

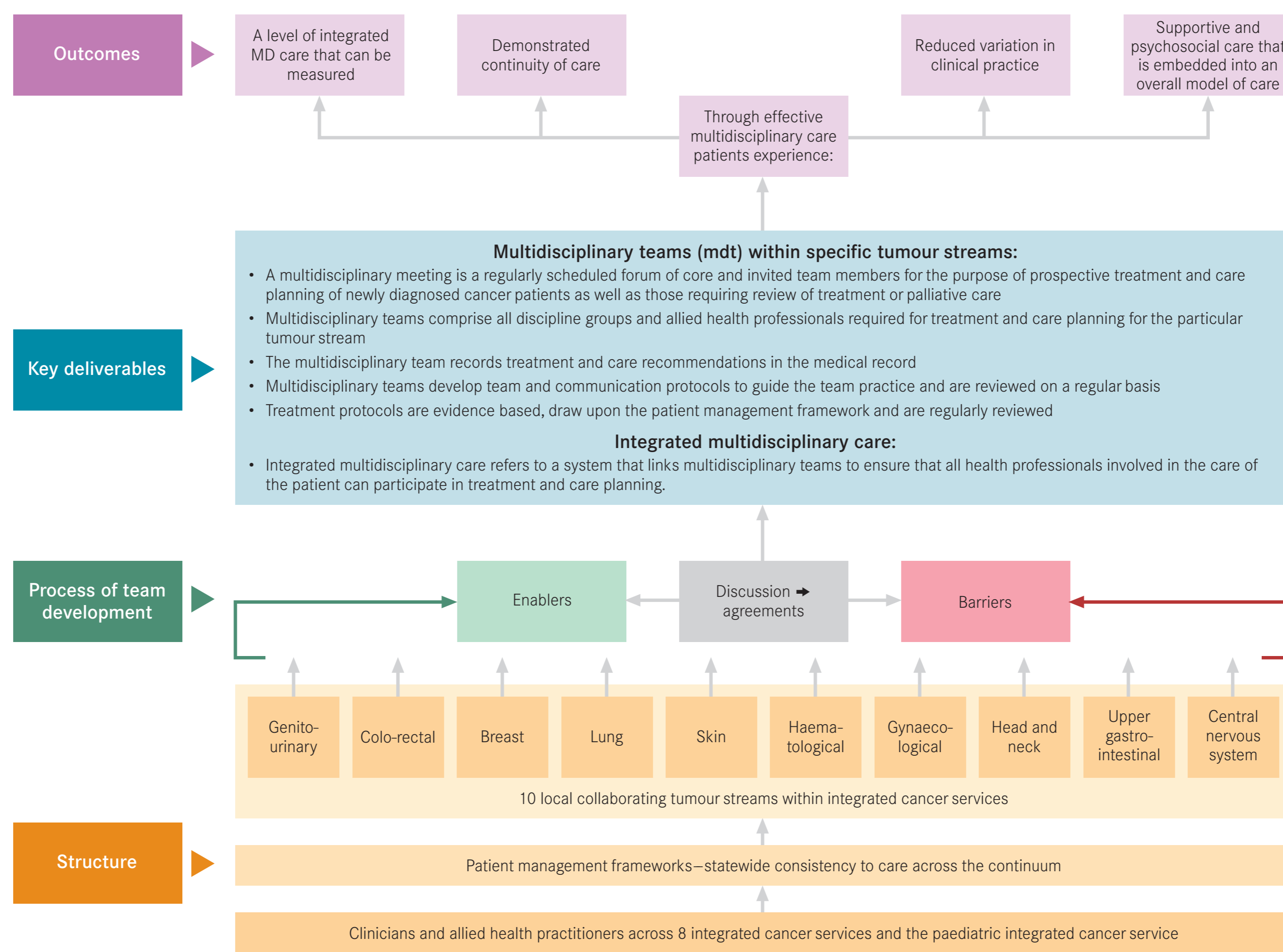
Statewide multidisciplinary care project

Multidisciplinary care

“...an integrated team approach to health care in which medical and allied health care professionals consider all relevant treatment options and develop collaboratively an individual treatment plan for each patient” (NBCC, 2005).

Importantly multidisciplinary care encompasses:

- A collaborative, group decision-making approach
- A focus on continuity of care
- Development of pathways and protocols for treatment and care
- Development of appropriate referral networks, including appropriate referral pathways to meet psychosocial needs
- Development of team protocols and guidance
- Development of multidisciplinary team meeting audit mechanisms
- Consumers/patients:
 - are aware that care is managed in this manner and provide consent for their case to be discussed
 - understand the process, know that they will be informed about the treatment and care recommendations and will be involved in decision making.



- The growing body of national and international literature that supports the provision of multidisciplinary care for cancer patients
- The support by clinicians world-wide for provision of cancer care in this manner
- The Commonwealth Government regards multidisciplinary care as an integrated team approach, a basic requirement in the delivery of cancer services and is recognised as the standard to be achieved in the National Service Improvement Framework for Cancer.

Barriers to multidisciplinary care

- Resistance to change by clinicians
- Lack of funding to support the multidisciplinary care model
- Lack of time on the part of clinicians to attend multidisciplinary meetings
- The public/private sector system differences
- The issue of patient ownership
- Workforce issues and the pressures on disciplines such as pathologists who may need to attend several meetings each week
- The unknown cost of multidisciplinary care
- The difficulty of establishing multidisciplinary care in rural and remote areas, because of a lack of team members. This however highlights the importance of integration of team members across Integrated Cancer Services or regions to ensure that all disciplines can provide input to treatment and care decisions. This can be facilitated by the use of tele and videoconferencing

Introduction

The Victorian context

The Victorian Government, in November 2002 through the Victorian Cancer Policy, recognised the need for a strategic approach to cancer care and committed to a statewide approach to redevelopment of cancer services:

- Improvement in safety and quality through implementation of best practice and clinical guidelines
- **Improved access to coordinated, multidisciplinary care**
- Development of a four-year cancer care fund which will support the development of a Cancer Services Improvement Program, modelled upon the strengths of the BreastCare Victoria approach.

In 2003, the Victorian Government endorsed A Cancer Services Framework for Victoria (CCore, 2003). This framework sets out two major areas of reform. These are the establishment of the Integrated Cancer Services (ICS) across rural and metropolitan Victoria and the delivery of clinical treatment and care through ten major tumour streams. The purpose of the tumour streams is to focus on reducing variations in care across the State and promote best practice through the development and implementation of evidence-based practice and standards of care for each of the tumour streams. More than 90% of cancers in Victoria are accounted for by 10 organ/system specific tumour streams. These are: genito-urinary cancers (prostate, bladder, kidney, testis); colo-rectal cancer; breast cancer; lung cancer; skin cancers (notably melanoma); haematological malignancies (lymphoma, leukaemia, myeloma); gynaecological cancers; head and neck cancers; upper gastro-intestinal cancers (oesophagus, stomach, pancreas, hepato-biliary system); and central nervous system.

The Victorian multidisciplinary statewide project

It is well documented and accepted that multidisciplinary care represents best practice in terms of treatment planning and care for cancer patients. An effective multidisciplinary approach can result in:

- Improved treatment planning through consideration of a full therapeutic range and thus improved outcomes (Sainsbury et al, 1995; Chang et al, 2001; Ansell, 2001)
- Improved team communication (Midgley et al, 1996)
- Survival benefit (Junor et al 1994)
- Increased recruitment into clinical trials (McVie, 1998; Magee et al, 2001)
- Detection of emotional needs of patients (Butow et al, 2002)
- Reduction in minor psychological morbidity of team members (Haward et al, 2003)
- Reduction in service duplication, improved coordination of services and development of clear lines of responsibility (Barr, 1997)
- Improved sharing of incidental information and informal information sharing prior to and after meetings (Midgley et al, 1996)

Objectives

The objectives of the multidisciplinary project include:

- Development of a comprehensive knowledge base of the national and international literature on multidisciplinary care for dissemination throughout all Integrated Cancer Services (ICS). This will promote clear understanding of the varied terminology associated with multidisciplinary care

- Scoping of multidisciplinary care to identify and analyse the characteristics of:
 - Services where multidisciplinary care is well developed in individual tumour streams and the type of multidisciplinary care implemented
 - Services where multidisciplinary care could be improved in each of the tumour streams
 - Services and streams where multidisciplinary care is yet to be implemented
- Identification of models that demonstrate a creative approach to achieving multidisciplinary care
- Fostering and formalisation of partnerships and networks between health care providers to facilitate spread of the multidisciplinary approach to care
- Development of a database of statewide multidisciplinary activity and identified resources
- Development of resources to support the implementation of multidisciplinary care
- Identification of a range of key advisers on multidisciplinary care who can act as experts and mentors to services
- Organisation of a national forum on multidisciplinary care to establish current practice, identify key issues in Australia and possible future strategic directions
- Oversight of the development and evaluation of a range of different multidisciplinary models

Multidisciplinary teams

Multidisciplinary teams comprise health care practitioners required for all treatment and care decisions in a particular tumour stream. Team members may be from the primary, community and acute settings, the private and public sectors and may be from several health services. Teams may be:

- Formed within a health service, but encompass clinicians from all sectors
- Within a region, incorporating clinicians from all health services and sectors
- Integrated across and between integrated cancer services.

Multidisciplinary meetings

A multidisciplinary meeting is a regularly scheduled forum of core and invited team members for the purpose of prospective treatment and care planning of newly diagnosed cancer patients as well as those requiring review of treatment plans or palliative care.

Enablers to multidisciplinary care

- International research has demonstrated that survival for cancer patients improves and best practice utilised when treatment and care decisions are made by a multidisciplinary team
- The existence of clinical practice guidelines that promote and support multidisciplinary care
- Multidisciplinary care is well established internationally in the United Kingdom, Canada and within the United States Cancer Centre's Accreditation

Integrated multidisciplinary care

Integrated multidisciplinary care refers to a system which links teams to ensure that all health professionals involved in the care of a patient can participate in the planning of their care. This includes linkage of:

- The primary and community sectors through the entire pathway to follow-up and palliative care
- Smaller teams to larger centres
- Teams to specialist centres.

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Further information

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