Cancer Screening and Control Services

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Cancer Screening & Control Services (CSCS) operates under the Office of the Chief Medical Officer within Population Health Services. CSCS comprises four work units: BreastScreen Tasmania (BST), the Cervical Cancer Prevention Program (CCPP), the Recruitment and Community Engagement Unit (RACE) and the monitoring and oversight of the Tasmanian component of the National Bowel Cancer Screening Program (NBCSP).

CSCS provide services that are an integral part of the healthcare pathway, minimising cancer mortality and morbidity through screening, early detection, community engagement and recruitment initiatives to participate in screening.

Cancer is a major cause of illness in Tasmania and has a substantial social and economic impact on individuals, families and the community. The major opportunity for reducing incidence and mortality from cancer as well as reducing the burden of the disease on the community, is through prevention, screening and the detection of early-stage cancers; while late-stage diagnosis, treatment and palliation of people with cancer consume significant health care resources, and does not reduce the burden of cancer on the community.

The key stages of cancer management are listed below and each belongs in a setting appropriate to its unique features:

1. prevention,
2. screening,
3. early detection,
4. treatment and
5. ongoing care (including monitoring, rehabilitation, long term follow-up and palliative care).

Prevention and early detection of cancer using education and awareness programs and screening programs has been proven to be the most appropriate public health interventions in reducing mortality from cancer.

Population screening programs are planned and coordinated to bring maximum health benefits for the community. Cancer screening should be identified as a critical step in the healthcare continuum, by diagnosing cancers early, when the likelihood of a cure is most achievable, and through early intervention to prevent abnormalities progressing to cancer. For example mortality from breast cancer has reduced by more than thirty percent since the introduction of the BreastScreen Australia program in 1992.

CSCS, in providing ‘population based screening programs’ for the asymptomatic, well population, is uniquely different to the acute health sector, where people who are sick, seek treatment to manage their illness, or become well again. It is a
different paradigm.

The Australian Population based Screening Framework\(^1\) cites the World Health Organization (WHO) definition of screening as being ‘the presumptive identification of unrecognised disease or defects by means of tests, examinations or other procedures that can be applied rapidly’. Screening is intended for all people in an identified target population, who do not have symptoms of the disease or condition being screened for, and this is clearly separate from the way that the treatment and care system operates. It is a public health activity.

The screening process can identify:
- a pre-disease abnormality;
- early disease; or
- disease risk markers.

The aim of screening for a disease or a risk marker for a disease is to reduce the burden of the disease in the community including incidence of disease, morbidity from the disease or mortality.

Cancer Screening and Control Services’ work plays a critical role in Tasmania achieving the objective of the ‘Healthiest State’ status, by investing in the future health of the state through strategies and initiatives that will reduce morbidity and mortality attributable to cancers that are largely preventable. Cancer screening interventions, risk identification, prevention and early detection initiatives can achieve substantial control over the burden of the many cancers impacting Tasmanians.

‘One State, One Health System, Better Outcomes, Tasmanian Role Delineation Framework’ states that services for screening and prevention of cancer are outside the scope of the Framework and are described in the Tasmanian State Cancer Plan\(^2\). However, the West Australian Clinical Services Framework 2010 – 2020, one of the frameworks upon which the Tasmanian Role Delineation Framework is based, clearly maps cancer screening services from Level 1 through to Level 6.\(^3\) A self-assessment undertaken by Cancer Screening & Control Services against the West Australian model also clearly places CSCS similarly within the Tasmanian framework. Program design and delivery in Tasmania is identical to that of West Australia with coverage of the service extending from prevention and community engagement and recruitment activity, early detection, screening, research and teaching to provision of psychosocial care into survivorship.

The Tasmanian Role Delineation Framework states that services must:

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\(^1\) Australian Population Health Development Principal Committee. Screening Subcommittee.


\(^3\) Department of Health, Western Australia. WA Health Clinical Services Framework 2010-2020. Page 71
- Be able to sustain a competent and high performing clinical workforce, infrastructure and support services required to provide care that is consistent with best practice.
- Maintain appropriate minimum service volumes to ensure the competence and professional practice of the multidisciplinary team can be sustained.
- Services matched by the facility’s ability to deliver consistently safe, high quality care, rather than on considerations of proximity.
- Sufficient workload to engage multiple clinicians across the range of necessary disciplines in the delivery of a quality sustainable service.
- Continuously improving care that is continually monitored, reviewed and evaluated, comparable with national and international standards.

Cancer Screening and Control Services, through sustained excellence according to national standards, meets all criteria within the Role Delineation Framework. Through the three established national screening programs, CSCS delivers quality care and services on a statewide basis.

BreastScreen Tasmania is part of the BreastScreen Australia program, and provides free screening mammograms for the early diagnosis of breast cancer for the women of Tasmania through fixed screening clinics (Hobart and Launceston) and the Mobile Screening Unit (19 locations State-wide). Assessment for exclusion, or diagnosis of early breast cancer from abnormalities detected at screening occurs at the highly specialised Screening & Assessment unit in Hobart. Current state-wide screening throughput is approximately 30,000 women per annum. BreastScreen Tasmania diagnoses approximately two-thirds of the breast cancers in Tasmania each year. 2015 sees BreastScreen Tasmania undergoing Accreditation against BreastScreen Australia National Accreditation Standards. The service currently holds and aims to maintain full four year accreditation - rating as one of the best services in the country.

The Tasmanian Cervical Cancer Prevention Program (CCPP) is part of the National Cervical Screening Program, and includes the Tasmanian Cervical Screening Register (TCSR). The aim of the CCPP is to reduce morbidity and deaths from cervical cancer through an organised approach to cervical screening by encouraging women in the target age group 18 – 69 to have regular cervical screening tests. The TCSR records cervical cancer test results, provides screening histories to clinicians and pathology laboratories, monitors follow up and treatment of abnormalities and reminds women and clinicians when cervical cancer tests are overdue.

The NBCSP is administered nationally and CSCS works collaboratively with the Screening Section of the Department of Health (DoH) to implement the Tasmanian component of the Program. A dedicated Follow-Up Co-ordinator ensures that Tasmanian participants progress in a timely manner along the screening pathway from a positive screening result to colonoscopy, through either public or private sector ‘usual care’ pathways.
The CSCS Recruitment and Community Engagement Unit (RACE) is investing in improved outcomes and reduced incidence and mortality from cancer through education of the community about the importance of healthy behaviours, regular screening, improving health literacy through awareness of signs and symptoms to improve early detection, and supporting the population to make informed decisions about health choices. Cancer control policy based on national and international evidence is an important element of Cancer Screening and Control Services' work to reduce the burden of cancer on Tasmanians.

CSCS, through cancer care nurses and counsellors provides a critical service in the cancer care continuum in transitioning patients diagnosed with cancer through screening into and through, the ‘usual care’ pathway.

Tasmania’s population is the oldest in Australia and cancer is predominantly a disease of ageing. Demand for Cancer Screening and Control Services will continue to grow with the ageing population. The effectiveness of these programs in delivering long term improved health outcomes depends on the provision of quality, sustainable integrated screening services. CSCS services cannot be fragmented and merged with acute health services, as the national framework under which, in particular, the BreastScreen services are provided have criteria for services to be delivered by dedicated staff in dedicated screening facilities.

The principles of population based screening mean that CSCS is more aligned, organisationally, with Population Health Services, however, could conceivably, as a state-wide service, sit under a single Tasmanian Health Service, with the essential proviso that there is quarantining of the organisation and its budget to ensure the services are not subsumed under, nor disadvantaged in their remit, by the ever-burgeoning demands of the acute health sector.

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