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Ontario Cancer News

Privacy Commissioner endorses CCO's privacy program

The Information and Privacy Commissioner (IPC) of Ontario has approved the privacy practices and procedures of Cancer Care Ontario for a three-year period effective October 31. Read more in this issue of ***Ontario Cancer News***.

Privacy program reinforces CCO's commitment to ensuring security of PHI

The Personal Health Information Protection Act, 2004 (PHIPA), which came into effect on November 1, 2004, authorizes Cancer Care Ontario to collect, use and disclose personal health information to carry out its role in planning and managing the cancer system and for and for research. PHIPA also requires that CCO have in place appropriate practices and procedures to protect the privacy of individuals whose personal health information it receives and to maintain the confidentiality of that information.

In June 2005, representatives of the Office of the Information and Privacy Commissioner visited Cancer Care Ontario to inspect the organization's information handling and review its information practices.

The resulting report, received last week, states that, "The IPC is satisfied that CCO has in place practices and procedures that sufficiently protect the privacy of individuals whose personal health information it receives and to maintain the confidentiality of that information. Accordingly, effective October 31, 2005, the practices and procedures of CCO have been approved by the IPC."

The Privacy Commissioner's Report contained "no major recommendations requiring rectification or resolution by CCO prior to November 1, 2005." The recommendations made include additional training for CCO's staff and consultants, completion of a privacy brochure to be made available wherever cancer treatment is provided, and changes to the data access process.

Once a final copy of the Privacy Commissioner's Report is available, it will be posted on the Cancer Care Ontario Web site. Moving forward, Cancer Care Ontario will develop a work plan to address the recommendations made by the Privacy Commissioner.

For more information on CCO's privacy policy and practices, go to http://www.cancercare.on.ca/index_1391.htm, or contact the Chief Privacy Officer at privacyoffice@cancercare.on.ca or 416-971-9800, ext. 3200.

CCO Board supports clinical accountability framework

Cancer Care Ontario's Board of Directors has endorsed a framework to foster clinical accountability in the cancer system, furthering the organization's mission to improve the performance of the cancer system by driving quality, accountability and innovation.

The framework will promote accountability for safeguarding and continuously improving the quality of cancer services, through:

- Developing and monitoring guidelines, standards and indicators
- Knowledge brokering
- Linking funding advice to quality improvement
- Championing innovation

As CCO's main links to the integrated cancer programs and regional cancer program partners, the regional vice presidents will implement the framework within their regions.

To assist the regions in fulfilling their accountabilities for quality improvement, each CCO clinical program head will form a program-specific committee of regional representatives from across the province. These committees will help advance the quality improvement agenda in each region by monitoring indicators, knowledge brokering and championing innovation.

CCO endorses cancer pathology report checklists

A complete cancer pathology report is a valuable source of information for surgeons and oncologists in the diagnosis and treatment of cancer patients. Recognizing the key role pathology plays in cancer treatment, Cancer Care Ontario (CCO) recently endorsed the use of standardized reporting for cancer pathology. The content standard is based on high-quality, evidence-based cancer checklists developed and maintained by the College of American Pathologists (CAP). These protocols and checklists have been developed by site-specific expert pathologists with input from surgeons and oncologists.

“Adopting these new standards will enhance the quality of pathology reporting across the province,” said Dr. Carol Sawka, provincial vice-president, clinical programs, CCO. “Our aim is to establish a standard cancer pathology reporting system and, ultimately, enhance patient care by making sure clinicians have the best information to make accurate treatment decisions.”

Pathology reports are the source of the vast majority of cancer diagnoses and other important information used to predict disease progression and to select the best treatment. The checklist identifies important, scientifically validated elements for a pathologist to review and describe when examining a cancer specimen. The checklists and the new format will also ensure that the reports contain all of the important information in an easy-to-read and standardized format. This will reduce the risk of errors, missed information and the need to re-examine specimens.

CCO will be working with key stakeholders across Ontario to implement province-wide quality standards for cancer-related pathology reporting. The three-year target is to ensure that 90% of Ontario pathology reports in sixteen common cancer sites contain all of the information required to provide high-quality cancer care. As part of the overall strategy to reduce cancer wait times, the 37 Ontario hospitals have signed Cancer Surgery Agreements (CSA) to receive funding to increase surgical volumes. A requirement of the agreement is to participate in the project and implement standards for pathology reporting.

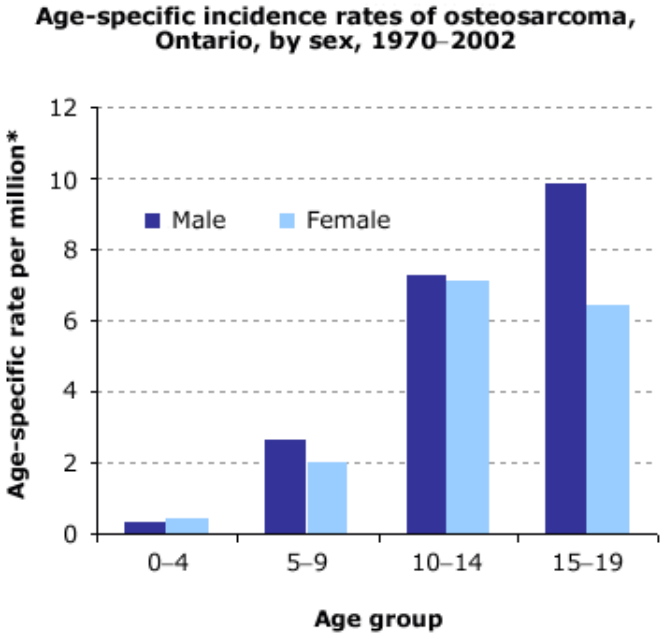
The pathology quality initiative is being led by Dr. John Srigley, chief of laboratory medicine at the Credit Valley Hospital and Cancer Care Ontario's provincial lead for pathology and laboratory medicine. Dr. Srigley is also the vice president of the Ontario Association of Pathologists.

In recognition of Ontario's leadership in implementing the checklists, the College of American Pathologists has granted CCO an inbound liaison position on its Cancer Committee. CCO is the only Canadian cancer agency to hold this distinction. As CCO's liaison, Dr. Srigley will share the learnings from the Ontario implementation of the checklists with CAP, which will be a valuable contribution in the evolution of the standards.

For more information, contact Fiona Taylor at 416-971-9800, ext. 3336, or Fiona.taylor@cancercare.on.ca.

Ontario Cancer Fact

Malignant bone tumours are rare, accounting for 0.2% of all cancers diagnosed in Ontario between 1993 and 2002. Among those under age 20, however, bone cancer is more common, and comprises 8% of cancers. During the decade 1993-2002, an average of 19 bone cancer cases were diagnosed each year in children and adolescents.



Source: Cancer Care Ontario (Ontario Cancer Registry, 2005)
*Cancer Facts usually display rates per 100,000

Osteosarcoma, the most common type of bone cancer among children and adolescents, usually occurs near the growth plates at the ends of the long bones in the arms and legs. Before adolescence, osteosarcoma is equally common in girls and boys, but after age 15 it becomes more prevalent in boys. The risk factors for osteosarcoma are largely unknown; however, there are some inherited genetic abnormalities in which osteosarcoma is more common.

Terry Fox was diagnosed with osteosarcoma in 1977, at age 18. At that time, amputation was the standard treatment. Today, most children and youth can be treated with limb-sparing surgery. This may involve grafting a human bone from a donor, or implanting a metal/plastic bone and joint inside the limb. Terry died in 1981; his cancer had spread to his lungs. At that time, the five-year relative survival rate for those diagnosed with osteosarcoma at ages 0-19 was about 50%. Through advances in treatment, that rate has improved to 65% for those diagnosed today.

In the 25 years since Terry's Marathon of Hope, more than $360-million has been raised worldwide for cancer research through the annual Terry Fox Run.

For more information, the following Web sites may be useful:

- The Terry Fox Foundation
- Pediatric Oncology Group of Ontario

People news

Dr. John McLaughlin will join Cancer Care Ontario's executive team in November as the provincial vice president, Preventive Oncology.

Dr. McLaughlin is a senior scientist at the Samuel Lunenfeld Research Institute (SLRI), where he is also leader of the Prosserman Centre for Health Research, a centre for molecular and genetic epidemiology. He is also head of the Program in Epidemiology and Biostatistics at the SLRI, an associate professor in the Department of Public Health Sciences at the University of Toronto, and is supported as an investigator of the Canadian Institutes of Health Research.

Prior to moving to the SLRI in 1999, Dr. McLaughlin served as a cancer epidemiologist at the University of Toronto, while holding a Research Scientist Award from the National Cancer Institute of Canada, and at the Ontario Cancer Treatment and Research Foundation. He obtained his PhD in epidemiology at the University of Toronto, and his MSc and BSc degrees at Queen's University. At the University of Toronto, he continues to serve as a faculty member in the graduate program in epidemiology. In his research he leads interdisciplinary teams in large, population-based, molecular-epidemiological studies of colorectal cancer, ovarian cancer and childhood cancer. Dr. McLaughlin also contributes to the development of

methodology and core infrastructure for population-based health studies, including the enhancement and use of cancer registries for both research and cancer control, the establishment of resources for population genomics research, and the creation of platforms that facilitate a broad range of research and health benefits in the population.

As provincial vice president, Preventive Oncology, his role will be to provide leadership to the senior staff within the Division of Preventive Oncology, and to give intellectual leadership to the research effort in Ontario in the following areas: population studies of cancer causes; prevention and early detection; the development of an enhanced province-wide research program that focuses on both scientific excellence and health benefits; and the evolution of any significant Canadian cohort initiative which may arise in the coming years.

Dr. Verna Mai, who has been acting in the position for the past year, will continue her leadership in the important evolution of screening for cancer.

Cancer Care Ontario and the University Health Network have announced the appointment of **Dr. Mary Gospodarowicz** as regional vice president of cancer services for Cancer Care Ontario and Princess Margaret Hospital, and medical director of Oncology and Blood Disorders at Princess Margaret Hospital. Dr. Gospodarowicz also will continue in her role as chief of the University Health Network's Radiation Medicine Program.

Dr. Gospodarowicz is a professor and chair of the University of Toronto's Department of Radiation Oncology, one of the largest academic radiation oncology departments in the world. She chairs the Task Force on Prognostic Factors for the International Union Against Cancer (UICC), an international non-governmental organization dedicated to the global control of cancer, and also serves as a member of the organization's Executive Committee. She is a former president of the Canadian Association of Radiation Oncologists and a past chair of the Canadian Committee on Cancer Staging.

Dr. Gospodarowicz is a passionate advocate of multidisciplinary patient-centred care. As past chair of the GU Group at the National Cancer Institute of Canada, she understands the critical importance of basic, translational and clinical research in improving outcomes in cancer treatment.

In her new regional leadership role within the Toronto LHIN, Dr. Gospodarowicz will work closely with her counterparts from the other integrated cancer programs within the GTA on the development of regional disease networks and cancer planning priorities. In addition, she will join Cancer Care Ontario's Provincial Leadership Council. Mary will be supported in her planning role by Lee Fairclough, who has been an active contributor to regional cancer planning across Ontario.

Upcoming events

CCO session at OHA HealthAchieve 2005, November 1, 2005

Cancer Care Ontario presents "Performance measurement, public reporting and improving the quality of cancer care" at this year's OHA conference, November 1 in Toronto. The half-day session will include talks by several of CCO's senior leaders, as well as a panel discussion focused on addressing challenges to improving quality and performance. For information or to register for the conference, go to www.ohahealthachieve.com.

CCO retreat to bring together LHINs and cancer system leaders

A two-day retreat this November will bring together leaders in cancer care, the Ministry of Health and Long-Term Care, and Local Health Integration Networks to cultivate relationships and practical strategies to reduce the number of people getting cancer and improve cancer service access and quality for those who do. *Building local relationships to improve cancer outcomes* will take place November 23 and 24 in King City.

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