



January 2020

**Call for Expressions of Interest:
Expansion of PCFA Prostate Cancer Specialist Nursing Service**

Dear Sir/Madam,

I am pleased to invite your organisation to submit an Expression of Interest in the expansion of Prostate Cancer Foundation of Australia's Prostate Cancer Specialist Nursing Service.

The Australian Government has supported the Program since 2013, funding 29 nurses located in hospital and health services nationwide. The 2019-2020 Federal Budget included funding for continuation and expansion of the Program over the three-year period from July 2020 to June 2023, providing support for up to 34 new prostate cancer nurses from July 2020.

The specialist nurses play a vital role in coordinating the care of men with prostate cancer from the point of diagnosis across the continuum of care, including the management of side-effects and symptoms of treatment throughout survivorship and recovery. Working with hospitals and health services, PCFA assists in all aspects concerning the recruitment, training, and professional development of nurses employed under the program, as well as producing consumer resources to support the program and managing program-specific data collection and independent program evaluation.

To apply for funding under the current grant round, please submit an Expression of Interest in accordance with the application criteria outlined in the Application Pack by no later than 5pm, 6 March 2020.

Preferred locations will be selected based on demonstrated need and the capacity of competing applicants to satisfy the program selection criteria.

With an ageing and increasing population, the number of new cases of invasive prostate cancer among Australian men are expected to grow significantly over the next three years. Meeting the clinical and psychosocial care needs of those affected will require multi-disciplinary expertise, collaboration, and innovation. Beyond the fundamental goals of early diagnosis and effective treatment, our aim is to improve quality of life for those affected, preventing when possible the occurrence of comorbid conditions and assisting in the management of complications arising from prostate cancer treatment and its serious side effects.

For more information about expansion of the Prostate Cancer Specialist Nursing Service, please don't hesitate to contact PCFA's Director of Nursing, Sally Sara, via Sally.Sara@pcfa.org.au or 08 7002 8622.

We encourage you to apply.

Yours sincerely,

**Professor Jeff Dunn AO
Chief Executive Officer
Prostate Cancer Foundation of Australia**



**Prostate Cancer
Foundation of Australia**

Prostate Cancer Specialist Nursing Service

Information for applicants

**This program is delivered by the Prostate Cancer
Foundation of Australia**



**Prostate Cancer
Foundation of Australia**

Prostate Cancer Specialist Nursing Service – Information for applicants

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Prostate Cancer Foundation of Australia

Part One - Information for Health Providers

About Prostate Cancer Foundation of Australia

Prostate Cancer Foundation of Australia (PCFA) is a broad-based community organisation and the peak national body for prostate cancer in Australia. We are dedicated to reducing the impact of prostate cancer on Australian men, their partners and families, recognising the diversity of the Australian community.

We do this by:

- Promoting and funding world leading, innovative research into prostate cancer
- Implementing awareness campaigns and education programs for the Australian community, health professionals and Government
- Supporting men and their families affected by prostate cancer through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses.

PCFA relies on the generosity of individuals, the community and partnerships to carry out its essential work.

Purpose of the program

The Prostate Cancer Foundation of Australia (PCFA) Prostate Cancer Specialist Nursing service was established in 2012, supporting Prostate Cancer Specialist Nurses (PCSNs) in a variety of Australian health care contexts in partnership with health service providers.

In 2014 the service was expanded by 14 additional nurses through \$6.9 million of Federal Government funding provided through the Department of Health. In 2017, these 14 commonwealth funded nurses were re-funded for a second 3-year term, and an additional 14 nurses were announced. In 2020 additional funding has been made available to support allocation of an additional 34 nurses from July 2020 to June 2023.

The Prostate Cancer Specialist Nursing program is generously funded by the commonwealth government and by committed community and philanthropic groups and donors. PCFA currently supports 54 prostate cancer specialist nurses in 48 locations across Australia.

Information contained in this document

This is a request for Expression of Interest (EOI) and provides information for health providers wishing to submit an EOI to participate in the program and evaluation by being a host employer to a Prostate Cancer Specialist Nurse. Health service providers, in both public and private sectors, are invited to submit their EOI using the application form attached.



Prostate Cancer Foundation of Australia

PCFA will be providing funding to support 21 new Prostate Cancer Specialist Nursing from July 2020. There will be a second round of positions available from July 2021 and a third round from July 2022. Unsuccessful applications in the 2020 founding round will be eligible to apply again for subsequent rounds of positions.

Program overview

The role of the Prostate Cancer Specialist Nurse (PCSN) in the care of patients with prostate cancer is well recognised and integrated into clinical practice on both a national and international level. There are currently 54 PCSNs working in health care services across all States and Territories throughout Australia. The PCSN provides assessment and screening for clinical and supportive care needs for patients at risk of adverse clinical or psychological outcomes and provides care and evidence-based education and information to patients and their families throughout their cancer trajectory:

- At diagnosis - providing men with a single point of contact and evidence-based information to assist with understanding the diagnosis and recommended treatment options and supporting men and their families make decisions about their treatment
- During treatment – coordinating care and ensuring access to care, providing support and advice and assisting men and their families navigate the health system
- Following treatment – coordinating care and providing support and advice in the management both short term and long-term side effects, including urinary and bowel problems and psychological and sexual function issues
- Long term care – ensuring men have access to follow up care and support, especially when dealing with lifelong debilitating side effects. For men with advanced/metastatic disease this includes care and support for men and their families as they approach end of life care

As a senior registered nurse, the PCSN will work with health care providers in a strategic function to influence prostate cancer care at a systems level. A preferred Position Statement has been provided which describes the selection criteria and role requirements for the position of a PCSN. This role will work within agreed frameworks for practice and professional development, which are based on nationally recognized best practice models (ANMC, Cancer Australia 2008).

The Prostate Cancer Specialist Nurses will be employed directly by the host health services in both metropolitan and regional areas with an identified need. PCFA will provide ongoing professional development support to the nurses throughout the duration of the program through a structured framework. The PCSN and the host site are required to participate in a formal evaluation to be conducted by an independent evaluation team commissioned by PCFA.

Requirements for participation

PCFA is seeking Expressions of Interest from Health Care Providers in the public or private health sectors, to be a host employer to a Prostate Cancer Specialist Nurse. . The PCSNs will be provided with a Practice Framework, Competency Standards and a Professional Development Framework. They will also be required to participate in the program activity reporting and evaluation. Health services should consider the PCFA Practice Framework and Competency Standards prior to applying to host a PCSN position.

Project funding and support

Funding is currently available to support commonwealth-funded Prostate Cancer Specialist Nursing positions. Applications for reduced FTE positions will be considered from centres with smaller populations. PCFA will provide the host health services funding towards the cost of employing the nurse and agreed professional development. Funding beyond the agreed initial contract period cannot be guaranteed. Funding will only be granted for new positions where there is clear demonstration that the role will only be used to benefit those affected by prostate cancer. Funding cannot extend to include any other additional costs.

The recruitment costs of the PCSN and the recruitment process will be the responsibility of the host employer. PCFA will be available to participate in the shortlisting and interview process if required, however this is not an essential requirement of the funding agreement.

PCFA will provide ongoing professional development support to the PCSN as outlined in the service level funding agreement. An additional \$1,500 per annum will be allocated by PCFA to the nurse for the specific purpose of professional development approved by PCFA. All PCSNs will be required to undertake the Prostate Nursing Care Short Course through La Trobe University (or an equivalent course) if not already completed prior to appointment and this will be funded by PCFA. Enrolment for this course must occur prior to the end of the first year of funding.



Part Two – Selection Criteria and Process

Instructions for responding to EOI

Health Service Providers should be able to demonstrate a need for the position in their locale and show how the position will be used to enhance care for those affected by prostate cancer in a multi-disciplinary context.

Expressions of Interest will only be accepted on the designated application form and should be submitted electronically along with the signed declaration, the applicants proposed position description and proposed remuneration package, detailing the salary component, superannuation and workers compensation insurance. Applications should be made to funding@pcfa.org.au

COMPLETED APPLICATIONS INCLUDING SIGNED DECLARATION MUST BE RECEIVED BY CLOSE OF BUSINESS FRIDAY 6 MARCH 2020

An email will be sent in reply confirming that the application has been received.

Selection Criteria

Funding to health service providers to host a Prostate Cancer Specialist Nurse will be allocated based on the following factors being clearly demonstrated in the application:

- Significant prostate cancer incidence and/or mortality in locale or health service area.
- Evidence of clinical treatment services for men with prostate cancer or established links to a treating centre not provided by the host health service provider.
- Evidence of engagement of collaborating health care professionals in the application process
- Description of proposed Prostate Cancer Specialist Nurse function at both a clinical and strategic level
- Organisation chart, detailing key working relationships and demonstrating how the nurse will work in the context of a multi-disciplinary team.
- Details of existing prostate cancer supportive care and specialist nursing services in the locale or health services area.
- Acknowledgement of terms and conditions of funding agreement

Potential host sites should consider the Funding Agreement and PCSN Practice Framework and Competency Standards, in consultation with the relevant personnel within the host site, at the time of making the application.



Prostate Cancer Foundation of Australia

Eligible locations

Locations for the new commonwealth-funded PCSNs must be in areas of high need, based on the following criteria, which includes but is not limited to:

- Incidence of prostate cancer;
- Capacity to deliver prostate cancer treatment and support services; and
- Existing prostate cancer nurse services (as this may preclude them from being an area of high need)

Areas with a low incidence of prostate cancer, minimal or no facilities to treat prostate cancer, or that already have commonwealth funded PCSN services may not be eligible for a Commonwealth funded PCSN position.

Process

Applications will be reviewed by the program review panel which includes PCFA's Director, Nursing Programs and one independent reviewer.

All applicants will be notified of the outcome of their application by letter.

Timelines

Date	Process
6 March 2020	Closing date for applications Round 1
May 2020	Notify applicants in writing of outcome of application
June 2020	Health services recruitment to commence for Round 1 positions
From 1 July 2020 (no later than 31 October 2020)	Round 1 Nurses to commence in the post

Enquiries regarding the program should be directed to: Sally Sara, Director, Nursing Programs (08) 7002 8622 or Sally.Sara@pcfa.org.au

Prostate Cancer Foundation of Australia Limited
(in its capacity as trustee of Prostate Cancer Foundation of Australia)

[Funding Recipient]

Funding Agreement

Prostate Cancer Specialist Nurse Program

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This Agreement is made on _____

Parties

- 1 Prostate Cancer Foundation of Australia Limited (ABN 42 073 253 924), Level 3, 39-41 Chandos Street, St Leonards NSW 2065, as trustee for Prostate Cancer Foundation of Australia (ABN 31 521 774 656) (**PCFA**).
- 2 The authority or body named in Item 1 of Schedule 1 (the **Funding Recipient**).

Recitals

- A PCFA is a broad-based community organisation and the peak national body for prostate cancer in Australia and a registered charity. PCFA is dedicated to reducing the impact of prostate cancer on Australian men, their partners, families, recognising the diversity of the Australian community. PCFA does this by:
- promoting and funding world leading, innovative research into prostate cancer;
 - Implementing awareness campaigns and education programs for the Australian community, health professionals and government; and
 - Supporting men and their families affected by prostate cancer through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses.
- B PCFA receives funding through government, corporate partnerships, bequests, and charitable donations to carry out its essential work.
- C PCFA proposes to provide financial support to the Funding Recipient to contribute towards the cost of employing a Prostate Cancer Specialist Nurse, as well as provide the Prostate Cancer Specialist Nurse with ongoing professional development, support and formal program evaluation.
- D The Funding Recipient agrees to accept the Funding on the terms set out in this Agreement.

It is agreed as follows.

1 Definitions and Interpretation

1.1 Definitions

The following definitions apply unless the context requires otherwise.

Activity Reporting means the reporting requirements set out in Schedule 6.

Agreement refers to this funding agreement between PCFA and the Funding Recipient.

Asset means, in respect of the Program, an item of property which:

- (a) has been acquired wholly or in part with the Funding; and
- (b) at the time of acquisition, the value of the item is greater than \$10,000 (GST inclusive), but excludes Intellectual Property rights.

Auditor-General means the office established under the *Auditor-General Act 1997* (Cth) and includes any other entity that may, from time to time, perform the functions of that office.

Business Day means a day which is not a Saturday or Sunday or public holiday in Sydney.

Commencement Date means the date set out in Item 11 of Schedule 1.

Commonwealth means the Commonwealth of Australia, acting through and represented by the Department of Health.

Commonwealth Funding Agreement means the funding agreement between PCFA and the Commonwealth, dated 26 November 2019, pursuant to which the Commonwealth agrees to provide funding to PCFA for the purposes of the Program.

Conduct has the meaning given to it in clause 25.

Confidential Information has the meaning given to it in clause 16.

Consideration has the meaning given by the GST Law.

Director of Nursing means PCFA's national manager of the Program.

Dispute has the meaning given to it in clause 23.1.

Employment Agreement is the agreement between the Funding Recipient and Prostate Cancer Specialist Nurse, specifying all terms and conditions of employment of the Prostate Cancer Specialist Nurse by the Funding Recipient.

Evaluation Team means the independent research team commissioned by PCFA to evaluate the role of Prostate Cancer Specialist Nurses in accordance with Schedule 7.

Freedom of Information Commissioner means any of the information officers appointed under the *Australian Information Commissioner Act 2010* (Cth) when performing the 'freedom of information functions' as defined in that Act.

Funding means, subject to any pro-rated adjustment to reflect the Commencement Date, the maximum annual remuneration amount provided by PCFA to the Funding Recipient for the employment of a Prostate Cancer Specialist Nurse under the terms and conditions of the Employment Agreement, as set out in Item 6 of Schedule 1.

Funding Period means the period beginning on the Commencement Date and ending on 30 June 2023.

GST has the meaning given by the GST Law.

GST Amount means in relation to a Taxable Supply the amount of GST payable in respect of that Taxable Supply.

GST Group has the meaning given by the GST Law.

GST Law has the meaning given by the *A New Tax System (Goods and Services Tax) Act 1999* (Cth), or, if that Act does not exist means any Act imposing or relating to the imposition or administration of a goods and services tax in Australia and any regulation made under that Act.

Information Commissioner means the information officers appointed under the *Australian Information Commissioner Act 2010* (Cth) when performing the 'information commissioner functions' as defined in that Act.

Information Privacy Principle has the meaning given by the Privacy Act.

Input Tax Credit has the meaning given by the GST Law and a reference to an Input Tax Credit entitlement of a party includes an Input Tax Credit for an acquisition made by that party but to which another member of the same GST Group is entitled under the GST Law.

Intellectual Property means all intellectual property rights including patents, trade secrets, trademarks, logos, copyrights or designs.

Law means any applicable statute, regulation, by-law, or legislation in force from time to time in Australia, whether made by a State, Territory, the Commonwealth of Australia, or a local government, and includes the common law and rules of equity as applicable from time to time.

Material means anything in relation to which Intellectual Property rights arise.

National Privacy Principle has the meaning given by the Privacy Act.

Nurses Award means the industrial award for nurses stipulated in the Funding Recipient's employment policies.

Ombudsman means the office established under the *Ombudsman Act 1976* (Cth) and includes any other person who may, from time to time, perform the functions of that office.

PCFA Logo means the logo set out in Schedule 9.

Personal Information has the meaning given by the Privacy Act.

Privacy Act means the *Privacy Act 1988* (Cth).

Privacy Commissioner means any of the information officers appointed under the *Australian Information Commissioner Act 2010* (Cth) when performing the 'privacy functions' as defined in that Act.

Program means the Prostate Cancer Specialist Nursing Program.

Prostate Cancer Specialist Nurse means a nurse employed by the Funding Recipient on the terms and conditions of the Employment Agreement who meets the requirements of Schedule 2.

Special Conditions means any special conditions for employment of a Prostate Cancer Specialist Nurse as set out in Item 12 of Schedule 1.

Taxable Supply has the meaning given by the GST law excluding the reference to section 84-5 of the *A New Tax System (Goods and Services Tax) Act 1999* (Cth).

Term has the meaning given to it in clause 2.

1.2 Interpretation

Headings are for convenience only and do not affect interpretation. The following rules apply unless the context requires otherwise.

- (a) The singular includes the plural, and the converse also applies.
- (b) A gender includes all genders.
- (c) If a word or phrase is defined, its other grammatical forms have a corresponding meaning.
- (d) A reference to a *person* includes a corporation, trust, partnership, unincorporated body or other entity, whether or not it comprises a separate legal entity.
- (e) A reference to a clause, schedule or annexure is a reference to a clause of, or schedule or annexure to, this Agreement.
- (f) A reference to an agreement or document (including a reference to this Agreement) is to the agreement or document as amended, supplemented, novated or replaced, except to the extent prohibited by this Agreement or that other agreement or document, and includes the recitals, and schedules and annexures to that agreement or document.
- (g) A reference to writing includes any method of representing or reproducing words, figures, drawings or symbols in a visible and tangible form.
- (h) A reference to a party to this Agreement or another agreement or document includes the party's successors, permitted substitutes and permitted assigns (and, where applicable, the party's legal personal representatives).

- (i) A reference to legislation or to a provision of legislation includes a modification or re-enactment of it, a legislative provision substituted for it and a regulation or statutory instrument issued under it.
- (j) A reference to conduct includes an omission, statement or undertaking, whether or not in writing.
- (k) A reference to an *agreement* includes any undertaking, deed, agreement and legally enforceable arrangement, whether or not in writing, and a reference to a *document* includes an agreement (as so defined) in writing and any certificate, notice, instrument and document of any kind.
- (l) A reference to *dollars* and \$ is to Australian currency.
- (m) A reference to a *right* or *obligation* of any two or more people comprising a single party confers that right, or imposes that obligation, as the case may be, on each of them severally and each two or more of them jointly. A reference to that party is a reference to each of those people separately (so that, for example, a representation or warranty by that party is given by each of them separately).
- (n) A reference to an *asset* includes any real or personal, present or future, tangible or intangible property or asset (including Intellectual Property) and any right, interest, revenue or benefit in, under or derived from the property or asset.
- (o) Mentioning anything after *includes, including, for example,* or similar expressions, does not limit what else might be included.
- (p) Nothing in this Agreement is to be interpreted against a party solely on the ground that the party put forward this Agreement or a relevant part of it.
- (q) A reference to a party using or obligation on a party to use its best endeavours or reasonable endeavours does not oblige that party to agree to commercially onerous or unreasonable conditions.

2 Term of Agreement

Subject to the terms and conditions set out in this Agreement, the Term will commence on the date that this Agreement is executed and will continue until the end of the Funding Period.

3 Funding

3.1 PCFA Funding to the Funding Recipient

- (a) Subject to the terms and conditions of this Agreement, PCFA will provide to the Funding Recipient, Funding towards the employment of a Prostate Cancer Specialist Nurse under the terms and conditions of the Employment Agreement during the Funding Period.
- (b) The provision of Funding to the Funding Recipient will occur by monthly electronic transfer from PCFA to the Funding Recipient within ten Business Days of the provision of a valid tax invoice by the Funding Recipient to PCFA.

3.2 Conditions to Funding

The provision of Funding under clause 3.1 is subject to the following conditions:

- (a) the Funding Recipient must employ a nurse as a Prostate Cancer Specialist Nurse who meets the requirements set out in Schedule 2, unless otherwise approved by PCFA;

- (b) the Funding Recipient must co-ordinate the work of the Prostate Cancer Specialist Nurse at all times during the Funding Period and must ensure that it complies with the various frameworks and standards set out in Schedules 3, 4 and 5;
- (c) any Funding from PCFA to the Funding Recipient must be utilised by the Funding Recipient solely for the purposes of funding the Program within the Term;
- (d) the Funding Recipient must submit all Activity Reporting to PCFA in accordance with Schedule 6;
- (e) the Funding Recipient must inform PCFA of additional sources of funding in accordance with clause 3.4;
- (f) the Funding Recipient must participate in the evaluation of the Program in accordance with Schedule 7;
- (g) there is no termination of the Employment Agreement prior to the end of the Funding Period;
- (h) there is no termination of the Employment Agreement under clause 5.4; and
- (i) the progress of the Program is otherwise satisfactory in the opinion of PCFA.

3.3 Failure to fulfil conditions

If any one or more of the conditions provided in clause 3.2 is not fulfilled, PCFA may by written notice to the Funding Recipient:

- (a) discontinue the provision of Funding to the Funding Recipient;
- (b) seek recovery of Funding previously provided to the Funding Recipient, including but not limited to Funding spent by the Funding Recipient in contravention of the terms and conditions of this Agreement; or
- (c) terminate this Agreement.

3.4 Additional sources of funding

- (a) During the Term, the Funding Recipient must inform PCFA of any funding it receives from sources other than PCFA, from which the Funding Recipient is providing funding or support for the employment costs or professional development of the Prostate Cancer Specialist Nurse.
- (b) The existence of any funding from sources other than PCFA may influence the amount of Funding provided by PCFA to the Funding Recipient.

3.5 Overpayment of Funding

- (a) The Funding Recipient will notify PCFA immediately in writing where it has, or ought to have, become aware that it or the Prostate Cancer Specialist Nurse has received an overpayment of Funding.
- (b) If there is an overpayment of Funding referred to in paragraph (a), the Funding Recipient must reimburse PCFA within ten Business Days of giving notification of the overpayment to PCFA.

3.6 Commonwealth Funding Agreement

If, for any reason, the Commonwealth fails to pay the amounts contemplated by the Commonwealth Funding Agreement to PCFA at the times contemplated by the Commonwealth Funding Agreement, then PCFA's obligation to pay the Funding Recipient under clause 3.1 shall

be deferred until such time as those amounts have been paid. For the avoidance of doubt, such deferral may be indefinite.

4 Professional development funding

4.1 Professional and development funding

- (a) PCFA will pay up to \$1,500 per financial year up to \$4,500 per 3 years funding to the Prostate Cancer Specialist Nurse for professional development activities and related costs in accordance with Schedule 5.
- (b) The provision of funding for professional development will only occur for professional development activities for which PCFA and the Funding Recipient have given prior written approval.
- (c) The payment of funding for professional development activities will occur by electronic funds transfer from PCFA directly into the bank account of the Prostate Cancer Specialist Nurse:
 - (i) within ten Business Days of the provision of a valid tax invoice from the professional development provider by the Prostate Cancer Specialist Nurse to PCFA; or
 - (ii) as otherwise agreed by PCFA and the Prostate Cancer Specialist Nurse.
- (d) If a replacement Prostate Cancer Specialist Nurse is employed, as may be required under clause 5.4(a)(iii), then PCFA will provide that replacement Prostate Cancer Specialist Nurse with funding for professional development in any financial year to the extent that the previous Prostate Cancer Specialist Nurse has not accessed such funding in that year.

4.2 La Trobe University Prostate Nursing Care short course

- (a) To the extent not already completed by a Prostate Cancer Specialist Nurse, PCFA will cover the course-fees incurred for each Prostate Cancer Specialist Nurses to undertake La Trobe University's Prostate Nursing Care short course.
- (b) By entering into this Agreement, the Funding Recipient gives its consent to the Prostate Cancer Specialist Nurse's participation in this course, such participation to commence within the first 12 months following the Commencement Date.
- (c) PCFA's support of each Prostate Cancer Specialist Nurses participation in La Trobe University's Prostate Nursing Care short course is in addition to the \$1,500 that is available pursuant to clause 4.1.
- (d) For the avoidance of doubt, PCFA's obligation to support a Prostate Cancer Specialist Nurse's participation in La Trobe University's Prostate Nursing Care short course shall cease at the earlier of the termination of the Employment Contract, the termination of this Agreement or the end of the Funding Period.

5 Recruitment and employment of Prostate Cancer Specialist Nurse

5.1 Recruitment of a Prostate Cancer Specialist Nurse

- (a) In recruiting a Prostate Cancer Specialist Nurse, the Funding Recipient agrees to:
 - (i) provide the following documents to PCFA prior to advertising the position of Prostate Cancer Specialist Nurse:
 - (A) the proposed position description and selection criteria;

- (B) the proposed remuneration package for the nurse including anticipated employment costs; and
- (C) the proposed advertisement for the position.
- (ii) conduct a thorough review of the applicants for the position;
- (iii) provide PCFA with all documentation submitted by the applicants, including but not limited to references and resumes;
- (iv) provide PCFA with a written opinion in relation to the suitability of each applicant for the position;
- (v) notify PCFA of its preferred candidate;
- (vi) obtain written approval from PCFA (which PCFA must not unreasonably withhold) prior to employing a preferred applicant;
- (vii) complete the recruitment process by xx XXXX 20xx; and
- (viii) ensure a Prostate Cancer Specialist Nurse has commenced in the position by xx XXXX 20xx.
- (b) The Funding Recipient must arrange an expert and comprehensive health assessment of the Prostate Cancer Specialist Nurse prior to employment of the Prostate Cancer Specialist Nurse, in line with the Funding Recipient's local health screening policies.
- (c) If no applicant satisfies the minimum requirements set out in Schedule 2, PCFA may, in its sole discretion, withhold Funding to the Funding Recipient or terminate this Agreement.

5.2 Employment of Prostate Cancer Specialist Nurse

- (a) The Funding Recipient agrees to employ a Prostate Cancer Specialist Nurse during the Funding Period on the terms and conditions set out in the Employment Agreement, in accordance with this Agreement.
- (b) The Employment Agreement will commence not later than xx XXXX 20xx.
- (c) The parties agree that the Prostate Cancer Specialist Nurse will only be employed within the service area set out in Schedule 1.
- (d) The Funding Recipient must assign a representative, as identified in Item 4 of Schedule 1, who will be responsible for reporting and liaising with PCFA.
- (e) Subject to clause 5.4(a)(iii), the Funding Recipient must remain the employer of the Prostate Cancer Specialist Nurse for the duration of the Funding Period.
- (f) The Funding Recipient must:
 - (i) inform the Prostate Cancer Specialist Nurse of the terms and conditions of this Agreement; and
 - (ii) make it a condition of the Employment Agreement that the Prostate Cancer Specialist Nurse must not do, or omit to do, anything that would cause the Funding Recipient to be in breach of this Agreement.
- (g) The Funding Recipient will be in breach of this Agreement if the Prostate Cancer Specialist Nurse does, or omits to do, anything that would cause the Funding Recipient to be in breach of this Agreement.

5.3 Leave entitlements and coverage

- (a) The Funding Recipient must notify PCFA of all leave proposed and taken by the Prostate Cancer Specialist Nurse during the Funding Period.
- (b) The Funding Recipient warrants that the Prostate Cancer Specialist Nurse will be entitled to study leave and other leave entitlements under the Employment Agreement, in accordance with the relevant Nurses Award.
- (c) If a Prostate Cancer Specialist Nurse utilises leave entitlements for a period beyond two consecutive weeks, the Funding Recipient must provide appropriate cover for the Prostate Cancer Specialist Nurse service in that time.
- (d) If a Prostate Cancer Specialist Nurse requires extended leave (planned or unplanned) of more than four weeks, the Funding Recipient must take all reasonable steps to find a replacement who meets the standards set out in Schedule 4, for the duration of the extended leave.
- (e) The Funding Recipient will pay all costs associated with covering or replacing a Prostate Cancer Specialist Nurse who has taken leave in accordance with this clause 5.3.

5.4 Termination of Employment Agreement

- (a) If a Prostate Cancer Specialist Nurse cannot continue in the role, or the Employment Agreement is otherwise terminated by the Prostate Cancer Specialist Nurse or the Funding Recipient:
 - (i) the Funding Recipient shall, as soon as practicable and in any case no later than 7 Business Days after becoming aware, notify PCFA that the Prostate Cancer Specialist Nurse cannot continue in the role or of the termination of the Employment Contract;
 - (ii) PCFA is entitled to cease providing Funding to the Funding Recipient upon conclusion of the employment of the Prostate Cancer Specialist Nurse; and
 - (iii) the Funding Recipient must recruit and employ a replacement Prostate Cancer Specialist Nurse on the terms and conditions set out in clauses 5.1 and 5.2.
- (b) The process of recruiting and employing a replacement Prostate Cancer Specialist Nurse in accordance with clause 5.4(a)(iii) shall be conducted in accordance with a timetable of key dates, such timetable to be determined by PCFA following consultation with the Funding Recipient.
- (c) Without limiting paragraph 5.4(b), if the Funding Recipient does not employ a replacement Prostate Cancer Specialist Nurse within three months of notifying PCFA of the vacancy arising under paragraph (a), PCFA may terminate this Agreement.
- (d) The Funding Recipient will pay all costs associated with recruiting and employing a replacement Prostate Cancer Specialist Nurse on the terms and conditions set out in clauses 5.1 and 5.2.

5.5 Provision of Employment Agreement and related documents to PCFA

Within ten Business Days of the execution of the relevant Employment Agreement, the Funding Recipient must provide PCFA with:

- (a) a copy of the executed Employment Agreement;
- (b) the start date for the Prostate Cancer Specialist Nurse;

- (c) details of the complete remuneration package for the Prostate Cancer Specialist Nurse; and
- (d) details of the Funding Recipient's bank account into which PCFA is to provide Funding.

6 Supply of equipment to Prostate Cancer Specialist Nurse

The Funding Recipient agrees to supply the Prostate Cancer Specialist Nurse with:

- (a) clinical equipment and supplies as reasonably required by the Prostate Cancer Specialist Nurse;
- (b) access to an office and office equipment, including a laptop computer (Ultrabook standard or above);
- (c) a mobile phone (iOS 13 or Android 10 or above); and
- (d) access to a motor vehicle (where the Prostate Cancer Specialist Nurse is regularly required to travel long distances),

for the duration of the Funding Period.

7 Uniform and identification badge

Unless otherwise provided in this Agreement, the Funding Recipient must ensure that the Prostate Cancer Specialist Nurse wears appropriate professional attire at all times, in accordance with policies of the Funding Recipient.

8 Evaluation of the Prostate Cancer Specialist Nurse role

- (a) The parties agree that the Evaluation Team will complete a formal evaluation of the role of the Prostate Cancer Specialist Nurse in accordance with Schedule 7.
- (b) The Funding Recipient agrees to participate in the evaluation referred to in paragraph (a).

9 Occupational health and safety

The Funding Recipient must comply with its obligations under any relevant occupational health and safety legislation.

10 Access to relevant financial information and reports

Upon request by PCFA, the Funding Recipient agrees to provide PCFA access to financial information and reports so that PCFA can effectively monitor the expenditure of Funding.

11 Activity Reporting

- (a) The Prostate Cancer Specialist Nurse must provide Activity Reporting to the Coordinator of Nursing and the Funding Recipient in accordance with Schedule 6.
- (b) The Funding Recipient agrees to allow the Prostate Cancer Specialist Nurse sufficient time to complete Activity Reporting.

12 Travel expenses and other disbursements

Unless otherwise provided in this Agreement, the Funding Recipient agrees to pay for all travel costs and other disbursements associated with the employment of the Prostate Cancer Specialist Nurse.

13 Induction and monitoring

The Funding Recipient agrees to:

- (a) the participation of newly appointed Prostate Cancer Speciality Nurses in a PCFA funded induction program, the provision of such program to be arranged by PCFA;
- (b) a PCFA representative visiting newly appointed Prostate Cancer Specialist Nurses within the first 6 - 9 months of their start date;
- (c) PCFA's Director of Nursing conducting biennial site visits (at the cost of PCFA) for the purposes of:
 - (i) Program performance review; and
 - (ii) the provision of professional development to the Prostate Cancer Specialist Nurse;
- (d) the Prostate Cancer Specialist Nurse's participation in monthly team teleconferences facilitated by PCFA; and
- (e) for the purpose of professional development and service promotion, the participation (at the cost of PCFA) of the Prostate Cancer Specialist Nurse in an annual training event, the location and duration of such event to be determined by PCFA.

14 Promotional activities

14.1 Publicity

- (a) At its absolute discretion, PCFA may publicise and report on the execution of this Agreement and the awarding of Funding to the Funding Recipient, including, but not limited to, the amount of Funding awarded.
- (b) The Funding Recipient acknowledges that the Commonwealth has the right to publicise and report on the Program and their funding thereof. This may include, but is not limited to, the Commonwealth publishing:
 - (i) details of the funding awarded to PCFA;
 - (ii) details about the Funding Recipient, including its name and the amount of Funding received; and
 - (iii) the title, location and a brief description of the Program and activities related to the Program.

Such publicity may appear in, amongst other things, media releases, annual reports and on relevant websites.

14.2 Promotional activities for PCFA

- (a) Where PCFA provides reasonable notice, the Funding Recipient will make the Prostate Cancer Specialist Nurse available at all reasonable times for promotional and sponsorship activities for PCFA.
- (b) Any promotional and sponsorship activity involving the Prostate Cancer Specialist Nurse must first be agreed in writing by PCFA and the Funding Recipient.
- (c) Where a Prostate Cancer Specialist Nurse is undertaking promotional and sponsorship activities for PCFA, the Funding Recipient must ensure that the Prostate Cancer Specialist Nurse wears attire displaying PCFA Logos and, where applicable, relevant sponsor logos as provided by PCFA.
- (d) PCFA will pay for costs associated with promotional activities under this clause 14.2 where such activities are initiated by PCFA.

15 Intellectual Property

15.1 Acknowledgements

- (a) The Funding Recipient acknowledges and agrees that PCFA Logos carry widespread goodwill and reputation on behalf of PCFA and the Funding Recipient undertakes not to do or cause anything to be done that may damage that goodwill and reputation or adversely affect PCFA's rights in relation to PCFA Logos.
- (b) The Funding Recipient acknowledges and agrees that:
The Commonwealth is a major sponsor of the Program,
and undertakes not to do or permit anything to be done that may damage the goodwill or reputation of, the Commonwealth or any other sponsor of the Program.

15.2 Licence to use the PCFA Logo

PCFA grants to the Funding Recipient a non-exclusive, non-transferable, and royalty-free licence to use the PCFA Logo for the Term solely to the extent necessary for the Funding Recipient to use the PCFA name and PCFA Logo in promotional activities and joint fund raising activities, provided that:

- (a) the Funding Recipient obtains written consent from PCFA prior to the relevant activity; and
- (b) the Funding Recipient complies with the reasonable directions of PCFA in connection with any use of the PCFA Logo.

15.3 No registration

The Funding Recipient must not take any step, nor assist any third party to take any step, to apply for, register or otherwise secure any trade mark, business name, company name, domain name or other similar rights which comprise, include or are associated with the PCFA Logo (or any mark which is substantially identical with, or deceptively similar to, the PCFA Logo) either during the Term or after termination of this Agreement.

15.4 Receipt of charitable donations

- (a) The Funding Recipient must not open an account bearing the name of PCFA or otherwise in respect of the Program.
- (b) The Funding Recipient must immediately notify PCFA of any donations made in respect of the Program and direct any such donations to PCFA.

15.5 Intellectual Property created during the Term

- (a) The Funding Recipient agrees that PCFA will have sole ownership of, and all rights to, any Intellectual Property created by the Prostate Cancer Specialist Nurse during the Term.
- (b) The Funding Recipient agrees that the Evaluation Team will have sole ownership of, and all rights to, any academic licence arising from the evaluation of the Program.

16 Confidentiality

16.1 Confidential Information

The terms and conditions of this Agreement and all information provided under or in connection with this Agreement (the **Confidential Information**) are confidential.

16.2 Prohibition of disclosure of Confidential Information

- (a) Each party undertakes to the other that it, its officers, employees, agents and subcontractors will not, without the consent of the other party, disclose Confidential Information to any person, unless the disclosure:
- (i) is to the Prostate Cancer Specialist Nurse in accordance with clause 5.2(f);
 - (ii) is of Confidential Information already within the public domain other than as a result of a breach of this Agreement;
 - (iii) is of Confidential Information already known to that person (as evidenced by the person's written records) at the date of disclosure;
 - (iv) is to be made to the professional advisers of the disclosing party, provided that the disclosee agrees to keep the Confidential Information confidential;
 - (v) is to be made to a related body corporate (within the meaning of the *Corporations Act 2001* (Cth) of the disclosing party, provided that the disclosee agrees to keep the Confidential Information confidential;
 - (vi) is required by law, or any governmental agency acting or purporting to act within its powers and functions;
 - (vii) is reasonably necessary for the purposes of any mediation, arbitration or legal proceeding involving one of the parties to this Agreement; or
 - (viii) in the case of PCFA, is required pursuant to the terms of the Commonwealth Funding Agreement.
- (b) The consent referred to in paragraph (a) must not be unreasonably withheld.

16.3 Disclosure for purposes of this Agreement

Each party must take all steps reasonably necessary to ensure that Confidential Information is disclosed only to such of its officers, employees, agents or subcontractors as require that knowledge in order to carry out their duties in accordance with this Agreement.

16.4 Confidentiality continues

The obligation of confidentiality under this clause 16 is a continuing obligation and remains in force during the Term and afterwards for a period of seven years.

17 Access to premises and information

17.1 Access to premises and material

- (a) The Funding Recipient must give:
- (i) the Commonwealth;
 - (ii) the Auditor-General;
 - (iii) the Freedom of Information Commissioner;
 - (iv) the Information Commissioner;
 - (v) the Privacy Commissioner;
 - (vi) the Ombudsman; and
 - (vii) PCFA,

(each an **Authorised Person**) access to premises under their control at which records and Materials associated with this Agreement are stored or work related to the Program is undertaken.

- (b) Subject to clause 17.1(c), the Funding Recipient must arrange for the Authorised Persons to:
 - (i) inspect and copy Materials in the Funding Recipient's possession or control; and
 - (ii) access any Asset in the Funding Recipient's control, wherever they may be located,for purposes associated with this Agreement or the Funding Recipient's performance of this Agreement.
- (c) The rights referred to in this clause, wherever practicable, are subject to:
 - (i) the provision of reasonable prior notice by the Authorised Person (except where the Authorised Person believes that there is an actual or apprehended breach of law or threat posed to the safety, health or well-being of any person); and
 - (ii) the Funding Recipient's reasonable security procedures.
- (d) The Funding Recipient agrees to provide all assistance reasonably requested by the Authorised Person in respect of any inquiry into or concerning the Program or this Agreement.
- (e) Nothing in this Agreement limits or restricts in any way any duly authorised function, power, right or entitlement of an Authorised Person or their respective delegate.
- (f) Notwithstanding any other provision of this Agreement, this clause applies for the Term and for a period of 7 years from the end of the Term or the termination of this Agreement.

17.2 Access to documents

- (a) Where the Commonwealth or PCFA has received a request for access to a Document created by or in the possession of the Funding Recipient, that relates to the performance of this Agreement (and not to the entry into this Agreement), the Commonwealth or PCFA, as the case may be, may at any time by notice require the Funding Recipient to provide, or arrange for the provision of, the document to the Commonwealth or PCFA.
- (b) The Funding Recipient must, at no cost to the Commonwealth or PCFA, promptly comply with a notice issued pursuant to clause 17.2(a).
- (c) This clause 17.2 only applies to the extent that the Commonwealth Funding Agreement is a 'Commonwealth contract' as defined in the *Freedom of Information Act 1982* (Cth).
- (d) For the purposes of this clause 17.2, the terms 'document' and 'Commonwealth contract' have the same meaning as in the *Freedom of Information Act 1982* (Cth).

18 Privacy

- (a) The Funding Recipient must:
 - (i) not do any act or engage in any practice which, if done or engaged in by the Commonwealth, would be a breach of an Information Privacy Principle;
 - (ii) not use or disclose Personal Information collected for direct marketing purposes in a manner that would breach section 16F of the Privacy Act;

- (iii) comply with any directions, guidelines, determinations or recommendations of the Commonwealth, to the extent that they are consistent with the Information Privacy Principles; and
 - (iv) comply with the obligations in National Privacy Principles 7 to 10 (to the extent they apply to the Funding Recipient).
- (b) To the extent the Funding Recipient provides health, or health-related services to an individual, it must:
- (i) comply with the National Privacy Principles in relation to the use and disclosure of health, health-related information or other 'sensitive information' (as defined in the Privacy Act) about the individual;
 - (ii) transfer health or health-related information to another Australian health or health-service provider when the Commonwealth directs it to do so; and
 - (iii) inform the individual:
 - (A) as required by the Privacy Act; and
 - (B) at the time the information is collected,
 that the information may be disclosed to a new health or health-related service provider if required by the Commonwealth.
- (c) The Funding Recipient must notify PCFA immediately if it becomes aware of a breach or possible breach of any of its obligations under this clause 18.

19 Representations and Warranties

19.1 Representations and Warranties of each party

Each party represents and warrants to the other party that, as at the date of this Agreement:

- (a) it has the power and authority to enter into, exercise its rights, and perform and comply with its obligations under this Agreement;
- (b) it is not bankrupt, insolvent or in the process of being wound up;
- (c) its entry into, exercise of its rights or performance of or compliance with its obligations under this Agreement do not and will not violate or exceed any restrictions imposed by its constituent documents or agreements with third parties; and
- (d) its obligations under this Agreement are valid, binding and enforceable.

19.2 Representations and Warranties of the Funding Recipient

The Funding Recipient represents and warrants to PCFA that:

- (a) it will promptly notify and fully disclose to PCFA in writing any event or occurrence actual or threatened arising which could have an adverse effect on its ability to perform any of its obligations under this Agreement;
- (b) unless otherwise disclosed in this Agreement, it is not entering into this Agreement as trustee of any trust or settlement;
- (c) as a result of entering into this Agreement, it may be considered a 'Commonwealth service provider' for the purposes of the *Ombudsman Act 1976* (Cth) and subject to investigation by the Ombudsman under that Act. Neither the Commonwealth or PCFA will be liable for the cost of any such investigation by the Ombudsman.

- (d) the recruitment and management of the Prostate Cancer Specialist Nurse will be fair, open and based on merit; and
- (e) it has not been named by the Director of the Equal Opportunity for Women in the Workplace Agency as an employer currently not complying with the *Equal Opportunity for Women in the Workplace Act 1999* (Cth).

19.3 Limitation of warranties

PCFA acknowledges that the Funding Recipient is not making, and that no person acting on behalf of the Funding Recipient has made, any warranty or representation other than as is expressly stated in this Agreement.

19.4 Exclusion of implied warranties

Except as expressly provided to the contrary in this Agreement, and to the extent permissible by Law, all warranties, whether express, implied, and statutory or otherwise relating in any way to the subject matter of this Agreement or to this Agreement generally, are excluded. Where any Law implies into this Agreement any term, and that Law limits or prohibits provisions in a contract excluding or modifying the application of or exclusion of liability under that term, the term is included in this Agreement to the extent required by the Law.

20 Indemnity and insurance

20.1 Indemnity by the Funding Recipient

The Funding Recipient indemnifies PCFA against any claim, loss (including economic loss), liability, cost and expense that may be incurred or sustained by PCFA as a result of a breach of this Agreement by the Funding Recipient or any act or omission of the Funding Recipient, its officers, employees, agents or subcontractors.

20.2 Insurance

- (a) The Funding Recipient must take out and maintain for the duration of the Funding Period:
 - (i) professional indemnity insurance for such an amount as is approved by PCFA acting reasonably;
 - (ii) public liability insurance for such an amount as is approved by PCFA acting reasonably; and
 - (iii) other insurances relevant to the employment of a Prostate Cancer Specialist Nurse.
- (b) Within ten Business Days of the execution of the Employment Agreement, and otherwise within seven Business Days after receiving a request from PCFA, the Funding Recipient must produce current insurance policies or certificates of currency in respect of its insurance conforming with the requirements of this clause 20.2.
- (c) The Funding Recipient must notify PCFA of any cancellation of insurance required under this clause 20.2.
- (d) If the Funding Recipient fails to comply with its insurance obligations under this clause 20.2, PCFA may by written notice require it to do so and, if within seven Business Days of such notice the Funding Recipient has not produced a current insurance policy or certificate of currency in respect of its insurance, then PCFA may affect any insurance reasonably necessary to comply with the Funding Recipient's insurance obligations under this clause 20.2. Any premiums due in relation to this insurance will be a debt due from

the Funding Recipient to PCFA payable by the Funding Recipient on demand under clause 20.1.

21 GST

21.1 GST to be added to amounts payable

If GST is payable on a Taxable Supply made under, by reference to or in connection with this Agreement, the party providing the Consideration for that Taxable Supply must also pay the GST Amount as additional Consideration. This clause does not apply to the extent that the Consideration for the Taxable Supply is expressly stated to be GST inclusive.

21.2 Liability net of GST

Any reference in the calculation of Consideration or of any indemnity, reimbursement or similar amount to a cost, expense or other liability incurred by a party, must exclude the amount of any Input Tax Credit entitlement in relation to the relevant cost, expense or other liability.

21.3 Adjustment events

If an adjustment event occurs in relation to a Taxable Supply made under or in connection with this Agreement, the GST Amount will be recalculated to reflect that adjustment and an appropriate payment will be made between the parties.

21.4 GST obligations to survive termination

The obligations under this clause 21 are continuing obligations and survive the expiry of the Term or the termination of this Agreement.

22 Termination of Agreement

22.1 Termination by either party

Either party may terminate this Agreement immediately:

- (a) where the other party commits a material breach of this Agreement and that party fails to remedy the breach within 14 days after being required in writing to do so;
- (b) the other party:
 - (i) is or is likely to become insolvent within the meaning of the *Corporations Act 2001* (Cth); or
 - (ii) an administrator, receiver, controller, liquidator or any like person is appointed in respect of the whole or part of the assets of that party, or any steps are made leading to the appointment of any such person or to the winding up or dissolution of that party.

22.2 Termination by PCFA

PCFA may terminate this agreement immediately:

- (a) if the Funding Recipient commits a material breach of this Agreement and PCFA considers, in its reasonable opinion, that the breach cannot be remedied;
- (b) if the Commonwealth, for any reason, terminates or reduces the scope of the Commonwealth Funding Agreement;
- (c) if the Commonwealth requires PCFA to terminate this Agreement pursuant to its rights under the Commonwealth Funding Agreement.

For the avoidance of doubt, in addition to the termination rights under clause 22.1 and 22.2, PCFA may terminate this Agreement in accordance with clauses 3.3(c), 5.1(c) or 5.4(c).

22.3 Without prejudice to accrued rights

Expiry or termination of this Agreement or the cancellation of the provision of Funding is without prejudice to and does not affect the accrued rights or remedies of any of the parties arising in any way out of this Agreement up to the date of expiry or termination or cancellation.

22.4 Effect of termination

- (a) Upon the expiry or termination of this Agreement:
 - (i) subject to clauses 22.4(b) and (c), a party will remain liable for any amount due under this Agreement but not paid by them as at the date of expiry or termination; and
 - (ii) the parties otherwise do not have any further obligations to each other, except to the extent that such obligations are expressed in this Agreement.
- (b) Within 30 days of the date of expiry or termination of this Agreement, a party seeking to claim amounts due under this Agreement but not paid to them as at the date of expiry or termination of this Agreement, must provide written details of such claim to the other party.
- (c) A party shall not be liable for any amounts due under this Agreement but not paid by them as at the date of expiry or termination of this Agreement to the extent such amounts are not notified to the other party in accordance with clause 22.4(b).

22.5 Return of documentation and Confidential Information

Upon the expiration or termination of this Agreement, each party must, if required by the other party, return to each other all records, books, drawings, notebooks and other documentation and things containing any Confidential Information disclosed under or in pursuance of this Agreement in its possession, power or control (including in the possession, power or control of any officer, employee, agent or subcontractor of the party). This obligation to return the above materials is subject to any legal or auditing obligations of a party.

22.6 Continuing clauses

Clauses 1, 10, 15, 16, 17, 18, 20, 21, 23, 25, 27, 32 and this clause 22 will continue to apply after expiration or termination of this Agreement.

23 Dispute resolution

23.1 Negotiation

If there is a dispute or difference (*Dispute*) between the parties arising out of or in connection with this Agreement, then within ten Business Days of a party notifying the other party in writing of the Dispute, a senior representative from each party must meet and use all reasonable endeavours acting in good faith to resolve the Dispute by joint discussions.

23.2 Mediation

- (a) If the Dispute is not settled within ten Business Days of notification under clause 23.1, the parties will, if mutually agreed, submit the Dispute to mediation by an expert.
- (b) The mediator will be an independent person agreed between the parties.

- (c) Any mediation meetings and proceedings under this clause must be held in Sydney.

23.3 Arbitration

- (a) If, within 28 days (or any other period agreed to in writing between the parties) after the appointment of a mediator under clause 23.2:
 - (i) the Dispute is not settled by mediation under clause 23.2; or
 - (ii) no agreement is reached to refer the Dispute to mediation under clause 23.2,either party may by written notice to the other refer the Dispute to arbitration in accordance with, and subject to, the IAMA Arbitration Rules developed by the Institute of Arbitrators and Mediators Australia.
- (b) The arbitrator will be an independent person agreed between the parties. The arbitrator may not be the same person as the mediator appointed under clause 23.2.
- (c) Subject to paragraph (a), the arbitration will be conducted and held in accordance with the laws of New South Wales.
- (d) Any arbitration meetings and proceedings under this clause must be held in Sydney.

23.4 Court proceedings and other relief

A party may not start court proceedings in relation to a Dispute until it has exhausted the procedures in this clause, unless the party seeks injunctive or other interlocutory relief.

23.5 Continuation of rights and obligations

Despite the existence of a Dispute each party must continue to perform this Agreement.

24 Notices

Any notice, demand, consent or other communication (a **Notice**) given or made under this Agreement:

- a) must be in writing and signed by the sender or an authorised officer of the sender (except if sent by email);
- b) must be addressed and delivered to the intended recipient at the address or email address set out in Schedule 8; and
- c) will be conclusively taken to be duly given or made when delivered, received or left at the above address or email. If delivery or receipt occurs on a day that is not a Business Day in the place to which the Notice is sent or is later than 4pm (local time) at that place, it will be conclusively taken to have been duly given or made at the commencement of business on the next Business Day in that place.

25 Entire Agreement

This Agreement contains the entire agreement between the parties with respect to its subject matter. It sets out the only conduct, representations, warranties, covenants, conditions, agreements or understandings (collectively **Conduct**) relied on by the parties and supersedes all earlier Conduct by or between the parties in connection with its subject matter. Neither party has relied on or is relying on any other Conduct in entering into this Agreement and completing the transactions contemplated by it.

26 Amendment

This Agreement may be amended only by another agreement executed by all the parties.

27 Assignment

The Funding Recipient cannot assign, charge, encumber or otherwise deal with any of its rights or obligations under this Agreement, or attempt or purport to do so, without the prior written consent of PCFA. The consent of PCFA may not be unreasonably withheld.

28 No Waiver

A failure to exercise or a delay in exercising any right, power or remedy under this Agreement does not operate as a waiver. A single or partial exercise or waiver of the exercise of any right, power or remedy does not preclude any other or further exercise of that or any other right, power or remedy. A waiver is not valid or binding on the party granting that waiver unless made in writing.

29 Further Assurances

Each party must do anything necessary (including executing agreements and documents) to give full effect to this Agreement and the transactions contemplated by it.

30 No Merger

The rights and obligations of the parties will not merge on the completion of any transaction contemplated by this Agreement. They will survive the execution and delivery of any assignment or other document entered into for the purpose of implementing a transaction.

31 Costs and Duty

Each party must bear its own costs arising out of the negotiation, preparation and execution of this Agreement. All duty (including stamp duty and any fines, penalties and interest) payable on or in connection with this Agreement and any instrument executed under or any transaction evidenced by this Agreement must be borne equally by the parties. Each party must indemnify the other on demand against any liability for those costs and that duty. Each party waives in favour of the other, its solicitors, counsel and in-house lawyers its rights (if any) to require any of those costs to be taxed.

32 Governing Law and Jurisdiction

This Agreement is governed by the laws of New South Wales. In relation to it and related non-contractual matters each party irrevocably submits to the non-exclusive jurisdiction of courts and agrees to waive any right to object to the venue on any ground.

33 Counterparts

This Agreement may be executed in any number of counterparts. All counterparts together will be taken to constitute one instrument.

Executed as an Agreement

Executed in accordance with section 127 of the *Corporations Act 2001* by **Prostate Cancer Foundation of Australia Limited** (in its capacity as trustee of Prostate Cancer Foundation of Australia):

Director Signature

Director/Secretary Signature

Print Name

Print Name

Date of execution: _____

Signed for and on behalf of the **Funding Recipient** by the signatory authorised for this purpose in the presence of:

Witness Signature

Signature of authorised signatory

Print Name

Print Name

Date of execution: _____

Schedule 1

Funding Recipient Details

Item 1	Name of Funding Recipient	[Insert name of Host Employer]
Item 2	ABN of Funding Recipient	[Insert ABN of Host Employer]
Item 3	Address of Funding Recipient	[Insert address of Host Employer]
Item 4	Representative of the Funding Recipient	[Insert name of the person who will be the Authority's key contact in relation to this Agreement]
Item 5	Contact details of the representative of the Funding Recipient	[Insert phone number(s) and email address of the representative]
Item 6	Funding (Note: this item sets out the maximum Funding amount available. The maximum amount is to be reduced on a pro-rata basis in to reflect the actual Commencement Date of the Prostate Cancer Specialist Nurse).	[\$] (exclusive of GST) to be paid in monthly instalments of: Year 1 (up to 30 June 2021 and assuming a 1 July 2020 Commencement Date): [Insert \$ amount of monthly instalment] Year 2 (up to 30 June 2022): [Insert \$ amount of monthly instalment] Year 3 (up to 30 June 2023): [Insert \$ amount of monthly instalment]
Item 7	Position FTE	[Insert no. of FTE]
Item 8	Position Location	[Insert location]
Item 9	Representative of PCFA	Sally Sara Director, Nursing Programs
Item 10	Contract details of the representatives of PCFA	02 9438 7000 Sally.Sara@pcfa.org.au
Item 11	Commencement Date	The date on which the Prostate Cancer Specialist Nurse is employed and commences in the position with the Funding Recipient.
Item 12	Special Conditions	N/A

Schedule 2

Minimum Requirements for a Prostate Cancer Specialist Nurse

Essential minimum requirements

1. Registered Nurse in Australia;
2. Demonstrated relevant advanced level of skill in cancer or urological nursing;
3. Demonstrated application of human resource principles at the local level;
4. Demonstrated effective communication and interpersonal skills in a multidisciplinary context;
5. Ability to work effectively as a team member;
6. Proven leadership qualities;
7. Demonstrated analytical and problem solving skills; and
8. Evidence of participation in and commitment to quality improvement and best practice principles.

Desirable requirements

1. Possess or be working towards a Bachelor of Nursing or similar;
2. Possess or be working towards a prostate nursing certificate or cancer or urology nursing specific qualification;
3. Patient teaching experience; and
4. Competence in the use of relevant information technology.

Schedule 3

Framework for Practice for the Specialist Nurse in Prostate Cancer Care

1 Prostate Cancer Specialist Nurse role statement

The Prostate Cancer Specialist Nurse is a registered nurse with advanced knowledge of the health needs and preferences of men with prostate cancer across the continuum of care, which includes diagnosis, treatment, rehabilitation, follow-up and palliative care. The practice of the Prostate Cancer Specialist Nurse incorporates advanced knowledge and skills in supportive care, including providing specialised and tailored information and education, psychological support, and clinical care. The Prostate Cancer Specialist Nurse should be able to recognise and manage changes in the needs of the client group. The Prostate Cancer Specialist Nurse also fulfills a multidisciplinary function ensuring continuity throughout the continuum of care. The Prostate Cancer Specialist Nurse demonstrates leadership within the specialty by providing expert advice and support to other health professionals and by contributing to continuous improvement and the advancement of knowledge about care of men with prostate cancer.¹

2 Position summary

The Prostate Cancer Specialist Nurse will work alongside existing healthcare providers to contribute to the delivery of effective care for men with prostate cancer. Prostate cancer treatment adopts a multimodality approach of surgery, hormones, radiotherapy, chemotherapy and surveillance programs, and it is anticipated that the Prostate Cancer Specialist Nurse will be involved in the care of men in all treatment streams. Given the diversity in need for prostate cancer support within the different health areas of Australia, provision to develop the clinical scope of the role in accordance to local need will be advocated, so long as it remains exclusively for the benefit of prostate cancer patients and within the framework of a specialist cancer nurse. The service will be provided as complementary to existing service providers and not be relied upon for bridging gaps in other health care domains. The service will operate during normal business hours and not be required to provide out of hours cover.

3 Framework for practice for the Prostate Cancer Specialist Nurse

The framework for the Prostate Cancer Specialist Nurse described in this document is based on the National Cancer Nursing Education Project (EdCaN) competency standards for the specialist cancer nurse.

A) Provision and co-ordination of care

Provision and co-ordination of care includes the assessment, planning, implementation, and evaluation of care for people affected by cancer, and consists of these four practice dimensions:

- i) Disease and treatment related care;
- ii) Supportive care;
- iii) Co-ordinated care; and
- iv) Information provision and education.

¹ Adapted from the National Breast Cancer Centre. *Specialist Breast Nurse Competency Standards and Associated Educational Requirements*. Camperdown, National Breast Cancer Centre, 2005

i) Disease and treatment related care

This includes activities that reflect the role of the Prostate Cancer Specialist Nurse in reducing risk as well as managing the disease, treatment delivery and follow-up care. The Prostate Cancer Specialist Nurse will also possess knowledge of, and participate in activities that contribute to reducing the risk of developing cancer and that promote early detection of cancer.

The Prostate Cancer Specialist Nurse is well placed to take an active role in the education of the community on prostate cancer awareness and the importance of early detection. Early detection of prostate cancer is frequently associated with the use of the Prostate-Specific Antigen (PSA) test in the well population. The debate on screening for prostate cancer is long standing and at present there is no standardised screening test available in Australia specific to prostate cancer. Whilst the role of the Prostate Cancer Specialist Nurse is predominantly focused on men with an existing diagnosis, it is anticipated that there will be occasions where the Prostate Cancer Specialist Nurse will be contacted by the well community for information and advice on PSA testing. The Prostate Cancer Specialist Nurse has a responsibility to ensure that information is given to patients on these occasions, and that any other educational exercise reflects current best practice recommendations and guidelines.

It is anticipated that a significant proportion of the role of the Prostate Cancer Specialist Nurse will be providing information and support to newly diagnosed men. Where possible the Prostate Cancer Specialist Nurse should be present at the time the patient is given a prostate cancer diagnosis to ensure timely continuation of the dialogue following the patient's consultation with their urologist. Recognising that not all Prostate Cancer Specialist Nurses will be based in clinical environments, the Prostate Cancer Specialist Nurse should endeavor to contact the patient within 72 hours of receipt of referral, to ensure the patient receives adequate information and support at a time when they are likely to be experiencing high anxiety. It is anticipated that Prostate Cancer Specialist Nurses will play a vital role in helping men with the decision-making process following a diagnosis and remain a key contact person for the patient throughout the care continuum. In order to be an effective resource for the patient, the Prostate Cancer Specialist Nurse should demonstrate advanced knowledge of prostate cancer disease and all treatment modalities, side effects and survivorship issues to be able to effectively manage patient care. Whilst it is not anticipated that the Prostate Cancer Specialist Nurse will take an active role in the delivery of treatments such as hormone manipulation therapy and chemotherapy (given health care systems have existing processes in place for this purpose) the Prostate Cancer Specialist Nurse will need to demonstrate advanced knowledge of all aspects of prostate cancer care to be able to recognise and appropriately manage patient problems.

Assessment of side effects and management of those side effects following treatment is traditionally the responsibility of the patients treating medical practitioner in most cases. There are a growing number of nurses working in specific clinical specialties who have received additional training to enable them to undertake these extended roles to different levels. Rural areas have been identified as having the most limited on site expert nursing resources, with some health areas facing challenges providing regular specialist nursing services. Therefore, Prostate Cancer Specialist Nurses in these areas of need should be given scope to develop skills in a specific area of prostate cancer nursing, for example continence care, providing the nurse is suitably trained and deemed competent to undertake this extended role. This is in addition to maintaining the supportive care role. This model is anticipated to be particularly effective in both rural areas and small practices, where the number of patients referred to the Prostate Cancer Specialist Nurse, are expected to be lower than the number referred to Prostate Cancer Specialist Nurses in large metropolitan Centres where higher numbers of referrals for supportive care are anticipated. In addition, large metropolitan centres are typically equipped with a higher level of other

specialist nursing resources and allied health facilities, and avoidance of duplication is a key consideration when implementing the role in these centres.

The Prostate Cancer Specialist Nurse should also possess knowledge of current prostate clinical trials available to their client group. Whilst the Prostate Cancer Specialist Nurse should not be operating in the function of a clinical trial coordinator or research nurse, he or she should be aware of current research opportunities and have contact with the necessary personnel of their host employer or other organisation responsible for recruitment for the clinical trial.

ii) Supportive care

The term 'supportive care' is used to refer to services which may be required by those affected by cancer. It includes self-help and support, information, psychological support, symptom control, social support, rehabilitation, spiritual support, palliative care and bereavement care. Supportive care in cancer refers to the following five domains:

- Physical needs;
- Psychological needs;
- Social needs;
- Information needs; and
- Spiritual needs.

Meeting the patient's supportive care needs will require the Prostate Cancer Specialist Nurse to undertake assessment for psychosocial risk factors and distress, at the time of diagnosis and on a regular basis using a systematic, evidence-based approach. This is followed by effective communication with other members of the health care team and appropriate onward referral.

An essential role for the Prostate Cancer Specialist Nurse is to provide an initial assessment of the patient's psychosocial needs and provide ongoing support throughout the cancer trajectory based on further assessment. Following the interview, the Prostate Cancer Specialist Nurse can offer and arrange the necessary supportive care interventions and agree a point for re-evaluation with the patient.

Assessment of need should also incorporate assessment of the effects of disease and treatment in addition to generic psychosocial support. The Prostate Cancer Specialist Nurse should ensure that patients are made aware of available local health and social services, to address needs arising from the effects of treatment.

It is recommended that the Prostate Cancer Specialist Nurse assess the needs of patients using only agreed, validated tools to ensure consistent, evidence-based service provision to all patients accessing the service.

iii) Co-ordinated care

Co-ordination of care involves an organisational approach to care planning, implementation and evaluation by ensuring a comprehensive range of health and support services are delivered by the interdisciplinary team in a timely, flexible and efficient manner. Given that men with prostate cancer often see a range of health care providers throughout the cancer journey (including urologists, oncologists, general practitioners, radiologists and allied health) there is potential for the patient to become lost in the system and suffer avoidable psychological distress whilst accessing health care. The Prostate Cancer Specialist Nurse will be ideally placed to assist in the co-ordination of care in a complimentary manner to existing service providers.

The Prostate Cancer Specialist Nurse will serve as the point of contact and will assist patients navigating the health care system, ensuring timely delivery of information and access to diagnostics and treatments. The Prostate Cancer Specialist Nurse will complement a patient's

treating multi-disciplinary team and have structured contact with the key members in order to have the 'whole of health' perspective throughout the continuum of care.

Part of this co-ordination function, includes ensuring patients have access to the full range of supportive care resources open to them in their geographical area. Patients should be given information about sources of help, such as local and national support groups and disability and benefits help lines, both verbally and in writing. This essential role for the Prostate Cancer Specialist Nurse also includes addressing the specific needs associated with survivorship and ensuring that patients can access these resources in a timely manner. Appropriate, timely referral to specialist treatment Centre's, social work and allied health is a key element of this function.

iv) Information, provision and education

The Prostate Cancer Specialist Nurse should provide comprehensive, co-ordinated, specialised and individualised information and education to the person affected by cancer about the pathophysiology of cancer and its physical and psychological effects, treatment approaches and self-management strategies.

It is anticipated that a significant proportion of the role of the Prostate Cancer Specialist Nurse will be to provide information and support to men newly diagnosed with prostate cancer. The optimum strategy for managing prostate cancer is often unclear and therefore a patient's own values and attitudes play a role in determining treatment choices. Radical treatment risks continence issues and damage to sexual function, which may be unacceptable risks for some men, particularly those with low risk disease. Other men may feel that these potential side effects are of no significance when faced with the prospect of living with cancer. In these circumstances, shared decision-making is viewed as essential to ensure patients are sufficiently informed, and understand the choices they face. The Prostate Cancer Specialist Nurse will play a crucial role in ensuring that patients receive adequate support and providing patients with information throughout the cancer journey.

As this is a specialist nursing position, it is also anticipated that the Prostate Cancer Specialist Nurse will participate in the delivery of educational programs specific to prostate cancer. This could take the form of education to other nurses, professional groups or public forums; though there will be some regional variation in demand in accordance to existing service provision in the area. All education delivered should ensure it is unbiased and complies with best practice recommendations.

B) Collaborative and therapeutic practice

The Prostate Cancer Specialist Nursing position involves a high level of direct patient contact and contact with the patient's treating team. As such, the Prostate Cancer Specialist Nurse should possess, and be able to demonstrate advanced communication skills in patient and multi-disciplinary health contexts.

Australian health care is complex, with patients often moving between public and private sectors to access cancer services. Thus collaborative relationships are required to ensure minimal distress for the patient when accessing care. Additionally, patients from regional and rural areas are further disadvantaged, often having to travel significant distances to access health care and thus require a more coordinated approach. There should be structured links between the patients' own area and major treating centre. The Prostate Cancer Specialist Nurse is an integral part of this process.

In order to deliver this effective function, the Prostate Cancer Specialist Nurse requires a collaborative approach to working effectively as part of the multi-disciplinary team across the care continuum. The Prostate Cancer Specialist Nurse position is interdependent with other health professionals and organisations and the establishment of partnerships is critical to its success.

C) Professional practice

There are three key elements of professional practice for a Prostate Cancer Specialist Nurse:

- i) Professional development at a systems level;
- ii) Monitoring performance;
- iii) Legislative requirements.

i) Professional development at a systems level

The Prostate Cancer Specialist Nurse should demonstrate and understand national and global influences on prostate cancer and how these impact service delivery at a patient and organisational policy level. Cancer Australia is a national government agency, working to reduce the impact of cancer on all Australians. They work in partnership with consumers, health professionals, cancer organisations, researchers and governments to improve outcomes for all people affected by cancer. Knowledge of such initiatives is essential for the Prostate Cancer Specialist Nurse who should be actively engaged with both the host employer and those affected by cancer, to contribute an expert level of prostate cancer nursing knowledge to practice and service development initiatives.

ii) Monitoring performance

The Prostate Cancer Specialist Nurse is expected to practice in accordance with professional and organisational role descriptions, guidelines and standards for specialist cancer nursing and cancer care.

Monitoring of performance will be the responsibility of the host employer, with professional development support provided by PCFA.

The host employer should refer to the competency standards in Schedule 4 as part of the performance review process.

A Prostate Cancer Specialist Nurse should demonstrate a commitment to maintaining competence through participation in professional development activities relevant to their position, and this should be supported by a professional development plan, agreed between the Prostate Cancer Specialist Nurse and host employer. It is suggested that a formal professional development plan be formulated no later than eight weeks from commencement of the Prostate Cancer Specialist Nurse and revised within twelve months after commencement.

The Prostate Cancer Specialist Nurse is expected to participate in clinical supervision and peer review processes as required by their host employer.

PCFA is committed to supporting Prostate Cancer Specialist Nurses' professional development as provided in Schedule 4.

iii) Legislative Requirements

The Prostate Cancer Specialist Nurse should practice in accordance with legislative, professional and ethical standards for nursing and cancer care. At all times, the Prostate Cancer Specialist Nurse should comply with local policy and legislation relevant to cancer. The Prostate Cancer Specialist Nurse should be aware of, and respond effectively to, ethical issues that arise in prostate cancer care and practice in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs and rights of people affected by cancer.

D) Critical thinking and analysis Quality improvement and research

The Prostate Cancer Specialist Nurse should demonstrate the skills and values of critical reflection and lifelong learning to generate knowledge for practice. The Prostate Cancer Specialist Nurse should contribute to quality improvement activities aimed at improving outcomes

for people affected by cancer, based on identified needs of the client group or employing organisation as part of their professional development activity. Examples of quality improvement activities include the contribution to the development of standards and guidelines for cancer nursing practice, and measurement against established benchmarks. In addition, the Prostate Cancer Specialist Nurse should identify opportunities for, and contribute to, cancer research within their own area of practice.

As part of the funding conditions through the Commonwealth, the Program will be formally evaluated by an independent research team commissioned by PCFA, to measure effectiveness and facilitate succession planning. The Prostate Cancer Specialist Nurse is integral to this process and PCFA expects that host employers will allow the Prostate Cancer Specialist Nurse to participate in the process.

Evidence-based practice

The Prostate Cancer Specialist Nurse should embrace continuing professional development to ensure practice that incorporates best available evidence and emerging developments in prostate cancer care. This includes the identification, critique and application of prostate cancer and nursing research when planning and implementing programs of care for men with prostate cancer. The Prostate Cancer Specialist Nurse should be aware of available resources and know how to access these resources to develop their knowledge of specialist prostate cancer nursing. In addition, the Prostate Cancer Specialist Nurse should have access to necessary information technology and possess relevant IT proficiency to meet this requirement.

Education of others

In addition to educating patients, the Prostate Cancer Specialist Nurse should contribute to the development and delivery of educational programs and staff development activities within their area of practice based on identified needs. The Prostate Cancer Specialist Nurse should be available to provide advice and professional support to nursing colleagues and take an active role in disseminating information about research and other developments in prostate cancer care to nursing colleagues and others involved in cancer care.

Schedule 4

Competency Standards Framework for Prostate Cancer Specialist Nurses

1 Provision and co-ordination of care

- (a) Provision and co-ordination of care includes the assessment, planning, implementation, and evaluation of care for people affected by cancer. It consists of four practice dimensions:
- (i) Disease and treatment related care;
 - (ii) Supportive care;
 - (iii) Co-ordinated care; and
 - (iv) Information provision and education.

Disease and Treatment Related Care Competency Standards	Performance Criteria
Participates in activities that contribute to reducing the risk of developing cancer and promote early detection of cancer.	<ul style="list-style-type: none"> • Demonstrates knowledge of risk factors, genetics and prevention strategies. • Demonstrates knowledge of and ability to apply evidence-based information from current PSA testing policy.
Identifies potential and actual adverse effects of having cancer and receiving cancer therapies.	<ul style="list-style-type: none"> • Demonstrates an understanding of the biology and pathophysiology of prostate cancer, its diagnosis and presentation across the disease continuum. • Demonstrates an understanding of the rationale for, and mechanisms involved in, prostate cancer therapies and their related clinical effects, both acute and delayed. • Demonstrates an understanding of the implications of participation in cancer clinical trials. • Demonstrates advanced assessment skills showing an awareness of potential effects and complications arising from having prostate cancer, diagnostic tests and cancer treatments. • Demonstrates advanced knowledge of survivorship issues and therapeutic options for men following treatment for prostate cancer.
Participates in the safe and effective management of cancer and the delivery of cancer treatments.	<ul style="list-style-type: none"> • Demonstrates knowledge of and adherence to treatment protocols and clinical guidelines for all prostate cancer treatments, including non-pharmacological treatments. • Demonstrates safe and effective use of clinical procedures and technologies in the provision of optimum care related to prostate cancer treatment and palliation.

Supportive Care Competency Standards	Performance Criteria
<p>Identifies, validates and prioritises potential and actual health needs across all health domains relevant to the person affected by cancer throughout the continuum of cancer.</p>	<ul style="list-style-type: none"> • Demonstrates an understanding of the impact of cancer and its treatment on the interrelated physical, psychological, financial, social, sexual and spiritual aspects of well-being of the person affected by prostate cancer. • Demonstrates a knowledge of the potential needs of men with prostate cancer, including co-morbid conditions, psychosocial and supportive care needs across the cancer continuum. • Demonstrates ability to communicate and appropriately use referral pathways within the multi-disciplinary team.
<p>Effectively provides and ensures access to a range of supportive care services and interventions to meet the multiple health needs of the person affected by cancer.</p>	<ul style="list-style-type: none"> • Demonstrates comprehensive knowledge and application of clinical and supportive care guidelines and evidence in the context of prostate cancer. • Demonstrates ability to use therapeutic nursing interventions for meeting the physical, psychological, social, sexual and spiritual needs of the person affected by prostate cancer throughout the disease continuum, including identification of the need for referral for additional support.

Co-ordinated Care Competency Standard	Performance Criteria
<p>Co-ordinates the implementation of care across different phases of the cancer journey; and across health care settings to facilitate continuity of care and effective use of health care resources relevant to the needs of the person affected by cancer.</p>	<ul style="list-style-type: none"> • Demonstrates ability to develop, implement, document and continuously review a comprehensive care plan and applies interventions to promote continuity of care. • Demonstrates knowledge and application of information and resources to enable continuity of their care. • Demonstrates a comprehensive knowledge of, and appropriate referral to, health services and community resources. • Demonstrates ability to communicate with service providers in various care contexts to facilitate the delivery of services in a co-ordinated, consistent and timely manner.

Information Provision and Education Competency Standards	Performance Criteria
<p>Provides comprehensive and specialised information and education in a co-ordinated manner.</p> <p>Provides assistance to people affected by cancer to achieve optimum health outcomes, reduce distress and make informed decisions.</p>	<ul style="list-style-type: none"> • Demonstrates capability to assess the patient's understanding of their disease and treatment options. • Demonstrates advanced communication skills to provide information, taking into account the individual preferences and responses of the person affected by cancer. • Demonstrates comprehensive knowledge of information resources for the patient and facilitates access to resources relevant to the patient's needs and preferences. • Demonstrates collaboration with other members of the health care team to ensure a co-ordinated and documented approach to providing information. • Demonstrates awareness and application of evidence-based educational interventions to assist people affected by cancer in learning how to manage their health needs.

2 Collaborative and therapeutic practice

Competency Standards	Performance Criteria
<p>Develops therapeutic relationships with people affected by cancer to anticipate and meet their multiple care needs across the cancer continuum.</p>	<ul style="list-style-type: none"> • Demonstrates and applies effective communication skills to establish and maintain therapeutic relationships with people affected by cancer throughout the cancer journey. • Demonstrates ability to explore and document preferences and decisions of the person affected by cancer regarding care. • Demonstrates techniques used to encourage the person affected by cancer to participate in care decisions and self-management of their health needs. • Demonstrates techniques used to collaborate with the person affected by cancer in care planning and implementation in order to establish therapeutic goals consistent with the person's needs and decisions.
<p>Initiates, and ensures ongoing improvements in, collaborative relationships with the person affected by cancer, and other members of the health care team to optimise health outcomes.</p>	<ul style="list-style-type: none"> • Demonstrates a comprehensive understanding of the roles of various members of the interdisciplinary team in achieving optimum outcomes for people affected by cancer. • Demonstrates effective team participation in planning and implementing strategies to meet the needs of the person affected by cancer. • Demonstrates use of evidence-based communication strategies. • Demonstrates advanced communication skills at both the patient and multidisciplinary level.

3 Professional practice

Competency Standard	Performance Criteria
<p>Engages in, and contributes to, informed critique and exerts influence at the professional and systems level of health and prostate cancer care.</p>	<ul style="list-style-type: none"> • Demonstrates an understanding of national and global trends in prostate cancer control. • Demonstrates an understanding of the impact of health and organisational policy on the delivery of prostate cancer services. • Demonstrates active participation in initiatives within the workplace, professional groups, consumer groups and other organisations relevant to cancer nursing and prostate cancer care.
<p>Uses appropriate mechanisms for monitoring own performance and competence.</p>	<ul style="list-style-type: none"> • Demonstrates awareness, and observes boundaries, of practice in accordance with professional and organisational role descriptions, guidelines and standards for specialist cancer nursing and cancer care. • Demonstrates a commitment to maintaining competence through participation in professional development activities relevant to cancer care. • Demonstrates participation in the Program by evaluating their role as a Prostate Cancer Specialist Nurse. • Demonstrates participation in professional clinical supervision and/or other peer-review processes. • Demonstrates participation in performance review processes.
<p>Practices in accordance with legislative, professional and ethical standards for nursing and cancer care.</p>	<ul style="list-style-type: none"> • Demonstrates compliance with legislation relevant to cancer. • Demonstrates knowledge of, and responds effectively to, ethical issues that arise in cancer care. • Demonstrates practice in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs and rights of people affected by cancer.

4 Critical thinking and analysis

Competency Standards	Performance Criteria
<p>Contributes to quality improvement activities aimed at improving outcomes for people affected by cancer.</p>	<ul style="list-style-type: none"> • Shows evidence of assessment of cancer care outcomes against established benchmarks, standards and guidelines. • Shows evidence of contribution to activities that improve safety and cancer care outcomes. • Demonstrates the skills and values of critical reflection and lifelong learning to generate knowledge for practice.
<p>Practices within an evidence-based framework and contributes to the development of evidence for practice.</p>	<ul style="list-style-type: none"> • Demonstrates ability to appraise and apply research evidence relevant to improving the health outcomes of people affected by cancer. • Demonstrates high-level skills in the use of information technology relevant to cancer nursing and the development of practice. • Demonstrates contribution to prostate cancer nursing research.
<p>Embraces continuing professional development to ensure practices that incorporate best available evidence and emerging developments in specialist cancer nursing and cancer care.</p>	<ul style="list-style-type: none"> • Demonstrates awareness of sources to seek additional information when presented with complex or challenging situations. • Demonstrates awareness of emerging developments in the practice of specialist cancer nursing. • Demonstrates knowledge of relevant professional development resources and activities in specialist prostate cancer nursing.
<p>Provides advice and mentorship to nursing colleagues and others involved in cancer care to promote optimal standards.</p>	<ul style="list-style-type: none"> • Demonstrates evidence of contribution to education and staff development activities relevant to prostate cancer care. • Demonstrates evidence of advice and professional support to nursing colleagues and others involved in cancer care about clinical management and professional issues in cancer nursing. • Demonstrates evidence of the dissemination of information on developments in prostate cancer care to nursing colleagues and others involved in cancer care.

Schedule 5

Professional Development Framework for the Prostate Cancer Specialist Nurse

1 Preparing the Prostate Cancer Specialist Nurse for practice

- (a) PCFA is committed to ensuring the effective integration of the Prostate Cancer Specialist Nurse at both a local level and as part of a national team. Strategies will be in place to help reduce professional isolation and encourage each Prostate Cancer Specialist Nurse to develop at a professional level based on their individual learning needs.
- (b) It is recommended that all Prostate Cancer Specialist Nurses undergo a period of induction prior to commencing in clinical practice. A standardised induction program should be followed to ensure equity of access to information and continuity across the team of Prostate Cancer Specialist Nurses.
- (c) Induction programs should be structured to include the following:
 - (i) A general induction program delivered by the host employer to ensure compliance with local requirements for orientation, health and safety and clinical governance;
 - (ii) A structured team induction program hosted by PCFA utilising appropriate speakers, education providers and mediums; and
 - (iii) Prostate Cancer Specialist Nurse Resource kits supplied by PCFA.

1.2 Ongoing professional development

- (a) PCFA is committed to supporting the Prostate Cancer Specialist Nurse with both their immediate and ongoing professional development based on their individual personal development plan in partnership with their host employer.
- (b) PCFA will provide the following services to the team of Prostate Cancer Specialist Nurses to assist with their immediate and ongoing professional development and mentorship needs:
 - (i) A Prostate Cancer Specialist Nurse induction program;
 - (ii) PCFA resource folders including details of role function and position requirements for Prostate Cancer Specialist Nurses;
 - (iii) Access to online nursing resources;
 - (iv) A mentorship program;
 - (v) A grant to support further education as identified in each Prostate Cancer Specialist Nurse's personal development plan;
 - (vi) Attendance at an annual PCFA hosted training event;
 - (vii) Financial support to enable each Prostate Cancer Specialist Nurse to complete the La Trobe University Prostate Nursing Care short course;
 - (viii) Biennial site visits by PCFA representatives and ongoing professional development support;
 - (ix) Facilitation of monthly teleconferences between Prostate Cancer Specialist Nurses to promote ongoing professional development and peer support; and
 - (x) Quarterly nursing journal club conducted via teleconference.

- (c) PCFA is committed to providing each Prostate Cancer Specialist Nurse with an education award of up to \$1500 per financial year to contribute towards their ongoing professional development needs. This can be used towards the cost of:
- (i) attending conferences;
 - (ii) academic study;
 - (iii) professional coaching and mentoring; and/or
 - (iv) attending tertiary centers in Australia which provide specialist prostate cancer treatment services.

Schedule 6

Activity Reporting by the Prostate Cancer Specialist Nurse to PCFA

1 Overview

Activity Reporting to the Funding Recipient, PCFA and the Department of Health (DOH) will help ensure that the Prostate Cancer Specialist Nurse is working within the agreed framework for practice and assist in identifying and addressing any problem areas. It will also be an essential source of data for the evaluation process. Data should be collected for both patient and strategic activity using a standard template used by all Prostate Cancer Specialist Nurses with agreed definitions. This will ensure consistency in the reporting across the team and simplify the process of collating the data by both the Director/Coordinator of Nursing and project evaluation team. Reporting methods should be simple and consume as little time as possible.

1.1 Clinical Activity Reporting

- (a) The primary objective for the Prostate Cancer Specialist Nurse is to provide direct patient care and subsequently improve the patient's experience. Data on patient interactions is therefore an essential requirement for evaluating the service and reporting activity to the DOH.
- (b) Data should be collected on each individual patient contact, de-identified and reported monthly to PCFA's Director/Coordinator of Nursing and the Funding Recipient. PCFA will provide a database and tablet computer for this purpose.
- (c) Reports should include the following patient information using tables, at quarterly intervals and through the annual service report:
 - (i) Locality / region;
 - (ii) Numbers of new patient contacts;
 - (iii) Numbers of review patient contacts;
 - (iv) Numbers of rural / regional patients;
 - (v) Number of metropolitan patients;
 - (vi) Total time in clinical care;
 - (vii) Consultation localities (primary, secondary or tertiary care);
 - (viii) Purpose of patients contacts;
 - (ix) Interventions performed;
 - (x) Contact outcomes; and
 - (xi) Any other information which PCFA may reasonably require to enable it to meet its reporting obligations to the Commonwealth.

1.2 Strategic Activity Reporting

- (a) Given that the roles are designated specialist nursing positions PCFA expects that the Prostate Cancer Specialist Nurse will contribute to prostate cancer service development either in their immediate region or through engagement with PCFA and other professional bodies. Monthly reports to the Director/Coordinator of Nursing should therefore include:
 - (i) details of any education sessions delivered;
 - (ii) details of any education received;
 - (iii) details of any involvement with Quality Improvement (QI) or research projects;

- (iv) details of any involvement with professional bodies;
 - (v) details of any engagement or activities with PCFA;
 - (vi) details of any engagement with community or support groups; and
 - (vii) details of any personal professional development.
- (b) This information will be collated by the Director/ Coordinator of Nursing and reported to the executive of PCFA and DOH on a monthly basis, with a detailed, written report provided to the executive of PCFA every six months.
- (c) The Prostate Cancer Specialist Nurse must submit a summary, written report to PCFA within one month after the end of each year of employment.

1.3 Availability of Activity Reporting

Abridged versions of all Activity Reporting will be available on PCFA's website and to Program sponsors in order to raise the profile of the prostate cancer specialist nursing service.

Schedule 7

Evaluation of the Prostate Cancer Specialist Nurse Program

1 Overview

- (a) The Program will be evaluated by an independent research team commissioned by PCFA to ensure an expert, robust and unbiased reporting process.
- (b) Data collection by the Prostate Cancer Specialist Nurse should start from commencement in their role with Activity Reporting provided to PCFA and the Funding Recipient. This activity reporting will be utilised in the evaluation process.
- (c) The final model for evaluation will be determined by the evaluation team. By signing this Funding Agreement, the Funding Recipient agrees to participate in the evaluation project.
- (d) The research team will act ethically at all times and maintain the highest standards of integrity and professionalism.

2 Project Plan

The Evaluation Team will work with PCFA and other agreed stakeholders throughout the project to confirm methods, review data and formulate recommendations.

The evaluation will investigate the extent to which the Program has met its objectives and the impact on Australians diagnosed with prostate cancer, especially those in rural and remote areas.

The key questions which the evaluation will aim to answer are:

- The degree to which the activity has achieved its aims and met its objective of the impact of the Program on men with prostate cancer especially those in rural and remote areas.
- Concrete evidence of the positive outcomes/ impacts of the program's activities including, where practical, for patients.
- To what extent has the Program reached men with the greatest needs or at higher risk of poorer outcomes?
- Summary of lessons have been learned from both positive and negative experience, in terms of structure, implementation and management of the PCN initiative
- Conclusions and recommendations supported by sound evidence to improve process and effectiveness in the future.

3 Evaluation Methods

A qualitative approach will be predominantly used to understand the impacts of the Programs' activities and to document learnings from the structure, implementation and management of the Program. Some quantitative data, in the form of prostate cancer specialist nurses' clinical and strategic activity reports and mapping reports, will also be utilised to describe the activities performed by prostate cancer specialist nurses and settings in which the activities were performed.

The evaluation will involve four key groups:

- prostate cancer specialist nurses;
- their managers (within the institution where they practice);

- other clinicians, including a mix of medical, nursing, and allied health professionals, who interact with the prostate cancer specialist nurses and/or are otherwise placed to comment on the impact of the nurses' roles; and
- other stakeholders, including patients where practical.

This final group may include individuals from other organisations with whom the prostate cancer specialist nurses collaborate, such as community groups, and PCFA itself. Existing program data and reports in the form of prostate cancer specialist nurses' mapping reports, clinical activity database, strategic activity reports and other documents will also be used.

Data collection will occur in two stages. Initially, one or more focus groups will be held with prostate cancer specialist nurses to discuss and refine evaluation questions and methodology. This process will also be used to identify potential participants for the second stage of data collection (e.g. other clinicians, other stakeholders, and other existing data/reports). The second stage of data collection will involve in-depth individual interviews with participants from each of the participant groups described above. Participants in each group will be recruited from each site which hosts a prostate cancer specialist nurse. Interviews will be conducted by a trained research interviewer utilising an interview schedule, and recorded, to allow transcription prior to analysis. The interview schedules will be developed for each participant group with feedback from PCFA and other stakeholders, to ensure all relevant topics are covered.

4 Project Timeline

4.1 Preparation Phase: July-October 2021

- Refine methods in conjunction with PCFA and other agreed stakeholders.
- Obtain Human Research Ethics Approvals.

4.2 Data collection phase 1 - Focus group(s): March-May 2022

- Conduct focus group(s) with prostate cancer specialist nurses at program launch.
- Refine interview schedules.
- Develop processes for collection/analysis of existing data/reports.

4.3 Data collection phase 2 – Interviews: June-August 2022

- Conduct interviews with prostate cancer specialist nurses, managers, other clinicians and other stakeholders.
- Obtain existing data/reports from PCFA.

4.4 Data analysis: September-November 2022

- Transcription and thematic analysis of interviews and analysis of existing data/reports to answer the evaluation questions.

4.5 Final reporting: March 2023

- Preparation and submission of a draft final report which presents outcomes relating to each evaluation question, for review by PCFA, before submission of a final report.

Schedule 8

Notice recipient details

In accordance with clause 24, notices are to be sent to the following recipients:

- (i) to PCFA: Level 3, 39 – 41 Chandos Street
St Leonards NSW 2065
Attention: Director, Nursing Programs
(Sally Sara)
Email: Sally.Sara@pcfa.org.au

- (ii) to Funding Recipient: [*Insert Address]
Attention: [*]
Email:

Schedule 9

PCFA Logo





**Prostate Cancer
Foundation of Australia**

POSITION STATEMENT

JOB TITLE	Prostate Cancer Specialist Nurse
REPORTS TO	Host Employer and Prostate Cancer Foundation of Australia
ACCOUNTABLE TO	Professionally and clinically accountable to employer

CONTEXT

Prostate Cancer is the most common male cancer diagnosed in Australia (excluding non-melanoma skin cancer) and can result in significant physical, social and psychological morbidity. The role of the specialist nurse in the care of patients with a cancer diagnosis is well recognized and integrated into clinical practice on both a national and international level. There are many nurses throughout Australia, working in a variety of roles, who provide clinical care to prostate cancer patients. The Prostate Cancer Specialist Nurse (PCSN) role is designed to complement existing nursing services provided by health care facilities. The focus of the PCSN role is to address unmet patient care needs particularly at diagnosis followed by post treatment and survivorship care. General and specialist nurses already employed to provide care to men undergoing treatment for prostate cancer at host sites will be expected to continue to do so. The PCSN role is not intended to replace these services.

ROLE SUMMARY

The role of Prostate Cancer Specialist Nurse is to work in partnership across all health areas and sectors including non-government agencies to contribute to the continuity and quality of care for patients diagnosed with prostate cancer. The level and types of interventions delivered by the Prostate Cancer Specialist Nurse will vary according to the complexity of care required and the individual need of the patients in their care. Workload will be mainly self-generated, and this will be achieved through extensive interdisciplinary collaboration across primary, secondary and tertiary health. The post holder is required to develop and implement a coordinated, evidenced based, seamless, patient focused approach to providing nursing care. The post may require some travel and attendance at meetings and forums both within state and interstate.

KEY DUTIES FOR POSITION

Provision and Coordination of Care

This domain relates to the coordination, organisation and provision of nursing care that includes the assessment of individuals/groups, planning, implementation and evaluation of care. It consists of these four practice dimensions:

Disease and treatment related care

- Provide initial and ongoing assessment of need using a systematic evidence-based approach
- Maintain accurate records of nursing assessments, actions and outcomes
- Triage patients to determine areas of need and levels of assistance required
- Maintain understanding of the rationale for the use of treatments and therapies used in the management of prostate cancer and their related clinical effects, both acute and delayed
- Identify opportunities for patients to participate in clinical trials.

Supportive care

- Provide regular assessment of patients' psychosocial needs using a validated screening tool and tailor and deliver interventions according to need
- Assist patients to access supportive care services in their regions taking in to account physical, psychosocial, information and spiritual needs
- Act as a resource for contact, information and support for those affected by cancer.

Coordinated care

- Ensure a coordinated approach to planning, delivering and evaluating comprehensive care
- Identify and make referrals to appropriate health and social agencies as per individual need
- Serve as a primary point of contact and assist patients to navigate the health care system
- Support the transfer of patients between services within the area health service and external to the area health services when required.

Information provision and education

- Provide information and support to newly diagnosed men (preferably at time of diagnosis)
- Identify educational and supportive care needs of people affected by cancer and provides appropriate verbal and written information to meet those needs
- Deliver education programs to people affected by prostate cancer within a range of healthcare and community settings
- Supports and empowers patients to influence and participate in decisions concerning their care by providing information on a range of specialist care and services.

Collaborative and therapeutic practice

This relates to establishing, sustaining and concluding professional relationships with individuals/groups.

- Maintain communication and links with other members of the multidisciplinary (MDT) team
- Support the delivery of multidisciplinary care and participate in (MDT) meetings or video conferencing as required
- Advocate on patient's behalf including at MDT meetings
- Use effective communication skills to establish and maintain therapeutic relationships with people affected by cancer throughout the cancer journey.

Professional Practice

This domain relates to the professional, legal and ethical responsibilities which require demonstration of a satisfactory knowledge base, accountability for practice, functioning in accordance with legislation affecting nursing and health care, and the protection of individual and group rights.

-
- Practice in accordance with professional standards and organisation-based role descriptions, guidelines, policies and standards of practice
- Demonstrate an understanding of local, national and global influences on prostate cancer and how these impact service delivery
- Demonstrate continuous professional development and specialist professional knowledge and skills in line with personal development plan.
- Maintain membership of relevant professional bodies and interest groups
- Seek and participates in clinical supervision
- Maintain an awareness of, and take ownership of occupational safety and health and equal employment opportunity issues relating to the working environment and oneself
- Maintain knowledge of legal and ethical issues which have implications for nursing practice
-
- Demonstrate effective use of available resources

Critical Thinking and Analysis

This domain relates to self – appraisal, professional development, and the value of evidence and research for practice.

- Demonstrate the skills and values of critical reflection and lifelong learning
- Maintain a willingness to undertake further education in accordance to the needs of the post
- Maintain current knowledge in relevant clinical area and in relation to cancer control
- Participate in Quality Improvement activities aimed at improving patient outcomes
- Maintain a statistical record of activities for regular analysis and evaluation

- Continually evaluate service delivery and participate in clinical risk assessment processes
- Provides interim and annual service activity reports to PCFA and employer
- Participate in research appropriate to the care of prostate cancer patients
- Deliver prostate cancer education sessions to nursing colleagues and other disciplines within a range of settings
- Ensure all nursing care provided is in accordance with best practice

SCOPE OF PRACTICE

The post holder is required to keep confidential all information and documentation relating either to a patient, a member of staff or employer business, which he/she comes into contact with. The post holder is expected to respect the requirements of the Data Protection Act 1998, as this incorporates the need for a high standard of data quality, confidentiality and information security.

The post holder is required at all times to comply with the Nursing and Midwifery Board of Australia code of professional conduct for nurses.

The post holder is required at all times to maintain the Nursing and Midwifery Board of Australia competency standards for registered nurses.

COMMUNICATION AND WORKING RELATIONSHIPS

Significant working relationships (not exhaustive):

- Prostate Cancer Foundation of Australia (PCFA)
- Director, Nursing Programs (PCFA)
- Department of Health (DOH)
- Line manager(s) and health care service executive teams
- Multi-Disciplinary Teams providing patient care
- Other specialist and advanced practice nurses
- Prostate Cancer Support Groups
- Other non-government agencies
- Professional bodies

EQUIPMENT

The post holder will be based within the health region allocated. The employer is required to provide appropriate office resources (including allocation of desk, personal computer and a mobile phone) and access to clinical rooms for patient consultation and review. All necessary ICT access and clerical support is to be provided by the employing health service.

SELECTION CRITERIA

Essential minimum requirements

1. Registered Nurse
2. Demonstrated relevant advanced level of skill in cancer or urological nursing
3. Demonstrated application of human resource principles at the local level
4. Demonstrated effective communication and interpersonal skills in a multidisciplinary context
5. Ability to work effectively as a team member
6. Proven leadership qualities
7. Demonstrated analytical and problem-solving skills
8. Evidence of participation in and commitment to quality improvement processes and best practice principles

Desirable requirements

1. Possess or be working towards a relevant post graduate qualification
2. Minimum 5 years post registration experience
3. Patient teaching experience.
4. Competence in the use of relevant information technology.



Prostate Cancer
Foundation
of Australia

PRACTICE FRAMEWORK
AND COMPETENCY
STANDARDS FOR THE
**PROSTATE CANCER
SPECIALIST NURSE**

MARCH 2013

MONOGRAPHS IN
PROSTATE CANCER

OUR VISION, MISSION AND VALUES

Prostate Cancer Foundation of Australia (PCFA) is the peak national body for prostate cancer in Australia. We are dedicated to reducing the impact of prostate cancer on Australian men, their partners and the wider community.

We do this by:

- Promoting and funding world leading, innovative research into prostate cancer
- Implementing awareness campaigns and education programs for the Australian community, health professionals and Governments
- Supporting men and their families affected by prostate cancer, through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses

PCFA receives Government funding for specific projects and relies on the generosity of individuals, the community and partnerships, such as those with The Movember Foundation and Commonwealth Bank, to carry out our essential work.

PCFA's five values are: integrity, optimism, compassion, respect and commitment

Disclaimer

This document is a general guide to appropriate practice, to be followed subject to the nurse's level of competency, local policy and the patient's presentation and preference in each individual case.

These guidelines are intended to inform practice at a specialist nursing level and are not meant to be prescriptive.

Conflict of Interest

This document was produced following extensive national consultation with recognised experts in the field of cancer, urology nursing and policy and practice development. No remuneration was provided for this consultation work.

Periodic updates

It is planned that Prostate Cancer Foundation of Australia will review this document after a period of not exceeding five years.

Suggested citation:

Sykes, J. Practice framework and competency standards for the Prostate Cancer Specialist Nurse. Prostate Cancer Foundation of Australia, Sydney (2013)

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Website: www.pcfa.org.au Email: enquiries@pcfa.org.au

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PCFA would like to recognise the Movember Foundation as a key funder of its national Prostate Cancer Specialist Nursing Service

FOREWORD



A diagnosis of prostate cancer causes significant anxiety for men and their families.

Complex multi-modality treatment pathways, potential long term side effects, and prolonged surveillance programs requiring ongoing hospital visits, all add to the burden of the disease.

Within the Australian context, regional and rural patients are further disadvantaged, often having to travel significant distance to access equitable care, and are recognised to have poorer health outcomes¹. Despite strategies at both the local and national level to improve the outcomes for cancer patients, navigation of services and a lack of expert supportive and specialist nursing care remain frequently reported issues by those accessing cancer services.

The role of the Specialist Nurse in the care of patients with many types of chronic illness, including some cancer types, is well recognised and integrated into clinical practice at both a national and international level. However, there remains no accredited defined Prostate Cancer Specialist Nurse position within Australia, and this can potentially lead to variations

in practice. Prostate Cancer Foundation of Australia has undertaken to produce these guidelines for practice to aid in the definition of a best practice model for the Prostate Cancer Specialist Nurse within the Australian health care context.

During the development of the guidelines, a series of consultations were held with key stakeholders in health care delivery, strategic service development and selected nursing professional bodies, representing all States and Territories across Australia, with site visits to a selection of prostate cancer treatment centres. An extensive literature review was undertaken to scope existing work in this field. The main contributory pieces to this document are the Australian Nursing and Midwifery Council Registered Nurse Competency Framework² and the National Cancer Nursing Education Project Professional Development Framework for the Specialist Cancer Nurse³. Both pieces are acknowledged as best evidence frameworks for nursing practice in Australia and provided the structure for these guidelines.

PCFA is grateful to all those who freely gave their time to contribute to the development of this document and would like to acknowledge the efforts of all nurses dedicated to reducing the impact of prostate cancer on the community.

Julie Sykes
Director of Nursing
Prostate Cancer Foundation of Australia

REFERENCES

1. Australian Institute of Health and Welfare (2010). A snapshot of men's health in regional and rural Australia. Rural health series number 11, Category number PHE120. Canberra: AIHW.
2. Australian Nursing and Midwifery Council (2006). National competency standards for registered nurses. Canberra: ANMC.
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I. PRACTICE FRAMEWORK FOR THE SPECIALIST NURSE IN PROSTATE CANCER CARE

The Practice Framework describes the scope of the Prostate Cancer Specialist Nursing role at both a clinical and strategic level to both inform and influence practice at an advanced level.

POSITION SUMMARY

Prostate cancer treatment adopts a multimodality approach of surgery, hormones, radiotherapy, chemotherapy and surveillance programs. The Prostate Cancer Specialist Nurse is involved in the care of men in all treatment streams and is an integral part of the multidisciplinary team.

The Prostate Cancer Specialist Nurse role is defined as an expert point of contact for the patient and family, providing both psychosocial and clinical support to men with prostate cancer using a structured approach. The Prostate Cancer Specialist Nurse works alongside existing healthcare providers to contribute to the delivery of effective care for men with prostate cancer.

The Prostate Cancer Specialist Nurse assists patients to make optimal use of resources available in their immediate community, and streamlines service delivery when referral to another centre is required.

Given the diversity in need for prostate cancer support within the different health areas of Australia, provision to develop the clinical scope of the role in accordance to local need is advocated, providing it remains exclusively for the benefit of prostate cancer patients and within the framework of a specialist cancer nurse.

The Prostate Cancer Specialist Nursing role also adopts a strategic function to influence care at a systems level both locally and at State and national level.

PRACTICE FRAMEWORK FOR THE SPECIALIST NURSE IN PROSTATE CANCER CARE

The framework described in this document is based on the competency standards for the specialist cancer nurse as detailed in the National Cancer Nursing Education Project (EdCaN). The framework is proposed for the registered nurse practising as a Prostate Cancer Specialist Nurse.

A) PROVISION AND CO-ORDINATION OF CARE

Provision and co-ordination of care includes the assessment, planning, implementation, and evaluation of care for people affected by cancer, and consists of these four practice dimensions:

- i) Disease and treatment related care
- ii) Supportive care
- iii) Co-ordinated care
- iv) Information provision and education

i) DISEASE AND TREATMENT RELATED CARE

This includes activities that reflect the Prostate Cancer Specialist Nurse's role in reducing risk as well as managing the disease, treatment delivery and follow-up care.

Prior to Diagnosis

The Prostate Cancer Specialist Nurse will possess knowledge of, and participate in activities that contribute to reducing the risk of developing cancer and that promote early detection of cancer.

The Prostate Cancer Specialist Nurse is well placed to take an active role in the education of the community on prostate cancer awareness and the importance of early detection. Early detection of prostate cancer is frequently associated with the use of the PSA test in the well population. The debate on screening for prostate cancer is long standing and at present there is no standardised screening test available in Australia specific to prostate cancer. Whilst the Prostate Cancer Specialist Nurse's role

is predominantly focused on men with an existing diagnosis, there will be occasions where the nurse will be contacted by the well community for information and advice on PSA testing. The nurse has a responsibility to ensure that the information given to patients on these occasions reflects current best practice recommendations.

Prior to Treatment

A significant proportion of the Prostate Cancer Specialist Nurse role will be providing information and support to newly diagnosed men. Where possible the Prostate Cancer Specialist Nurse should be present at the time the patient is given a prostate cancer diagnosis to ensure timely continuation of the dialogue following the patient's consultation with their Urologist. Recognising that not all Prostate Cancer Specialist Nurses will be based in all clinical environments, the nurse should endeavour to contact the patient within 72 hours of receipt of referral, to ensure the patient receives adequate information and support at a time when they are likely to be experiencing high anxiety. The Prostate Cancer Specialist Nurse will play a vital role in helping men with the decision making process following a diagnosis, and remain a key contact person for the patient throughout the care continuum.

During Treatment

In order to be an effective resource for the patient, the nurse should demonstrate advanced knowledge of prostate cancer disease and all treatment modalities, side effects and survivorship issues to be able to effectively manage patient care. Whilst it is not anticipated that the Prostate Cancer Specialist Nurse will take an active role in the delivery of treatments such as hormone manipulation therapy and chemotherapy, given that health care systems

have existing processes in place for this purpose, the nurse does need to demonstrate advanced knowledge of all aspects of prostate cancer care to be able to recognise and appropriately manage patient problems.

Following Treatment

Assessment of side effects and management following treatment is traditionally the responsibility of the patient's treating medical practitioner for the majority of patients. There are a growing number of nurses working in specific clinical specialties who have received additional training to enable them to undertake these extended roles to different levels. Rural areas have been identified as having the most limited on-site expert nursing resources, with some health areas facing challenges providing regular nursing services. Therefore, Prostate Cancer Specialist Nurses in these areas of need should be given scope to develop skills in a specific area of prostate cancer nursing, for example, continence care, providing the nurse is suitably trained and deemed competent to undertake this extended role. This is in addition to maintaining the supportive care role. This model is particularly effective in both rural areas and small practices, where patient numbers referred to the nurse, are expected to be lower than for Prostate Cancer Specialist Nurses in large metropolitan centres, who receive higher numbers of referrals for supportive care. In addition, large metropolitan centres are typically equipped with a higher level of other specialist nursing resource and allied health facilities, and avoidance of duplication in role is a key consideration when implementing the role in these centres.

Within the Context of Research

The Prostate Cancer Specialist Nurse should also possess knowledge of current prostate clinical trials available to their client group. Whilst the Prostate Cancer Specialist Nurse should not be operating in the function of a clinical trial co-ordinator or research nurse, the post holder should have the awareness of current research opportunities and have contact with the necessary personnel in their employing organisation, responsible for the trials recruitment.

ii) SUPPORTIVE CARE

Supportive care is a term used to refer to services beyond treatment which may be required by those affected by cancer, including self-help and support, information, psychological support, symptom control, social support, rehabilitation, spiritual support, palliative care and bereavement care. Supportive care in cancer refers to the following five domains:

- Physical needs
- Psychological needs
- Social needs
- Information needs
- Spiritual needs

Meeting the patient's supportive care needs requires the nurse to undertake assessment for psychosocial risk factors and distress, at the time of diagnosis and on a regular basis using a systematic, evidence-based approach. This is followed by effective communication with other members of the health care team and appropriate onward referral. An essential role for the Prostate Cancer Specialist Nurse is to provide an initial assessment of the patient's psychosocial needs and provide ongoing support throughout the cancer trajectory based on further assessment. Following assessment, the nurse can then offer and organise the necessary supportive care interventions and agree a point for re-evaluation with the patient.

Assessment of need should also incorporate assessment of the effects of disease and treatment in addition to generic psychosocial support.

It is recommended that the Prostate Cancer Specialist Nurse assess the needs of patients using only agreed validated tools to ensure consistent, evidence based service provision to all patients accessing the service.

The Prostate Cancer Specialist Nurse should ensure patients are made aware of their available local health and social services where applicable, to address needs arising from the effects of treatment.

PRACTICE FRAMEWORK FOR THE SPECIALIST NURSE IN PROSTATE CANCER CARE

(continued)

iii) CO-ORDINATED CARE

Co-ordination of care involves an organisational approach to care planning, implementation and evaluation by ensuring a comprehensive range of health and support services are delivered by the interdisciplinary team in a timely, flexible and efficient manner. Given that men with prostate cancer often see a range of health care providers throughout the cancer journey including Urologists, Oncologists, General Practitioners, Radiologists and Allied Health, there is opportunity for the patient to become lost in the system and suffer avoidable psychological distress whilst accessing health care. The Prostate Cancer Specialist Nurse is ideally placed to assist in the co-ordination of care in a complementary manner to existing service providers.

The Prostate Cancer Specialist Nurse will serve as the point of contact and will assist patients navigating the health care system, ensuring timely delivery of information and access to diagnostics and treatments. The Prostate Cancer Specialist Nurse will complement the patients treating multi-disciplinary team, and have structured contact with the key members to have “whole of health” perspective throughout the continuum of care.

Part of this co-ordination function, includes ensuring patients have access to the full range of supportive care resources open to them in their geographical area. Patients should be given information about sources of help, such as local and national support groups and disability and benefits help lines, both verbally and in writing. This essential role for the Prostate Cancer Specialist Nurse also includes addressing the specific needs associated with survivorship and ensuring patients can access these resources in a timely manner. Appropriate, timely referral to specialist treatment centres, social work and allied health is a key element of this function.

iv) INFORMATION PROVISION AND EDUCATION

The Prostate Cancer Specialist Nurse should provide comprehensive, co-ordinated, specialised and individualised information and education to the person affected by cancer about the pathophysiology of cancer and its physical and psychological effects, treatment approaches and self-management strategies.

A significant proportion of the Prostate Cancer Specialist Nurse’s role will be to provide information and support to men newly diagnosed with prostate cancer. The optimal strategy for managing prostate cancer is often unclear and therefore the patient’s own values and attitudes play a role in determining treatment choices. Radical treatment risks continence issues and damage to sexual function, which may be unacceptable risks for some men, particularly those with low risk disease. Other men may feel that these potential side effects are of no significance when faced with the prospect of living with cancer. In these circumstances, shared decision making is viewed as essential to ensure patients are sufficiently informed, and understand the choices they face. Nurse Specialists play a crucial part, both in ensuring that patients receive adequate support and information throughout the cancer journey.

As this is a specialist nursing position, it is also anticipated that the nurse participates in the delivery of educational programs specific to prostate cancer. This could take the form of education to other nurses, professional groups or public forums, though there will be some regional variation in demand in accordance to existing service provision in the area. All education delivered should ensure it is unbiased and complies with best practice recommendations.

B) COLLABORATIVE AND THERAPEUTIC PRACTICE

Australian health care is complex with patients often moving between public and private sectors to access cancer services and thus collaborative relationships are required to ensure minimal distress for the patient when accessing care. Additionally, patients from regional and rural areas are further disadvantaged, often having to travel significant distances to access health care and thus require a more coordinated approach. There should be structured links between the patient's own area and major treating centre. The Prostate Cancer Specialist Nurse is an integral part of this process.

The Prostate Cancer Specialist Nursing position involves a high level of direct patient contact and contact with the patient's treating team. As such, the Prostate Cancer Specialist Nurse should possess, and be able to demonstrate advanced communication skills in both the patient and in the multi-disciplinary health contexts.

In order to deliver this effective function, the Prostate Cancer Specialist Nurse requires a collaborative approach to working effectively as part of the multi-disciplinary team across the care continuum. The Prostate Cancer Specialist Nurse position is interdependent with other health professionals and organisations and the establishment of partnerships is critical to its success.

C) PROFESSIONAL PRACTICE

There are three key elements of professional practice for the Prostate Cancer Specialist Nurse:

1. Professional development at a systems level
2. Monitoring performance
3. Legislative requirements

i) PROFESSIONAL DEVELOPMENT AT A SYSTEMS LEVEL

The Prostate Cancer Specialist Nurse should demonstrate and understand both national and global influences on prostate cancer and how these impact on service delivery at both a patient and organisational policy level. Knowledge of such initiatives is essential for the Prostate Cancer Specialist Nurse who should be actively engaged with both the employing organisation and those affected by cancer, to contribute an expert level of prostate cancer nursing knowledge to practice and service development initiatives.

ii) MONITORING PERFORMANCE

The ongoing monitoring of performance will be the responsibility of the employing organisation.

The Prostate Cancer Specialist Nurse is expected to practice in accordance with professional and organisational role descriptions, guidelines and standards for specialist cancer nursing and cancer care.

The Prostate Cancer Specialist Nurse should demonstrate a commitment to maintaining competence through participation in professional development activities relevant to their position and this should be supported by a professional development plan, agreed by both the Prostate Cancer Specialist Nurse and employing organisation.

PRACTICE FRAMEWORK FOR THE SPECIALIST NURSE IN PROSTATE CANCER CARE

(continued)

It is suggested that a formal professional development plan be formulated no later than eight weeks from commencement in position of the post holder and revised as per plan, but not exceeding a 12 month period.

The Prostate Cancer Specialist Nurse is also expected to participate in clinical supervision and peer-review process as required by their host employer.

iii) LEGISLATIVE REQUIREMENTS

The Prostate Cancer Specialist Nurse should practice in accordance with legislative, professional and ethical standards for nursing and cancer care. At all times, the post holder should comply with local policy and with legislation relevant to cancer. The Prostate Cancer Specialist Nurse should be aware of and respond effectively to ethical issues that arise in prostate cancer care and practices in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs and rights of people affected by cancer.

D) CRITICAL THINKING AND ANALYSIS

i) QUALITY IMPROVEMENT AND RESEARCH

The Prostate Cancer Specialist Nurse should demonstrate the skills and values of critical reflection and lifelong learning to generate knowledge for practice. The Prostate Cancer Specialist Nurse should contribute to quality improvement activities aimed at improving outcomes for people affected by cancer, based on identified needs of the client group or the employing organisation as part of their professional development activity. Examples of quality improvement activities include the

contribution to the development of standards and guidelines for cancer nursing practice, and measuring against established benchmarks. In addition the Prostate Cancer Specialist Nurse should identify opportunities for, and contribute to cancer research within their own area of practice.

ii) EVIDENCE BASED PRACTICE

The Prostate Cancer Specialist Nurse should embrace continuing professional development to ensure practice that incorporates best available evidence and emerging developments in prostate cancer care. This includes the identification, critique and application of prostate cancer and nursing research when planning and implementing programs of care for men with prostate cancer. The Prostate Cancer Specialist Nurse should be aware of available resources and know how to access these resources to develop their knowledge of specialist prostate cancer nursing. In addition, the Prostate Cancer Specialist Nurse should have access to the necessary information technology, and possess the relevant IT proficiency to be able to meet this requirement.

iii) EDUCATION OF OTHERS

The Prostate Cancer Specialist Nurse, in addition to a patient education function, should contribute to the development and delivery of educational programs and staff development activities within their area of practice based on identified needs. The Prostate Cancer Specialist Nurse should be available to provide advice and professional support to nursing colleagues and take an active role in disseminating information about research and other developments in prostate cancer care to nursing colleagues and others involved in cancer care.

2. COMPETENCY STANDARDS FOR THE PROSTATE CANCER SPECIALIST NURSE

BACKGROUND

There are an increasing number of nurses in Australia who identify themselves as practicing at a specialist level in cancer care. Despite the provision of post graduate specialist education within many university schools and health campuses, there is no credentialing system for specialty practice in nursing, beyond Midwifery and Nurse Practitioner level. There is also no requirement for a nurse working at an advanced level of practice to hold a post graduate qualification in the relevant field of practice. This lack of a nationally recognised credentialing system further adds to the complexity of establishing a framework for the Prostate Cancer Specialist Nurse.

The Competency Standards described in this document are based on the competency standards for the specialist cancer nurse as detailed in the National Cancer Nursing Education Project (EdCaN) and have been adapted for application in the prostate cancer nursing context.

COMPETENCY STANDARDS FOR THE PROSTATE CANCER SPECIALIST NURSE

1. PROVISION AND CO-ORDINATION OF CARE

Provision and co-ordination of care includes the assessment, planning, implementation, and evaluation of care for people affected by cancer, and consists of these four practice dimensions:

- Disease and treatment related care
- Supportive care
- Co-ordinated care
- Information provision and education

Disease and Treatment Related Care Competency Standards	Performance Criteria
Participates in activities that contribute to reducing the risk of developing cancer and that promote early detection of cancer	<ul style="list-style-type: none"> • Demonstrates knowledge of risk factors, genetics and prevention strategies • Demonstrates knowledge of and application of evidence-based information on current PSA testing policy
Identifies potential and actual adverse effects of having cancer and receiving cancer therapies	<ul style="list-style-type: none"> • Demonstrates an understanding of the biology and pathophysiology of prostate cancer, its diagnosis and presentation across the disease continuum • Demonstrates an understanding of the rationale for and mechanisms involved in prostate cancer therapies and their related clinical effects, both acute and delayed • Demonstrates an understanding of the implications of participation in cancer clinical trials • Demonstrates advanced assessment skills showing an awareness of potential effects and complications arising from having prostate cancer, diagnostic tests and cancer treatments • Demonstrates advanced knowledge of survivorship issues and therapeutic options for men following treatment for prostate cancer
Participates in the safe and effective management of cancer and the delivery of cancer treatments	<ul style="list-style-type: none"> • Demonstrates knowledge of and adherence to treatment protocols and clinical guidelines for all prostate cancer treatments, including non-pharmacological treatments • Demonstrates safe and effective use of clinical procedures and technologies in the provision of optimum care related to prostate cancer treatment and palliation

Supportive Care Competency Standards	Performance Criteria
<p>Identifies, validates and prioritises potential and actual health needs across all domains of health of the person affected by cancer across the continuum of cancer</p>	<ul style="list-style-type: none"> ▪ Demonstrates an understanding of the impact of cancer and its treatment on the interrelated physical, psychological, financial, social, sexual and spiritual aspects of wellbeing of the person affected by prostate cancer ▪ Demonstrates a knowledge of potential needs of men with prostate cancer, including co-morbid conditions, psychosocial and supportive care needs across the cancer continuum ▪ Demonstrated ability in communicating and appropriate use of referral pathways within the multi-disciplinary team
<p>Effectively provides and ensures access to a range of supportive care services and interventions to meet the multiple health needs of the person affected by cancer</p>	<ul style="list-style-type: none"> ▪ Demonstrates comprehensive knowledge and application of clinical and supportive care guidelines and evidence in the context of prostate cancer ▪ Demonstrates skilled use of therapeutic nursing interventions for meeting the physical, psychological, social, sexual and spiritual needs of the person affected by prostate cancer throughout the disease continuum, including identification of the need for referral for additional support
Co-ordinated Care Competency Standard	Performance Criteria
<p>Co-ordinates implementation of care across different phases of the cancer journey and across health care settings to facilitate continuity of care and effective use of health care resources relevant to the needs of the person affected by cancer</p>	<ul style="list-style-type: none"> ▪ Demonstrates ability to develop, implement, document and continuously review a comprehensive care plan and applies interventions to promote continuity of care ▪ Demonstrates knowledge and application of information and resources to enable continuity of care ▪ Demonstrates a comprehensive knowledge of and appropriate referral to health services and community resources ▪ Demonstrates ability to communicate with service providers in various care contexts to facilitate the delivery of services in a co-ordinated, consistent and timely manner

COMPETENCY STANDARDS FOR THE PROSTATE CANCER SPECIALIST NURSE

(continued)

1. PROVISION AND CO-ORDINATION OF CARE (continued)

Information Provision and Education Competency Standard	Performance Criteria
<p>Provides comprehensive and specialised information and education in a co-ordinated manner to assist people affected by cancer to achieve optimal health outcomes, reduce distress and make informed decisions</p>	<ul style="list-style-type: none">▪ Demonstrates ability to assess the patient's understanding of their disease and treatment options▪ Demonstrates advanced communication skills to provide information, taking into account the individual preferences and responses of the person affected by cancer▪ Demonstrates comprehensive knowledge of information resources for the person affected by cancer and facilitates access to resources relevant to their needs and preferences▪ Demonstrates collaboration with other members of the health care team to ensure a co-ordinated and documented approach to providing information▪ Demonstrates awareness and application of evidence-based educational interventions to assist people affected by cancer to develop knowledge to manage their health needs

2. COLLABORATIVE AND THERAPEUTIC PRACTICE

Competency Standards	Performance Criteria
<p>Develops therapeutic relationships with people affected by cancer to anticipate and meet their multiple care needs across the cancer continuum</p>	<ul style="list-style-type: none"> ▪ Demonstrates and applies effective communication skills to establish and maintain therapeutic relationships with people affected by cancer throughout the cancer journey ▪ Demonstrates ability to explore and document preferences and decisions of the person affected by cancer ▪ Demonstrates techniques used to encourage person affected by cancer to participate in care decisions and self-management of their health needs ▪ Demonstrates techniques used to collaborate with the person affected by cancer in care planning and implementation to establish therapeutic goals consistent with the person's needs and decisions
<p>Initiates and ensures ongoing improvements in collaborative relationships with the person affected by cancer and other members of the health care team to optimise health outcomes</p>	<ul style="list-style-type: none"> ▪ Demonstrates a comprehensive understanding of the roles of the various members of the interdisciplinary team in achieving optimal outcomes for people affected by cancer ▪ Demonstrates effective team participation in planning and implementing strategies to meet the needs of the person affected by cancer. ▪ Demonstrates use of evidence-based communication strategies ▪ Demonstrates advanced communication skills at both the patient and multidisciplinary level

COMPETENCY STANDARDS FOR THE PROSTATE CANCER SPECIALIST NURSE

(continued)

3. PROFESSIONAL PRACTICE

Competency Standards	Performance Criteria
<p>Engages in and contributes to informed critique and exerts influence at the professional and systems level of health and prostate cancer care</p>	<ul style="list-style-type: none"> ▪ Demonstrates an understanding of national and global trends in prostate cancer control ▪ Demonstrates an understanding of the impact of health and organisational policy on the delivery of prostate cancer services ▪ Demonstrates active participation in initiatives within the workplace, professional groups, consumer groups and other organisations relevant to cancer nursing and prostate cancer care
<p>Uses appropriate mechanisms for monitoring own performance and competence</p>	<ul style="list-style-type: none"> ▪ Demonstrates awareness of and observes boundaries of practice in accordance with professional and organisational role descriptions, guidelines and standards for specialist cancer nursing and cancer care ▪ Demonstrates a commitment to maintaining competence through participation in professional development activities relevant to cancer care ▪ Demonstrates participation in professional clinical supervision and/or other peer-review processes ▪ Demonstrates participation in performance review processes
<p>Practices in accordance with legislative, professional and ethical standards for nursing and cancer care</p>	<ul style="list-style-type: none"> ▪ Demonstrates compliance with legislation relevant to cancer ▪ Demonstrates knowledge of and how to respond effectively to ethical issues that arise in cancer care ▪ Demonstrates practice in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs and rights of people affected by cancer

4. CRITICAL THINKING AND ANALYSIS

Competency Standards	Performance Criteria
<p>Contributes to quality improvement activities aimed at improving outcomes for people affected by cancer</p>	<ul style="list-style-type: none"> • Shows evidence of assessment of cancer care outcomes against established benchmarks, standards and guidelines • Shows evidence of contribution to activities that improve safety and cancer care outcomes • Demonstrates the skills and values of critical reflection and lifelong learning to generate knowledge for practice
<p>Practices within an evidence-based framework and contributes to the development of evidence for practice</p>	<ul style="list-style-type: none"> • Demonstrates ability to appraise and apply research evidence relevant to improve the health outcomes of people affected by cancer • Demonstrates high level skills in the use of information technology relevant to cancer nursing and the development of practice • Demonstrates contribution to cancer nursing research
<p>Embraces continuing professional development to ensure practices that incorporate best available evidence and emerging developments in specialist cancer nursing and cancer care</p>	<ul style="list-style-type: none"> • Demonstrates awareness of sources to seek additional information when presented with complex or challenging situations • Demonstrates awareness of emerging developments in the practice of specialist cancer nursing • Demonstrates knowledge of relevant professional development resources and activities in specialist cancer nursing
<p>Provides advice and mentorship to nursing colleagues and others involved in cancer care to promote optimal standards</p>	<ul style="list-style-type: none"> • Demonstrates evidence of contribution to education and staff development activities relevant to cancer care • Demonstrates evidence of advice and professional support to nursing colleagues and others involved in cancer care about clinical management and professional issues in cancer nursing • Demonstrates evidence of the dissemination of information on developments in cancer care to nursing colleagues and others involved in cancer care





PCFA Prostate Cancer Specialist Nursing Service Induction,
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