



## Newsletter/Network News article

### Basal Cell Carcinoma and Squamous Cell Carcinoma

In Australia, there are approximately 2,500 treatments for non-melanoma skin cancer every day. Often treated in general practice, there are several different treatment options that need to be considered on the spot. With the launch of the new non-melanoma skin cancer pathways on [HealthPathways/SEMPH's website] Victorian PHNs are aiming to help support GPs through this complex decision making process.

The newly developed [\[insert pathway link here: Keratinocyte Cancers \(Non-Melanoma Skin Cancers\)\]](#) pathway has been aligned with the nationally recognised and endorsed Optimal Cancer Care Pathways and is designed to offer GPs concise, evidence based content that is easily accessible during a 15 min patient consult. The pathway guides GPs to diagnose, treat and manage non-melanoma skin cancer in general practice where appropriate. In addition, the clinical pathway is accompanied by local referral pathways with specific health service referral information, and credible consumer and clinician resources at your fingertips.

Free for general practice to access, the pathway is written by GPs for GPs, in collaboration with specialists in non-melanoma skin cancer. Log in to the new pathway today.

### Familial Cancer

Assessing familial cancer risk is not straightforward and is often challenging. After a close relative is diagnosed with cancer, a patient may turn to their GP to help them determine their risk of familial cancer. [HealthPathways/SEMPH's website] can assist GPs in providing comfort and advice to patients as well as to assess genetic risk and navigate local referral pathways into genetic testing. It provides information on risk factors based on family history and cultural considerations, as well as preventative strategies affected families can undertake.

The new [\[insert pathway link here: Familial Cancer Syndromes pathway\]](#) has been aligned with the nationally recognised and endorsed Optimal Cancer Care Pathways, which acts as a quick and interactive reference tool with local resources. The pathway guides GPs to assess and refer patients onto genetic testing.

Free for general practice to access, the pathway is written by GPs for GPs, in collaboration with specialists in familial cancer syndromes. Log in to the new pathway today.

## Frequently Asked Questions

### 1. What are Optimal Cancer Care Pathways?

The Optimal Cancer Care Pathways (OCPs) are national guides that describe the best possible cancer care for patients with specific types of cancer.

The pathways describe the key stages in a patient's cancer journey, from diagnosis to survivorship or end-of-life care, and the expected optimal care at each stage to ensure all people diagnosed with cancer get the best care, regardless of where they live or have cancer treatment.



Optimal Cancer Care Pathways have been developed for:

- Aboriginal and Torres Strait Islander
- Acute myeloid leukaemia
- Basal cell carcinoma or Squamous cell carcinoma
- Breast
- Cancer of Unknown Primary
- Cervical
- Colorectal
- Endometrial
- Head and Neck
- Hepatocellular
- High-grade glioma
- Hodgkin lymphoma and diffuse large B-cell lymphoma
- Lung
- Melanoma
- Oesophagogastric
- Ovarian
- Pancreatic
- Prostate
- Sarcoma

## 2. Who created the OCPs?

The Optimal Cancer Care Pathways were developed as part of a national work plan to improve cancer care across Australia, led by the National Cancer Expert Reference Group (NCERG). Each pathway was developed by an expert group including clinicians specialising in the treatment of the particular tumour, GPs and consumers, in conjunction with consultation with medical colleges and peak health organisations.

The OCPs have been endorsed by the National Cancer Expert Reference Group, Cancer Australia and Cancer Council Australia.

## 3. What are OCP HealthPathways?

The OCP HealthPathways project aims to translate the select stages of the OCPs relevant to general practice into HealthPathways to support the adoption of OCPs in general practice. This equates to translating stages 1, 2, 5, 6 and 7 resulting in suite of pathways that focus on prevention, diagnosis and investigations, referral to cancer specialists and into acute care, the acute-primary care interface, and the care and support of cancer patients' post-treatment. All 19 OCPs will be translated into HealthPathways, providing GPs with a dynamic resource that reflects local context and realities (including service gaps, policy and referral information), all in one place.

## 4. How are the OCP HealthPathways being developed?

To support the aim of the OCPs and ensure consistency and equity in cancer care across the state, statewide HealthPathways are being developed. Each PHN will be responsible for developing 1-2 OCP suite/s on behalf of the state. The statewide pathways will be uniform across all PHN catchments with only minor variations added to reflect local service availability and/or to address identified patient needs.

Each PHN will develop localised referral pages which map the local cancer related services within your PHN for each of the OCPs being developed in this project.

## 5. How long until all OCP HealthPathways are available?

There are currently 12 OCP HealthPathways available on the Victorian HealthPathways (or equivalent) sites, with the final 7 OCP HealthPathways being published in October 2020. This means that all 19 OCPs will be translated into OCP HealthPathways and available to GPs by the end of October 2020.



## **6. I can't find a pathway specifically for the Aboriginal and Torres Strait Islander OCP.**

The Aboriginal and Torres Strait Islander OCP has been embedded across all of the OCP HealthPathways to assist in the provision of culturally safe care. A small Aboriginal and Torres Strait Islander flag at the top of the page signifies whether a pathway has been embedded with the Aboriginal and Torres Strait Islander OCP. All pathway suites for cancer types where the incidence rates are comparatively high to non-Indigenous populations have been embedded with the Aboriginal and Torres Strait Islander OCP, for example breast cancer and head and neck cancer.

## **7. How do I access the OCP HealthPathways?**

You will need a login to access HealthPathways. Get in contact with your local PHN to request a login or visit [vtpna.org.au/carepathways-and-referral](http://vtpna.org.au/carepathways-and-referral)

## **8. Who can I contact for more information about this project?**

Get in touch with our statewide coordination team:

**Statewide Project Coordinator** – Roxanne Adams [roxanne.adams@nwmpnh.org.au](mailto:roxanne.adams@nwmpnh.org.au)

**Statewide Project Support Officer** – Laura Beere [laura.beere@nwmpnh.org.au](mailto:laura.beere@nwmpnh.org.au)

Or phone (03) 9347 1188



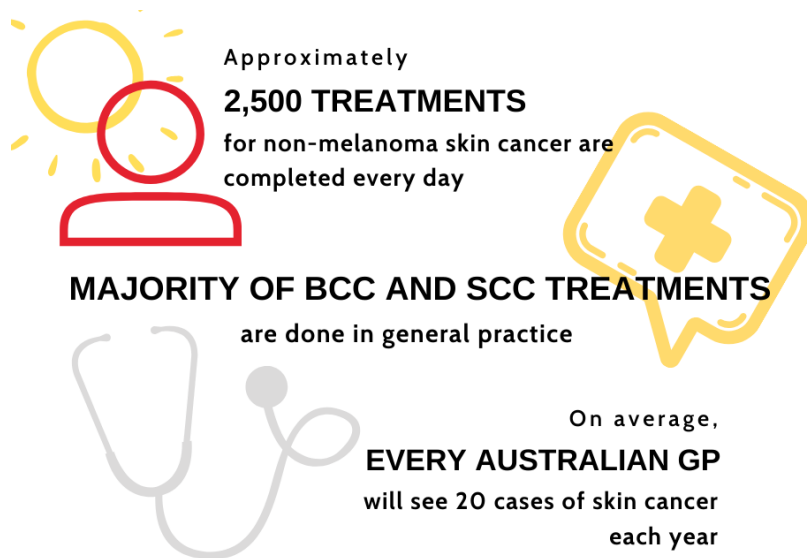
## Social media messages

Social media channels	Suggested dates	Message
Facebook, LinkedIn & Twitter	First week of April*	Around 2,500 treatments of non-melanoma skin cancer will be completed in general practice today. Access free guidance for GPs to diagnose, treat and manage Basal and Squamous Cell Carcinoma through [HealthPathways/SEMPHN's website] today. [insert link]
	Third week of April*	On average, every Australian GP will see 20 cases of skin cancer. Aligned with the national guidelines, Optimal Cancer Care Pathways, [HealthPathways/SEMPHN's website] is helping you to diagnose, treat and manage Basal and Squamous Cell Carcinoma. [insert link]
	Fifth week of April	Written by GPs, for GPs, [HealthPathways/SEMPHN's website] is the resource to access clinical and referral pathways. Translating national guidelines into local health system reality, the platform provides clinicians with information to make the best decisions, at the point of care. [insert link]
	Second week of May	Breast cancer care continues long after active treatment ceases. [HealthPathways/SEMPHN's website] assists GPs in their critical role of delivering safe and effective care, providing information on monitoring for relapse, treatment side effects and psychosocial support. [insert link]
	Fourth week of May*	GPs can play an important role in referring patients and their families affected by cancer on for genetic testing. [HealthPathways/SEMPHN's website] can assist GPs in navigating through the criteria and referral pathway, as well as providing guidance on cultural considerations. [insert link]
	Second week of June	Ovarian cancer is the tenth most common cancer for Victorian women. Early detection can lead to a better prognosis. The ovarian cyst pathway on [HealthPathways/SEMPHN's website] supports GPs to detect early signs of ovarian cancer and provide appropriate supportive care.
	Fourth week of June	Clinical and referral pathways for seven different tumour types are now available on [HealthPathways/SEMPHN's website]. The OCP HealthPathways guide Victorian GPs to manage patients at risk of and with cancer. [insert link]

\*If a PHN wishes to partake in paid advertising then these messages have been tagged as the most favourable ones as they are the lead suites for this quarterly toolkit.



## Images



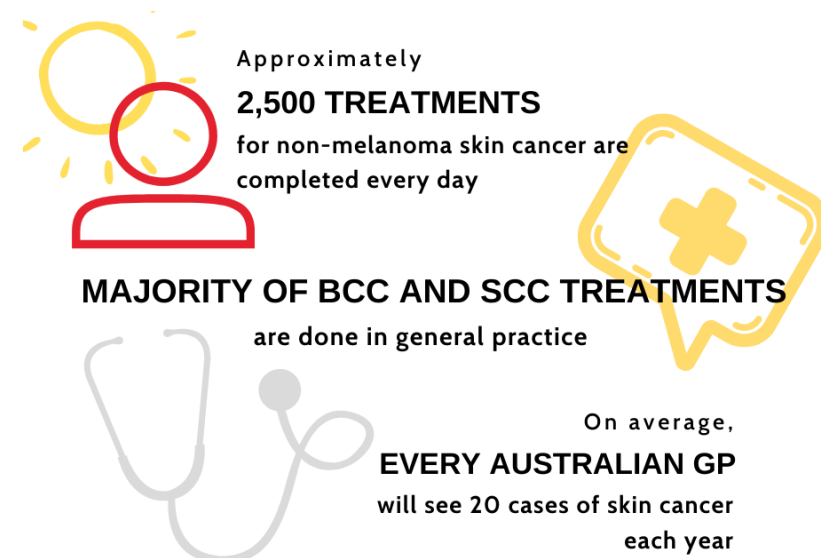
Free access to guidance on diagnosing, treating and managing  
Basal cell carcinoma and Squamous cell carcinoma OCP now available on  
HealthPathways

### Basal cell and Squamous Cell Carcinoma infographic HealthPathways

\*Infographic Data references:

1. Australian Institute of Health and Welfare. *Skin cancer in Australia*. Cat. no. CAN 96. Canberra, Australia: AIHW; 2016 Available from: <http://www.aihw.gov.au/publication-detail/?id=60129555786>

2. Britt H, Miller GC, Bayram C, Henderson J, Valenti L, Harrison C, ... Wong C. *A decade of Australian general practice activity 2006-07 to 2015-16. General practice series no.41*. Sydney, Australia: Sydney University Press; 2016 Available from: [https://ses.library.usyd.edu.au/bitstream/2123/15482/5/9781743325162\\_ONLINE.pdf](https://ses.library.usyd.edu.au/bitstream/2123/15482/5/9781743325162_ONLINE.pdf)



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