

Ontario Cancer News



Cancer Care Ontario's New Mission

The Cancer Care Ontario Board has endorsed a new mission statement and guiding principles for the organization. Cancer Care Ontario's mission is to improve the performance of the cancer system by driving quality, accountability and innovation in all cancer-related services.

A new tag line reflecting the new mission will be included in our corporate materials: Driving quality, accountability and innovation throughout Ontario's cancer system.

[Read more](#) in this issue of *Ontario Cancer News*.



Provincial Cancer Plan

As part of its role as principle advisor to Government of Ontario for all matters relating to the cancer system and cancer services, Cancer Care Ontario has been asked to lead the development of a Provincial Cancer Plan. See the attached [letter of support from the Ministry of Health and Long-Term Care](#).

Strategic Goals: Over the next 10 years, we will work together to improve

- Access
- Measurement and reporting
- Evidence-based decision making
- Effective use of resources
- Outcomes

The first iteration of the Provincial Cancer Plan needs to be complete by October, 2004, so that it will coincide with the government's three-year business planning cycles, and help inform the 2005 – 2006 operating plan process for individual organizations.

The Provincial Cancer Plan will include an overall provincial strategy for cancer care in Ontario, as well as plans within each Cancer Care Ontario region that address local area requirements. Profiles of cancer incidence, prevalence, service activity and system level quality indicators will be produced for each area by Cancer Care Ontario using a common provincial methodology and secondary data sources. Leaders throughout the system will be provided with these data profiles and be required to use them as basis for the completion of Cancer Care Ontario regional planning workbooks and the development of recommendations. The workbooks will address four major themes: activity, quality, accountability and innovation.

Recommendations will be made about resource distribution and coordination of cancer services in the province as a whole and in each area of the province. Action plans with clear targets and timelines for improvement will be put in place and issues that require provincial coordination and leadership will be identified.

Involvement of Partners and Stakeholders

Regional vice presidents of the integrated cancer programs will actively engage other partners, provider organizations and stakeholders from across the continuum of cancer care in the planning process. There will be a number of mechanisms to gather input into the plans such as planning task forces, Cancer Care Ontario regional cancer advisory committees, and other consultations as required. Each area will tailor its approach to the planning exercise, so that its unique needs can be addressed.

Timing and Coordination

Completion of the Cancer Care Ontario Regional Cancer Planning Workbooks will take place, for the most part, between March and July of 2004. The period between June and September will be used to review all the local plans, and to prepare a summary of major issues for consideration at the Provincial Cancer Plan Summit in September 2004. Issues requiring system-wide solutions will be addressed at the summit and priorities for action identified. In October 2004, Cancer Care Ontario will submit its plan to the Ontario government.

Communication

Communication plans will be put in place to help keep people informed about the Provincial Cancer Plan on a regular basis.

If you have questions about the Provincial Cancer Plan, send e-mail to CancerPlan@cancercare.on.ca.



Principles to Guide CCO's Work

Last November, Cancer Care Ontario adopted a new vision: Working together to create the best cancer system in the world. A few weeks ago, the Board approved a new mission statement and guiding principles, which, together with the vision, will guide the organization's actions and decisions.

Cancer Care Ontario's mission is to improve the performance of the cancer system by driving quality, accountability and innovation in all cancer-related services.

Guiding Principles:

Transparency

We will adopt a transparent approach to sharing performance-related information and foster a culture of open communication with colleagues, partners and the public.

Equity

We will ensure fairness across regions in the development of a strong provincial cancer system.

Evidence-based

We will make decisions and provide policy advice based on the best available evidence.

Performance oriented

We will advance new ideas, promote change and take action toward quality improvements in the cancer system.

Active engagement

We will consult widely and collaborate with other organizations and service providers in order to achieve our goals.

Value for money

We will use public resources wisely and promote the efficient use of these resources throughout the cancer system.

A **tag line** has also been developed that will be used in Cancer Care Ontario's corporate materials as a reminder of the organization's purpose: *Driving quality, accountability and innovation throughout Ontario's cancer system.*



People News

Sarah Kramer has been appointed Chief Information Officer for Cancer Care Ontario effective April 5, 2004. Sarah comes to CCO from the Nova Scotia Department of Health, where she has been Chief Information Officer since 2000. She holds a BSc from Cornell University.

Sarah has had a wide range of experience in both the public and private sectors related to health planning and information systems, including significant experience in Ontario. Before moving to Halifax, she was associate CIO for the Centre for Addiction and Mental Health, in Toronto, and has worked as a health care consultant and as a senior policy advisor for the Ontario government. Sarah will be spearheading our efforts in relation to the CCO information plan.

Dr. Terrence Sullivan, Cancer Care Ontario's vice-president of Cancer Control and Research, has been appointed Chief Operating Officer for the organization. For the time being, he will also maintain his current responsibilities with respect to preventive oncology and research.

Dr. George Browman, regional vice president of cancer services in Hamilton, has announced that he will be leaving Cancer Care Ontario and Hamilton Health Sciences at the end of June. George has accepted a new position in Calgary, as director of the Tom Baker Cancer Centre, vice president of the Alberta Cancer Board, and head of the Department of Oncology for the University of Calgary.

George has been with Cancer Care Ontario for almost 26 years, and has led the cancer centre in Hamilton for the past five years. He has provided excellent leadership during a time of great change for the cancer program, and has made significant contributions to the cancer system, both regionally and provincially. In addition to his commitment to the Central West region, he has been a driving force behind Cancer Care Ontario's Program in Evidence-Based Care, and has been internationally recognized for this work.

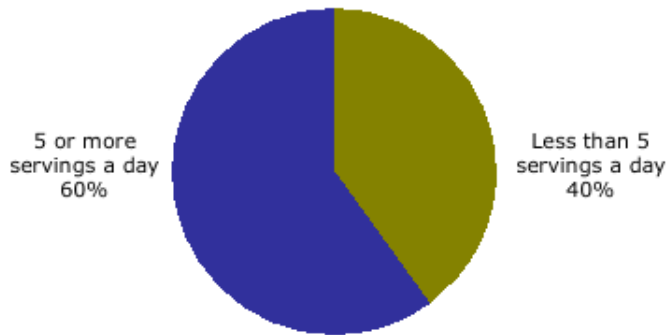
Cancer Care Ontario will be working with Hamilton Health Sciences to determine the next steps in finding new leadership for the cancer program.

Ontario Cancer Fact



A diet rich in vegetables and fruit can reduce the risk of colorectal, lung, and other cancers. Ontario adults should eat 5 to 10 servings of a variety of vegetables and fruit every day. A serving is 1 medium size vegetable or fruit, 1/2 cup of fresh, frozen or canned vegetables or fruit, 1 cup of salad, or 1/2 cup of 100% fruit or vegetable juice.

Percentage of Ontario adults eating vegetables and fruit



Source: Cancer Care Ontario, Ontario Nutrition and Cancer Prevention Survey, 2003.

Four out of every 10 Ontario adults aged 18–64 eat fewer than 5 servings of vegetables and fruit daily and could lower their risk if they ate more vegetables and fruit.

Here are some tips to help you eat more servings of vegetables and fruit daily:

- Remember that eating 5 or more servings of vegetables and fruit every day is important for your health.
- Set a date in the next month when you will start eating more servings of vegetables and fruit daily. Until then, look for recipes to try and learn more about how to buy, store and prepare vegetables and fruit.
- Learn what a serving size is and notice how many servings of vegetables and fruit you are eating every day.
- Start by adding one more serving a day until you are eating 5 or more servings daily.
- Keep eating 5 or more servings a day. The longer you do this, the better you will be at in making it a regular part of your daily food. Don't be discouraged if you slip back into old habits once in a while. The key is to notice that you have slipped up, and to try again to eat 5 or more servings of vegetables and fruit daily.

Visit these Web sites for recipes and helpful tips about buying, preparing and storing vegetables and fruit:

- [\(Canada\) 5 to 10 a day for better health](#)
- [\(U.S.\) 5 a day](#)
- [Canada's Food Guide to Healthy Eating for People Four Years and Over](#)

ICES Releases Research Atlas, Use of Large Bowel Procedures in Ontario

The Institute for Clinical Evaluative Sciences has released a new report on the state of colonic evaluation tests in Ontario. The ICES Research Atlas, *Use of Large Bowel Procedures in Ontario*, will be of interest to health care managers, policy makers, clinicians, and the public. The report not only gives a comprehensive picture of colonic evaluation across the province over the last decade, but also provides timely recommendations to inform decision making and guide policy development.



Overview of Results:

- Over the last decade only 16% of "screen-eligible" Ontarians (individuals between the ages of 50 and 74 who should be regularly screened) had a colonoscopy.
- The number of colonoscopies performed over the study period has nearly tripled from over 63,000 in 1992 to more than 172,000 in 2001.
- Sigmoidoscopy and barium enema rates have fallen dramatically. Sigmoidoscopy rates have fallen by 40% while barium enema rates have fallen by 30%.
- Access to colonoscopy varies widely throughout the province. Some counties have procedure rates 2.5 times higher

than the rates of the lowest counties.

- Relative to total hospital volume, colonoscopies were performed at more than twice the rate in small hospitals compared with teaching hospitals.
- Fecal occult blood testing (FOBT) screening rates among screen-eligible individuals remain very low, despite recommendations it should be carried out annually or biennially.
- Colonic evaluation procedures performed in Ontario, excluding FOBT, (i.e. barium enema, sigmoidoscopy and colonoscopy), rose from over 307,000 in 1992 to more than 359,000 in 2001.

In order to reduce the burden of colorectal cancer in Ontario, the authors recommend finding new ways to provide, fund and organize the delivery of colonic evaluation procedures. As well, an organized screening program needs to be established, which includes a public awareness campaign, screening invitations for eligible residents, the use of quality indicators, and continuous monitoring of resource use and outcomes.

Dr. Linda Rabeneck, senior author of the Atlas, is also a senior investigator with the Cancer Quality Council of Ontario.

The ICES Research Atlas, *Use of Large Bowel Procedures in Ontario*, is available on the ICES Web site at <http://www.ices.on.ca>. For more information, send e-mail to karen.ramlall@cancercare.on.ca.



Coming This Spring...

Alan Hudson to present second annual State of the Union address

Join Cancer Care Ontario CEO Dr. Alan Hudson as he presents his second annual State of the Union address on April 29 in Toronto. In his presentation, he will review the progress made in the cancer system, and will talk about our next steps, including highlights from the Cancer Quality Council of Ontario, and our efforts to improve quality, accountability and innovation throughout the province.

Location details and directions will be published in next month's issue of *Ontario Cancer News*.

Third issue of *Insight on Cancer* to be published

Watch next month for the third issue of *Insight on Cancer*, a series produced jointly by Cancer Care Ontario and the Canadian Cancer Society, Ontario Division. *Insight on Cancer, News and information on colorectal cancer*, looks at incidence and mortality rates, trends, screening methods, treatment and prevention of colorectal cancer. Ontario's rate of colorectal cancer is among the highest in the world.

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