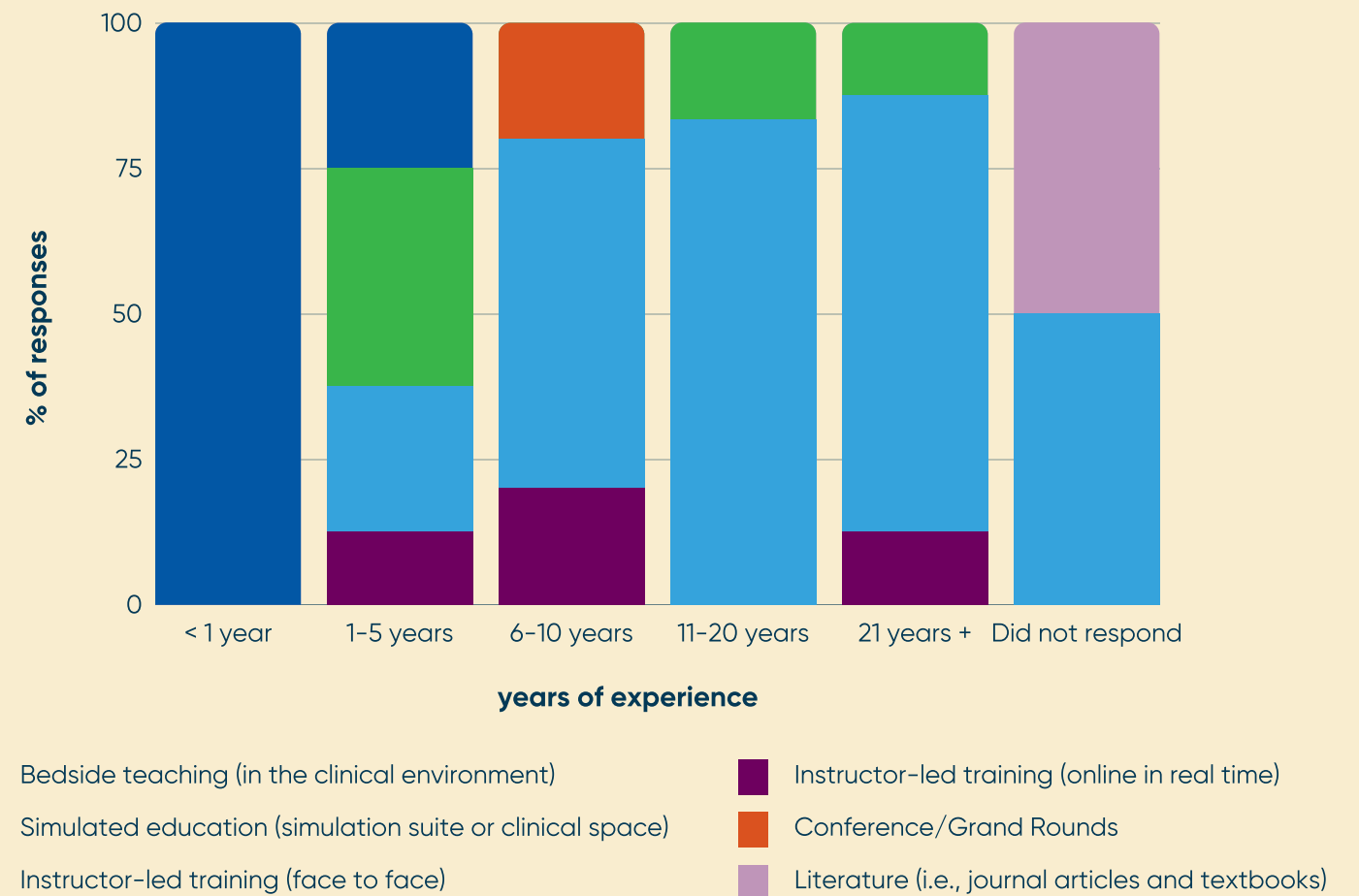
63 staff from the range of Victorian regions responded, and were also given the opportunity to continue contributing to the conversation, as PICS looks to undertake a larger piece of education design over the next few years.

Key findings include:

- The PICS education aligns with what is requested and needed, by the respondents, based on patient presentations in the regions.
- There appears to be a correlation between preferred education method and years of experience providing care to children with a cancer diagnosis.
- In line with what is being seen in all aspects of health education currently, the more inexperienced staff members were more likely to seek hands-on skill attainment either at the bedside or in a simulated environment.
- As the participants move towards their mid-career, a developing interest in seeking greater networking opportunities through attendance at conferences and Grand rounds is seen.
- Established respondents seek a more didactic education method, including instructor-led teaching either virtually or in the classroom, which correlates with the topic content often delivered at this advanced level.



Preferred education delivery methods against years of clinical experience



As PICS continues to review and refresh the regional education curriculum, meeting the variety of education needs across multiple generations of learners will continue to be prioritised.

As we move towards 2023-24, PICS has several exciting education projects in the planning stage, including:

- A bench-marking project to assess and review the Paediatric Oncology Nursing Education delivered across the Australian & New Zealand Children's Haematology/Oncology Group (ANZCHOG) sites. This piece of work will seek to benchmark from a metropolitan, regional, and rural perspective.

Improving paediatric cancer care in Victoria

Partnership projects

LotusLab - The Digital Survivorship Companion (eDiSCover)

The Digital Survivorship Companion (eDiSCover) project, in partnership with Murdoch Children's Research Institute (MCRI), was established to maintain engagement with survivors of childhood cancer and their families at the end of their active cancer treatment, through the development of a digital app for mobile devices.

This app has several aims:

- to help fill a gap in engagement and support between the end of active cancer treatment and the first appointment with the PICS Long Term Follow-up Program (LTFP)
- improve equitable access to information
- promote supportive care and survivorship clinical trials following childhood cancer.

Emphasis is placed on the adolescents and young adults (AYA) demographic as they are especially vulnerable during the post-treatment phase of their cancer care journey.

During the [2021-22](#) financial year, extensive consumer engagement informed the setting of core topics and associated information that will support end users.

The app, named *LotusLab*, along with supporting collateral, has been in development throughout 2022-23:

- Further patient-centred content was generated to meet user needs, including the development of resources that cover key post-treatment topics.
- A suite of informative videos have also been produced, featuring healthcare professionals, and the lived experiences of childhood cancer survivors and their families. These videos explore subjects such as 'what to expect at the end of treatment review', 'returning to full-time school', 'parent concerns after treatment', 'fatigue' and many more. These videos will be included as part of *LotusLab*, and available online as additional resources for a wider audience.



Some topics covered by the *LotusLab* videos

The project is set to begin a pilot of *LotusLab* in late 2023, engaging families nearing the conclusion of their treatment to deliver tailored information via an interactive and personalised experience, that specifically addresses the post-treatment phase.

This pilot phase will critically evaluate the app's usability and its alignment with family and clinician requirements. The project's third year will also include supportive care clinical trial utility evaluation, and development of an implementation and sustainability plan for the app.

Development of *LotusLab* has been mindful of the wider suite of improvement projects and products being developed by PICS. The app and associated resources have interdependencies with bodies of work such as the LTFP improvement project, with the project teams collaborating to establish holistic supports for patients and families over their cancer survivorship journey.

"What an absolutely raw and beautiful portrayal of the experiences of the families."

I am utterly in awe and deeply grateful for the opportunity to be a part of this and so much effort has gone into making this happen."

- Nelly, parent involved in *LotusLab* video production

Overseeing this 3-year project are psycho-oncology clinician-researchers, A/Prof Maria McCarthy and Dr Cinzia De Luca of MCRI and the Royal Children's Hospital. PICS staff Georgia Taylor, Hannah Pring and Chris Williams are supporting the project through project management and clinical education expertise. The project is due for completion by December 2024.

The overarching eDiSCover project is financially supported by the Cancer Trials Management Scheme Competitive Grants Program administered by Cancer Council Victoria, and the Victorian Government through the Victorian Cancer Agency.



Improving paediatric cancer care in Victoria

Partnership projects

Adolescent and Young Adults Optimal Care Pathway

During the 2021–22 period, the development of the *Optimal Care Pathway for Adolescents and Young Adults with Cancer* (AYA OCP) was a collaborative effort between PICS and OnTrac at Peter Mac.

The creation of this pathway was informed by a steering committee, consultations with stakeholders and consumers, as well as an extensive literature review that identified crucial principles and considerations in the care of adolescents and young adults with cancer. To ensure that the document remained up-to-date, specialised multidisciplinary healthcare professionals from various sectors (public, private, adult, and paediatric) actively participated in multiple draft revisions through a national expert reference group. The draft underwent a public consultation process involving national AYA peak bodies and networks. Finally, the document received endorsement from Cancer Australia as the national pathway for guiding best practice cancer care for adolescents and young adults and in December 2022, it gained endorsement from the Australian Government Department of Health. View the pathway on the [Cancer Council website](#).

This pathway has been presented at notable events, including the AYA Global Cancer Congress in Long Beach, California, in June 2023, the Youth Cancer Service community of practice meeting in Brisbane in November 2022, and the Victorian Comprehensive Cancer Centre's Monday Live Lunch in Melbourne in April 2023.



Dr. Jeremy Lewin (left) with his adolescent patient and family member



Victorian Childhood Cancer Outcomes Registry

PICS have maintained a bespoke clinical repository, designed to centralise key Long Term Follow-up Program (LTFP) data related to childhood cancer treatment and clinical outcomes, for over a decade. Given its outdated architecture, redeveloping the repository presents a valuable chance to transform it from a narrow-purpose reference database into a comprehensive and sturdy data warehouse for clinical, service improvement, and research purposes. Importantly, the extension of the scope, encompassing registrations for all children and adolescents receiving cancer treatment in Victoria, will enable rigorous analyses, focused investigations, and research regarding the long-term effects of cancer treatment and cancer outcomes. It will also support data-driven service enhancements and the development of well-informed service designs.

The new Victorian Childhood Cancer Outcomes Registry (VCCOR) has been funded through the Victorian Paediatric Cancer Consortium.

Over the past twelve months, PICS has achieved the following milestones through extensive clinical and technical consultations:

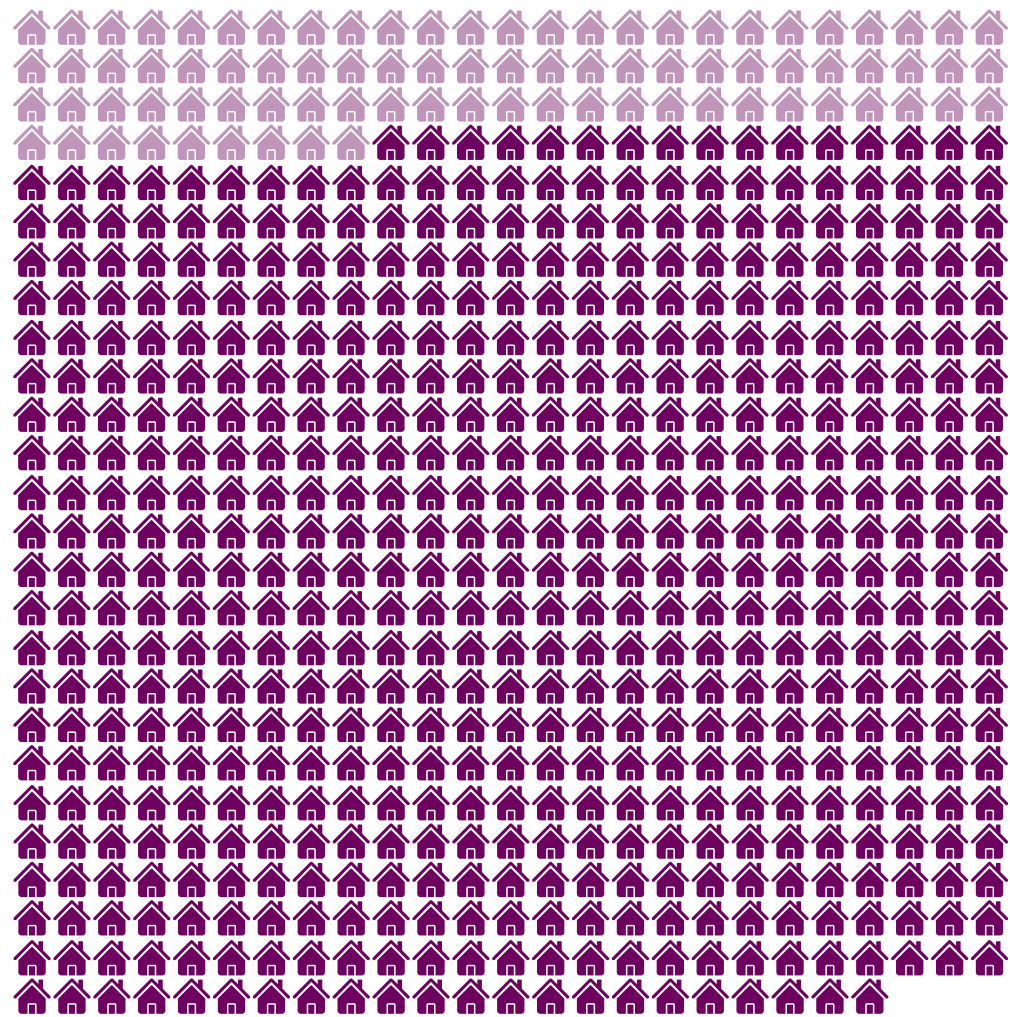
1. Created a comprehensive business and functional requirements document, enabling the evaluation of software and vendor suitability for delivering a robust, secure, and future-proof solution.
2. Obtained approval from the relevant Human Research Ethics Committee (HREC) to securely house the data.
3. Evaluated more than 15 proposed solutions through a formal procurement process.
4. Formed a partnership and agreement with the New Zealand childhood cancer Late Effects Assessment Programme (LEAP) and software developer MedSyn, with the aim of enhancing an existing customised application for use in Victoria.
5. Developed a framework for the ongoing governance, management, and sustainability of the new data platform.
6. Initiated discussions with relevant data custodians to establish data sharing
7. agreements that will support the seamless flow of data into the system. Designed the system to accommodate modern integration, analytics, visualisation,
8. and dashboarding tools. Started collaborating with the developer on the agreed-upon enhancements.
9. Commenced planning for data migration and the establishment of standardised classifications, to ensure data integrity.

It is planned that VCCOR will go live in early to mid 2024, and will continue to mature throughout the year as data becomes available.

Clinical programs

The Regional Outreach & Shared Care Program (ROSCP)

A priority of the [Victorian Cancer Plan 2020-2024](#), is to 'Support Victoria's regional cancer centres to deliver appropriate, accessible, high-quality and safe cancer care close to home'. The PICS Regional Outreach and Shared Care Program (ROSCP) has continued throughout the 2022-23 financial year, to coordinate care for families living within the health service catchment areas of **Albury, Ballarat, Bendigo, Shepparton, Frankston, Geelong, Traralgon, Warrnambool, Wangaratta, and Tasmania**. The program provided **635** outreach clinic appointments, either **in person (104)** or **via telehealth (531)**. In addition, PICS delivers and facilitates paediatric oncology clinical education to local teams (see *Education*, page 14), and supports regional services with service model design and capability assessment projects.



84
patients from regional areas were newly diagnosed with childhood cancer in FY 2022-23, which represents **13%** of the **647** regional families affected by childhood cancer and supported by the ROSCP during the year



The Sporting Chance Cancer Foundation funds the Bob Skilton Outreach Nurse, who works under the PICS program in providing onsite education and support in regional Victoria.

Albury Wodonga Regional Nurse Coordinator

During 2022-23, PICS collaborated with Albury Wodonga Health and the Albury Wodonga Regional Cancer Centre Trust Fund in developing a local nursing role to coordinate cancer care for families with children or adolescents undergoing cancer treatment in the region. Boosting the existing Program with dedicated local support, this role is the first of its kind in regional Victoria; and a pilot for the PICS Regional Outreach and Shared Care Program's expansion plans. The new Regional Nurse Coordinator (RNC) role, which commenced in April 2023, will also provide paediatric oncology education to emergency department and paediatric ward staff in Albury and Wangaratta; develop and implement local policies and procedures to support up to date evidence based care; identify areas for improvement, and implement a fever and neutropenia pathway in the children's ward.

In the first three months since RNC Joanna Owen stepped into the role, there were:

- **58 patients** and their families being supported; 75% from Albury Wodonga and surrounds, and 25% from Wangaratta and surrounds
- several new diagnoses of childhood cancer in the region
- more chemotherapy being provided locally, where it was safe to do so
- increased local imaging and pathology facilitated.

"The response from families has already been overwhelmingly positive.

Having a central point of reference who is on the ground locally and understands the intricacies and processes of local organisations has meant timely and seamless coordination of care, and accommodates the needs of the child to provide extra support locally and avoid an unnecessary trip to Melbourne."

- Joanna Owen,
Albury-Wodonga Regional Nurse Coordinator

This new RNC role has enabled:

- the formation of relationships with local pathology services to better support children and adolescents on cancer treatment.
- timely referrals to local counselling services, to assist patients and families with cancer diagnosis associated trauma.
- establishing a real time link with RCH treating teams, facilitating timely treatment, provision of advice, and clear communication with the treating team.
- transfer back home to family and friends as early as is safely possible in their treatment, to continue with shared care.
- reduced trips to Melbourne for families, with support by the RCH teams and RNC for treatments (such as blood tests, blood product support, medical reviews, medical imaging, local paediatrician reviews with assisted telehealth) closer to home when safe and possible.
- families to be linked in with local support services such as Country Hope and Cancer Hub.

Albury Wodonga Regional Cancer Centre Trust Fund Inc.



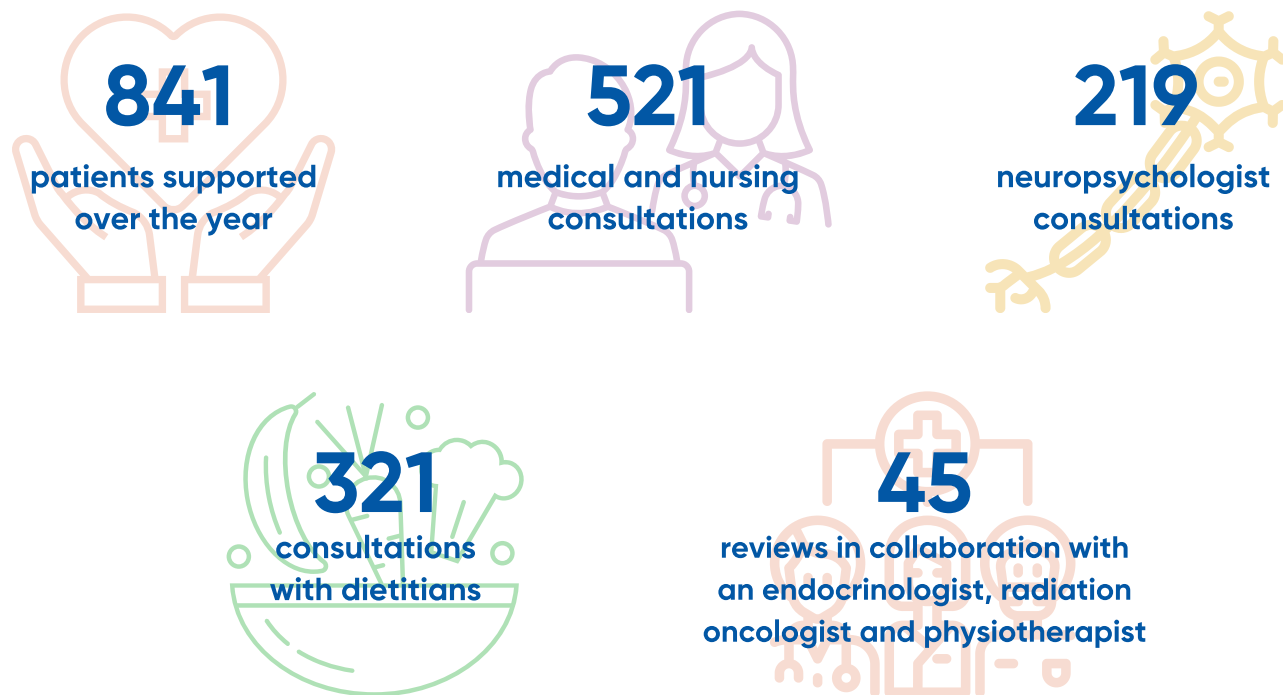
Improving paediatric cancer care in Victoria

Clinical programs

The Long Term Follow-up Program (LTFP)

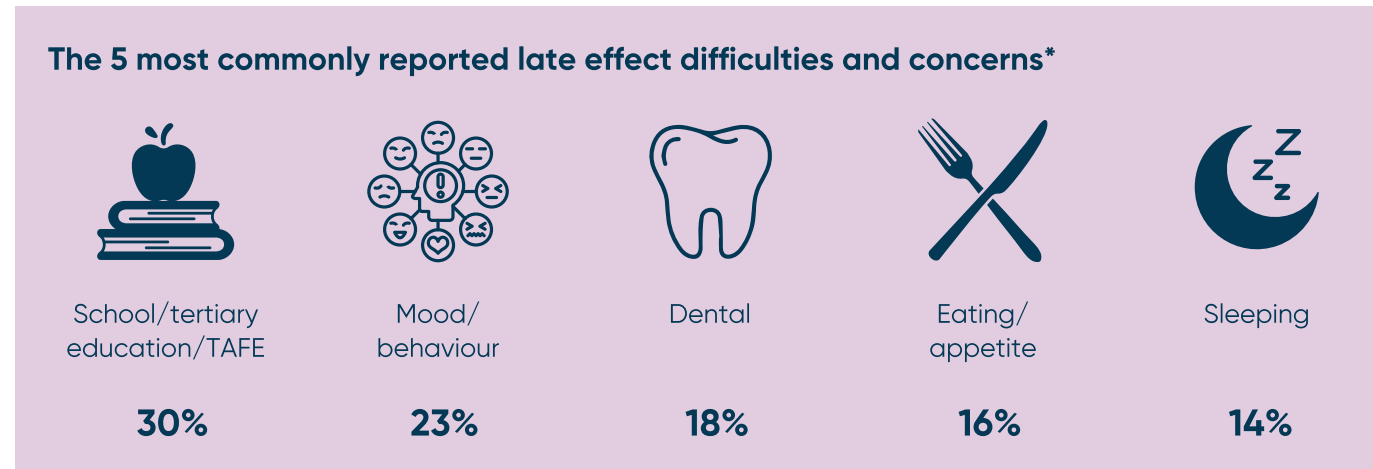
The PICS Long Term Follow-up Program (LTFP) provides tailored multidisciplinary care to children and adolescents following cancer treatment, as they begin to complete cancer surveillance, and until they reach 18 years of age. The program has been operating across Victoria in collaboration with the state's children's cancer centres since 2008, caring for a total of **2129** patients during that time.

As of the end of the 2022-23 financial year, the program was supporting **841 patients**, with 140 new to survivorship care. **521 appointments** were delivered during the year.



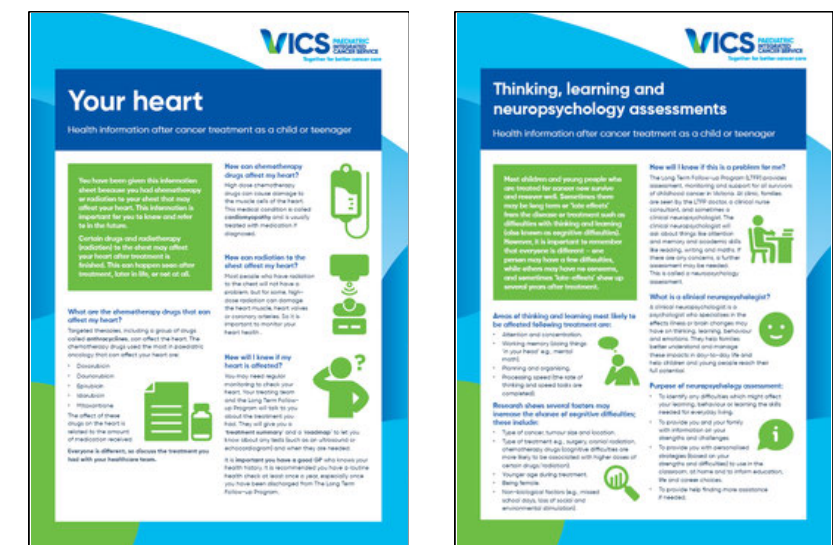
The structure of appointments and care are based on the type of cancer and cancer treatment the child or adolescent had, and their individual follow-up needs as indicated by the LTF pre-clinic questionnaire; with focuses on surveillance for late effects of cancer and cancer treatment, impacts on growth and development, and health promotion.

The LTFP also provides an effective service model to enable childhood cancer survivors to safely transition from the paediatric to the adult health care sector.



*according to LTF pre-clinic questionnaire responses in FY 2022-23. Percentages out of total number of responses.

The LTFP recommendation implementation project (see page 6) has delivered a range of consumer-led enhancements to the program so that it can continue to meet the needs of patients and their families as demand and understanding of complexity grows. This includes a growing range of additional resources (right) for patients and families on a variety of late effects such as heart health, thinking and learning, and fertility.



In addition, an important project was undertaken to develop the LTFP Clinical Practice Guidelines (CPGs). As LTFP Clinical Nurse Consultant Susan Skinner explains 'The LTF Clinical Practice Guidelines are a specialised resource to enable clinicians to provide consistent expert opinion and evidence-based care, to monitor survivors of childhood cancer for the potential development of late effects or complications from their cancer treatment. The Guidelines promote health surveillance based on an individual's previous diagnosis and treatment to enable children, young adults and their families to understand the importance of their own particular future survivorship needs and optimise their health outcomes into the future.'

The LTFP also provides and supports education opportunities to build capacity and knowledge around childhood cancer late effects and survivorship. In FY 2022-23, the program welcomed 9 allied health placements as part of the Australian Cancer Survivorship Centre (ACSC) Clinical Placement Program in Cancer Survivorship (CPPiCS), supported one PICS nursing fellowship placement, and hosted 4 RCH clinical fellows as part of their outpatient rotation.

Improving paediatric cancer care in Victoria

Education

PICS is committed to increasing standardisation and delivery of best practice paediatric oncology care across the state, and indeed, nation. To facilitate this, PICS provides and facilitates medical, nursing and allied health-focused education across a variety of delivery methods, including:

- face-to-face education sessions delivered at the RCH, MCH, all nine regional shared care centres across Victoria, and in Tasmania
- e-learning modules specific to paediatric oncology, freely available online
- the PICS Nursing Children with Cancer Fellowship
- facilitating clinical observation placements for allied health professionals.

PICS also produces and implements a wide range of frameworks and resources, available [on our website](#), that enable best practice cancer care, including:

- *PICS Framework for continuing professional development for nurses working with children and adolescents with cancer*
- a suite of Paediatric Oncology Care Pathways (OCP)
- Adolescent and Young Adults (AYA) OCP, released in 2022
- a video suite covering late complications of cancer and cancer treatment topics
- *Introduction to paediatric oncology* e-learning pack for administrative, allied health, and support staff, released in 2021.

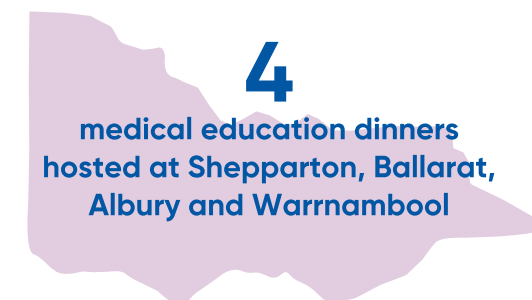
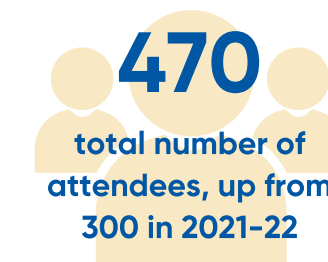
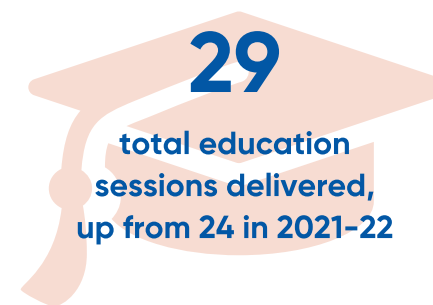
Face-to-face education and training

PICS education sessions provide knowledge and skill attainment opportunities for those that provide care for children and adolescents with a cancer diagnosis. These sessions are delivered in Melbourne (in collaboration with the RCH and MCH) and across regional Victoria, and are primarily tailored to the nursing workforce but attendees can include medical staff, allied health professionals, and teachers. Topics include:

- an introduction to foundations of paediatric oncology
- central venous line care management
- emergency management of febrile neutropenia
- low-complexity chemotherapy
- new and emerging treatment protocols and guidelines in paediatric oncology.

Regional Outreach and Shared Care Program education

As part of the Regional Outreach and Shared Care Program, the Clinical Nurse Consultant delivers face-to-face education and training sessions at the nine regional centres across Victoria, and supports delivery at the RCH, MCH, and in Tasmania.



Chris Williams, ROSCP CNC, delivering paediatric oncology education in Tasmania

Improving paediatric cancer care in Victoria

Education

E-learning modules

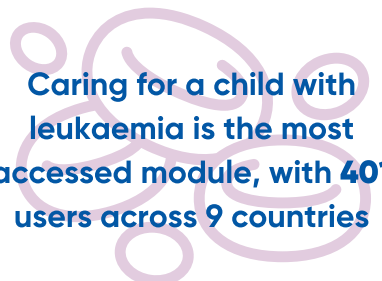
Together with staff from the RCH, MCH, and Peter MacCallum Cancer Centre, we have developed a suite of e-learning modules for the paediatric oncology community on a range of topics to support health professionals treating paediatric cancer patients. These modules are freely available via the eviQ Education online platform, and are also available via the RCH and MCH learning management systems. These modules are included in most ANZCHOG Nurse Education programs, and are widely accessed across Australia and New Zealand. They also form part of the recommended learnings in relation to the PICS face-to-face education and training sessions.

As of end of the 2022-23 year, there are 9 modules covering topics such as: caring for a child with leukaemia, managing paediatric fever and neutropenia, and procedural pain management.

View the range of modules [on eviQ Education](#).



PICS e-learning modules were accessed 2066 times globally, including countries in Europe, Africa, Asia and North America.



Caring for a child with leukaemia is the most accessed module, with 401 users across 9 countries

The PICS Nursing Children with Cancer Fellowship

The PICS Nursing Children with Cancer Fellowship provides Victorian nurses with the opportunity to develop a more complete understanding of paediatric cancer care.

Over an 8-week non-clinical fellowship, the successful nursing applicants build on their existing clinical experience in children's cancer care, by visiting and learning from peers at other children's cancer centres and oncology services at Monash Children's Hospital, Peter MacCallum Cancer Centre, and The Royal Children's Hospital.

Participants engage with different departments and services who provide cancer care; and through observation of practices, protocols and treatments they may otherwise not be exposed to, they build a more integrated understanding of the various elements in the patient care pathway.

On completion of the fellowship, nurses develop a project to share their experiences with their respective health service, to generate discussion, ideas for local improvement, and to translate their learnings into practice.



"The Fellowship has given me the opportunity to be non-clinical in a space which allowed observation, education, learning, the opportunity to ask questions and seek further information."

This experience has been invaluable, I have learnt so much over the eight weeks! I loved that PICS were open to my needs and what I wanted to get out of the Fellowship."

**- Alice Greenslade, Clinical Nurse Specialist,
2023 PICS Nursing Children with Cancer Fellowship participant**

The fellowship resumed in 2023, after a pause due to COVID restrictions. This year we welcomed Alice Greenslade, a Registered Nurse from the outpatient oncology unit, 'Reef', at Monash Children's Hospital. Alice's post-fellowship project will focus on supporting patients pre-and-post bone marrow transplant.

We look forward to welcoming a Royal Children's Hospital nurse to the fellowship program later this year. In the next 12 months, we plan to expand the PICS Nursing Children with Cancer Fellowship to include opportunities for our regional and rural partner health service nurses.

Clinical placements for allied health professionals

The Clinical Placement Program in Cancer Survivorship (CPPiCS) led by the Australian Cancer Survivorship Centre (ACSC) aims to build junior medical, allied health professional and practice nurses' knowledge and confidence, in delivering quality cancer survivorship care across Victoria.

From 2022-23, the PICS Long Term Follow-up Program (LTFP) has collaborated with the ACSC to offer placements with a focus on late effects of paediatric cancer treatment, and family-centred survivorship care.

These observational placements are offered at Monash Children's Hospital, The Royal Children's Hospital, and regional centres, as appropriate.

Throughout 2022-23, 9 placements were completed, with another 9 scheduled for the next financial year.

Presentations and publications

Publications

- Victorian Paediatric Integrated Cancer Service. *Optimal care pathway for adolescents and young adults with cancer*. **Cancer Council Australia**. ISBN: 978-1-76096-862-5, December 2022, <http://www.cancer.org.au/OCP>.
- Walker H, Shanthikumar S, Cole T, Neeland M, Hanna D, Haeusler GM. *Novel approaches to the prediction and diagnosis of pulmonary complications in the paediatric HSCT patient*. **Current Opinion in Infectious Diseases**, 35(6):493-499, December 2022. DOI: [10.1097/QCO.0000000000000883](https://doi.org/10.1097/QCO.0000000000000883).
- Walker H... Haeusler GM. *Non-neutropenic fever in children with cancer: management, outcomes and clinical decision rule validation*. **Pediatric Blood Cancer**, 2022 Dec;69(12):e29931. DOI: [10.1002/pbc.29931](https://doi.org/10.1002/pbc.29931).
- Jackson TJ, Napper R, Haeusler GM, et al. *Can I go home now? The safety and efficacy of a new UK febrile neutropenia protocol for risk-stratified early discharge on oral antibiotics*. **Archives of Disease in Childhood**, 2023;108:192-197. DOI: [10.1136/archdischild-2021-323254](https://doi.org/10.1136/archdischild-2021-323254).
- Butters C... Haeusler GM. *Adverse effects of antibiotics in children with cancer: are short course antibiotics for febrile neutropenia part of the solution?* **Expert Review of Anti-infective Therapy**, 2023 21:3, 267-279. DOI: [10.1080/14787210.2023.2171987](https://doi.org/10.1080/14787210.2023.2171987).
- Yeoh D, McMullan BC, Clark JE, Slavin MA, Haeusler GM, Blyth C. *The challenge of diagnosing invasive pulmonary aspergillosis in children: a review of existing and emerging tools*. **Mycopathologia**, 2023 Apr. DOI: [10.1007/s11046-023-00714-4](https://doi.org/10.1007/s11046-023-00714-4).
- Andrew EC... Haeusler GM. *Density of antibiotic use and infectious complications in pediatric allogeneic hematopoietic cell transplantation*. **Transplant Infectious Disease**, 2023 Apr;25(2):e14018. DOI: [10.1111/tid.14018](https://doi.org/10.1111/tid.14018).

Invited talks and presentations

- **Australian Cancer Survivorship Centre - 2022 Community of Practice Meeting**, *Inside the Victorian Long Term Follow-up Program Model of Care and Service Review*. Victoria, Australia, November 2022.
- **National Centre for Antimicrobial Stewardship symposium 2022**, *The long and the short (course) of antibiotics for febrile neutropenia*. Melbourne, Australia, November 2022.
- **National Youth Cancer Service - 2022 Community of Practice Meeting**, *Development of a Nationally Guided Optimal Care Pathway for AYA with Cancer in Australia*. Brisbane, Australia, November 2022.
- **Victorian Comprehensive Cancer Centre - Monday Lunch Livestream**, *An optimal care pathway for adolescents and young adults with cancer*. Webinar broadcast in Australia, February 2023.
- **TTS-TID/ASID-ICHSIG (The Transplantation Society - Transplant Infectious Disease/Australasian Society for Infectious Diseases - Immunocompromised Host Special Interest Group) Symposium**, *Antimicrobial stewardship challenges in the paediatric cancer setting*. Adelaide, Australia, April 2023
- **European Congress of Clinical Microbiology and Infectious Diseases (ECCMID) 2023**, *Low-risk FN management in adult and paediatric cancer patients*. Copenhagen, Denmark, April 2023.
- **European Society for Paediatric Infectious Diseases (ESPID) Annual Meeting 2023**, *Early versus Late Stopping Antibiotics in High Risk FN: Embedded trials*. Lisbon, Portugal, May 2023.
- **Global Adolescent and Young Adult Cancer Congress**, *Development of a Nationally Guided Optimal Care Pathway for AYA with Cancer in Australia*. California, USA, June 2023.



Financial summary

PICS revenue and expenses	Balance brought forward (1 July 2022)	\$283,828
	PICS Victorian Government grant	\$1,385,139
	Other revenue / grant income	\$49,740
	<i>PICS office salaries and other clinical positions</i>	\$1,372,915
	<i>Operating expenses</i>	\$61,964
	<i>Statewide and local project expenses</i>	\$-
	PICS surplus / (deficit)	\$283,828

LTFP revenue and expenses	Balance brought forward (1 July 2022)	\$-
	LTFP Victorian Government grant	\$630,930
	Other revenue / grant income	\$39,994
	<i>LTFP office salaries and other clinical positions</i>	\$673,206
	<i>Operating expenses</i>	\$1,778
	LTFP surplus / (deficit)	(\$4060)

ROSCP revenue and expenses	Balance brought forward (1 July 2022)	\$-
	ROSCP Sporting Chance Cancer Foundation grant	\$105,000
	<i>ROSCP salaries</i>	\$105,000
	ROSCP surplus / (deficit)	\$-



Thank you and acknowledgements

We thank the members of our Governance Executive Committee, and the health service staff and researchers who partner with us in our work. We thank our collaborators, and the consumers who help us and push us to deliver the best results for patients and families.

We acknowledge the Victorian Government for its ongoing support, and both the Sporting Chance Cancer Foundation and the Albury Wodonga Regional Cancer Centre Trust Fund for the financial support of the Regional Outreach & Shared Care Program. We also thank our patients and their families who were generous with their time throughout the year.

PICS acknowledges Victoria's Aboriginal and Torres Strait Islander communities and their rich and enduring culture, and pays respect to their Elders past, present and emerging. We acknowledge them as Australia's first peoples and as the Traditional Owners and custodians of the land and water on which we rely.





The Victorian **PAEDIATRIC INTEGRATED CANCER SERVICE (PICS)**



The Victorian Integrated Cancer Services are supported by the Victorian State Government

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