



Australian Government
Cancer Australia

National Optimal Care Pathways Framework



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.

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1. Introduction

Cancer care pathways for people affected by cancer are variable and complex, depending on the individual's needs, circumstances, and cancer types. Optimal Care Pathways (OCPs) offer best practice guidance to improve cancer care and outcomes, irrespective of where people live or receive cancer treatment.

A nationally consistent framework for OCPs is needed to standardise the approach to developing, updating, adapting, evaluating, and embedding OCPs into cancer care. This will address the previous inconsistency in the approach to OCPs across jurisdictions. Most importantly, implementation of the Framework will support health professionals and health services to deliver optimal care, and ensure OCPs are available to, and resonate with, people affected by cancer.

The Australian Cancer Plan (the Plan) gives priority to OCPs being integrated as routine cancer care, supported by a National OCP Framework. Strategic Objective 3: 'World class health systems for optimal care' sets out the relevant goals and actions:

	Goal	Action
2-year	Frameworks for high-quality comprehensive health service systems established to deliver better cancer care and improved outcomes.	Develop and implement a national framework that standardises the development, update, evaluation and uptake of Optimal Care Pathways (OCPs), including for priority population groups.
5-year	Networked high-quality comprehensive cancer care systems that deliver optimal cancer care and better outcomes.	Integrate Optimal Care Pathways (OCPs) as routine cancer care using a monitoring and evaluation system that links the implementation of OCPs to patient outcomes and experience.
10-year Ambition	Integrated, coordinated, data-driven, high-quality health service systems that consistently deliver optimal cancer care and excellence in outcomes.	

The National OCP Framework will also support progress on other priorities across all the Plan's Strategic Objectives:

- Strategic Objective 1: 'Maximising cancer prevention and early detection'
- Strategic Objective 2: 'Enhanced consumer experience'
- Strategic Objective 3: 'World class health systems for optimal care'
- Strategic Objective 4: 'Strong and dynamic foundations'
- Strategic Objective 5: 'Workforce to transform the delivery of cancer care'
- Strategic Objective 6: 'Achieving equity in cancer outcomes for Aboriginal and Torres Strait Islander people'.

The National OCP Framework is intended for service planners, policy makers and OCP developers to understand the standards for OCP development and update, and the strategies employed to enhance equitable access to care through OCPs. It outlines the governance of new and updated OCPs, including the use of the [OCP Toolkit](#) to improve standardisation and the importance of a project team and a Multidisciplinary Expert Working Group to develop or update an OCP. Importantly, national endorsement of new and updated OCPs will sit with the Cancer and Population Screening Committee (CAPS) following advice from Cancer Australia's National Cancer Expert Group (NCEG).

The National OCP Framework refers to OCPs as the suite of OCP resources, including the OCP in its full version and supporting resources for consumers, and health professionals and health services.

National Optimal Care Pathways Framework Summary

Vision

The integration of Optimal Care Pathways (OCPs) into clinical practice as the standard of cancer care, ensuring cultural safety and accessibility throughout the cancer journey, improving equity in cancer care and outcomes for all Australians.

Principles

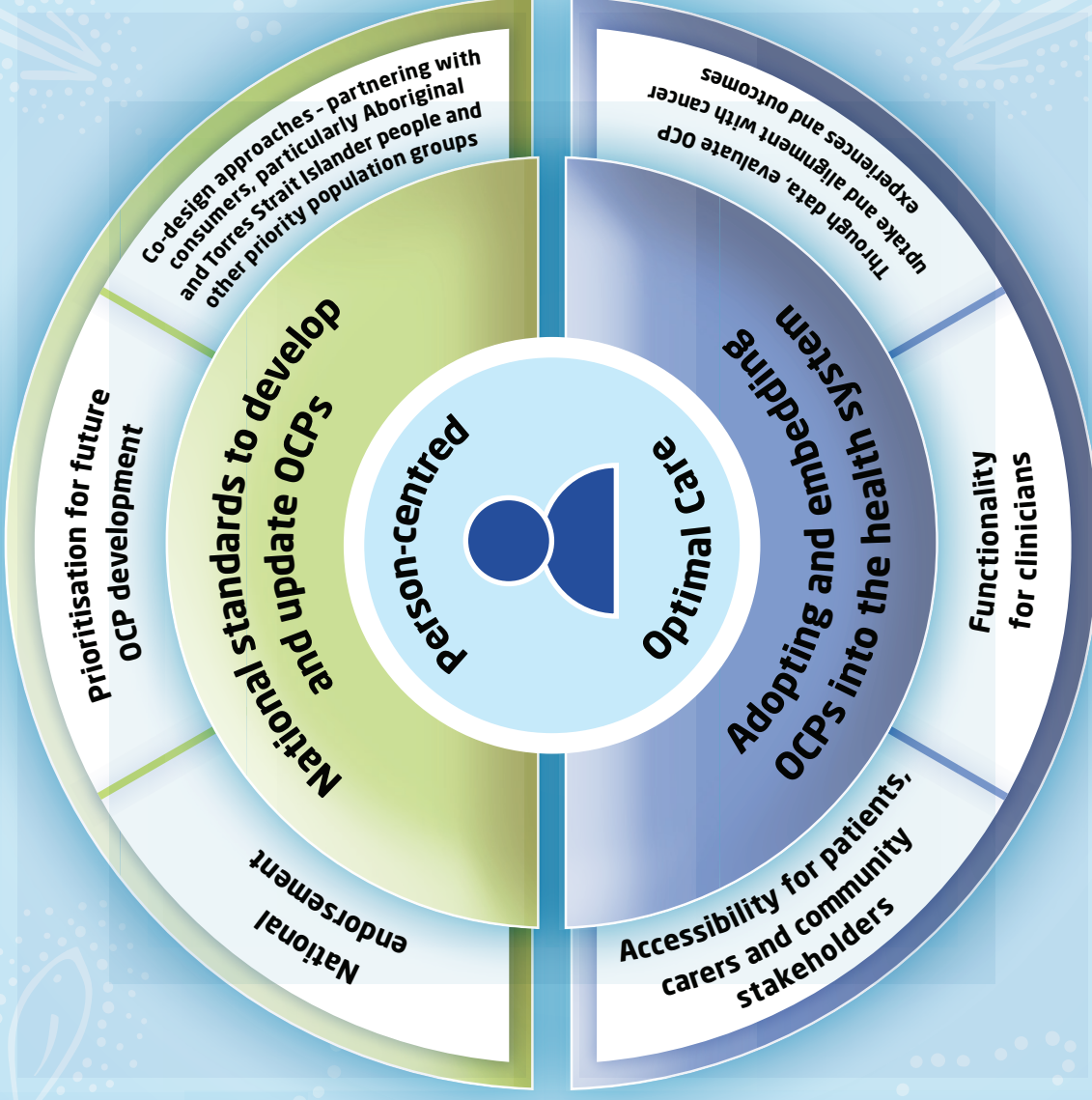
- Equity**
 The National OCP Framework is developed to improve equity in cancer outcomes for Aboriginal and Torres Strait Islander people and priority population groups whose outcomes are poorer.
- Future-focused**
 The National OCP Framework considers emerging needs and opportunities, so that its components are applicable to both current and future OCPs, regardless of who is creating them and the cancer type or priority population group.
- Person-centred**
 The National OCP Framework is designed to support the OCPs to resonate with all people affected by cancer.
- Collaborative**
 The National OCP Framework promotes system-wide collaboration across the healthcare system, involving cancer services, policy makers, service planners, primary health networks, peak bodies, colleges, associations and societies, consumers, including carers, families and community to support the OCPs to be adopted and embedded into the health system.

Who is the OCP Framework For?

The National OCP Framework is intended for service planners, policy makers and OCP developers to understand the standards for OCP development and the strategies employed to enhance equitable access to care through OCPs.

What are OCPs?

- OCPs are guides to best practice care across the whole cancer continuum.
- OCPs outline consistent, safe, high-quality, and evidence-based care for people with cancer.
- OCPs are designed to be used in conjunction with clinical guidelines, ensuring a comprehensive approach to cancer care.
- Relevant to every step along the cancer continuum, OCPs aim to improve cancer care and outcomes, irrespective of where people live or receive cancer treatment.
- OCPs provide recommendations across seven key stages along the cancer continuum. While these steps are presented in a linear model, it is essential to acknowledge that patient care may not follow a linear path but instead adapts to individual circumstances and needs.
- OCPs should be read and understood by all those involved in cancer care. This includes clinicians, allied health professionals, managers of cancer services, consumers and carers.



Comprehensive Data Capture

- Improved data collection to inform OCP evaluation and drive quality improvements.

Comprehensive Cancer Care

- Adherence to OCPs will be a requirement for participation in the Australian Comprehensive Cancer Network (ACCN) ensuring OCPs are embedded into clinical practice across jurisdictions and networks to deliver comprehensive cancer care.



2. Vision

The integration of OCPs into clinical practice as the standard of cancer care, ensuring cultural safety and accessibility throughout the cancer journey, improving equity in cancer care and outcomes for all Australians.

3. What are OCPs?

OCPs are guides to best practice care across the whole cancer continuum. OCPs outline consistent, safe, high-quality, and evidence-based care for people with cancer. They aim to improve patient outcomes by setting the benchmark for quality cancer care and ensuring that all people affected by cancer receive the best care, irrespective of who they are or where they live.

OCPs map nationally agreed best practice approaches for cancer types and population groups across the cancer care continuum, placing patients at the centre of care. Population-based OCPs are designed to be used in conjunction with cancer specific OCPs, resulting in a tailored optimal care pathway.

The pathway describes the optimal cancer care that should be provided at the seven key steps along the cancer continuum:

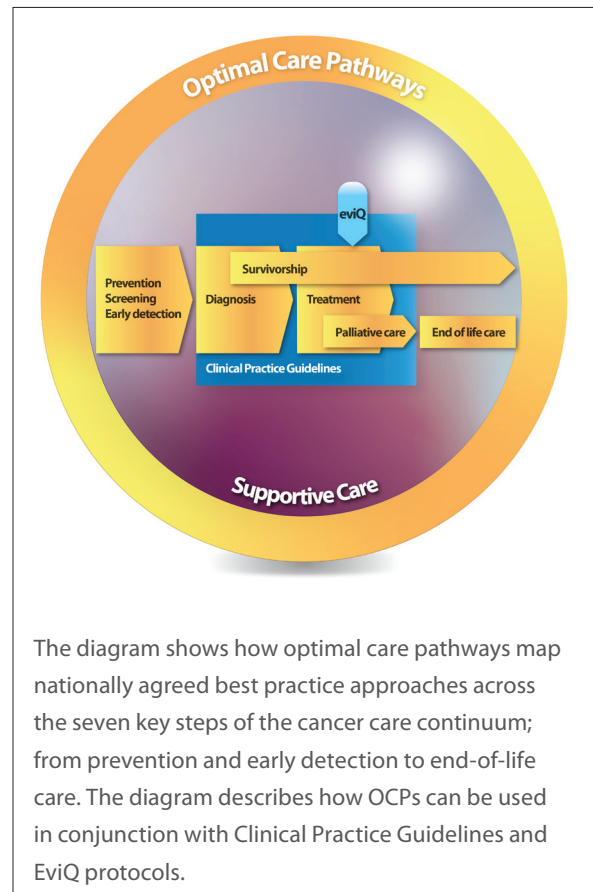
1. Prevention and early detection
2. Presentation, initial investigations and referral
3. Diagnosis, staging and treatment planning
4. Treatment
5. Care after initial treatment and recovery
6. Managing recurrent, residual or metastatic disease
7. End-of-life care.

While these steps are presented in a linear model, it is essential to acknowledge that patient care may not follow a linear path but instead adapts to individual circumstances and needs. Additionally, a person may present at any stage along the cancer continuum.

There are seven key principles of optimal cancer care that underpin the guidance provided in the pathway and remain central to the delivery of quality care throughout the patient experience including:

- Patient-centred care.
- Safe and quality care.
- Multidisciplinary care.
- Supportive care.
- Care coordination.
- Communication.
- Research and clinical trials.

For some populations, there may be additional and unique principles that need to be considered in planning care.



The diagram shows how optimal care pathways map nationally agreed best practice approaches across the seven key steps of the cancer care continuum; from prevention and early detection to end-of-life care. The diagram describes how OCPs can be used in conjunction with Clinical Practice Guidelines and EviQ protocols.

OCPs are designed to be used in conjunction with clinical guidelines and [EviQ](#) protocols ensuring a comprehensive approach to cancer care. The table below outlines the characteristics of each.

OCPs	Clinical Guidelines	eviQ Protocols
Nationally endorsed cancer care pathways with standards of cancer care that all Australians should expect.	Systematically developed evidence-based statements and recommendations to assist practitioners with decisions about appropriate health care for patients in specific clinical circumstances	Evidence-based, consensus driven cancer treatment protocols and information for use for the individual patient once the protocol has been decided at the point of care in the Australian context.
Cover the entire cancer continuum	May be specific to steps of the cancer care pathway	Specific to the treatment step of the cancer pathway
Underpinned by seven principles of best practice cancer care. Include agreed referral protocols between the multidisciplinary care team; timeframes for cancer care and referrals; and practical support available to patients	Summarise the current medical knowledge to guide clinical care	Support health professionals in the safe delivery of cancer treatments
For policy makers, health professionals, health services and consumers (consumer guide)	For health professionals	For health professionals and consumers (patient information sheets)
Based on known evidence (including Clinical Guidelines), professional expertise/experience and consensus from an expert working group.	Based on the best available evidence derived from a systematic review of available data. Information is rapidly changing with new evidence.	Based on the highest level of available evidence and consensus of the eviQ reference committee regarding their views of currently accepted protocols for defined cancer treatments.
Important in reducing unwarranted variation in cancer care and used for benchmarking health systems.	Important in improving the quality of health care and decreasing the use of unnecessary, ineffective or harmful interventions.	Important in delivery of safe high quality cancer treatments.

OCPs should be available to and understood by all those involved in cancer care. This includes primary and tertiary care clinicians and administrators, allied health professionals, other multidisciplinary health professionals, consumers, and carers. Currently, in most cases, there are three resources for each pathway:

- **OCPs** for health professionals and health services (full version – up to 100 pages)
- **Quick Reference Guide** for health professionals and health services (summary versions – 2 pages)
- **Guide to Best Cancer Care** for people affected by cancer ('Consumer guides').

OCPs are available at: canceraustralia.gov.au/optimal-cancer-care-pathways.

4. Principles of the National OCP Framework

- **Equity:** The National OCP Framework is developed to improve equity in cancer outcomes for Aboriginal and Torres Strait Islander people and priority population groups whose outcomes are poorer.
- **Future-focused:** The National OCP Framework considers emerging needs and opportunities, so that its components are applicable to both current and future OCPs, regardless of who is creating them and the cancer type or priority population group.
- **Person-centred:** The National OCP Framework is designed to support the OCPs to resonate with all people affected by cancer.
- **Collaborative:** The National OCP Framework promotes system-wide collaboration across the healthcare system, involving cancer services, policy makers, service planners, primary health networks, peak bodies, colleges, associations and societies, consumers, including carers, families and community to support the OCPs to be adopted and embedded into the health system.

5. Elements of the National OCP Framework

The Framework has two key domains focusing on a national standardised approach to OCP development and adopting and embedding OCPs into the health system.

5.1 National standards to develop and update OCPs

OCPs maintain integrity and credibility through a standardised approach to development and update ensuring OCP consistency and quality.

National standards

The national standards to develop and update OCPs (guided by the Cancer Council's [OCP Toolkit](#)) include:

- Use of best practice co-design approaches to authentically involve relevant diverse stakeholders as partners in priority setting and development.
 - Co-design refers to working collaboratively in ways that enable and value equal leadership, reciprocity and shared decision making across all stages of the process.
 - There are [culturally-grounded principles and best practices](#) to guide co-design with and for Aboriginal and Torres Strait Islander communities. Co-design is critical to upholding self-determination and achieving culturally safe care and equitable outcomes for Aboriginal and Torres Strait Islander peoples, aligned to the [National Agreement on Closing the Gap](#).
- Inclusion of the consumer voice and the lived experience of people affected by cancer.
- Embedding health literacy into the development of consumer OCP resources and promotional materials.
- Inclusion of the identification of Aboriginal and Torres Strait Islander status; for collection at all stages of the cancer continuum if not automatically communicated.
- Identification of key performance indicators for OCPs (see section 5.2).
- Specified governance arrangements for OCPs (see section 7).
- Engagement and consultation with the cancer sector and public consultation regarding new and updated OCPs.

ⁱ Consumer engagement informs broader community engagement. It refers to consumers being involved in their own health care, planning and developing health policies, service planning, contributing to research and clinical trials, implementation and evaluation. It is a broad term to cover the range of activities used by governments, organisations and individuals to involve consumers in activities of cancer control.

- Guidelines for the development of new OCPs.
- Guidelines for the review and update of existing OCPs, including:
 - OCP review and update every three years and/or following significant changes to cancer care or care for population groups.
- Guidelines for awareness and promotion of OCP.

Prioritisation

OCPs are developed by a range of stakeholders who adhere to national standards. To support prioritisation of resources for OCP development, priority is given to:

- Development of new population based OCPs for the priority population groups identified in the Australian Cancer Plan (and where a population-based OCP does not yet exist) including:
 - People living in rural and remote areas
 - Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, and Asexual (LGBTIQI+) people
 - People from Culturally and Linguistically Diverse (CALD)
 - People living with disability
 - People living in lower socioeconomic groups
 - People living with a mental illness
 - Older Australians
 - Children
- Development and update of cancer specific OCPs for cancers with high incidence and/or mortality rates and/or poorer outcomes.
 - this may include development of new OCPs for cancers that are not part of the existing suite, where the broad value to the community of this investment can be demonstrated; and
 - updates to existing OCPs, particularly where this may improve outcomes for Aboriginal and Torres Strait Islander people and for other identified priority population groups.
- Development of OCPs aligned to current and emerging government strategies and priorities.
 - Development of an OCP for rare cancers.

National Endorsement

The Cancer and Population Screening (CAPS) Committee will endorse new and updated OCPs following advice from Cancer Australia's National Cancer Expert Group (NCEG) and will support their wider dissemination and application across jurisdictions.

NCEG provides advice, guidance and expertise on cancer control matters of national interest to Cancer Australia. NCEG supports early implementation priorities of the Australian Cancer Plan and on request, advises the Cancer and Population Screening (CAPS) Committee through Cancer Australia's CEO.

5.2 Adopting and embedding OCPs into the health system

Supporting OCPs to be effectively adopted and embedded into the health system will set the benchmark for quality care.

Achieving this aim will be a shared responsibility across the cancer control sector and involve a multifaceted approach, with action by the Australian Government, state and territory governments, non-government organisations, health service providers, clinicians, Aboriginal and Torres Strait Islander Community Controlled Health services and organisations, and the education and training sector.

One key vehicle to support the uptake of OCPs as the standard of cancer care throughout Australia will be the [Australian Comprehensive Cancer Network \(ACCN\)](#). The ACCN, anchored by Comprehensive Cancer Centres (CCCs) as centres of excellence, will provide strategic leadership and drive excellence in cancer care across the sector and will improve equitable access to cancer care by creating and strengthening linkages and sharing expertise between CCCs and other cancer services, primary and community care across Australia.

Focus areas to ensure OCPs are adopted and embedded into the health system are outlined below.

Improving accessibility of OCPs for patients, carers and community stakeholders

This will include:

- Ensuring consumers have access to OCP resources throughout their cancer care experience. This may include hard copy and digital OCP resources. Informed patients (guided by the OCP and supported by their care team) can be advocates for best practice care.
- Ensuring that health information is clear, focused and useable by integrating health literacy principles into consumer OCP resources and promotional material.
- Digitising OCPs, to allow a more personalised experience for consumers as they will be able to access all OCPs suitable to their needs and read customised information relevant to them.
- Care navigation models aligning to OCPs to support consumers access appropriate and timely care across all settings and episodes of care, in a manner and location that best suits them.
- Harnessing established consumer networks and Non-Government Organisations (NGOs) in the awareness and promotion of OCPs.

Improving functionality of the OCPs for clinicians

This will include:

- Digitising OCPs to make them more accessible for clinicians across OCPs, and within the specific steps of the pathway, allowing a more tailored experience, so clinicians can efficiently navigate to the right information.
- Embedding the OCPs into existing clinical workflows, including integrating and promoting their use within local and jurisdictional tertiary and primary care pathways (such as Health Pathways).
- Incorporating cancer specific and population based OCPs into clinical education, including oncology education, training and continuing professional development programs within universities and professional colleges. This will involve integrating OCPs within relevant programs, rather than isolated streams.

Using data to evaluate OCP uptake and alignment with cancer experiences and outcomes

OCPs offer a powerful approach to improving cancer care delivery. They outline best practice and by adhering to OCPs service providers are guided to reduce unwarranted variations in care by ensuring patients receive consistent, evidence-based treatment regardless of location or provider. To maximise impact, OCPs need to be integrated into routine cancer care with a robust monitoring and evaluation system. By measuring the performance of a health service against the OCPs, improvements to healthcare systems can be identified to achieve optimal care and drive better and equitable patient outcomes.

When developing OCPs, consideration should be given to the quality indicators required to measure their application within health services and to drive optimal care.

By implementing data-driven systems to embed optimal care, OCPs can become a cornerstone for delivering high-quality, consistent cancer care across Australia, ultimately leading to better patient outcomes.

6. Evaluation

Implementation of the Framework is a shared responsibility across the cancer control sector, including the Australian Government, state and territory governments, non-government organisations, health service providers, clinicians, Aboriginal and Torres Strait Islander Community Controlled Health Services and organisations, and the education and training sector.

The impact of the OCPs being integrated as national routine cancer care, supported by the National OCP Framework, will be evaluated in the context of the broader evaluation of the Australian Cancer Plan after 2, 5 and 10 years.

7. Governance arrangements

National OCP Framework

The National OCP Framework has been developed by Cancer Australia in consultation with the cancer control sector. The Framework will be periodically reviewed by Cancer Australia which will provide advice through NCEG to CAPS.

Optimal Care Pathways

Governance for the development of new and updated OCPs (per the [OCP Toolkit](#)) includes:

- A project team responsible for project coordination, development and oversight of the day-to-day deliverables of the project plan, ongoing progress, risk mitigation, budget, milestones and reporting.
- A multidisciplinary Expert Working Group comprising cancer type/ population group experts and relevant disciplines, population groups, and consumers; with representation across both public and private systems, and metro, regional and rural services across different jurisdictions.
- Early targeted consultation for development of new OCPs and update of OCPs with relevant stakeholders of cancer/population specific OCPs including people affected by cancer, relevant peak bodies, clinicians, and service providers.

- Public consultation with relevant stakeholders such as cancer services, Primary Health Networks, relevant committees and networks, consumer organisations, peak bodies, professional colleges and societies.
 - National public consultation for development of new OCPs
 - National or targeted public consultation for update of OCPs, dependent on nature and scale of update
- Targeted consultation and promulgation on new and updated OCPs with Cancer Australia's Advisory Groups and peak bodies.
- National endorsement by CAPS (following advice from Cancer Australia's NCEG).