WCMICS acknowledges Australia’s Aboriginal and Torres Strait Islander community and their rich culture and pays respect to their Elders past and present. We acknowledge Aboriginal and Torres Strait Islander peoples as Australia’s first peoples and as the Traditional Owners and custodians of the land and water on which we rely.

WCMICS would like to acknowledge the Victorian Department of Health for their continued support. We would also like to thank the staff from our partner health services and consumers whose contributions have been valuable and critical to our work throughout the year.
contents

04  a word from us

08  about us

10  cancer statistics

12  COVID and cancer

14  our work

22  statewide work

23  future directions

24  financial summary

25  our people
On behalf of the Western & Central Melbourne Integrated Cancer Service (WCMICS), we are delighted to share this annual report with you.

It has been yet another year of challenges and resilience, with the pandemic impacting the way we live, work and care for our community. Across all of our organisations we have asked more from our people than perhaps ever before; adapting rapidly to meet the needs of our patients and families and ensuring we continue to provide the safe, quality care and support they expect from us.

Despite these challenges we have many achievements to celebrate. Our commitment to provide the best cancer care for patients has continued to be at the forefront of everything we do. WCMICS continued supporting our partner health services in our shared pursuit of improving patient experiences and outcomes by connecting cancer care and driving best practice.

*Our hospitals and our people, like the community we care for, have tested and reinforced our capabilities and resilience again this year, as these unprecedented events become the new-normal of how we live and work*

**Tackling unwanted variations:**

Another key initiative undertaken this past year was commencing work against the Victorian ICS Implementation Plan. WCMICS has begun work to measure unwarranted variations against the Optimal Care Pathways (OCPs), with a key deliverable being the development of a statewide suite of cancer clinical indicators. WCMICS commenced a statewide program of work to improve workforce knowledge of the OCP for Aboriginal and Torres Strait Islander people with cancer and improve understanding of their needs.

**Data-driven improvements:**

Over the past year, approximately 6000 Victorians were admitted to a WCMICS health service with a newly diagnosed cancer. However as a result of the pandemic, overall admitted cancer activity dropped by 7% from 2019 across all WCMICS health services. WCMICS continues to provide a busy data service, exploring new ways of analysing data and responding to requests to support service planning and improvement work.
Supporting delivery of better cancer care:
Providing quality cancer care for such a diverse community across an extensive catchment, inspires us to design and deliver innovative models of care and service delivery. Through the annual WCMICS grants program, last year saw 8 new projects funded, bringing us to a total of 14 funded projects currently under way or completed during the year: including improvement projects in malnutrition, multidisciplinary exercise rehabilitation, support and training for carers, rapid adoption of telehealth and alignment with the OCPs.

WCMICS continues to build a strong integrated improvement network across the cancer sector

As we prepare for the year ahead, we’re proud to reflect that throughout this period we have continued to remain focused on improving patient experiences and outcomes by connecting cancer care and driving best practice. Our ability to adapt and innovate is a source of pride across the WCMICS network.

Finally, special thanks the WCMICS team, our clinicians, consumers and execs, as well as our many community stakeholders. Thank you to the Department of Health and the Victorian Government for their ongoing support of WCMICS. Your support, commitment and passion are greatly appreciated and make an incredible difference to the patients we care for.

We look forward to working with you over the next year.

PROF SHELLEY DOLAN
WCMICS Chair
CEO, Peter MacCallum Cancer Centre

KATH QUADE
WCMICS Manager
Thanking Jeff for his time and effort invested in WCMICS over the last 15 years.

Jeff was first involved in WCMICS through the formation of our inaugural Haematology Tumour Group and then as WCMICS Clinical Director for over a decade. Jeff has played a pivotal role in helping WCMICS evolve from its infancy to the sophisticated network it is today.

Significant progress was made during Jeff’s time with WCMICS. From the early establishment of WCMICS through to the mature program of work we see today. Jeff’s active involvement in our governance committees, working groups, and statewide ICS activities has made a significant contribution to this.

On behalf of all the committee members, health service partners and the WCMICS program office, it has been a pleasure working with you Jeff and we wish you every future success.

Jeff’s wealth of experience and approach regarding the delivery of cancer care for Victorian patients has been greatly valued.

Thank you Jeff

Celebrating 15 years of dedication, contributions and clinical engagement across Western & Central Melbourne Integrated Cancer Service.

PROF JEFF SZER
# Snapshot Highlights from the Year

## VICS Data & Information Strategy Framework
WCMICS is co-leading a statewide project aimed at developing a strategic and consistent statewide approach to how the ICS work with data.

## 8 New Funded Projects
Through the annual WCMICS grants program; provided to 7 WCMICS health services for quality improvement and service redesign projects. In total, 14 funded projects currently underway or completed; including improvement projects in malnutrition, exercise, rapid adoption of telehealth and alignment with the OCPs.

<table>
<thead>
<tr>
<th>Total Amount</th>
<th>400,000</th>
</tr>
</thead>
</table>

## Telehealth Improvements

- 2,867 patients on average using video consultations per month
- 54% overall average increase in the use of video over phone consultations

## Impact of COVID

- Reduction in cancer patient admissions across WCMICS health services: 7%

## Enhancing Metro-Regional Partnerships
WCMICS supported 2 partner metro health services streamline and improve cancer referrals from regional health services. This contributed to decreased time from referrals to first specialist appointment; ensured MDM discussions and enhanced timely communication between clinicians.

> "[new process] definitely helps communication between clinicians; it means we're more efficient and if we're able to get a patient through the system quicker then it's worth it"

Upper GI Nurse Coordinator

## Improvement Hub
Supporting the annual Grants Program, the team have launched the WCMICS Improvement Hub. Here you will find a repository of past funded projects and supporting documentation, in addition to useful resources to support a successful application.
about us

Established in 2006, the Western & Central Melbourne Integrated Cancer Service (WCMICS) is funded by the Department of Health. WCMICS is one of nine cancer improvement networks across Victoria. The population-based Integrated Cancer Services (ICS) collectively support the consistent provision of high quality cancer care for all Victorians.

WCMICS is a partnership with local health services to promote coordinated care planning, systems integration and improvement of cancer services across the western and central regions in Melbourne.

WCMICS work is overseen by a Governance Committee and a Clinical Management Advisory Committee. Membership includes representation from people affected by cancer; multidisciplinary clinicians; and executive stakeholders from partner hospitals and cancer related organisations.

our vision

Improving patient experiences and outcomes by connecting cancer care and driving best practice
how we do it

Collaboration
Working in partnership with government, the cancer sector and people affected by cancer to understand unmet needs and to drive evidence based improvements.

Facilitation
Accelerating opportunities to expand the quality and reach of cancer services to improve access to and equity of care.

Innovation
Creating new and different ways to deliver cancer services and support change that benefits the entire cancer community.

our region
The western and central region of Melbourne is an area of great contrasts – in geography, economy, demographics and cultural diversity. It stretches from the suburbs of Yarra; up to the city of Hume; out through to Melton, and down to the surrounding suburbs of Werribee. This covers a total area of 2,035 square kilometres.

our health service partners
- Djerriwarrh Health Services
- Melbourne Health
- Peter MacCallum Cancer Centre
- Royal Women’s Hospital
- Royal Victorian Eye & Ear Hospital
- St Vincent’s Hospital Melbourne
- Werribee Mercy Hospital
- Western Health
cancer statistics

people affected by cancer in Victoria

- Cancer is a leading cause of disease burden in Victoria with 131 new diagnoses each week
- Two thirds (66%) of cancers diagnosed are in Victorians aged over 60 years, and less than 3% in those aged under 30 years
- The five most common cancers in are haematological, genitourinary, lung, upper GI and breast, collectively accounting for 65% of new cancers across WCMICS health services

source: Victorian Cancer Registry (VCR) - 2020

85,178 people were admitted for cancer treatment in 2020

source: Victorian Admitted Episode Dataset (VAED) - 2019/20
activity across wcmics

cancer diagnosis

6,083 people were admitted to a WCMICS hospital with a newly diagnosed cancer that equates to 17 new diagnoses every day. That’s 1 EVERY 90 MINUTES.

however, last year saw an 11% decrease in new diagnoses since 2019.

clinical activity

14,286 patients admitted
5,957 elective surgery patients
4,968 chemotherapy patients
37,233 allied health interventions

patient demographics

44% female
56% male

115 admitted patients in our region identified as indigenous and 23% of patients who identified as Aboriginal and/or Torres Strait Islander across Victoria are treated in a WCMICS health service.

the top 3 countries of birth other than Australia were Italy, England, Greece.

the median age group when a person is diagnosed with cancer is 60-69.

tumour streams

leading tumours for patients treated in our region:

- 17% skin
- 13% genitourinary
- 11% lung
- 10% haematological
- 9% breast

source: VAED - 2020
The COVID-19 pandemic disrupted cancer care, including delaying diagnoses and treatment, and halting clinical trials.

Despite cancer-related services classified as vital and remaining available, utilisation reportedly dropped due to patient reluctance to access services.

The five most common cancers represent approximately 60% of all cancer diagnoses. From these alone it is estimated that there will be an additional 3000 – 4000 cancer presentations over the next 12 months due to delayed diagnosis. Furthermore, based on reduced notifications, the Victorian Cancer Registry (VCR) estimate 2530 cancer diagnoses were either delayed or missed during the most severe lockdown period (April through to October 2020).

WCMICS analysed overall cancer activity at each site and across all tumour streams to show changes in numbers of admissions and patients between 2019 and 2020 from the Victorian Admitted Episode Dataset (VAED).

Key data across WCMICS

- 5091 fewer admissions (↓7%) and 2857 fewer patients (↓10%) from 2019 to 2020
- Previous trends have shown ~5% annual increase in activity across WCMICS
- Size of reduction varies significantly between tumour streams and health services
impact of COVID-19 on cancer in 2020

admissions

72 cancer patients were diagnosed with COVID-19 across Victoria in 2020.

44% of these patients were treated at a WCMICS health service

In total, cancer patients with COVID-19 in WCMICS health services spent 975 hours in ICU and 764 hours on mechanical ventilation

5% decrease in admissions across WCMICS in 2020 compared to 2019, with highest decline seen in AUGUST -17%

overall Victoria saw a decrease of 3% across the state

tumour streams

the 3 tumour streams with the largest drop in new patients in 2020 compared to 2019 were:

- colorectal -19.4%
- breast -16.7%
- skin -13.4%

72

inpatient procedures

2020 saw a significant decline in the number of procedures performed. The only procedure which saw an increase in 2020 was chemotherapy (8.1%)

-10.1% scopes
-9.6% diagnostic
-8.7% biopsies

72

allied health interventions

overall allied health only saw a 1.5% decrease in activity from 2019 to 2020, however when we deep dive we can clearly see some interventions were more impacted than others

decrease in activity

-40.2% music therapy
-19% podiatry
-9.4% dietetics

increase in activity

17.6% diabetes education
17.4% prosthetics and orthotics
10.4% pastoral care

source: VAED – 2020

further information

if you would like more information on any of the data provided in this report please email: contactWCMICS@petermac.org
implementing the cancer plan

The Victorian Cancer Plan 2020–24 sets ambitious targets to demonstrate improvements in cancer prevention and outcomes.

With an increasing emphasis on delivering collective effort and impact at scale the Victorian Integrated Cancer Services (VICS) Network Group developed the VICS Implementation Plan 2021–2022.

The plan summarises how, over the two years, VICS will work towards addressing its roles and responsibilities in the Victorian Cancer Plan 2020–2024.

The VICS Implementation Plan 2021–22 comprises three priority areas:

- improve access to high quality cancer care,
- support the implementation of Optimal Care Pathways (OCPs),
- and improve wellbeing for all Victorians affected by cancer.

Within these three priorities there are 18 specific focus areas that are being developed into a series of projects and initiatives for delivery during the plan period. All projects and initiatives will be monitored and measured over the life of the plan.
The nationally endorsed Optimal Cancer Care Pathways (OCPs) describe the optimal care for specific tumour types. They form the basis of our service improvement and redesign work. Below are some key pieces from the past year.

**enhancing metro-regional partnerships:**

WCMICS in collaboration with Hume Regional Integrated Cancer Service (HRICS), sought to improve patient outcomes for upper gastrointestinal (upper GI) cancer patients by establishing communication between metro and regional hospitals.

Cancer patients are referred from a regional hospital to a metropolitan hospital for complex upper GI surgery. It was identified that the lack of a communication process between these health services may affect timeliness of care and patient outcomes.

A REDCap (Research Electronic Data Capture) database was developed with expert advice provided by the clinical working group. The tool was built to reflect and integrate with clinical workflow. Entry of patients into the REDCap database generated an automatic email notification which informs users about the newly referred patient. This enabled clinicians at both sites to enter patient medical information in the database, such as consultation notes from the medical record. It provided a secure mechanism for the transfer of key information between the two providers.

Following the pilot, clinicians reported that the system was an effective tool for communication in the absence of a shared platform between the metro and regional health services. The REDCap database model allows efficient communication and visibility of patient treatment journey between health services, thus ensuring quality of care and better patient outcomes.
Supportive care:

Supportive care (SC) is essential to improving quality of life and better health outcomes for people affected by cancer. However, gaps persist in routine screening of patient SC needs. WCMICS partnered with Western Health to develop an electronic supportive care screening tool (e-SCST), to meet the particular needs of a culturally diverse population of radiotherapy patients.

The aim was to enhance the experience of people with cancer, carers, and family, by providing equitable access and a systematic approach to cancer SC screening, using a validated electronic tool translated into languages other than English.

Health literacy and languages other than English were a specific consideration. As such, co-designed infographics were incorporated to complement each problem item, and then translated. Patients can complete the tool on a portable mobile device with results automatically emailed to the health service.

Evaluation included utility testing; 100% of pilot patients rated the e-SCST as simple to follow and use; 95% of patients acknowledged it was important to discuss their concerns during treatment; and 83% of screening results were documented as being discussed with patients. SC actions following screening were also evaluated. The most common reported by patients was discussion and not needing any additional information (39%), followed by staff arranging a referral to another healthcare professional (28%).

This pilot highlighted the value of using a translated e-SCST in a culturally diverse population. The inclusion of infographics supported health literacy needs. Addressing unmet SC needs using an equitable and systematic approach empowered and enhanced the experience of people with cancer and their families during radiotherapy treatment.
Telehealth:

WCMICS continued to support our health services in the adoption of video telehealth consultations this past year. 87 clinics across seven major metropolitan Melbourne public health services received the following support:

- 184 technology upgrades
- 3500hrs hands-on project time
- Training of 460 clinicians

Video consultations have increased by an average of 54% versus phone as the preferred delivery for telehealth consultations, with up to 3000 cancer patients utilising video every month since implementing improvements.

This was especially valuable during COVID-19 restrictions with capacity limits in hospital waiting rooms and in allowing support person involvement while visitor numbers are limited. Patients reported reduced travel time and costs. They also felt more comfortable, therefore inclined to disclose information compared with phone. Clinicians reported convenience of time saved performing infection control measures between in-person consultations, not wearing masks, and patient’s increased engagement and retention of information compared to via phone. A reduction of 4% in costly ‘Failed To Attend’ rates was also seen.

During the pandemic, patient anxieties have been especially heightened, leading some to avoid seeking medical care when needed. Telehealth enabled patients to access comprehensive, safe and prompt care despite location, travel restrictions or medical conditions. It decreases foot traffic through hospitals, limits crowded waiting areas and can avoid exposure for vulnerable patients.

Both patients and clinicians report a preference for video consultations over phone due to the increased capability of visual assessments, personable engagement and avoidance of barriers such as non-verbal cues and mask-wearing. To drive the success and uptake of telehealth, it is instrumental for clinicians to champion the change.
The Women’s Hospital establishing telehealth consultations in oncology clinics

Peter MacCallum Cancer Centre establishing telehealth in oncology clinics

enhancing telehealth consultations through infrastructure upgrade

The Royal Melbourne Hospital pilot use of telehealth in remote monitoring of immunosuppressed myeloma patients

The Royal Victorian Eye & Ear Hospital establishing video consultations in ocular oncology clinic

St Vincent’s Hospital establishing telehealth in oncology clinics

Western Health establishing telehealth consultations in gynaeco-oncology clinics

The Women’s Hospital establishing telehealth consultations in oncology clinics

Summary of telehealth service improvements grants awarded:

<table>
<thead>
<tr>
<th>Health Service</th>
<th>Telehealth Service Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Djerriwarrh Health Service</td>
<td>pilot of telehealth consultations in community palliative care</td>
</tr>
<tr>
<td>Peter MacCallum Cancer Centre</td>
<td>enhancing telehealth consultations through infrastructure upgrade</td>
</tr>
<tr>
<td>The Royal Melbourne Hospital</td>
<td>pilot use of telehealth in remote monitoring of immunosuppressed myeloma patients</td>
</tr>
<tr>
<td>The Royal Victorian Eye &amp; Ear Hospital</td>
<td>establishing video consultations in ocular oncology clinic</td>
</tr>
<tr>
<td>St Vincent’s Hospital</td>
<td>establishing telehealth in oncology clinics</td>
</tr>
<tr>
<td>Western Health</td>
<td>establishing telehealth consultations in gynaeco-oncology clinics</td>
</tr>
<tr>
<td>The Women’s Hospital</td>
<td>establishing telehealth consultations in oncology clinics</td>
</tr>
</tbody>
</table>

WCMICS works in collaboration with partner health services to improve the lives of those affected by cancer. This is supported by WCMICS’ grants program. In response to the rapidly evolving landscape of COVID-19, WCMICS focused on supporting telehealth adoption across our network.

Summary of telehealth service improvements grants awarded:

- **Djerriwarrh Health Service**: Pilot of telehealth consultations in community palliative care
- **Peter MacCallum Cancer Centre**: Enhancing telehealth consultations through infrastructure upgrade
- **The Royal Melbourne Hospital**: Pilot use of telehealth in remote monitoring of immunosuppressed myeloma patients
- **The Royal Victorian Eye & Ear Hospital**: Establishing video consultations in ocular oncology clinic
- **St Vincent’s Hospital**: Establishing telehealth in oncology clinics
- **Western Health**: Establishing telehealth consultations in gynaeco-oncology clinics
- **The Women’s Hospital**: Establishing telehealth consultations in oncology clinics

**TOTAL AMOUNT $372,673 of grants awarded**

- **7 health services received project funding and support**
- **3444 hours funded for short-term telehealth project officers**
- **333 IOT items funded to support video telehealth consultations**

**40% capacity increase**

Djirri Community Initiative Care Service

Up to 28 clinicians to 11 due to the savings of time normally spent travelling to clients’ homes

**100% consulting rooms now telehealth enabled**

Cancer services at St Vincent’s Hospital are now able to facilitate telehealth in 47 outpatient clinics per week

**8 hours per week saved**

Administrative tasks removed since ICT upgrade

More time spent on patient care, knowing and improving outcomes

**Two-thirds of visits replaced with virtual care**

Melbourne Health haematology patients are now equipped for virtual care consultations

**25% reduction in clinic foot traffic**

Circular oncology pilot commenced at E1, saving patients an average of 37 minutes in the clinic

**90% registered and trained Healthdirect users**

Oncology clinicians at Western Health

**e-Learning modules**

In production and 50% of staff now competent in telehealth navigation
virtual annual forum 2020

A year in review:
The 2020 WCMICS annual forum highlighted but a small sample of the great quality improvement and service redesign initiatives across the region.

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Presentation Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jenny Weil</td>
<td>St Vincent’s Hospital</td>
<td>Advanced communication skills workshops for oncology, haematology and palliative medicine registrars</td>
</tr>
<tr>
<td>Tara Gannon</td>
<td>WCMICS</td>
<td>Establishing Victoria’s first peer-led Head &amp; Neck support group</td>
</tr>
<tr>
<td>Travis Hall</td>
<td>Australian Cancer Survivorship Centre</td>
<td>Enhancing cancer survivorship through translation and audio resources</td>
</tr>
<tr>
<td>Kate Whitehead</td>
<td>WCMICS</td>
<td>Telehealth in cancer services; rapid response during COVID19</td>
</tr>
<tr>
<td>Stacey Panozzo</td>
<td>Peter Mac &amp; St Vincent’s Hospital</td>
<td>Identifying gaps in service provision of cancer palliative care across WCMICS health services</td>
</tr>
<tr>
<td>Alison Trainer</td>
<td>Familial Cancer Centre</td>
<td>Breast and ovarian cancer prevention: empowering equity of access for women and their families, with high risk hereditary mutations</td>
</tr>
<tr>
<td>Michael Harold</td>
<td>Walter &amp; Eliza Hall Institute</td>
<td>Improving patient and GP information and communication with an electronic care plan</td>
</tr>
<tr>
<td>Justin Yeung</td>
<td>Western Health</td>
<td>Patient Reported Outcomes in Colorectal cancer patients from culturally and linguistically diverse backgrounds</td>
</tr>
<tr>
<td>Dilu Rupassara</td>
<td>WCMICS</td>
<td>Partnering with consumers for impact.</td>
</tr>
</tbody>
</table>
quality & performance monitoring

Cancer Service Performance Indicators (CSPI) audit:
The CSPI audits are used to measure progress across Victoria in relation to multidisciplinary meetings (MDMs), supportive care and care coordination. The WCMICS results from the latest audit of patients diagnosed in 2020 are below:

- **Evidence of MDM recommendations**: 82%
- **Evidence of patient performance status in MDM recommendations**: 28%
- **Evidence of supportive care screening**: 5%
- **Evidence of cancer staging in the MDM recommendations**: 77%
- **Evidence of treatment plan sent to GP**: 72%
Multidisciplinary meeting quality framework audit:
The statewide multidisciplinary meeting quality framework was developed by the ICS to enhance and support the quality, effectiveness and consistency of cancer multidisciplinary team meetings. In addition to the CSPI audit fields, a local audit of cancer MDMs across the region against the quality framework provided insights on current practice and opportunities for improvement. A small selection of the measures from the audit are shown below:

- Lead clinician documented in MDM: 67%
- Investigations prior to treatment documented: 94%
- Diagnosis date documented: 62%
- Evidence of MDM recommendations sent to GP: 67%
- Prospective MDM: 78%
- Retrospective MDM: 22%

Following further analysis of the quality data obtained through these local audits, WCMICS will identify areas for improvement and work with health services and individual MDMs to progress improvement activities.
palliative care

The VICS collaborated with key Victorian palliative care stakeholders to undertake a scoping project to understand challenges in:

- all patients with metastatic or progressing cancer receiving a timely and appropriate referral to palliative care; based on need rather than prognosis in accordance with the OCP recommendations,
- all patients with a cancer diagnosis being routinely encouraged to develop an advance care plan in accordance with the OCP recommendations.

victorian tumour summits

The summits enable a statewide discussion about unwarranted variations in outcomes and care. Each tumour summit is informed by analyses of available data led by an expert working group made up of cancer clinicians from across the state. Stakeholders review the data, and discuss and prioritise variations that can be addressed in a one-to-two-year timeframe. Planned future summits include brain, breast, melanoma and pancreatic.

data & information management framework

The VICS identified the opportunity to develop a strategic and consistent statewide approach to how we work with data. The development of the VICS Data and Information Management Framework will significantly enhance the ICS’ ability to improve patient experiences and outcomes efficiently and effectively.
future directions

OCP monitoring & reporting

The VICS are well positioned to ensure that services providing paediatric and adult cancer care across Victoria can be monitored and benchmarked against best–practice outlined in the OCPs.

Clinical indicators are utilised within the health sector to highlight good practice and to indicate potential issues relating to safety and quality of care, access and timeliness, and patient outcomes. WCMICS is co–leading this piece of work to enable the ICS to respond effectively to identified issues and assist health services to continue to deliver safe, high–quality care.

aboriginal & torres strait islander OCP

WCMICS is co–leading the implementation of the Aboriginal and Torres Strait Islander OCP. Over the next 12 months our focus is to collaborate with Aboriginal Controlled Health Organisations and other key partners to improve workforce knowledge of the OCP, in addition to understanding the unique needs of Aboriginal and Torres Strait Islander people with cancer.

survivorship

People with cancer are living longer after their diagnosis. Five–year survival after diagnosis is currently 69% across Victoria. Still, cancer survival is not equitably distributed. WCMICS co–leads the facilitation of high–quality survivorship care. Planned work in collaboration with the Australian Cancer Survivorship Centre, includes supporting their Embed and Spread Project.
## financial summary

### income

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHHS - ICS Grant</td>
<td>$1,934,290</td>
</tr>
<tr>
<td>Other revenue</td>
<td>$75,763</td>
</tr>
<tr>
<td><strong>Income total</strong></td>
<td><strong>$2,010,053</strong></td>
</tr>
</tbody>
</table>

### expenditure

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Salaries and wages</strong></td>
<td></td>
</tr>
<tr>
<td>ICS Program Office &amp; Clinical positions</td>
<td>$1,285,343</td>
</tr>
<tr>
<td>Contract staff</td>
<td>$99,631</td>
</tr>
<tr>
<td><strong>Salaries and wages subtotal</strong></td>
<td><strong>$1,384,974</strong></td>
</tr>
<tr>
<td><strong>Operating expenses</strong></td>
<td></td>
</tr>
<tr>
<td>General administration</td>
<td>$30,615</td>
</tr>
<tr>
<td>Host agency</td>
<td>$65,004</td>
</tr>
<tr>
<td>Education &amp; Training</td>
<td>$7,091</td>
</tr>
<tr>
<td><strong>Operating expenses subtotal</strong></td>
<td><strong>$102,710</strong></td>
</tr>
<tr>
<td><strong>Statewide project expenses</strong></td>
<td></td>
</tr>
<tr>
<td>Victorian Tumour Summits program</td>
<td></td>
</tr>
<tr>
<td>Statewide coordinators salary &amp; wages</td>
<td></td>
</tr>
<tr>
<td><strong>Statewide project expenses subtotal</strong></td>
<td><strong>$182,139</strong></td>
</tr>
<tr>
<td><strong>Local project expenses</strong></td>
<td></td>
</tr>
<tr>
<td>Service Improvement Grants</td>
<td>$470,623</td>
</tr>
<tr>
<td><strong>Project expenses subtotal</strong></td>
<td><strong>$470,623</strong></td>
</tr>
</tbody>
</table>

### balance

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Revenue</td>
<td><strong>$2,010,053</strong></td>
</tr>
<tr>
<td>Total Expenses</td>
<td><strong>$2,140,446</strong></td>
</tr>
<tr>
<td>Opening Balance at 1 July 2020</td>
<td><strong>$728,087</strong></td>
</tr>
<tr>
<td>Closing Balance at 30 June 2021</td>
<td><strong>$597,694</strong></td>
</tr>
<tr>
<td>committed funds 2021–22</td>
<td><strong>$950,000</strong></td>
</tr>
</tbody>
</table>
our people

Governance Committee
Shelley Dolan (Chair)
Janelle Devereux
Brendon Gardiner
Fiona Gray
Russell Harrison
Christine Kilpatrick
Lisa Lynch
Geraldine McDonald
Kathleen Menzies
Amy Noble
Angela Nolan
Jason Payne
John Preston

Clinical Management Advisory Committee
Anthony Dowling (Chair)
Bianca Bell
Keelan Byrne
Melissa Culka
Justin Dwyer
Cameron Grant
Dish Herath
Senthil Lingaratnam
Jac Mathieson
Jane McGlashan
Linda Mileskin
Orla McNally
Anthony O’Donnell
Yvonne Panek-Hudson
David Routledge
Lesley Stafford
Lesa Stewart
Ben Teh
Phillip Tran
Deb Wilson

Program Office
Michael Barton
Sachi Bajaj
Alex Doherty
Tara Gannon
Mayuri Ghatpande
Kawthar Mayouf
Abi McBride
Kath Quade
Dilu Rupassara
Madhu Sibichakkaravarthi
Jeff Szer
Kate Whitehead
Sylvia Yeo

Consumers
Deborah Chemke
Ian Dennis
Jane McGlashan
John Preston
Bruce Robertson
Jan Whyte
We would like to credit the images used in this report:

- front & back cover: Photo of Kate Bayliss RN Western Health & Peter Mac
- page 6: Photo by Pat Whelen on Unsplash
- page 8: Photo by David Clarke on Unsplash
- page 12: Photo by Charles Deluvio on Unsplash
- page 20: Photo by Marie-Michèle Bouchard on Unsplash
- page 21: Photo by Oskars Sywan on Unsplash
contact us

(03) 8559 9070
contactWCMICS@petermac.org
www.wcmics.org

or check us out on social media:

[LinkedIn] [Twitter] [YouTube]