

Corporate Plan

2016-17

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1.0 Introduction

I, Helen Zorbas, as the accountable authority of Cancer Australia, present the *2016-17 Cancer Australia Corporate Plan*, which covers the period of 2016-17 to 2019-20, as required under paragraph 35 (1) (b) of the *Public Governance, Performance and Accountability Act 2013*.

2.0 Purpose

Our purpose

To minimise the impact of cancer, address disparities, and improve the health outcomes of people affected by cancer in Australia by providing national leadership in cancer control.

Our role

To achieve our purpose, Cancer Australia provides national leadership in cancer control across the cancer continuum of care. Cancer Australia builds the evidence base to guide improvements in cancer prevention, treatment and care through the translation of scientific research and data; makes recommendations to the Australian Government about cancer policies and priorities; assists with the implementation of Australian Government policies and programs in cancer control; and oversees a dedicated budget for research into cancer. Cancer Australia achieves its objectives by harnessing expertise, effective parternships, and a collaborative model that fosters engagement across the health system.

Cancer Australia works with the Department of Health which has policy responsibility for improving the detection, treatment and survival outcomes for people with cancer. The Department has oversight of cancer screening programs, such as the National Bowel Cancer Screening Program and the National Cervical Screening Program.

3.0 Environment

Cancer Australia is an agency of the Health Portfolio. It was established by the Australian Government under the *Cancer Australia Act 2006* and is a Non-corporate Commonwealth Entity under the *Public Governance, Performance and Accountability Act 2013 (PGPA Act)*. It is subject to the *Auditor-General Act 1997*, and its staff are employees of the Australian Public Service under the *Public Service Act 1999*.

Cancer Australia is registered under the *Charitable Fundraising Act 1991 (NSW)* to conduct fundraising activities. Donations received through fundraising appeals such as Pink Ribbon Breakfast in Sydney are used to improve outcomes for Australians affected by breast cancer.

Cancer Australia is funded by the Australian Government to deliver ongoing work in breast, gynaecological, and lung cancers; priority cancer research; clinical trial protocol development; cancer data improvements; and a grant initiative to support people with cancer. Cancer Australia's total appropriation in 2016-17 is \$28.424 million. It is anticipated that this funding base will increase over the next three years, primarily driven by an increase to administered appropriation. Australian Public Service wide initiatives require that Cancer Australia continuously consider efficiencies in how it operates.

As a recognised small government agency the ongoing incorporation of efficiencies presents practical challenges. In response to these challenges, Cancer Australia has adopted continuous improvement processes and applies robust risk management processes.

Strategic outlook over the forward years

In Australia, cancer is a national health priority, with one in two men and one in three women expected to be diagnosed with cancer by the age of 85 years.

Cancer Australia's *Corporate Plan 2016-17* has been developed in the context of a range of current and future trends and challenges in cancer control in Australia over the reporting periods covered by this Plan (the financial years 2016-17, 2017-18, 2018-19, and 2019-20) and beyond, including:

- More people being diagnosed with cancer. It is estimated that, in 2016, there will be 130,470 new cases of cancer diagnosed in Australia. By 2020, the incidence is projected to increase by 15.0% to approximately 150,000.
- ▶ More people living longer after a cancer diagnosis, requiring ongoing treatments, support, and long-term follow-up care. Five-year relative survival for people diagnosed with cancer has increased significantly over time, from 46% in 1982-1986 to 67% in 2007-2011.

- Continuing disparities in the distribution of cancer, its impact, and variations in outcomes across population groups and tumour types.
- Increasingly complex and costly cancer treatments and care with the development and availability of new treatments and technologies.
- Increased health professional, community and consumer expectations for accessible, reliable, evidence-based information about cancer.
- More people affected by cancer and the broader community seeking to be active participants in decision making about their health.

In consideration of these trends and challenges on Cancer Australia's purpose to minimise the impact of cancer, address disparities, and improve the health outcomes of people affected by cancer in Australia, Cancer Australia will:

- utilise the latest scientific research and data to inform national cancer control, health service policy and clinical practice
- drive nationally consistent cancer data collection and monitoring across the cancer control continuum
- focus on populations which experience poorer health outcomes, particularly Aboriginal and Torres Strait Islander peoples and people living in rural and remote Australia
- ▶ facilitate the development of sustainable and effective approaches to cancer care through identifing key appropriate and inappropriate oncology practices across the cancer continuum
- fund research in priority areas of cancer
- > provide information for people affected by cancer about their diagnosis and treatment, and
- > promote cancer awareness to the community.

Strategic investment in cancer control will be critical to the optimal use of resources and enable the health system to be responsive to current and future challenges and improve cancer outcomes across Australia.

Central to Cancer Australia's success in mimimising the impact of cancer will be sustained engagement and collaboration. Cancer Australia will liaise between the wide range of groups and health care providers with an interest in cancer and work across sectors in partnership with consumers, health professionals, professional colleges, researchers and research funding bodies, non-government organisations, other health portfolio agencies, and state and territory governments, to further drive improvements in cancer outcomes and care and optimise future investment in cancer control.

4.0 Performance

Cancer Australia's purpose is to minimise the impact of cancer in Australia, address disparities and improve the health outcomes of people affected by cancer in Australia.

The following tables provide the outlook for each of the financial years 2016-17, 2017-18, 2018-19, and 2019-20.

Outlook for 2016-17

What we will do in 2016-17

Provide leadership in national cancer control and promote appropriate cancer care Fund priority research and strengthen national data capacity

Promote cancer awareness and provide information about cancer to the community

How we will do it in 2016-17

Develop a framework to guide best-practice management approaches to lung cancer care.

Implement an engagement, promotion and communication strategy for the Cancer Australia Statement on Breast Cancer which identifies appropriate and inappropriate breast cancer practices.

Lead a shared agenda for improving cancer outcomes for Aboriginal and Torres Strait Islander peoples. Partner with non-government organisations to fund priority areas of cancer research through the Priority-driven Collaborative Cancer Research Scheme.

Provide funding to the Multisite Collaborative National Cancer Clinical Trials Groups to build capacity to undertake industry independent cancer clinical trials.

Progress the collection, linkage and reporting of data on cancer stage, treatments, and recurrence.

Establish a mechanism for the regular reporting and benchmarking of national cancer control indicators. Enhance the Cancer Australia website as a central source of evidence-based cancer information, resources and data.

Through Women's Business Workshops continue to promote awareness and early detection of breast and gynaecological cancers to Aboriginal and Torres Strait women.

Continue to involve consumers in advisory groups and project activities.

Provide leadership in national cancer control and promote appropriate cancer care

Fund priority research and strengthen national data capacity

Promote cancer awareness and provide information about cancer to the community

What we will achieve in 2016-17 (intended results)

Research is translated into evidence-based information, policy and clinical practice.

Outcomes for Australians diagnosed with cancer are improved.

Priority research is funded and national data capacity is strengthened.

Evidence-based cancer information, resources and data is available and accessible to consumers, health professionals and the community.

How we will measure our achievement in 2016-17 (annual performance targets)

Evidence is advanced	Minimum number of cancer	Total number of Cancer
about the most appropriate	research grants funded by	Australia resources available to
interventions across the	Cancer Australia through the	inform the community: 280
continuum of cancer care.	Priority-driven Collaborative	Number of consumers involved
Incorrect concepts in the delivery	Cancer Research Scheme: 7	
Improvements in the delivery		in Cancer Australia advisory and
of best practice cancer care	Percentage of funding for	project activities: 60
for identified cancers are	applied research through the	
demonstrated.	Priority-driven Collaborative	
	Cancer Research Scheme:	
	≥ 70%	

Outlook for 2017-18

What we will do in 20	17-18	
Provide leadership in national cancer control and promote appropriate cancer care	Fund priority research and strengthen national data capacity	Promote cancer awareness and provide information about cancer to the community
How we will do it in 2	017-18	
Develop evidence-based advice on cancer control. Examine the evidence to inform approaches to address variations in cancer outcomes.	Support collaborative cancer research through the Priority- driven Collaborative Cancer Research Scheme. Support the development of industry independent cancer clinical trials.	Develop evidence-based cancer information for consumers, health professionals and the community. Continue to involve consumers in advisory groups and project activities.
	Report on cancer stage and treatments for selected cancers. Report on national cancer control indicators.	
What we will achieve i	n 2017-18 (intended results)	
Research is translated into evidence-based information, policy and clinical practice.	Priority research is funded and national data capacity is strengthened.	Evidence-based cancer information, resources and data is available and accessible to consumers, health professionals and the community on the Cancer Australia website.
How we will measure	our achievement in 201	L7-18 (annual performance targets)
Evidence is advanced about the most appropriate interventions across the continuum of cancer care.	Minimum number of cancer research grants funded by Cancer Australia through the Priority-driven Collaborative Cancer Research Scheme: 7 Percentage of funding for applied research through the Priority-driven Collaborative Cancer Research Scheme: ≥ 70%	Total number of Cancer Australia resources available to inform the community: 285 Number of consumers involved in Cancer Australia advisory and project activities: 70

Outlook for 2018-19

What we will do in 20	18-19	
Provide leadership in national cancer control and promote appropriate cancer care	Fund priority research and strengthen national data capacity	Promote cancer awareness and provide information about cancer to the community
How we will do it in 20	018-19	
Develop evidence-based advice on cancer control. Examine the evidence to inform approaches to address variations in cancer outcomes.	Support collaborative cancer research through the Priority- driven Collaborative Cancer Research Scheme. Support the development of industry independent cancer	Develop evidence-based cancer information for consumers, health professionals and the community. Continue to involve consumers
	clinical trials.	in advisory groups and project
	Report on cancer stage, treatments and recurrence for selected cancers.	activities
	Report on national cancer control indicators.	
What we will achieve i	n 2018-19 (intended results)	
Research is translated into evidence-based information, policy and clinical practice.	Priority research is funded and national data capacity is strengthened.	Evidence-based cancer information, resources and data is available and accessible to consumers, health professionals and the community on the Cancer Australia website.
How we will measure	our achievement in 201	L8-19 (annual performance targets)
Evidence is advanced about the most appropriate interventions across the continuum of cancer care.	Minimum number of cancer research grants funded by Cancer Australia through the Priority-driven Collaborative Cancer Research Scheme: 7 Percentage of funding for applied research through the Priority-driven Collaborative Cancer Research Scheme: ≥ 70%	Total number of Cancer Australia resources available to inform the community: 290 Number of consumers involved in Cancer Australia advisory and project activities: 70

Outlook for 2019-20

What we will do in 20	19-20	
Provide leadership in national cancer control and promote appropriate cancer care	Fund priority research and strengthen national data capacity	Promote cancer awareness and provide information about cancer to the community
How we will do it in 20	019-20	
Develop evidence-based advice on cancer control. Examine the evidence to inform approaches to address variations in cancer outcomes.	Support collaborative cancer research through the Priority- driven Collaborative Cancer Research Scheme. Support the development of industry independent cancer clinical trials. Report on cancer stage,	Develop evidence-based cancer information for consumers, health professionals and the community. Continue to involve consumers in advisory groups and project activities.
	treatments and recurrence for selected cancers. Report on national cancer control indicators.	
What we will achieve i	n 2019-20 (intended results)	
Research is translated into evidence-based information, policy and clinical practice.	Priority research is funded and national data capacity is strengthened.	Evidence-based cancer information, resources and data is available and accessible to consumers, health professionals and the community on the Cancer Australia website.
How we will measure	our achievement in 201	L9-20 (annual performance targets)
Evidence is advanced about the most appropriate interventions across the continuum of cancer care.	Minimum number of cancer research grants funded by Cancer Australia through the Priority-driven Collaborative Cancer Research Scheme: 7 Percentage of funding for applied research through the Priority-driven Collaborative Cancer Research Scheme: ≥ 70%	Total number of Cancer Australia resources available to inform the community: 290 Number of consumers involved in Cancer Australia advisory and project activities: 80.

Cancer Australia will utilise its existing robust performance management frameworks to collect information relating to the performance of our programs; monitor and analyse progress; ensure alignment of our efforts with our purpose, and maintain strong links between performance reporting, planning and management.

5.0 Capability

5.1 Workforce planning

Cancer Australia is a high-performing, agency comprising highly qualified staff with expertise in a range of areas, including epidemiology, clinical practice, research analysis, data analysis, population health, public health, public policy, health communication, accounting, and financial and project management.

A significant number of Cancer Australia staff hold Doctorates, Master Degrees, and Bachelor Degrees across a range of disciplines. Cancer Australia will require highly qualified staff to deliver on its purpose over the reporting periods covered by this Plan (the financial years 2016-17, 2017-18, 2018-19, and 2019-20) and to this effect updated strategies to recruit and retain specialised staff will be developed and implemented as required.

5.2 ICT capability

Cancer Australia's ICT strategy is designed to support the agency to meets its purpose over the reporting periods covered by this Plan (the financial years 2016-17, 2017-18, 2018-19, and 2019-20) to minimise the impact of cancer, address disparities, and improve the health outcomes of people affected by cancer in Australia by providing national leadership in cancer control. The key drivers for Cancer Australia's ICT strategy are:

Strategic – The need for consistent, accurate and timely management and compliance information, enabling improved decision making;

Customer Focus – The need to address the increasing demand from the public to access services and information via websites and social media;

Information Management and Security – The need to ensure that data and information is collected and stored appropriately and is accessible, subject to effective controls; and

Innovation – The need to continuously improve the functionality and user-friendliness of the agency's website to support Cancer Australia's role as a source of evidence-based cancer information, resources and data for consumers, health professionals and the community. In addition, the need to be "ICT ready" to support new areas of work in the future which take advantage of innovative technologies and new ways of working, for example wireless technologies and shared services environments.

Cancer Australia will continuously explore opportunities to integrate digital services and technology into the agency's program of work to meet the varied and changing needs of our stakeholders.

5.3 Capital investment strategy

Cancer Australia has limited and modest capital resources, and over the reporting periods covered by this Plan (the financial years 2016-17, 2017-18, 2018-19, and 2019-20), will focus its capital investment in areas of high priority and need, which align with our objectives and enable continuous process improvement and efficient utilisation of resources.

6.0 Risk oversight and management

Managing risk is an integral part of the accountability requirements at all management levels within Cancer Australia. Cancer Australia's risk management system aims to safeguard Commonwealth interests, ensure the best use of its resources and aid the achievement of Cancer Australia's purpose.

Cancer Australia recognises risk management as a central element of good corporate governance, and a tool to assist in strategic and operational planning. Cancer Australia's Risk Management Process is an integral part of management; embedded in its culture and practices; and tailored to Cancer Australia's business processes.

Risk management within Cancer Australia involves establishing and supporting an appropriate risk management culture and applying a systematic risk management process to all aspects of Cancer Australia's operations.

Cancer Australia over the reporting periods covered by this Plan (the financial years 2016-17, 2017-18, 2018-19, and 2019-20) faces a variety of risks from program risks to fraud and compliance risks.

Cancer Australia has developed an approach to risk management which is:

- Structured and linked to business objectives
- ▶ Integral to overarching governance, financial, assurance and compliance frameworks
- > Tailored to the needs of the entity and proportionate to its risk appetite and tolerance
- > Dynamic with a focus on continual improvement and maintaining better practice
- Transparent with those accountable for the risks and the responsibility for risk managed by those best able to do so.

Cancer Australia's Risk Management Framework and Plan is a living document that is reviewed and updated regularly to adapt to changes within Cancer Australia and its environment.

The development of the Cancer Australia Risk Management Framework has been completed with reference to, and in compliance with, AS/NZ ISO 31000:2009 Risk Management – Principles and Guidelines ("the Standard") and the Commonwealth Risk Management Policy and the Risk Management Better Practice Guide.

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