Development and implementation of the McGrath Model of Care

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Acknowledgement of Country

We acknowledge the Traditional Custodians of the land on which we work and come together.

As a Foundation built on care, connection, and community, we honour the strength, wisdom, and enduring custodianship of the First Nations people, who have cared for this beautiful Country for thousands of years.

Standing on this Country reminds us that caring for one another is not new – it is a value long upheld and preserved and protected by First Nations communities across generations.

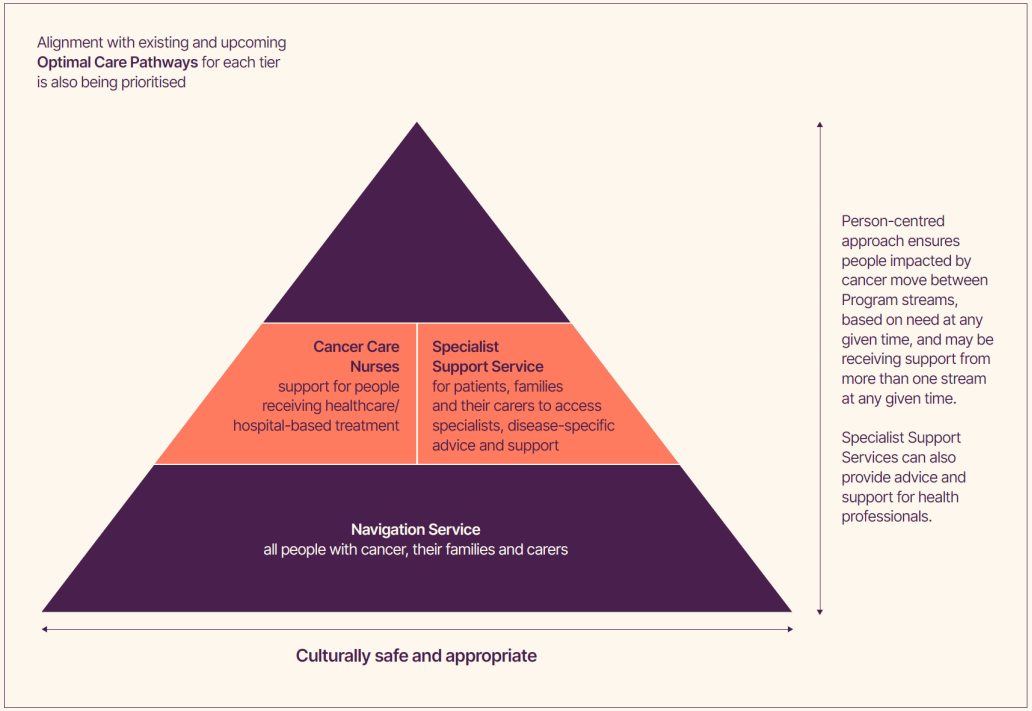
We commit to deep listening, learning humbly, and strengthening meaningful relationships with First Nations peoples.
May we contribute to a future grounded in care, respect, understanding and genuine connection.

About the McGrath Model of Care

Creating Equity of Access to supportive cancer nursing care to people with any type of cancer, regardless of where there live.

Figure 2:

Tiered model of support



1. Planning

During the first stage the critical elements for success were mapped out. This included undertaking a stakeholder mapping exercise and reviewing strategic documents across the cancer continuum. Flinders University commenced a systematic literature review which was used in the Design stage of the project.

2. Discovery

During this stage, the team sought to understand the current state of supportive cancer nursing across Australia. Co-design principles underpinned consultation with people that have an experience of cancer, along with clinicians, representatives from the NGO sector and government departments. An experience map was developed in this stage.

3. Design

A series of workshops were held with people who have experienced cancer, carers, clinicians, priority populations and representatives from the NGO sector to design the ideal nurse led supportive cancer care experience map. The results from the academic literature were leveraged.

4. Decide

An online consensus survey was undertaken to obtain agreement from Specialist Cancer Nurses on inclusions in the McGrath Model of Care. Two feasibility workshops were held to discuss and iterate the model.

5. Debrief

The final McGrath Model of Care was presented to stakeholders. An implementation plan was designed, and educational requirements considered. A debrief survey was also distributed to all stakeholders.

533

Interactions with people who have a lived experience of cancer

405

Interactions with clinicians from across the cancer continuum

18

NGOs involved from the cancer sector

What matters to priority populations?

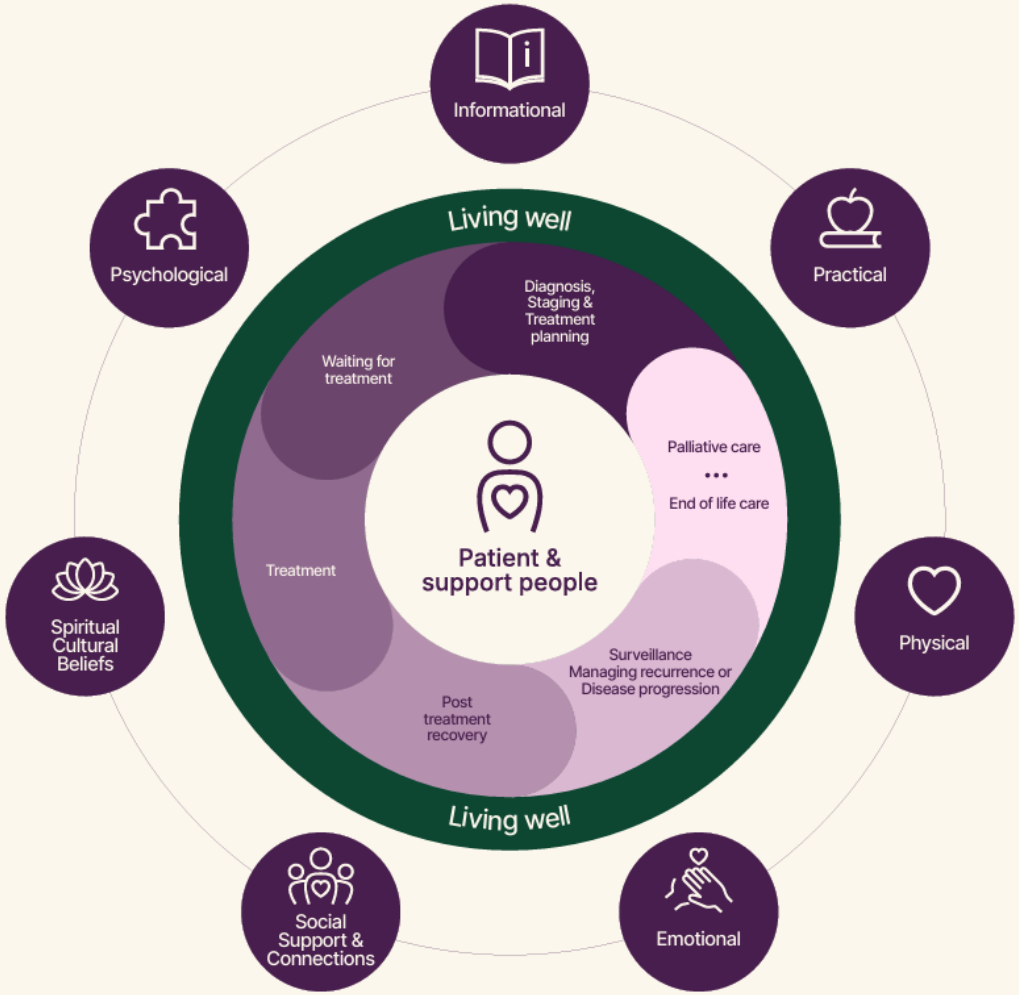
Stages of Care

Begins once a person knows of their diagnosis

Non linear

Can be in more than one stage at once

Deliberately anti clockwise



McGrath Foundation

McGrath Model of Care

ABOUT THE MODEL

HOW TO USE THIS DOCUMENT

FIRST CONTACT

DIAGNOSIS, STAGING & TREATMENT PLANNING

WAITING FOR TREATMENT

TREATMENT

POST TREATMENT RECOVERY

SURVEILLANCE MANAGING RECURRENCE OR DISEASE PROGRESSION

PALLIATIVE CARE END OF LIFE CARE

RESOURCES & LINKS

OPTIMAL CARE PATHWAYS

GLOSSARY

SKILLS & KNOWLEDGE

ASSESSMENT TOOLS

LIVING WELL

AGE

CULTURALLY & LINGUISTICALLY DIVERSE

FIRST NATIONS

HEALTH STATUS

LGBTIQA+

RURAL & REMOTE

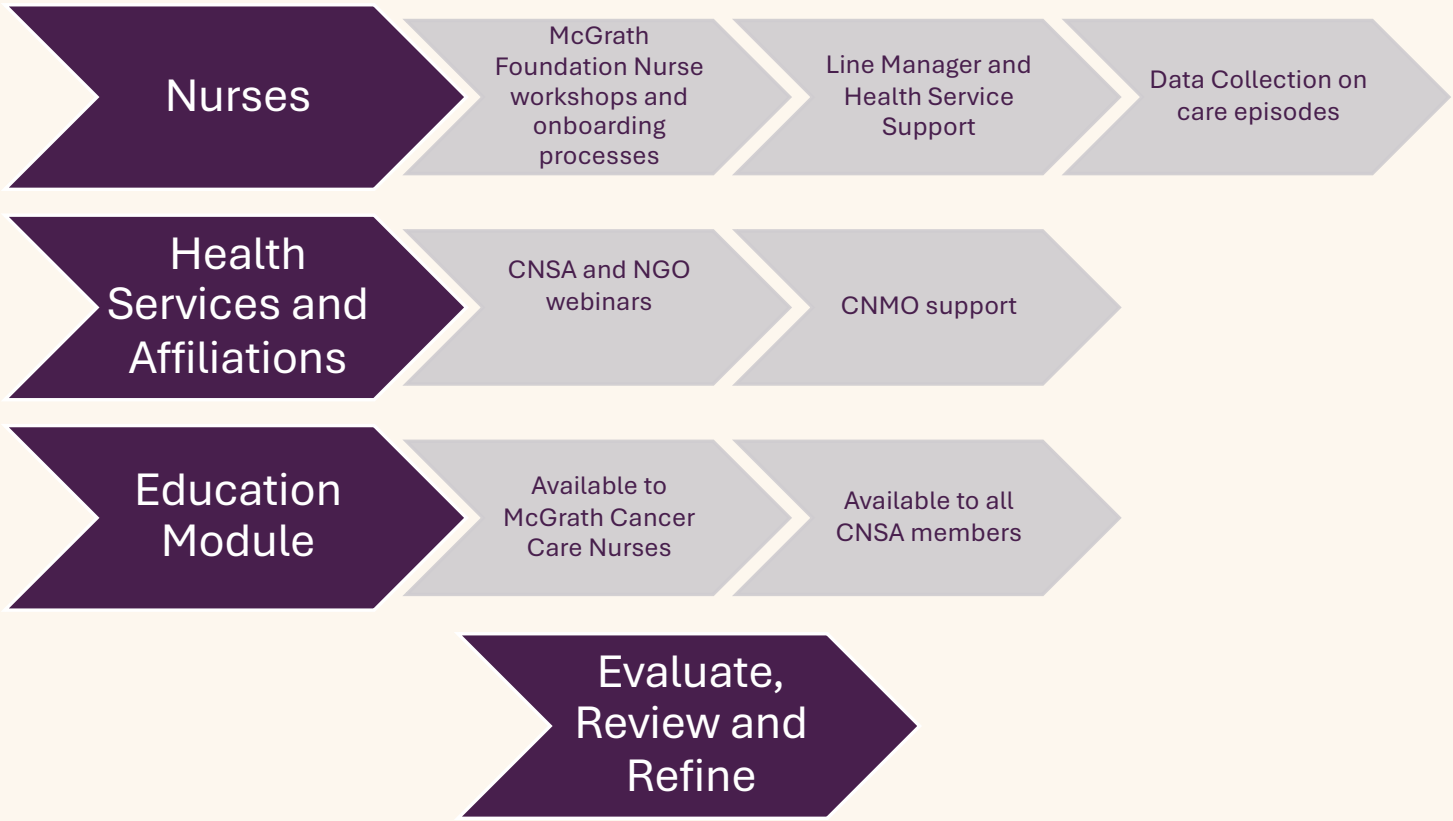
SOCIAL CHALLENGES

January 2026

Expert Recommendations for Implementing Change (ERIC)

Strategy	Definitions	Applicable?	How do we apply this for the MoC?
Access new funding	Access new or existing money to facilitate the implementation	Y	State workshops Promotional material eLearning module development
Assess for readiness and identify barriers and facilitators	Assess various aspects of an organization to determine its degree of readiness to implement, barriers that may impede implementation, and strengths that can be used in the implementation effort	Y	State workshops Assessment
Audit and provide feedback	Collect and summarize clinical performance data over a specified time period and give it to clinicians and administrators to monitor, evaluate, and modify provider behaviour	Y	External evaluation McGrath nurse portal data & dashboards
Build a coalition	Recruit and cultivate relationships with partners in the implementation effort	Y	Line managers; NGOs Government sector; VICS /cancer agencies
Capture and share local knowledge	Capture local knowledge from implementation sites on how implementers and clinicians made something work in their setting and then share it with other sites	Y	State workshops Position Check-ins Community of Practices
Change accreditation or membership requirements	Strive to alter accreditation standards so that they require or encourage use of the clinical innovation. Work to alter membership organization requirements so that those who want to affiliate with the organization are encouraged or required to use the clinical innovation	Y	Inclusion of MMOC requirement in McGrath Cancer Care Nurse contracts
Change record systems	Change records systems to allow better assessment of implementation or clinical outcomes	Y	Update of McGrath nurse portal

Implementation and Next steps



Conclusion

- By combining expert insights, academic evidence and consumer input the co-design process produced an inclusive, evidence-informed MMoC grounded in the priorities of people affected by cancer and clinicians.
- The implementation strategies aim to facilitate timely identification of contextual enablers and barriers, supporting coordinated, individualized, and equitable supportive care delivery at scale.