

# Interim Report

VICCS Statewide Survivorship Program

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# Authorship

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# Abbreviations

<b>Contraction/Acronym</b>	<b>Description</b>
ACSC	Australian Cancer Survivorship Centre
AYA	Adolescence and Young Adults
BSWRICS	Barwon South Western Region
COSA	Clinical Oncology Society of Australia
CNC	Clinical Nurse Consultant
DH	Department of Health
EOI	Expression of Interest
GICS	Grampians Integrated Cancer Services
GRICS	Gippsland Regional Integrated Cancer Services
HREC	Human Research Ethics Committee
HRICS	Hume Regional Integrated Cancer Services
ICS	Integrated Cancer Services
LMICS	Loddon Mallee Integrated Cancer Services
MOC	Models of care
NEMICS	North Eastern Melbourne Integrated Cancer Services
PICS	Paediatric Integrated Cancer Services
PREMS	Patient reported experience measures
PROMS	Patient reported outcome measures
QoL	Quality of life
SMICS	Southern Melbourne Integrated Cancer Services
VCP	Victorian Cancer Plan
VICS	Victorian Integrated Cancer Services
WCMICS	Western and Central Melbourne Integrated Cancer Services
NWAU	National Weighted Activity Unit
VINAH	Victorian Integrated Non-Admitted Health
MBS	Medicare Benefits Schedule
FFA	Full funding applications
SCN	Survivorship Clinical Networks

# Summary

**This report reflects the activities conducted and achieved from January - December 2025.**

The VICS Statewide Survivorship Program was established to improve access to consistent, high-quality survivorship care across Victorian health services by identifying existing models of care and supporting the local adoption of proven approaches. Funded by the Department of Health and supported by the Victorian Integrated Cancer Services (VICS), the program focuses on strengthening survivorship systems rather than creating new standalone services.

- Between January and December 2025, the program completed its establishment and mobilisation phase, delivering foundational statewide infrastructure to support survivorship care across Victoria.
- A six-week environmental scan capturing 85 responses, representing 53 unique public hospital campuses and 7 community/non-government organisations, establishing the first statewide baseline of survivorship service provision.
- Development and public release of the Cancer Follow-Up Care Catalogue, providing health services with visibility of established survivorship models of care and supporting local adoption and adaptation.
- Establishment of statewide governance structures, including a multidisciplinary Steering Committee with Department of Health representation.
- Distribution of \$321,529 in seed funding (including ICS co-contributions) to support implementation of survivorship models across 14 metropolitan and regional services.
- Launch of the Survivorship Clinical Network to support knowledge exchange and implementation capability.

The environmental scan identified significant variation in survivorship service provision across tumour streams and regions. While breast and haematology survivorship services were commonly reported, lung and upper gastrointestinal survivorship services were comparatively limited. Most services were nurse-led and frequently supported by allied health; however, survivorship activity was often delivered outside formal data capture systems, limiting visibility of service demand, outcomes, and sustainability. Community-based survivorship services were available but demonstrated limited integration with acute health service systems.

In 2026, the program will shift its focus to supporting funded sites through implementation, strengthening evaluation and reporting processes, and consolidating learning to inform sustainable, scalable survivorship models across Victoria. Interim site reports are due March 2026, with final evaluation of funded projects and statewide program reporting scheduled for late 2026.

# Program Overview

The VICS Statewide Survivorship Program supports Victorian health services to improve access to survivorship care for people who have completed active cancer treatment, with a focus on adopting established models of care. For this program, “*follow-up*” or “*survivorship*” refers to the period after a patient completes active cancer treatment. The program commenced in late 2024, with establishment and baseline mapping activities delivered throughout 2025.

## Governance

To ensure strategic oversight to the program, VICS Survivorship Steering Committee was established in the beginning of this program. Members include subject matter experts in survivorship care, primary care representatives and consumers. A Survivorship Working Group was also formed to provide day-to-day support for projects delivered through the program. In addition, VICS Program Managers and Directors were kept informed of program activities as required. Governance arrangements ensure alignment with Department of Health priorities and provide statewide oversight of funding decisions and implementation progress.

## Funding and Governance

- The Department of Health contributed **\$315,000** in seed funding to support local adoption and pilot implementation of survivorship models of care across ICS member health services.
- Funding was intentionally directed to local implementation rather than central staffing, to enable health services to embed survivorship models within existing structures and promote sustainability.
- A statewide Survivorship Steering Committee was established in February 2025 to provide oversight of the program. Committee members include ICS Program Managers, the Survivorship Program Lead, consumers, and subject matter experts in survivorship care.
- The Steering Committee met quarterly during 2025 and will continue to meet quarterly in 2026.

## Key program components

The VICS Survivorship Program comprises four core components:

- Statewide environmental scan and ‘Cancer Follow-Up Care Catalogue’
- Survivorship Grants Program
- Survivorship Clinical Network
- Local ICS-led implementation support

[Full report available on request.](#)