

BREASTSCREEN WA QUALITY IMPROVEMENT COMMITTEE

ANNUAL REPORT TO THE PUBLIC FOR 2012
ON
QUALITY IMPROVEMENT ACTIVITIES UNDERTAKEN OR OVERSEEN
BY
BREASTSCREEN WA QUALITY IMPROVEMENT COMMITTEE - WNHS

**Please send completed reports to:
Director, Office of Safety and Quality in Healthcare
Department of Health
PO Box 8172 Perth Business Centre
Western Australia 6849**

If you require any further information, or have any queries, please contact the Office of Safety and Quality in Healthcare on 9222 4080.

Please note: The information you provide in this form must not identify, directly or by implication, any individual health care provider or receiver.

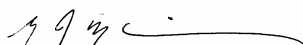
Contact details of person providing the report:

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Date: 10th July 2013

The *Health Services (Quality Improvement) Act 1994* provides for the approval and protection of quality improvement committees reviewing, assessing and monitoring the quality of health services and for related purposes. Section 9 of the *Health Services (Quality Improvement) Regulations 1995* each committee is to make a report available to the public at least once in each period of 12 months.

The following fulfils the requirements of the committee under section 9 of the *Health Services (Quality Improvement) Regulations 1995*.

Attach a copy of the committee's *Terms of Reference*

Report on issues, projects and/or activities undertaken by the Committee for which Qualified Privilege was required

Issue/project/activity

| Description | Action | Outcomes |
|--------------------------------|--|---|
| Review of interval cancers | Ongoing audit of individual cases. Development of needs-based clinical training. Open communication with individuals involved. | Detailed performance feedback mechanisms to individual clinicians results in improved radiology reporting. Continuous improvement of image reading quality. The interval cancer rate and trends of service performance are reported annually to the Women and Newborn Health Service Clinical Governance Meeting. |
| Ongoing individual case review | Follow-up of relevant cases as considered appropriate by the Committee. Development of clinical training courses recognised by relevant professional colleges and national bodies to meet information needs and skills gap in relation to breast cancer management. | Improvement of clinical practices through regular review of clinical or surgical management. Presentation of findings at multidisciplinary educational meetings where appropriate (see Appendix). Provision of breast cancer management courses for GPs (RACGP recognised), Indigenous Health Workers and other health professionals. |

| Description | Action | Outcomes |
|--|---|--|
| Feedback from consumers and stakeholders | <p>Feedback from the GP Advisory Group and the Consumer Reference Group provided input into the development of new resources and media advertising.</p> <p>Evidence based data assists in the strategic provision of services including facilities and equipment.</p> <p>Feedback forms available at all clinics and feedback surveys are monitored for areas of client dissatisfaction, or praise. Specific targeted surveys are designed to highlight areas of service activity and are used to improve performance. A survey related to service brand recognition was conducted in 2012.</p> | <p>Development of tailored staff training, professional education and system review initiatives.</p> <p>New resources for special groups such as ATSI or CALD women are developed and distributed in the community and to the clinics to promote equity of access to all eligible women.</p> <p>Client satisfaction surveys and feedback indicate high levels of satisfaction with the services provided. Service recognition is high within the target age group.</p> |
| Informing consumers and clients | <p>As a result of the interval cancer review process and in the spirit of open disclosure, BreastScreen WA writes to all clients with an interval cancer to acknowledge their cancer. An offer to discuss the case and/or meet with the client is extended from the Program in each letter.</p> <p>Appropriate information relevant to breast cancer and its detection, including national Program policy statements, are available to consumers and clients.</p> | <p>Clients with an interval cancer are assured that all interval cancer cases are reviewed to improve the quality of the Program.</p> <p>The Medical Director has made presentations at national multidisciplinary meetings on the principle of open disclosure in interval cancer cases in a screening program, to advise other services of this initiative and of the positive feedback BSWA has received.</p> <p>Clinical updates, national policies on various topics and service data reports are available on the BreastScreen WA website.</p> |
| Monitor compliance with National Accreditation Standards | <p>Audit of cases or review of policies and circumstances where the Service may not comply. Regular external reviews are designed to ensure the Service meets national Program standards.</p> <p>Close monitoring of participation and timeliness performance standards have led to agreements to open two new services in 2012/13 to build capacity and improve waiting times for service.</p> | <p>Implementation of updated policies and procedures as relevant.</p> <p>In 2011 the service was again awarded 4 years accreditation with national Program.</p> <p>A new screening clinic opened in the David Jones store in Hay St Perth in September 2012. A new screening clinic opened in Bunbury in March 2013 to replace the mobile service to that town and in August 2013 a new assessment centre will open within that clinic.</p> |

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|--|---|--|
| Implementation of new technology | <p>The Digital Mammography roll out project was completed in August 2012. All screening and assessment clinics, including the mobile units, now have digital x-ray machines.</p> <p>Development of associated infrastructure such as image storage capacity and digital reading workstations will be completed by 2014 and will enable efficient image file handling and clinical decision making.</p> <p>Digital mammography cancer detection rates, recall rates and productivity will be monitored following this change in technology and information will be part of the formal reporting processes to BreastScreen Australia.</p> | <p>Improved image quality and productivity and safety in health care and service provision.</p> <p>Improved clinical and administrative practices.</p> <p>Contribute to the body of knowledge surrounding new technologies, not only within the service but across the BreastScreen Australia program.</p> |
| Monitor BSWA Quality Improvement Plan | <p>More structured implementation and evaluation of quality improvement activities.</p> <p>Ongoing critical evaluation of current practices.</p> <p>Develop and regularly update service strategic plans which build in QI activities.</p> | <p>Regular reporting on service wide quality improvement activities submitted to the Committee.</p> <p>Regular quality improvement activities encourage a culture of continuous improvement across all disciplines and levels of the organisation.</p> |
| Engage in relevant breast cancer research activities | <p>Staff and consultants present at major clinic meetings locally, interstate and internationally.</p> <p>Research projects utilising BSWA data are conducted from time to time with various university faculties, such as from University of Melbourne and University of WA; any publications are oversighted by the BSWA QI Committee.</p> <p>A Multidisciplinary Conference hosted by BreastScreen WA is held biennially in Perth. In November 2012 the topic of the 6th Conference: "Integrating New Technology Into Breast Cancer Diagnosis".</p> | <p>Improved understanding of breast cancer behaviours, detection and management. Engagement with the medical research and clinical community. Staff development and training.</p> |



MULTIDISCIPLINARY MEETINGS 2012

Meetings commence at 6.00pm and rotate between RPH and SCGH monthly.
 RPH: Monday, Radiology Seminar Room, Radiology Department.
 SCGH: Wednesday, John Glancy Seminar Room, 1st Floor G Block.

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|---|--|
| Monday 20 th February – RPH | BSWA - Interval Cancer Open Disclosure Project Dr Liz Wylie |
| Thursday March 15 th Sat/Sunday 17/18 March | Digital Mammography User Group RANZCR Weekend CPD Meeting |
| Monday 16 th April – RPH | PLCIS and Emerging Clinical Dilemma Dr Saud Hamza |
| Monday 14 th May – RPH | Breast cancer in young women including pregnancy and Lactation Winthrop Prof Christobel Saunders |
| Wednesday June 27 th – SCGH | Breast Screening: Differences in Opinions Dr Abul Aziz |
| Monday July 16 th RPH | Familial Ovarian Cancer and Ovarian Cancer Screening Dr Stuart Salfinger |
| Monday August 20 th RPH | NPI from Nottingham Dr Lee Jackson |
| Wednesday September 26 th SCGH | Surgical Margins Audit Dr Helen Ballal |
| Wednesday October 24 th SCGH | An Update on Breast MRI Dr Matthew Brooks |
| 17 & 18 November Pan Pacific Hotel | BSWA Multidisciplinary Meeting (CME) INTEGRATING NEW TECHNOLOGIES INTO BREAST CANCER DIAGNOSIS. <i>Janet Litherland: Imaging implants and the reconstructed breast.</i> <i>Tony Connell: Imaging implants and the reconstructed breast – what the surgeon wants to know</i> <i>Michelle Reintals: MRI evaluation of PIP breast implants</i> <i>Nehmat Houssami: Pre-operative MRI in breast cancer – an update of the evidence.</i> <i>Carolyn Madeley: Dose creep and reduction in the digital environment</i> <i>Rosa Cameron: Number of technical repeats in a screening program – a serious radiation issue</i> <i>Christobel Saunders: New technology in breast imaging</i> <i>Lisa Towler and Susan Greenwood: Breast MRI – positioning to optimise image quality</i> <i>Anita Bourke: Tumour biology vs radiological & surgical technique – results of re-excision audit 2009</i> |

Joanne Landman: **Radio-guided occult lesion localisation using Tc99m MAA**

Donna Taylor: **Radio-guided occult lesion localisation using Iodine 125 seeds**

Meredith Kessell: **Clip migration: more than meets the eye**

Anita Bourke: **Specimen radiography – how to maximise information gained**

Janet Litherland: **Radiologist performance in a screening program – what can happen when it goes wrong**

Michelle Bennett: **Positive predictive Value – measuring radiologist performance**

Sandra Evans: **Benchmarking radiographer activity for screening in the digital environment – could NHS activity be translated in to the Australian context?**

Carolyn Madeley: **AIR/BSA mammography technologist project – an update**

Michelle Reintals: **Ultrasound of the axilla**

Nehmet Houssami: **preoperative axillary node biopsy – the evidence**

Jeremy Parry: **Assessing pathology in the axilla in a abreast service**

Diana Hastrich: **Sentinel node biopsy – where to now?**

Nehmewt Houssami: **Tomosynthesis – the evidence so far**

Janet Litherland: **The TOMMY trial – UK experience**

Cecily Metcalf: **Evaluation of virtual microscopy in a diagnostic laboratory**

Lee Jackson: **Tumour associated autoantibodies – relevance to breast cancer**

Bruce Latham: **Are triple negative cancers a distinct subtype?**

Andy Redfern: **Advances in breast cancer research**