

WA Cancer Leads

Role description and success measures

Who are they?

Leads are people with influence and networks across the WA health system, and knowledge and experience in Cancer control and research.

Leads are supported by the Health Networks, within the Clinical Excellence Division of the Department of Health WA. Cancer Leads are essential to aligning and driving the priorities of the Department of Health WA and cancer stakeholders to achieve key objectives and outcomes identified in the WA Cancer Plan 2020-2025.

Cancer Collaborative Lead attributes

Cancer Leads will have:

- Substantial experience and seniority in their field, including leadership of change and/or reform initiatives.
- A broad network of relevant connections across the health care setting, including with consumers.
- The ability to engage and form partnerships to work collaboratively with a diverse range of stakeholders.
- The ability and opportunity to think strategically to achieve personal, WA Cancer and Palliative Care Network (WACPCN) Clinical Implementation Unit (CIU), and Departmental outcomes.
- Significant knowledge and understanding of contemporary health issues relevant to their Collaborative which affect the delivery of health care in WA.
- An understanding of state, national, and international best practice in their area of health.

Responsibilities

Connect

- Be responsible for the formation, operation and management of the Collaborative group for their cancer tumour or stream that they represent. The Collaborative group should be independent of existing forums and groups and whose membership is:
 - 1. multi-disciplinary (across professions);
 - 2. multi-organisational (across government, non-government, consumers); and
 - 3. representative of the continuum of care (prevention, screening, diagnosis, treatment, survivorship and palliation).
- Build strong connections between the Department of Health as system manager, health care providers, and the community.
- Be a change champion in the Cancer tumour or stream they lead in partnership with Cancer Nurse Coordinators.
- Have an understanding of the key issues in their area.

- Identify opportunities for cross network partnerships to drive health reform projects.
- Possess and continue to build expert knowledge and connections related to resolving complex multi-faceted problems.

Share

- Provide advice on service planning, purchasing, performance monitoring, workforce and policy development which may involve undertaking reviews of international, national and state policies, positions, legislation and other key developments.
- Provide leadership and direction on approved initiatives.
- Provide leadership in their organisation and industry to support integrated health services.
- Lead their Cancer area by being the face and the voice of their Cancer Collaborative.
- Share knowledge, information and resources to identify solutions for clinical and health system issues.
- Be active networkers across the health system.
- Represent the interests, ideas and integrity of their Cancer stream.
- Facilitate development of the cancer-specific area for which they lead by aiming for at least two educational forums per annum.

Improve

- Identify opportunities to create a more responsive and integrated system focussed on the health needs of local communities.
- Promote cancer data collection and undertake clinically-informed data analysis to assist in identifying variation in cancer practice and outcomes.
- Promote collective problem-solving to impact observed variation via a collaborative approach.
- Take a broad perspective and approach to solving complex issues.
- Contribute to policy and projects such as State-wide cancer plans, Government policy commitments and Optimal Care Pathways.
- Encourage innovation and best practice in health care.
- Support and advise on research and best practice evidence where applicable.

Accountability

Leads are accountable to the Director, Health Networks, Department of Health WA.

Leads are required to submit 6-monthly written reports outlining activities undertaken in the Cancer Lead role. In particular, for those relating to achieving the annual goals of the Cancer Leads group and evaluation of their impact. Submission of Collaboratives meeting minutes may replace the written reports.

Cancer Leads who hold a clinical position, must possess current and full registration with the appropriate regulatory agency.

Success measures (taken from Public Sector Commission Leadership Development Profile)

- Shapes and Manages Strategy
 - Provides advice to the System Manager that reflects analysis of a broad range of issues and viewpoints
 - Considers emerging trends, identifies long-term opportunities and balances network requirements with WA health system outcomes.



- Achieves Results
 - Enables the achievement of outcomes
 - Achievement of network annual plan
- Build Productive Relationships
 - o Connections established to overcome organisational/system silos and facilitates cooperation between organisations/stakeholder groups
- Exemplifies personal integrity and self-awareness
 - Commitment to a personal leadership development plan using the Leadership Competencies self-assessment
- Communicates and influences effectively
 - o Identifies key stakeholders and engages their support.

Process for appointment

Appointment of Cancer Leads can be made by either a process of succession planning or through an Expression of Interest (EOI) process. Appointments will be managed and approved by the Department of Health's HNU. Appointments are initially for a two (2) year period in the first instance; with an option for extension.

Reimbursement

Cancer Leads are engaged for 4 hours per fortnight. Reimbursement rates will be based on the Department of Health WA Paid Participation Policy. For Medical Practitioner's this will be paid via a medical allowance equivalent to 1.00 session per fortnight.

The Cancer Lead's employing Health Service Provider will be reimbursed at the appropriate award rate by HNU. Remuneration is intended to enable the Cancer Lead to be released from clinical duties. Leads who are not employees of a Health Service Provider will be reimbursed through direct invoice.