TROG Cancer Research: Strategic Plan 2020-2023

Our vision provides a clear focus for our Strategic Directions. Our work towards them will be guided by our values.

Vision (purpose): *Improving outcomes of people affected by cancer through research in radiation medicine.*

Mission (strategic objective): *That TROG will conduct world-class research in radiation medicine that leads the global effort to better control and cure cancer, and improve outcomes for people affected by cancer.*

Values:

Collaboration	- We will work with key stakeholders, organisations and community groups who share our aim in defeating cancer
Quality and excellence	- Ensure our research is guided by rigour, accuracy and innovative methodology - Strive for excellence in all our endeavours
Care	- Provide the utmost care to trial participants, TROG members, staff and the general community
Equity	- Improve access to world class clinical trials - Increase participation in clinical trials
Innovation	- Be a leader in radiation medicine research - Be innovative in our research and embrace new technologies

Strategic Goal	**1. Lead a high impact clinical research portfolio**	**2. Cultivate collaborations and partnerships**	**3. Foster stakeholder engagement and communication**	4. **Build organisational capacity and sustainability**
Strategic statement	Conduct high quality clinically important research that respond to and is reflective of patient needs, changes in cancer treatments, new technologies, the research environment, and our membership	Proactively build strategic collaborations with Collaborative Clinical Trials Groups (CCTGs), Medical Research Institutions (MRIs), universities, government agencies and other groups in the fight against cancer	Increase community awareness, foster relationships with funding bodies/government and engage with the TROG membership	Develop systems, processes and strategies that guarantee TROG's capacity, capability and sustainability (financial, human resources, infrastructure)
Strategic activities	1.1 Provide leadership in practice changing research	2.1 Build partnerships with relevant aligned organisations	3.1 Increase brand recognition and awareness through active promotion to the community, industry, government and other research innovators	4.1 Effective systems for TROG Central Office business processes - HR, WHS, Finance, legal, PCO, IT
	1.2 Maintain and encourage a diverse portfolio of research activity	2.2 Collaborations with other CCTGs	3.2 Work proactively and competitively to position TROG favourably with all stakeholders: funding bodies/ philanthropic /government/industry partners	4.2 Continually improve processes to add value and minimise waste
	1.3 Facilitate access to quality radiation research and clinical trials	2.3 Establish international collaborations in strategic research areas	3.3 Support research dissemination/implementation and promote TROG research achievements	4.3 Implement succession planning for key roles (clinical and non-clinical)
	1.4 Maintain a stream of new clinical research concepts and clinical trials	2.4 Engage with industry partners and private sector care providers	3.4 Foster and maintain active communications to the membership and community by TROG leadership group	4.4 Support professional development and capacity building
	1.5 Maximise the value of research data	2.5 Engage with the industry to develop biologically driven and technology driven trials	3.5 Active and responsive multidisciplinary membership	4.5 Maintain diversity of funding sources
	1.6 Provision of superior quality clinical research support services	2.6 Foster meaningful consumer engagement	3.6 Nurture the future generation of TROG researchers	4.6 Develop new business models and commercial ventures

1. Lead a high impact e clinical research portfolio

Conduct high quality clinically important research that respond to and is reflective of patient needs, changes in cancer treatments, new technologies, the research environment, and our membership

Strategic activity	**Key performance areas**	**KPIs**
1.1 Provide leadership in practice changing research	1.1.1 TROG members represent TROG as stakeholders in key state, national and international peak bodies	1.1.1 TROG representation on peak national/international bodies: eg.RANZCR, ACTA
	1.1.2 Translation of TROG clinical trial results into policy and practice	1.1.2 Results of at least one ongoing/completed TROG trial, have been translated into policy and/or practice via one of: publication in medical literature, conference presentation, clinical practice or guidelines, professional body education content, clinical position statements per annum
	1.1.3 TROG members lead international research	1.1.3 TROG member is the PI of a least one international clinical trial per annum
1.2 Maintain and encourage a diverse portfolio of research activity	1.2.1 Portfolio includes a mix of trial types	1.2.1 At least one study open in each area of Phase 2, and Phase 3 per annum.
	1.2.2 Investigate and embrace trial methodologies that are new to TROG (eg. registry trials, point of care studies, basket trials)	1.2.2 Explore the prospect of at least one new trial methodology per annum via TROG Working Party meetings and/or the TROG scientific committee
	1.2.3 Encourage and support trials that incorporate new techniques and technologies in the area of diagnosis, treatment delivery and treatment response	1.2.3 Establish special interest groups/committees to advance clinical trial activity in new and emerging technologies.
	1.2.4 Expand the tumour stream portfolio to increase clinical trial participation	1.2.4 Develop at least one new collaborative trial protocol or open at least one new trial in an area (e.g. tumour site or sub-site, tumour subtype, tumour stage [curative vs palliative]) that TROG has not actively accrued to in the last 3 years
	1.2.5 Expand portfolio to include symptom management and QOL in the palliative and geriatric oncology settings	1.2.5 Proactively engage with other CCTGs (eg. PaCCSG, PoCoG) and National Technical Services to develop trials in in an area (e.g. tumour site or sub-site, tumour subtype, tumour stage [curative vs palliative]) that TROG has not actively accrued to in the last 3 years

	1.2.6 Encourage and develop clinical trials involving other disciplines of Radiation Medicine	1.2.6 Collaborate with IO group, ARTNet and other related disciplines to develop trials in Radiation Medicine
1.3 Facilitate access to quality radiation research and clinical trials	1.3.1 Explore innovative clinical trial designs/methodologies to increase access to trials (multi-stage/multi-arm, tele-trials) 1.3.2 Encourage the development of clinical trials that are more feasible to be conducted in sites locatedin an outer-regional or remote region. 1.3.3 Continue to provide high quality research support to cancer treatment centres via Facility Alliance Member (FAM) services	1.3.1 Open at least one new trial site (or satellite site/tele-site) per annum that is located in an outer-regional or remote region as classified by the Australian Bureau of Statistics (2016) OR Open at least one new trial site in Australia that has not previously been involved in TROG clinical trials OR re-activate a clinical site that has not actively participated in TROG clinical trials in the last 5 years 1.3.2 Expression of interest for clinical trial participation received from 2 sites classified as inner-regional or outer-regional per annum. 1.3.3 90% participation in FAM
1.4 Maintain a stream of new clinical research concepts and clinical trials	1.4.1 Invest in planned and supported approaches to ideas generation and concept development 1.4.2 Proactively facilitate a multidisciplinary approach to concept development 1.4.3 Support TROG members to seek funding for clinical research	1.4.1 At least one concept development workshop held per annum 1.4.2 Demonstration that all relevant disciplines (clinicians, radiation therapists, medical physicists, researchers, consumers and policy makers) have been consulted at some level for all new clinical trial protocols developed by TROG each year 1.4.3 The development of a full synopsis (or equivalent) for submission to potential funder ≤ 12 months since TROG Operations Executive approval of the original concept. 1.4.3 At least two TROG developed clinical trial proposals, per annum, submitted to funding agencies for support 1.4.4 Working Parties conduct horizon to maintain the research pipeline.

	1.4.4 Identify gaps in the research portfolio that may provide opportunities for new clinical research 1.4.5 Ensure that new clinical trials are considered for relevant sub-studies (eg, Qol, Health economics, biology, genomics) 1.4.6 Trial development activities completed in a timely manner	1.4.5 All TROG new clinical trial proposals under development are submitted to Quality of Life (QoL) Office and Cancer Research Economics Support Team (CREST) for review/comment, and considered for GCCTI input if appropriate.1.4.6 Once funding granted, finalised protocol (including RTQA program) to be submitted to the TSC for approval ≤ 6 months 1.4.6 Time from ethics approval to first site activation is ≤ 6 months
1.5 Maximise the value of research data	1.5.1 Continue to support secondary analyses of trials 1.5.2 Encourage the use of state-of-the art data analysis methodologies including artificial intelligence and generation of decision support systems through distributed learning 1.5.3 Collaborate with RANZCR to develop secondary analysis projects for junior members of the college	1.5.1 At least 2 secondary analysis projects progressed per annum 1.5.2 SDAC and NTTC conduct horizon scanning to encourage the use of artificial intelligence, machine learning and novel data analysis methods 1.5.3 Establish joint TROG/RANZCR Research Fellowship
1.6 Provision of superior quality clinical research support services (collaborative group/sponsor oversite, central trial coordination, radiation therapy quality assurance)	1.6.1 TROG study pathway implemented for the lifecycle of the trial to ensure quality and timely clinical trial conduct. 1.6.2 All TROG clinical trials conducted in accordance with Good Clinical Practice (GCP) to ensure the superior conduct of clinical trial activities including clinical trial protocol compliance, data quality and oversite	1.6.1 Utilisation of qualified multidisciplinary professionals throughout all stages of trial. 1.6.1 Each trial site to be activated within 6 months of the site's HREC approval. 1.6.1 First patient screened for trial within 3 months of site activation. 1.6.1 Timely recruitment of patients and evidence of site recruitment activities- screening log maintained for every site for every trial and reviewed by Trial Management Committee at a minimum biannually. 1.6.2 Risk based clinical trial monitoring and risk based radiation therapy quality assurance plans developed for each new clinical trial

	1.6.3 TROG clinical trial quality control and quality assurance management systems are GCP compliant, including high quality policy and procedures, audit tracking and data integrity	1.6.2 Clinical trial progress/radiation therapy quality assurance progress reports are submitted and reviewed by Trial Management Committee biannually 1.6.2 Data submitted to TCOO is cleaned and available for analysis as per protocol 1.6.2 Online GCP training available to all TROG committee members, Trial Management Committee members, TROG staff and principal investigators 1.6.3 Up to date TROG Policy Statements are available for all TROG members via the member area of website. 1.6.3 Systems implemented to manage quality throughout all stages of trial conduct (eg, CQMS, Open Clinica)

2. Cultivate collaborations and partnerships

To proactively build strategic collaborations with Collaborative Clinical Trials Groups (CCTGs), Medical Research Institutions (MRIs), universities, government agencies and other groups in the fight against cancer

Strategic activity	**Key performance areas**	**KPIs**
2.1 Build partnerships with relevant professional organisations in radiation medicine	2.1.1 Strengthen partnerships with RANZCR: - Foster formal collaboration between TROG Scientific Committee (SC) and RANZCR Research Committee - Provide research training opportunities for Radiation Oncology trainees 2.1.2 Develop partnership with radiation medicine organisations such as: - ACPSEM - ASMIRT - ANZMRR - ARTNet - COSA - 2.1.3 Maintain and strengthen partnerships with national and international technical groups	2.1.1 RANZCR: -Reciprocal representation of TROG and RANZCR representatives on scientific/research committees. -Establish an MOU to support Oncology Trainees to participate in TROG research (including secondary analysis). -TROG to support the conduct of the RANZCR SMART workshop annually 2.1.2 Establish MOU with one additional Radiation Medicine professional group per annum. 2.1.3 Participation in Global Harmonisation Group meetings to collaborate, share knowledge and harmonise radiation therapy quality assurance procedures internationally 2.1.3 Australian Clinical Dosimetry Service representative invited to participate in the New Techniques and Technologies Committee
2.2 Collaborate with other CCTGs	2.2.1 Develop key collaboration principles/expectations regarding joint trial activity (including trial conduct, badging/branding, acknowledgment etc.) 2.2.2 Explore joint TROG SC membership and Working Party chairs with committees of other CCTGs	2.2.2 Each new CCTG collaborative trial has a formal collaboration agreement executed 2.2.2 Reciprocal representative on TROG/other CCTG scientific committees/Working Parties

	2.2.3 TROG members attend and actively participate in Concept development with other CCTGs (including workshops of the Genomics Cancer Collaborative Trials Initiative) 2.3.4 A portfolio of CCTG collaborative trials established 2.3.5 Explore opportunities to strengthen collaboration and share resources with other CCTGs.	2.2.3 At least one TROG member attends and actively participates in concept development workshops of other groups (eg. AGITG, ANZUP, COGNO, GCCTI etc) per annum 2.3.4 Pursue at least four collaborative trials (including CCTG multi-group trials and international trials) 2.3.5 At least one TROG resource shared with another CCTG per annum.
2.3 Establish international collaborations in strategic research areas	2.3.1 Develop a formal mechanism (e.g. MOUs) to enable TROG Cancer Research to collaborate with international groups 2.3.2 Implement processes that support international participation in TROG-led trials 2.3.3 Build on TROG success with Virtual ASM	2.3.1 At least one international collaborative agreement active per annum 2.3.2 TROG funds at least one international speaker for the TROG ASM per annum 2.3.3 At least one virtual joint meeting with international partners per annum
2.4 Engage with industry partners and private sector care providers	2.4.1 Ensure TROG has diverse engagement across the Radiation Oncology sector 2.4.2. Explore formal partnership agreements with an expanded cohort of industry vendors 2.4.3 Establish agreed clinical research activities with private sector cancer care providers	2.4.1 Ensure at least one meeting per annum between the TROG CEO/President and representatives of: - Icon & GenesisCare - Varian, Elekta 2.4.2. At least one new industry partnership explored/developed per annum 2.4.3 MOU established with Icon and GenesisCare which encourages and outlines opportunities for research collaboration
2.5 Engage with the industry to develop biologically driven and technology driven trials	2.5.1 Expand the TROG trial portfolio to include biologically driven research in: - Genomics - Novel radiobiology (FLASH and specially modulated RT) - Immuno-oncology 2.5.2 Build on current TROG reputation for technology driven research/trials	2.5.1 Develop/collaborate/participate on at least one biologically driven clinical trial per annum 2.5.2 Develop at least one trial per annum that incorporates new technology in radiation medicine (e.g., Particle Therapy, MRI in RT, Theranostics, AI and ML)

2.6 Foster meaningful consumer engagement	2.6.1 Explore opportunities for sharing between established consumer networks 2.6.2 Engage consumers in the development of clinical trial protocols/new research concepts	2.6.1. At least one collaboration with a consumer network per annum 2.6.2 Consumer involvement in the development of 100% of new clinical trial protocols

3 Foster stakeholder engagement and communication

Increase community awareness, foster relationships with funding bodies/government and engage with the TROG membership.

Strategic activity	Key performance areas	KPIs
3.1 Increase brand recognition and awareness through active promotion to the community, industry, government and other research innovators	3.1.1 Develop, implement and regularly evaluate a strategic marketing and communication plan 3.1.2 TROG Cancer Research website meets the needs of all end users	3.1.1 Annual increase in communications reach through regular posts on social media platforms, member and community newsletters and increased traffic to website. 3.1.2 TROG website revised to fulfil membership requirements and also encompass community focussed aspects
3.2 Work proactively and competitively to position TROG favourably with all stakeholders: funding bodies/ philanthropic /government/industry partners	3.2.1 Submit strategic funding submissions to all potential funding streams for TROG initiatives/projects 3.2.2 Position TROG as a leader, influencer and desirable stakeholder in world class radiation science research	3.2.1 Make at least one submission per annum for TROG clinical trial/project/registry study to competitive funding source. 3.2.2 Evidence of established national and international strategic partnerships to accelerate progress in radiation science research. 3.2.2 Engage with radiation medicine research leaders internationally
3.3 Support research dissemination/implementation and promote TROG research achievements	3.3.1 Provide timely report of trial progress to TMCs 3.3.2 Ensure trial results are disseminated to the academic, medical and wider community 3.3.3 Encourage and facilitate active shared learnings to improve clinical practice across the membership 3.3.4 Maximising the potential of TROG's research output through implementation of findings into policy and practice	3.3.1 Provision of bi-annual research reports for each active trial 3.3.2 Primary endpoints published within 12 months of trial close-out 3.3.3 TROG Scientific Meeting held annually (utilising face to face and virtual collaborative opportunities) 3.3.4 The results of at least one ongoing/completed TROG trial (developed since 2008) has been translated into policy and/or practice per annum.

3.4 Foster and maintain active communications to the membership and community by TROG leadership group	3.4.1 Open and transparent communication provided to all stakeholders about TROG's goals, processes, progress and achievements. 3.4.2 Established mechanisms for TROG members to become engaged in TROG activities.	3.4.1 Annual General Meeting held to update the membership on operational activities and milestones met 3.4.1 TROG Research Report produced annually and disseminated to members and community within 6 months of year end. 3.4.2 Targeted communications (including electronic direct mail/newsletters) circulated on a monthly basis to offer opportunities for the membership to become engaged within TROG activities
3.5 Active and responsive multidisciplinary membership	3.5.1 Monitor member satisfaction through compliments and complaints	3.5.1 Implement an annual survey of membership with a score of 90% satisfaction with TROG services
3.6 Nurture the future generation of TROG researchers	3.6.1 Implement strategies to support and develop early and mid-career researchers (EMCR)s in research and leadership skills 3.6.2 Build on the research capability of interventional radiologists, radiation therapists and radiation oncology medical physicists 3.6.3 Collaborate with Royal Australian and New Zealand College of Radiologists (RANZCR), to provide research capacity building opportunities for Radiation Oncology Trainees 3.6.4 Implement strategies to support and develop radiation therapist and radiation oncology medical physicist engagement in research 3.6.5 Engage undergraduate students and promote awareness of TROG research activities.	3.6.1 Each TROG working Party to have at least one EMCR member actively engaged 3.6.2 Increase in the number of TROG full members from the disciplines of interventional radiology, radiation therapy and radiation oncology medical physics. 3.6.3 Co-host the RANZCR SMART workshop annually 3.6.4 Technical Research Workshop held annually 3.6.5 Encourage at least one undergraduate student per year to engage in TROG research activities e.g. UoN summer scholarship program 3.6.5 Annual TROG presentation to University of Newcastle Radiation Therapy students

4 **Build organisational capacity and sustainability**

Develop systems, processes and strategies that guarantee TROG's capacity, capability and sustainability (financial, human resources, infrastructure).

Strategic activity	**Key performance areas**	**KPIs**
4.1 Effective systems for TROG Central Office business processes - HR, WHS, Finance, legal, PCO, IT	4.1.1 Develop a formal process for vendor management including tendering for external services and integration with the TROG Financial Delegation matrix 4.1.2 Define and document TROG's strengths, weaknesses, resources and needs in order to evaluate future sustainability and identify ways to enhance opportunities, reduce threats and sustain competitive advantage 4.1.3 Periodic review of TROG service needs and satisfaction with external service providers	4.1.1 Develop and implement a vendor management standard operating procedure (SOP) to ensure appropriate qualification, selection and oversight of vendors 4.1.2 Perform a GAP analysis across internal systems and processes including internal/external policies, SOPs and infrastructure 4.1.2 Develop overarching quality management system incorporating SOP plan and SOP template 4.1.2 Annual review of the Risk Management Matrix 4.1.2 Based on needs analysis, invest in developing one key business process or system annually 4.1.3 Each external service contract reviewed on completion prior to renewal
4.2 Continually improve processes to add value and minimise waste	4.2.1 Complete a Lean Value Stream Map of key processes – look for opportunity	4.2.1 Based on needs analysis, one key area of business reviewed per annum
4.3 Implement succession planning for key roles (clinical and non-clinical)	4.3.1 Develop and implement a succession plan 4.3.2 Provide opportunities for early/mid-career clinicians/researchers to be participants on TROG committees and groups	4.3.1 Succession planning implemented for key roles (for senior management staff and key committee members, w/p chairs, key TSC members, NTTC, SDAC) 4.3.2 All TROG committees and groups have at least one EMCR as a member

	4.3.3	Provide opportunities for multi-disciplinary engagement in TROG committees and groups	4.3.3 All TROG committees and groups have appropriate multidisciplinary representation
4.4 Support professional development and capacity building	4.4.1 4.4.2	Provide professional development opportunities for TROG staff Provide professional development opportunities for TROG members	4.4.1 All staff participate in at least one professional development activity per year 4.4.2 Provide TROG members with at least one research training/capacity building activity per year
4.5 Maintain diversity of funding sources	4.5.1 4.5.2 4.5.3 4.5.4 4.5.5	Invest in Facility Alliance Member Services Increase funding from fundraising activities and donations Seek out philanthropic fundraising sources(e.g. bequests) Capitalise on new research funding opportunities (eg. MRFF, Pharma) Maintain corporate partnerships	4.5.1 Review the Facility Alliance Member services and participation annually 4.5.2 Hold at least two fundraising events annually 4.5.3 Two targeted campaigns for donations and bequests conducted annually 4.5.4 At least one funding submission made to new funding source annually 4.5.5 Meet with corporate partners annually to review stakeholder needs and satisfaction
4.6 Develop new business models and commercial ventures	4.6.1 4.6.2	Develop new funding streams via pharmaceutical/industry funding Explore opportunities to maximise the value of TROG research data	4.6.1 Meet annually with at least 2 pharmaceutical/industry vendors to discuss opportunities for collaboration 4.6.2 Develop a scoping document which outlines TROG's current facilities and future needs for data archive, analysis and sharing 4.6.2 Develop a grant application to address TROG's future needs for data archive, analysis and sharing 4.6.2. Explore models of data sharing and collaboration with key stakeholders/groups to maximise the utility and value of TROG data (e.g. OzCAT)