

# Performance Agreement 2023-24

An agreement between the  
Secretary, NSW Health and the  
Cancer Institute NSW

for the period 1 July 2023 - 30 June 2024



# NSW Health Performance Agreement – 2023-24

## Principal purpose

The principal purpose of the Performance Agreement is to set out the service and performance expectations for funding and other support provided to the Cancer Institute NSW (the Organisation), to support the provision of equitable, safe, high quality and human-centred healthcare services.

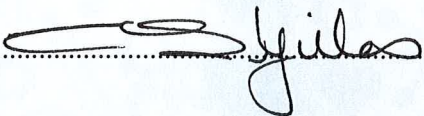
The agreement articulates direction, responsibility and accountability across the NSW Health system for the delivery of NSW Government and NSW Health priorities. Additionally, it specifies the service delivery and performance requirements expected of the Organisation that will be monitored in line with the *NSW Health Performance Framework*.

Through execution of the agreement, the Secretary agrees to provide the funding and other support to the Organisation as outlined in this Performance Agreement.

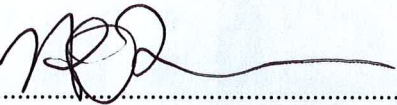
## Parties to the agreement

### The Organisation

Adjunct Associate Professor Christine Giles  
Chair  
On behalf of the  
Cancer Institute NSW Board

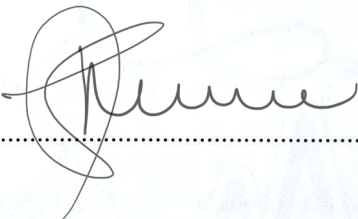
Date 19/10/23 Signed 

Professor Tracey O'Brien  
Chief Executive  
Cancer Institute NSW

Date 19/10/23 Signed 

### NSW Health

Ms Susan Pearce AM  
Secretary  
NSW Health

Date 26/10/23 Signed 

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# 1. Legislation, governance and performance framework

## 1.1 Legislation

The *Health Services Act 1997* (the Act) provides a legislative framework for the public health system, including the establishment of Statutory Health Corporations to enable certain health services and health support services to be provided within the State other than on an area basis (s.11). The Cancer Institute NSW is a Board governed organisation established under the *Cancer Institute (NSW) Act 2003*. Chapter 10 (Administration of the public health system) of the *Health Services Act 1997* extends to the Cancer Institute NSW as if it were a statutory health corporation.

Under the Act the Health Secretary's functions include: the facilitation of the achievement and maintenance of adequate standards of patient care within public hospitals, provision of governance, oversight and control of the public health system and the statutory health organisations within it, as well as in relation to other services provided by the public health system, and to facilitate the efficient and economic operation of the public health system (s.122).

## 1.2 Ministerial Determination of Functions

The Performance Agreement recognises that the Cancer Institute NSW has a defined role and set of functions as articulated in the *Cancer Institute (NSW) Act 2003*.

### **Objectives of the Cancer Institute NSW**

- a) to increase the survival rate for cancer patients,
- b) to reduce the incidence of cancer in the community,
- c) to improve the quality of life of cancer patients and their carers,
- d) to operate as a source of expertise on cancer control for the government, health service providers, medical researchers and the general community.

### **Functions of the Cancer Institute NSW**

- to undertake, commission or sponsor cancer-related research and development,
- to facilitate collaboration and cooperation between bodies involved in cancer-related research and development
- to foster and support best practice in, and an evidence-based approach to, cancer control, including participating in the development, evaluation, recommendation or endorsement of guidelines, protocols and practices for cancer control,
- to review, monitor, evaluate and recommend improvements to cancer-related programs and proposed initiatives in the public health system in relation to cancer control,
- to facilitate improvements in the effectiveness of cancer control and to develop or endorse strategies to achieve such improvements,
- to review, develop or commission innovative programs for cancer control,
- to develop, in conjunction with the Ministry of Health and public health organisations, a State Cancer Plan,
- to advise and make recommendations to the Minister on the manner in which that portion of the money appropriated from the Consolidated Fund in any financial year to the Minister for Health, and which the Minister for Health has specifically designated to be administered by the Cancer Institute NSW, is to be expended,

- to advise the Minister and the Secretary on such matters in relation to cancer control as may be required by the Minister or the Secretary from time to time,
- to undertake the assessment of any cancer control service or program in the public health system as may be required by the Minister for Health or the Secretary from time to time and to report to the Minister for Health or the Secretary on the outcome of that assessment,
- to obtain, collate, maintain and analyse information relating to cancer control,
- to disseminate information and advice about cancer control,
- to provide training and education relevant to cancer control,
- to consult, collaborate and cooperate with public health organisations, consumers, health professionals, government agencies, non-government organisations and other persons or bodies involved in cancer control,
- to exercise such other functions in relation to cancer control as may be prescribed by the regulations.

**In exercising its functions, the Cancer Institute NSW is to have regard to the following principles:**

- effective cancer control requires partnership between the public sector, the private sector and the general community,
- resources available for cancer control should be applied so as to maximise the benefit of those resources to the greatest number of people in the most expeditious, efficient and effective manner,
- there should be an equitable, evidence-based, seamless, patient-centred approach to the care and treatment of cancer patients,
- there should be timely, high quality, co-ordinated and multi-disciplinary care available for all cancer patients, with a focus on improving accessibility irrespective of geographic location, including appropriate networking of cancer-related services,
- there should be specific accountability for public funds applied by the Cancer Institute NSW to new cancer control activities,
- there should be co-operation between State and national bodies engaged in cancer control,
- links between cancer control bodies in New South Wales and relevant bodies operating or located interstate or overseas should be developed or enhanced,
- up to date information about cancer control should be publicly available and easily accessible,
- cancer-related research activities should be developed in a manner that maximises gains and builds optimal research depth in NSW.

### 1.3 Variation of the agreement

The Agreement may be amended at any time by agreement in writing between the Organisation and the NSW Ministry of Health.

The Agreement may also be varied by the Secretary or the Minister in the exercise of their general powers under the Act, including determination of the role, functions and activities of support organisations.

Any updates to finance or activity information further to the original contents of the Agreement will be provided through separate documents that may be issued by the Ministry of Health in the course of the year.



## 1.4 Conditions of Subsidy

The Organisation is required to comply with the various Conditions of Subsidy set out in *Financial Requirements and Conditions of Subsidy (Government Grants)*.

## 1.5 Governance

The Organisation must ensure that all applicable duties, obligations and accountabilities are understood and complied with, and that services are provided in a manner consistent with all NSW Health policies, procedures, plans, circulars, inter-agency agreements, Ministerial directives and other instruments and statutory obligations.

### 1.5.1 Clinical governance

NSW public health services are accredited against the *National Safety and Quality Health Service Standards*.

The *Australian Safety and Quality Framework for Health Care* provides a set of guiding principles that can assist health services with their clinical governance obligations.

The NSW Health *Patient Safety and Clinical Quality Program* (PD2005\_608) provides an important framework for improvements to clinical quality.

### 1.5.2 Corporate governance

The Organisation must ensure services are delivered in a manner consistent with the *NSW Health Corporate Governance and Accountability Compendium*.

### 1.5.3 Procurement governance

The Organisation must ensure procurement of goods and services complies with *NSW Health Procurement* policy (PD2022\_020).

### 1.5.4 Aboriginal Procurement Policy

The NSW Government supports employment opportunities for Aboriginal people, and the sustainable growth of Aboriginal businesses by driving demand via government procurement of goods, services and construction. NSW Government agencies must apply the *Aboriginal Procurement Policy* to all relevant procurement activities.

### 1.5.5 Public health emergency preparedness and response

The Organisation must comply with standards set out in *Public Health Emergency Response Preparedness Minimum Standards* (PD2019\_007) and adhere to the roles and responsibilities set out in *Early Response to High Consequence Infectious Disease* (PD2023\_008)

### 1.5.6 Performance Framework






Performance Agreements are a central component of the NSW Health Performance Framework which documents how the Ministry of Health monitors and assesses the performance of public sector health services to achieve expected service levels, financial performance, governance and other requirements.

## 2. Strategic priorities

The delivery of NSW Health strategies and priorities is the responsibility of the Ministry of Health, health services and support organisations. These are to be reflected in the strategic, operational and business plans of these entities.

### 2.1 Future Health: Strategic Framework

The *Future Health Strategic Framework* is the roadmap for the health system to achieve NSW Health's vision.

Strategic outcomes	Key objectives
 <p><b>Patients and carers have positive experiences and outcomes that matter:</b> People have more control over their own health, enabling them to make decisions about their care that will achieve the outcomes that matter most to them.</p>	<ol style="list-style-type: none"> <li>1.1 Partner with patients and communities to make decisions about their own care</li> <li>1.2 Bring kindness and compassion into the delivery of personalised and culturally safe care</li> <li>1.3 Drive greater health literacy and access to information</li> <li>1.4 Partner with consumers in co-design and implementation of models of care</li> </ol>
 <p><b>Safe care is delivered across all settings:</b> Safe, high quality reliable care is delivered by us and our partners in a sustainable and personalised way, within our hospitals, in communities, at home and virtually.</p>	<ol style="list-style-type: none"> <li>2.1 Deliver safe, high quality reliable care for patients in hospital and other settings</li> <li>2.2 Deliver more services in the home, community and virtual settings</li> <li>2.3 Connect with partners to deliver integrated care services</li> <li>2.4 Strengthen equitable outcomes and access for rural, regional and priority populations</li> <li>2.5 Align infrastructure and service planning around the future care needs</li> </ol>
 <p><b>People are healthy and well:</b> Investment is made in keeping people healthy to prevent ill health and tackle health inequality in our communities.</p>	<ol style="list-style-type: none"> <li>3.1 Prevent, prepare for, respond to and recover from pandemic and other threats to population health</li> <li>3.2 Get the best start in life from conception through to age five</li> <li>3.3 Make progress towards zero suicides recognising the devastating impact on society</li> <li>3.4 Support healthy ageing ensuring people can live more years in full health and independently at home</li> <li>3.5 Close the gap by prioritising care and programs for Aboriginal people</li> <li>3.6 Support mental health and wellbeing for our whole community</li> <li>3.7 Partner to address the social determinants of ill health in our communities</li> <li>3.8 Invest in wellness, prevention and early detection</li> </ol>
 <p><b>Our staff are engaged and well supported:</b> Staff are supported to deliver safe, reliable person-centred care driving the best outcomes and experiences.</p>	<ol style="list-style-type: none"> <li>4.1 Build positive work environments that bring out the best in everyone</li> <li>4.2 Strengthen diversity in our workforce and decision-making</li> <li>4.3 Empower staff to work to their full potential around the future care needs</li> <li>4.4 Equip our people with the skills and capabilities to be an agile, responsive workforce</li> <li>4.5 Attract and retain skilled people who put patients first</li> <li>4.6 Unlock the ingenuity of our staff to build work practices for the future</li> </ol>
 <p><b>Research and innovation, and digital advances inform service delivery:</b> Clinical service delivery continues to transform through health and medical research, digital technologies, and data analytics.</p>	<ol style="list-style-type: none"> <li>5.1 Advance and translate research and innovation with institutions, industry partners and patients</li> <li>5.2 Ensure health data and information is high quality, integrated, accessible and utilised</li> <li>5.3 Enable targeted evidence-based healthcare through precision medicine</li> <li>5.4 Accelerate digital investments in systems, infrastructure, security and intelligence</li> </ol>
 <p><b>The health system is managed sustainably:</b> The health system is managed with an outcomes-focused lens to deliver a financially and environmentally sustainable future.</p>	<ol style="list-style-type: none"> <li>6.1 Drive value based healthcare that prioritises outcomes and collaboration</li> <li>6.2 Commit to an environmentally sustainable footprint for future healthcare</li> <li>6.3 Adapt performance measurement and funding models to targeted outcomes</li> <li>6.4 Align our governance and leaders to support the system and deliver the outcomes of Future Health</li> </ol>

The framework is a reflection of the aspirations of the community, our patients, workforce and partners in care for how they envisage our future health system. The Strategic Framework and delivery plans will guide the next decade of care in NSW from 2022-32, while adapting to and addressing the demands and challenges facing our system. There will be specific activities for the Ministry of Health, health services and





support organisations to deliver as we implement the Future Health strategy, and services should align their strategic, operational and business plans with these Future Health directions.

## 2.2 Regional Health Strategic Plan 2022-32



The Regional Health Strategic Plan (the Plan) outlines NSW Health’s strategies to ensure people living in regional, rural and remote NSW can access high quality, timely healthcare with excellent patient experiences and optimal health outcomes. The Plan aims to improve health outcomes for regional, rural and remote NSW residents over the next decade of, from 2022 to 2032.

Regional NSW encompasses all regional, rural and remote areas of NSW. There are nine regional local health districts in NSW: Central Coast, Far West, Hunter New England, Illawarra Shoalhaven, Mid North Coast, Murrumbidgee, Northern NSW, Southern NSW and Western NSW. Some areas of other local health districts may also be considered regional for the purpose of the plan such as South Western Sydney and Nepean Blue Mountains. The Regional Health Strategic Plan is also supported by the metropolitan local health districts and by the Specialty Health Networks which have patients in many regional locations.

The Regional Health Plan Priority Framework outlines a suite of targets for each Strategic Priority, to be achieved in the first time horizon of the Plan (years 1-3)

PRIORITIES	KEY OBJECTIVES
 <p><b>1. Strengthen the regional health workforce:</b> Build our regional workforce; provide career pathways for people to train and stay in the regions; attract and retain healthcare staff; address culture and psychological safety, physical safety and racism in the workplace.</p>	<p>1.1 <b>Invest in and promote rural generalism</b> for allied health professionals, nurses and doctors</p> <p>1.2 <b>Prioritise the attraction and retention</b> of healthcare professionals and non-clinical staff in regional NSW</p> <p>1.3 <b>Tailor and support career pathways for Aboriginal health staff</b> with a focus on recruitment and retention</p> <p>1.4 <b>Expand training and upskilling opportunities, including across borders</b> to build a pipeline of regionally based workers</p> <p>1.5 <b>Accelerate changes to scope of practice whilst maintaining quality and safety</b>, encouraging innovative workforce models and recognition of staff experience and skills</p> <p>1.6 <b>Nurture culture, psychological and physical safety</b> in all NSW Health workplaces and build positive work environments that allow staff to thrive</p>
 <p><b>2. Enable better access to safe, high quality and timely health services:</b> Improve transport and assistance schemes; deliver appropriate services in the community; continue to embed virtual care as an option to complement face-to-face care and to provide multidisciplinary support to clinicians in regional settings.</p>	<p>2.1 <b>Improve local transport solutions and travel assistance schemes</b>, and address their affordability, to strengthen equitable access to care</p> <p>2.2 <b>Deliver appropriate services in the community</b> that provide more sustainable solutions for access to healthcare closer to home</p> <p>2.3 <b>Leverage virtual care</b> to improve access, whilst ensuring cultural and digital barriers are addressed</p> <p>2.4 <b>Enable seamless cross-border care and streamline pathways to specialist care</b> ensuring access to the best patient care regardless of postcode</p> <p>2.5 <b>Drive and support improved clinical care, safety and quality outcomes</b> for patients in hospitals and other settings</p> <p>2.6 <b>Align infrastructure and sustainable service planning</b> around the needs of staff and communities and to enable virtual care</p>
 <p><b>3. Keep people healthy and well through prevention, early intervention and education:</b> Prevent some of the most significant causes of poor health by working across government, community, and other organisations to tackle the social determinants of health; prepare and respond to threats to population health.</p>	<p>3.1 <b>Address the social determinants of health</b> in our communities by partnering across government, business and community</p> <p>3.2 <b>Invest in mental health and make progress towards zero suicides</b></p> <p>3.3 <b>Invest in maternity care and early childhood</b> intervention and healthcare to give children the best start in life</p> <p>3.4 <b>Invest in wellness, prevention and early detection</b></p> <p>3.5 <b>Prevent, prepare for, respond to, and recover from pandemics</b> and other threats to population health</p>
 <p><b>4. Keep communities informed, build engagement, seek feedback:</b> Provide more information to communities about what health services are available and how to access them; empower the community to be involved in how health services are planned and delivered; increase responsiveness to patient experiences.</p>	<p>4.1 <b>Encourage choice and control over health outcomes</b> by investing in health literacy, awareness of services and access to information</p> <p>4.2 <b>Engage communities through genuine consultation and shared decision-making</b> in design of services and sustainable local health service development</p> <p>4.3 <b>Support culturally appropriate care and cultural safety</b> for zero tolerance for racism and discrimination in health settings</p> <p>4.4 <b>Capture patient experience and feedback</b> and use these insights to improve access, safety and quality of care</p> <p>4.5 <b>Improve transparency of NSW Health decision-making</b> and how it is perceived and understood by patients and the community</p>



PRIORITIES	KEY OBJECTIVES
 <p><b>5. Expand integration of primary, community and hospital care:</b> Roll out effective, sustainable integrated models of care through collaboration between Commonwealth and NSW Government and non-Government organisations to drive improved access, outcomes and experiences.</p>	<p>5.1 <b>Develop detailed designs for expanded primary care models</b> and trial their implementation in regional NSW through working with the Commonwealth and National Cabinet, Primary Health Networks, Aboriginal Community Controlled Health Organisations, NGOs and other partners</p> <p>5.2 <b>Address the employer model</b> to support trainees and staff to work seamlessly across primary care, public, private settings and Aboriginal Community Controlled Health Organisations to deliver care to regional communities</p> <p>5.3 <b>Improve access and equity of services for Aboriginal people and communities</b> to support decision making at each stage of their health journey</p> <p>5.4 <b>Develop ‘place-based’ health needs assessments and plans</b> by working closely with Primary Health Networks, Aboriginal Community Controlled Health Organisations and other local organisations including youth organisations and use these to resource services to address priority needs</p>
 <p><b>6. Harness and evaluate innovation to support a sustainable health system:</b> Continue to transform health services through aligned funding and resourcing models, digital and health technologies, research and environmental solutions.</p>	<p>6.1 <b>Align NSW and Commonwealth funding and resourcing models</b> to provide the financial resources to deliver optimal regional health services and health outcomes</p> <p>6.2 <b>Fund and implement digital health investments and increase capability of workforce</b> to deliver connected patient records, enable virtual care, provide insightful health data and streamline processes</p> <p>6.3 <b>Undertake research and evaluation</b> with institutions, industry partners, NGOs, consumers and carers</p> <p>6.4 <b>Commit to environmental sustainability footprint</b> for future regional healthcare</p>

## 2.3 NSW Government Priorities

There are several government priorities that NSW Health is responsible for delivering. These government priorities are usually reported to the Premier’s Department or The Cabinet Office through NSW Health Executive. Progress on government priorities allocated to Health is monitored by the Ministry of Health including:

- Election Commitments
- Charter Letter commitments
- Inquiry recommendations

## 2.4 NSW Health Outcome and Business Plan

The NSW Health Outcome and Business Plan is an agreement between the Minister for Health, the Secretary, NSW Health and the NSW Government setting out the outcomes and objectives that will be the focus for the current period. In 2022 NSW Health’s Outcome Structure was realigned to the Future Health strategic framework. The revised state outcomes are:

- People are healthy and well
- Safe care is delivered within our community
- Safe emergency care is delivered
- Safe care is delivered within our hospitals
- Our staff are engaged and well supported
- Research and innovation and digital advances inform service delivery

To achieve these outcomes, NSW Health has set a series of ambitious targets and has a comprehensive program of change initiatives in place. These targets have been built into key performance indicators in the Performance Agreement, the NSW Health Performance Framework, the NSW Health Purchasing Framework and the funding model.

### 3. Budget

#### 3.1 Budget Schedule: Part 1

Cancer Institute NSW		2023-2024 Initial Budget (\$'000)
<b>A</b>	<b>Expenditure Budget by Account Group (General Fund)</b>	
	Employee Related	\$35,989
	VMO Payments	\$100
	Goods & Services	\$46,188
	Repairs, Maintenance & Renewals	\$4,016
	Grants & Subsidies	\$94,973
	Depreciation and Amortisation	\$835
	<b>Sub-total</b>	<b>\$182,102</b>
<b>B</b>	<b>Other items not included above</b>	
	Additional Escalation to be allocated	\$7,128
	Better salary packaging for healthcare workers	\$1
	Allocated Savings Programs	-\$9,784
	TMF Adjustment - Workers Compensation	\$4
	IntraHealth - HealthShare 23/24 Adjustment	\$7
	IntraHealth - eHealth 23/24 Adjustment	\$9
	<b>Sub-total</b>	<b>-\$2,637</b>
<b>C</b>	<b>RFA Expenses</b>	
<b>D</b>	<b>Total Expenses (D=A+B+C)</b>	<b>\$179,466</b>
<b>E</b>	<b>Other - Gain/Loss on disposal of assets etc</b>	
<b>F</b>	<b>Revenue</b>	<b>-\$178,560</b>
<b>G</b>	<b>Net Result (G=D+E+F)</b>	<b>\$906</b>

### 3.2 Budget Schedule: Part 2

<b>Cancer Institute NSW</b>		<b>2023-2024 Initial Budget (\$'000)</b>
<b>Government Grants</b>		
A	Recurrent Subsidy	-\$176,060
B	Capital Subsidy	
C	Crown Acceptance (Super, LSL)	-\$989
<b>D</b>	<b>Total Government Contribution (D=A+B+C)</b>	<b>-\$177,049</b>
<b>Own Source revenue</b>		
E	GF Revenue	-\$1,511
F	Restricted Financial Asset Revenue	
<b>G</b>	<b>Total Own Source Revenue (G=E+F)</b>	<b>-\$1,511</b>
<b>H</b>	<b>Total Revenue (H=D+G)</b>	<b>-\$178,560</b>
<b>Expenses</b>		
I	Total Expense Budget - General Funds	\$179,466
J	Restricted Financial Asset Expense Budget	
K	Other Expense Budget	
<b>L</b>	<b>Total Expense Budget as per Schedule A Part 1 (L=I+J+K)</b>	<b>\$179,466</b>
<b>M</b>	<b>Net Result (M=H+L)</b>	<b>\$906</b>
<b>Net Result Represented by:</b>		
N	Asset Movements	-\$835
O	Liability Movements	-\$71
P	Entity Transfers	
<b>Q</b>	<b>Total (Q=N+O+P)</b>	<b>-\$906</b>

**Note:**

The Ministry will closely monitor cash at bank balances to ensure funds for payments are available as required for central payment of payroll and creditors in alignment with NSW Treasury requirements.


## 4. Performance against strategies and objectives

### 4.1 Key performance indicators

The performance of the Organisation is assessed in terms of whether it is meeting key performance indicator targets for NSW Health strategic priorities.

Detailed specifications for the generic key performance indicators are provided in the Service Agreement Data Supplement. See:

[http://internal4.health.nsw.gov.au/hird/view\\_data\\_resource\\_description.cfm?ItemID=48373](http://internal4.health.nsw.gov.au/hird/view_data_resource_description.cfm?ItemID=48373)

4 Our staff are engaged and well supported 				
Measure	Target	Performance Thresholds		
		Not Performing ✘	Under Performing ⚠	Performing ✔
Workplace Culture - People Matter Survey Culture Index- Variation from previous survey (%)	≥-1	≤-5	>-5 and <-1	≥-1
Take action - People Matter Survey take action as a result of the survey- Variation from previous survey (%)	≥-1	≤-5	>-5 and <-1	≥-1
Staff Engagement - People Matter Survey Engagement Index - Variation from previous survey (%)	≥-1	≤-5	>-5 and <-1	≥-1
Staff Engagement and Experience – People Matter Survey - Racism experienced by staff Variation from previous survey (%)	≥5 % points decrease on previous survey	No change or increase from previous survey.	>0 and <5 % points decrease on previous survey	≥5 % points decrease on previous survey
Staff Performance Reviews - Within the last 12 months (%)	100	<85	≥85 and <90	≥90
Recruitment: Average time taken from request to recruit to decision to approve/decline/defer recruitment (business days)	≤10	>10	No change from previous year and >10	≤10
Aboriginal Workforce Participation - Aboriginal Workforce as a proportion of total workforce at all salary levels (bands) and occupations (%)	3.43	<2.0	≥2.0 and <3.43	≥3.43
Compensable Workplace Injury Claims (% of change over rolling 12 month period)	0	Increase	≥0 and <5% decrease	≥5% decrease or maintain at 0

## 5 Research and innovation and digital advances inform service delivery



Measure	Target	Performance Thresholds		
		Not Performing ✘	Under Performing ↘	Performing ✓
Ethics Application Approvals - By the Human Research Ethics Committee within 90 calendar days - Involving greater than low risk to participants (%)	75	<55	≥55 and <75	≥75

## 6 The health system is managed sustainably




Measure	Target	Performance Thresholds		
		Not Performing ✘	Under Performing ↘	Performing ✓
Expenditure Matched to Budget - General Fund - Variance (%)	On budget or favourable	>0.5% unfavourable	>0 and ≤0.5% unfavourable	On budget or favourable
Own Sourced Revenue Matched to Budget - General Fund - Variance (%)				
Net Cost of Service (NCOS) Matched to Budget - General Fund - Variance (%)				





## 4.2 Future Health actions and performance deliverables


Future Health actions and performance deliverables will be monitored, noting that indicators and milestones are held in the detailed program operational plans.


### 4.2.1 Future Health actions


Action code	Achievement statement	Actions	Due by
<b>1 Patients and carers have positive experiences and outcomes that matter</b>			
1.1.1.1.1	Communication tools: Communication tools, information and support are available for consumers and carers to actively participate in their healthcare.	Provide accessible information via web based resources along the pathway of care to support people affected by cancer and assist them in self management and informed decision making	30 June 2024
1.1.1.2.1	Respecting different beliefs: Patient, carer, and family preferences and needs are heard, respected and responded to, including cultural and religious needs and other preferences such as alternate treatments and care.	Deliver Patient Reported Measures (PRMs) Program to capture the perspectives of patients on their experience and outcomes of their cancer care, including Aboriginal and Multicultural patients)	30 June 2024
1.1.1.2.2	Respecting different beliefs: Patient, carer, and family preferences and needs are heard, respected and responded to, including cultural and religious needs and other preferences such as alternate treatments and care.	Provide translated cancer PRMs surveys and supportive information to ensure people with low English can participate in their care (PRMs)	30 June 2024
1.1.1.3.1	Self-reported outcomes and experience: Patients, carers, and the community have formal opportunities to describe the outcomes and experiences that matter to them and this information is used to inform decisions about their care and treatment.	Collect and action PRMs at the point of care linked to clinical alert that is actioned when a threshold is breached for people accessing outpatient cancer services	30 June 2024
1.1.1.3.2	Self-reported outcomes and experience: Patients, carers, and the community have formal opportunities to describe the outcomes and experiences that matter to them and this information is used to inform decisions about their care and treatment.	Review longitudinal cancer PRMs to provide insight to cancer services through RBCO program about their patient cohorts to highlight opportunities to improve patient care	30 June 2024
1.1.1.3.23	Self-reported outcomes and experience: Patients, carers, and the community have formal opportunities to describe the outcomes and experiences that matter to them and this information is used to inform decisions about their care and treatment.	Establish indicators to report on the quality of care using PRMs from cancer patients	30 June 2024


Action code	Achievement statement	Actions	Due by
<b>1 Patients and carers have positive experiences and outcomes that matter</b>			
1.1.1.3.24	Self-reported outcomes and experience: Patients, carers, and the community have formal opportunities to describe the outcomes and experiences that matter to them and this information is used to inform decisions about their care and treatment.	Provide an annual report to CEOs within the LHDs that collect cancer PRMs that incorporates perspectives of care from their cancer PRMs	30 June 2024
1.1.1.3.3	Self-reported outcomes and experience: Patients, carers, and the community have formal opportunities to describe the outcomes and experiences that matter to them and this information is used to inform decisions about their care and treatment.	Integrate cancer PRMs survey results into patient electronic medical records for accessibility by clinicians delivering care (PRMs)	30 June 2024
1.1.1.4.2	Empower patients with the right information at the right time: Discharge summaries and associated patient information are personalised, easy to understand and provided in a format that is accessible for the patient, carer and extended care team. They are provided to all patients at the time of transfer or leave, and empowers patients to become more active participants in their healthcare.	Provide information for patients and primary care about cancer treatment side effects and their management (eviQ)	30 June 2024
1.2.2.1.1	Non-discriminatory care: NSW Health addresses and prevents experiences of discrimination when accessing health services e.g. through staff training and listening and responding to consumer experiences.	Recruit Aboriginal Care Coordinators in cancer services and primary care to support Aboriginal people with cancer as they access and interact with cancer services (collaborating with AHMRC)	30 June 2024
1.2.2.1.4	Non-discriminatory care: NSW Health addresses and prevents experiences of discrimination when accessing health services e.g. through staff training and listening and responding to consumer experiences.	Diversity and Inclusion training provided (LGBTQI+) for CI and BreastScreen NSW staff – being rolled out for Cancer Services	30 June 2024
1.2.2.3.1	Barriers to care: Barriers for diverse groups seeking health care are pro-actively identified and resolved e.g. those with disability, LGBTQI+, people experiencing homelessness and those with conditions that are stigmatised e.g. HIV. people experiencing violence, abuse and neglect.	Provide educational material to health professionals to understand the barriers and challenges for LGBTQI+ people accessing cancer services (eviQEd)	30 June 2024

Action code	Achievement statement	Actions	Due by
<b>1 Patients and carers have positive experiences and outcomes that matter</b>			
1.2.2.3.3	Barriers to care: Barriers for diverse groups seeking health care are pro-actively identified and resolved e.g. those with disability, LGBTIQ+, people experiencing homelessness and those with conditions that are stigmatised e.g. HIV. people experiencing violence, abuse and neglect.	Launch educational resources to address barriers in access to cancer clinical trials for LGBTIQ+ communities, in collaboration with ACON.	30 June 2024
1.3.1.2.1	Multi-channel, multilingual, patient-centric information: All health resources for the community are easily accessible, easy to understand, available in multiple languages and have contact points for questions.	Provide translated information along the pathway of care for cancer treatment given in NSW to increase health literacy and understanding of the care pathway (Patient Information Portal)	30 June 2024
1.4.1.2.1	Support consumer representatives: Roles and expectations of staff in engaging with consumers are clear and the capability of staff in engaging with consumers is enhanced.	Develop consumer engagement and involvement with the Cancer Research Grants Program.	30 June 2024


Action code	Achievement statement	Actions	Due by
<b>2 Safe care is delivered across all settings</b>			
2.1.1.3.1	Assess hospital avoidance and preventive health: NSW can better quantify the effectiveness of hospital avoidance and secondary prevention strategies to inform service planning and models of care.	Measure unplanned readmission rates of people who have had cancer surgery and feed this back to the LHDs to develop action plans where required (RBCO)	30 June 2024
2.1.1.3.3	Assess hospital avoidance and preventive health: NSW can better quantify the effectiveness of hospital avoidance and secondary prevention strategies to inform service planning and models of care.	Establish local dashboards, using patient data from the Oncology Information System within cancer outpatient services, to view throughput of patients within the service to support service planning	30 June 2024
2.1.1.3.5	Assess hospital avoidance and preventive health: NSW can better quantify the effectiveness of hospital avoidance and secondary prevention strategies to inform service planning and models of care.	Maintain a statewide linked health system data set, including length of stay and unplanned admissions, to identify patterns of care across cancer surgery and develop action plans where required	30 June 2024
2.1.2.1.20	Patient-centred measurement framework: Measures of 'quality' are more holistic and consider outcomes that matter to patients, including valuing patients' time.	Deliver Cancer Patient-Reported Measures (PRMs) program to capture the perspectives of patients on their experiences and outcomes of their cancer care, including Aboriginal and multicultural patients	30 June 2024


Action code	Achievement statement	Actions	Due by
<b>2 Safe care is delivered across all settings</b>			
2.1.2.3.2	Electronic registries: key information to assess clinical outcomes are routinely collected, linked and analysed to inform continuous quality improvement	Provide support for quality improvements projects addressing variation as identified via Reporting for Better Cancer Outcomes reports, in partnership with each LHD*	30 June 2024
2.1.2.3.3	Electronic registries: key information to assess clinical outcomes are routinely collected, linked and analysed to inform continuous quality improvement	Establish a state-wide linked data asset that includes cancer PRMs for routine reporting that includes clinical and populations and health system data to inform continuous quality improvement across the cancer system	30 June 2024
2.1.2.4.3	Strengthen capabilities in quality and safety: processes and models of care are continually improved to ensure patients are receiving safe and high quality care (New Achievement Statement)	Provide educational material for the safe delivery of oral chemotherapy to community pharmacists (eviQEd)	30 June 2024
2.1.2.4.4	Strengthen capabilities in quality and safety: processes and models of care are continually improved to ensure patients are receiving safe and high quality care (New Achievement Statement)	Provide web based educational material for all health professionals on managing aspects cancer care and recognizing serious adverse events for cancer patients (eviQEd)	30 June 2024
2.2.1.1.1	Consumer navigation: navigation of the health system is simplified so people know how to access the right type of care, including accessing outpatient and community care.	Establish and maintain an accessible externally facing database of current MDT cancer practitioners, that is informed by routine analysis of patient outcomes to identify higher volume surgical cancer services for complex cancer surgery (Canrefer)	30 June 2024
2.2.1.3.1	Culturally appropriate virtual care: at risk and vulnerable communities are equipped with the technological and digital skills required to effectively utilize virtual care.	Embed the concepts and the practical aspects of virtual care into the Aboriginal Care coordinator model in cancer services as these roles are recruited into cancer services	30 June 2024
2.2.1.4.1	Clinician experience in using virtual care: Clinicians are confident with and supportive of the use of virtual care to deliver high quality patient outcomes.	Develop safety chemotherapy educational resources for nurses and pharmacists that support virtual models of care for delivering chemotherapy (eviQEd)	30 June 2024
2.3.1.1.1	Understanding current partnerships: A stocktake has been conducted identifying key partnerships across the health system including the services they offer and any potential gaps. This will provide visibility and enable targeted partnerships in the future.	CI is undertaking a Strategic Communications and Engagement review to maximise benefits from stakeholder partnerships/relationships	30 June 2024

Action code	Achievement statement	Actions	Due by
<b>2 Safe care is delivered across all settings</b>			
2.4.1.1.1	Understanding barriers: NSW Health has worked with different communities (rural, cultural, older persons etc) to understand barriers to accessing care and identify appropriate solutions.	Develop a prototype for the analysis of the pathway of care for people with cancer (including older people, those from rural areas and different cultural backgrounds) to understand delivery of care	30 June 2024
2.4.1.1.2	Understanding barriers: NSW Health has worked with different communities (rural, cultural, older persons etc) to understand barriers to accessing care and identify appropriate solutions.	Provide a profile showing each LHD their proportion of cancer patients from multicultural backgrounds to support service planning	30 June 2024

Action code	Achievement statement	Actions	Due by
<b>3 People are healthy and well</b>			
3.3.1.3.1	Using data for Toward Zero Suicide: Data enables the construction of patient pathways of health service use and other events over time, and comparison groups to estimate the Toward Zero Suicide initiative effects on suicide prevention activities and further evaluation leading to best practice care.	Complete analysis on cancer data linked to users of mental health services to understand how care is delivered along the cancer pathway	30 June 2024
3.7.1.1.1	Work with other agencies: NSW Health targets and supports initiatives aimed at changing regulation that has an evidence-based impact on wellness e.g. food labelling initiatives including Health Star Rating, improvements to composition of foods for infant and young children, mechanisms to prevent and reduce use of e-cigarettes by young people, urban/rural design to promote physical activity and reduce health effects.	Facilitate representation in Local Government strategic planning cycles regarding built environment and shade	30 June 2024
3.7.1.1.2	Work with other agencies: NSW Health targets and supports initiatives aimed at changing regulation that has an evidence-based impact on wellness e.g. food labelling initiatives including Health Star Rating, improvements to composition of foods for infant and young children, mechanisms to prevent and reduce use of e-cigarettes by young people, urban/rural design to promote physical activity and reduce health effects.	Collaborate with peak bodies eg Australian Institutes of Architects to influence industry policy and regulation eg including requirement for percentage of built shade in new public building sites	30 June 2024




Action code	Achievement statement	Actions	Due by
<b>3 People are healthy and well</b>			
3.7.1.3.1	Galvanise community voices: Partner with targeted organisations and individuals to boost community awareness and encourage a response to key wellness and prevention issues	Conduct research to understand local issues e.g. presence of shade in playgrounds and use the results to influence local govt and schools' commitment to provision of shade	30 June 2024
3.7.1.3.3	Galvanise community voices: Partner with targeted organisations and individuals to boost community awareness and encourage a response to key wellness and prevention issues	Development of teaching resources and changes to school curriculum to embed sun smart knowledge into education system	30 June 2024
3.8.2.3.1	Closer to home service delivery: There is an increased focus on identifying and delivering chronic disease prevention programs outside the acute setting, in communities, at home and through virtual care.	Integrate Quitline and IcanQuit services – through innovation and agile delivery inhouse	30 June 2024
3.8.3.1.1	Build prevention into clinical care: NSW Health has identified ways to embed wellness and prevention as a core part of clinical interventions through education and clarity of scope, roles and responsibilities.	Assess cancer patients at the point of care using appropriate PRMs surveys to determine support required in relation to results from Distress Thermometer and ESAS	30 June 2024
3.8.3.2.1	Build prevention into clinical care: NSW Health has identified ways to embed wellness and prevention through clinical engagement, referral pathways, education and clarity of scope, roles and responsibilities.	Develop evidence based rapid learning material for clinicians through eviQ Education program and disseminate to health professionals	30 June 2024

Action code	Achievement statement	Actions	Due by
<b>5 Research and innovation, and digital advances inform service delivery</b>			
5.1.1.2.1	Strategic planning: the research ecosystem within health is mapped and connected to enable better prioritisation, decision-making and guidance around investment of time and resources, and the reduction of research waste	Develop a Cancer Institute Research Strategy to help ensure cancer research activity across the Institute is coordinated and enables strategic prioritisation of research initiatives	30 June 2024
5.1.2.3.3	Thought leadership: NSW has a platform for thought leaders from health, research, industry and consumer groups to collaborate effectively nationally and internationally, to drive evidence-based translation and transformation of the health system	Develop and maintain a Cancer Research Education Portal to provide a platform to coordinate and share cancer research education resources and events	30 June 2024


Action code	Achievement statement	Actions	Due by
<b>5 Research and innovation, and digital advances inform service delivery</b>			
5.1.2.4.1	Encourage partnerships between NSW Health and Industry: Investors, clinicians and researchers continue to be supported through a Concierge Service which enables the sector to leverage research, investment and cooperation with industry	Implement the Cancer Research Concierge service to provide a front-door access for cancer researchers to request data, partnerships or research support	30 June 2024
5.2.1.1.11	Fit for purpose information: NSW Health has an approach to gather, understand and disseminate information that is important to the people of NSW, to ensure any data provided to patients and communities is fit for purpose, relevant, and culturally appropriate	Define and develop use cases for synthetic data with a focus on data engineering	30 June 2024
5.2.1.1.2	Fit for purpose information: NSW Health has an approach to gather, understand and disseminate information that is important to the people of NSW, to ensure any data provided to patients and communities is fit for purpose, relevant, and culturally appropriate	Improve external stakeholders' access to higher quality metadata and facilitate data sharing and research by deploying a research platform	30 June 2024
5.2.1.1.3	Fit for purpose information: NSW Health has an approach to gather, understand and disseminate information that is important to the people of NSW, to ensure any data provided to patients and communities is fit for purpose, relevant, and culturally appropriate	Automate data pipelines and further integrate into a data lake and cloud-based infrastructure	30 June 2024
5.2.1.1.4	Fit for purpose information: NSW Health has an approach to gather, understand and disseminate information that is important to the people of NSW, to ensure any data provided to patients and communities is fit for purpose, relevant, and culturally appropriate	Embed a data request system that is integrated into all aspects of the end-to-end data lifecycle to standardise practice across the system and track data use metrics	30 June 2024
5.2.1.6.2	Open data: NSW Health has an approach to review what health data is available to, and valued by, the public and ensures data is provided in user-friendly formats	Maintain a public facing cancer statistics module with the most currently available statewide cancer statistics	30 June 2024
5.2.1.6.3	Open data: NSW Health has an approach to review what health data is available to, and valued by, the public and ensures data is provided in user-friendly formats	Standardise the reporting indicators across Cancer Data and provide a framework to scale this to other health domains	30 June 2024
5.2.2.1.1	SRI data collections & digital enablement: There are coordinated and integrated data collections of self-reported information (SRI) across NSW Health and digital platforms enable the information to be	Maintain a linked cancer data set with Self Reported Information included and provide actionable reporting to LHDs for use to improve patient	30 June 2024

Action code	Achievement statement	Actions	Due by
<b>5 Research and innovation, and digital advances inform service delivery</b>			
	used at an individual, service and system level	outcomes, understand patterns of care across the system	
5.2.2.1.16	SRI data collections & digital enablement: There are coordinated and integrated data collections of self-reported information (SRI) across NSW Health and digital platforms enable the information to be used at an individual, service and system level	Link Cancer PRMs data to local treatment information and make accessible in real-time in cancer centers for informing and understanding care (PRMs)	30 June 2024
5.2.2.2.2	Awareness of current data: NSW Health actively promotes the use of it's own data assets and negotiates linkage with relevant external data assets, and has built awareness of and improved access to existing data sources and assets for system wide use	Provide accessible reporting across radiation oncology and medical oncology outpatient departments linked directly to their Oncology information systems for service planning and patient care	30 June 2024
5.2.2.2.4	Awareness of current data: NSW Health actively promotes the use of it's own data assets and negotiates linkage with relevant external data assets, and has built awareness of and improved access to existing data sources and assets for system wide use	Develop training modules for use of Cancer Data Assets (including specific modules for Aboriginal Data and CanDLe Data)	30 June 2024
5.2.2.2.5	Awareness of current data: NSW Health actively promotes the use of it's own data assets and negotiates linkage with relevant external data assets, and has built awareness of and improved access to existing data sources and assets for system wide use	Engage NSW cancer researchers to utilise and maximise CanDLe data asset	30 June 2024
5.2.2.2.7	Awareness of current data: NSW Health actively promotes the use of it's own data assets and negotiates linkage with relevant external data assets, and has built awareness of and improved access to existing data sources and assets for system wide use	Develop online and interactive data dictionaries for all cancer data assets for use by internal and external stakeholders	30 June 2024
5.2.2.3.1	Building cross-sector collaboration: There is cross sector collaboration and data sharing capability to support patient journeys and inform policy beyond just health eg integrating NSW Health and Transport NSW data, HealthDirect Australia	Include cross border cancer treatment data on NSW residents in Reporting for Better Cancer Outcomes reporting for border LHDs	30 June 2024

Action code	Achievement statement	Actions	Due by
<b>5 Research and innovation, and digital advances inform service delivery</b>			
5.2.2.3.2	Building cross-sector collaboration: There is cross sector collaboration and data sharing capability to support patient journeys and inform policy beyond just health eg integrating NSW Health and Transport NSW data, HealthDirect Australia	Increase access to cross border screening (breast) data to ensure women are appropriately invited for screening	30 June 2024
5.2.2.5.1	Data governance: All statewide data initiatives have transparent data governance processes in place that align to the overall NSW governance framework and national responsibilities This alignment will better support data sharing, to enable data to be used for predictive analytics including improvement of outcomes for patients	Develop best practice policy and procedure documentation to safely manage all aspects of cancer data storage and use	30 June 2024


Action code	Achievement statement	Actions	Due by
<b>6 The health system is managed sustainably</b>			
6.1.1.1.4	Scale successful solutions: Successful VBHC initiatives are scaled and applied at a local and state level.	Conduct a review of all cancer grants throughout the organisation in order to identify opportunities for increased efficiency and standardise best practices.	30 June 2024
6.1.1.2.1	Disinvest in low value activities: Unwarranted clinical variation is identified and the system is supported to disinvest from ineffective, inefficient and unwanted care.	Regular reporting to CEs on comparative variation against best practice and patterns of care.	30 June 2024
6.3.2.3.1	Strategic asset management: Procurement decisions are based around whole of life asset costs including maintenance and replacement strategies and benefits aligned to value base healthcare.	Strategic forward plan for BreastScreen clinical assets, fixed sites and mobile fleet – plan to include service and repair, replacement and growth	30 June 2024
6.3.2.4.1	Supplier relationship management: Stronger relationships with suppliers exist to foster innovation, and identify opportunities to improve sustainability, savings, outcomes and experiences of care.	Access cross border procurement arrangements – eg Q'land piggy back option for procurement or large bespoke asset such as mobile screening vans	30 June 2024


## 4.2.2 Performance deliverables


Key Objective	Deliverable in 2023-24	Due by
<b>1 Patients and carers have positive experiences and outcomes that matter</b>		
<b>1.1 Partner with patients and communities to make decisions about their own care</b>		
Cancer Plan Action 3.4:	Cancer Plan Implementation Plan Activity 3.4a	
Provide patients, families and carers with timely access to relevant, credible and understandable information that helps them to play an active and informed role in making decisions about their treatment and care	<ul style="list-style-type: none"> <li>Provide accessible information via web-based resources to support people affected by cancer and assist them in self-management and informed decision making.               <ul style="list-style-type: none"> <li>✓ Increased use of available resources to support patients.</li> </ul> </li> </ul>	Q4
<b>1.3 Drive greater health literacy and access to information</b>		
Cancer Plan Action 1.1:	Cancer Plan Implementation Plan Activity 1.1a	
Improve people's ability to understand and engage with prevention, screening and cancer care services and information, and reduce fear, stigma and shame among Aboriginal and multicultural communities.	<ul style="list-style-type: none"> <li>Deliver cancer education communications program to increase cancer health literacy, enabling people with cancer to play a more active part in their care as well as addressing issues impacting cancer early detection.               <ul style="list-style-type: none"> <li>✓ Cancer education communication program delivered.</li> </ul> </li> </ul>	Q4
<b>1.4 Partner with consumers in co-design and implementation of models of care</b>		
Cancer Plan Action 3.7	Cancer Plan Implementation Plan Activity 3.7a	
Ensure that feedback from patients about their experiences and outcomes is routinely used for care delivery, service planning and quality improvement.	<ul style="list-style-type: none"> <li>Deliver Patient-Reported Measures (PRMs) Program to capture the perspectives of patients on their experiences and outcomes of their cancer care, including Aboriginal and multicultural patients.               <ul style="list-style-type: none"> <li>✓ Statewide rollout of PRMs, including expansion to Aboriginal and multicultural communities.</li> <li>✓ Six LHDs have commenced the collection of Aboriginal Wellbeing survey.</li> </ul> </li> </ul>	Q4
Cancer Plan Action 4.2	Cancer Plan Implementation Plan Activity 4.2a	
Enhance access to and participation in cancer clinical trials, with a focus on communities that experience poorer cancer outcomes, such as Aboriginal communities, and people from regional, rural and remote communities and other focus populations.	<ul style="list-style-type: none"> <li>Inform focus populations about clinical trials and ensure both medical professionals and patients have information to address diverse population needs.               <ul style="list-style-type: none"> <li>✓ Improved awareness of clinical trials among patients from diverse populations and their clinicians.</li> <li>✓ Increase the number of clinical trials open for recruitment in rural and regional areas of NSW</li> <li>✓ Increase participation rates in clinical trials for those living in regional rural areas of NSW</li> </ul> </li> </ul>	Q4


### Performance against strategies and objectives




Key Objective	Deliverable in 2023-24	Due by
<b>1 Patients and carers have positive experiences and outcomes that matter</b>		
Cancer Plan Action 4.3	Cancer Plan Implementation Plan Activity 4.3a	
Provide easy-to-understand information to people experiencing cancer, their families and carers to support their involvement in cancer research.	<ul style="list-style-type: none"> <li>• Provide accessible and culturally responsive information to support people affected by cancer that informs them about clinical trials, identifies open clinical trials, and supports decision making. <ul style="list-style-type: none"> <li>✓ Increased support for cancer patients and their families in their decisions regarding clinical trials.</li> </ul> </li> </ul>	Q4


Key objective	Deliverable in 2023-24	Due by
<b>2 Safe care is delivered across all settings</b>		
<b>2.1 Deliver safe, high quality reliable care for patients in hospital and other settings</b>		
Cancer Plan Action 2.5	Cancer Plan Implementation Plan Activity 2.5a	
Continue to support primary care providers to proactively identify and effectively care for people who have, or may have, cancer.	<ul style="list-style-type: none"> <li>• Build the primary care sector's knowledge and capability to improve cancer control and outcomes by: <ul style="list-style-type: none"> <li>• Developing and implementing Quality Improvement toolkits</li> <li>• Sharing data and insights with Primary Health Networks as a means of driving change (including via the Reporting for Better Cancer Outcomes Program)</li> <li>• Collaborating with primary care sector to develop and maintain Health Pathways for prevention and early detection of cancer in NSW. <ul style="list-style-type: none"> <li>✓ Increased knowledge and capability to improve cancer control in the primary care sector.</li> </ul> </li> </ul> </li> </ul>	Q4
Cancer Plan Action 3.2	Cancer Plan Implementation Plan Activity 3.2a	
Continue to support primary care providers to proactively identify and effectively care for people who have, or may have, cancer.	<ul style="list-style-type: none"> <li>• Work with the system to further understand how best to support coordinated care and informed decision making, including for focus populations: <ul style="list-style-type: none"> <li>• Develop a process for coordination of care for Aboriginal people with cancer by working together with LHDs, Aboriginal health providers and Primary Health Networks. <ul style="list-style-type: none"> <li>✓ Reporting for Better Cancer Outcomes: Patient Experience report delivered and system engaged</li> <li>✓ Coordination of care for Aboriginal people with cancer is developed and implemented in two LHDs (aligning with the Optimal Care Pathway).</li> <li>✓ Five LHDs have Care Coordinators on site supporting Aboriginal coordination of care for their Aboriginal patients</li> </ul> </li> </ul> </li> </ul>	Q4


Key objective	Deliverable in 2023-24	Due by
<b>2 Safe care is delivered across all settings</b>		
Cancer Plan Action 3.5	Cancer Plan Implementation Plan Activity 3.5a	
Improve integration and communication across services and providers, between local health districts (LHDs) and specialty networks (SNs), and across the public, private and primary care settings, including Aboriginal Community Controlled Health Services.	<ul style="list-style-type: none"> <li>Work with key stakeholders to understand and connect elements of the cancer care system to ensure delivery of integrated and coordinated care, along the relevant optimal care pathways. <ul style="list-style-type: none"> <li>✓ Reporting for Better Cancer Outcomes: Optimal Care Pathway Report delivered and system engaged.</li> </ul> </li> </ul>	Q4
<b>2.3 Connect with partners to deliver integrated care services</b>		
Cancer Plan Action 2.6	Cancer Plan Implementation Plan Activity 2.6a	
Create and deliver consistent, coordinated and timely pathways to ensure people with cancer are referred appropriately from primary care to treatment and care.	<ul style="list-style-type: none"> <li>Implement direct access to colonoscopy and integration with primary care for patients with a positive faecal occult blood test (FOBT) to support the move towards value-based healthcare. <ul style="list-style-type: none"> <li>✓ Improved access to public colonoscopy in NSW for people with a positive FOBT</li> </ul> </li> </ul>	Q4


Key objective	Deliverable in 2023-24	Due by
<b>3 People are healthy and well</b>		
<b>3.1 Prevent, prepare for, respond to and recover from pandemic and other threats to population health</b>		
Cancer Plan Action 1.2	Cancer Plan Implementation Plan Activity 1.2a	
Prioritise evidence-based prevention efforts in areas with the greatest need and demonstrated impact, including helping people to not take up smoking or vaping, quit smoking and vaping, protect their skin from ultraviolet radiation and reduce alcohol consumption.	<ul style="list-style-type: none"> <li>Deliver priorities in tobacco control, smoking cessation and vaping, including: <ul style="list-style-type: none"> <li>Embedding and monitoring evidence-based interventions in community settings and in clinical care</li> <li>Co-designing and implementing an Aboriginal Tobacco Control Program</li> <li>Developing, implementing and evaluating evidence-based social marketing and campaigns</li> <li>Delivering evidence based, effective and efficient smoking cessation support services. <ul style="list-style-type: none"> <li>✓ Decreased rates of smoking and vaping in NSW.</li> </ul> </li> </ul> </li> </ul>	Q4
	Cancer Plan Implementation Plan Activity 1.2c	<ul style="list-style-type: none"> <li>Deliver priorities of the Skin Cancer Prevention Program to reduce over-exposure to ultraviolet radiation and increase the adoption of sun protection behaviours,</li> </ul>


Key objective	Deliverable in 2023-24	Due by
<b>3 People are healthy and well</b>		
	<p>including: Improving access to adequate shade through intersectoral collaborations</p> <ul style="list-style-type: none"> <li>Increasing implementation of comprehensive and effective sun protection policies and guidelines</li> <li>Developing, implementing and evaluating evidence-based social marketing and campaigns. <ul style="list-style-type: none"> <li>✓ Improved access to adequate shade.</li> <li>✓ Increased adoption of sun protection practices.</li> </ul> </li> </ul>	
	Cancer Plan Implementation Plan Activity 1.2e	
	<ul style="list-style-type: none"> <li>Deliver programs and services to improve awareness and address the links between alcohol consumption, blood borne viruses and cancer risk. <ul style="list-style-type: none"> <li>✓ Programs established to address the links between alcohol consumption and cancer risk.</li> </ul> </li> </ul>	Q4
Cancer Plan Action 1.3	Cancer Plan Implementation Plan Activity 1.3a	
Use new technologies and innovations, such as digital services, to support people to adopt healthy lifestyle behaviours and reduce their risk of cancer.	<ul style="list-style-type: none"> <li>Deliver an improved person-centred omnichannel iCanQuit digital ecosystem, and integrate it with the Quitline service. <ul style="list-style-type: none"> <li>✓ CanQuit digital ecosystem is delivered.</li> </ul> </li> </ul>	Q4
Cancer Plan Action 1.4	Cancer Plan Implementation Plan Activity 1.4a	
Strengthen broad public health prevention collaborations and partnerships at all levels across public, private and non-government sectors.	<ul style="list-style-type: none"> <li>Identify new partnership opportunities with public, private and non-government organisations to achieve cancer prevention priorities for focus populations. <ul style="list-style-type: none"> <li>✓ Establish new partnership opportunities to achieve cancer prevention priorities for focus populations</li> </ul> </li> </ul>	Q4
Cancer Plan Action 2.1	Cancer Plan Implementation Plan Activity 2.1a	
Engage primary care providers and Aboriginal Community Controlled Health Services, including GPs, practice nurses and Aboriginal Health Workers/Practitioners, to increase participation in the national cancer screening programs.	<ul style="list-style-type: none"> <li>Develop and implement a Primary Care Communication and Engagement Strategy to drive engagement with the primary care sector and build their knowledge and capability to improve cancer control and outcomes. <ul style="list-style-type: none"> <li>✓ Increased engagement of the primary care sector in cancer control activities.</li> </ul> </li> </ul>	Q4
	Cancer Plan Implementation Plan Activity 2.1b	
	<ul style="list-style-type: none"> <li>Promote the use of the 715 health checks* with primary care providers to educate and enhance participation in screening programs. <ul style="list-style-type: none"> <li>✓ Increased use of 715 health checks*.</li> </ul> </li> </ul> <p><i>*The 715 health check is a specific health check available for Aboriginal and Torres Strait Islander people. It helps to identify risk factors for chronic disease.</i></p>	Q4


### Performance against strategies and objectives

Key objective	Deliverable in 2023-24	Due by
<b>3 People are healthy and well</b>		
Cancer Plan Action 2.2	Cancer Plan Implementation Plan Activity 2.2a	
Maximise participation in screening and early detection programs, particularly for people at higher risk, and make NSW a national leader in early detection of cancers.	<ul style="list-style-type: none"> <li>• Increase participation in national screening programs (breast, cervical and bowel cancer) by: <ul style="list-style-type: none"> <li>• utilising knowledge of the participant experience to improve support, follow-up and to minimise barriers</li> <li>• developing, implementing and evaluating evidence-based social marketing and campaigns</li> <li>• develop and implement initiatives to drive engagement with under-screened communities and increase their knowledge of cancer screening. <ul style="list-style-type: none"> <li>✓ Increased participation in national breast, cervical and bowel cancer screening programs.</li> </ul> </li> </ul> </li> </ul>	Q4
	Cancer Plan Implementation Plan Activity 2.2b	
	<ul style="list-style-type: none"> <li>• Support BreastScreen NSW recovery from COVID-19. <ul style="list-style-type: none"> <li>✓ Increased BreastScreen NSW activity levels beyond preCOVID-19 levels.</li> <li>✓ BreastScreen activity targets will be negotiated and agreed with lead LHDs for FY 23/24 – up to a total of 396,792 screens (including 41,063 screens delivered with deferred care funding).</li> <li>✓ Four additional screening sites will be opened – including North Ryde, Hurstville, Green Hills and Blacktown.</li> </ul> </li> </ul>	Q4
Cancer Plan Action 2.3	Cancer Plan Implementation Plan Activity 2.3a	
Promote opportunities for people who are already engaged with the health system to participate in cancer screening and enable key community organisations to support cancer screening, particularly for Aboriginal communities and other focus populations.	<ul style="list-style-type: none"> <li>• Collaborate with partners to improve equitable access to cervical screening in pregnancy. <ul style="list-style-type: none"> <li>✓ Partnerships established.</li> </ul> </li> </ul>	Q4
	Cancer Plan Implementation Plan Activity 2.3c	
	<ul style="list-style-type: none"> <li>• Build the capacity of community agencies and key stakeholders to promote screening to focus populations. <ul style="list-style-type: none"> <li>✓ Increased capacity to promote screening to focus populations</li> </ul> </li> </ul>	Q4
	Other Activity	
	<ul style="list-style-type: none"> <li>• Commence mapping impact of proposed national Lung Cancer Screening program (may include establishing a statewide clinical advisory group, testing feasibility or completing qualitative impact analysis on primary care)</li> </ul>	Q4
Cancer Plan Action 2.4	Cancer Plan Implementation Plan Activity 2.4a	
Prioritise early detection efforts in communities with the greatest need and the	<ul style="list-style-type: none"> <li>• Deliver the Refugee Cancer Screening Partnership Project. <ul style="list-style-type: none"> <li>✓ Collaborate with partners to promote access to cancer screening for refugee populations.</li> </ul> </li> </ul>	Q4


Key objective	Deliverable in 2023-24	Due by
<b>3 People are healthy and well</b>		
highest potential for improved outcomes, through the delivery of culturally safe and responsive services for Aboriginal communities and other focus populations.	Cancer Plan Implementation Plan Activity 2.4b	
	<ul style="list-style-type: none"> <li>Deliver projects that ensure equitable access to breast, cervical and bowel cancer screening for all target groups and focus populations by: <ul style="list-style-type: none"> <li>Engaging with focus populations and community in the design, implementation and prioritisation of cancer screening and prevention initiatives and programs of work (e.g. broadening access to BreastScreen for Aboriginal women and working with the NSW Aboriginal Cervical Screening Network).</li> <li>Implementing and embedding community funding initiatives to achieve strategic and value based outcomes for breast, cervical and bowel cancer screening (e.g. ACON campaigns). <ul style="list-style-type: none"> <li>✓ Increased number of participants from target age groups and focus populations in the breast, bowel and cervical screening programs</li> </ul> </li> </ul> </li> </ul>	Q4
<b>3.5 Close the gap by prioritising care and programs for Aboriginal people</b>		
	<ul style="list-style-type: none"> <li>Develop an Aboriginal Cancer Strategy</li> </ul>	Q4

Key Objective	Deliverable in 2023-24	Due by
<b>4 Our staff are engaged and well supported</b>		
<b>4.4 Equip our people with the skills and capabilities to be an agile responsive workforce</b>		
Cancer Plan Action 4.5	Cancer Plan Implementation Plan Activity 4.5a	
Build the capability of the cancer control workforce to engage and participate in cancer research, including clinical research.	<ul style="list-style-type: none"> <li>Provide process improvement education and support to build business efficiencies and quality standards within the cancer control workforce. <ul style="list-style-type: none"> <li>✓ Increased educational support for the cancer control workforce regarding cancer clinical research.</li> </ul> </li> </ul>	Q4
	Cancer Plan Implementation Plan Activity 4.5b	
	<ul style="list-style-type: none"> <li>Strengthen cancer research capability by supporting and developing cancer researchers. <ul style="list-style-type: none"> <li>✓ Maintain investment in career support fellowships.</li> </ul> </li> </ul>	Q4



Key Objective	Deliverable in 2023-24	Due by
<b>5 Research and innovation, and digital advances inform service delivery</b>		
<b>5.1 Advance and translate research and innovation with institutions, industry partners and patients</b>		
Cancer Plan Action 4.1	Cancer Plan Implementation Plan Activity 4.1a	
Invest in cancer research infrastructure in NSW, and promote national and international collaboration.	<ul style="list-style-type: none"> <li>Facilitate research through a translational cancer research grant program. <ul style="list-style-type: none"> <li>✓ Maintained investment into the advancement of translational cancer research.</li> </ul> </li> </ul>	Q4
	Cancer Plan Implementation Plan Activity 4.1b	
	<ul style="list-style-type: none"> <li>Encourage translation of basic research to implementation through collaboration. <ul style="list-style-type: none"> <li>✓ Increased opportunities for translational cancer research.</li> </ul> </li> </ul>	Q4
Cancer Plan Action 4.4	Cancer Plan Implementation Plan Activity 4.4a	
Support primary care providers to encourage people to participate in cancer clinical trials and other research.	<ul style="list-style-type: none"> <li>Educate and engage with primary care providers to increase knowledge and awareness about cancer clinical trials by developing educational resources, so they may engage with their cancer patients. <ul style="list-style-type: none"> <li>✓ Increased awareness of clinical trial and cancer research among primary care providers.</li> </ul> </li> </ul>	Q4
<b>5.2 Ensure health data and information is high quality, integrated, accessible and utilised</b>		
Cancer Plan Action 3.6	Cancer Plan Implementation Plan Activity 3.6a	
Ensure high quality and accurate information is available to those working in the health system to support them to make decisions and develop quality improvement initiatives that are informed by the best available evidence.	<ul style="list-style-type: none"> <li>Reflect user needs and preferences in delivering the Reporting for Better Cancer Outcomes program and insights to support cancer control activities. <ul style="list-style-type: none"> <li>✓ Expanded reach of public and clinician-led variation reporting including to LHDs, SNs, Primary Health Networks and the Aboriginal Health &amp; Medical Research Council of NSW.</li> <li>✓ Deliver four additional cancer pathway reports with a focus on equity within the ongoing RBCO reporting programs (including metropolitan, regional and rural regions)</li> </ul> </li> </ul>	Q4
Cancer Plan Action 4.6	Cancer Plan Implementation Plan Activity 4.6a	
Improve the ability to link databases to support cancer control research and get a better understanding of people's overall health.	<ul style="list-style-type: none"> <li>Enable research using NSW linked population health research. <ul style="list-style-type: none"> <li>✓ Increased access to and use of health data sets in cancer research.</li> </ul> </li> </ul>	Q4



Key Objective	Deliverable in 2023-24	Due by
<b>6 The health system is managed sustainably</b>		
<b>6.1 Drive value based healthcare that prioritises outcomes and collaboration</b>		
Cancer Plan Action 3.1	Cancer Plan Implementation Plan Activity 3.1a	
Support best-practice and value-based cancer care to ensure people are seen at the right time, in the right place, for the right care.	<ul style="list-style-type: none"> <li>• Support the drive towards value-based healthcare that prioritises outcomes and collaboration through continuous reporting of cancer data to the sector.               <ul style="list-style-type: none"> <li>✓ Increased uptake of hypofractionated radiation therapy for cancer.</li> </ul> </li> </ul>	Q4
<b>6.2 Commit to an environmentally sustainable footprint for future healthcare</b>		
	<ul style="list-style-type: none"> <li>• Consider environmental sustainability principles in state-wide policies, programs, guidance, advice, and research grants. Ensure environmental sustainability considerations support the transition to a leading modern, low carbon, low waste, climate resilient health system.</li> </ul>	Q4




Key Objective	Deliverable in 2023-24	Due by
<b>6 The health system is managed sustainably</b>		
	<p><b>Procurement reform</b></p> <p>The Organisation will report on:</p> <p>Procurement capability</p> <ul style="list-style-type: none"> <li>• Local resources and training to uplift procurement capability of non-procurement staff</li> <li>• Procurement staff attend Procurement Academy training</li> </ul> <p>Procurement compliance</p> <ul style="list-style-type: none"> <li>• Goods and services procurements and Information and Communication Technology (ICT) procurements valued over \$30,000 and outside existing arrangements are tested against the Risk Assessment Tool.</li> <li>• Disclosure requirements for contracts (including purchase orders) valued over \$150,000 are met: <ul style="list-style-type: none"> <li>- Contracts/purchase orders are disclosed on eTendering</li> <li>- Contracts/purchase orders are saved on PROcure, where relevant</li> </ul> </li> <li>• Procurements outside existing arrangements that are valued over \$250,000 are referred to HealthShare or eHealth NSW to conduct the procurement (unless an exemption applies)</li> <li>• The ICT Purchasing Framework contract templates (Core &amp; contracts; Master ICT Agreement/ICT Agreement contracting framework) are used when engaging suppliers on the ICT Services Scheme (where relevant) unless an exemption applies.</li> </ul> <p>Social and sustainable procurement</p> <ul style="list-style-type: none"> <li>• Spend and contracts with Aboriginal businesses</li> <li>• Achieve and report on a minimum 1.5% Aboriginal participation for contracts valued &gt;\$7.5m through the Department of Customer Services (DCS) reporting portal (unless an exemption applies).</li> <li>• Achieve and report on Small and Medium Enterprise participation of 25% of project addressable spend for goods and services contracts valued &gt;\$3m through the DCS portal (unless an exemption applies).</li> </ul>	<p>Quarterly</p>

## 4.2.3 Performance deliverables mapped to the Regional Health Strategic Plan

Key Objective	Deliverable in 2023-24	Due by
<b>Priority 2: Enable better access to safe, high quality and timely health services</b>		
<b>Strategic Objective 2.3: Leverage virtual care to improve access, whilst ensuring cultural and digital barriers are addressed</b>		
Deliverable 2.3.1	Other Activity	
Promote and embed virtual care	<ul style="list-style-type: none"> <li>Support cancer services to ensure they are aware of and linked to existing services and develop local workflows to encourage embedding of Virtual Care in cancer services.</li> </ul>	Q4
<b>Strategic Objective 2.5: Drive and support improved clinical care, timely access and safety and quality outcomes for patients in hospitals and other settings</b>		
Deliverable 2.5.1	Cancer Plan Implementation Plan Activity 3.6a	
Strengthen capabilities in quality and safety	<ul style="list-style-type: none"> <li>Reflect user needs and preferences in delivering the Reporting for Better Cancer Outcomes program and insights to support cancer control activities, including consideration of equity.</li> </ul>	Q4
<b>Priority 3: Keep people healthy and well through prevention, early intervention and education</b>		
<b>Strategic Objective 3.4: Invest in wellness, prevention and early detection</b>		
Deliverable 3.4.2	Cancer Plan Implementation Plan Activity 2.2a	
Strengthen cancer and chronic disease screening	<ul style="list-style-type: none"> <li>Increase participation in national screening programs (breast, cervical and bowel cancer) in regional areas.</li> </ul>	Q4
Deliverable 3.4.2	Cancer Plan Implementation Plan Activity 2.4b	
Strengthen cancer and chronic disease screening	<ul style="list-style-type: none"> <li>Deliver projects that ensure equitable access to breast, cervical and bowel cancer screening for all target groups and focus populations by: <ul style="list-style-type: none"> <li>engaging with focus populations and community in the design, implementation and prioritisation of cancer screening and prevention initiatives and programs of work</li> <li>Implementing and embedding community funding initiatives to achieve strategic and value-based outcomes for breast, cervical and bowel cancer screening.</li> </ul> </li> </ul>	Q4

Key Objective	Deliverable in 2023-24	Due by
<b>Priority 4: Keep communities informed, build engagement, seek feedback</b>		
<b>Strategic Objective 4.1: Encourage choice and control over health outcomes by investing in health literacy, awareness of services and access to information</b>		
Deliverable 4.1.3	Cancer Plan Implementation Plan Activity 3.4a	
Provide information in various forms	<ul style="list-style-type: none"> <li>Provide accessible information via web-based resources to support people affected by cancer and assist them in self-management and informed decision making.*</li> <li>* <i>Rural Health Inquiry action</i></li> </ul>	Q4
<b>Strategic Objective 4.4: Capture patient experience and feedback and use these insights to improve access, safety, and quality of care</b>		
Deliverable 4.4.2	Cancer Plan Implementation Plan Activity 3.7a	
Use feedback tools	<ul style="list-style-type: none"> <li>Deliver Patient-Reported Measures (PRMs) Program to capture the perspectives of patients on their experiences and outcomes of their cancer care, including Aboriginal and multicultural patients in regional areas.</li> </ul>	Q4
Deliverable 4.4.3	Cancer Plan Implementation Plan Activity 3.7a	
Capture data from Aboriginal Patients	<ul style="list-style-type: none"> <li>Embed the Aboriginal Wellbeing and Supportive Care needs Assessment surveys within the cancer PRMs program to support appropriate assessment of Aboriginal people accessing cancer services in regional areas.</li> </ul>	Q4
<b>Priority 5: Expand integration of primary, community and hospital care</b>		
<b>Strategic Objective 5.3: Improve access and equity of services for Aboriginal people and communities to support decision-making at each stage of their health journey</b>		
Deliverable 5.3.4	Cancer Plan Implementation Plan Activity 3.2a	
Engage with Aboriginal communities	<ul style="list-style-type: none"> <li>Facilitate the development and implementation of coordinated care for Aboriginal people with cancer by working together with LHDs, Aboriginal health providers and Primary Health Networks.</li> </ul>	Q4

Key Objective	Deliverable in 2023-24	Due by
<b>Priority 6: Harness and evaluate innovation to support a sustainable health system</b>		
<b>Strategic Objective 6.2: Fund and implement digital health investments and increase capability of workforce to deliver connected patient records, enable virtual care, provide insightful health data and streamline processes</b>		
Deliverable 6.2.3	Cancer Plan Implementation Plan Activity 4.5b	
Increase operational technology	<ul style="list-style-type: none"> <li>Strengthen cancer research capability by supporting and developing cancer researchers including career support fellowships, travel grants and Translational Cancer Research Capacity Building Grants in regional areas.</li> </ul>	30 June 2024
Deliverable 6.2.4	Cancer Plan Implementation Plan Activity 4.5a	
Improve and streamline supporting technology	<ul style="list-style-type: none"> <li>Provide process improvement education and support to build business efficiencies and quality standards within the cancer control workforce.</li> </ul>	30 June 2024
<b>Strategic Objective 6.3: Undertake research and evaluation with institutions, industry partners, NGOs, consumers and carers</b>		
Deliverable 6.3.1	Cancer Plan Implementation Plan Activity 4.1a	
Invest in targeted grants and trials	<ul style="list-style-type: none"> <li>Facilitate research through a translational cancer research grant program in regional areas.</li> </ul>	30 June 2024
Deliverable 6.3.2	Cancer Plan Implementation Plan Activity 4.1b	
Prioritise funding to increase research in regional areas	<ul style="list-style-type: none"> <li>Encourage basic research to be translated to implementation by collaborating with accredited Research Translation Centres, independent medical research institutes and universities.</li> </ul>	30 June 2024
Deliverable 6.3.3	Cancer Plan Implementation Plan Activity 4.4a	
Involve regional staff in research opportunities	<ul style="list-style-type: none"> <li>Educate and engage with primary care providers to increase knowledge and awareness about cancer research, so they may engage with their cancer patients.</li> </ul>	30 June 2024