

MULTIDISCIPLINARY CARE MEETINGS

TERMS OF REFERENCE

1. Objective

- 1.1 To provide leadership and vision for the establishment and development of Multidisciplinary Care to advance best practice, access and quality care for patients. Maintain appropriate, local access to optimal care within the Gippsland Regional Integrated Cancer Services (GRICS).

2. Membership

- 2.1 Membership will comprise of senior clinicians and key clinicians from representing key health services from Gippsland such as surgeons, medical oncologists, radiation oncologists, allied health, general practitioners, pathologists, radiologists, oncology nurses, specialist nurses and psychosocial professionals.
- 2.2 Co-opting people with specific skills and expertise to complete or advise on key tasks will be encouraged.

3. Responsibilities

3.1 LEADERSHIP

- 3.1.1 Enable a formal mechanism for multidisciplinary input into treatment planning and ongoing management and care of patients with cancer through multidisciplinary team meetings.
- 3.1.2 To take responsibility for, and endorse the development, implementation and monitoring of a Multidisciplinary Group.
- 3.1.3 Promoting and implementing the Patient Management Frameworks.
- 3.1.4 To work with the Multidisciplinary Care Coordinator to ensure that planning is consistent with the principles outlined in the Patient Management Frameworks.
- 3.1.5 To work with the Directors and Manager of GRICS to oversee the implementation of recommendations made by statewide cancer groups.
- 3.1.6 To ensure Multidisciplinary Care development and implementation is in response to regional needs as defined by mapping of regional services.

3.2 AIM

- 3.2.1 To support the local tumour streams by ensuring engagement of key services from acute, community, primary and private sectors.
- 3.2.2 To take overall responsibility for Multidisciplinary Care development, quality and performance monitoring.
- 3.2.3 To ensure the GRICS team establishes a stakeholder reference group with regional multidisciplinary representation.

- 3.2.4 To ensure the multidisciplinary care team consists of representation across disciplines and locations within the GRICS to meet clinician and service delivery needs.
- 3.2.5 To support research and access to clinical trials where feasible and appropriate.
- 3.2.6 To collect prospective data of referred cancer stream patients.
- 3.2.7 To address the multidisciplinary processes such as communication and referral patterns of the Cancer Stream Groups.
- 3.2.8 Develop a proforma for multidisciplinary care.
- 3.2.9 Multidisciplinary Care meetings for prospective treatment and care planning.

3.3 ACCOUNTABILITY

- 3.3.1 Ensure there is an appropriate accountability process established between the Multidisciplinary Care team, the Gippsland Regional Integrated Cancer Services (GRICS) as the overall governing body, regional health services, other Integrated Cancer Services (ICS) and the Department of Human Services through accurate reporting of meetings and processes.

3.4 OWNERSHIP

- 3.4.1 Ensure cooperation and collaboration respecting the philosophy, priorities, knowledge and experience of other members and stakeholder groups.

3.5 SUSTAINABILITY

- 3.5.1 Work with regional health services within the ICS in developing, reforming and sustaining Cancer Stream Multidisciplinary Care Teams.
- 3.5.2 Plan for the sustainability of the Multidisciplinary Care Cancer Stream teams in conjunction with the meeting facilitator and Multidisciplinary Care Coordinator.

3.6 MEETING DETAILS

- 3.6.1 Meeting format can be via Multidisciplinary Care videoconferencing, e-mail communication and face to face meetings if necessary.
- 3.6.2 The Chair of the Multidisciplinary Care team is able to call a meeting at any time.
- 3.6.3 The GRICS Multidisciplinary Care Coordinator will distribute the agenda of the Multidisciplinary Care meetings.
- 3.6.4 The Multidisciplinary Care meeting protocols must be adhered to.
- 3.6.5 The Meeting facilitator must ensure patient treatment plans, including history, are recorded by a member of the multidisciplinary team and certify the patient treatment plan recorded are a true and accurate account of the discussed patient treatment plan.
- 3.6.6 The GRICS Multidisciplinary Care Coordinator or a GRICS representative should be in attendance at all Cancer Stream Multidisciplinary Care Group meetings.

3.7 CONSUMERS

3.7.1 Referred patients and Gippsland Clinicians of Breast, Upper GI and Lower GI tumour streams.

3.8 QUORUM

3.8.1 The quorum for meetings will be one half of its members plus one.

3.9 DECISION MAKING

3.9.1 Decisions will be reached by consensus. Where efforts to reach consensus fail, a vote may be taken and decisions carried by a two-thirds majority.

3.10 CONFLICT OF INTEREST

3.10.1 Members will declare potential conflicts of interest. Ordinarily members will refrain from active involvement in decision making on matters of declared interest.

3.10.2

3.11 COMMUNICATION

3.11.1 Communication with cancer groups will be through minutes of meetings and written reports.