

STRATEGIC PLAN 2017-2019

VISION

Improving patient experiences and outcomes by connecting cancer care and driving best practice.

WE WILL ACHIEVE THIS VISION BY

- Understanding the needs of people affected by cancer
- building and supporting collaboration between health professionals, health services and consumers
- driving quality improvement
- supporting development of the cancer workforce
- facilitating system-wide engagement in cancer research

OUR STRATEGIC PRIORITIES 2017-2019

1 SAFETY AND QUALITY

Strengthen our capacity to monitor safety and quality and drive improvements by systematic application of cancer data.

2 CONSISTENT CARE

Implement the Optimal Care Pathways including improvements to multidisciplinary care, wellbeing and support, and survivorship.

3 BETTER PATIENT EXPERIENCE AND OUTCOMES

Optimise investment made in the region to improve patient experience and outcomes, and provide care close to home.

STRATEGIC GOAL 1

A networked cancer care system	Actions
1.1 Link services involved in cancer care (across all sectors, including cancer centres, health services, community organisations), and work with these services and health professionals to align priorities.	1.1.1 Ensure Hume RICS Governance responsibilities can be fulfilled through active engagement with all sectors involved in cancer care within the region
	1.1.2 Clarify and establish regional systems to support high quality cancer care
	1.1.3 Enable cross-sector linkages (including with the private sector) to support the wellbeing of people living with cancer
	1.1.4 Partner with primary health networks and others to promote care in line with Optimal Care Pathways
1.2 Strengthen linkages between metropolitan and regional cancer service providers.	1.2.1 Formalise intra-regional and metropolitan-regional linkages between service providers (including private providers) to support an integrated service system which is inclusive of: <ul style="list-style-type: none"> • streamlined processes for referral, communication and transition of care • linked multidisciplinary team meetings, particularly for low volume, rare and complex cancers • high quality shared care
1.3 Engage consumers and communities in the work of the ICS.	1.3.1 Proactively engage consumers to provide input on specific issues and to assist in identifying priority areas for improvements
	1.3.2 Collaborate with consumers and specific communities in the region to raise levels of cancer awareness and health literacy

Hume Regional Integrated Cancer Service Strategic Plan 2017-2019

STRATEGIC GOAL 2

High-quality cancer care	Actions
<p>2.1 Implement the Optimal Cancer Care Pathways, including improvements to multidisciplinary care, supportive care and care coordination.</p>	<p>2.1.1 Lead and coordinate the implementation of OCPs in identified tumour streams and in cancers where regional disparities in outcomes exist</p> <p>2.1.2 Continue to improve the quality of multidisciplinary care, wellbeing and support, and survivorship and align these initiatives with OCP priorities. Implement system level change where possible.</p> <p>2.1.3 Implement statewide frameworks and initiatives to inform regional performance in key outcome areas e.g.</p> <ul style="list-style-type: none"> • multidisciplinary quality framework (when available) • supportive care screening point prevalence study
<p>2.2 Analyse available data and information of relevant clinical evidence/innovation and disseminate it to drive quality improvement.</p>	<p>2.2.1 Establish a systematic approach to review, analysis and use of cancer data:</p> <ul style="list-style-type: none"> • to inform Hume RICS Governance Groups, clinicians and health services (public and private) about performance in the region • to identify unwarranted and/or high risk variations in practice • to inform OCPs and clinical priorities • to highlight factors potentially contributing to regional outcome disparities • to support service planning and compliance with Cancer Services Capability Framework • to support local and statewide audits including Victorian Government Performance Monitoring Framework
<p>2.3 Support providers to apply cost-benefit considerations to care/service planning and delivery.</p>	<p>2.3.1 Incorporate cost-benefit considerations in decision-making and service planning</p>
<p>2.4 Continue statewide tumour summits to drive consistent cancer care across tumour streams.</p>	<p>2.4.1 Participate in tumour summits and prioritise recommendations arising to align with OCP improvement work</p>
<p>2.5 Continue to drive improvements in the patient experience of cancer care.</p>	<p>2.5.1 Advocate for improvements in the patient experience within regional cancer service providers</p> <p>2.5.2 Support consumers to be informed about what to expect from their cancer care</p> <p>2.5.3 Work with service providers to achieve systematic identification and response to support and wellbeing needs of patients and families. Align with OCP priorities</p>
<p>2.6 Continue to support workforce development initiatives.</p>	<p>2.6.1 Build workforce capacity for regional cancer centres to provide appropriate, high quality multidisciplinary care</p> <p>2.6.2 Support sustainable workforce development to provide consistent care in regional and rural health services (in line with Cancer Services Capability Framework)</p> <p>2.6.3 Invest in Hume RICS team by building capacity to enable achievement of strategic priorities</p>

STRATEGIC GOAL 3

A research-informed cancer care system	Actions
<p>3.1 Encourage providers to participate in clinical trial programs.</p>	<p>3.1.1 Raise awareness of clinical trials through systematic inclusion as agenda item in multidisciplinary team meetings</p>
<p>3.2 Support health services research.</p>	<p>3.2.1 Support the future development of rural and regional health services research by:</p> <ul style="list-style-type: none"> • raising awareness of regional issues /questions • fostering potential research collaborations between clinicians, health services and research organisations
<p>3.3 Foster robust evaluation of cancer programs, models of care and ICS initiatives.</p>	<p>3.3.1 Ensure evaluation methodology is built into all new proposals</p> <p>3.3.2 Ensure evaluation reports are presented to Hume RICS Governance Groups, and action taken on recommendations</p>