



Annual Report 2019-20
Putting safety at the centre

BreastScreen
Victoria



BreastScreen Victoria

BREASTSCREEN VICTORIA ANNUAL REPORT 2019-20

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Cover illustration artist:
Nakia Cadd (Gunditjmara, Yorta Yorta,
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Title:
Our Health Matters

BreastScreen Victoria acknowledges the traditional custodians of the lands on which our program takes place and pays respect to Elders past, present and emerging.

BreastScreen Victoria is committed to ensuring its services are inclusive and accessible to all eligible Victorians.

BreastScreen Victoria gratefully acknowledges the support of the Australian Government Department of Health and the Victorian Department of Health and Human Services.



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OUR SERVICES

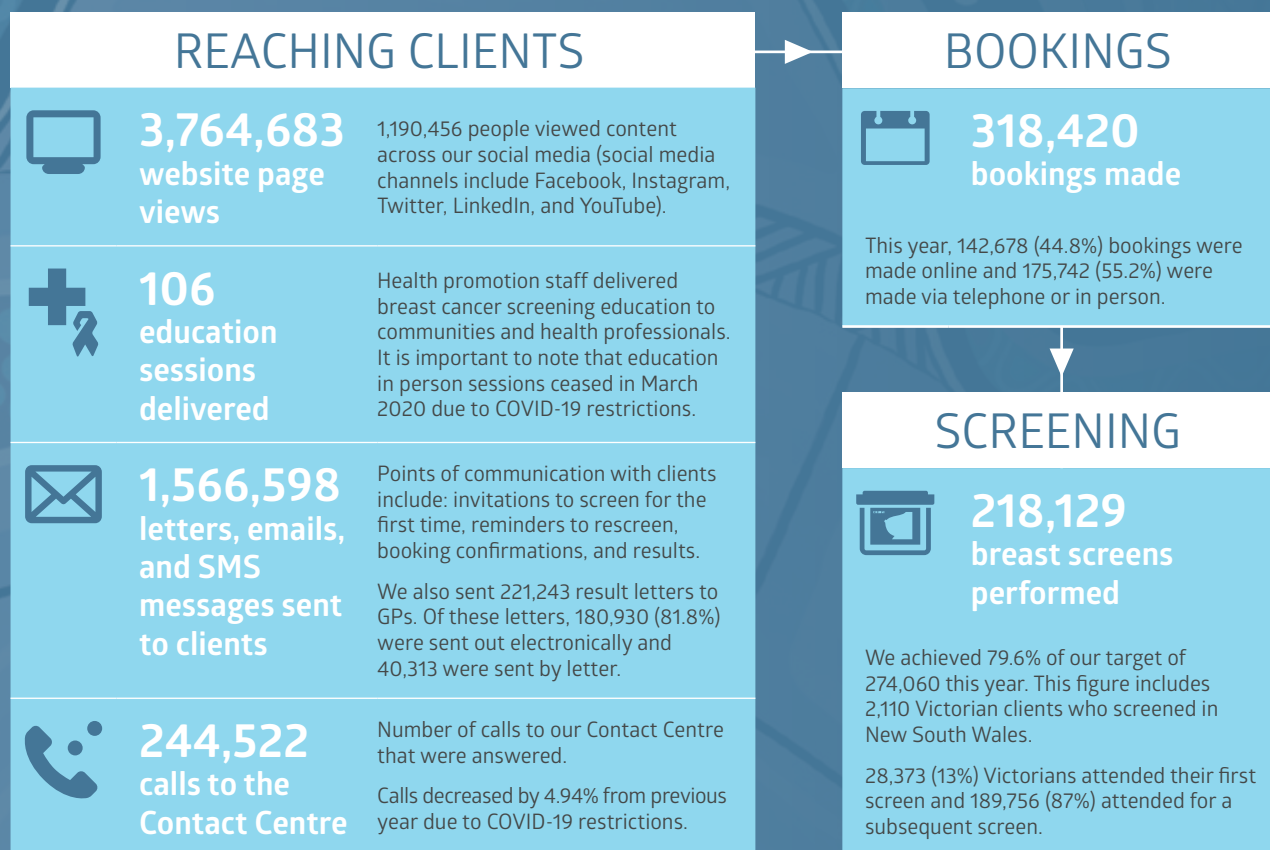
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2019–20 AT A GLANCE

Five hundred BreastScreen Victoria staff members provided services to eligible Victorians at 42 screening clinics, seven Aboriginal Cooperatives, and in 25 towns visited by the Mobile Screening Service every two years. Further tests were provided at eight screening, reading and assessment services.



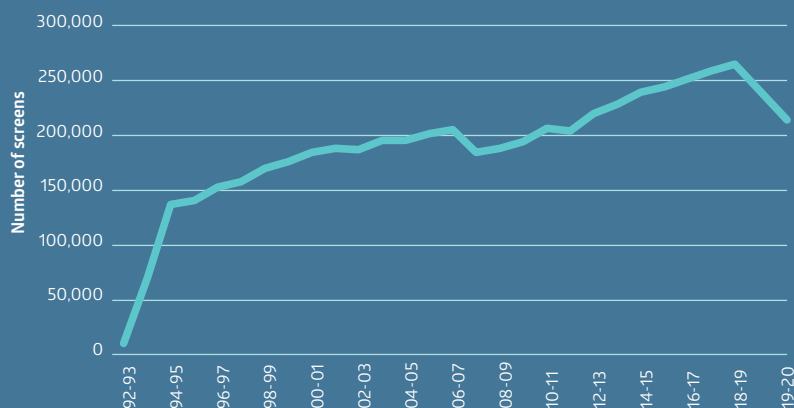
FINANCIAL HIGHLIGHTS

	2019-20	2018-19	2017-18	2016-17	2015-16	2014-15
Breast screens	218,129	267,589	260,722	253,889	246,358	241,122
	\$	\$	\$	\$	\$	\$
Client services¹	34,302,178	35,078,501	33,847,627	32,030,636	31,101,475	29,303,440
Support for service delivery	7,809,245	7,592,334	7,085,828	7,066,516	6,849,691	6,338,957
Management, Corporate Services, and depreciation²	3,512,861	3,468,737	3,793,900	4,028,199	3,220,264	3,777,902
Promotion and recruitment	1,314,043	1,280,500	1,322,185	1,630,687	1,764,721	2,099,299

1. Reflective of reduced screening activity due to COVID-19 impact
 2. Adoption of AASB 16 Leases resulting in depreciation on right-of-use assets

27 YEARS OF SCREENING

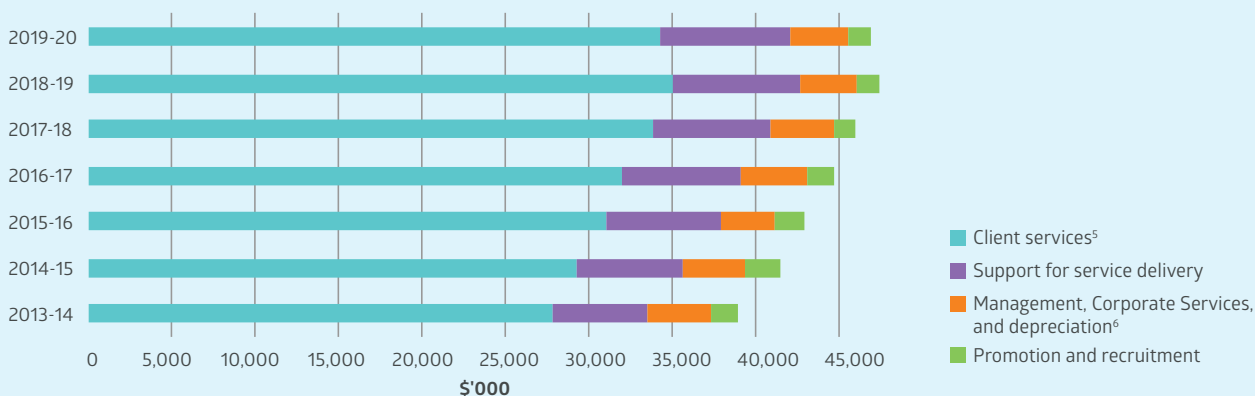
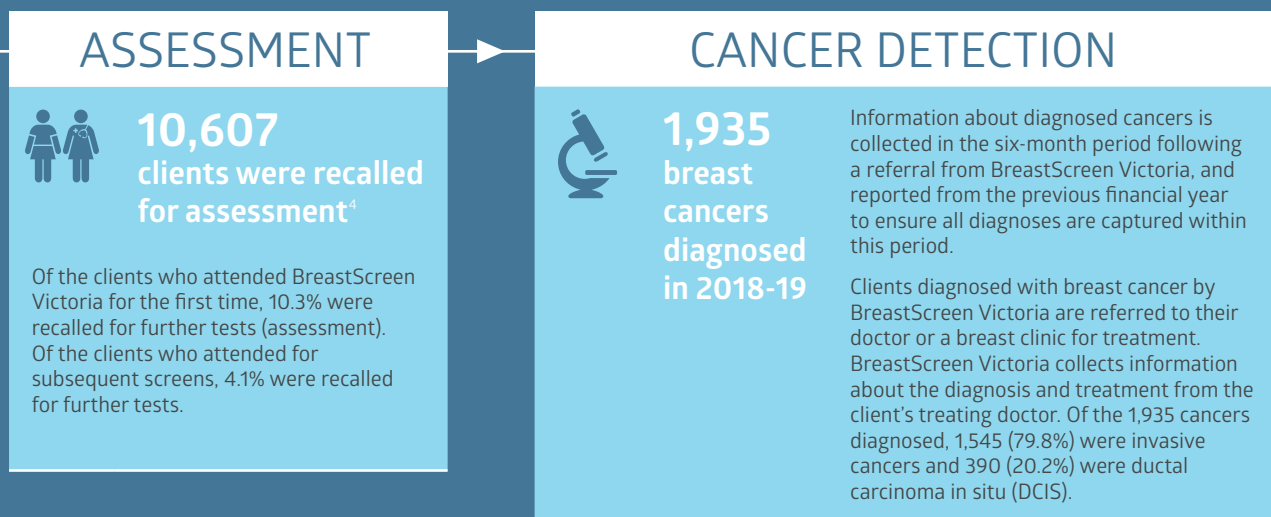
BreastScreen Victoria has continued its commitment to efficiencies and investment in initiatives that support service delivery. This has enabled BreastScreen Victoria to again deliver high quality services. BreastScreen Victoria did not deliver as many screens in 2019-20 because of a seven week screening pause due to COVID-19.



5,260,426

breast screens performed

Screens performed since February 1993³



³ The number of breast screens performed by BreastScreen Victoria in 2019-20 was impacted by Coronavirus (COVID-19)

⁴ Excludes Victorians screened in NSW

⁵ Reflective of reduced screening activity due to COVID-19 impact

⁶ Adoption of AASB 16 Leases resulting in depreciation on right-of-use assets

FROM OUR CEO



This is my first annual report as CEO of BreastScreen Victoria and I am thrilled to have joined this important organisation in its mission to reduce the impact of a breast cancer diagnoses through regular breast screening.

My tenure began during the COVID-19 pandemic. While it has been a challenging time, I'm proud that BreastScreen Victoria acted quickly to safeguard clients and staff. As I came on board, following a six-week suspension, our crucial service resumed and we continued to provide the same caring, personalised service we are known for, in a safe way.

While screening numbers were lower than the previous year due to the impact of COVID-19, our commitment to deliver an outstanding breast screening service has remained solid.

While COVID-19 has defined much of this year, our staff and committed service providers have shown great resilience and agility to achieve so much during such a disrupted time.

Ensuring equality of access to services is a particular passion of mine, and BreastScreen Victoria's focus on engaging under-screened communities made great progress this year.

The Beautiful Shawl Project began as a trial of a culturally safe screening shawl for Aboriginal women, and

expanded to eight Aboriginal Community Controlled Health Organisations' sites this year. Along with our project partners, we were proud to receive the state's highest accolade for health promotion, a VicHealth Award, for the successful trial.

We continued our commitment to diversity, inclusion, and accessible screening for LGBTI people with our Rainbow Rose sessions. These activities demonstrate what can be achieved when we work together with the communities we serve.

BreastScreen Victoria contributed to a ground-breaking study on the use of artificial intelligence to improve and transform breast screening, and received \$1.8 million from the Victorian Government to install six tomosynthesis (3D breast imaging) machines around the state, following a successful trial last year.

These exciting projects have the potential to improve detection, speed up lifesaving diagnoses, and cut down on invasive procedures.

MyCare, our major change initiative to embed innovative and sustainable solutions for our organisation, continued its momentum in 2019-20, and has already delivered a greater focus on client outcomes.

This year the organisation made significant progress in the shift to full electronic record management. The Vitro digital system, developed specifically for our clinicians to track client progress during assessment,

is now being rolled out across our services. We have also introduced real-time client feedback technology that helps us better understand and respond to clients.

All these milestones would not be possible without committed, forward-thinking leadership. I would like to thank my predecessor, Vicki Pridmore, for her dedication and service. With Vicki at the helm, BreastScreen Victoria has become the strong, respected, client-focused organisation it is today.

I would also like to thank the BreastScreen Victoria Board of Management, led by Wayne Tattersall, for their confidence and support during my first few months in the role.

Leading this organisation allows me to work alongside and support the talented, resourceful, and dedicated BreastScreen Victoria team.

My sincere thanks to all staff for their warm welcome and hard work, and for responding without hesitation to the challenges we have faced. I look forward to working with you all to improve the future health of Victorians.

A handwritten signature in black ink, appearing to read 'Terri Smith', written over a light grey rectangular background.

Terri Smith
Chief Executive Officer

FROM OUR CHAIR



On behalf of BreastScreen Victoria's Board of Management, it is my pleasure to present to you our 2019-20 Annual Report.

In my second year as Chair of BreastScreen Victoria, it has been my great privilege to serve on the Board as we have responded to the many challenges of this year.

Our priority this year, as always, was to provide a safe and essential service for Victorians. In March 2020, following careful consideration and clinical advice, BreastScreen Victoria temporarily paused service for just over six weeks due to the COVID-19 pandemic.

I am pleased to report that despite these circumstances, we made significant progress on many key performance measures and projects.

Most importantly, BreastScreen Victoria screened 216,019 eligible Victorians this year, achieving 79.6% of our annual target. This achievement was due to our dedicated staff working around the state, all of whom were quick to adapt to a changing and challenging environment.

Our efforts to engage with under-screened communities continued with The Beautiful Shawl Project, our initiative to ensure that Aboriginal women feel culturally safe during a breast screen.

We also saw tangible, practical results from the roll-out of various activities under MyCare, our client-centred approach to continuous improvement, including the ability to receive real-time feedback from clients.

Through this improved method, 98% of surveyed clients reported overall satisfaction with our service, which is a testament to BreastScreen Victoria's personalised and professional care.

In March we welcomed our new CEO, Terri Smith, who brings a wealth of experience to the organisation. With more than 20 years in executive-level roles in the not-for-profit health sector, Terri is committed to equality of access to services and to improving women's health.

On behalf of the Board, I pay particular thanks to our outgoing CEO, Vicki Pridmore, for her innovative thinking, passion, and commitment to excellence over 12 years of dedicated service, and wish her all the best for the future.

I acknowledge the Australian and Victorian Governments, in particular the Victorian Department of Health and Human Services, for their continued support.

I thank my fellow board members for their collective generosity, experience and expertise throughout the year. I particularly acknowledge outgoing member Kerry Bradley, whose commitment to quality and strategic guidance was a great asset to the organisation.

I look forward to playing my part in steering the crucial work of BreastScreen Victoria as we work through the challenges and opportunities following the onset of COVID-19.

As we look to the future, I see a robust and capable organisation that can adapt, evolve, and respond to change. I am confident that we will continue to provide a highly-regarded, client-focused health service that delivers great outcomes for Victorians.

Wayne Tattersall
Chair, BreastScreen Victoria

COVID-19 AND OUR SERVICE

In 2020, the COVID-19 pandemic brought on an unprecedented global challenge that required a broad and immediate response. BreastScreen Victoria acted quickly to reduce the risk of infection in our clinics and limit the impact of community transmission.

In early March, we began implementing infection control measures to protect clients, staff, and the community from the risk of COVID-19. At the forefront of our service, our Contact Centre and services staff asked clients precautionary travel and health questions at the time of booking and at the time of appointment, and our clinics displayed door signage with health advice.

At the Coordination Unit, the IT team worked hard to increase the capability of staff to work from home. This included upgrading the secure Virtual Private Network, supporting the move to Microsoft Teams, and introducing software that would allow Contact Centre agents to answer calls at home.

STATE OF EMERGENCY DECLARATION

On Wednesday 25 March, eight days after the Victorian Government's State of Emergency declaration, BreastScreen Victoria made the difficult but necessary decision to pause screening appointments to safeguard our clients and staff from the risk of COVID-19, and allowed us to relieve any pressure on the health system from surge demand.

The decision to pause services was made in collaboration with our service providers following careful consideration of clinical advice that a short delay to screening would have a low risk for clients with no breast symptoms.

In the days leading up to the pause in service, appointment cancellations were sent to 25,528 clients. Just under 40,000 emails, SMS messages, letters, and phone calls notified clients about their appointment, and reassured them that service would resume as soon as it was safe to do so.

We updated BreastScreen Victoria communications channels with information about COVID-19 and our service, advising anyone who noticed breast changes or symptoms to contact their doctor immediately. We also provided information to our stakeholders and the media to reach the broader Victorian community.

DURING THE PAUSE IN SCREENING

BreastScreen Victoria worked rapidly in the days and weeks after the pause of screening appointments to complete reading and assessment pathways for all impacted clients, so no one was left without certainty or support regarding the outcome of their breast screen.

Many of our services played a vital role in supporting other parts of their auspice organisations during COVID-19. Across our clinics, staff were reassigned and engaged in other activities. For example, a team at Monash BreastScreen helped develop the Monash Health Distribution Services Centre, which over the course of a few short weeks, became the epicentre for Personal Protective Equipment (PPE) supply to the state's health services.

At the Coordination Unit, our Contact Centre remained open at a reduced capacity to continue speaking to clients, address their concerns and provide a reassuring voice. The remainder of staff began working from home with occupational health and safety and work plans in place. Collectively, BreastScreen Victoria staff demonstrated flexibility, resilience and adaptability through this difficult time.

RESUMPTION OF SCREENING SERVICES

By early April, BreastScreen Victoria was working on resuming service in a safe way. We worked closely with our services to understand the risks and requirements to resume screening, and re-commenced services in a staged way to allow for the different circumstances of each clinic and location.

Thanks to the flexibility and resilience of our clinic staff, most of our services were up and running by mid May, with the remainder opening over the next few weeks. We reinvited clients, prioritising anyone whose appointment was cancelled or at higher risk as an annual screener.

On resuming services, BreastScreen Victoria strengthened its infection control policies and put safety measures in place including precautionary questions on travel and health, spaced out appointments to allow for physical distancing in waiting areas, and enhanced cleaning in-between appointments. By the end of May, 41 out of our 42 clinics had resumed screening, and we were seeing high numbers of calls into the Contact Centre with strong demand from clients to get their regular breast screen.

FURTHER RESTRICTIONS ANNOUNCED

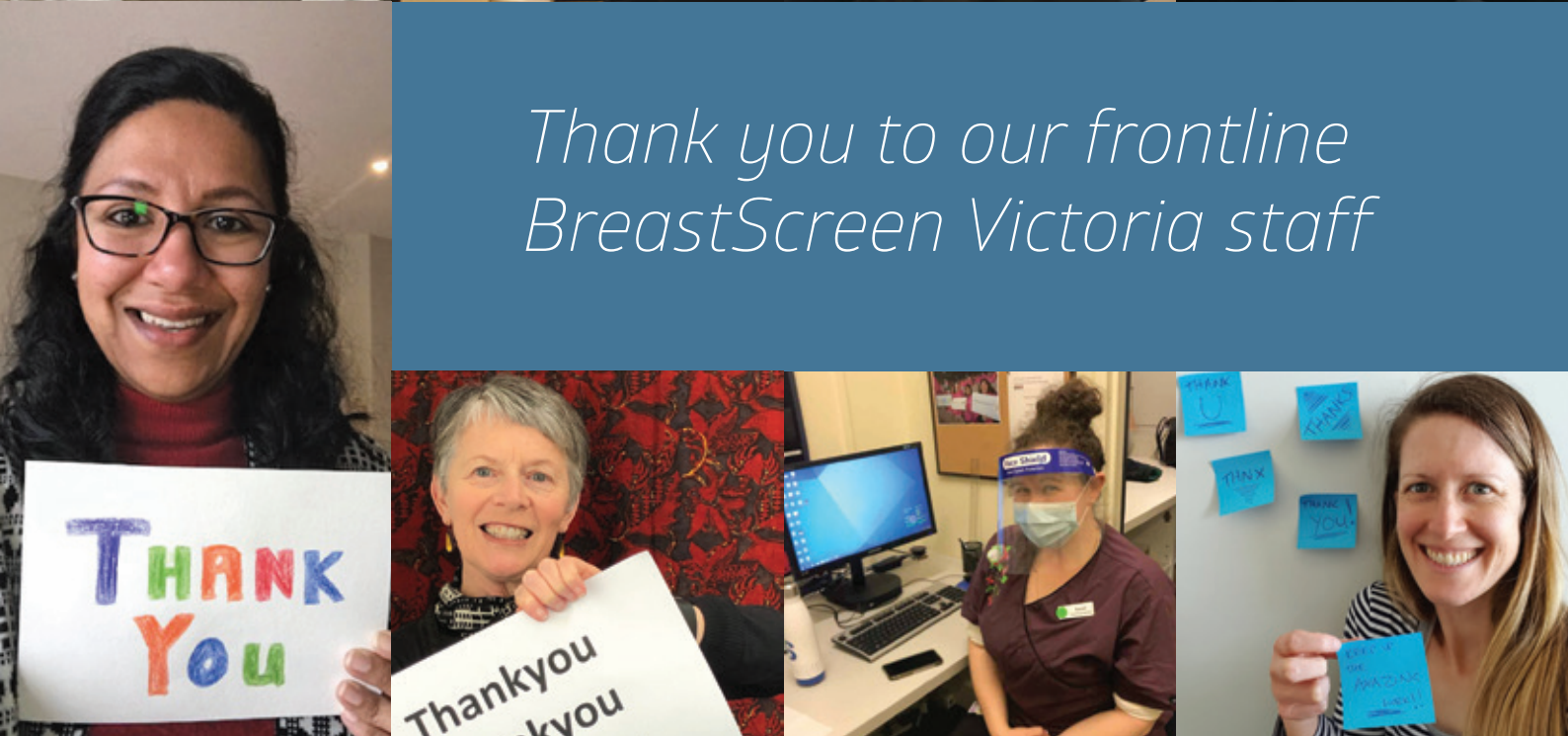
When COVID-19 cases began to increase in Victoria again, and further restrictions were announced, PPE including face masks, shields, and eye protection was distributed for services staff.

BreastScreen Victoria was able to continue screening in very challenging circumstances thanks to the diligence and dedication of everyone at our services including receptionists, nurse counsellors, data managers, radiographers, and radiologists.

Thanks to the collaborative effort in prioritising client and staff safety, and guided by government safety advice, BreastScreen Victoria was able to continue operating and providing its crucial service throughout further restrictions.



*Thank you to our frontline
BreastScreen Victoria staff*



OUR WORK

“We are committed to hearing directly from women about their personal experience and what matters to them, to allow the client’s voice to guide everything we do.”

CLIENT CENTRIC

CLIENTS BENEFIT FROM IMPROVING IMAGE SHARING

We're supporting clients to have better access to their breast screening images. Clients who are being referred for treatment, and who have previously had images taken outside BreastScreen, will benefit from an online system that will streamline sharing of breast images between BreastScreen Victoria and other screening services, hospitals, and private providers around the country.

The image sharing system will allow us to download clinical images of clients attending BreastScreen Victoria for screening, enabling us to provide more accurate screening results. This will reduce unnecessary imaging and crucially, reduce the time between reading, assessment, and the start of any treatment. Also, clients who develop symptoms between breast screens and report to their GP will find it easier to access their previous breast screen for comparison.

The image sharing project is exploring the development of a client portal to give clients control over their own images. An advisory group consisting of clients, clinicians, private practice, and IT stakeholders is providing input and recommendations to look at design and possible implementation.

Following an expression of interest to find a suitable system, we plan to get this work underway later in 2020.

TAILORED SCREENING BASED ON INDIVIDUAL RISK

Breast screening is not a one size fits all model and we want to better meet the needs of our clients based on an assessment of their individual risk factors. Providing tailored screening puts our clients first, and allows us to deliver a level and type of screening that is most appropriate for them.

A good example of this approach is BreastScreen Victoria's move to tailor screening intervals based on a client's family history of breast cancer, combined with their personal history of ovarian cancer.

Additionally, we have been involved in several projects that will allow us to further refine screening pathways for our clients in the future. These projects include:

- the development of models to better predict the effect of breast density on cancer detection in screening (Melbourne University with Cancer Council Victoria)
- an improved and automated risk prediction tool incorporating breast density and family history information (Melbourne University with Cancer Council Victoria)
- the development of a protocol to incorporate tailored screening into BreastScreen Victoria (BreastScreen Victoria and Melbourne University)
- an exploration of risk-based, personalised approaches to breast cancer screening in Australia (Cancer Council Australia)



Health Promotion Officers Danyel Walker and Haroula Vaniotis with Director Operations Doris Whitmore in front of our Mobile Screening Service at The Victorian Seniors Festival 2019.

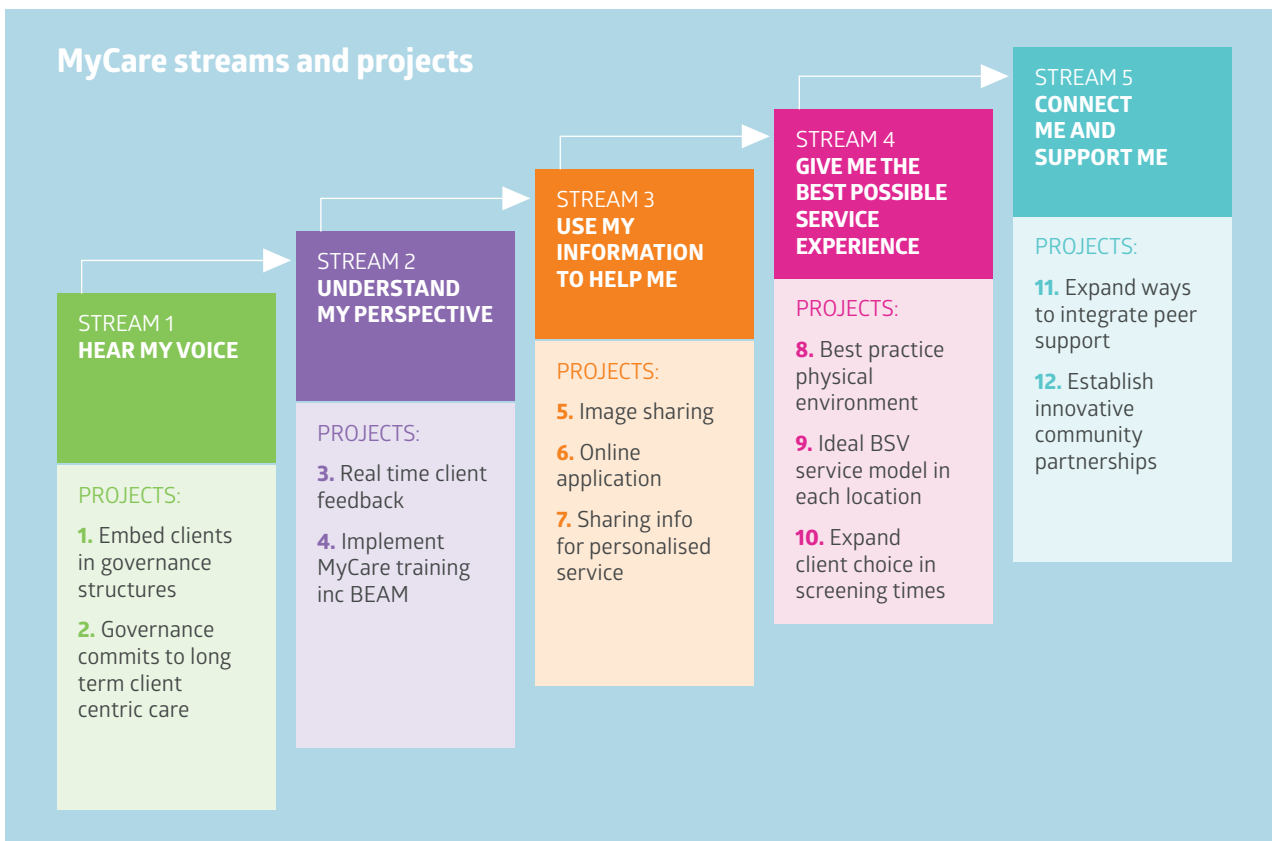
MYCARE: PUTTING CLIENT CARE FIRST

Every client who comes to BreastScreen brings a unique perspective and life experience. At BreastScreen Victoria we have made a commitment to put our clients at the centre of everything we do. This means actively understanding that one size does not fit all, and seeking client input to improve their experience of our service.

We already receive great feedback from our clients, with very high ratings on client satisfaction, but we know there is always room for improvement – we want to be sure that every client will receive the best possible care, every time.

This year, our client centric care program was renamed MyCare, which reflects two important ideas: that it is our clients who define great care in our services; and that our staff can take pride in the professional care they provide.

With the help of 30 consumer representatives who have volunteered their time to work with us, we demonstrated our commitment to consultation and co-design, by setting up several working groups to validate and co-design, by setting up several working groups to validate and refine 12 recommendations from the Foundation Project, completed in early 2019. Five key themes emerged from this analysis work, and the projects were grouped as follows:



Our Quality team show what MyCare is all about: Quality Program Administrator Jillian Tempany and Diversity, Inclusion Project Manager Ashleigh Sternes, Contracts Manager Melinda Goss and Director Quality Genevieve Webb.



Our team leading BreastScreen Victoria's MyCare work: Client Centric Care Project Manager Fiona Mouritz, State Radiographer Sue MacCauley, and Director of Quality Genevieve Webb.



A few of our dedicated Consumer Representatives and staff working collaboratively to support MyCare.

In October 2019 and February 2020, we convened Collaborative Panel workshops, each attended by nearly 50 consumers, staff members and other experts, to confirm the project direction and ensure we had a shared understanding of the improvements being pursued. We thank all of those people who gave us their time and travelled to Melbourne to be part of this work.

Several of the 12 MyCare projects are now progressing. Each project board is led by a member of our Executive team and includes consumer representatives and staff. The project boards work collaboratively to provide expertise, insight and direction to each project. Each project will also consult further with clients and staff as they develop the detail of the work.

Some of the MyCare projects are highlighted elsewhere in this report; they include: establishing a continuous survey tool to obtain real-time client feedback, improving how mammographic images are shared between BreastScreen and other services that our clients use, improving the online booking experience, and providing client-focussed training and support for all staff.

The MyCare program is overseen by a Steering Committee that is chaired by the CEO, Terri Smith, and includes consumer representatives from our services and other health organisations. We thank them each for their time and commitment to helping BreastScreen provide the best possible service experience for every client.



Monash BreastScreen Deputy Chief Radiographer Elizabeth Stewart.

ENSURING HIGH-QUALITY IMAGES

To achieve the best possible client experience and clinical outcomes, we aim to minimise the number of images taken at each screening visit, and ensure they are high quality to maximise the ability to see cancer on the mammogram.

Radiographers at BreastScreen Victoria recently completed a project piloting software that assists with quality control of breast images. To ensure breast cancer detection, radiographers aim to capture as much breast tissue as possible.

BreastScreen Australia's National Accreditation Standards require BreastScreen Victoria to review and grade samples of images for every radiographer, using an evaluation system of Perfect, Good, Moderate, and Inadequate (PGMI).

A formal review is completed annually to ensure that each radiographer achieves 50% or greater P or G ratings in an evaluation of 50 randomly selected images. This can be time-consuming for a senior radiographer and is variable between assessors.

Our radiographers from Monash BreastScreen trialled VolparaEnterprise analytics software, which uses algorithms to assess digital images, to see how it graded compared to a manual assessment. They completed a retrospective comparative study of 50 cases imaged by 15 Monash BreastScreen radiographers using the Volpara software.

The software provides radiographers with timely information on their image quality, includes training tips on how to improve their positioning, and analyses the amount of pressure the radiographer is using when compressing the breast tissue during the procedure, which is an important factor that can affect a client's screening experience.

Our team from Monash, Deputy Chief Radiographer Liz Stewart and State Radiographer Sue Macaulay, with assistance from Data Manager Helen Shingles, found that the software showed promise in evaluation of radiographers' image quality.

Using this software, the radiographer can receive information on each individual image they take, rather than a small selection of manually evaluated images. This provides better understanding for both the individual, and their supervisor, of overall image quality and supports quality improvement plans.

A FORUM FOR OUR RADIOGRAPHERS

Radiographers are at the very heart of what we do at BreastScreen Victoria. High quality mammographic images are integral to cancer detection, and our engaged and professional workforce of specialist breast imaging staff are right there with our clients, performing mammography and assessing images at the time of screening.

In November 2019, we held our inaugural BreastScreen Victoria Radiographer Forum at the Victorian Comprehensive Cancer Centre, giving radiographers an opportunity to come together, discuss the latest research findings and network with their peers.

More than 80 BreastScreen Victoria staff and radiographers from public and private providers around Victoria came together to discuss tomosynthesis, mammography challenges, and the characteristics of great radiographers, among other topics. Also in attendance was a representative from the Australian Society of Medical Imaging and Radiation Therapy to answer questions about the practice and proficiency of medical radiation sciences.

Feedback on the day was very positive, and the successful event has paved the way for regular radiographer forums in the future.

SUPPORTING OUR RADIOGRAPHERS TO PROVIDE CLIENT-FOCUSED CARE

Our aim is to ensure our talented radiographers are engaged, confident and up to date with the latest developments in training, so they are able to continue providing truly client-focused care.

BreastScreen Victoria is developing new training resources called Better Enhancing and Advancing Mammographers (BEAM). They will be a one-stop shop for on-boarding, induction, orientation, and professional development for our imaging staff.

Through these resources, we are able to articulate BreastScreen Victoria's expectations regarding client-centric practice and ensure consistency across all processes and approaches relating to breast imaging.

A working group comprising radiographers from metropolitan and regional services have contributed content, and our Learning and Development Instructional Designer Claire Wheeler is working closely with State Radiographer Sue Macaulay to develop a user-friendly, accessible product.

BEAM will be launched later in 2020, and is not only a useful training tool for new radiographers but also an important resource for existing radiographers to refresh their knowledge and continue their professional development.

CAPTURING REAL-TIME CLIENT FEEDBACK

We love hearing feedback and want to make it as easy as possible for clients to tell us what they think of our service, and share this information so we can continuously improve.

A new platform to capture more timely feedback from clients is being introduced across BreastScreen Victoria. The work is part of our MyCare Real-Time Client Feedback Project, which aims to ensure every client, across all our sites, gets the same excellent service.

The platform will help us understand the client experience of screening and assessment in real time, prioritise service improvements, and guide decision-making around client-centric care.

We have been collecting feedback from clients through annual surveys since 2013. Over time, it became clear we could improve the process to capture more timely and comprehensive information.

Working with customer feedback specialists InMoment, we're developing a platform that delivers insights from client surveys and a customised reporting function, all in one spot. Over time, we plan to increase the opportunities for clients to give us feedback at different points of contact, for example via the website and in clinics, so we can better understand their overall experience.

The Real-Time Client Feedback Project addresses five areas for improvement:

- 1 Better understand the elements that impact our clients' BreastScreen Victoria journey
- 2 Enhance opportunities for clients to provide feedback at every stage of their journey
- 3 Create a more consistent and strategic process to collect and use feedback
- 4 Engage a more diverse range of clients in dynamic ways to ensure representative feedback
- 5 Capture feedback from staff and technicians to better understand their needs, and enhance the working environment and culture.

We trialled the new platform in January and February 2020, providing clients with both an assessment survey and a screening survey until service paused due to COVID-19. The screening survey – including pertinent new questions about the pandemic – resumed following a return to services in May, and the assessment survey will resume later in 2020.

The immediate client feedback we received during COVID-19 was invaluable in providing positive feedback and reassurance to frontline staff dealing with the challenges of working with PPE and additional safety measures.



SUSTAINABILITY

A FULLY DIGITISED SYSTEM FOR INVITATION, SCREENING, AND ASSESSMENT

BreastScreen Victoria made very good progress in our shift from a paper-based records system for client invitation, screening, and assessment towards full electronic records management this year. BreastScreen Victoria now has electronic client records from invitation to screening result, and all assessment administration and results.

We are working with the Vitro digital system on the last step to fully digitise client records at assessment clinic visits. Following a successful pilot of Vitro at St Vincent's Hospital last year, we are expanding the system to all of our eight reading and assessment services.

The new system was developed specifically for the breast assessment service in consultation with radiologists, radiographers, nurse counsellors, and data and administrative staff, and allows our clinical teams to track client progress during an assessment visit in real-time.

The result is significant efficiencies in information-sharing and a quicker, more streamlined journey for our clients.

Dr Helen Frazer, Clinical Director at St Vincent's BreastScreen, said the new system was a central part of BreastScreen Victoria's strategy to put the client at the centre of our care.

"Our team found that the time taken to issue written results reduced from 12 days to one or two using the Vitro software, providing for a better experience for both patients and staff."

Despite some inevitable delays due to COVID-19, we have completed the development of significant components of Vitro and are progressing with implementation to a full electronic client record management system across all our services.

ACCREDITATION ENSURES SAFE AND EFFECTIVE CARE

Accreditation provides assurance that our clients are provided with safe and effective care and the best possible health outcomes.

Our nine service units – comprising eight services around Victoria and the BreastScreen Victoria Coordination Unit – are subject to accreditation by the National Quality Management Committee (NQMC) in accordance with BreastScreen Australia's National Accreditation Standards.

Over the past year, North Western, Grampians and St Vincent's BreastScreen services all achieved positive outcomes for their accreditation surveys and were granted full accreditation status.

Maroondah BreastScreen was scheduled for an accreditation survey visit in late March, but due to COVID-19 restrictions, this has been postponed until 2021.

We're pleased to report that all BreastScreen Victoria services hold full accreditation. Accreditation is an important indicator of quality and this achievement reflects the sustained, high quality work at BreastScreen Victoria.

The NQMC has developed an approach that will allow for accreditation surveys to be conducted online using video-conferencing, and this will be used for all services for the foreseeable future.



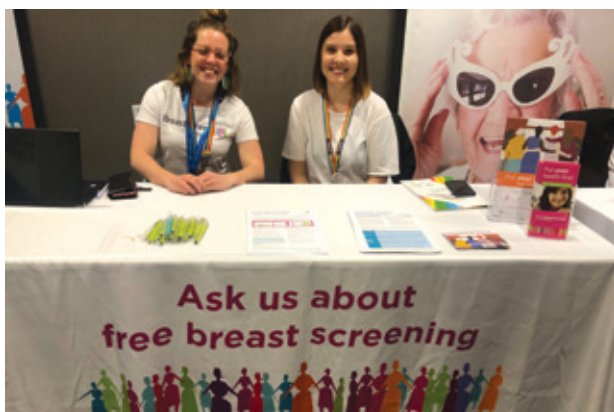
PARTNERSHIPS

BreastScreen Victoria would like to thank all our partners for their support this year. By working together, our partnerships enable us to deliver better outcomes by combining and complementing each organisation's unique strengths and values. We're proud our partnerships help us make a greater impact than each partner could by acting alone, to create shared and valued success.

INCLUSIVE, ACCESSIBLE SERVICES FOR THE LGBTI COMMUNITY

Rainbow Rose sessions

In support of BreastScreen Victoria's commitment to safe and inclusive screening, we held two LGBTI-specific screening sessions at the David Jones Rose Clinic in November 2019 and February 2020. The sessions aimed to create a safe space to screen individually or as a group because LGBTI people are under-screened for breast cancer and experience unique barriers to screening. The Rainbow Rose sessions proved very popular, and further sessions are planned for the community in the future.



Senior Health Promotion Officer Lisa Joyce and Diversity and Inclusion Project Manager Ashleigh Sternes at the Ageing with Pride Conference.

Ageing with Pride

In October 2019, BreastScreen Victoria was honoured to be a primary sponsor of Ageing with Pride, the leading conference in Australia for aged and health and human service providers to develop their knowledge, skills, and practice to meet the needs of LGBTI consumers.

In her plenary address, BreastScreen Victoria's CEO Vicki Pridmore spoke about our commitment to community accessibility and our recommendations for sexuality and gender diverse people regarding risk, screening eligibility, and breast care.



Staff at St Vincent's supported the Rainbow Rose clinic: Receptionist Luisa Tabacco, Radiographer Monique Warillow, and Radiographer Nicole Puttyfoot.

A FRAMEWORK FOR CANCER SCREENING

The Victorian Cancer Screening Framework sets out a new model for the delivery and funding of cancer screening in Victoria. It aims to facilitate greater collaboration among screening partners and drive improvement in screening participation and outcomes.

The Framework is governed by a steering committee led by the Department of Health and Human Services with representation from partners including BreastScreen Victoria, the Victorian Aboriginal Community Controlled Health Organisation, VCS Foundation, Cancer Council Victoria, and Primary Health Networks.

BreastScreen Victoria participates in regular working groups under the Framework's governance, they are the Primary Care and Workforce Working Group, Data and Surveillance Working Group, and Participation and Recruitment Working Group.

As part of the Participation and Recruitment strategy, BreastScreen Victoria undertook a range of activities to deliver accessible and tailored information and interventions to reduce gaps in screening participation.

We sent targeted letters, emails, calls, and SMS messages to lapsed clients, in-language digital and radio advertising, and the creation of a podcast about screening in the Aboriginal community.

THE BEAUTIFUL SHAWL PROJECT: IMPROVING THE SCREENING EXPERIENCE FOR ABORIGINAL WOMEN

We recognise that some people experience cultural, social, and linguistic barriers to screening, and we aim to adapt and respond to the diverse needs of the communities we serve.

For Aboriginal women, the barriers to breast screening are complex. Many report a lack of cultural awareness among health service staff, fear, shame, and negative screening experiences, all of which can reduce a woman's likelihood to screen with us.

In 2016-18, 35% of eligible Aboriginal Victorians participated in our program, below the state average of 54%. Compared to non-Aboriginal women, Aboriginal women are more likely to be diagnosed with breast cancer at a more advanced stage and have poorer health outcomes.

Our work with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and Aboriginal Community Controlled Organisations (ACCOs) is key to addressing these challenges and increasing the rate of screening for Aboriginal women.

Following a successful trial using custom shawls during screening with a group of 14 Aboriginal women in 2018-19, we rolled out The Beautiful Shawl Project to reach more communities this year. The community-led initiative aims to ensure Aboriginal women feel culturally safe during a breast screen.



Beverley Harrison, Jenny Sack, Tanya Geir, Georgie Taylor, Rachael Gladman, and Gunditjmara Aboriginal Cooperative mascot Willan.

BreastScreen Victoria worked closely with VACCHO and eight ACCOs on each stage of the project, with the ACCOs steering and leading many activities in the community; from promoting the visits, inviting clients to screen, taking bookings, and managing appointments.

We took our Mobile Screening Service to seven of the ACCO sites around Victoria and adapted our standard practices to suit the needs of the community.

A more flexible booking system allowed for longer appointment times and walk-ins, ACCO staff received training to work in reception roles, and space was set up for women to socialise while waiting for their breast screen. VACCHO also provided cultural safety training to our radiographers and operations, and communications and health promotion staff.

Aboriginal clients received a custom designed shawl to give them coverage and privacy during screening and to take home. Altogether, 420 shawls were produced from eight designs featuring artwork by local Aboriginal community artists, each telling a unique story of women's business, health, culture, and community.

We screened a total of 160 Aboriginal women as part of The Beautiful Shawl Project – a significant achievement for an under-screened group. For almost half of the women, it was their first breast screen, and 30% were lapsed clients who had not returned within the recommended period.

These women reported an overwhelmingly positive experience, with 82% agreeing the shawl made them feel culturally safe and 95% saying they felt more comfortable screening because the service was located at their local ACCO.



Shepparton community member Katrina Mohamed in the Rumbalara Aboriginal Cooperative shawl.

“The artwork is absolutely amazing, but it’s not just the artwork, it’s what it means. You put it on and it’s like having your Aunties from long ago give you a great big hug. They’re holding you and saying, ‘It’s okay. We’re here with you to do this.’”

Guugu Yimithirr woman Tarni Jones

Many women also reported using their shawls for other activities, including cervical screening. We attribute the project’s success to two core values: self-determination – the right of Indigenous peoples to exercise control and autonomy over outcomes that directly impact their health and wellbeing; and cultural safety – the spiritual, social, and emotional safety of people and their identity.

We continue to partner with VACCHO, and will expand the project in 2020/21 and future years. We are excited about the opportunity to work with Aboriginal organisations in different regions and improve breast screening experiences for Aboriginal women across the state.



Andrea Casey, Joanne Ronald, Hayley Couzens, Naomi Edwards, and Lisa Joyce with the Wathaurong Aboriginal Cooperative shawl.



Artists L-R top row: Bronwyn Ferguson (Gunditjmara), Jenna Bamlett (Yigar, Gunditjmara), Rebecca Clayton (Walpiri), Shylee Corrigan (Yirandali), Artists L-R bottom row: Marilyn Fenton (Gunai Kurnai), Jasmine-Skye Marinos (Arrente), Brenda Farnham (Walbunia, Dhungutti), Rebecca Atkinson (Bangerang, Gunditjmara).

STATE RECOGNITION FOR OUR CULTURALLY SAFE SCREENING SHAWL

Our collaborative, community-led trial to ensure Aboriginal women feel culturally safe during a breast screen using a customised screen shawl won the state’s highest accolade for health promotion this year.

The VicHealth Awards celebrate outstanding achievements in health promotion and acknowledge programs, campaigns, and organisations that make a real difference to the lives of Victorians. The initiative was recognised with an Improving Health Equity Award at the 2019 ceremony.

The shawls, designed by Aboriginal artist, Wiradjuri and Yorta Yorta woman Lynette Briggs, were trialled at St Vincent’s BreastScreen in 2018 and Aboriginal women reported positive experiences and pride in undergoing breast screening.

BreastScreen Victoria, the Victorian Aboriginal Community Controlled Health Organisation and Victorian Aboriginal Health Service would like to thank and congratulate

everyone involved in the project, including Aboriginal Community Controlled Health Organisations, the Department of Health and Human Services, Deakin University, Cancer Council Victoria, St Vincent’s Hospital BreastScreen clinic, and Western Health.



Mel Davis, Marg Davidson, Vicki Pridmore, Lisa Joyce, Annie Cooper, Andrea Casey, Susan Hedges, Amber Neilley accepting the VicHealth Award for Improving Health Equity.

COLLABORATION WITH PRIMARY HEALTH NETWORKS

Collaboration remains at the forefront of BreastScreen Victoria's relationship with Victoria's healthcare organisations. This year we worked with three Primary Health Networks (PHNs) – Eastern Melbourne Primary Health Network (EMPHN), Gippsland Primary Health Network (GPHN), and South Eastern Melbourne Primary Health Network (SEMPHN).

Together we implemented a suite of activities to increase breast cancer awareness, screening accessibility, and participation rates of eligible Victorians, while supporting local community groups and workplaces to promote BreastScreen Victoria's key messages.

Project activities targeted clients from Culturally and Linguistically Diverse (CALD) communities who had not returned for their routine breast screen, clients who identify as Aboriginal and/or Torres Strait Islander, other clients who had not returned for their screening, and those who had never been screened.

Results highlight that 8,033 people had a breast screen as an outcome of the combined activities.



Health Promotion Officer Danyel Walker with a member of Australian Multicultural Seniors Support Group.

Engaging new screeners

Engaging eligible Victorians for their first breast screen continues to be a key activity. We sent additional invitations to those who have never screened, resulting in the subsequent screening of 2,216 new clients in the SEMPHN region and 688 in the EMPHN region.

Re-engaging overdue screeners

As with new screeners, we sought to engage eligible Victorians who had not returned for their routine breast screen. Across the three regions, we sent additional SMS and letter invitations prompting clients to return for their overdue rescreen. In addition, in the EMPHN and GPHN regions, we made outbound calls to English speaking clients.

As a result of these combined activities, 4,421 Victorians living across the three regions who were overdue for a rescreen have now had a breast screen.

In the City of Latrobe, we sent a co-branded letter with the client's GP to see if it would increase rebooking response rates. The outcome of this co-branded letter trial is on hold due to COVID-19, with results due next year.

Re-engaging CALD communities

To re-engage clients from CALD communities who had not returned for their routine breast screen, we made in-language outbound calls to overdue clients who spoke one of seven languages at home (Greek, Cantonese, Italian, Mandarin, Polish, Spanish, and Russian). An evidence-based, culturally responsive approach was used to re-engage these under-screened clients.

Calls in-language were effective in re-engaging lapsed clients who are overdue for their breast screen. As a result of these activities, 1,199 appointments were booked across the SEMPHN and EMPHN regions, and 730 clients returned for rescreening.



MSS radiographers Joanne Ronald and Maylene Dent with State MP Sonya Kilkeny.

Re-engaging Aboriginal and Torres Strait Islander communities

Activities to engage and re-engage clients who identify as Aboriginal and/or Torres Strait Islander were conducted in collaboration with various Aboriginal services in EMPHN and GPHN where clinic staff received cultural safety training.

In the EMPHN region, we made outbound calls to clients who had not returned for their routine screen. Our Epping clinic, in conjunction with the Victorian Aboriginal Health Service, held a group screening session. Eleven Aboriginal people attended this session, including four who screened for the first time, and five who were overdue for their rescreen.

In the GPHN region, we continued The Beautiful Shawl Project, a community-led statewide initiative developed last year by the Victorian Aboriginal Community Controlled Health Organisation and BreastScreen Victoria. A screening shawl provides Aboriginal women with a culturally appropriate and safe screening experience through collaboration, information sharing, and art.

The Beautiful Shawl Project was delivered in partnership with Ramahyuck District Aboriginal Cooperative, GPHN, and Latrobe Regional Hospital who collaborated to hold the Aboriginal cultural breast screen shawl and group screening session at the Traralgon BreastScreen clinic. Thirteen Aboriginal people attended this group screening.



Ongoing activities

The suite of PHN projects provided insights into screening behaviour that will be used in future engagement and communications activities, both within the three regions and more broadly. We will continue to use these insights to develop targeted strategies to improve screening participation, particularly for under-screened groups. Several activities will continue to progress and become part of BreastScreen Victoria's ongoing work, including our work with community groups and organisations.

Community capacity building and workplace engagement

BreastScreen Victoria leveraged the abilities of individuals, communities, and organisations to promote breast screening and reach under-screened populations within two of the regions. Working closely with local councils, MPs, GPs and pharmacies, cultural groups, and community organisations, we shared our resources, trained staff to promote breast screening, and organised group screening sessions.

SEMPHN focused on three Local Government Areas in their region – the Cities of Frankston and Port Phillip, and Mornington Peninsula Shire. We conducted activities to build capacity in the community by engaging and upskilling community organisations and engaging workplaces by presenting key messages to employees and training staff.

In total, we engaged 56 community organisations and services. Approximately 102 staff in the community workforce received formal training, and 830 community members attended information sessions. In addition, we engaged 74 medical practices, and five local MPs were engaged as project ambassadors.

Supporting workplaces to promote breast screening and breast cancer awareness remains a key strategy. In SEMPHN, we engaged 22 workplaces across 58 sites and delivered 13 workplace information sessions to approximately 256 staff.

Though BreastScreen Victoria has eight permanent screening clinics servicing the SEMPHN region, our Mobile Screening Service (MSS) can boost engagement by increasing accessibility and visibility, and adapt to the local population. Targeted MSS visits enabled 1,511 clients to book an appointment on the MSS and 82% subsequently screened, highlighting the effectiveness of this approach.

As a result of these combined activities, 5,449 clients in the SEMPHN region booked an appointment and over 78% subsequently screened.

GPHN engaged seven pharmacies to deliver an eight-week in-store breast screening campaign. This resulted in 277 conversations being initiated between pharmacy staff and members of the community.



Councillor Katherine Copsey, Councillor Louise Crawford, and City of Port Phillip Mayor Bernadene Voss visiting the MSS van at Port Phillip.

MP REPORT CARDS HIGHLIGHT PARTICIPATION BY ELECTORATE

This year, BreastScreen Victoria provided screening participation statistics in both printed and digital format to MPs to promote in their electorates, as part of our MP Report Cards Project.

Across the state, BreastScreen Victoria's participation rate was 54% for clients aged 50-74 between July 2016 and June 2018. Additionally, we calculated the number of Victorians who may have breast cancer statewide and within specific electorate areas, allowing us to strengthen the message.

The data showed that over 1,500 Victorians might have breast cancer, but didn't know it because they haven't had a breast screen. The Report Cards were distributed as part of Breast Cancer Awareness Month in October.



Project Manager Lisa Hochberg with Qantas staff members.

HEALTH AND WELLBEING IN THE WORKPLACE

"I'm way too busy to book an appointment." It's a common refrain. Many people prioritise work and other commitments over attending a breast screen.

We know the workplace is an ideal setting to encourage a large audience to take measures to improve their health and wellbeing, and that employers are well placed to promote early detection of breast cancer to their employees.

This year we revised our Workplace Resource Kit to provide simple and practical strategies that workplaces can use to promote breast awareness, including encouraging flexible arrangements for employees to screen every two years during business hours.

Our Health Promotion Officers worked with organisations including Qantas, Allianz Insurance, WorkWear, Wyndham City Council, Frankston City Council, Bendigo Bank, Specsavers, and AusNet Services to promote breast awareness to their employees.

During Breast Cancer Awareness month in October, we continued our partnership with Monash Health to promote breast health and screening, including an extensive internal communications campaign and screening sessions exclusively for employees and volunteers.

A total of 49 Monash Health employees screened as a result of the initiative, including 28 new clients, eight lapsed clients and 15 who identified as speaking a language other than English at home. This partnership is now embedded within the health and wellbeing strategy of Monash Health.

Of those we surveyed, 64.7% of clients agreed that work commitments impact their capacity to have a breast screen, and most (73.5%) said they would attend their next screen during work hours. This demonstrates the important role employers can play in supporting their staff to engage in positive health behaviours.



State MP Jaala Pulford, BreastScreen Victoria Program Manager Kim Kyatt, State MP Juliana Addison, and federal MP Catherine King at the Ballarat BreastScreen Victoria clinic.

DIGITAL FOCUS

TECHNOLOGY TO MEET OUR NEEDS DURING COVID-19

With fundamental changes to the way we work and operate brought on by COVID-19, the role of Information Technology Services was more vital than ever this year. The IT team implemented upgrades and improvements, including some planned changes, which significantly reduced our staff's risk of exposure to COVID-19. As a result, we could remain open and screening with appropriate safety measures in place.

Satellite reading workstations

We set up a satellite reading workstation at the BreastScreen Coordination Unit to allow radiologists from all services to read screens in an alternate place to a hospital location. This was for personal preference, or if COVID-19 restrictions limited access to a particular site.

We also had additional reading workstations set up in North Melbourne and Bendigo focusing on different uses and requirements for each site. At Bendigo, the set-up allowed more flexibility for radiologists to read in short bursts over the day. At North Melbourne, we improved access for Melbourne based radiologists to read for the Geelong service.

Virtual meetings and telehealth

We introduced online meetings at our assessment services, allowing our multi-disciplinary staff to attend remotely. As well as decreasing the COVID-19 exposure risk, this reduced the time taken travelling to and preparing for meetings.

To reduce numbers of people travelling to clinics, we used the existing Department of Health and Human Services telehealth system to deliver screening results to clients remotely. This has worked well for clients who would otherwise have had to attend their results appointments alone due to hospital restrictions.

Contact Centre

Our Contact Centre continued to provide vital telephone support to clients throughout COVID-19 restrictions. We tested and updated our phone systems, using the Enghouse platform to allow some of our agents to work from home. This created more space for physical distancing of staff who continued to work in our office in Carlton.

Microsoft implementations

Our Microsoft Teams implementation enabled BCU staff to transition to home-based work in just two days. We initially focused on employee engagement and communications through the meeting and chat functionalities. We identified a Teams champion in each unit to act as the first point of contact, establish a community of practice and share tips and ideas.

The next stage will be to implement Microsoft 365 for all users, including an upgrade to the electronic filing systems and processes.

IT service desk and site access

Our IT service desk transitioned from face-to-face to a phone and instant messaging support service. We assigned a lead contact point each day, allowing the team to work more productively with less interruptions.

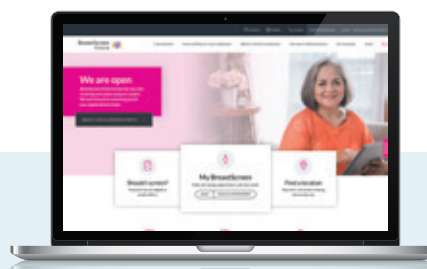
We refined our IT site visit planning process to include updated checklists with appropriate infection controls. This allowed our IT staff to safely carry out site-based work to support our services.

IMPROVING THE ONLINE EXPERIENCE

As part of our MyCare work, BreastScreen Victoria spoke with clients and staff to identify ways to improve the client experience, including enhancements to the online exchange of information, particularly the bookings process.

Clients told us they wanted a simpler and more streamlined online experience, with easy and efficient access to information and quicker online booking.

BreastScreen Victoria is working on improvements, which involves work to further develop our website



(breastscreen.org.au), enhance our online booking platform MyBreastScreen, and communicate what is available to staff and clients.

This year, stage one of the project began with improvements including simpler account creation and login on My BreastScreen, a feedback tab on every page of our website, strengthening our online security, and introducing digital consent for our client registration forms.

FUTURE READY

HEALTH MINISTER ANNOUNCES UPGRADE TO 3D MAMMOGRAPHY

In September 2019, Minister for Health Jenny Mikakos announced that BreastScreen Victoria would receive \$1.8 million for seven new digital breast tomosynthesis (3D) machines.

Once these tomosynthesis machines are rolled out, all of our assessment sites will have access to this improved imaging technology, which has been shown to provide more accurate cancer diagnosis and reduce the number of invasive procedures needed in assessment.

For clients who are called back for more tests, the assessment process can be stressful and time-consuming. By conducting a 3D mammogram as a first step in assessment, we can save some clients from having further tests, reducing the time they spend in the service and providing a better assessment experience overall.



Minister for Health Jenny Mikakos announces funding for tomosynthesis.



DEVELOPING OUR RADIOGRAPHER WORKFORCE

The Radiographer Training Centre (RTC) located at Moorabbin BreastScreen at the Holmesglen Institute, is integral to the professional development of BreastScreen radiography staff from across Victoria.

This year, a new contract was signed with D2L to move the MammographyOnline course to their learning management system, Brightspace, which provides an e-learning platform for educational institutions around the world.

The new platform will include a new look and structure for the course, as well as content updates and a revised assessment process in response to feedback from past participants and a formal evaluation of the course.

The Certificate of Clinical Proficiency in Mammography has been renamed the Certificate of Mammography Practice (CMP), to better align with other modality certifications awarded by the Australian Society of Medical Imaging and Radiation Therapy (ASMIRT).

Satisfactory completion of both the academic MammographyOnline course and clinical training component are required to be eligible to apply for the CMP from ASMIRT.

Unfortunately, the final group undertaking their clinical training had their visits cancelled due to the COVID-19 pandemic. The Stage 3 and 4 restrictions and physical isolating has limited ability to recommence the training currently.

The pause of breast screening due to COVID-19 in March allowed for the RTC team to do further work on the MammographyOnline enhancement project. Three RTC staff commenced certification courses in communication, design, and administration, which on completion will assist with administration of the course.

This year, RTC staff were also involved in the filming of a health promotional video about screening clients with a disability, and a seminar for radiographers at the Peter MacCallum Cancer Centre.

BEATING BREAST CANCER WITH ARTIFICIAL INTELLIGENCE

BreastScreen Victoria is part of a ground-breaking Australian study using artificial intelligence (AI) to help improve and transform breast screening, set to benefit thousands of Australians.

The \$2.26 million project aims to transform breast cancer screening in a way that improves detection, lowers harm, reduces cost, and causes less stress for clients undergoing a mammogram.

The project is led by St Vincent's Hospital Melbourne and St Vincent's Institute of Medical Research and supported by BreastScreen Victoria, with funding from the Commonwealth Government's Medical Research Future Fund.

The project includes a series of studies in which researchers will use an AI algorithm they have trained to detect breast cancer in mammographic images.

The algorithm will be tested alongside scans undertaken each day at St Vincent's Hospital, home to the state's largest BreastScreen Victoria clinic.

Project Lead Dr Helen Frazer, Clinical Director at St Vincent's BreastScreen, says the project could play a leading role in Australia's battle against breast cancer.

"While screening is very effective in reducing deaths, reading mammograms is challenging. More women are recalled to assessment after a mammogram than those who end up with an eventual cancer diagnosis.

"By using AI screening models alongside our existing practices, we hope to transform Australia's breast screening program and help reduce the number of lives lost to breast cancer."



St Vincent's BreastScreen Clinical Director Dr Helen Frazer.

LEADING-EDGE RESEARCH

As a publicly funded program, BreastScreen Victoria provides data to support research that improves both the delivery of our services and the health outcomes of our clients, and benefits the wider community. Any use of this data must protect the privacy and confidentiality of our clients.

Benefits of Screening

Using data from BreastScreen Victoria, a team at Royal Melbourne and Royal Women's Hospital Breast Service has investigated the treatment and outcomes for clients who had their cancer diagnosed through BreastScreen, compared to those whose cancer was detected outside the program¹.

The results showed that patients diagnosed through the BreastScreen program had cancers that were smaller, less likely to involve lymph nodes and of a lower grade; and received less-intense treatment than those who had never or not recently screened. These differences persisted even with potential over-diagnosis taken into account. A further study² on this data showed that breast cancers detected through BreastScreen were associated with lower out-of-pocket expenses for the individual as well as decreased government costs.

Research process review

We are reviewing and improving the management of our research projects so that we can continue to meet ethical and legislative requirements when using client data. This includes implementing a simple, web-based submission process, providing greater clarity for researchers on our processes, and more efficient management of our research projects.

- Treatment Intensity Differences After Early-Stage Breast Cancer (ESBC) Diagnosis Depending on Participation in a Screening Program.*
Ann Surg Oncol 2018 Sep;25(9):2563-2572.
Kenneth Elder, Carolyn Nickson, Melinda Pattanasri, Samuel Cooke, Dorothy Machalek, Allison Rose, Arlene Mou, John Paxton Collins, Allan Park, Richard De Boer, Claire Phillips, Vicki Pridmore, Helen Farrugia, G Bruce Mann.
- The financial impact of a breast cancer detected within and outside of screening: lessons from the Australian Lifepool cohort.*
Aust N Z J Public Health 2020 Jun;44(3):219-226.
Karinna Saxby, Carolyn Nickson, G Bruce Mann, Louiza Velentzis Hannah L Bromley, Pietro Procopio, Karen Canfell, Dennis Petrie.

OUR SERVICES

*“We strive for excellence.
We embrace quality improvement,
and we strive to continuously
improve both the client experience
and service efficiency.”*

BREASTSCREEN VICTORIA COORDINATION UNIT

The BreastScreen Coordination Unit (BCU) is the central hub for information, appointment services including our on-site Contact Centre, communications and recruitment, Mobile Screening Service coordination, Information Technology support, and service level monitoring to implement improvements in quality and capacity.

BCU works closely with our network of contracted providers to deliver high-quality services to clients at BreastScreen Victoria sites across the state. This includes 42 screening clinics and eight reading and assessment services.

BCU is home to the organisation's five central teams overseen by the Chief Executive's Office: Communications and Client Recruitment, Corporate Services, Information Technology Services, Operations and Quality, Accreditation and Research.

BUSHFIRE RELIEF DONATIONS

In January 2020, the state of Victoria suffered devastating bushfires. BreastScreen Victoria has services and staff across the state, including in areas affected by the bushfires.

BCU staff acknowledge the care and professionalism of BreastScreen staff in all of the fire affected areas. We wanted to offer support where we could so BreastScreen Victoria committed to match any monetary donations made by staff (across all our services) to the Government's Victorian Bushfire Appeal. The total amount donated by staff was \$3,068, which BreastScreen Victoria matched, bringing the overall total to \$6,136.

ADAPTING TO WORKING FROM HOME ARRANGEMENTS

Our staff demonstrated resilience and adaptability while adjusting to working from home arrangements. Staff worked quickly to set up workstations at home, adjust to new ways of interacting with colleagues and new applications. Microsoft Teams became the new normal for collaboration, file storage, and virtual meetings in a few short weeks. Our IT team met the challenge of supporting a newly remote team with changes to delivery of service desk support, additional cyber security measures to protect our IT network, and enabling the contact centre to work from home.

INNOVATION AWARD

The Innovation Award acknowledges BCU staff members who have contributed or provided an innovative idea, solution or improvement to current practices, which ultimately contributes to the success of the BreastScreen Victoria program.

Seven recipients received a BreastScreen Victoria Award for Innovation during 2019. We acknowledge and congratulate Contact Centre Manager Sharon Coles, Contact Centre Agent Gina Asdagi, Contracts Manager Melinda Goss, Project Manager Tori Cresswell, Information Managers Dwayne Richards and Juliet Anderson, and Senior Health Promotion Officer Lisa Joyce.

The Annual Innovation Award for 2019 was awarded to joint winners Senior Health Promotion Officer Lisa Joyce, Product Manager Dwayne Richards, and Information Manager Team Lead Juliet Anderson.

Throughout 2019, Lisa worked closely to partner with the Victorian Aboriginal Community Controlled Organisation (VACCHO) and eight Aboriginal Community Controlled Organisations across the state to improve the breast screening experience for the Aboriginal and Torres Strait Islander community. Juliet and Dwayne developed a new and efficient process that ensured the timing of clients returning to rescreen is better matched to clinic capacity, while remaining within NAS requirements.



2019 Annual Innovation Award Winners – Lisa Joyce, Juliet Anderson, Dwayne Richards.

Service Milestones

25 years: Darren Firth, *IT Operations Manager*

20 years: Maria Giampa, *Communications Assistant*; Zoran Kimov, *System Administrator*

10 Years: Doris Whitmore, *Director Operations*; Ireen Chand, *Service Desk Support Officer*; Patricia Thompson, *Contact Centre Agent*

Retirements: Vicki Pridmore, *Chief Executive Officer* – 12 years service; Lucy Marchesani, *Contact Centre Agent* – 26 years service

SCREENING, READING AND ASSESSMENT CENTRE BENDIGO

Established: 1995

Number of breast screens performed in 2019-20: 12,885

Proudly delivered by: Bendigo Health Care Group

Radiology providers: Bendigo Radiology, Echuca Regional Health, I-Med Radiology

Coverage: Screening centres are located at Bendigo, Echuca, and Mildura. The service hosts the Mobile Screening Service (MSS) every two years at Kerang, Swan Hill, Robinvale, Murray Valley Aboriginal Co-op, Mildura Co-op, and Heathcote.

Accreditation status: Four-year Accreditation with Commendation until March 2024

Clinical Director: Dr Jill Wilkie *BSc(Hons), MBBS, MRCP, FRCR*

Program Managers: Eliza Alford *BRad&MedImaging(Hons), MHlthSc*; Kathryn Carman *BAppSc(MedicalRad), CertIVT&A*

Service milestones

10 years: Kath Murley, *Nurse Counsellor*; Dr John Eng, *Radiologist*

HIGHLIGHTS

Bendigo BreastScreen, this year, continued our focus on high-quality service and continual quality improvements. A review of our quality projects and processes led to renewed enthusiasm and drive to complete projects and launch new ones, including an ongoing project to identify and engage under-screened groups within our region.

We continued to support the training of junior staff, including radiographers, medical students, and radiology registrars, in addition to providing educational activities for our core staff. The team enjoyed a team building and self-awareness day, during which we learnt about how to work best with different personality types, stress management strategies, and other wellbeing techniques.

COVID-19 led to widespread changes to workflow during the pause in services, and once client services resumed. Our staff are to be commended for embracing the changes and following all necessary advice during this time. We used the downtime to complete audits, quality projects and documentation updates.

Our long-running Telehealth project was, coincidentally, ready to launch just as Telehealth became common practice due to the pandemic. Following an initial trial, Telehealth will be routinely offered to clients who reside over 250 kilometres from Bendigo as an alternative to returning for assessment results. The new service will be an excellent alternative for clients from the Mildura screening site, 400 kilometres away, as well as several Mobile Screening Service sites.

STAFF

We said goodbye to two long-serving staff members: Kath Murley, Nurse Counsellor with service for 10 years, and Roslyn Fyffe, Administrative Officer with service for 14 years.

We also welcomed several new staff members and expanded some roles, all of which has contributed to the depth of experience within our team.



Clinical Director Dr Jill Reading.



Staff at the Bendigo clinic.



SCREENING, READING AND ASSESSMENT CENTRE GEELONG AND SOUTH WEST

Established: 1995

Number of breast screens performed in 2019-20: 16,517

Proudly delivered by: Lake Imaging

Radiology providers: Lake Imaging, Portland District Health

Coverage: Screening centres are located in Geelong, Warrnambool, and Portland

Accreditation status: Four-year accreditation until November 2021

Clinical Director: Dr Linda West *MBBS(Hons), FRACR*, Member Breast Interest Group, *RANZCR*

Program Managers: Nicola Turner *BSc(Hons) in Diagnostic Radiography, PGCert Mammography*



Geelong staff out the front of the Geelong clinic.

HIGHLIGHTS

We have had another successful year thanks to a dedicated leadership team supported by a cohesive and committed team of doctors, radiographers, nurses, data managers, and administrators.

Participation across the Geelong South West region is above the state average. The team demonstrates a continuing commitment to providing high-quality breast imaging and diagnostic services to the Geelong and South-West region.

We deliver our service with quality, care, and compassion, and a strong focus on service delivery and continuous quality improvement. We introduced a Quality Committee and an Accreditation Readiness Committee in January 2020, enabling our Leadership Team to establish a regular pattern of quality improvement across the service.

We had the pleasure of taking part in BreastScreen Victoria's LGBTI Inclusion Training, which was extremely well received by the Geelong Breast Clinic team. The session encourages self-reflection, particularly on our own attitudes and experiences, and was overall a fantastic learning opportunity.

We also had visits from the MyCare Project team, and Quality and the Health Promotion team during the year. These visits have proven over time to inspire us and enhance the important relationship between Regional Assessment Services and the Business Coordination Unit.

Meeting the increasing demand of the Geelong region and its growing population proved difficult, particularly towards the end of this financial year. The hiatus on screening due to COVID-19 has created a longer waiting list than we would have liked or could ever have planned for.

We have been working hard to provide a safe environment for all our clients, and staff, whilst trying to keep waiting times down. This has required a consistently flexible approach from the whole team. For example, we've increased the number of early morning sessions, and introduced an evening session each day.

Despite these challenges, the service continues to exceed its screening target and has done for the past seven years, highlighting the increasing demand and participation in the region.

In April, thanks to a monumental team effort lead by our talented Clinical Director Dr Linda West, Geelong Breast Clinic staff created an entertaining video about hand hygiene called 'Let's do the hand wash again', sung to the Rocky Horror theme song 'Time Warp'. There was lots of laughter, dancing, and of course, some dressing up. The team delivered an important message in a light, funny, positive way, and it kept morale amongst the staff high.

A big thank you to the Geelong Breast Clinic's and BCU's dedicated staff for all their efforts, during what has been, without doubt a challenging 12 months.



SCREENING, READING AND ASSESSMENT SERVICE GIPPSLAND

Established: 1993

Number of breast screens performed in 2019-20: 14,420

Proudly delivered by: Latrobe Regional Hospital

Radiology providers: I-Med Radiology, Central Gippsland Health, Bairnsdale Regional Health Service and Bass Coast Health

Coverage: Screening centres are located at Bairnsdale, Sale, Traralgon, Warragul, and Wonthaggi. The service hosts the Mobile Screening Service (MSS) every two years at Foster, Leongatha, Mallacoota, Omeo, Orbost, and Yarram.

Accreditation status: Four-year accreditation until November 2021

Clinical Director: David Chan, MBBS, FRACS

Program Managers: Julie Foat, MBA, BSc (HlthSc), GAICD, GradDipMgt, Cert IVT&A

Service milestones

25 years: Wendy Nieuwerth, *Senior Radiographer*; Angela McRae, *Acting Chief Radiographer*

10 years: Donna Bradley, *Senior Radiographer*; Joan Griffiths, *Nurse Counsellor*



Left to right: Acting Nurse Counsellor Coordinator Pauline Quinlan, Senior Radiographer Wendy Nieuwerth, Nurse Counsellor Joan Griffiths, and Nurse Counsellor Ges Hammer.

HIGHLIGHTS

This year has been a year like no other, with COVID-19 affecting all facets of our lives. Our Gippsland sites temporarily suspended service for seven weeks but were able to re-open sooner than originally expected.

Sincere thanks to everyone in the team for being so agile and flexible during uncertain times. We'd like to acknowledge our mammography team, who made themselves available despite the uncertainty and anxiety we were facing, so we could continue to provide our essential service to the Gippsland community. The team worked together extremely well under difficult circumstances to ensure minimal impact on our clients.

Seven rural and remote areas in our region hosted the Mobile Screening Service, screening 3,096 clients from July to December 2019, which exceeded our target. This fantastic result ensures those clients in more remote areas such as Mallacoota, Omeo, and Yarram, among others, are able to access our vital service.

In November 2019, we received news that our service was granted government funding to purchase a new mammography unit with 3D imaging capabilities. This cutting-edge technology will speed up diagnosis and cut down on invasive procedures for those clients who are called back to our assessment clinics for further tests. It also means clients receive an all clear result quicker. Roll-out is expected to be complete in the second half of 2020.

The funding also allowed our team to use our budgeted capital savings to purchase a second ultrasound unit for our assessment clinic, in turn increasing our clinic capacity. This will give more clients access to an assessment appointment sooner, and in turn, receive their results quicker. Importantly, this helps reduce the emotional impact during what can be an anxious time for many clients waiting for their results.

During 2019-20, Gippsland BreastScreen continued to record outstanding cancer detection results, above the state average. Our radiologist team from i-Med Radiology Gippsland are to be commended for this outcome, as it demonstrates the team's shared commitment in reducing breast cancer morbidity and mortality in the screened population of Gippsland.



Acting Chief Radiographer Angela McRae.



SCREENING, READING AND ASSESSMENT SERVICE GRAMPIANS

Established: 1994

Number of breast screens performed in 2019-20: 9,871

Proudly delivered by: Ballarat Health Services

Radiology providers: Ballarat Health Services, Wimmera Health Care Group

Coverage: Screening centres located at Ballarat and Horsham. The service hosts the Mobile Screening Service every two years at Birchip, Hamilton, Warracknabeal, St Arnaud, Nhill, and Maryborough

Accreditation status: 4-year accreditation until November 2023

Clinical Director: Dr Alicia Wang MBBS(Hons), FRANZCR

Program Managers: Kim Kyatt BAppSc(MedRad), Dip Breast Imaging (Ultrasound)

HIGHLIGHTS

The team at Grampians BreastScreen had a busy start to 2019-20 with an accreditation visit in August. Our staff rose to the challenge during the process, welcoming the accreditation team and providing insight into our client-focused and quality-driven service. We were thrilled to receive four-year accreditation from the National Quality Management Committee.

The year continued to set a busy pace across the service with increased targets.

The Mobile Screening Service's return visit to Maryborough was again extremely well supported by the local community with the screening target exceeded and positive feedback received about service delivery.

Heading into 2020, we could not have predicted the year that was to come. It has been a difficult time for many, and the Grampians team are to be commended on their approach to the COVID-19 situation and the ongoing care of our clients. The team worked through the hurdles and challenges of BreastScreen's temporary closure, and resumption, with a positive, can-do attitude, and always with the journey and experience of our clients at the forefront of service delivery.

Looking ahead, the Grampians team is looking forward to moving into more stable times in the future.



Nurse counsellors at the Grampians clinic.



Multicultural group booking at the Grampians clinic.



SCREENING, READING AND ASSESSMENT SERVICE MAROONDAH

Established: 1994

Number of breast screens performed in 2019-20: 29,824

Proudly delivered by: Eastern Health

Radiology providers: Eastern Health, I-Med Radiology and Northeast Health

Coverage: North East region of Victoria, including fixed sites in East Ringwood, Mont Albert, Boronia, Yarra Ranges, and Wangaratta. The service hosts the Mobile Screening Service every two years in Alexandra, Corryong, Mansfield, Mt Beauty, Tallangatta, and Yarrowonga.

Accreditation status: Accredited until May 2021

Clinical Director: Dr Darren Lockie
FRANZCR, MBBS

Program Managers: Ms Michelle Clemson
BAppSc



Designated Radiographer Janis Uhe, Program Manager Michelle Clemson, and Senior Data Clerk Vicki Weinert wearing masks gifted by a client.

Service milestones

20 years: Carolyn Molk,
Radiographer

10 years: Dr Kerry Whyte,
Radiologist; Fiona Wade, *Casual Radiographer*



Cheryl Mutimer and Jenelle Williams ready to screen in their pink PPE.

HIGHLIGHTS

It has been a challenging time during COVID-19, however, our wonderful staff have shown their agility to meet these challenges and achieved some important milestones during the year.

Maroondah BreastScreen was the host site for the first feasibility study on the outcomes of tomosynthesis screening in an Australian setting. In collaboration with the University of Sydney and BreastScreen Victoria, the results of this study were published in October 2019, and presented by Dr Darren Lockie at the European Congress of Radiology in July 2020.

Results showed an increase in breast cancer detection, recall to assessment, and screen reading time for tomosynthesis clients compared to standard 2D mammography. Our findings could form the basis of large scale comparative evaluation of tomosynthesis and standard 2D mammography for breast screening in Australia.

Our collaboration with the Commonwealth Scientific and Industrial Research Organisation (CSIRO) and the Universities of Melbourne and Sydney continues as this project focuses on the development of an alternative mammogram with the generation of breast images by the Australian Synchrotron located in Melbourne.

Dr Lockie received the Linda Williams Memorial Oncology Research and Innovation Grant from Eastern Health Foundation, Research, and Innovation Grants 2020 for the use of contrast enhanced mammography in a BreastScreen assessment clinic.

This year, Eastern Health and Maroondah BreastScreen collaborated with Turning Point, Monash University and VicHealth to help our clients better understand their breast cancer risk factors. Phase 1 of the Health4Her Project revealed that clients were largely unaware but receptive to receiving information about lifestyle risk factors at their appointments. Phase 2 will pilot how to effectively deliver information about these lifestyle risk factors in the BreastScreen setting.

BREAST CANCER AWARENESS MONTH

Maroondah BreastScreen coordinated several health promotion activities in the region this year, including a promotional stand at Maroondah Hospital and Maroondah BreastScreen program manager Michelle Clemson guest speaking at a Pink Stumps Day to over 200 women.

This year we've maintained our focus on unnecessary recalls to assessment. Maroondah BreastScreen continues to have the lowest recall rates in Victoria while maintaining our cancer detection rates.

SCREENING, READING AND ASSESSMENT SERVICE MONASH

Established: 1993

Number of breast screens performed in 2019-20: 48,122

Proudly delivered by: Monash Health

Radiology providers: Monash Health, I-Med Radiology, GIG Radiology, Capital Radiology

Coverage: Screening centres are located at Moorabbin, Waverley, Casey, Berwick, Dandenong, Frankston, and Rosebud.

Accreditation status: Four-year accreditation to February 2021 extended to 2022

Clinical Director: Dr Jill Evans
MBBS, FRANZCR

Program Managers: Janelle Finn
DipNurs, BNurs(Postreg), GDipBus



Monash staff wearing masks and social distancing.



Monash team together pre COVID-19.

Service milestones

40 years: Stewart Hart, *Founding Clinical Director/Breast Surgeon*

35 years: Deborah Summerbell, *Nurse Counsellor*

30 years: Jill Evans, *Clinical Director BreastScreen*; Liz Stewart, *Deputy Designated Radiographer*

25 years: Louise Mattman, *Screening Receptionist*; Rowena Hoffman, *Nurse Counsellor*; Jane Fox, *Director Breast Services*; Mark Cooper, *Radiologist*

15 years: Joanna Morgan, *Breast Surgeon*; Anita Lee, *Screening Receptionist*

10 years: Serina Tan, *Senior Tutor Radiographer*

HIGHLIGHTS

It's been a year we could not have predicted. Monash BreastScreen was on track to achieve its target in 2019-20 when COVID-19 forced the temporary suspension of our services.

Eleven members of staff, including radiography, nursing, data, and administrative staff members were reassigned to work at the Procurement Contact Centre COVID-19 State Supply Chain at Monash Health's site in Scoresby to support the state's response to the pandemic. One member of our team supported Monash's People and Culture team to identify Monash Health staff at greater risk of serious illness from COVID-19 and optimise their safety at work.

Our receptionist Radhika Khurana was one of our first employees to be reassigned to the State Supply Chain. Radhika also played a role in the development of the Monash Health Distribution Services Centre, which over the course of a few short weeks, became the epicentre for Personal Protective Equipment supply to the state's health services.

"In a time of such uncertainty, it was welcoming to be able to find meaningful work. I am proud to be working for an organisation that is fighting in the frontline of this situation and making an impact in the broader Victorian community," Radhika said. "Not only have I been able to stay employed, I have been able to broaden my skills and learn in real-time."

As part of Breast Cancer Awareness Month in October, BreastScreen Victoria worked in partnership with Monash Health to promote breast health and screening to Monash Health employees and volunteers. Following an extensive internal communications campaign a total of 49 people booked an appointment.

State Radiographer Sue Macaulay and Deputy Chief Radiographer Liz Stewart undertook a retrospective study to review Volpara image software compared with our current manual assessment. The software reviews and grades each image the radiographer takes to assess its quality, as part of our Perfect, Good, Moderate, and Inadequate (PGMI) system.

The study found the software has the potential to identify trends and issues in positioning, inform training needs, and influence the optimisation of compression applied by radiographers to potentially improve the experience for some clients.

Big thanks to all staff for their hard work, flexibility, and commitment during this challenging year.

SCREENING, READING AND ASSESSMENT SERVICE NORTH WESTERN

Established: 1992

(The Essendon Screening Centre opened in 1988 as a pilot site for the national evaluation of mammography screening.)

Number of breast screens performed in 2019-20: 38,492

Proudly delivered by: Melbourne Health

Radiology providers: Melbourne Health, I-Med Radiology, Western Health, Capital Radiology, Lake Imaging

Coverage: Screening centres are located at Broadmeadows, Essendon, Footscray, Melton, Parkville, Sunbury, Sunshine, and Werribee. The service hosts the Mobile Screening Service every two years at Broadford and Seymour.

Accreditation status: 4-year accreditation until 2024

Clinical Director: Dr Allison Rose

Program Managers: Victoria Cuevas
MBA, BSW, BA

Service milestones

Retirement: Judith Zuliani, *Nurse Counsellor*; Karen Brown, *Nurse*; Fran Mason, *Radiographer*; Hui Lee, *Radiographer*

Long standing staff members – Assessment Centre. A big thank you and wishing them all the best in their retirement

30 years: Dr Allison Rose, *Clinical Director*; Susy Alessandri, *Data Manager*

25 years: Bryan Mason, *Clerk*; Jenny Owen, *Radiographer*; Hui Lee Tay, *Radiographer*; Dr Wayne Lemish, *Radiologist*

20 years: Dr Arlene Mou, *Senior Radiologist*

10 years: Marleena LoPizzo, *Data Coordinator*; Olga Papazoglou, *Data Coordinator*; Olga Pozzobon, *Receptionist*; Dr Jenny Ellis, *Radiologist*

HIGHLIGHTS

It's been a challenging but ultimately rewarding year at North Western BreastScreen. Our staff have maintained a strong performance and high levels of service despite COVID-19 disruptions. This year, we achieved a four-year accreditation, with the service recognised for its commitment to the delivery of excellent patient care and multidisciplinary teamwork. Our successful integration with breast services at Royal Melbourne Hospital, Royal Women's Hospital, and Peter MacCallum Cancer Centre was also highlighted, providing for a seamless transition for clients diagnosed with breast cancer.

Following the installation of our new tomosynthesis machine in December 2018, we've been able to provide an improved experience for our clients. The machine can be used for screening and assessment imaging as well as stereotactic biopsy. This allows radiologists to look at breast tissue in layers and see lesions much more clearly. A feature of this new equipment favoured by clients is the curved screening paddles, which makes the mammogram experience more comfortable and manageable.

North Western BreastScreen has taken a central role in the MyCare Project on the improvement of physical amenities front, which aims to enhance the look and feel of BreastScreen clinics. We are limited in terms of space and funding, but found ways to make useful improvements.

Clients told us they would like to have access to different coffee and snacks, so we have now incorporated vending machines. We have introduced more plants, aromatherapy and reorganised the chairs so there's more privacy and open spaces.

Some people wanted a quiet room, so we've created a small waiting room with no music or television. The other regular feedback was from clients wanting to sit with their partners or husbands, so we introduced an area that is now a mixed-gender seating area to provide choice.

We also met with a design consultancy, and were presented with a couple of concepts in March to change the clinic amenities and ambience. This work is on hold due to COVID-19 and will be considered next year.



North Western staff celebrating Fran Mason and Karen Brown's retirement.



SCREENING, READING AND ASSESSMENT SERVICE ST VINCENT'S

Established: 1995

Number of breast screens performed in 2019-20: 45,888

Proudly delivered by: St Vincent's Hospital Melbourne

Radiology providers: St Vincent's Hospital Melbourne, I-Med Radiology, Northern Health, Austin Health, and Cabrini Health

Coverage: Screening centres are located at St Vincent's Melbourne, Rose Clinic David Jones Melbourne, Greensborough, Goulburn Valley, Camberwell, Epping, Heidelberg, and Elsternwick.

Accreditation status: Five-year accreditation until 2024

Clinical Director: Adjunct Associate Professor Helen Frazer *MBBS, FRACR, MEd*

Program Managers: Anne Barton *RN, BSc (HealthPromot), DipCounsell, MPH*

Service milestones

10 years: Leah Lynch Rurehe, *Lead Nurse*; Dr Helen Frazer, *Clinical Director*

HIGHLIGHTS

St Vincent's BreastScreen has achieved a remarkable amount of work in what has been an interesting and challenging year, assisting us to provide more efficient and improved client-centred care.

St Vincent's received five-year accreditation, and we were congratulated by the National Quality Management Committee for our excellent client care and overall performance in line with the National Accreditation Standards (NAS). The Committee praised St Vincent's BreastScreen for showing strong leadership and a visible culture of innovation, quality, and teamwork.

COVID-19 created an opportunity for change and innovation in the way we operate. These changes included virtual multidisciplinary meetings, Telehealth appointments for our results clients, virtual training for radiographers, and a digital library project.

We partnered with the BreastScreen Victoria Coordination Unit to deliver the first, consumer-focussed breast screening session for members of the lesbian, gay, bisexual, intersex, and trans and gender diverse community called Rainbow Rose.

We helped deliver a pilot program for The Beautiful Shawl Project, developed by Deakin University. Aboriginal women were provided a screening shawl featuring Aboriginal artwork to deliver a culturally safe breast screening experience.

We believe in a culture of continuous improvement and hold daily management meetings at the Quality Improvement Board to highlight the previous day's achievements and adherence to NAS, and to work through potential pressure points and issues. As a team, we build on St Vincent's BreastScreen values and select one to work towards for the week ahead.



St Vincent's staff ready to greet clients at the clinic wearing masks.

MOBILE SCREENING SERVICE

OUR MOBILE SCREENING SERVICE

Our crucial service reaches Victorians in every part of the state including regional and remote communities. The Mobile Screening Service visits locations on a two-yearly cycle, providing an opportunity for every eligible person to access free breast screening.

This year, our mobile screening vans visited 25 locations throughout the state, including Frankston, Foster, Hastings, Hamilton, Kerang, Leongatha, Mallacoota, Mansfield, Maryborough, Moe, Mornington, Omeo, Orbost, Port Phillip, and Swan Hill.

As part of The Beautiful Shawl Project, both vans visited Aboriginal Community Controlled Organisation (ACCO) sites to engage under-screened groups. These sites included, Dharwaud Wirrung, Gunditjmara, Kirrae, Ramahyuk, Rumbalara, Wathaurang, and Winda Marra

In 2019-20, the Mobile Screening Service screened a total of 8,695 clients.

Due to COVID-19, both vans were closed to screening for two months, from the end of March to early June 2020.

The Service Delivery team coordinates the MSS van's schedule, capacity, and operational requirements. The Service Delivery team is supported by Health Promotion Officers and the Communications Team who assist in promoting the van's upcoming visits. This is achieved by reaching out to community organisations, hosting presentations, providing local advertising, and social media targeting.



The MSS vans visiting St Kilda in Port Phillip (top) and Federation Square in Melbourne CBD (bottom).

RENOVATIONS

As our Mobile Screening Service vans Nina and Marjorie travel around the state all year, they get so many miles and so much foot traffic, that it was time they had a refurbishment. We worked with VMS (Vehicle Modification Specialists) in Geelong on Nina's upgrades over a period of nine weeks. Nina now has a refreshed colour scheme, a new automatic door, security system, wheelchair hoist, and updated heating and cooling systems.



MSS RADIOGRAPHERS

Joanne Ronald

Joanne has been working on the MSS vans since April 2018 and has expressed that working on the MSS has been a lovely change and is impressed with her colleagues' enthusiasm to keep improving the service to eligible Victorians. Joanne says it is very enjoyable to visit different country towns. "I am always greeted by smiling and friendly women who can never quite believe that two years since their last screen has passed already."

Joanne says, "A very clear explanation of the procedure is given to every client. If a client is apprehensive, I reassure them that they can tell me to stop. Sometimes a small adjustment can be made to make it more comfortable. Chatting during the procedure also helps them relax. Afterwards, most first timers will ask, 'Is that it?'"

Kyla Kyaw

Kyla started working on the MSS in 2020, but has previously worked at the Broadmeadows BreastScreen clinic for a few years. Kyla has always enjoyed providing a client care orientated service. Over the past few years working with BreastScreen Victoria, Kyla has learnt how rewarding it is to provide screening mammography.

Kyla notes, "It is very understandable that clients feel apprehensive for their first screening, so I always approach them in an informative, patient, and empathetic manner. I believe this approach has been working really well for my role as a radiographer."

SCREENING, READING AND ASSESSMENT LOCATIONS



The maps show the location of BreastScreen Victoria services throughout metropolitan Melbourne and regional Victoria.

-  SCREENING CLINIC
-  READING AND ASSESSMENT SERVICE
-  MOBILE SCREENING SERVICE
-  ABORIGINAL COOPERATIVE
-  PROJECT SITES
-  BreastScreen Coordination Unit (Carlton)

OUR TEAM

“BreastScreen Victoria continually reviews its governance and management structures to ensure they support best possible client outcomes, quality services and risk management.”

OUR MISSION, VISION AND VALUES

OUR PURPOSE

At BreastScreen Victoria we save lives by providing screening and being a trusted source of information on breast cancer. We will assist eligible Victorians to make informed decisions about their approach to the early detection of breast cancer. While BreastScreen Victoria is an inclusive program, we target our breast screening services to Victorian women aged 50-74.

OUR GOALS

Client Centric	Designing quality services with clients
Sustainability	Maintaining a sustainable future
Partnerships	Building partnerships to improve our service
Digital Focus	Utilising new technology and digital processes
Future Ready	Creating opportunities to advance our services

OUR VALUES

Client focus:

Women's health is our primary focus.

Quality:

We pursue excellence.

Partnerships:

We work with our partners to achieve our mission.

Flexibility:

We are innovative and creative.

Efficiency:

We make best use of resources.

BreastScreen Victoria is a fully accredited part of BreastScreen Australia, and is jointly funded by the Victorian and Commonwealth Governments.

BreastScreen Victoria comprises the Business Coordination Unit, Screening Service Providers, and Reading and Assessment Services.



Business Coordination Unit

The BreastScreen Coordination Unit (BCU) is the central hub for information, appointment services including our on-site Contact Centre, communications and recruitment, Mobile Screening Service coordination, Information Technology support, and service level monitoring to implement improvements in quality and capacity.

BCU works closely with our network of contracted providers to deliver high-quality services to clients at BreastScreen Victoria sites across the state. This includes 42 screening clinics and eight reading and assessment services.

BCU is home to the organisation's five central teams overseen by the Chief Executive's Office: Communications and Client Recruitment, Corporate Services, Information Technology Services, Operations and Quality, Accreditation and Research.



Screening Service Providers

With 42 permanent screening clinics across Victoria, 25 sites that are visited every two years by the MSS, and visits to Aboriginal Community Controlled Health Organisations, we strive for equality of access for all Victorian women.



Reading and Assessment Services

BreastScreen Victoria engages with eight screening, reading, and assessment services across Victoria. The services read images from multiple sites, including the MSS, and provide all clinical services from the initial breast screen to any further procedures required to the point of diagnosis.

BOARD OF MANAGEMENT

BreastScreen Victoria is governed by a Board of Management appointed by the Health Minister.



1. Wayne Tattersall

BCom, FCPA, MAICD

Chair

Meetings attended: 7/8

Wayne is a qualified CPA who has held numerous CFO and senior finance roles over an extended period of time. These roles have ranged from small to large businesses including a high-profile sporting organisation in Australia and international major events organiser. Wayne has significant expertise not only in finance but also IT and management of information systems. Being a strategic thinker, Wayne is well experienced in the development and implementation of strategic business plans.

2. Elleni Bereded-Samuel

MED, GradDip(Couns), GradCert (Mgt), BA

Meetings attended 7/8

Elleni focused her life's work on strengthening education, training, and employment for culturally and linguistically diverse communities in Australia. Elleni is the Executive Manager, Diversity and Capability Development for Australian Unity Independent and Assisted Living. Elleni's dynamic leadership has resulted in new solutions for the community to access and participate in society. Elleni has held health service board director positions at both Royal Women's Hospital and Western Health Hospital. Additionally, Elleni has experience as a Director of SBS, Australian Social Inclusion Board, and VMC Commissioner. In 2014, Elleni was named by Westpac AFR as one of Australia's 100 Women of Influence. Elleni was made a Member of the Order of Australia (AM) in the 2019 Australia Day Honors. Recently Elleni has been appointed as non-executive Director of the Royal Children Hospital.

3. Kerry Bradley

MBA, BBus(HAdmin), GradCert(Applied Risk Mgt), DipRiskMgt&BusContinuity, RN, FAICD, FGIA, FACN, FAAQHC, MRMIA

Meetings attended: 6/8 (resigned 22 June 2020)

Kerry has over 20 years' senior management/executive experience with strong clinical and quality backgrounds, working across the health sector in regulation, acute care (both public and private), rehabilitation, and aged care. She is highly skilled in leading and managing organisational change at both a strategic and at an operational level. Kerry is currently a member of VicHealth's Finance Audit and Risk Committee and a Ministerial appointed member to the Victorian Clinical Council. She has served as a board director for Baptistcare and Mercy Hospitals Inc and has held Ministerial board appointments to the Victorian Quality Council and the Victorian Cytology Service.

4. Debra Cerasa

MEdMgt&Ldr, BHScNsg, GradDipAdEd&Trg, GradDipBusMgt, RN, RM, CertICU, GAICD

Meetings attended 6/8

Debra Cerasa is a senior executive with leadership experience across a range of health, community, and peak organisations in both the public and not for profit sectors. Her leadership roles encompass metropolitan, rural, and international scope where her particular interest focuses on an innovative and transformational approach to implementing purposeful change. Debra's leadership roles hold firmly to a social justice agenda for enhancing community resilience. She is committed to the determinants of well-being that allow all people to be the best they can be, especially vulnerable and disadvantaged people. Debra is currently CEO of Jobs Australia.

5. Dr Vanda Fortunato

PhD, MA, BA

Meetings attended 8/8

Vanda Fortunato has spent the last 20 years in executive and strategic leadership roles in Australia and overseas, with significant experience in public health, primary care, not-for-profits, medical training, academia, pharmaceuticals, health insurance, and consulting. Vanda has been a CEO of two not-for-profits, and has held senior executive roles with Medibank, a clinical research organisation and Accenture. She has also worked for the World Bank and the Asian Development Bank.

6. Liz Kelly

BBus, GradDip(OrgPsych), Cert IV Workplace Training & Assessment, Accredited mediator, MAICD

Meetings attended 7/8

Liz is a Co-Director and Principal Consultant of a management consultancy firm that specialises in human resources, project, and financial management in the following areas: dispute assessment, investigation, and resolution; stakeholder engagement and cross-sector change management; training, coaching, and team development; corporate communication and community education; and policy analysis and lobbying. In a career spanning 30 years, she headed a department with 200 staff and a \$250 million operating budget, occupied board positions on non-government organisations, statutory authorities, and community associations. Liz has been the Deputy Chair of the Victorian Disability Advisory Council and a member of the Victorian Disability Services Board and the Disability Reference Group of VHREOC.



7. Jorden Lam

LLM, BCom, LLB, GradDipLP, GAICD

Meetings attended 5/8

Jorden is the General Counsel & General Manager of Commercial Affairs at HESTA Super Fund and serves on the board of Monash Health as a non-executive director. Prior to joining HESTA, Jorden practised as a commercial lawyer with several leading firms, advising corporations across a range of complex matters. She is experienced in the development and implementation of corporate governance frameworks and is passionate about achieving high standards of governance in organisations. Jorden was named a finalist in the Women in Financial Services Rising Star Award 2017, was a finalist in the Women in Finance Young Leader Award 2017 and was a recipient of the Australian Financial Review's Young Executive of the Year Award in 2015.

8. Dr Wayne Lemish

BSc(Hons), MBBS, FRANZCR, GAICD

Meetings attended 8/8

Wayne is an Australian trained radiologist with sub-specialty interest in breast imaging including mammography, digital breast tomosynthesis, breast ultrasound, and magnetic resonance imaging. He was the Director of Breast Imaging at Freemasons Day Centre in East Melbourne for 13 years, and is currently Director of Breast Imaging at East Melbourne Radiology. Wayne has more than 20 years' experience in screening for the early detection of breast cancer. He is a fellow of the Royal Australian and New Zealand College of Radiologists (RANZCR). He was an examiner for RANZCR and represented the college at Standards Australia for a number of years.

9. Sue Madden

FCPA, GAICD

Treasurer

Meetings attended 7/8

Sue is an experienced finance professional with expertise in driving change and process improvement. She is currently the Chief Financial Officer of the Bionics Institute. Recently Sue was the Finance Director of a medical device company across the ANZ region and was instrumental in transitioning the company from an agency agreement to operational in its own right. Prior to that Sue was the Commercial Manager at South East Water and CFO of its subsidiary commercial spin-off. Sue's career history spans experience across a diverse range of organisations, CFO and Company Secretary of a listed biotechnology company, the Finance Manager of a large not-for-profit organisation, and over 14 years' financial management experience within a multinational resources firm.

10. Terri Smith

BA (Pol & Soc), Post Grad Dip Comm Dev, M Sci (Mgt & Policy)

CEO

Meetings attended 2/2
(appointed 20 April 2020)

Terri Smith joined BreastScreen Victoria as Chief Executive Officer in April 2020, just as our service felt the initial impact of COVID-19. Terri brings substantial experience managing health promotion and clinical health services including her role as CEO at PANDA – Perinatal Anxiety & Depression Australia, Deputy CEO of Breast Cancer Network Australia and Director Client Services in a community health service. Terri is committed to ensuring the provision of high quality breast screening services which are actively informed by client experience. She is also committed to ensuring the community is aware of the importance of breast screening to reduce the impact of breast cancer and is passionate about ensuring our services reach our diverse community. Working in partnership comes naturally to Terri. She is keen to work with our established partners and make the most of new opportunities to spread awareness of the importance of regular breast screening to reduce the impact of breast cancer.

11. Tim Staker

DipEng(Biomed), MBA, GradDip(TechMgt), GAICD

Meetings attended 8/8

Tim has over 30 years' experience working with health devices and information technology, having held senior management roles within government and the private sector. For the past 18 years he has worked with Cabrini Health as a member of the Executive and has the role of Chief of Cabrini Technology, a group of not-for-profit businesses that manufacture, import, distribute, and support medical devices and technology used in health across Australia. Tim has consulted on many new hospital projects as a technical adviser to State health departments in Australia and to the Ministry of Health in New Zealand. For 12 consecutive years he served on the Queen Elizabeth Centre Board of Management in various roles including Vice President and Chair of the Quality and Risk Committee. Tim is also a non-executive Director of Biomedical Services NZ, a national New Zealand subsidiary of Cabrini Health.

12. Dr Elisabet Wreme

MSc, Prof Doctor in Bus Admin, GAICD

Meetings attended 8/8

Elisabet is an experienced senior executive with a passion for service and technology businesses in need of change, enabling them to successfully navigate through the growing pains that result from expansions and market disruptions. A highly professional leader with a genuine understanding of technology, Elisabet loves creating great customer experiences and strong business outcomes at the same time. She is an innovator with a patent to her name and is also a published author. Elisabet has broad experience across a range of strategic and operational roles, including senior roles with NAB and Telstra. Elisabet is currently also serving on the board of YMCA Victoria and she is the COO for Guild Group Holdings.

BOARD COMMITTEES

The Board of Management is advised by a number of standing committees, which assist the Board in its decision-making and provide expert advice on various issues. The Board of BreastScreen Victoria undertook a Board Effectiveness Review in late 2019 with a particular focus on the Committees of the Board. This resulted in the following Standing Committees with refreshed purpose.

Finance and Audit Standing Committee

The Finance and Audit Committee (FASC) monitors our financial position, and ensures risk is properly treated and monitored. The committee provides assurance and advice to the Board on our financial standing, including our progress on key performance indicators.

FASC is responsible for the development, review and recommendations of our Annual Budget, the Financial Risk Register, annual financial statements, any changes to resource allocation as well as financial policies and the management of an effective Audit Program. The members of the FASC are: Liz Kelly, Sue Madden (*Chair*), Tim Staker, Wayne Tattersall, Luke Neill (*ex-officio*), Terri Smith (*ex-officio*). The Technology Advisory Group (TAG) is an advisory group to FASC.

The group reviews technology related matters across our operations, marketing, communications, client experience, clinical outcomes, and efficiency. Its purpose is to advise and inform the Board or Board

Standing Committee in its decision-making about technology. The group considers how to mitigate any technological risks to BreastScreen Victoria, and reviews and reports on technologies that support best practice and improve breast screening services from both a national and international perspective.

The members of the TAG are: Debra Cerasa, Tim Staker (*Chair*), Elisabet Wreme, Georgina Marr (*ex-officio*), Terri Smith (*ex-officio*).

Governance Standing Committee

The Governance Standing Committee (GSC) supports the effective governance of BreastScreen Victoria through the development and review of effective and responsible processes for the Board and Board Committees. These processes support the Chair and Board to make informed decisions, and effectively steer BreastScreen Victoria. The committee advises the Chair and Board on effective Board operation, monitors Board membership and performance, as well as steering the Board's tone and culture.

GSC is also responsible for selecting BreastScreen Victoria's CEO, and establishing processes for monitoring and reviewing CEO performance.

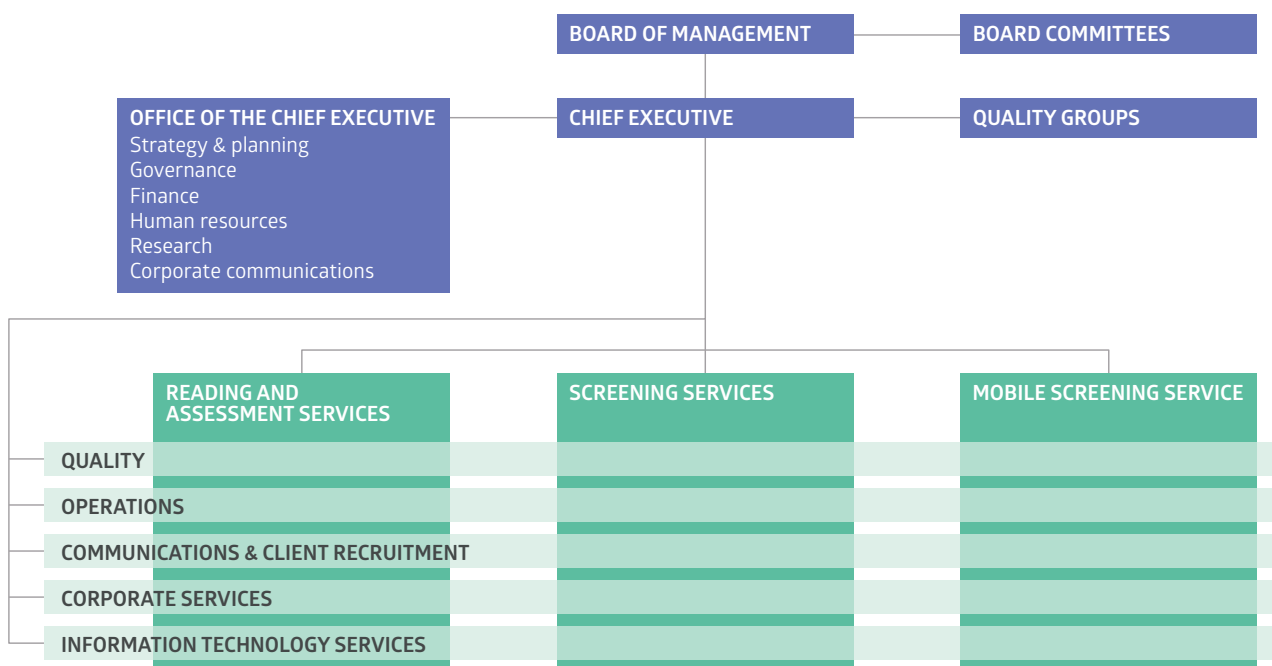
The members of the GSC are: Dr Vanda Fortunato, Jordan Lam (*Chair*), Wayne Tattersall, Dr Elisabet Wreme, Terri Smith (*ex-officio*).

Quality & Clinical Governance Standing Committee

The Quality & Clinical Governance Standing Committee (QCGSC) oversees and provides advice to the Board about the effective strategic direction of BreastScreen Victoria's quality and clinical governance. It also oversees performance monitoring and makes recommendations on controls and treatments for quality and clinical governance risks.

The members of the QCGSC are: Elleni Bereded-Samuel, Kerry Bradley (*Chair*), Dr Vanda Fortunato, Dr Wayne Lemish, Wayne Tattersall, Luke Neill (*ex-officio*), Terri Smith (*ex-officio*), Genevieve Webb (*ex-officio*).

Organisational structure



ORGANISATIONAL INFORMATION

Complaints

BreastScreen Victoria ensures that all complaints are managed in an effective, independent manner, and will at all times seek an outcome to a complaint that is satisfactory to all parties. The Complaints Management Policy was developed in accordance with *AS 10002-2006: Customer satisfaction – Guidelines for complaints handling in organisations*. All complaints are reviewed according to category and severity, and inform recommendations for quality improvement. Consumer complaints provide valuable information that is used to improve the safety and quality of our services.

Sustainability

BreastScreen Victoria's approach to environmental and corporate sustainability encompasses practices that are designed to meet the needs of our clients and stakeholders today, and to protect, support, and enhance the human and natural resources that will be needed in the future.

We are due to complete the last stage of the Electronic Records Management Project in December 2020. At the completion of the project, all BreastScreen services will move to a fully electronic client record, reducing BreastScreen Victoria's reliance on paper to deliver services.

BreastScreen Victoria continues the practice of producing all new publications on 100% recycled paper and producing electronic versions of resources for download from our website.

We have an energy efficiency program that has so far reduced electricity usage in our Coordination Offices by more than 25%.

Public Interest Disclosure

BreastScreen Victoria is committed to a culture of honest, just, and responsible behaviour, and strong corporate governance. In order to protect these ethics and values, we support the making of disclosures that reveal improper conduct of our Board members, directors or employees. *The Public Interest Disclosure Act 2012* (Vic) governs disclosure by an individual of improper conduct or detrimental action at BreastScreen Victoria.

For information on Public Interest Disclosures visit www.breastscreen.org.au/privacy/disclosure-statement/

Requesting access to clinical records

BreastScreen Victoria supports a client's right to access their clinical record through the contracted service providers in accordance with Victorian legislation. Records can be accessed under the provisions of the *Health Records Act 2001* (Vic). BreastScreen Victoria and contracted service providers are committed to timely response and release of records to the client.

For more information on how to request access to clinical records, or to raise a concern about accessing a record, please contact BreastScreen Victoria on (03) 9660 6888 or visit www.breastscreen.org.au/privacy/privacy-policy/

Privacy

BreastScreen Victoria is committed to protecting the privacy and confidentiality of clients participating in the program at all times. Only authorised people can access information collected by BreastScreen Victoria.

For more information on how BreastScreen Victoria collects, stores, and uses your information, you can view our Privacy Policy at www.breastscreen.org.au/privacy/privacy-policy/

DIVERSITY AND INCLUSION

Inclusion for the bi+ community

In March 2020, BreastScreen Victoria participated in the Bi5 Project, a partnership between Drummond Street Services, Bisexual Alliance Victoria, Melbourne Bisexual Network, and the Victorian Government. The Bi5 Audit Process is a community-driven effort to improve inclusion and equity for bisexual, pansexual, and other multi-gender attracted clients, staff, and stakeholders. BreastScreen Victoria received the highest possible rating of 'Beyond' indicating our organisation not only meets best practice but substantially exceeds it.

D&I Steering Committee

In April 2020, BreastScreen Victoria established its first Diversity and Inclusion Steering Committee responsible for developing an organisational Diversity and Inclusion Strategy.

LGBTI inclusion at our services

In May 2020, a working group involving Ashleigh Sternes (Diversity and Inclusion Project Manager), Anne Barton (Program Manager, St Vincent's Hospital), and Eliza Alford (Program Manager, Bendigo Health) was set up to advance LGBTI inclusion at our services. The group is currently working on developing a plan for services that will act as a roadmap to best practice in this area. We hope to extend this to all our services in future.

Gender affirmation guideline

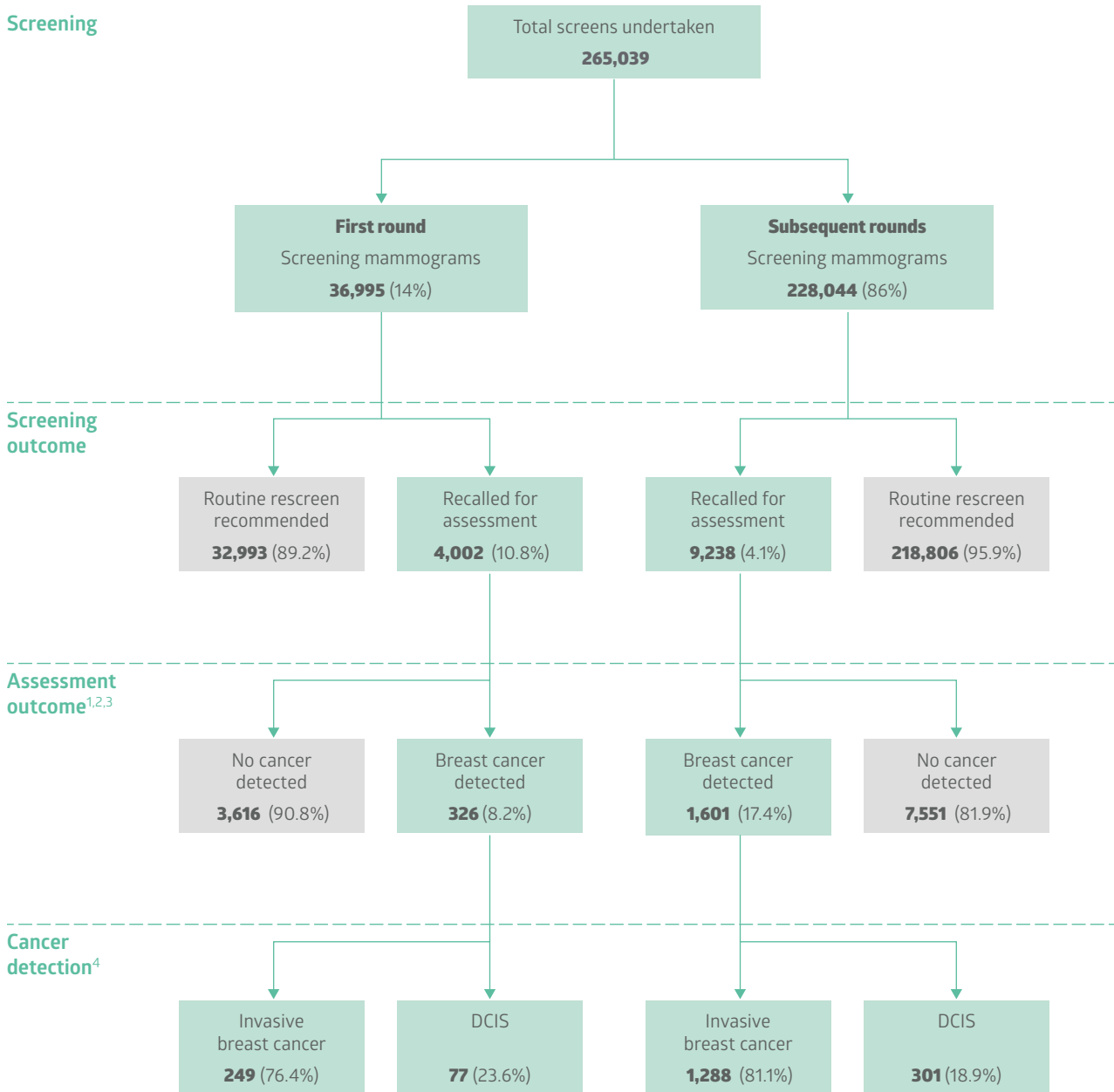
In December 2019, BreastScreen Victoria released its first Gender Affirmation Policy to support staff wishing to affirm their gender in the workplace. The policy outlines the process and support available to employees who are undergoing or planning a gender affirmation (sometimes called gender transition).

LGBTI inclusion at work training

Ashleigh Sternes, Diversity and Inclusion Project Manager, has provided LGBTI inclusion at work training across the BCU and our services. Sessions have taken place at the BCU in Carlton, and in our services at Geelong, North Western and St Vincent's.

SCREENING AND ASSESSMENT PATHWAY 2019 (CALENDAR YEAR)

Screening



1 Excludes clients who did not attend assessment.
 2 Percentages do not add to 100% due to the exclusion of clients who did not complete assessment and clients with incomplete assessment/histology data.
 3 At the time this report was finalised, 0.9% of clients assessed in 2019 were yet to complete their assessment experience.
 4 Excludes breast cancers diagnosed at early review more than six months after the screening mammogram and cancers diagnosed at early rescreen for clients who presented with a breast lump and/or clear or blood stained nipple discharge in the same breast in which the breast cancer was diagnosed.

Data for clients screened in 2019 is as it stood on 11 August 2020.
 Future requests for data and publications may not exactly correspond to the figures in this report as they will reflect subsequent additions to the dataset.

SCREENING AND ASSESSMENT SUMMARY, 2015–2019

	2015	2016	2017	2018	2019
SCREENING					
First round women	35,102 14.6%	31,566 12.8%	35,362 13.8%	32,433 12.3%	36,995 14.0%
Subsequent round women	205,868 85.4%	215,138 87.2%	220,007 86.2%	230,220 87.7%	228,044 86.0%
Total	240,970 100%	246,704 100%	255,369 100%	262,653 100%	265,039 100%

SCREENING OUTCOME

First round women					
Routine rescreen recommended	30,909 88.1%	28,108 89.0%	31,586 89.3%	29,136 89.8%	32,993 89.2%
Recalled for assessment	4,193 11.9%	3,458 11.0%	3,776 10.7%	3,297 10.2%	4,002 10.8%
Subsequent round women					
Routine rescreen recommended	197,408 95.9%	206,962 96.2%	211,679 96.2%	221,399 96.2%	218,806 95.9%
Recalled for assessment	8,460 4.1%	8,176 3.8%	8,328 3.8%	8,821 3.8%	9,238 4.1%

ASSESSMENT OUTCOME^{1,2,3}

First round women					
No cancer detected	3,846 92.3%	3,152 91.5%	3,374 89.4%	2,959 89.7%	3,616 90.8%
Breast cancer detected	293 7.0%	280 8.1%	357 9.5%	305 9.3%	326 8.2%
Subsequent round women					
No cancer detected	6,913 81.8%	6,637 81.3%	6,832 82.0%	7,141 81.0%	7,551 81.9%
Breast cancer detected	1,498 17.7%	1,494 18.3%	1,433 17.2%	1,627 18.4%	1,601 17.4%

CANCER DETECTION⁴

First round women					
Invasive breast cancer	217 74.1%	222 79.3%	270 75.8%	232 76.1%	249 76.4%
DCIS	76 25.9%	58 20.7%	86 24.2%	73 23.9%	77 23.6%
Subsequent round women					
Invasive breast cancer	1,194 80.0%	1,187 79.6%	1,163 81.4%	1,293 79.8%	1,288 81.1%
DCIS	298 20.0%	304 20.4%	266 18.6%	327 20.2%	301 18.9%

1 Excludes clients who did not attend assessment.

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THANKS AND FAREWELL TO VICKI PRIDMORE



This year we said goodbye to CEO, Vicki Pridmore, after 12 years at the helm of BreastScreen Victoria.

Through her steadfast and confident leadership, the organisation has evolved and expanded to provide more services, foster a culture of innovation, and become one of the country's most respected cancer screening programs.

Our work with diverse communities, our research profile and our move to a fully digital environment all evolved as a result of Vicki's vision to build a resilient, future-ready organisation.

"When I started at BreastScreen, I believed that focusing on reputation and relationships was the most important place to start, and everyone was receptive to that," Vicki recalls. "Fortunately, I had the full support of Government and the Board, and very clever staff who were committed to the organisation's health."

As for her achievements, the numbers speak for themselves and feature throughout this report.

During her tenure, the number of clients screened each year increased by almost 50%, from 186,085 to 275,000; we opened nine new fixed clinics; and all eight of our reading and assessment services are accredited.

Vicki counts the organisation's strides to improve screening rates in under-screened communities and change the narrative about breast health as some of her most significant accomplishments.

"I was committed to working with people from culturally and linguistically diverse communities, to make the service more accessible and targeted. That kind of collaboration also gave those clients an understanding of what we were trying to achieve, which they could then take back to their communities.

"It was a similar approach for our Rainbow Tick process, where we were looking at diversity in a different way."

BreastScreen Victoria was the first, and still the only, BreastScreen program in Australia to achieve Rainbow Tick accreditation, which recognises organisations that provide inclusive and progressive services for LGBTI people.

"I am very proud of that," Vicki says. "It was a seven-year commitment, from everyone, at the strategic plan level."

Increasing diversity within the organisation is something Vicki worked hard at too, believing diversity among staff brings diversity of perspective. She created a culture of critical thinking, encouraging staff at all levels of the organisation to share new ideas, question processes, and suggest improvements.

Vicki also capitalised on advances in screening imagery and IT infrastructure to both enable and drive improvements in screening, assessment, and records management.

"I was absolutely invested in taking the organisation from a hard copy environment to an online environment. It was huge commitment, but now if a woman moves, her information can move with her."

A passionate advocate for research, Vicki helped grow the number of research initiatives the organisation was involved in from 10 to 45 over her 12 year tenure.

One such project is Lifepool, a unique and powerful research cohort of around 60,000 clients who have been through the BreastScreen program. The data facilitates study into the treatment and early detection of breast cancer and can be used by researchers here and overseas.

"This is a huge bank of data, driven by the energy and commitment and intelligence of BreastScreen's clinical directors. It's manna for researchers, and I think that's brilliant."

Reflecting on her legacy, Vicki says it has always been a collaborative effort. "What I want is to have left the organisation stronger than when I arrived. I hope that I built in systems and processes and ways of operating that keeps things strong.

"But no CEO drives an organisation alone. That's true of all organisations, and it's incredibly true of my experience at BreastScreen."

We thank Vicki for her unwavering energy, vision, leadership, and commitment to cultivating a safe, diverse workplace that encourages innovation. We wish her all the very best in her retirement.



