

## Minutes

### Medical Oncology Work Group (MOWG)

<b>Date:</b>	Wednesday 28 June 2023
<b>Time:</b>	9.30 am to 4.00pm
<b>Location:</b>	Eagle Room, Miramar Links, 1 Stewart Duff Drive Wellington
<b>Chair:</b>	Brendan Luey, Clinical Leader Medical Oncology, Te Whatu Ora Capital, Coast and Hutt Valley
<b>Attendees:</b>	Alvin Tan, Clinical Leader Medical Oncology, Te Whatu Ora Waikato Anne-Marie Wilkins, Service Clinical Director Medical Oncology, Te Whatu Ora Te Toka Tumai Auckland Caroline Aberhart, Pharmacist Team Leader, Te Whatu Ora Nelson Marlborough Johanna Paddison, Clinical Leader Medical Oncology, Te Whatu Ora South Canterbury Matthew Strother, Clinical Leader Medical Oncology, Te Whatu Ora Waitaha Canterbury Steve Delany, Te Whatu Ora Nelson Marlborough Tara Cheung, Clinical Nurse Specialist, Te Whatu Ora Southern Vincent Newton, Clinical Leader Medical Oncology, Te Whatu Ora Te Tai Tokerau Northland
<b>He Ara Tangata – Consumer Reference Group</b>	Thomas Ngaruhe Ngaroimata Reid
<b>Te Aho o Te Kahu attendees:</b>	Alex Dunn, Senior Project Manager, Data Monitoring and Reporting Team Bridget Kerkin, Manager, Clinical Advisory Team Eila Cunnah, Project Manager Southern Hub John Fountain, Manager, Data Monitoring and Reporting Team John Manderson, Senior Project Manager, Data Monitoring and Reporting Team Luisa Acheson, Clinical Advisory Team Administrator Simon Pointer, National Pharmacist, Clinical Advisory Team Tal Sharrock-Crimp, Principal Advisor, Clinical Advisory Team
<b>Guests:</b>	Logan Heyes, Senior Therapeutic Group Manager, PHARMAC Jared Solloway, Therapeutic Group Manager, PHARMAC Professor Chris Jackson, Medical Oncologist, Te Whatu Ora Southern
<b>Secretariat:</b>	Melinda Greshoff (minutes)
<b>Apologies:</b>	David Gibbs, Liz Dennett, Kirstin Wagteveld, Gwen Pinches, Dawn Wilson, Michelle Head, Louise Bremer, Malcolm Anderson, Janfrey Doak

## **Welcome & Karakia**

Simon Pointer welcomed everyone to the meeting with a karakia.  
The Agenda was confirmed.

## **Confirmation of new Chair**

Brendan Luey, Clinical Leader Medical Oncology, Te Whatu Ora Capital, Coast and Hutt Valley was confirmed as the new Chair of MOWG.  
Richard North's contribution will be recognised.

## **Review and approval of the draft minutes from last meeting**

The minutes of the meeting of 29 March 2023 were approved as true and correct record.

## **Conflicts of interest register**

No conflicts of interest were disclosed.

## **Action Register**

The Action Register was completely reviewed.

## **List of Registered Medical Oncologists in NZ**

The Register of Medical Oncologists was taken as read.  
Action: Check with colleagues on the list who only work in private that they are happy to be included.

## **CanShare and Structured Pathology Updates**

John Fountain gave an overview of data monitoring and the CanShare initiative.  
John Manderson gave a presentation on Structural Pathology.  
Clinical information is planned to start coming into the CanShare platform in 2024 and by the end of 2025 to provide significant support to clinical users.

## **Strategic Priorities of MOWG Discussion**

The Chair lead a discussion about the role and future direction of MOWG. The Chair has undertaken a thorough review of previous MOWG minutes.

### **Current work**

MOWG provides advice to Te Aho o Te Kahu and the Chair has a place on the clinical assembly, an advisory group with a direct link to the Chief Executive.

He Ara Tangata members also have their own advisory group that has a line to the Chief Executive.

MOWG is the only medical oncology advisory group that has representation across the country, so is the first group that is approached by agencies like Pharmac. Potentially, MOWG can co-ordinate and harness different expertise if needed for specific pieces of work.

Currently the projects MOWG is involved with are: ACT-NOW, CanShare and Structured Pathology (Te Aho o Te Kahu manager is John Fountain); QPI Advisory Group (Te Aho o Te Kahu manager is Gabrielle Nicholson) and, Cancer Services Planning (Programme Manager is Cushla Lucas).

MOWG was working with ACT-NOW to assist with workforce planning, but this has been taken over by Te Whatu Ora.

## Future work

**Molecular testing:** Contribution to work on the National Governance of molecular testing was identified by members as an area where they would like to focus.

**Action:** Te Aho o Te Kahu will collate ideas from MOWG members around workstreams which might be an appropriate future focus for the group.

## ACT – NOW

Alex Dunn gave a detailed update on ACT-NOW.

Johanna Paddison gave an update on the challenges and opportunities of the dashboards in development.

Chris Jackson congratulated Alex Dunn, Johanna Paddison and Simon Pointer for the work done to date.

**Action:** The Chair will talk to Alex Dunn about being involved in weekly update sessions.

## Cancer Services Planning

Simon Pointer of Te Aho o Te Kahu gave an update on planning work.

### Model of Care (MoC) document feedback

There was a discussion around the draft model of care document, circulated in advance to MOWG.

Feedback included:

- There is potential variability in the populations being referred to and seen and treated by medical oncology across the country. ACT-NOW will help to give visibility of this in the future.
- Hospitals were designed for episodic care and this presents challenges for medical oncology, where patients may move through multiple lines of treatment over months to years.
- Volumes of infusions are affected by private medical oncology centres to varying degrees around the country. Toxicity as a result of unfunded treatments ends up in public system.
- RMO contract changes have impacted on medical oncology services. Lack of continuity creates additional burden on SMOs and CNSs.
- Clinical trial section needs to be bolstered. Trials generate a lot of work that is not accounted for
- Need to emphasise the skills and importance of administrative workforce more
- Need to discuss molecular and genetic testing in further detail
- Include mention of lymphoedema and fertility services in supportive care
- A critical **review** of workforce will be defining what “sufficient” resource looks like
- Consider removing future innovations such as electroporation
- Remove any reference to particular IT or software companies i.e. make vendor agnostic (NB this was done after circulating MoC document and prior to meeting and was noted at the workshop)

Actions:

- Te Aho o Te Kahu to investigate ability to measure volume of patient care using national collections data, looking at on treatment reviews and follow up appointments to medical oncologist
- Te Aho o Te Kahu to incorporate feedback into MoC document

- Te Aho o Te Kahu to review treatment centre map – review records for Dargaville and also to note that new site in Takaka in Nelson Marlborough region.

### **National and Regional SACT Structure discussion**

Johanna Paddison led a discussion on Leadership and Structure of SACT services around the country. MOWG is likely to transition into a clinical network at some stage in the future.

**Action:** Simon Pointer will review the maps created of SACT delivery

### **Medicines Modelling**

Tal Sharrock-Crimp gave a presentation on health system resource modelling and sought feedback from members. The modelling considered the resource utilisation of the recent funding of immune checkpoint inhibitors for lung cancer as an example with a vision the tool could be used for other health system decision that materially impact resource utilisation. These medicines have been funded since 01 April 2023 for lung cancer.

**Action:** Te Aho o Te Kahu will follow up with Te Whatu Ora about the progress on resourcing for implementation of immune checkpoint inhibitors for lung cancer.

### **PHARMAC Update:**

Logan Heyes and Jared Solloway joined the meeting at 2.30pm to give an update on Pharmac projects.

**Trastuzumab biosimilar:** Jared Solloway gave an update on Trastuzumab RFP.

**Management of immune related AEs (availability of medicines for this):** A discussion was held about the availability of medicines for the management of immune-mediated adverse events with immunotherapy agents.

**Lomustine and Temozolomide:** An update was given on potential discontinuation of lomustine.

**Capecitabine and calcium folinate:** updates on supply issues were given.

A discussion was held around how MOWG and Pharmac can further collaborate going forward.

- MOWG can give New Zealand context information and data into Pharmac's pharmacoeconomic modelling to ensure that it is as realistic as possible for the New Zealand setting.
- MOWG noted that members were grateful for the funding of immunotherapy drugs in lung cancer.

### **Any other business**

The Chair and Simon Pointer will look into a suitable acknowledgement and a formal thank you from the group to the outgoing Chair

**Next Meeting:** The next Meeting is via Zoom in September; in person in November.

### **Meeting Close:**

The meeting closed at 4pm. Simon Pointer closed the meeting with a karakia.