

## Abstract Form

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**Title of abstract:** Thinking out loud: conversations, collaborations and informal systems reform to combat insufficient rural infrastructure.

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**Background:** Research in Brain Cancer (the sixth leading cancer in Australia) is hindered by a lack of available cancer tissue. To address this, Hunter Cancer Biobank (HCB) established the first rapid autopsy brain cancer biobank – with protocols specifically focused on preserving Glioblastoma (GBM) tissue. Unfortunately, limited resources in regional areas make equitable delivery of this program challenging.

**Aims:** To establish a rapid autopsy protocol that addresses the unmet need of the research community and is accessible to patients – irrespective of postcode. By nature, brain biobanking is challenging, with conflicting international best practice guidelines and unanswered questions relating to scientific, psychosocial and operational practices. Delivering a program that requires 24-hour communication in the context of a community without access to 24-hour health facilities is an intimidating challenge. Our goal was to build relationships with regional health services and circumvent the current system to demonstrate the potential for

success – collaboration in the face of resource scarcity and infrastructure insufficiency.

**Method:** Supporting the second largest Health District in NSW, HCB staff identified the key health professionals and services required to facilitate successful donation. Through effective communication and the appreciation of shared goals, a revised protocol was formed. Due to the limited nature of regional health infrastructure, informalities such as the exchange of personal contact numbers were agreed and numerous scenario dependent protocols were developed. Rather than a reliance on established systems, lateral thinking and contingency planning were used to circumvent insufficient after-hours services. Planning and preparation was essential to ensure all legal and medical requirements were met without a resultant delay.

**Results:** Despite death occurring 40 minutes from a regional center and 5 hours from HCB, the team facilitated their first regional donation within a baseline requirement of 12 hours for optimal tissue preservation, fulfilling the wishes of the patient and family.

**Implications that impact on your project:** There are numerous challenges when delivering health and research services in rural communities. Our protocol demonstrates the ability of teams to operate demanding research services and deliver complex protocols within this context, provided high-level planning, communication and collaboration underpin all processes.