

Cancer Care Coordination in Australia: A Survey of Health Professionals in Cancer Care

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Background: Coordination of care is a critical element of quality cancer care, and effective coordination has become increasingly important given the growing complexity of cancer care. In 2019 the Cancer Care Coordination Group conducted a national survey of COSA and CNSA members exploring the changing nature of the cancer care environment to elicit information about care coordination activities in Australian cancer services.

Aims: The aims of the survey were to describe the nature and scope of care coordination activities in Australian cancer services; and to describe the scope of practice, work experience, referral pathways and learning and support preferences for health professionals appointed in dedicated Cancer Care Coordinator roles.

Methods: The self-completed web-based survey of 37 questions was disseminated via email to all COSA members and to CNSA members. The survey was in two parts: Part 1 asked for opinions of current coordination activities in cancer services in Australia, and all respondents were asked to answer these questions. Part 2 was completed only by those working in positions which have a dedicated care coordination focus, and participants were asked about their scope of practice, referral pathways and professional development needs.

Results: 127 respondents completed part 1 of the survey. Nurses (73%) were the largest health professional among the respondents, followed by medical oncologists (10%). 40 respondents identified as working in dedicated cancer care coordination roles and completed part 2 of the survey. Over 80% of Cancer Care Coordinators indicated they are either satisfied (50%) or very satisfied (34%) with their role. Responses demonstrated a broad range of activities undertaken by individuals in care coordination roles, and the variation in focus of the roles. Care coordinators also identified a range of factors that have facilitated the successful implementation of their role including being part of a supportive multidisciplinary team, support from peers, and support from their employer.

Conclusions: A range of potential roles for COSA in supporting Cancer Care Coordinators were identified, with the most identified role for COSA being to develop standards and guidelines for practice. The survey results help identify the professional development needs of those in dedicated care coordination roles, and will also be used to inform Cancer Care Coordination Group activities. The data will also help the Cancer Care Coordination Group update COSA's Position Statement on Care Coordination.