

CISS – Cancer Helpline – [INSERT NAME] Individual Key Priorities 2014 -2015

PRIORITIES	DELIVERABLES	MEASURES	DELIVERY DATE
<p>1. Maintaining discrete portfolio to contribute to the evidence base which underpins our information provision and standards</p>	<p>1) Helpline Manager to coordinate Literature review workshop with CBRC and Head of CISS to provide the necessary skills and training for this exercise</p> <p>2) Literature review to be conducted twice per year at the direction of the Assistant Helpline Manager in the agreed areas of: [INSERT PORTFOLIO]</p> <p>3) Findings to be stored and disseminated for the team at the direction of the Assistant Helpline Manager</p> <p>4) Participate in internal audit and internal/external research projects as required to develop and consolidate skills in service evaluation and improvement - contribute to ‘Topic Specific Protocol’ (TSP) development at the direction of the Assistant Helpline Manager</p>	<ul style="list-style-type: none"> • Staff will have the required skills to search for and isolate key articles to support our TSP’s, information provision and standards • A current database will be formed, reviewed and updated on a regular basis for all nurses to access as needed. TSP’s will be updated based on findings in these literature searches to ensure information provision is in line with current best practice • Shared workload and skill development amongst the team while contributing to service elevation and improvement. Provides an equal opportunity for conference attendance based on presenting relevant findings from a particular project that a staff member has worked on. 	<p>June 2014 – December 2015 (ongoing)</p>

<p>2. Engaging key stakeholders to improve HP referral into the Helpline</p>	<p>1) Where applicable, communicate with clinical workplace to ensure they are up-to-date with relevant programs and information provided by CISS</p> <p>2) Deliver CISS presentations as required and use the opportunity to relationship build and promote the work we are doing internally and externally.</p>	<ul style="list-style-type: none"> ● HP engagement whose knowledge of CISS and the Helpline’s capability will extend beyond our external facing programs such as practical support and LWCEP and VCCCP. ● Shared workload to manage the volume of speaker requests with all staff being adequately trained to deliver a presentation is line with our key messages 	<p>June 2014 – December 2015 (ongoing)</p>
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TEAM PRIORITIES:

Strategic Goal: *Addressing consistency of information given to our callers and the consistency of the information we are recording*

PRIORITIES	DELIVERABLES	MEASURES	DELIVERY DATE
<p>1. Transform CRM into a health intelligence system which supports service delivery across the whole of CCV, contributes to staff development and informs research</p>	<p>1) Implementation of proposed CRM layout changes</p> <p>2) CRM data cleansing and update to make sure that the ‘programs and services’, ‘topics’ and ‘publications’ that are listed are relevant, up-to-date and an accurate reflection of what took place in a call</p>	<ul style="list-style-type: none"> ● Streamlined, easy to use CRM layout and data-entry fields that comply with National Reporting and internal reporting needs. ● All CRM content will be relevant, up-to-date and utilised in the same way by Helpline nurses, as specified by our policy and procedure manual. All additions, deletions or changes will be approved by the Helpline Manager in consultation with the Business Manager before being 	<p>June – December 2014</p> <p>June 2014 – December 2015</p>

<p>and quality improvement work</p>	<p>- undertaken with each TSP review in the same way with input from relevant team members and internal and external stakeholders as required.</p> <p>- Reviews of content will be undertaken annually as directed by the Business Manager to ensure content stays up-to-date.</p> <p>3) Evaluation of current logging practices across nurses to assess accuracy and consistency</p> <p>- completed with existing staff in both group and individual training as directed by the Helpline Manager, Assistant Helpline Manager and Business Manager to ensure compliance and thorough review of practices</p> <p>- logging data will also be assessed as part of Call recording and logging analysis conducted by volunteers and research students under the direction of the Head of CISS and Helpline Manager</p>	<p>completed.</p> <ul style="list-style-type: none"> ● Consistent and accurate logging practices within the team, with an agreed ‘margin of error’ for non-Helpline calls that provides an accurate reflection of our work and productivity. ● Qualitative analysis will allow both known and unknown discrepancies to be identified and address in a methodical and targeted way 	<p>June – December 2014</p> <p>June 2014-December 2015</p>
<p>2. Improve consistency and quality of information and provided to Helpline callers</p>	<p>1) Evaluation of current standards of information provision by the nurses in relation to specific topics – all key topics to be reviewed in the same way</p> <p>- conduct nurse preference survey to obtain and order for review</p> <p>- structure PD around needs of team</p> <p>- engage external and internal partners to assist</p>	<ul style="list-style-type: none"> ● Team PD needs will be addressed in a systematic way based on needs identified preference survey ● Assistant Helpline Manager will have a structure guide, as created by the team to 	<p>April 2014 – December 2015</p>

	<p>with topic reviews as needed</p> <p>AND</p> <p>2) Develop agreed standards and ‘scope of practice’ for these topic areas to guide helpline nurse practice - will inform needs of CCV Helpline team and will feed into National Helpline review and standards practice, competency building etc.</p> <p>3) Use this information to then develop TSP’s (cheat sheets) to be used by existing staff to refine their practice with an aim to standardise call quality as appropriate, in relation to best practice and the current evidence base. These will also be used by new staff in the same way and to consolidate and streamline their orientation process</p> <p>4) Development of a Helpline/CRM policy and procedure manual</p> <p>5) Up-to-date knowledge and awareness across the team of current evidence base in all areas of work - Skill Matrix created to identify individual areas</p>	<p>address PD needs at future Helpline Development meetings</p> <ul style="list-style-type: none"> ● Helpline Manager will have a structure guide for relationship building and key stakeholder engagement based on team needs. ● TSP’s will form the base of our Policy and Procedure Manual, and will refine our Orientation Manual and process in line with National Helpline Review ● As above, TSP’s will form the base, and work carried out in point one with CRM will complete our manual. This will also encompass the work of the National Helpline Review group. ● All staff will have an agreed standard of information provision which will ensure calls are consistent and in line with best practice. ● Database will be developed to house the most recent evidence-based literature to support and underpin our TSP’s and subsequent information provision that will be reviewed annually. 	<p>April 2014 – December 2015</p> <p>April 2014 – December 2015</p> <p>April 2014 – December 2015</p>
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	<p>expertise</p> <ul style="list-style-type: none"> - Each nurse will be responsible for maintaining their own portfolio of evidence, depending on the individual specialty areas. - Literature review workshops will be conducted based on the needs of the team, with input from CBRC and Head of CISS as required to ensure review is carried out appropriately whilst also providing a PD opportunity for the team. 	<ul style="list-style-type: none"> Articles of relevance will be distributed in systematic way to ensure all in the team are across key literature. 	<p>June 2014 – December 2014</p>
<p>3. Take a lead role in National Helpline initiatives</p>	<p>1) Helpline Manager to Chair National Helpline Committee for an agreed term of two years</p> <p>2) Supportive Care Committee to delegate key pieces of work to be completed in small working groups nationally. Head of CISS to lead the review of National Helpline reporting methods, and Helpline Manager and Assistant Helpline Manager to give input to work around a shared model for Orientation and Training of Helpline Nurses and Distress Screening.</p>	<ul style="list-style-type: none"> VIC will be able to lead discussions and content in this meeting, and will be better placed to disseminate information back to our team. This will also allow key CISS members such as our Business Manager to take a more active role in discussions around reporting and our Minimum dataset etc. National models and standards will allow better collaboration and service evaluation improvement and development that is consistent across all states 	<p>April 2014- April 2016</p> <p>April 2014 – December 2015</p>

Strategic Goal: *Changing the perception of who we are and what we do; with a particular focus on engaging Health Professionals to use and refer to our service*

PRIORITIES	DELIVERABLES	MEASURES	DELIVERY DATE
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<p>1. Improve profile of Helpline both internally and externally with a particular focus on engaging Health Professionals to refer in</p>	<p>1) In collaboration with P&I team, assist with scoping exercise of resource needs and key timing of resource provision. - based on results, work closely with P&I team to address needs systematically and give input where needed to current resource review, or new resource development</p> <p>2) CISS Presentations - In consultation with the P&I team, re-work standard CISS presentations in order to highlight CISS services through the use of Helpline call scenarios (problem-based learning) to show internal staff and HP's the depth and breadth of the service that we can provide to their patients and clients. Presentations can be delivered at orientations, updates, seminars and in-services and will be able to be modified depending on the intended audience.</p> <p>3) Targeting Key Stakeholders to provide relevant education about CISS services - based on results of scoping exercise, approach and engage key oncology HP's at major hospitals to provide education about CISS services accessed via the Helpline to establish and maintain a presence with these services.</p>	<ul style="list-style-type: none"> ● Better knowledge of HP needs and the ways in which we can deliver our services and promotion to meet them. ● Increase in HP connections and referrals into the Helpline (outside of social worker engaged with FAP/Probono services) ● More accurate HP understanding of the depth and breadth of our services, highlighted by the work done internally to improve standard and consistency of the information we provide ● Support pages will reflect accurate information to ensure CCV's website is a go-to for those seeking information about support, services and HP education opportunities ● Staff in other departments will have accurate knowledge of the work that we do and can promote appropriately via their networks and programs 	<p>June – December 2014</p> <p>April –December 2014</p> <p>June – December 2015 (ongoing)</p>
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<p>2. Develop internal staff research and project management skills to raise the profile of the Helpline through our collaboration with other organisations and stakeholders</p>	<p>1) CBRC to assist with Literature review workshop to up skill staff in order for them to carry out their part of the evidence-base portfolio (see individual priorities)</p> <p>2) Staff to (where roster allows) participate in internal Helpline audits to build knowledge of research designs, protocols and intended outcomes whilst also evaluating the current standards of information provision to aid service development</p> <p>3) Promote research findings and service improvements appropriately to increase awareness and roster increased referrals into the Helpline from HP's</p>	<ul style="list-style-type: none"> ● Staff will be able to locate, review and monitor relevant articles to support the information we provide to callers ● Improved understanding of the value of research in service improvement and delivery ● Improved understanding of the importance of standards across our work and the need for thorough and consistent data capture and information provision ● Standard platform for promotion of research findings at conferences via abstracts and posters as appropriate 	<p>June – August 2014</p> <p>June – December 2015 (ongoing)</p> <p>December 2014 – December 2015 (ongoing)</p>
<p>6. Multilingual and Minority Community engagement</p>	<p>1) Continue to work with the Cultural Diversity Coordinator to improve our accessibility for multilingual callers</p> <ul style="list-style-type: none"> - Renew TIS application - Meet with Cultural Diversity Coordinator/IS around preferences and logistics for a dedicated Multilingual phone line to improve access for CALD callers - Once TIS access has been addressed, implement CRM CALD specific data collection changes and carry out appropriate training for Helpline to ensure compliance 	<ul style="list-style-type: none"> ● Continued service with TIS, free-of-charge ● Improved access for Culturally and Linguistically Diverse Victorians affected by cancer ● Increased number of CALD calls recorded on CRM, helping to better identify the information needs of this population and to inform resource development and provision. 	<p>June 2014</p> <p>June 2014</p> <p>June – Dec 2014</p>

