
TROG STRATEGIC AND OPERATIONAL PLAN 2014 – 2016

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INTRODUCTION

As the only radiotherapy-specific cooperative clinical trials group in Australia and New Zealand, TROG has achieved significant gains in recent years. With over 175 publications, 3,000 citations, and the successful recruitment of more than 12,000 patients to clinical trials, TROG has developed an international reputation for quality research. Despite these achievements, TROG has endured many difficult challenges and still faces the mission of maintaining relevance and achieving sustainability in an increasingly resource-limited and competitive environment.

These challenges resulted in the conduct of a comprehensive strategic planning workshop in November 2012. The workshop consisted of key TROG Members, Board of Directors, executive management and key industry and government stakeholders. This strategic planning workshop was facilitated by Zest Health Strategies, a leading healthcare communications consultancy working within the government and not-for-profit sectors. A Workshop Report and subsequent Action Plan was produced with 38 strategic and operational recommendations.

Following the workshop, a strategic plan working committee was organised that implemented several of the recommendations and began the synthesis of a streamlined strategic and operations plan. The Board of Directors and TROG Management have narrowed down these recommendations into 3 key strategies that TROG will focus on in the next triennium. These strategies are, Financial Sustainability, Greater Communication, and improved Clinical Trial Conduct.

This document forms the basis of TROG's strategic and operational plan for the next 2014/2016 triennium. It summarises the key areas on which TROG will focus, lists the key performance indicators on which performance will be measured, and sets out a review and re-evaluation structure that will ensure the plan is monitored and evaluated.

MISSION AND VISION

MISSION

TROG conducts world-class research involving radiotherapy to improve outcomes and quality of life for people affected by cancer.

VISION

COLLABORATION

We will work with key stakeholders, organisations and community groups who share our aim of defeating cancer.

QUALITY

Our research is guided by innovation, best practice, rigour and accuracy.

CARE

We provide the utmost care and consideration for patients and families, as well as members of our own team and all those with whom we come into contact during the course of our work.

KEY STRATEGIC GOALS AND OBJECTIVES

To achieve our mission and vision, we have set three strategic goals, and in support of these goals, twelve strategic objectives.

The outworking of the strategic objectives will be achieved through an operational plan(s) which will describe the activities we will undertake and the expected outcomes if we are successful in doing so. We will use a wide array of indicators to measure our success. Objectives and indicators will be regularly reviewed and changes implemented as required.

Our three key strategic goals are: **Financial Sustainability, Communication** and improved **Clinical Trial Conduct**.

FINANCIAL SUSTAINABILITY

TROG's primary goal is to achieve financial sustainability and rebuild its reserves. This will be achieved through focusing on four key strategic objectives. Increased compliance with the Facility Alliance fee, actively promote the clinical trial services TROG is capable of undertaking, engage new and existing corporate partners, and create a streamlined approach to our grant application process.

Facility Alliance Fee

Introduced in 2012, the facility alliance fee had a 50% compliance rate. The facility alliance fee was introduced to supplement the services the TROG central operations office provides to each facility. The goal is to increase the compliance rate by actively re-engaging each of the facilities. Each facility will be personally contacted and visited at least once throughout the next triennium. We will market the facility alliance, reaffirm TROG services that are available to the facilities and be on hand to troubleshoot any issues regarding TROG trials.

Fee For Service

TROG currently conducts data management, trial coordination activities, and quality assurance services on a limited basis but only where specifically requested. TROG has not actively marketed these services in the past however, TROG does have the necessary expertise and resources to conduct these services on a larger scale without any additional capital. Conducting more of these services will easily produce a much needed profitable revenue stream. Appropriately costing and marketing these services to TROG led and collaborative trials will be undertaken.

Corporate Partnerships

Corporate partnerships have been identified as a key resource for sustainable funding. Plans include engaging networking bodies, raising awareness of the TROG brand and public profile, and redeveloping our website to make it more attractive to both current and potential sponsors. As part of the communications and marketing plan there will be development of corporate specific sponsorship marketing material. The importance of identifying partners that align with TROG's mission and values will be a principle consideration. We will implement a process of regular communication to build and maintain our relationship with corporate partners.

Grants

Public granting bodies provide the majority of TROG's funding for central research infrastructure and cancer research trials.

A grants calendar and review process has been developed to provide a systematic approach to the management of applications. Strict timelines between grants opening for application, grant writing, review and submission will be adhered.

Each grant will be reviewed by a committee (selected at time of grant applications opening) with modestly sufficient time frames for the committee to review the grant application and report back to TCOO prior to submission.

COMMUNICATION

To market and promote TROG as an organisation undertaking quality research that is worth investment and support. We will promote the value and impact of TROG's research to our members, the public, corporate communities and other collaborative groups. To achieve this goal we will focus on the following strategic objectives.

Website

A new website will serve as the foundation for executing the next triennium's strategic goals. It will be the first point of call for communication with the membership, provide resources for our research facilities, and deliver an interactive forum of education to the consumer. This website will encourage public donations and stimulate interest from potential corporate partners. A key feature of our communication strategy will be to drive traffic to our website.

Membership

TROG works for its members. We will undertake a broader communication policy towards membership. Regular and frequent eNews updates, social media updates, a member's forum on the website and face to face site visits will keep membership up to date and keen interested. Annual membership surveys that seek input and query satisfaction with services will help members feel engaged. The Central Office goal of responding to each and every member correspondence within 24 hours has been implemented. Expanding full membership beyond the Radiation Oncology discipline will also be explored.

General Public

The concept of Radiation Treatment often instils fear even in the most knowledgeable of consumers. Regardless, 5 out of 10 patients that receive cancer treatment will undergo radiotherapy. Radiotherapy is an effective treatment for cancer. An education programme including resources such as podcasts, videos, testimonials and patient brochures will be developed, maintained, and regularly reviewed. Up to date and current information on the website is of utmost importance.

Clinical Trials Groups

We will actively participate in the COSA Executive Officers Network (EON), Cancer Consumer Clinical Trials Network, and other collaborative groups (NICAN, Global Harmonisation Group, ACDS) as well as engaging radiation therapy centres. The EON's main aim is to develop standardised processes and practices across Australia and New Zealand. Participation in the EON, and other collaborative groups, will lead to standardised practices across Australia and active participation in these groups will secure TROG's relevance on both a national and international scale.

Networking Groups

Involvement with Cancer Australia, NHMRC, CINSW, and state based Cancer Councils has been a key source of funding for TROG's ongoing operations. Continued open communication and aligning, where appropriate, TROG's operational activities with their key objectives is essential to maintaining TROG's profile.

To facilitate the translation of trial results in to clinical practice, collaborations with relevant organisations will be established including the Cancer Council and eviQ who produce guidelines; consumer groups for dissemination to consumers and RANZCR to ensure results of TROG trials are included in Faculty of Radiation Oncology position statements.

CLINICAL TRIAL CONDUCT – QUALITY, EFFICIENCY, PRODUCTIVITY

Productivity & Efficiency

A project management approach has been developed for the TROG trial portfolio with defined timelines and processes. Adherence to these timelines will be monitored and measured in our KPIs.

Central Co-ordinating Activities

Templates, policies and procedures have been developed for each stage of trial development, conduct and closure in accordance with Good Clinical Practice guidelines. These will ensure quality and standardisation across the TROG trial portfolio and avoid the duplication of resources allowing the efficient activation of trials.

The provision of trial coordination centre activities via the TCOO will facilitate better oversight, quality, and management of TROG trials.

Regular Meetings and Reporting

Regular meetings with trial chairs and trial staff during the protocol development phase will facilitate our commitment to activating trials within 12 months from trial approval. Ongoing collection of six-monthly trial progress reports will facilitate the identification of any issues and the monitoring of KPIs.

Fortnightly teleconferences with the TSC Chair to address new and ongoing issues will allow a proactive approach and timely response to issues as they occur.

REVIEW PROCESS

GOVERNANCE

A key outcome from the Zest Strategic Workshop Report was that governance of TROG should be reviewed to ensure that there is appropriate oversight of operational activities. Consistent review and oversight of the strategic and operational plan is key to success. A renewed emphasis on Corporate Governance and reporting will ensure that management is being held to account and that the strategic and operational plan is being executed.

REGULAR COMMUNICATION BETWEEN TCOO MANAGEMENT AND TROG BOARD

- The President of the TROG Board will conduct fortnightly meetings with TCOO management and key personnel.
- Purpose of meetings is to keep apprised of current issues and offer insight and direction.

MONITORING KEY PERFORMANCE INDICATORS

- The KPIs within the operational plan will be reported and reviewed on a monthly basis among key management personnel.
- Quarterly KPI reports will be provided to the Board of Directors for review and comment.
- An annual one day comprehensive strategic and operational review workshop will be conducted by the Board of Directors together with key management personnel and key senior TROG Members. This should take place in late November or early December of each year. The purpose of this meeting to review each key strategic goal, the operational plans behind those goals, and critically analyse the key performance indicators to ensure the goals and plans are being achieved. Where the plans are not being achieved a course of action will be appropriately devised and/or the operational plan and KPIs modified. A comprehensive annual budget should also be reviewed and approved by the Board at this time.

SUMMARY

The three strategic goals of Financial Sustainability, enhanced Communication and efficient Clinical Trials Conduct together with their 12 objectives represent an effective comprehensive plan that address the issues identified in the ZEST strategic workshop. This plan is the basis from which many of TCOO daily operational activities will be based.

The key to the strategic plan will be to maintain an effective review process. The Board of Directors must take an active role in reviewing the KPI's quarterly and commit themselves to an annual one day strategic review workshop. TCOO management must review the KPIs and operational plan monthly in combination with fortnightly meetings with the President and TSC Chair.

If implemented correctly the plan should produce a functioning and sustainable future for TROG. A company that conducts world-class research and improves outcomes and quality of life for people affected by cancer

OPERATION PLANS & KEY PERFORMANCE INDICATORS

FINANCIAL SUSTAINABILITY

<p><i>GOAL: Create a sustainable funding stream across 5 categories: Facility Alliance - Fee for Service - Corporate Sponsorship - Grants - Donations</i></p>					
	Specific Goal	Measure	Baseline/Attainable/Relevant	Time Frame	Evaluate
1	Increase number of facilities participating in the TROG Facility Alliance	Of TROG trial sites ... 2014 70% participation rate 2015 80% participation rate 2016 90% participation rate	In 2012 there was a 50% participation rate in the Facility Alliance out of 40 active TROG sites	Dec 2014 Dec 2015 Dec 2016	Quarterly
2	Increase number of trials that TCOO provides trial coordinating centre services for (fee for service)	2014 = TCOO coordinates 2 trials 2015 = TCOO coordinate 1 additional trials (3 total) 2016 = TCOO coordinate 1 additional trials (4 total)	In 2013 = 0	Dec 2014 Dec 2015 Dec 2016	Annual
3	Increase fee for service income as a percentage of total operating costs (inclusive of all overheads)	30% of total operating costs covered by fee for service income	2012 = 10% 2013 = 2.4%	Dec 2016	Quarterly
4	Increase Annual Scientific Meeting profit	Generate profit of \$110,000 in 2014 Generate profit of \$150,000 in 2015 Generate profit of \$180,000 in 2016	Yes - In 2011 the ASM profit was approx \$150,000	Dec 2014 Dec 2015 Dec 2016	Annual
5	Increase donations	\$15,000 annual donations Dec 2014 \$25,000 annual donations Dec 2015 \$50,000 annual donations Dec 2016	Leukaemia CF= \$292,000 (2011) Prostate CF = \$1,500,000 (2012) TROG = \$1,235 (2013)	Dec 2014 Dec 2015 Dec 2016	Annual

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6	Increase corporate sponsorship funding (Non-ASM specific funding)	\$200,000 annual funding from 5 corporate partners	Prostate CF = \$400,000 (2012) Breast CF = \$4,500,000 (2012) TROG (2013) = \$0	Dec 2016	Quarterly
7	Increase competitive grant funding in support of core services	Increase grant funding to \$750,000 per annum by Dec 2016 \$625,000 in 2014 \$675,000 in 2015 \$750,000 in 2016	\$550,000 in 2013	Dec 2014	Quarterly

COMMUNICATION

<i>GOAL: Increase awareness of the TROG brand and re-engage members Members - Public - Corporate - Collaborative groups</i>					
	Specific Goal	Measure	Baseline/Attainable/Relevant	Time Frame	Evaluate
8	Increase TROG website visits	2014 - 40,000 visits / 20,000 unique 2015 - 60,000 visits / 30,000 unique 2016 - 70,000 visits / 35,000 unique	Site visits in 12 months to July 2013 = 14,699 visits with 7,271 unique visitors	Dec 2014 Dec 2015 Dec 2016	Quarterly
9	Increase donations to TROG via website	\$15,000 annual donations Dec 2014 \$25,000 annual donations Dec 2015 \$50,000 annual donations Dec 2016	Less than \$1,000 in donations was received in 2013	Dec 2014 Dec 2015 Dec 2016	Quarterly
10	Increase education and awareness of TROG and radiotherapy in the public domain	Add at least one new item per month (e.g. news article, podcast, testimonial, education video etc.) on website	Yes	Monthly	Quarterly
11	Promote the TROG brand to the radiation therapy centres	Visit 4 trial sites each quarter	Yes	Quarterly	Quarterly

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12	Increase mainstream media (non-scientific media) events/reports	2014 = 4 media releases 2015 = 6 media releases 2016 = 8 media releases	Yes	Dec 2016	Annual
13	Increase total number of members	1,000 members by Dec 2014 1,100 members by Dec 2016	920 members at June 2013	Dec 2016	Annual
14	Increase membership satisfaction (Non-ASM related)	Obtain a base measure of satisfaction. A modest goal of increasing satisfaction by 10% per year up to 90% satisfaction rate.	Anecdotally, membership is not happy with TCOO services	Dec 2016	Annual

CLINICAL TRIAL CONDUCT

<i>GOAL: Quality, Efficiency, Productivity</i>					
	Specific Goal	Measure	Baseline/Attainable/Relevant	Time Frame	Evaluate
15	Increase the % of trials on target for patient recruitment	2014: 70% 2015: 80% 2016: 90%	Currently, ~57% are on track (+/-10%) with projected accrual targets	Dec 2014 Dec 2015 Dec 2016	Biannual
16	Increase number of new Category A trials	2014: 4 new proposals presented 2015: 5 new proposals presented 2016: 5 new proposals presented	4 new proposals presented in 2013	Dec 2014 Dec 2015 Dec 2016	Annual
17	Increase number of new active TROG trial sites (a site that is open to patient accrual for any trial)	2014: 2 new active TROG trial sites 2015: 3 new (5 total) active TROG trial sites 2016: 3 new (8 total) active TROG trial sites	2011 = 73 Aust/NZ sites to date (+64 Int) 2012 = 73 Aust/NZ sites to date (+84 Int) 2013 = 73 Aust/NZ sites to date (+94 Int)	Dec 2014 Dec 2015 Dec 2016	Biannual

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18	% of trials (closed to follow-up) that are published within timelines as set out in the TROG Publication Guidelines (generally within 12 months of final analysis)	2014: 70% publications achieved within timelines 2015: 80% publications achieved within timelines 2016: 90% publications achieved within timelines	Current (2013), 4/10 trials closed to follow-up with publication overdue. thus 60% success rate.	Dec 2014 Dec 2015 Dec 2016	Annual
19	Increase the number of patients from remote and regional areas participating in TROG trials (per ASGC-RA codes)	2014: 115 patients 2015: 130 patients 2016: 150 patients	For the year ended June 2013, average of 101 remote patients recruited per year (averaged 2011-2013)	Dec 2014 Dec 2015 Dec 2016	Biannual
20	Increase the number of Indigenous patients participating in TROG trials	2014: baseline generation 2015: 1.5 x baseline 2016: 2 x baseline	Not collecting data at present	Dec 2014 Dec 2015 Dec 2016	Biannual
21	% of Category A trials that have been approved for activation (and allocation of a TROG number) within 12 months of approval for development	2014: 40% 2015: 50% 2016: 60%	1/5 (20%) Cat A trials have been completed in 12 months or less (averaged 2011-2013)	Dec 2014 Dec 2015 Dec 2016	Annual