

COMPREHENSIVE BREAST CANCER INSTITUTE

ADVOCATE. COLLABORATE. EDUCATE. INNOVATE.

Progress Report July 2023 – December 2023

Metro North Hospital and Health Service



Metro North Health acknowledges the Traditional Custodians of the Land upon which we live, work and walk, and pay our respects to Elders both past and present.

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OVERVIEW

Metro North Hospital and Health Service (Metro North Health) provides significant breast services to the local community and to the broader region. These services include screening services, diagnosis, treatment, management after initial treatment, supportive care and palliative care.

The Comprehensive Breast Cancer Institute (CBCI) supports a service model that provides an opportunity to define the optimal care pathway to improve the experiences and outcomes for people accessing breast services in Metro North Health. A comprehensive model would ensure women and men have equal access to the same high standard of care regardless of where they live or at what stage in the care continuum they enter the system.

OBJECTIVE

The Comprehensive Breast Cancer Institute will facilitate best practice standardised breast care for patients within our health service through clinical care coordination, innovation, education, and research. In the future personalised treatment, surveillance and wellness strategies will be a focus for individuals. The CBC Institute aims to improve geographic access and close service gaps to make high quality care accessible to every Metro North citizen. This will be achieved by creating seamlessly networked services in comprehensive facilities offering world class breast diagnostics and contemporary treatment, informed by the best evidence, and facilitating clinical and basic research.

GOVERNANCE

The CBCI has established strong and committed layered governance groups who have a remit to collectively recommend decisions and seek support by service areas. The effective layered governance consists of four essential layers:

- Strategic
- Clinical/Research
- Operational
- Engagement

The groups work cohesively by ensuring decision making is effective and at the appropriate level to ensure they are accepted and implemented. CBCI governance is led by four committees:



CBCI STEERING COMMITTEE

The Steering Committee is responsible for the overall direction and has oversight of the management of the Institute. It provides strong governance and ensures service delivery; and progresses research and education to strengthen our links with the community and primary providers.

CBCI CLINICAL ADVISORY GROUP

The Clinical Advisory Group supports the CBCI Steering Committee, by providing expert clinical decision support, and by responding to clinical and business partners to define new ways of collaborative working and care approaches. The Group provides committed support to CBCI, and services to ensure service delivery, research, education and clinical care are evidence-based and/or best practice.

CBCI RESEARCH COMMITTEE

The Research Committee, by working with clinical and academic partners to establish an effective research platform, identify and support researchers, work to translate research activities into clinical practice, and connect clinicians with researchers through cooperation. The Committee will provide leadership in the development of the CBCI Research Program. Key priorities being:

- Promote and support academic research capability of clinical and non-clinical staff
- Increase collaboration between researchers within Metro North and connectedness locally, nationally and internationally
- Provide advice and guidance in the development of an agreed research plan to support the development of breast cancer research capability
- In collaboration with internal and external partners, support and facilitate multi-site approval of clinical trials and research capacity to decentralise clinical trial activity.

CBCI COMMUNITY ENGAGEMENT COMMITTEE

The Community Engagement Committee advise the Steering Committee of community and consumer engagement matters, providing a consumer-focused contribution towards the development of the CBCI.



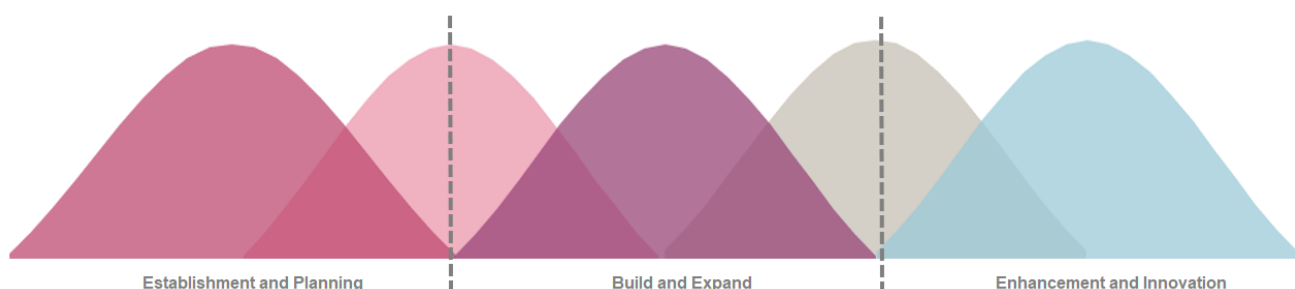
Effective governance is focused on collaboration between breast cancer journey partners to ensure that collective decisions are supported, reducing implementation delays. The key parties engaged in governance at all levels include:



STAGED PLAN

The CBCI is implementing a staged approach which proposes to be achieved through streams of work to be achieved. **We are currently in the Build and Expand stage.**

- Short term (Year 1 – 2) – Establishment and Planning
- Medium term (Year 3 – 4) - Build and Expand
- Longer term (Year 5 beyond) – Enhancement and Innovation





The staged plan approach seeks to transition into practice, research, clinical protocols and service planning to operationalise aspects of planning and organisational change as soon as possible. Each stage will be made up of new services and business change activities, for example clinical protocol implementation.

SERVICE DELIVERY

To achieve the improvements in breast cancer services, seven Pillars of Success have been identified:

- **Networked services** – coordinated networked approach to ensure optimal management
- **New ways of workings** – protocol driven care delivered by the right people locally
- **Capability building** – building capability through education and clinical support
- **Research and development** – using state of the art systems to deliver research based on solid trustworthy data
- **Standardised care** – standardised evidenced care no matter what the location
- **Continuous improvement** – data driven evidenced care delivery, focused on improving value for patients
- **Patient centred care** – building services around the needs of patients, providing patients to local international best practice





Breast cancer services will also be enabled by the following service quality enabling elements:

- Standards of Care
- Scope of Practice
- Governance
- Training and Education
- Clinical Trials
- Data (PROMS and PREMS)
- Consumer Education and Engagement

OUR SUCCESS

CBCI success so far		
		
World first	Queensland first	Brisbane first
Breast reconstruction using 3D engineered biodegradable scaffolds	IORT will reduce 3-6 weeks of radiation treatment to <30 minutes intraoperatively	ROLLIS localising seeds lessen anxiety for the patient & improves the preoperative pathway

BREAST RECONSTRUCTION

In collaboration with the Herston Biofabrication Institute, CBCI is participating in a clinical trial evaluating medical-grade polycaprolactone-PCL breast scaffold implantation with Autologous Fat Grafting (AFG) for breast implant revision and congenital defect correction surgery.

The objective of the trial is to find a better and safer alternative to the current available methods of breast reconstruction and reparative methods. The team is focused on mitigating the devastating effects of breast cancer and the resultant breast deformity arising from unavoidable volume deficits caused by extirpation of the tumour.

The study is trialling an absorbable scaffold indicated for breast implant revision and congenital defect correction surgeries. The scaffold is designed to allow fibrovascular tissue to infiltrate the pores of the device providing mechanical support for the fat grafts.



The primary goal of the clinical trial is to establish and evaluate the safety of the PCL breast scaffold, when used in combination with AFG for breast implant revision and congenital defect correction surgeries.

INTRA-OPERATIVE RADIATION THERAPY (IORT)

The increased use of breast screening has resulted in breast cancer being increasingly diagnosed at early stages. IORT is an innovative treatment option for early stage breast cancer. It involves placing a device that delivers radiotherapy inside the body during surgery. The machine reduces 3-6 weeks of radiation for breast cancer patients to less than 30 minutes. This type of radiotherapy reduces the chance of local recurrence after breast conserving surgery for breast cancer. It is a relatively new technology that uses a single dose given at the time of surgery during the same anaesthetic. Radiation is delivered locally to the tumour bed with minimum exposure and damage to other tissues nearby. The advantages of this machine are:

- Single treatment given at the time of surgery
- Improved patient compliance
- Other treatments such as chemotherapy can start sooner
- Direct visualisation of the target region at surgery ensures accuracy of this very conformal treatment with fewer side effects.

RESEARCH TRIAL

A 12 month trial has taken place on the implementation of IORT technology, with the last patient being seen at the end of November. There have been 20 cases completed and the trial is now at the evaluation stage. Initial results and patient feedback indicate a positive impact from the use of IORT. A short-term evaluation of the completed trial patients will be provided by the end of 2023.

This procedure has been adopted internationally and CBCI has introduced this procedure to Metro North breast cancer patients.

RADIO-GUIDED OCCULT LESION LOCALISATION USING IODINE 125 SEED (ROLLIS)

ROLLIS is a technique where a small seed containing a very low dose of radioactive tracer (Iodine-125) is placed into the breast lesion by the radiologist. Previously, hook wires were used to localise the lesion and have been a standard of care approach in Metro North Health. ROLLIS is an emerging alternative to the conventional Hook Wire Localisation (HWL) procedure, being adapted in clinical care of large tertiary hospitals nationally and internationally. Importantly, it has been shown to be effective (increased sensitivity), efficient, safe, and reducing discomfort for patients before breast-conserving surgery when compared to HWL.



CBCI was instrumental in arranging the purchase of two Specimen Radiology Systems to support the introduction of the ROLLIS technique across Metro North facilities. The acquisition of the systems has provided the necessary technical equipment to perform the newly introduced ROLLIS technique where specialised medical imaging is currently not available.

GRANTS / CLINICAL TRIALS

1. Commercially sponsored (Bella Seno) in collaboration with HBI – First in Human Breast Revision Surgery Clinical Trial – 2022 to 2025 – YTD \$125,000

OUTCOME – Funded

2. MRFF Clinical Trial Activity \$3,952,969 – 3D bioresorbable scaffold in women undergoing breast conservation surgery for breast cancer: medical device safety trial

OUTCOME - Pending

EVENTS

The first community forum was held at the RBWH in November 2022 and was well attended by over 200 participants. The event highlighted the significant accomplishments of the CBCI in the initial two years and plans going forward.

CBCI COMMUNITY FORUM – WEDNESDAY, 25 OCTOBER 2023

A community event held during Breast Cancer Awareness Month at The Komo, Redcliffe from 9.00 am to 10.30 am. The community listened to passionate clinicians speak about the exciting projects in development now and in the future. A Panel was also present on the day to answer any questions community members had. The program included presentations on:

- ROLLIS
- IORT
- Breast scaffold
- Consumer experience
- BreastScreen and breast health
- RBWH Foundation

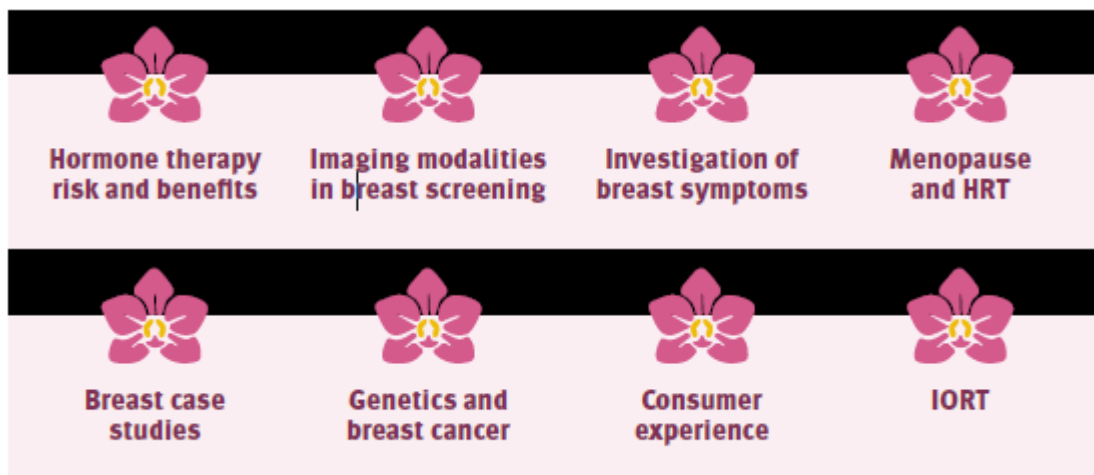
The event was attended by interested health consumers, representatives from community organisations, BreastScreen Queensland, Redcliffe Hospital staff, and the Metro North Health CE and Board Chair.



GP EDUCATION EVENT – SATURDAY, 18 NOVEMBER 2023

The CBCI invited GPs to join a GP Education event held at the Clinical Skills Development Centre from 8.30 am to midday. A vast scope of multidisciplinary presenters attended, including medical oncologists, breast surgeons, breast care nurses, endocrinologists, geneticists, radiologists and GPs with special interest.

The event was very well attended by community GPs, with the event providing over three hours of information and education on:



A survey was conducted at the end of the education session with excellent results. An example of the responses:

- *Did the CBCI GP Education event meet your learning objectives?*

Response – YES 100%

- *Was the day/time/venue convenient for you?*

Response – YES 100%

- *How frequent would you attend this event/similar events relating to breast cancer?*

Response – Bi-annually 50% and Annually 50%

- *How did you find the quality of the presentations?*

Response – 5 Stars 100%



STAFFING

CURRENT STAFFING		
Clinical Director	0.4 FTE	
Operations Director	1.0 FTE	
Data Analyst	0.2 FTE	Anticipated FTE increase next year
Administration Support	1.0 FTE	
FUTURE STAFFING		
Research Manager	0.5 FTE to 1.0 FTE	Anticipated in 2024

THE YEAR AHEAD

CBCI DATABASE

The primary purpose is to allow all Metro North sites to capture their breast cancer data so that it can be used for research, education, quality improvement, reporting and analysis. It will remove the need for duplicate data entry by automating the data integration from other Qld Health sources to remove the chances of human data entry errors. Metro North will have a consistent breast cancer capture tool for all facilities.

ARTIFICIAL INTELLIGENCE (AI)

Exploring a trial of AI mammography for screened and diagnostic patients retrospectively and prospectively.

BREAST SPECIALISATION AT ALL METRO NORTH FACILITIES

Advocating for dedicated breast surgeons (sub-speciality) and supporting breast imaging infrastructure and radiological support at all Metro North facilities.

COMPLETION OF:

- Metro North breast cancer gap analysis
- Clinical protocols – to be a resource to share on the CBCI website which can be shared with the community, and outline how the clinical protocols will be managed within Metro North.