

## Terms of Reference

# SA Health Cancer Drug Committee

**Mission** The SA Health Cancer Drug Committee promotes the safety and quality of cancer chemotherapy and improved outcomes for patients receiving cancer treatments through evidenced-based and consistent clinical practice in cancer chemotherapy use across SA Health.

## Scope

The SA Health Cancer Drug Committee is a state wide committee with representation from all LHN's and SA Pharmacy providing clinical governance in the development, implementation and management of chemotherapy prescribing and protocols for patients with cancer.

## Role

The SA Health Cancer Drug Committee is responsible to the South Australian Medicines Advisory Committee (SAMAC) for the quality use of chemotherapeutic medicines. This is achieved through statewide governance resulting in standardisation of chemotherapy protocols for the treatment of cancer and by ensuring that the chemotherapy ensuring that the chemotherapy prescription templates, their source protocols and decision support tools are regularly reviewed and supported by current evidence. This includes developing and maintaining the SA Health Approved Cancer Chemotherapy Protocol Register.

When approving protocols, the group will also include a risk assessment for administration at low, medium or high-risk chemotherapy units.

This committee is framed by its scope, therefore in the interests of safety and quality, a record of issues and recommendations raised by members as a consequence of its deliberations will be forwarded by the chair to the appropriate governing committees and/or executive.

## Responsibilities

The SA Health Cancer Drug Committee will:

- Undertake a rolling review of all chemotherapy source protocols and manage the SA Health Approved Cancer Chemotherapy Protocol Register
- Endorse the use of a protocol for suitability for administration at low, medium or high risk chemotherapy units (SA Cancer Standards 2010)
- Provide final review and endorsement of state-wide, cancer chemotherapy source protocols and support tools (clinical guidelines) following the reviewers recommendations. The Chair (or deputy) will provide final endorsement.
- Oversee the process and governance of an immediate (urgent) review in the event that treatment without an endorsed source protocol is required before the next committee meeting with a minimum of two members (involving a pharmacist/ oncologist or haematologist) conducting a review and providing their recommendation to the nominated officer for final sign off out of session.
- Submit evidenced based protocols to eviQ for consideration of submission to the National Protocol Database

- Monitor and arrange review and updates to the SA Health Approved Cancer Chemotherapy Protocol register based on eviQ updates, addition of new protocols or superseding/discontinuation of eviQ protocol(s)
- Oversee LHN governance of SA Health guidelines and related documents for the prescribing, verification, pre-assessment, and administration of chemotherapy

## Reporting Relationships

The SA Health Cancer Drug Committee reports to SAMAC and has the mandate to determine governance of chemotherapy protocol development and oversee the LHN governance of prescribing practice on behalf of the state.

## Committee Membership

The committee membership includes:

- Medical, nursing and pharmacy representatives of each LHN
- Consumers, eHealth and other relevant health representatives
- Ensure that authors of documents are excluded from the approval process if they are a member of the committee or a member of the reviewer group
- Members have a three year tenure, but are eligible for re-appointment
- Additional members may be co-opted as required for specific projects or expert input

## Appointments

The Chairperson is appointed by the Chief Executive of the Department of Health and Wellbeing or their delegate for a 3 year tenure. The Chair will be a member of SAMAC.

Members of the committee will elect a Deputy Chairperson for a three year tenure

Health Professional members are appointed by the CEO of their respective LHN's for a three year tenure. Members may eligible for re-appointment at the behest of the CEO of their LHN.

## Operating Procedures

### Quorum

A minimum of half of the members of the SA Health Cancer Drug Committee plus one for issues requiring vote.

### Proxies

The Chair must be notified in advance of the meeting of apologies. Members must nominate a proxy to attend in their place and provide the name of their proxy to allow the project officer to forward the relevant papers

### Frequency of Meetings

- Meetings will be scheduled every month (3<sup>rd</sup> Tuesday) except for January
- The SA Health Cancer Drug Committee Chair may convene additional meetings to consider business which may require urgent consideration

## Meeting Papers

- The Chairperson will set the agenda. The agenda and supporting papers will be circulated to members 1 week prior to each meeting.
- A register of documents for rolling review, action plan and program schedule will drive the proceedings of each meeting.

## Committee Process

- Within 7 days of the Committee meeting the minutes will be approved by the Chair including the list of approved source protocols, support tools and other action items
- Circulate the list of approved documents via a distribution list of relevant staff. The approved protocol will be submitted to the agreed location that provides documentation governance within 14 days of the meeting
- Provide an emergency review of treatment and prescription actioned and approved within an allocated time-frame based on urgency of treatment. In circumstances where this is not possible (for example after hours) then the consultant orders the treatment submitting the prescription and source protocol to the reviewers the following day. The documentation is provided to the project officer to be collated and tabled at the next meeting for discussion and endorsement
- Undertake an annual review of committee process and function and progress against the register and action plan.
- Provide a biannual report to SAMAC based on the following Key Performance Indicators:
  - Number of documents reviewed and approved according to the schedule
  - Number of emergency reviews conducted and approved within the one hour time frame (rare events)
  - Total number of non-registered cancer chemotherapy protocols documented
  - Report on any variations from the scope or role of the committee'

## Chair (Independent)

The Chair will sit for a three year tenure

## Executive Officer

There will be funding for the function of the project pharmacist provided by SA Health

## Membership

Deputy Chair – (Independent)

Haematologist – CALHN (RAH)

Haematologist – CALHN (QEH)

Haematologist – SALHN

Haematologist- CHSALHN

Haematologist - NALHN

Haematologist/Oncologist – WCHN

Oncologist - CALHN (RAH)

Oncologist - CALHN (QEH)  
 Oncologist - CHSALHN  
 Oncologist - SALHN  
 Oncologist – NALHN  
 Pharmacist– SALHN  
 Pharmacist – CALHN  
 Pharmacist – NALHN  
 Pharmacist – CHSALHN  
 Pharmacist Haematology / Oncology- WCHLHN  
 Nurse Practitioner – SALHN  
 Nurse Practitioner – CALHN  
 Clinical Nurse Consultant – Cancer Services - NALHN  
 Clinical Nurse Consultant - CHSALHN  
 Nursing Service Director– Cancer Services WCHN  
 State-wide pharmacy representative  
 Representative for Electronic Chemotherapy Prescribing  
 Consumer representative  
 Non-voting members may be invited to contribute on a temporary or long-term basis

#### Version control and change history

Version	Date from	Date to	Amendment
01	15/08/2016	08/09/2016	Original – Approved
01.1	08/09/2016	20/2/2017	Membership
01.2	20/2/2017	Nov 2018	Membership
02	Dec 2018		Full update

<b>Chairperson</b>	Professor Ian Olver, Director Sansom Institute for Health Research University of South Australia
<b>Project Officer</b>	Bel Morris, Principal Project Pharmacist
<b>Replaces:</b>	Version 01.2