



2024-25 Cancer Australia Corporate Plan





Contents

1. Introduction	1
2. Purpose, Function & Key Activities	1
Our purpose	1
Our function	1
Our key activities	2
3. Operating context	3
3.1 Environment	3
3.2 Cooperation	5
3.3 Capability	6
3.4 Risk management	7
4. Performance	8



Statement of Acknowledgement

Cancer Australia acknowledges Aboriginal and Torres Strait Islander people as the Traditional Custodians of Country throughout Australia. We pay our respects to Elders, past and present.

We celebrate the ongoing connections of Aboriginal and Torres Strait Islander peoples to Country, culture, community, family and tradition and recognise these as integral to health, healing and wellbeing.

Cancer Australia acknowledges great diversity among Aboriginal and Torres Strait Islander peoples, and the contribution of the many voices, knowledge systems and experiences that guide all efforts to create a culturally safe and responsive cancer system that is equitable to all.

1. Introduction

Statement of preparation

I, Dorothy Keefe, as the Accountable Authority of Cancer Australia, present the 2024-25 Cancer Australia Corporate Plan, which covers the period 2024-25 to 2027-28, as required under paragraph 35 (1) (b) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

Cancer Australia is a specialist agency within the Australian Government's Health and Aged Care portfolio, providing national leadership in cancer control across all cancers, for all Australians.

Cancer Australia was established under the *Cancer Australia Act 2006* and is a non-corporate Commonwealth entity under the PGPA Act. The agency 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's total appropriation in 2024-25 is estimated to be \$48.56 million, excluding retained revenue receipts. Over the four years of this Corporate Plan (2024-25 to 2027-28), it is anticipated the core appropriation for Cancer Australia will remain relatively stable.

This Corporate Plan sets out the key activities, key cooperative relationships, performance measures and risk management strategies Cancer Australia will pursue to achieve its purpose over the next four reporting periods from 2024–25 to 2027–28.

The Corporate Plan is aligned with the agency's Portfolio Budget Statement and other key documents that contribute to the strategic planning and reporting of the agency.

2. Purpose, Function & Key Activities

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 function

The *Cancer Australia Act 2006* (Part 2, Section 7) specifies the following functions for Cancer Australia:

- a. to provide national leadership in cancer control
- b. to guide scientific improvements to cancer prevention, treatment and care
- c. to coordinate and liaise between the wide range of groups and health care providers with an interest in cancer
- d. to make recommendations to the Commonwealth Government about cancer policy and priorities
- e. to oversee a dedicated budget for research into cancer
- f. to assist with the implementation of Commonwealth Government policies and programs in cancer control
- g. to provide financial assistance, out of money appropriated by the Parliament, for research mentioned in paragraph (e) and for the implementation of policies and programs mentioned in paragraph (f)
- h. any functions that the Minister, by writing, directs Cancer Australia to perform.



Cancer Australia's overarching strategic priority from 2024–25 to 2027–28 is implementation of the Australian Cancer Plan.

The Australian Cancer Plan is a ten-year national strategic framework to accelerate world-class cancer outcomes and sets a bold agenda to improve the lives of all Australians affected by cancer. It is the culmination of extensive evidence-based consultation across the cancer sector. Implementation of the Plan is a shared responsibility and will require joint efforts from the entire cancer control sector.

The Plan is designed to improve cancer outcomes for all Australians, and particularly for those groups whose health outcomes are poorer. Achieving equity in cancer outcomes and experiences will be a fundamental measure of success for the Plan and will align Australia with global calls to improve cancer outcomes for all people.

The Plan identifies six strategic objectives requiring national leadership and concerted effort to deliver the Plan's vision for world-class cancer outcomes and experiences for all Australians. Each strategic objective has an associated 10-year ambition, 2- and 5- year goals, and supporting actions.

Following its launch in November 2023, Cancer Australia has commenced engaging with the sector to enable the successful implementation of the Plan.

Learn more: australiancancerplan.gov.au

Our key activities

- Provide national leadership in cancer control
- 2 Develop and promote evidence-based best practice cancer care
- Fund cancer research and drive efforts to strength national data capacity in consultation with relevant agencies
- Provide consumer and health professional cancer information and resources

3. Operating context

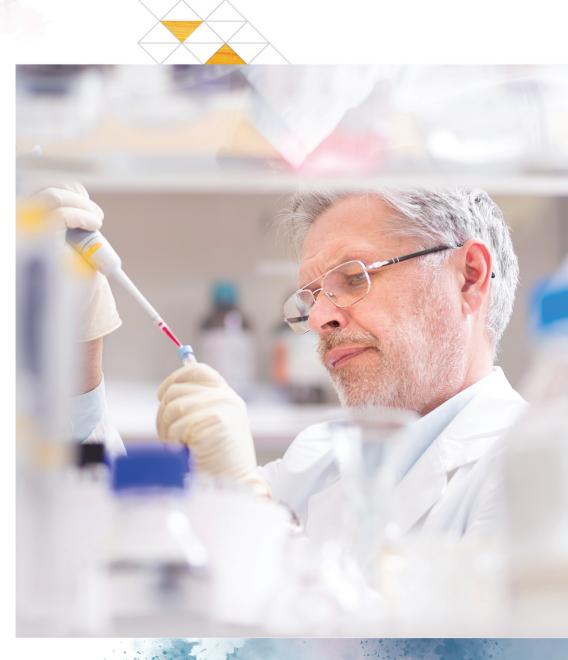
This section describes how the agency will pursue its purpose through its environment, cooperative relationships, key capabilities, risk management and strategies over the period 2024–25 to 2027–28.

3.1 Environment

Cancer is the leading cause of death and burden of disease in Australia^{1,2}, with two in five people being diagnosed by the age of 85.³ In 2023, an estimated 164,694 new cases of cancer will be diagnosed in Australia, excluding basal and squamous cell carcinomas of the skin.³ Australians diagnosed with cancer experience some of the highest cancer survival rates in the world with the five-year relative survival rate for cancer increasing from from 53.3% in 1990–94 to 70.6% in 2015–19.^{3,4} Relative survival rates are anticipated to continue to increase due to improvements in diagnostic methods, earlier detection and advances in treatment. As survival for cancer overall continues to improve, an increasing proportion of the population will require ongoing treatment, support and long-term follow-up care.

- 1 Australian Bureau of Statistics 2022. Causes of Death, Australia. Canberra: ABS; Accessed June 2024; https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/latest-release
- 2 Australian Institute of Health and Welfare 2023. Australian Burden of Disease Study 2023. Cat. no. BOD 39. Canberra: AIHW. Accessed June 2024; https://www.aihw.gov.au/reports/burden-of-disease/australian-burden-of-disease-study-2023/contents/summary
- 3 Australian Institute of Health and Welfare 2023. Cancer data in Australia. Cat. no. CAN 122. Canberra: AIHW. Accessed June 2024; https://www.aihw.gov.au/reports/cancer/cancer-data-in-australia/data
- 4 Allemani C, Matsuda T, Di Carlo V, et al. Global surveillance of trends in cancer survival 2000-14 (CONCORD-3): analysis of individual records for 37 513 025 patients diagnosed with one of 18 cancers from 322 population-based registries in 71 countries. Lancet. 2018;391(10125):1023-1075. doi:10.1016/S0140-6736(17)33326-3

 Arnold M, Rutherford MJ, Bardot A, et al. Progress in cancer survival, mortality, and incidence in seven high-income countries 1995-2014 (ICBP SURVMARK-2): a population-based study. Lancet Oncol. 2019;20(11):1493-1505. doi:10.1016/S1470-2045(19)30456-5







Ongoing disparities in incidence and outcomes across tumour types and population groups remain.

Survival rates for brain cancer, lung cancer and pancreatic cancer remain low in Australia. Between 2015 and 2019, the five-year relative survival for brain cancer was 23.3%, lung cancer was 23.5% and pancreatic cancer was 12.5%, compared to 70.6% for all cancers combined.3

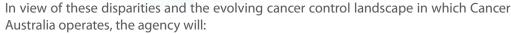
Aboriginal and Torres Strait Islander people, people in socioeconomically disadvantaged areas, and people living in regional and remote Australia continue to experience poorer cancer outcomes. For example:

- Aboriginal and Torres Strait Islander people have a higher rate of cancer diagnosis and are approximately 36% (1.4 times) more likely to die from cancer than non-Indigenous Australians. The gap in cancer incidence and mortality rates between Indigenous and non-Indigenous Australians is widening.⁵
- Cancer mortality rates tend to increase with increasing geographical remoteness.⁶
- Australians living in socioeconomically disadvantaged areas experience higher cancer incidence and mortality rates than those residing in more socioeconomically advantaged areas.6

⁵ Australian Institute of Health and Welfare & National Indigenous Australians Agency 2023. Measure 1.08 Cancer, Aboriginal and Torres Strait Islander Health Performance Framework website. Canberra: AIHW. Accessed June 2024; https://www.indigenoushpf.gov.au/measures/1-08-cancer

⁶ Australian Institute of Health and Welfare 2021, Cancer in Australia 2021, Cancer series no. 133, Cat. no. CAN 144. Canberra: AIHW.





- drive the implementation of the Australian Cancer Plan, elicit cross-sector partnerships and monitor and evaluate progress to deliver better outcomes and experience for all Australians affected by cancer
- co-design and partner to deliver improved Aboriginal and Torres Strait Islander peoples' cancer outcomes and experiences
- support the Department of Health and Aged Care to deliver the National Lung Cancer Screening Program by developing technical materials for the Program
- interpret evidence to inform development and implementation of policies and programs in cancer control
- fund cancer research in areas of identified priority.



3.2 Cooperation

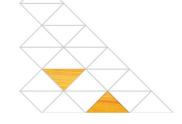
Cancer Australia works collaboratively across the entire cancer control ecosystem, with Australians affected by cancer, health professionals, researchers, policy makers and service providers. The agency is a respected thought leader and trusted collaborator in the sector, both nationally and internationally, and is uniquely positioned to provide robust, world-leading advice to the Australian Government on cancer control priorities.

The Australian Cancer Plan's implementation is a shared responsibility for the sector. In order to achieve its objectives, Cancer Australia is engaging with stakeholders across the sector to ensure buy-in and implementation success.

Cancer Australia works closely with Aboriginal and Torres Strait Islander people to integrate First Nations' perspectives and co-design improved cancer outcomes for Aboriginal and Torres Strait Islander people. It fulfills its statutory obligations to oversee a dedicated budget for cancer research through investing in research capability and addressing emerging priorities for cancer research and data. Cancer Australia also lends its expertise to inform international cancer control activity.

Cancer Australia leverages its stakeholder relationships to cost-effectively harness the most accurate, reliable and up-to-date advice on any cancer issue at short notice.





3.3 Capability

Cancer Australia comprises staff with expertise in a range of areas including public health, public policy, epidemiology, clinical practice, research, data and systems analysis, population health, health communication, accounting, and financial and project management. A high proportion of Cancer Australia staff hold doctorates, masters, and bachelor degrees across a range of disciplines, which supports the agency to deliver on its purpose. Cancer Australia is working in line with the Strategic Commissioning Framework, with our work currently done by our staff.

Cancer Australia continues to give priority to creating a more productive and inclusive workplace. The agency supports a flexible work environment in line with it the 2024-27 Enterprise Agreement and with continued investment in ICT systems and technology to support staff.

Workforce planning

Cancer Australia will continue to strengthen its workforce capacity by providing targeted learning and development programs and enhancing performance feedback.

Information Communication Technology

Cancer Australia actively updates and improves its ICT infrastructure and technology to enhance the efficiency, capability and security of the agency. The agency continues to monitor changes in cyber security, and is committed to implementing updates to enhance cyber security.

The agency's ICT strategy is aligned with the Corporate Plan, internal business plans and whole of government strategies. It also leverages advances within the wider technology environment.

Cancer Australia continues to use secure cloud services to support agile working, improve user experience, and develop reliable services.

Cancer Australia's websites and digital resources

Cancer Australia's has a strong digital presence and is a trusted national source of evidence-based cancer information and resources for health professionals and the community. Cancer Australia's digital presence includes information on cancer types, key statistics, clinical best practice and cancer prevention. It also includes targeted support for priority populations, including First Nations people through Our Mob and Cancer and Yarn for Life, and key cancer control policies, such as the Australian Cancer Plan and the National Pancreatic Cancer Roadmap.

Cancer Australia seeks to continuously improve the functionality and user-experience of its digital information to ensure it is easily accessible by health professionals, consumers, and the community. In 2024-25, Cancer Australia will continue work to enhance the user experience.



3.4 Risk management

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's risk management system aligns with section 16 of the PGPA Act and the Commonwealth Risk Management Policy.

The agency's approach to risk management is documented in Cancer Australia's Risk Management Framework and Plan. Cancer Australia develops and promotes policies to support the Risk Management Framework and provides training to staff in fraud awareness, work health and safety and other areas of risk.

Our Senior Executive Team provides support to the Chief Executive Officer in the strategic management of the agency's risks, through business planning and review processes. The Audit and Risk Committee provides independent advice and assistance to the Chief Executive Officer on the agency's risk control, compliance framework and its external accountability.

Risk management is embedded in all business processes, so risk is managed across the agency at the enterprise, portfolio and project/functional levels. Cancer Australia's risk management framework facilitates a culture that promotes an open and proactive approach to managing risks to all aspects of Cancer Australia's operations.

Key risks and mitigation strategies

Cancer Australia maintains an Enterprise Risk Register where it identifies the agency's strategic, financial and fraud risks, and other risks.

Some of the key risks for the agency include:

- Non-compliance with the Commonwealth legislative framework, PGPA Act and Public Service Act - Cancer Australia is required to comply with a wide range of legislation and reporting requirements. However, the volume and timing of reporting requirements can pose non-compliance risks for a small agency with limited staff. Non-compliance risks are mitigated through a variety of controls including, but not limited to:
 - compliance reviews scheduled to align with reporting obligations;
 rotating internal audits of compliance
 - staff inductions and structured and regular staff training in compliance
 - ownership of compliance processes and procedures
 - clearly identified in the management structure
 - ongoing incorporation of PGPA Act requirements into the agency's standard operating practices and procedures.
- Technical inability to respond to external changes in cancer control the Cancer
 Australia staff is comprised of individuals with deep and significant expertise
 including cancer control; health care delivery; public health; research and data;
 and communications and policy. However, as a small agency with limited staff,
 the ability to respond to technical changes in cancer control while delivering on
 agency functions poses an inherent risk. To mitigate this risk the agency will:
 - draw on expert advisors, establish an advisory structure with expert memberships, and have regular engagement with a range of technical experts
 - build and maintain internal technical knowledge
 - continue to build strong relationships with the Department of Health and Aged Care and affiliate technical agencies, for example the Australian Institute of Health and Welfare and Australian Digital Health Agency.

4. Performance

To measure the agency's achievements against its purpose and key activities over the forward years (2024-25 to 2027-28), performance criteria and targets have been developed.

Cancer Australia regularly reviews and assesses its performance and employs robust internal processes to monitor progress and ensure alignment of effort with the agency's purpose.

The following tables provide performance information for the financial years covered by this Plan. The performance information is aligned with the performance criteria and targets reported in the agency's Portfolio Budget Statements.

Key Activity One:

Provide leadership in cancer control

Measure	Methodology/Data source	Target	2024-25 Target	2025-26 Target	2026-27 Target	2027-28 Target
Lead the implementation of the Austra	lian Cancer Plan					
Australian Cancer Plan Implementation Plan is developed in consultation with the cancer sector.	Stakeholder consultation and review of administrative records (project documentation).	Engage with the cancer sector to communicate and promote uptake of the Plan's objectives, goals and ambitions.	√	√	✓	√
Coordinate the delivery of priority 2-year actions in the Plan.	Stakeholder consultation and review of administrative records (project documentation).	Progress activities to achieve priority 2 year actions in the Plan.	√	√	N/A	N/A
		Undertake evaluation of the sector's progress in delivering on the Plan's 2-year actions.	N/A	✓	N/A	N/A
Coordinate the delivery of priority 5-year actions in the Plan.	Stakeholder consultation and review of administrative records (project documentation).	Progress activities to achieve 5-year actions in the Plan.	√	√	√	√

Measure	Methodology/Data source	Target	2024-25 Target	2025-26 Target	2026-27 Target	2027-28 Target
Drive the implementation of the Austra	alian Brain Cancer Mission to improve ou	tcomes for Australians diagnosed with b	orain cancer			
Initiatives in brain cancer advanced or delivered under the Australian Brain Cancer Mission.	Review of administrative records (project documentation).	Implementation of the Australian Brain Cancer Mission, in collaboration with the Department of Health and Aged Care and other partners.	✓	✓	✓	N/A
Provide technical support to the Depar	tment of Health and Aged Care to design	n and deliver the National Lung Cancer S	creening Pro	gram (NLSCF	P)	
Co-design and implement the National Lung Cancer Screening Program.	Review of administrative records (project documentation).	Collaboratively engage with key stakeholders to develop and deliver Program Guidelines, information and education resources and other clinical materials to support the implementation of the NLCSP.	√	√	√	√
		Commence program-specific research activities.				
Partner with Aboriginal and Torres Stra	nit Islander people to co-design and deliv	ver improved cancer care for Aboriginal	and Torres St	trait Islander	people	
Relevant Australian Cancer Plan actions implemented to ensure mainstream health services are culturally safe and accessible for Aboriginal and Torres Strait	Review of administrative records (project documentation and Leadership Group on Aboriginal and Torres Strait Islander Cancer Control meeting notes).	Priority Aboriginal and Torres Strait Islander cancer control initiatives led and co-designed by Aboriginal and Torres Strait Islander people.				
Islander people. (Improving First Nations Cancer Outcomes budget measure)		Lead delivery of activities to ensure mainstream health services are culturally safe and accessible.	,		√	,
		Award up to 20 cultural safety grants and up to 12 First Nations research grants over a three-year period (2024-25 to 26-27)	√	√	v	√
		Award up to 4 First Nations cancer scholarships annually over a three-year period (2024-25 to 26-27).				

Measure	Methodology/Data source	Target	2024-25 Target	2025-26 Target	2026-27 Target	2027-28 Target
Lead delivery of five early implementa pancreatic cancer.	tion National Pancreatic Roadmap priori	ties to improve the timely detection, ma	nagement a	nd care of pe	ople affected	by
Initiatives for five early implementation National Pancreatic Roadmap priorities delivered.	Review of administrative records (project documentation).	Engage collaboratively with key stakeholders				
		to improve pancreatic cancer care, including exploring the feasibility digitising the Optimal Care Pathway for people with pancreatic cancer and the Optimal Care Pathway for Aboriginal and Torres Strait Islander people to enhance information access and functionality.	✓	N/A	N/A	N/A
		Deliver five National Pancreatic Roadmap implementation priorities.				
Provide leadership internationally in c	ancer control.					
Engage internationally to ensure Australia continues to deliver world class cancer care.	Review of administrative records (project documentation).	Engage collaboratively with international counterparts, including through the World Health Organization's International Agency for Research on Cancer and G7 Cancer.	√	√	√	√

Key Activity Two:

Develop and promote evidence-based best practice cancer care

Measure	Methodology/Data source	Target	2024-25 Target	2025-26 Target	2026-27 Target	2027-28 Target
Lead the development, clinical practice	dissemination, and impl	ementation of evidence-based models of cancer care to support imp	roved patiei	nt outcomes	and safe and s	ustainable
Initiatives undertaken to develop, promote, disseminate and/or implement models of cancer care. Review of administrative records (project documentation).		Complete discovery project to test the feasibility of digitising and integrating the Optimal Care Pathway (OCP) for people with pancreatic cancer and the Optimal Care Pathway for Aboriginal and Torres Strait Islander people to improve information access and functionality.				
	Develop and implement a national framework for Optimal Care Pathways.	\checkmark	\checkmark	\checkmark	\checkmark	
	Develop new OCPs – OCP for Older People with Cancer and OCP for Rarer and Less Common Cancers.					
		Update the OCP for people with lung cancer.				
Translate evidence to in	nform best practice cance	er care				
New and/or updated research evidence and/	/ records (projectd. documentation) and content published	Translate research into evidence-based information to assist and inform policy and cancer care.				
or guidance developed. Develop initiatives for		Develop a policy framework for genomics in cancer control across the cancer care continuum.				
genomics focused- cancer care and research. on Cancer Australia website.	Develop and implement the Australian Comprehensive Cancer Network to bring together cancer services, and existing networks and alliances within and across states and territories to enable collaboration, sharing of expertise, and access to comprehensive cancer care.	✓	√	✓	✓	
Invest in community en initiative	gagement to support evi	idence-based information and support for people affected by cancer	through the	e Supporting	People with C	ancer Grant
Number of community organisations and Aboriginal and	Review of administrative records (project documentation).	Award at least 4 grants (targeting 2 community organisations and 2 Aboriginal and Torres Strait Islander organisations) per annum to improve outcomes and support for people affected by cancer.				
Torres Strait Islander organisations funded to provide information and support for people affected by cancer.			✓	√	✓	✓

Key Activity Three:

Fund cancer research and drive efforts to strengthen national data capacity in consultation with relevant agencies

Measure	Methodology/Data source	Target	2024-25 Target	2025-26 Target	2026-27 Target	2027-28 Target
Oversee a dedicated budget for research into cancer						
Cancer research grants funded in priority areas as per published grant guidelines.	Review of administrative records (project documentation).	Award cancer research grants in areas of identified priority as per published grant guideline timeframes.	√	√	√	√
Support Australia's national Multi-site	Collaborative Cancer Clinical Trials Gro	ups (CTGs)				
CTGs supported as per published grant guidelines.	Review of administrative records (project documentation).	Fund 14 CTGs as per published grant guideline timeframes.		/	√	/
		Providers of 3 national technical services engaged.	√	√	V	
Provide high quality cancer data to inf	orm national cancer control					
Maintain currency of data analyses published on National Cancer Control Indicators (NCCI) website.	Review of administrative records (project documentation and monitoring and reporting NCCI website activities).	Maintain published data analyses and insights on the NCCI website.	✓	✓	✓	✓
Planned initiatives to improve the collection, access, analysis and reporting of national cancer data.	Review of administrative records (project documentation).	Progress initiatives to improve the collection, access, analysis and reporting of national cancer data.	✓	√	√	√
		Partner with Movember to design and embed patient reported experience measures (PREMs) and patient reported outcome measures (PROMs) into national performance monitoring and reporting.	✓	✓	√	✓
Develop and implement a national cancer data framework.	Review of administrative records (project documentation).	National agreement of a national cancer data framework.	√	/	√	
		Implementation of national cancer data framework priority actions.	∨	v	v	

Key Activity Four:

Provide consumer and health professional cancer information and resources

Measure Provide evidence-based cancer informa	Methodology/Data source	Target ponals and the community	2024-25 Target	2025-26 Target	2026-27 Target	2027-28 Target
Maintain currency of statistical and tumour-specific information on Cancer Australia's website www.canceraustralia.gov.au.	Review of administrative records (project documentation and online resources list).	Up-to-date evidence-based cancer information available on the Cancer Australia website.	√	√	√	√
		Cancer information topics are reviewed and updated.				







