





# STRATEGIC PROGRAM PLAN 2021-24 OVERVIEW



## THE VCCC ALLIANCE

The VCCC Alliance is a multi-site, joint venture partnership between 10 leading medical research, academic and clinical institutions with a shared goal of improving outcomes for Victorians affected by cancer.

#### Vision of the VCCC Alliance

The vision is to save lives through the integration of cancer research, education and patient care. Through innovation and collaboration, the VCCC Alliance will drive the next generation of improvements in prevention, detection and cancer treatment.

#### For all Victorians

From August 2021, the Victorian Comprehensive Cancer Centre (Joint Venture) will be known as the VCCC Alliance. This creates a distinction between the VCCC Alliance and the Victorian Comprehensive Cancer Centre building in Parkville. It reflects the growth and maturation of the VCCC Alliance and its expanding role in improving outcomes for all people affected by cancer, no matter where they live in Victoria and beyond.



Supported by



VCCC Alliance members





















## PRFFACE

Better identification, treatment and management of cancer in Victoria has resulted in vast improvements in overall cancer survival. The latest five year survival rates are 69 per cent for 2013-18. New technologies, discoveries and better evidence-based care are extending lives and improving quality of life for people living with, and beyond, cancer.

Despite these advances, cancer remains a major health problem and the disparities are widening. Cancer type, where a person lives, their cultural identity and their socio-economic status are key determinants of outcomes.

Supported by a \$27 million investment from the Victorian Government in the 2020 State Budget, the VCCC Alliance Strategic Program Plan 2021-24, sets out a roadmap of integrated, innovative and ambitious programs that tackle the complexities of this challenge.

To craft an effective and achievable response, the VCCC Alliance has drawn upon the collective knowledge, know-how and resources of its members and networks. Designed to support delivery of the State Government's Victorian Cancer Plan 2020-24, the result is a comprehensive plan that capitalises on foundations built by previous programs and initiatives. Guided by expert steering committees, this new plan will deliver meaningful gains and progress towards the overarching purpose of the VCCC Alliance – to improve outcomes for Victorians affected by cancer.



## **FOREWORD**

## from Chair, Cancer Consumer Advisory Committee

The VCCC Alliance Strategic Program Plan 2021-24 has been specifically and purposefully developed and designed in partnership with consumers.

This means we started by asking why this work is important for patients, consumers and community. Putting that question first makes a real difference to the prioritisation of work and the nature of the programs being developed. It means the direction stays focused on patient benefit.

In developing this Strategic Program Plan, 19 consumers have worked as members of working groups and steering committees with clinicians, researchers, allied health professionals and other experts in a mutually supportive and respectful way, keeping the concept of patient centredness at the heart of the discussions and decision making.

This ensures that the lived experience of cancer has been integrated into this plan from its inception and will continue to its final delivery. I believe that this will greatly enhance its relevance and capacity to bring about meaningful, lasting improvements and extend benefits to many more people affected by cancer.

## System-changing approach

There is the potential for the VCCC Alliance to contribute to larger system changes required to improve equity for patients and for them to access the right therapies, in the right place at the right time. By increasing the impact of data-driven, patient outcome-focused research to overcome barriers, the benefits will be felt by more Victorians, including Indigenous Victorians, who still have much worse cancer outcomes than the rest of the population.

Consumers know from experience that access to treatment can depend on where you live. In this plan we have sought to reduce disparity for rural and regional patients so that they may have equity of access to research-informed treatment.

This plan emphasises building diversity of leadership across the cancer sector through an equitable leadership program that will further empower and upskill consumers, clinicians and researchers. Working together to effectively participate and embed best practice consumer involvement in research, education and clinical care initiatives will foster an inclusive culture that recognises current and emerging leaders across disciplines.

Recently the term 'value-based health care' has been posed as a potential new funding model of care. It is critical that value-based health care is defined from the patient/ consumer perspective. This approach will require consumers to lead some research around defining value from a patient perspective which goes beyond satisfaction surveys to capture the important elements of what is of value from a patient perspective based on experience and knowledge.

## Collective impact

The process of developing this plan has been highly successful. Consumers have played a pivotal role and we feel an affinity for, and even ownership of this plan and its potential and now look forward to supporting its implementation.

From the outset the Victorian Government has been very supportive of the VCCC Alliance and the importance of the role of consumers in achieving its ambitious agenda, and we thank them for the \$27 million invested in this plan. I think we can all see that the strength of the collective resources, expertise and capability of the Alliance members including the consumers, should ultimately improve the quality of cancer care and patient outcomes.

The VCCC Alliance Strategic Program Plan 2021-24 is a research-informed roadmap to significant quality and safety improvements in cancer care for all Victorians and on behalf of the VCCC Alliance Cancer Consumer Advisory Committee, I commend it to you.



Ms Sophy Athan

## INTRODUCTION

### from the Executive Director, VCCC Alliance

The mission of the VCCC Alliance is to harness the capabilities of our members to position Victoria as a trailblazer in research-led, consumer-engaged, cancer education, prevention, detection, treatment and care.

As we launch this major new Strategic Program Plan, I have been reflecting on progress we have made and the direction we are headed. I have contemplated if we really are blazing a trail and finding ways for this alliance of exceptional institutions to be greater than the sum of its parts.

Over the past few years, we have made real headway in reducing various barriers to accelerate translation of research to improve outcomes for people affected by cancer.

In 2019 an independent external review panel found that the VCCC had made 'exceptional headway' and has the 'potential to become one of the leading cancer systems in the world': independent opinion that we are, indeed, blazing a trail.

And I believe the most exciting times are very much still ahead of us.

The creation of this Strategic Program Plan 2021–24 is testament to the progress we have made and underscores the fundamental need for an alliance like ours. This is an undertaking that proactively fills gaps and addresses unmet needs to overcome complex challenges that could not be achieved by an individual organisation alone and could not be done without the inclusion of patient voices.

Hundreds of experts have actively contributed to shaping and forming this new plan. They have come together with shared agenda, bringing leadership, expertise, knowledge and determination to make things better. Through debates, consultations, brainstorming and discussions, these experts – including consumers - have distilled and prioritised the needs, ideas and opportunities that – within the constraints of budget – will help us to further improve the exceptional cancer care for which this state is renowned.

The Victorian Government has backed this alliance from the outset, believing that the collective resources, expertise and capability of its members and the philosophy of collaboration, had the potential to produce significant gains and to impact critical measures such as access to clinical trials, survivorship and life expectancy for people affected by cancer.

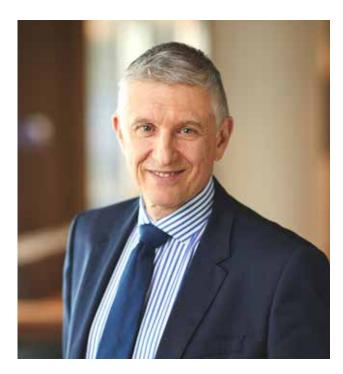
The \$27m investment that the Victorian Government committed to this new plan in the 2020 State Budget will enable a consolidation and amplification of the achievements to date. It will also support new endeavours into highly promising areas such as value-based care, a new drug formulary and the extension of personalised medicine and immunotherapy to benefit more Victorians.

Importantly, this plan sets the agenda for the VCCC Alliance to focus its sights on disparities in cancer outcomes, a major issue for the cancer sector and the community as a whole.

Two years ago, we committed to a long-term strategy for the VCCC Alliance that is underpinned by values of 'patient-centred, bold, for all and better together' and I believe this plan holds true to those.

#### Return on investment

I would personally like to thank everyone who has contributed to the development of this plan, the Board of the VCCC Alliance for their support, and the Victorian Government for their commitment to our shared vision. Despite a COVID-interrupted gestation, the commitment to the goals, objectives and underlying vision of our strategy was unwavering. The result is a comprehensive, creative and exciting plan that will deliver a return on investment that brings us ever closer to our goal of better outcomes for patients with cancer in Victoria and beyond.



Professor Grant McArthur

## THE VCCC ALLIANCE STRATEGY

#### Overcoming cancer together

The overarching strategy for the VCCC Alliance guides and informs priorities, directions and how we will work to improve outcomes for people with cancer. The new VCCC Alliance Strategic Program Plan 2021-24 aligns closely with this strategy, as well as the Victorian Cancer Plan 2020-24.

**BOLD** 

FOR ALL

BETTERTOCKTHER

ENTRED



Overcoming cancer together

#### **VISION**

To save lives through the integration of cancer research, education and patient care. Through innovation and collaboration, the VCCC Alliance will drive the next generation of improvements in prevention, detection and cancer treatment.

#### **ASPIRATION**

Our alliance will become a global leader in the transformation of cancer outcomes.

#### **MISSION**

Harness the capabilities of our partners to position Victoria as a trailblazer in research-led, consumer-engaged, cancer education, prevention, detection, treatment and care.

# PROACH

#### **MOBILISE**

Mobilise and extend the collective and diverse strengths of VCCC Alliance members

#### **ADVOCATE**

Advocate for practice and policy improvements

#### TRANSLATE

Be a cutting-edge platform for translating new evidence into practice

# OALS

## DISCOVERY Drive the next

Drive the next generation of discoveries that address critical cancer challenges, through collaboration

- 1 Link clinical, biological, genomic and patient experience data to enable discoveries
- 2 Drive the translation of cancer biology to 21st century personalised cancer care, prioritising new technologies and low survival cancers
- 3 Accelerate the development of novel therapies

#### ACCELERATION

Accelerate the implementation of evidence and value-based cancer care into routine practice

- 4 Drive an innovative, high-performance clinical trial sector through capacity building
- 5 Implement data-driven value-based cancer services
- 6 Extend a distributed model of leadership to drive impact on patient outcomes

#### EQUITY

Pursue equity in access of cancer care and outcomes for all Victorians affected by cancer

- 7 Fast track innovations in regions with poorest cancer outcomes
- 8 Build on initiatives to meet the needs of vulnerable groups

#### LEAD

Foster an outstanding cancer workforce to help maintain and enhance world leading patient outcomes

- 9 Develop leadership skills and empowerment of researchers, clinicians and consumers
- 10 Build a statewide oncology learning hub leveraging Victoria's content and knowledge translation expertise

Catalyse innovative concept generation to grow research quality and impact

Extend a distributed model of leadership to drive impact on patient outcomes

Embed the lived experience of cancer into research and its translation

Transform educational programs into digital platforms

#### **FOUNDATION ELEMENTS**

## STRATEGIC PROGRAMS

This Strategic Program Plan sets out to achieve the VCCC Alliance's four strategic goals and support delivery of the Victorian Cancer Plan 2020-24.

Ten strategic, integrated programs have been designed by the expert steering groups, set against clear rationales with milestones and program indicators to measure and evaluate success.

Some programs are new and others build or expand on previous work undertaken as part of the VCCC Strategic Research Plan 2017-20.

The solutions outlined in the plan employ a collective impact approach, leveraging the unique role the VCCC Alliance plays in the cancer health care and medical research eco-system to help overcome longstanding barriers and deliver system-level reforms.

Through this Strategic Program Plan 2021-24, the VCCC Alliance is driving the transformative change that will result in a measurable shift and improvement to the real human cost of this disease.

## **GOAL I:** Drive the next generation of discoveries to address critical cancer challenges through collaboration.

- 1. Link clinical, biological, genomic and patient experience data to enable discoveries
- 2. Drive the translation of cancer biology to 21st century personalised cancer care, prioritising new technologies and low survival cancers
- 3. Accelerate the development of novel therapies.

# **GOAL II:** Accelerate the implementation of evidence and value-based cancer care into routine practice.

- 4. Drive an innovative, high-performance clinical trial sector through capacity building
- 5. Implement data-driven value-based cancer services
- 6. Extend a distributed model of leadership to drive impact on patient outcomes.

## **GOAL III:** Pursue equity of access to cancer care and outcomes for all Victorians affected by cancer.

- 7. Fast track innovations in regions with poorest cancer outcomes
- 8. Build on initiatives to meet the needs of vulnerable groups.

# **GOAL IV:** Foster an outstanding cancer workforce to help maintain and enhance world leading patient outcomes.

- 9. Develop leadership skills and empowerment of researchers, clinicians and consumers
- 10. Build a statewide oncology learning hub leveraging Victoria's content and knowledge-translation expertise.

Extent to which VCCC Alliance programs build on previous Strategic Research Plan programs

VCCC Alliance Program	1	2	3	4	5	6	7	8	9	10
Extent to which the programs build on SRP 2017–20 programs	7	1	4	4	3	<b>+</b>	4	*	1	1

build	Program builds substantially on an SRP 2017–20 program
expand	Program builds substantially on an SRP 2017–20 program plus includes some completely new topics/areas
new	New program

APPROACH	COLLABORATIVE, INTEGR	RATED, COMPREHENSIVE	CONSUMER	CONSUMERS INCLUDED		
BENEFITS SOUGHT	Improved patient outcomes			✓ More equitable care		
PERFORMANCE DOMAINS*	Increased one-year survival in three poor outcome cancers  New commercial agreements			New therapeutic optio	ns tested Increased access	
RESPONSE (Goals)		DISCOVERY at generation of discoveries accer challenges, through co			ACCELERA the implement sed cancer care	
SOLUTION (Programs)	Link clinical, biological, genomic and patient experience data to enable discoveries	Drive the translation of cancer biology to 21st century personalised cancer care	Accelerate the development of novel therapies	Drive an innovative, high-performance clinical trial sector through capacity building	Implement da value-based service	
KEY ELEMENTS	> Enable linkage of large-scale primary care and acute services data to facilitate comprehensive analyses of health service utilisation > Enhance/create systems and processes for accessible, streamlined, costeffective, ethical linked data for research > Build a central hub to teach and support project design and build capacity > Explore opportunities for linkage/inclusion/analysis of additional data types e.g Genomic, biological, imaging or patient-reported outcomes	> A comprehensive toolbox for clinicians to ensure the right patient receives the right treatment at the right time > Build a collaboration springboard to support multidisciplinary connections critical to effective research translation > Translational Research Hub to support and coordinate immunotherapy research and link to clinical trials > Agile approach to patient access to current and emerging molecular tests	<ul> <li>New VCCC Alliance drug formulary to expedite access to drugs for research and clinical trials</li> <li>Clinical Trialist Development Hub to support the development of novel trial designs and a new generation of clinical trial investigators</li> <li>Build networks and further develop the Phase I trial database and referral processes for optimised use across Victoria</li> <li>Upskilling of clinicians and scientists to ensure a clear pathway for scientific discoveries to reach the clinic</li> </ul>	> Expand application of registry trials to boost clinical trial participation rates > Undertake consumerled initiatives to reduce barriers to clinical trial participation > Enhance workforce capability including facilitating mentoring programs and supporting new trial groups > Enhance business capability and sustainability of clinical trial units to drive efficiencies	> Design and uproof-of-con that focus or the following areas: - timely and diagnosis - avoidable re-admissi - statewide to specialise radiothera technolog - genomics-systemic of treatment - value-base initiatives linked data with patie reported or	
PROGRAM BENEFIT (Business Plan)	New knowledge about cancer that enables discoveries, commercialisation, and can influence policy and practice to lead to improvements in healthcare outcomes	More patients have access to personalised treatment that provides the best chance of a good outcome	More patients can access the right therapies in the right place at the right time	More Victorian patients participate in clinical trials	An efficient he system where healthcare pro rewarded for h patients impro health and live lives in an evid based way	
TARGET OUTCOME	50% growth in data- driven cancer research projects	40% increase in number of patients accessing molecular &/or immunological tests	16% increase in therapies assessed on early phase clinical trials	<ul> <li>Increase participation in Vic treatment intervention trials by 5% by 2024</li> <li>15% cancer patients across VCCC Alliance member sites enrolled on a clinical trial by 2026</li> </ul>	Four models of based care test	

			Strategio	c program pian 20	21-24 at a glance
	Y ALIGNED TO ANCER PLAN	SYSTEN	л WIDE	INNO	/ATIVE
			✓ Thriving biomedical	industry	
to palliativ	, ,	nosis methods tested	Increased ု	Increased number of participation in clinical trials	of phase one clinical trials in rural & regional areas
TION ation of evi			JITY ess of cancer care and ians affected by cancer	LEADE Foster an outstanding c maintain and enhance worl	ancer workforce to help
ta-driven cancer	Extend a distributed model of leadership to drive impact on patient outcomes	Fast track innovations in regions with poorest cancer outcomes	Build on initiatives to meet the needs of vulnerable groups	Develop leadership skills and empowerment of researchers, clinicians and consumers	Build a digital oncology learning hub leveraging Victoria's content and knowledge translation expertise
indertake cept tests is some of g priority efficient ons access sed py es informed ancer sed care through in enriched intucomes	<ul> <li>Identify key clinical challenges to positively change practice</li> <li>Support uptake of research into practice to improve clinical decision making</li> <li>Share ideas, knowledge and information to enhance translation of evidence into practice</li> <li>Enable collaborative research and education activities within tumour streams and across cross-cutting themes</li> <li>Apply collective leadership to prioritised clinical challenges</li> <li>Assess translational potential of new practices and advocate for implementation in the health system</li> </ul>	> VCCC Alliance Teletrials Implementation Project:	> Establish a VCCC Alliance Equity Advisory Group to develop an equity framework and guide action to address inequities > Contribute to improving cancer outcomes with Aboriginal and Torres Strait Islander communities > Appoint Aboriginal and Torres Strait Islander Research & Education Lead > Implement work to improve cancer outcomes among culturally and linguistically diverse communities	> Statewide educational programming in leadership, teaching and collaborative teamwork for clinicians, researchers, educators and consumers > Build capacity and capability in consumer-researcher collaboration > Expand the Nurse-led Research Hub to diversify and strengthen research > Establish pilot model for a cancer leadership academy	<ul> <li>&gt; Develop and deliver digitally enhanced education and training programs – VCCC Alliance Digital Oncology Learning Hub</li> <li>&gt; Facilitate practice change initiatives through educational interventions</li> <li>&gt; Develop microcredentialling from Master of Cancer Sciences content</li> <li>&gt; Develop education resources to support knowledge and initiatives emerging from the Research and Education Lead program</li> </ul>
viders are elping ve their healthier ence-	More rapid adoption of research evidence into routine, real-world practice	Improved access to clinical trials for people living in rural and regional areas	Overcoming disparities in cancer related health research and care will contribute to reducing inequities in cancer outcomes for vulnerable populations	A highly skilled and diverse Victorian cancer workforce informed by consumer consultation	Improve patient outcomes by ensuring health care professionals are abreast of evidence based advances in patient care and discontinue use of lower benefit interventions
value ed	Improved survival in three poor outcome cancers (pancreatic, lung & brain)	23% increase in rural & regional cancer patients enrolled in a clinical trial	All tumour streams & VCCC Alliance partnered regional oncology centres have initiatives for vulnerable groups	>83 consumers/ nurses/allied health professionals complete leadership programs	23,400 participants accessed a high quality VCCC Alliance education program



Link clinical, biological, genomic and patient experience data to enable discoveries

Cancer and other healthcare services are delivered in various locations and settings, with different funding arrangements and utilising inconsistent data which vary in type, quality and utility.

Data linkage allows us to bring these data sources together and build a more complete picture of how and where patients access care, how they're being diagnosed and their quality of life after treatment.

By analysing the entire continuum of care, researchers can better understand how services should be integrated, where care delivery is most effective and how to achieve the best outcomes for both patients and health service providers.

Beyond complexities in healthcare service delivery, linkage of and access to health-related data is a relatively new domain, typically associated with high costs, prolonged governance approvals and lengthy delays for access. It is widely recognised that there is a need for infrastructure that minimises costs and improves timely access to ethically-appropriate, de-identified data to expedite research.



#### Program goal

Expand a data-rich discovery platform that will enable more rapid translation of the latest advances in cancer research through increasing the amount, quality and impact of data-driven, patient-outcomes-focused research.

#### Program benefit

New knowledge about cancer that enables discoveries and commercialisation, and can influence policy and practice to lead to improvements in healthcare outcomes.

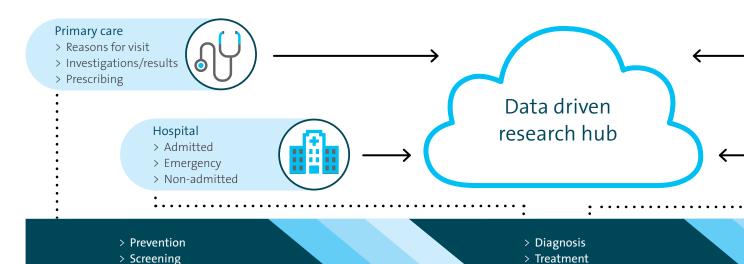
#### Target outcome

Fifty per cent growth in data-driven cancer research projects by June 2024.

> Unplanned visits

> Funding/costing

#### Data Hub overview



> Early detection

> Risk stratification

It is widely recognised that the disjointed nature of healthcare services impacts patient care delivery and outcomes.

The goal of this program is to expand a data-rich discovery platform that will enable more rapid translation of the latest advances in cancer research through increasing the amount, quality and impact of data-driven, patient outcomesfocused research.

It will draw upon the depth and breadth of VCCC Alliance membership to assess current gaps in available data, infrastructure, and expertise. The platform will:

- > Provide timely, low-cost access to ethically appropriate linked data collected from across the continuum of care such as GPs and hospital services, to allow for analyses of how patients move between services and how this affects outcomes
- > Provide guidance to researchers, including clinicians, data scientists, health informaticians, consumers and others on both the capabilities of linked data, and the methods for using it for research and service improvement.

#### Key activities

- > Enable the linkage of large-scale primary care and acute services data to facilitate comprehensive analyses of health service utilisation
- > Enhance and create systems and processes for accessible, streamlined, cost-effective and ethical linked data for research
- > Build a central hub to teach and support project design and build capacity
- > Explore opportunities for the linkage, inclusion, and analysis of new and expanding data types such as genomic, biological, imaging or patient-reported outcomes.

"By linking data that better reflects how patients experience care between different services, we can advocate for system-wide innovation and integration, reducing duplication of efforts and delivering care when and where it is needed most." Professor Jon Emery, Co-Chair

#### Co-Chairs

Professor Jon Emery, Herman Professor of Primary Care Cancer Research, University of Melbourne, VCCC Alliance Primary Care Research and Education Lead.

Dr Anna Collins, St Vincent's Hospital; Faculty of Medicine, Dentistry and Health Sciences, University of Melbourne.

Dr Belinda Lee, Medical Oncologist and Clinical Researcher, Walter and Eliza Hall Institute of Medical Research.

## Program 1 Steering Group membership

Peter Mac	1
Austin/ONJCRI	1
RMH	1
UoM	3
Western Health	1
SVH/SVI	1
Consumer	2
Other institution	4



#### Clinical registries

- > Clinical/treatment
- > Follow up
- > Outcomes



#### Population registries

- > Date of diagnosis
- > Mortality/outcomes
- > Population coverage
  - > Survivorship planning
  - > Follow-up
  - > Shared care
  - > Palliative care



Drive the translation of cancer biology to 21st century personalised cancer care

Cancer begins in the body when changes to the DNA and other molecules cause cells to grow out of control and the immune system doesn't identify and remove them. DNA is different in every patient. So too are the reasons why the immune system fails to respond to a particular tumour. Both these factors are crucial in determining how disease will progress and how patients might respond to treatment.

Immunotherapy is a breakthrough field of cancer research that aims to harness an individual's immune system to fight cancer. Molecular testing, such as genomic sequencing, can provide important biological information about why a patient might develop cancer in the first place and may help to identify treatment and clinical trial options.

Used together, or individually, molecular testing and immunotherapy can personalise an individual's treatment plan, often leading to better outcomes. This gives hope to patients with rare cancers or for those who have not benefited from standard treatment options.



#### Program goal

Speed up the translation of the most promising personalised tests closer to the clinic.

#### **Program benefit**

More patients have access to personalised treatment that provides the best chance of a good outcome.

#### Target outcome

Forty per cent increase in the number of patients accessing molecular and/or immunological tests by June 2024.

"The future of cancer care lies in the ability of clinicians to understand each individual's disease, and to utilise the best treatment options available. A personalised approach to care promises to vastly improve patient outcomes – particularly so for rare or unresponsive cancers." Kathy Minas, consumer representative





Advances in immuno-oncology, in which an individual's immune system is boosted to fight cancer, and advances in genomic sequencing, to understand the genetics of cancer, have led to the development of sophisticated molecular tests. These can be used to better understand an individual's cancer and potential treatment response.

Researchers within the VCCC Alliance are at the forefront of developing these molecular tests. But more needs to be done to support researchers to accelerate their research and to make more tests available to the patients that need them most.

Because molecular testing is relatively new, it is vital to understand the experiences of patients who have undergone genomic testing, so that future patients receive the greatest benefit from these technological advances.

It is also important that clinicians are informed of the advances in molecular testing and understand the patient experience.

To truly personalise cancer care, it is essential that researchers are enabled to translate discoveries into new molecular tests; clinicians understand how those tests can inform treatment options; and patients with the greatest need are provided access to testing.

#### Key activities

- > Bring researchers and clinicians together to form the multidisciplinary teams that are needed to drive clinical translation of cancer research
- > Build a collaboration springboard to support multidisciplinary connections critical to effective research translation
- > Accelerate the translation of immunotherapy research discoveries by supporting VCCC Alliance researchers to access the Centre for Cancer Immunotherapy by creating a Translational Research Hub to support and coordinate immunotherapy research and link to clinical trials
- > Continue to progress molecular testing to clinical application by understanding patient experiences, investing in testing for patients with the greatest need, identifying new technologies and educating clinicians.
- > Create a comprehensive toolbox for clinicians to ensure the right patient receives the right treatment at the right time.

"The Personalised Cancer Care Program will ensure that patients receive an accurate diagnosis thus ensuring their clinician can determine the ideal treatment pathway by utilising molecular testing and the latest developments in immunotherapy." Les Leckie, consumer representative

#### Co-Chairs

Professor Sean Grimmond, Director, University of Melbourne Centre for Cancer Research and the Bertalli Chair in Cancer Medicine.

Associate Professor Paul Neeson, Human Immunology Translational Lab in Cancer Immunology Research, Peter MacCallum Cancer Centre.

# Program 2 Steering Group membership

Peter Mac	3
Austin/ONJCRI	1
RMH	1
UoM	1
WEHI	1
Western Health	1
RCH	1
SVH/SVI	1
Regional	1
Consumer	2
Other institution	2



Accelerate the development of novel therapies

Clinical trials are conducted in phases. In early phase trials, new interventions are tested with small groups of participants to assess their safety and early signs of effectiveness. The participants may be among the first people to ever receive a novel treatment.

For patients for whom standard treatment options have been unsuccessful, having the ability to access novel therapies may improve their quality-of-life and hopes for survival.

For the clinical trial teams, early phase trials represent the crucial first steps in assessing novel therapies on the path to becoming more broadly used as a standard of care treatment. They also provide the opportunity to improve outcomes for a greater number of patients over time.

Recruitment and retention of patients is critical to the successful development and continuance of clinical trials throughout the whole of Victoria. Currently, however, significant challenges exist around the optimal referral of patients onto early phase clinical trials.

Expanding specialised knowledge and expertise among researchers will provide them with the skills to move the most promising laboratory findings into early phase clinical trials and to develop novel trial designs. Clinical trial teams require streamlined approaches and a reduction of regulatory barriers to build collaborative relationships with pharmaceutical companies and access novel drugs more quickly.

"As a cancer survivor, I know first-hand the value of having viable treatment options available to you. This program stands to increase the opportunities for patients to participate in early phase clinical trials, giving hope to people who are not suited to conventional treatments." Natalie Diepenhorst, consumer representative



#### Program goal

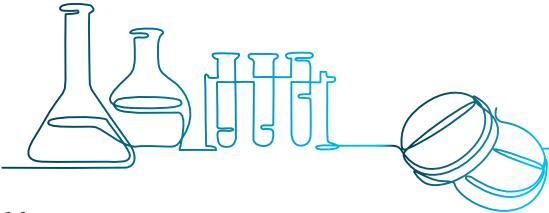
Make more novel therapies available to more patients with cancer across Victoria.

#### Program benefit

More patients can access the right therapies in the right place at the right time.

#### Target outcome

Sixteen per cent increase in therapies assessed on early phase clinical trials.



The VCCC Alliance represents a thriving network of cancer research and clinical trials, including early phase clinical trials. However, translating a discovery into an early phase clinical trial can be a lengthy process. It can also be difficult to connect eligible patients to relevant early phase trials due to a lack of awareness of these trials among both clinicians and patients.

More focus is needed to reduce the barriers that researchers and clinicians face when they interact with the pharmaceutical industry in order to gain access to novel drugs to use in a clinical trial or seek investment to develop a novel idea.

Furthermore, due to the nature of the recruitment process, patients are not always aware of opportunities to participate in early phase clinical trials.

#### Key activities

- > The US-based National Cancer Institute Drug Formulary model will be adapted to the Australian environment to streamline the process of obtaining non-TGA-approved anti-cancer drugs for clinical trials
- > Establishment of a Clinical Trial Development Hub to support the development of novel trial designs and support a new generation of clinical trialist investigators
- > Network building and further development of a Phase I trial database and referral processes optimised for use across Victoria
- > Upskilling of clinicians and scientists to ensure a clear pathway for scientific discoveries to reach the clinic.

"I am fortunate to have been able to access drugs for the treatment of advanced breast cancer through early phase clinical trials. I believe that this access has greatly contributed to my overall survival. I want every patient with cancer to be given the chance I was given: to participate in cutting-edge trials. This exciting VCCC Alliance program will improve access to early phase clinical trials and result in more drugs entering early phase development, providing people with cancer with more treatment options for enhanced survival."

more treatment options for enhance Lisa Keam, consumer representative

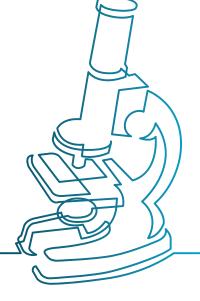
#### Co-Chairs

Associate Professor Jayesh Desai, Associate Director Clinical Research, Medical Oncologist, Peter MacCallum Cancer Centre.

Associate Professor Kara Britt, Head of Breast Cancer Risk and Prevention Laboratory, Senior Research Fellow, Peter MacCallum Cancer Centre.

# Program 3 Steering Group membership

MCRI	1
Peter Mac	3
Austin/ONJCRI	1
WEHI	1
Western Health	1
RCH	1
SVH/SVI	1
Regional	1
Consumer	2
Other institution	3







Drive an innovative, high-performance clinical trial sector through capacity building

It is well understood that patients do better when on a clinical trial. Most people who are offered the opportunity to participate in a clinical trial are keen to take part. However, sometimes regulatory, logistical and communication issues can stand in the way of the opportunity. Clinical trial design is also a factor. These bottlenecks and barriers may mean patients don't hear about a particular trial in time or their ability to access the trial is limited. As a result, it can be challenging to enrol enough patients onto a clinical trial. This can have an impact on the cost of a trial, its ability to proceed, as well as the progression of the science to benefit more patients overall.

As treatments become more personalised, many clinical trials are also becoming increasingly complex and resource-intensive for both patients and clinical trial staff. Exploring new methodologies such as registry trials, may reduce this burden and allow more participants access to trials that they may otherwise not have been offered.

Reducing the barriers to clinical trial participation will ensure that the greatest number of patients are able to access trials across all of Victoria, which in turn will improve patient outcomes.



### Program goal

Strengthen clinical trial participation through the adoption and conduct of new clinical trial methods and support clinical trial units through harmonisation.

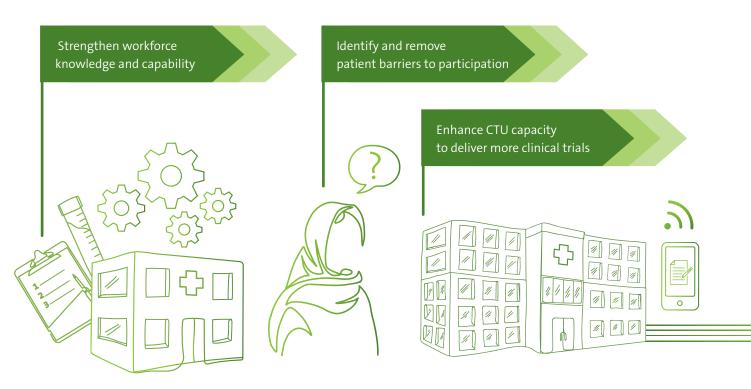
#### Program benefit

More Victorian patients participate in clinical trials.

#### Target outcome

Increase participation in Victorian treatment intervention trials by five per cent by 2024.

Fifteen per cent of patients diagnosed with cancer across VCCC Alliance member sites enrolled on a clinical trial by 2026.



This program aims to strengthen clinical trial participation through the adoption and conduct of new clinical trial methods, one example being registry trials. Registry trials combine conventional trial methodology with registry systems to produce real-world clinical evidence. They integrate the high internal validity (elimination of bias) of randomised clinical trials with the high external validity (applicability to a clinical setting) associated with enrolling real-world patients.

Combining increased patient access via patient registries with randomised intervention options, researchers can answer simple but important pragmatic questions at a much lower cost than through conventional randomised clinical trials.

To make novel trials more commonplace, this program aims to support high-performance clinical trials units (CTUs) with a multi-faceted approach that introduces and supports new trial methodologies while expanding the skills base of clinical groups and clinical trial unit staff overall. Projects will provide statewide educational opportunities and resources, aligned to competency frameworks that will drive greater efficiencies in the sector.

Further, Victoria currently lacks a completely accurate method of capturing clinical trial participation. Developing common metrics is vital for successful benchmarking and measuring improvements in participation, impact and innovation in clinical trials.

#### Key activities

- > Expand application of registry trials to boost clinical trial participation rates
- > Undertake consumer-led initiatives to better understand and reduce barriers to clinical trial participation
- > Enhance workforce capability including facilitating mentoring programs and supporting new trial groups
- > Enhance business capability and sustainability of clinical trial units to drive efficiencies.

#### Co-Chairs

Professor Peter Gibbs, VCCC Alliance Research and Education Lead, Gastro-intestinal Cancers, Joint Division Head, Walter and Eliza Hall Institute and Colorectal Oncologist, Western Health.

Marian Lieschke, Manager Parkville Cancer Clinical Trials Unit, Peter MacCallum Cancer Centre.

Program 4 Steering Group membership

Peter Mac	1
Austin/ONJCRI	1
RMH	1
Western Health	1
SVH/SVI	1
Regional	1
Consumer	2
Other institution	5

"As consumers, we can help this program work towards ensuring future trials are far more equitable, less burdensome, and available to more people affected by cancer. Through informing, educating, and raising awareness of clinical trials, we can improve equity for consumers affected by cancer." Wendy Benson and Kathleen Wilkins, consumer representatives







Implement data-driven value-based cancer services

Health systems globally are under pressure to embrace funding models that incentivise quality care, with a specific focus on the things that matter most to patients. This approach promises better outcomes at a lower overall cost by taking a holistic, patient-centred view of the delivery of healthcare across the cancer care continuum.

Currently, healthcare in Victoria has financial incentives that focus on episodic service delivery instead of patient outcomes. This can lead to disconnects between service providers and across the continuum of care. Tying resources to what matters to patients across the entirety of their patient journey can better align incentives and help make the Victorian health system even better.

Value-based care promises to deliver health services where and when they are needed most, minimising low-value services, and maximising those that deliver the best possible outcomes.



#### Program goal

Contribute to development of an evidence base for implementing value-based care in Victorian cancer services. Proof-of-concept tests of four existing or new models of value-based healthcare in Victorian oncology settings.

#### Program benefit

An efficient health system where healthcare providers are rewarded for helping patients improve their health and live healthier lives in an evidence-based way.

#### Target outcome

Four models of value-based care tested.

"There is a place for value-based care models for particular diseases. Perhaps in a chosen tumour stream or area that uses real registries and are flexible so that we can also extrapolate the effects of innovation. This requires a lot of collaboration. It requires data sharing. It requires sharing of the modelling that we do. It is not an effort we can make within a single group." Professor Maarten IJzerman, Co-Chair



This program's goal is to contribute to the development of evidence leading to the potential implementation of value-based care in Victorian cancer services. It will initiate proof-of-concept tests of four existing or new models of value-based healthcare in Victorian oncology settings.

These pilot projects will be a platform for understanding the complex issues surrounding the adoption of value-based funding models.

The VCCC Alliance provides optimal conditions for this learning, bringing together relationships, expertise and data from within its Data-driven Research Hub as well as BioGrid Australia, University of Melbourne Cancer Health Services Research, the Centre for Victorian Data Linkage, and others. Collectively it will harness leading-edge knowledge in health informatics, health data analytics, epidemiology, statistics, health services research, implementation science, health economics and cancer in primary care.

A key aspect of this program is the incorporation of strong consumer participation in its development and governance.

#### Key activities

Design and undertake proof-of-concept tests that focus on some of the following priority areas:

- > Timely and efficient diagnosis
- > Avoidable re-admissions
- > Statewide access to specialised radiotherapy technologies
- > Genomics-informed systemic cancer treatments
- > Value-based care initiatives through linked data enriched with patient reported outcomes.

#### Co-Chairs

Professor Maarten IJzerman, VCCC Alliance Academic Lead and Head of Cancer Health Services Research, University of Melbourne Centre for Cancer Research and Centre for Health Policy.

Associate Professor Karla Gough, Senior Research Fellow, Department of Cancer Experiences Research, Peter MacCallum Cancer Centre.

Program 5 Steering Group membership

Peter Mac	3
Austin/ONJCRI	1
UoM	4
Western Health	2
Regional	1
Consumer	2
Other institution	3

"It is time for system wide change. This means moving away from the medical focus of 'treat at any cost' to adopting a patient-centred approach related to what patients need and want. As more people age in Australia and more live beyond their cancer diagnoses, we must get smarter at evolving funding models and making changes in the health system that will ensure sustainable improvements in treatment and a better quality of life for Australians affected by cancer." Andrea Selleck, consumer representative







Extend a distributed model of leadership to drive impact on patient outcomes

More than 20 senior cancer clinician researchers from across the VCCC Alliance constitute our distributed leadership group. This leadership model represents a key aspect of our ethos: that by working together we can achieve more. This key clinical group has established a strong track record in driving collaboration and integrating research and education into meaningful practice change that improves cancer care.

The creation of new knowledge through health and medical research does not, of itself, lead to positive impacts on health. Knowledge must be translated into actual changes in practice in order for true benefits to flow to patients. Improving research translation to maximise the benefit from public investment in medical research will ultimately lead to true benefit for patients.

Commercialisation has had increased attention in recent years however research translation also requires enhanced engagement, dissemination and adoption. Hence, the VCCC Alliance acknowledges the critical importance of research translation and has made it a priority. As a result, the VCCC Alliance distributed leadership, including its Research and Education Leads, are in a strong position to accelerate research evidence into real practice change.



#### Program goal

Improve patient outcomes by facilitating the integration of research, education, leadership, advocacy and knowledge translation through a unified clinical community.

#### Program benefit

More rapid adoption of research evidence into routine, real-world practice.

#### Target outcome

Improved survival in three poor outcome cancers (pancreatic, lung and brain cancer).

#### Leadership

Extend and strengthen a distributed leadership model to drive impact on patient outcomes



#### Research

Identify critical needs and challenges in Victorian cancer care

#### Education

Improve teaching and learning to upskill cancer workforce and empower consumers

#### **Advocacy**

Drive system changes that will create the greatest impact



In a comprehensive cancer centre setting, leadership means the ability to harness collective effort to achieve maximum gain. Our distributed leadership model aims to build networks of knowledge and expertise to tackle the most difficult research, education and clinical challenges. This type of leadership requires working democratically across organisational and field boundaries, while continually raising the bar of expectation and achievement.

The distributed leadership group readily takes on challenges in addition to demanding research and clinical roles at VCCC Alliance member institutes. Collectively their contribution informs (and translates) our knowledge in multiple tumour streams, health services research, primary care, cancer nursing, cancer education, palliative care, clinical trials, regional oncology, and cancer immunotherapy.

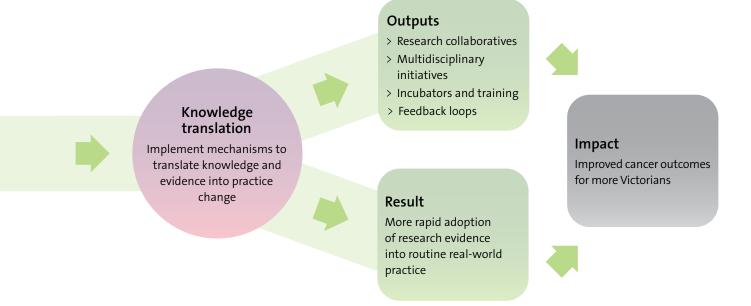
#### Key activities

- > Identify key clinical challenges to positively change practice
- > Support uptake of research into practice to improve clinical decision-making
- > Share ideas, knowledge and information to enhance translation of evidence into practice
- > Enable collaborative research and education activities within tumour streams and across cross-cutting themes
- > Apply collective leadership to prioritised clinical challenges
- > Assess translational potential of new practices and advocate for implementation in the health system.

#### Governance

The governance of the Distributed Leadership Program will be overseen by the Joint SPP Oversight and Review Committee which has representation from the membership of the Cancer Consumer Advisory Committee (CCAC), Cancer Education and Training Advisory Committee (CETAC), the Cancer Research Advisory Committee (CRAC), the VCCC Alliance Distributed Leadership as well as the VCCC Alliance Executive Director.

"Our aim is to speed up the pace of the implementation of research evidence into practice. One of the key success factors will be improvements in pancreatic, lung and brain cancer. These are among the cancers with the poorest outcomes. The opportunity to link data, expand education and seek leveraged funding opportunities locally and globally will be hugely important to meeting our goals." Associate Professor Niall Corcoran, VCCC Alliance Genito-Urinary Research and Education Lead







Fast track innovations in regions with poorest cancer outcomes

The VCCC Alliance is focused on improving outcomes for all patients with cancer whether they live in metropolitan, regional or rural Victoria. Yet, we know that patients undergoing treatment for cancer in regional and rural Victoria are disadvantaged due to their location and data suggests that they have poorer cancer outcomes.

The time, cost, loss of earnings and social disruption connected with travelling to metropolitan centres for treatment can be burdensome, compared with patients who live in Melbourne. According to recent data, just 23 per cent of patients on a clinical trial were living in regional Victoria. A further few were from interstate and the majority, 70 percent of the total number were from Geelong or metropolitan Melbourne.

Boosting participation in rural and regional cancer clinical trials will help to address some important longer-term goals in optimising cancer care in the regions. Importantly, these efforts will increase diversity of participation, allow equity for all, and ensure the expansion of clinical trial capacity.



#### Program goal

This program will ensure rural and regional patients have equity of access to clinical trials and optimal evidence-led cancer care delivered by a skilled regional cancer. workforce.

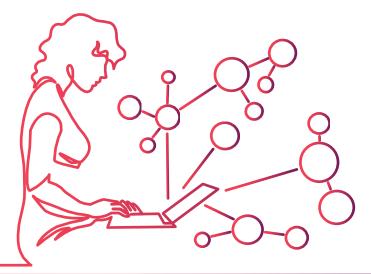
#### **Program benefit**

Improved access to clinical trials for people living in rural and regional areas.

#### Target outcome

A 23 per cent increase in regional patients enrolled on a clinical trial by mid-2024 compared to the 2019 baseline.

"The VCCC Alliance has a number of programs that are starting to have an impact. VCCC has been a pioneer in the space of teletrials. We know that regional patients often say no if they have to travel so by using telehealth and teletrials means that if they don't have to travel, they are much more likely to embrace going on a clinical trial." Dr Craig Underhill, Co-Chair



The pathway to regional equity in cancer care is multi-faceted and complex, but key technologies and solutions are emerging that will provide rural and regional Victorians with the opportunity to access more cancer clinical trial-related treatment closer to home.

The teletrials model complements regional clinical trial networks by providing patients with access to clinical trials that are often not open at regional hospitals. This program will build on newly established foundations to deliver sustainable teletrials while increasing capability and awareness of teletrials through education, training and advocacy.

The Regional Innovations program will make it easier for regional health services to formally link with VCCC Alliance resources, data and education. More clinical trial specialists will enter the workforce through the VCCC SKILLED internship program which supports science graduates to build role-specific clinical trial knowledge, experience and skills underpinned by a robust competency framework.

The program will also strengthen metro-regional networks by developing and implementing a framework for less-common cancers that will act as a conduit for access to registry-trials, biomarker studies, investigator-initiated trials and commercially sponsored trials. The goal will be to broaden the application of this framework to other cancers if proven successful.

#### Key activities

- > VCCC Alliance Teletrials Implementation Project:
  - ¬ increase capability for teletrials through education
  - ¬ consumer-partnered awareness campaign
- > Operationalise a Collaborative Model for Regional Health Services to formally link with the VCCC Alliance
- > Develop frameworks to improve outcomes in less-common cancers.

"Living with a rare cancer in a regional town has certainly had its challenges. Ensuring equitable access to specialist knowledge, increasing access to clinical trials with a virtual hub will support better outcomes for not only rare cancer patients, but all cancer patients in rural and regional areas."

Sharan Ermel, consumer representative

#### Co-Chairs

Dr Craig Underhill, VCCC Alliance Regional Oncology Lead, Medical Oncologist, Clinical Director of Oncology Services, Albury Wodonga Health, Clinical Director Hume Regional Integrated Cancer Services.

Associate Professor Kate Burbury, Haematologist and Disease Group Lead, Peter MacCallum Cancer Centre.

# Program 7 Steering Group membership

Peter Mac	3
RCH	1
Regional	6
Consumer	2
Other institution	3







Build on initiatives to meet the needs of vulnerable groups

Victoria has some of the best cancer outcomes in the world and is recognised as having a leading cancer system. However, these positives are not experienced equally by all Victorians. People living outside of metropolitan areas, from lower socio-economic groups, who are Aboriginal and Torres Strait Islander, or from culturally and linguistically diverse communities, are more likely to be diagnosed with late stage or preventable cancer and have poorer outcomes.

There is an urgent requirement for better understanding of the needs of people in our community who are underserved by the current systems of cancer care and for the development of effective responses for all, regardless of geography, social, cultural, physical or economic circumstances.

Through having an explicit focus on addressing inequities in cancer outcomes, this program will build on existing achievements, learnings, resources and data. It will engage across and beyond the VCCC Alliance to establish new partnerships and new strategies to contribute to addressing inequities in cancer outcomes.



#### Program goal

Build capability and capacity across the VCCC Alliance and beyond to improve equity in cancer outcomes.

#### Program benefit

Overcoming the disparities in cancer-related health research and care will contribute to reducing inequities in cancer outcomes for vulnerable populations.

#### Target outcome

All tumour streams and VCCC Alliance partnered regional oncology centres have initiatives for vulnerable groups.

"We have the opportunity to take concrete steps and make a meaningful difference to reduce the gaps in cancer care and outcomes. I am really proud that Victorians, through the VCCC Alliance, are committed to closing these gaps." Professor Jennifer Philip, Chair



A fundamental goal of the VCCC Alliance is improving outcomes for all Victorian patients with cancer. This program will identify, implement and evaluate a range of targeted and strategic actions to reduce inequities in cancer outcomes.

The program seeks to identify how the VCCC Alliance can:

- > Add the most value to addressing inequities in cancer outcomes
- > Establish an evidence base and framework for this work
- > Implement a range of equity-enhancing initiatives in cancer clinical research, clinical trials and treatment.

#### Key activities

- > Establish a VCCC Alliance Equity Advisory Group to develop an equity framework and guide action to address inequities
- > Contribute to improving cancer outcomes with Aboriginal and Torres Strait Islander communities
- > Appoint an Aboriginal and Torres Strait Islander Research and Education Lead
- > Implement work to improve cancer outcomes among culturally and linguistically diverse communities.

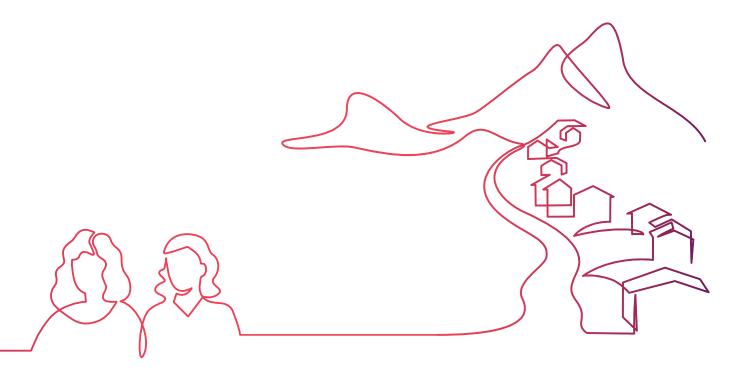
As a proud Wemba Wemba woman, and a person living with cancer for more than a decade, I have witnessed the difference in cancer care for people in vulnerable groups. By listening to the voices of patients and their communities this program can build sustainable health equity: a human right for all. Melissa Sheldon, consumer representative

#### Chair

Professor Jennifer Philip, VCCC Alliance Academic Lead Palliative Care, Chair, Palliative Medicine, Centre for Cancer Research, University of Melbourne; St Vincent's Hospital.

Program 8 Steering Group members

Peter Mac	3
Western Health	1
RCH	1
SVH/SVI	3
Regional	1
Consumer	2
Other institution	2







Develop leadership skills and empowerment of researchers, clinicians and consumers

Effective and cohesive leadership can significantly benefit the healthcare workforce and overall culture while also positively influencing patient outcomes and experiences. Yet our perception of what and who leadership is, is changing and evolving.

In health settings, the patient experience has been elevated in importance. In cancer discovery, consumers, clinicians and researchers are working more closely together to overcome complex problems, recognising that harnessing a collective effort is the way to deliver the most meaningful gains. The ability and willingness to participate in collaboration must be fostered and requires a new era of leadership where diversity and partnership are championed.

By creating a leadership program that empowers and prioritises the development of an inclusive leadership mindset across all areas, the VCCC Alliance will be well positioned to stand as a world-leading cancer collaboration.



#### Program goal

Build diversity and excellence in leadership across the cancer sector through an equitable and exceptional leadership program that supports empowerment, unity, cultural change, and improved patient outcomes and experiences.

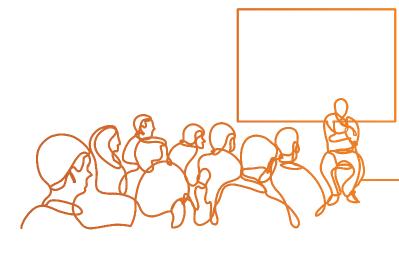
#### Program benefit

A highly skilled and diverse Victorian cancer workforce informed by consumer consultation.

#### Target outcome

At least 83 consumers/ nurses/allied health professionals complete leadership programs by June 2024.

"Leading for Impact is an important program for consumer involvement. It provides a space in which several areas of leadership can be co-designed with a consumer in mind and through a consumer perspective." Michelle O'Sullivan, consumer representative





This program will focus on four separate but complementary areas as cornerstones to developing leadership in the cancer workforce.

It will develop and deliver statewide educational programming for clinicians, researchers, educators and consumers to remove silos and discover new ways of leading in a collaborative paradigm. Emphasis will be placed on enhancing researcher and consumer relationships to reduce the divide and enable closer working relationships. The program will expand on the flagship Nurse-led Research Hub, ensuring clinical nurses develop the skills to enrich organisation and system level outcomes and improve quality of care. A cancer leadership academy will be piloted with the aim of enshrining multidisciplinary leadership networks and collaborative practice as the norm.

#### Key activities

- > Statewide educational programming in leadership, teaching and collaborative teamwork for clinicians, researchers, educators, and consumers
- > Build capacity and capability in consumer-researcher collaboration
- > Expand the Nurse-led Research Hub to diversify and strengthen research
- > Establish a pilot model for a cancer leadership academy.

"Everyone is a leader. By developing, bringing together and networking our past, present and future leaders, we are setting the foundation for improved cancer care and future therapeutic discoveries." Dr Keely Bumsted O'Brien, Co-Chair

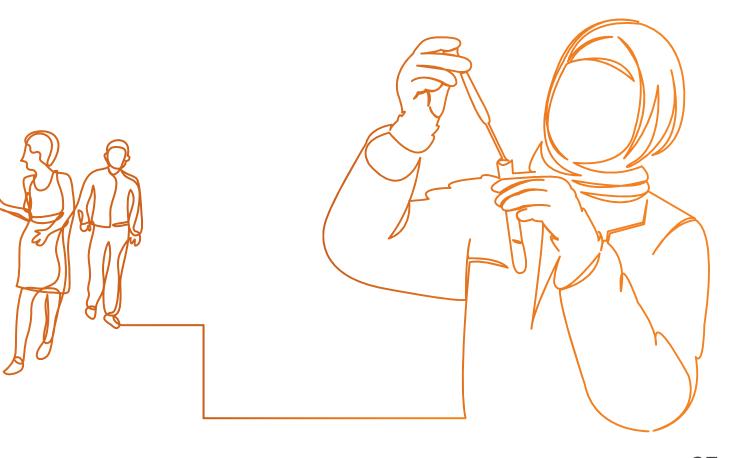
#### Co-Chairs

Professor Mei Krishnasamy, VCCC Alliance Research and Education Lead, Cancer Nursing, Professor/ Director, Academic Nursing Unit, Peter MacCallum Cancer Centre.

Dr Keely Bumsted O'Brien, Head, Scientific Education office, Walter and Eliza Hall Institute of Medical Research.

# Program 9 Steering Group membership

Peter Mac	2
Austin/ONJCRI	1
UoM	3
WEHI	1
Regional	1
Consumer	2
Other institution	4







Build a digital oncology learning hub leveraging Victoria's content and knowledge translation expertise

A new digital oncology learning hub will be central to upskilling the cancer workforce statewide. The oncology sector is diverse, complex, evolving, and multidisciplinary. With rapidly developing advancements in cancer research and clinical care happening every day, the Victorian cancer workforce needs access to relevant, contemporary education and training so that new knowledge can be quickly translated into better outcomes for patients.

The hub will extend the reach of the VCCC Alliance beyond its metropolitan headquarters to bring leading-edge education to regional and rural Victoria and beyond.

It will interpret and curate the learning that is happening at the research bench, in the clinic, and through daily interactions with patients and blend it into easily accessed, flexible learning.

The vision is to provide transformative, consumer-informed, highly accessible online education to the cancer workforce to enhance translation of new knowledge into practice.



#### Program goal

This program will foster an outstanding cancer workforce to help maintain and enhance world-leading patient outcomes.

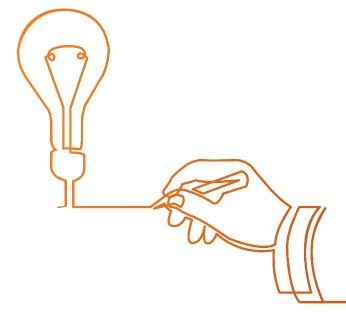
#### **Program benefit**

Improve patient outcomes by ensuring healthcare professionals are abreast of evidence-based advances in patient care and discontinue use of existing lower-benefit interventions.

#### Target outcome

23,400 participants have accessed a high-quality VCCC Alliance education program.

"Those working at the forefront of cancer research and care deserve accurate, effective, engaging and accredited education, as well as access to well-structured and up-to-date information regardless of location." Rochelle Serry, consumer representative



The VCCC Alliance established the nation's first oncology-specific, wholly online postgraduate program in cancer sciences earning a reputation as a global force in cancer education along the way. In a unique symbiotic relationship, collaborative teams harness the best of leading-edge research and clinical expertise emerging from VCCC Alliance research institutes and clinical partners. This know-how is transformed into up-to-the minute digital education for future leaders and change-makers in the cancer field.

The hub will enhance existing educational programming to provide digital education for a new era. It will enable flexible learning, greater reach, a multidisciplinary approach, access for the rural and regional workforce and modularised microlearning to meet the requirements and expectations of learners in the digital age.

The promise is easy to find, curated and created learning and development for cancer professionals and consumers when and how it is needed.

#### Key activities

- > Develop and deliver digitally enhanced education and training programs VCCC Alliance Digital Oncology Learning Hub
- > Facilitate practice change initiatives through educational interventions
- > Develop microcredentialling from Master of Cancer Sciences content
- > Develop education resources to support knowledge and initiatives emerging from the Research and Education Lead program.

"As the consumer-led culture grows this program is ideally placed to lead the way in educating the cancer workforce to embrace changes and adopt new practices." Paul Baden, consumer representative

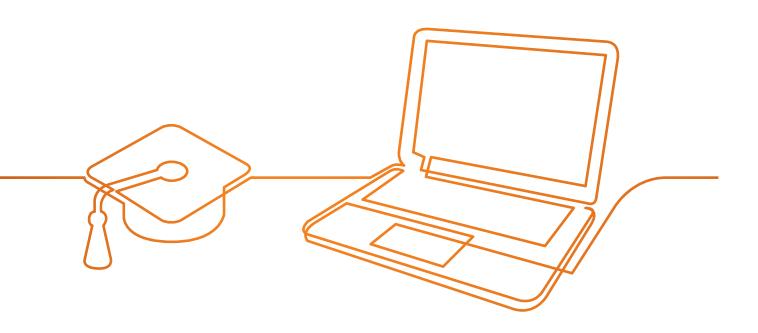
#### Co-Chairs

Dr David Kok, Master of Cancer Sciences course convenor, Medical Oncologist, Peter MacCallum Cancer Centre.

Jessica Balson, Nurse Unit Manager Cancer Services, Western Health.

## Program 10 Steering Group membership

Peter Mac	3
Austin/ONJCRI	1
UoM	3
Western Health	1
RCH	1
Consumer	2
Other institution	4



## **END NOTES**

### Developing the Strategic Program Plan 2021–24

The VCCC Alliance submitted a Business Case to the Victorian Minister for Health and Human Services in December 2019, with funding ultimately announced in the 2020–21 Victorian Budget, November 2020.

The COVID-19 pandemic resulted in an extended period between the Business Case submission and the budget announcement.

The process therefore took place in two stages:

- 1. An interim planning phase program working groups:
  - > More than 200 individuals from the VCCC Alliance members and partners developed recommendations for program priorities and activities prior to a budget announcement.
- 2. An implementation planning phase Program steering groups:
  - > Open process for selection of program Co-Chairs and steering groups
  - > Hand-over of recommendations from working groups to Steering Groups
  - > Finalisation of program plans with budget and scope consideration.

The oversight for this process was provided by the VCCC Alliance:

- > Cancer Research Advisory Committee (CRAC)
- > Cancer Education and Training Advisory Committee (CETAC)
- > Cancer Consumer Advisory Committee (CCAC)
- > Strategy Group (Chairs of CRAC, CETAC and CCAC)
- > Academic Lead Health Services Research
- > Executive Director and strategic program planning leadership team.

#### **Fundamentals**

#### Governance to enable excellence

A Joint Strategic Program Plan Review and Oversight Committee (Joint Committee) will provide expert oversight of the SPP 2021–24, review performance against budget, timelines and scope, identify key risks and recommend mitigations. This committee will include members from CCAC, CETAC and CRAC (including the Chair of each) as well as a VCCC Alliance Research and Education Lead and will provide feedback to Program Steering Groups and report recommendations to VCCC Alliance Board committees, specifying areas for further consideration or action from these committees. The CRAC will continue to hold overall responsibility for final recommendations and reporting to the Board.

Nine of the 10 strategic programs have a Steering Group to:

- > Lead implementation of the program
- > Liaise and build synergies with the steering groups of other VCCC Alliance Strategic Programs
- > Work collaboratively with the VCCC Alliance program management team
- > Provide regular reports on decisions, risks and program progress to VCCC Alliance Board committees.

Each Steering Group has up to 15 members with no more than three from any one organisation. These groups generally comprise:

- > Employees from VCCC Alliance members with expertise relevant to the program
- > At least one expert from regional Victoria
- > Two consumer representatives
- A number of experts from external organisations (e.g. Cancer Council Victoria, Monash Partners Comprehensive Cancer Consortium, Department of Health, Victorian Integrated Cancer Services)
- > A small number of ex-officio, non-voting members where there is a good reason for doing so.

Nine Co-Chairs are women and eight are men.

#### Underpinnings

Eight other elements are fundamental to the design, structure and successful delivery of the SPP 2021–24. These are key components of how the VCCC Alliance functions and will be sustained throughout the period of this plan and beyond.

Consumer involvement	Continuous communication	
> Problem identification	> Mission critical in collaborative	
> Education of the cancer workforce	environment	
> Program lifecycle: conception to evaluation to continuation	> Support operations and enhance impact	
Translational research system	Measure results	
<ul><li>Collaborative, flexible model</li><li>Respond to emerging and innovative ideas</li><li>Problem identification and agile responses</li></ul>	Comprehensive hypothesis to understand progress from activity to achievement of goals     Program logic-based evaluation strategy	
Sustainability	Cancer workforce	
<ul> <li>Long-term financial sustainability         of program activity</li> <li>Increased diversification of funding sources</li> <li>Multi-pronged approach</li> </ul>	<ul> <li>Needs-based quality education vital for effective research translation</li> <li>Key area of opportunity with expanding remit</li> <li>Innovation and sustainability focus</li> </ul>	
Backbone	Corrective action	
<ul> <li>&gt; Well-established Program         Management Framework     </li> <li>&gt; Expert staff to facilitate program delivery and provide essential support and enablers</li> </ul>	<ul><li>&gt; Risk framework within Program</li><li>Management Framework</li><li>&gt; Agreed variations protocol</li></ul>	

#### Principles underlying development of programs

The eight principles underlying the choices and priorities reflected in the SPP 2021–24 programs:

- 1. Address an unmet need that is evidence-based and/or builds on the previous successes of the SRP 2017–20
- 2. Enable improvement and delivery of services for all cancer patients and forge new approaches in alignment with the Victorian Cancer Plan across the cancer continuum
- 3. Provide a catalyst for innovative approaches to grow research and education quality and impact, and influence system-level change
- 4. Enable a multi-site or multidisciplinary joint venture with consideration to involve rural and regional organisations. Program scope covers work that no individual organisation can deliver
- 5. Deliver an ability to progress within the local environment with scalability dependent on available resources and need
- 6. Mobilise and extend the collective and diverse strengths of members and partners, building on capability and harmonisation where possible
- 7. Embed the lived experience of cancer into research and its translation to improve patient outcomes and equitable care
- 8. Consider equitable access to any innovation produced.

## **ACKNOWLEDGEMENTS**

The Board and Executive of the VCCC Alliance would like to acknowledge and thank the many contributors to this plan: in all 250 people from 35 organisations. Refer to page 34.

Particular thanks to the Strategy Working Group, who took oversight of the whole plan:

Professor Andrew Roberts AM, Chair of the VCCC Alliance Cancer Research Advisory Committee. Cancer Theme Co-leader, Walter and Eliza Hall Institute; Clinical Haematologist, Royal Melbourne Hospital and Peter MacCallum Cancer Centre; Metcalf Chair of Leukaemia Research University of Melbourne.

Associate Professor Kylie Mason, Chair of the VCCC Alliance Cancer Education and Training Advisory Committee, Consultant Haematologist and Clinician Researcher, Peter MacCallum Cancer Centre, The Royal Melbourne Hospital; Clinical Associate Professor, Sir Peter MacCallum Department of Oncology, the University of Melbourne and Senior Research Fellow University of Sydney.

Professor Maarten IJzerman, VCCC Alliance Academic Lead, Health Services Research; Chair of Health Services Research, Centre for Cancer Research and Centre for Health Policy at the University of Melbourne and Western Health.

Ms Sophy Athan, Chair of the VCCC Alliance Cancer Consumer Advisory Committee.

Professor Grant McArthur, Executive Director, VCCC Alliance; Head Molecular Oncology Laboratory, Consultant Medical Oncologist, Peter MacCallum Cancer Centre; Lorenzo Galli, Chair of Melanoma and Skin Cancer at the University of Melbourne.

Thanks too to our colleagues at the Victorian Cancer Agency, Department of Health, for their support and counsel.

Finally, thanks to the VCCC Alliance staff team for their dedication and commitment to this work.

### VCCC Alliance Member and contributors involvement

#### Alliance members

- > Peter MacCallum Cancer Centre
- > Melbourne Health (including The Royal Melbourne Hospital)
- > The University of Melbourne
- > Walter and Eliza Hall Institute of Medical Research WEHI
- > The Royal Women's Hospital
- > The Royal Children's Hospital
- > Western Health
- > St Vincent's Hospital Melbourne (including St Vincent's Institute)
- > Austin Health (including the Olivia Newton-John Cancer Research Institute and Austin Lifesciences)
- > Murdoch Children's Research Institute.

#### Affiliate collaborators

- > Albury Wodonga Health
- > Bendigo Health.

#### Other contributors

- > Alfred Health
- > Australian Institute of Health Innovation
- > Ballarat Regional Integrated Cancer Centre
- > Barwon Health
- > BioGrid Australia
- > Cancer Council Victoria
- > Epworth HealthCare
- > Goulburn Valley Health
- > Monash Health
- > Monash University
- > Orygen
- > Paediatric Integrated Cancer Service
- > Regional Trials Network Victoria
- > Scientae
- > South-West Health Care
- > Swinburne University of Technology
- > University of Western Australia
- > Victorian Department of Health
- > Western & Central Melbourne Integrated Cancer Service.

### Note

This document is a synopsis of the full Strategic Program Plan 2021-24.

For further details about the programs please visit our website or contact the relevant program Co-Chair or program manager, e. vccc-alliance@unimelb.edu.au.





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