



PROJECT SCOPE SUMMARY & TERMS OF REFERENCE

Project Title	MIDLAND CANCER NETWORK PSYCHO – SOCIAL PROJECT		
Project Reference		Other Reference	
Project Sponsor	Network Manager	Project Manager	Inequalities Portfolio
Advisory Group	Network Executive group		
Project Start Date	August 1 st 2008	Project End Date	March 31st 2009

PROJECT DEFINITION	
Purpose / Background	<p>In the Midland region there is no formalised psycho-oncology service. The Waikato/BOP Cancer Society on request does fund psychology sessions for cancer patients in the community and Mental health services provide crisis intervention. However health professionals are not always aware of supportive care services available.</p> <p>A Ministry funded cancer control implementation project report on the national cancer psychological services stocktake 2005 – 2006 (Surgener L. etal 2006) indicated there are inequalities for the Midland region compared to other parts of NZ in terms of access for patients and the level of psychological services providers.</p> <p>The MidCentral DHB psycho-oncology service adapted the National Comprehensive Cancer Network (NCCN) distress management tool for cancer patients in 2006. Subsequent to their actions they provide the only formal psycho-oncology service to cancer patients in NZ. Patient referrals are received via the Palmerston North hospital the referral pathway has recently been extended to some primary care services to refer their cancer patients. The establishment of this service has seen a drive by health professionals to develop services locally elsewhere in NZ.</p> <p>Waikato DHB utilised one off funding and contracted the Psychology Centre to develop a Waikato psycho-oncology model of care and business plan (2007). However the draft plan was not endorsed by the Waikato DHB executive group. Further work has not occurred due to limited resources, coupled with Midland Cancer Network work programme priorities and the impending national supportive care guidelines.</p>

	<p>In June 2008 the Midland Cancer Network executive group mandated a project to identify an appropriate psycho-social assessment tool for cancer patients in the Midland.</p> <p>The Midland Cancer Network has identified through its work programme and workshops (i.e. Lakes DHB) that health professionals are often unaware of the supportive care services available to assist cancer and palliative patients.</p> <p>It is envisaged that there will be a phased approach to developing psycho-social services for cancer control, for the Midland region. Phase 1: develop a psycho-social assessment tool and system Phase 2: stocktake of supportive care services and providers (linked to national supportive care guidelines) Phase 3: development of audit tool for monitoring and evaluation of assessment tool/pilot.</p> <p>This project scope focuses on phase 1 – development of a psycho-social assessment tool and supporting system.</p>
<p>Relationship to NZ Cancer Control Strategy Action Plan</p>	<p>Goal 4 of the NZ Cancer Control Action Plan 2005 – 2010 states that psycho-social support is an essential component of the total care and support needs of cancer patients their carers/family. The NZ Cancer Control Action Plan 2005 – 2010 further states that for cancer patients who require psycho-social support that access to services should be made available which includes the following:</p> <ul style="list-style-type: none"> • All health and social care professionals • Health and social care professionals with additional expertise • Counsellors and psychologist • Mental health specialist and psychological and psychiatric specialists. <p>Given the serious implications of cancer it is important to consider the likely psychological impact upon a cancer patient. There are also associated crisis points with cancer to consider which includes:</p> <ul style="list-style-type: none"> • At the time of diagnosis, • During treatment times • Towards treatment end • During the time of recurrence • Palliative phase <p>Ideally cancer related distress should be assessed for cancer patients at all stages of the cancer journey.</p>
<p>Project Vision</p>	<p>To reduce the impact of cancer by meeting the psycho-social needs of cancer patients and reduce inequalities.</p>
<p>Phase 1 Objectives</p>	<ul style="list-style-type: none"> • To identify adopt/adapt a psycho-social assessment tool for the Midland region • To gain consensus for sites to pilot the assessment tool in the

<p>Principles</p>	<p>Midland region</p> <ul style="list-style-type: none"> • To test that the tool is practical for both clinicians and patients • To provide education and training needs for health professionals to apply the tool • To evaluate and monitor the ability to complete referrals to current and available support services • To list the supportive care services that cancer patients are currently being referred to in the region • To develop an implementation plan with implications to rollout within the Midland region <p>To utilise current psycho-social services during phase 1 of the project prior to further extension Use of Midland Cancer Network planning processes Ensuring services and programmes are accessible to cancer patients Utilise national supportive care guidelines once developed Utilise best practice models Reducing inequalities</p>
<p>Key Stakeholders</p>	<p>Midland Cancer Network stakeholders Mental Health services Psychology services Oncology and palliative care services Supportive care services Counselling services</p>
<p>Key Participants</p> <p>Working group Phase 1</p>	<p>Steering group – Midland Cancer Network Executive Group</p> <p>Dr Charles De Groot - Chair Caleb Lewis - Project Support</p> <p>Waikato DHB Dr Glenys Round – Radiation Oncologist Dr Marion Kuper - Medical Oncologist Janet Johnson – Staff Nurse, Oncology Suzanne Ryder – Clinical Nurse Educator, Oncology Outreach Louise Spellman - Breast Physician Stephanie Campbell-Wilson - Gynaecology Cancer Clinical Nurse Specialist Kim Holt - Operations Manager</p> <p>BOPDHB Lorraine Hammersley – CNS Clinical Nurse Coordinator, Cancer Care Colleen Kendrick - Cancer Society</p>

	<p>Anne Davidson - Cancer Society Mike Agnew - Portfolio Manager, Planning and Funding</p> <p>Lakes DHB David Boles – Cancer Nurse Specialist Denise Werpachowski - District Nursing Shelley Kirk - Social Work</p> <p>Other Phillipa Thompson - Consultant Clinical Psychologist, The Psychology Centre</p>
Project Linkages	<ul style="list-style-type: none"> • NZ Supportive Care Guidelines Project (in progress) • Midland Cancer Network Strategic Cancer Control Plan (in progress) • BOP, Lakes & Waikato DHB Cancer Control Action Plans
Critical Success Factor / KPIs	<ul style="list-style-type: none"> • Gaining consensus of all stakeholders • Utilising Midland Cancer Network members • Project management oversight • Systematic processes to support implementation
Benefits	<ul style="list-style-type: none"> • Staff are able to support cancer patients and enable access to psycho-social services where required • Patients can manage the psychological stress of cancer • Early intervention
Key Deliverables	<ul style="list-style-type: none"> • Psycho-social assessment tool • Orientation and education programme for staff on the use of the assessment tool
Phase 1: Scope Inclusions /	<ul style="list-style-type: none"> • Adult oncology • Cancer patients assessed at key stages through the journey eg. diagnosis, treatment and post-treatment
Phase 1: Exclusions	<ul style="list-style-type: none"> • Paediatrics / Child Health • Primary/community • Palliative care • Stocktake of supportive care services
Key Inequalities focus areas	<ul style="list-style-type: none"> • As aforementioned a significant inequality is a lack of Psycho-oncology services for all cancer patients in the Midland. • Reduce inequalities in access to psychosocial services within the Midland region. • Lack of cancer specific services for Maori in the Midland particularly counselling and psychological services refer to (<i>Midland Cancer Network services stocktake June 2008</i>)
Key workforce	It is known that there is limited dedicated psychological workforce

focus areas	for cancer control. Workforce focus areas will be specific to the identified initiatives developed as a result of this project.	
Key Assumptions	<p>Psycho-social assessment tool will assist to improve patient care and meet the needs</p> <p>The project will be implemented under the general direction of the Midland Cancer Network. The participating organisations will support this work and promote across organisations and / or district</p> <p>Routine reporting will be required to ensure the assessment tool meets the desired outcome.</p> <p>That the Midland Cancer Network will support and be resourced to advance the NZ supportive care guidelines (phase 2 approach)</p>	
Key Constraints	Working group members ability to participate in addition to normal work duties	
Key Risks and Mitigating Strategies	Risk	Mitigating strategies
	Lack of engagement	Communication and coordination with all relevant stakeholders
	Lack of consensus	Encourage feedback
	Stakeholders expectations exceed available resource	Communications plan Project prioritisation framework Open and transparent communication
	Lack of stakeholder buy-in, competing agendas	Executive leadership Communications plan Good relationship management with key stakeholders Active stakeholder participation in the project planning and prioritisation processes
Project milestones delayed	Realistic project plan Strong project management Regular reporting of project variance and highlighting risks as early as possible Articulate project criteria and process	

PROJECT APPROACH	
Project Approach	<p>Phase 1 – establishment phase with development of an assessment tool and supporting system</p> <ul style="list-style-type: none"> • The Midland Cancer Network will undertake a phased and project management approach for this project. • A period of six months has been allocated for the completion of phase 1. • Agreement of overarching approach (project scope) • Establish Midland Cancer Network psycho-social project working group • Develop actions to identify and select an appropriate psycho-social assessment tool with associated training and education package for staff

	<ul style="list-style-type: none"> • Develop the evaluation criteria which should capture the needs required of the cancer patient • Identify appropriate test sites to pilot the tool including staffing • Contribute to the development of the regional strategic plan which will be occurring in parallel to this project • Regular reporting to the Midland Cancer Network executive group will be required to highlight project milestones, variances, risks • Development of a prioritised action plan to form the basis of Phase 2 		
Project Milestones	Phase 1	Date	
	<ul style="list-style-type: none"> • Establishment of a working group including a chair and project support person. Develop a list of work group members, and identify key participants for pilot. 		Sept 08
	<ul style="list-style-type: none"> • Develop psycho-social assessment tool with orientation/ training package for staff and a gather a list of support services currently referred to in the region. 		Sept/Oct 08
	<ul style="list-style-type: none"> • Develop a draft evaluation criteria for pilot 		Sept/Oct 08
	<ul style="list-style-type: none"> • Full regional work group meeting held to approve all items developed in September 2008. • Test sites for pilot confirmed and evaluation tool in place. 		Nov 08
	<ul style="list-style-type: none"> • Implement pilot monitor and evaluate 		Dec – Feb 09
	<ul style="list-style-type: none"> • Evaluate pilot (project analyst support) 		Feb - 09
	<ul style="list-style-type: none"> • Report on findings (project support) 		Mar 09
Project Cost	<p>Midland Cancer Network will provide cost related to the project management.</p> <p>Clinical areas will release staff including the working group as able to participate in the project</p>		

References

Cancer control implementation project report on the national cancer psychological services stocktake
 Surgenar, L.etal (2006)

Inequalities project services stocktake June 2008, *MIDLAND CANCER NETWORK*