

Ontario Cancer News



Innovation Fund supports access improvements

Twenty-two innovative regional projects aimed at improving access and reducing waiting times will be under way this spring as a result of the Access to Cancer Services Innovation Fund. Read about the successful proposals in this issue of [Ontario Cancer News](#).



Innovation Fund projects selected from across the province

Twenty-two innovative regional projects aimed at improving access and reducing waiting times will be under way this spring, as a result of the Access to Cancer Services Innovation Fund (Innovation Fund).

Five-million dollars was allocated during the 2004/2005 provincial budget to establish the Innovation Fund on the heels of the release of the *Four-Point Strategy to Reduce Waiting Times in Ontario* by the Cancer Quality Council of Ontario. The government has already allocated \$1.75-million to increasing radiation therapy volumes and the remaining \$3.25-million has been allocated through a proposal and selection process managed by a committee made up of representatives from the Ministry of Health and Long-Term Care, Cancer Care Ontario, hospitals and academia.

The purpose of the Innovation Fund is to support innovative projects that will reduce waiting times, test and implement new approaches, determine what works, and share that knowledge across the cancer system and broader health system so that the entire system can benefit.

Successful proposals addressed cancer system priority areas, including improving access and care closer to home; improved care coordination; reducing waiting times; process and system redesign; and health human resources. Among the projects being funded are:

- A local oncology network in the Central West – Kitchener region to educate physicians, nurses and pharmacy staff
- Development of an integrated delivery and communication system for palliative care in East – Kingston region
- Implementation of guidelines supporting the use of image-guided core biopsy in North – Sudbury, to reduce waiting time for breast cancer diagnosis
- Using system redesign to improve access to leukemia treatment in the Toronto region

Overall, the suite of successful innovation proposals addresses aspects of care across the continuum and all in some way support or complement the [Ontario Cancer Plan](#).

- [Read about successful proposals](#) 

CQCO secures two new health services research grants



The Cancer Quality Council of Ontario (CQCO) has obtained two new research grants, through national competitions, aimed at assessing aspects of quality in Ontario's cancer system.

The Canadian Institute of Health Research has granted \$180,000 over three years to assess the impact of a quality council on institutional relationships in Ontario's cancer system. This study will engage leaders from across the cancer system to determine how the quality council influences the relationship between decision-makers who set the overall cancer system strategy and those responsible for service delivery.

The Canadian Health Services Research Foundation has provided \$100,000 in new funds and \$140,000 in matched funds over the next three years to monitor cancer services integration. The study will develop a measure of integration that is specific to cancer care in a Canadian context, compare integration among different regions in Ontario, and report its findings to cancer system leaders.

Investigators from Cancer Care Ontario, the University of Toronto, the Institute for Clinical Evaluative Sciences, Princess Margaret Hospital, and Sunnybrook and Women's Health Science Centre will be involved in this research.

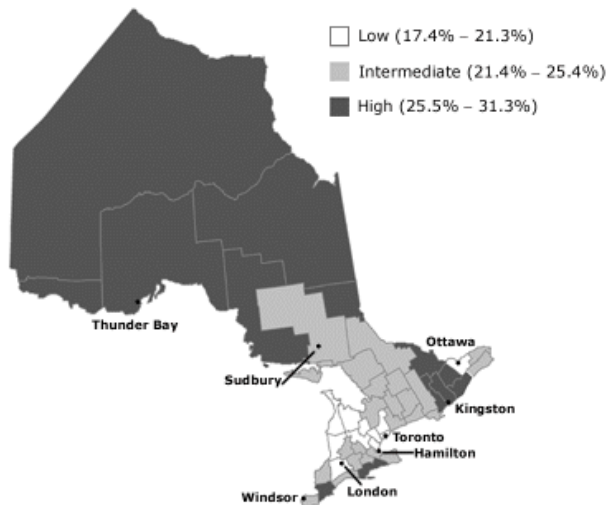
Ontario Cancer Fact



Tobacco use is the leading cause of preventable death and disease in Ontario. Each day, an estimated 50 Ontarians die because of tobacco. More Ontarians die from tobacco use than from alcohol, suicide, motor vehicle accidents, AIDS, drug use and homicide combined. Tobacco is responsible for approximately one-third of all cancers. It is also linked to a range of other chronic conditions including cardiovascular and lung diseases. Cigarette smoke is the principal hazard, but other forms including cigars, pipes, smokeless tobacco and environmental tobacco smoke are also harmful.

While smoking prevalence has been falling since the mid-1960s, it continues to be a public health concern. In 2003, the percentage of current smokers (daily or occasional) aged 12 and over varied widely across Ontario public health units, ranging from 17% to 31%. Smoking rates were low in Toronto and surrounding areas, Ottawa, and some southwestern regions; rates were somewhat higher in northern and eastern parts of the province. High smoking rates in some Ontario regions may point to areas where tobacco control efforts, including smoke-free bylaws, are less intensive.

Current smokers aged 12 and over, by Public Health Unit*, 2003



* Ontario map shows county boundaries
Source: Canadian Community Health Survey, 2003

Lung cancer incidence tends to be higher in areas where the proportion of current smokers is "high" or "intermediate" (see accompanying map). One of the key priorities of the Cancer 2020 plan (Cancer Care Ontario and the Canadian Cancer Society, Ontario Division) is to reduce smoking rates to 5% in adults and to 2% in teens by the year 2020. This would result in the prevention of over 6,000 premature tobacco-related cancer deaths between now and 2020.

As part of the Ontario government's tobacco control strategy, recently introduced legislation would prohibit smoking in all workplaces and enclosed public places that are not primarily a place of residence as of May 31, 2006. Other parts of the strategy include initiatives to prevent young people from starting to smoke and to help smokers who are ready to quit. American states that have introduced similar comprehensive tobacco control programs have experienced declines in tobacco consumption.

For more tobacco-related information visit the Ontario Tobacco Research Unit Web site at <http://www.otru.org/>.

People who stop smoking substantially reduce their chances of dying from cancer or other serious illnesses. For help with quitting, talk to your health care provider, call the Smokers' Helpline at 1-877-513-5333 and/or visit the following Web sites:

- On the road to quitting: <http://www.gosmokefree.com/>
- Quit 4 Life: <http://www.quit4life.com/>
- QuitNet: <http://www.quitnet.com/>
- One Step at a Time: http://www.cancer.ca/ccs/internet/standard/0,3182,3172_368202__langId-en,00.html

People news



As part of its three-year action plan to revitalize Ontario's public health system -- dubbed Operation Health Protection -- the Ontario government announced last week the development of a task force to develop a plan for the creation of a Health Protection and Promotion Agency for Ontario.

CCO's president & CEO **Terrence Sullivan** has been appointed co-chair of the task force. The new agency is expected to be established by 2006-07. For more information about Operation Health Protection, go to the [MOHLTC Web site](#).

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