

Cancer priority population explorations

Creating consistency and robustness in current-state analysis of cancer care for priority populations: a protocol design

Ashley Macleod^{1,2} and Linda Nolte^{1,2}

1 – North Eastern Melbourne Integrated Cancer Service (NEMICS), Heidelberg, Victoria, Australia

2 – Victorian Integrated Cancer Services (VICS), Melbourne, Victoria, Australia

Background

The Victorian Integrated Cancer Services (VICS) are Victoria's cancer service improvement network. Funded by the Victorian Department of Health, the VICS work to facilitate, advocate for, and deliver equitable, evidence-based improvements in cancer care that aligns with local and national priorities, such as the Victorian Cancer Plan (VCP) 2024-28 and the Australian Cancer Plan.[1,2] Both the Australian and Victorian Cancer Plans place special emphasis on improving cancer care, experience, and outcomes for population groups who experience health inequities related to cancer. [1,2] Inequities in cancer care can occur at any stage of the cancer journey and can be driven by various demographic markers including socioeconomic status (SES), race or ethnicity, sex, disability, sexuality, age, and geographical location.[3]

Ensuring equitable and quality cancer care is available to all Australians requires a robust understanding of how cancer care policy, access to services, and a person's experience of cancer care interconnect with their demographic profile to produce inequity. Historically, current-state analyses of priority populations in cancer service improvement initiatives focus almost exclusively on aspects of cancer care and outcomes that directly relate to a project's stated aims. While this approach is sufficient at a project level, it generates limited population-specific information that can be used to identify and prioritise service improvement opportunities more broadly.

Aim

The protocol outlines a systematic and robust approach to exploring current-state cancer care that can be used to identify evidence-based, data-informed cancer service improvement opportunities that are tailored to the needs of the local community. It includes several independent but complementary investigations that contribute to a broader understanding of current-state cancer care for priority populations.

Methods

In 2024, the North Eastern Melbourne Integrated Cancer Services (NEMICS) developed an investigative framework to facilitate robust, structured assessments of current-state cancer care for target priority populations. The protocol can be used to explore different aspects of cancer care for target population groups where population-specific information is lacking at a local level.

Core investigations in the protocol include:

- a rapid literature review of the known barriers to equitable cancer care for the target population,
- a systematic policy review of publicly available Australian cancer care policy resources relating to cancer care for the target population,
- an examination of cancer related datasets and their data dictionaries to determine whether data fields are present that can reliably identify the target population as a subgroup in the data,
- statistical analysis of cancer related data (where the target population can reliably be identified) to investigate potential variations in cancer care, and
- an analysis of state-level cancer patient data, and insights from lived experience through cancer patient surveys and community consultations.

The protocol was initially developed and piloted in investigations related to LGBTIQ+ cancer care and further refined in investigations related to culturally and linguistically diverse (CALD) populations.

Results

The protocol was developed and piloted by NEMICS in investigations related to LGBTIQ+ cancer care and further refined in investigations related to culturally and linguistically diverse (CALD) populations. Significant interest and support for the protocol was obtained from other members of the VICS, resulting in the development of a supporting toolkit that provides clear instructions, guidance and templates that can be used when scoping current-state cancer care to inform potential service improvement activities. Uptake of the new protocol will be monitored by tracking the number of new priority population investigations produced using the associated toolkit. The utility of the protocol in guiding service improvement activities will be measured by identifying the total number of projects commissioned and/or delivered in response to results from new current-state analyses.

To date, the protocol has been applied to scoping activities to understand cancer care for LGBTIQ+ and CALD populations in the NEMICS region. Key recommendations from the LGBTIQ+ population explorations have been used to facilitate several service improvement activities and ongoing partnerships with member health services to provide more visible support for LGBTIQ+ communities in hospital settings. Key recommendations from the CALD population explorations have been used to drive local service improvement initiatives and has led to the successful advocacy for a statewide summit to identify and address unwarranted variation in Victorian CALD cancer care, facilitated by the VICS Optimal Care Summits Program.

Current-state cancer care exploration protocol for priority populations



Patient experience exploration

Mixed-methods analysis of existing patient reported experience measures where available, and/or custom surveys or focus groups to understand the local experience of cancer care for the priority population.

Rapid literature review

Thematic analysis of the needs, barriers, inequities, and outcomes related to cancer care for the priority population to produce a comprehensive but succinct map of existing knowledge related to cancer care for the priority population.

Environmental policy scan

Systematic scan of Australian cancer plans, strategies, policies, clinical guidelines, pathways and/or frameworks to understand the internal and external context of cancer care delivery for the priority population.

Cancer dataset review

Exploration of the availability and type of cancer data related to the target population using data dictionaries to identify data fields that could be used to determine a person's membership status within the target population group.

Statistical analyses

Retrospective descriptive analyses of available priority population data exploring demographics, diagnoses, procedures, and (where possible) between-group variations in the cancer care received.

Conclusions

This protocol represents a significant step toward ensuring local service improvement initiatives are relevant, targeted, evidence-based, and measurable. It provides a robust and repeatable methodology that sets clear parameters for investigative processes, structured data collection to establish baselines, and creates a strong framework to guide future evaluations that effectively track progress and measure short- and long-term impact over time. Significant interest and support for the protocol from other members of the VICS led to the development of a priority population exploration toolkit that provides clear instructions, guidance and templates that can be used when scoping potential service improvement activities that are informed by and respond to the specific needs of priority populations.

References

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NEMICS is a cancer services improvement network. NEMICS builds relationships between healthcare providers and other cancer care stakeholders to develop, implement and evaluate initiatives that improve the way our member health services provide care and support people affected by cancer. For more information, visit www.vics.org.au/nemics.

Correspondence

Questions should be directed to Dr. Ashley Macleod ashley.macleod@austin.org.au

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