Ontario Cancer News

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2010 Quality and Innovation Awards

The Cancer Quality Council of Ontario (CQCO) and Cancer Care Ontario (CCO) - in partnership with the Canadian Cancer Society, Ontario Division - have announced the fifth annual call for nominations for the 2010 Quality and Innovation Awards recognizing significant contributions to quality or innovation in the delivery of cancer care. Applicants must be involved in the delivery of cancer care within Ontario. Successful applicants will be notified in late October and invited to an awards dinner and presentation on December 8th in Toronto.

For more information about the nomination process and criteria, and for an application form visit **www.cancercare.on.ca/qualityawards** or contact Jennifer Bentley at **qualityandinnovation.awards@cancercare.on.ca**

InScreen Continues to Expand: Leveraging Technology to Support Cancer Screening

Over the past six months, Cancer Care Ontario has enhanced its information technology solution, InScreen, to provide increased support to physicians and Ontarians for cancer screening.

Deployed in 2009, InScreen supports Cancer Care Ontario's ColonCancerCheck program in identifying Ontarians eligible to be screened for colorectal cancer. InScreen collects information to create electronic screening records that can be tracked along the cancer screening journey.

Recent InScreen enhancements include:

- Linked colonoscopy and Fecal Occult Blood Testing (FOBT) information to screen eligible Ontarians,
- Added functionality to support generation and presentation of Primary Care Screening Activity Reports,
- Increased program correspondence including result notifications, screening recalls and reminders, and
- Improved processes for submission of laboratory FOBT results.

Additional enhancements scheduled this fall include sending correspondence to patients with positive FOBT results and sending "birthday letters" for Ontarians who turned 50 and are newly eligible to participate in the program.

Plans also are underway to expand InScreen's functionality and data beyond colorectal cancer to support two additional cancer screening programs: the Ontario Cervical Screening Program and the Ontario Breast Screening Program. Through the Integrated Screening Program, this expansion strategy aims to improve efficiency of program screening delivery and improve screening rates.

CCO Project Recommended for Funding by Canadian Health Services Research Foundation (CHSRF) Patient Engagement Project Competition

A Cancer Care Ontario project was one of 12 recommended for funding in the CHSRF's Patient Engagement Project Competition. Esther Green, Program Head, Nursing and PSO, was the team lead for the project - Engaging Survivors to Improve Patient Experience. The team includes researchers from the University Health Network and the Centre for eHealth Innovation who are offering their expertise in the training and toolkit design and development.

This project has two primary goals. First, to create a Patient Advisory Council (PAC) within CCO to advise at a provincial level in guiding long-term development of a patient experience measurement and improvement strategy; and second, to serve as an internal expert forum. In addition, the project developed and refined a training toolkit that can be adopted by interested organizations to engage patients in advisory councils and improve the patient experience in healthcare organizations.

Within this project, each of Ontario's 14 regional cancer programs will select at least one English-speaking, adult cancer patient to join the Patient Advisory Council. Training will be provided to PAC members to develop essential skills that are key to participation.

Funding for the patient engagement project comes from the partnership of the Canadian Health Services Research Foundation, the Health Council of Canada, and the Max Bell Foundation. Projects were reviewed to determine patient engagement in the design, delivery, and evaluation of health services, and reflected the goal of improving the quality of care.

New Toolkit Helps Organizations Design Innovative Cancer Services and Advanced Practice Nursing Roles

Cancer Care Ontario (CCO) has released a toolkit designed to guide organizations in developing Advance Practice Nursing (APN) teams to deliver high-quality, cost-effective and patient-centred cancer services.

The toolkit - a collaborative research study involving CCO, McMaster University, Laurentian University and regional cancer centres in Sudbury and Hamilton, uses the Participatory, evidence-informed, patient-focused process for

promoting the effective introduction and evaluation of APN roles, the PEPPA Framework.

Download a copy of the **Innovative Cancer Services and Advanced Practice Nursing Roles: Toolkit**. Experience has shown that Advance Practice Nurses positively impact the delivery of healthcare and patient outcomes.

Studies, led by Dr. Denise Bryant-Luksius, have demonstrated that an ad hoc approach to establishing APN roles could result in recruitment and retention problems and poor utility of Advance Practice Nurses. The toolkit provides extensive resources to support decision-making and ensure thoughtful collaboration of providers and patients in establishing APN roles.

For any questions, email **OAPN@jcc.hhsc.ca**

Successful Phase 1 Implementation for Discrete Synoptic Reporting of the Stage Capture and Pathology Reporting Project

High-quality cancer pathology reporting is vitally important to the cancer journey for all patients. Information in pathology reports guide a doctor's decisions when confirming a cancer diagnosis and deciding upon subsequent cancer treatment outcomes.

Cancer Care Ontario, in partnership with Ontario's cancer treating acute care hospitals, led the Stage Capture and Pathology Reporting Project (Stage-Path) to a successful first-phase implementation of discrete synoptic pathology reporting (standardized reporting) in hospital electronic health record systems for the most common cancers.

Implementation of synoptic reporting by Ontario's pathologists is a first for any jurisdiction of this size. As a result of Stage-Path's successful implementation, international interest has increased from healthcare organizations in Brazil, United Kingdom, Australia, United States and Japan, and the rest of Canada.

A recent survey of Ontario surgeons and oncologists confirmed that standardized reporting made it easier to obtain key clinical information, facilitated consistent interpretation of findings and decreased the need for follow-up to request clarification or missing information from pathologists. Synoptic pathology reporting also allows ongoing review of key surgical and pathology quality indicators.

Since implementation of the synoptic pathology reporting, 90 per cent of all pathology reports submitted electronically have been found to be consistent when measured against the pan-Canadian, pathologist endorsed College of American Pathologists (CAP) standard.

The next implementation phase of Stage-Path will look to expand synoptic reporting for all cancer resections. It will also update to the newly released CAP standard in all electronically reporting pathology hospitals in Ontario.

CQCO Seeking New Members to Join Advisory Group

The Cancer Quality Council of Ontario (CQCO) is looking for additional members to serve as volunteers. CQCO members are a multidisciplinary group of healthcare providers, cancer survivors, and experts in the area of oncology, health system policy and administration, and performance measurement and health services research.

CQCO is an advisory group established to guide Cancer Care Ontario and the Ministry of Health and Long-Term Care in their efforts to improve the quality of cancer care in the province. The Council also monitors and publicly reports

on the performance of the cancer system. CQCO works with Cancer Care Ontario's Board of Directors to identify and assess gaps in the cancer system performance and quality, and advises on planning and strategic priorities.

For information about becoming a CQCO member, visit the **CQCO page** on CCO's website

First CyberKnife Patient in Ontario Treated at Juravinski Centre

On July 13, the first CyberKnife patient was treated at the Juravinski Centre. This marked a significant achievement for healthcare professionals in Canada. The use of CyberKnife technology is an effective alternative to surgery for some cancers and is the world's first and the only robotic radiosurgery system designed to treat tumours with sub-millimeter accuracy.

Ontario Cancer Facts

Breast cancer incidence continues to rise among First Nations women in Ontario (June 2010)

Breast cancer is the most common cancer among women in Ontario, with approximately 8,700 new cases diagnosed in 2009. Despite the large number of new cases each year, incidence rates have stabilized at about 102 cases per 100,000 in the general population[1]. In contrast, among Ontario's First Nations women, the incidence of breast cancer continues to increase[2].

In addition to increasing incidence, survival following a breast cancer diagnosis is significantly worse among First Nations women compared to other women in the province[3]. The leading determinant of breast cancer survival is the stage at which it is detected, which is based on tumour size, lymph node involvement, and whether it has spread to other parts of the body[4]. For this reason, it is important to understand differences in stage at diagnosis between First Nations and non-First Nations women.

Find out more in June's Ontario Cancer Fact on Cancer Care Ontario's website

Viral Infections and Cancer (July 2010)

Worldwide, approximately 18% of cancers are caused by infections[1]. Viruses are responsible for most of the cancers caused by infectious agents (12% of all cancers worldwide).[1]There is an established link between human cancer and Human Papillomavirus (HPV), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), Human T-Cell Lymphotrophic/Leukemia Virus Type 1 (HTLV-1), Human Immunodeficiency Virus (HIV), Human Herpesvirus 8 (HHV-8), and Epstein-Barr Virus (EBV)[2].

These viruses can be responsible for a range of cancers. Prevention efforts around these agents include: population screening, treatment, public education, and vaccines (in development or use).

Find out more in July's Ontario Cancer Fact on Cancer Care Ontario's website

Bacteria and cancer: Helicobacter pylori (H. pylori) (Aug. 2010)

Worldwide, approximately 18% of cancers are caused by infections with certain bacteria, viruses and parasites; around 5.6% are attributable to infection with the bacterium Helicobacter pylori (H. pylori).[1,2]
H. pylori causes a common stomach infection, found in 23% of the Ontario population (29% of men, 15% of women).[3] Half the world's population is believed to be infected, with highest rates in developing nations.[4,5]

Although associated with other, rare, cancers, H. pylori is most closely associated with stomach cancer, which

develops in 2% of those infected.[1] The infection can cause other conditions, including peptic ulcer disease.[6,7]

Find out more in August's Ontario Cancer Fact on Cancer Care Ontario's website

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People News

New to CCO

1. This October, **Dr. Linda Rabeneck** will join CCO's Executive Leadership as Vice-President for Preventative Oncology. In taking up her new position, Dr. Rabeneck will step down as Vice President, Regional Cancer Services, and Chief of Sunnybrook's Odette Cancer Centre on October 1, 2010, having served in this capacity since 2005. During this time, Dr. Rabeneck has been instrumental in advancing the quality of cancer care for Sunnybrook and the larger cancer community.

Leaving CCO...

1. **Dr. Deb Dudgeon**, Provincial Head, CCO Palliative Care Program, is stepping down upon the completion of her term on November 30, 2010. As the inaugural head of this Program, Deb has accomplished a great deal: the establishment of the provincial program, recruitment of regional leads, development of a strategic plan and a recommendations report for palliative care within the province, and incorporation of ESAS for routine symptom distress reporting. More recently, she has worked with her team to develop Symptom Management Guides-to-Practice to facilitate improved management of symptoms. Her contributions have been outstanding. She will leave the program in a very solid position.

Upcoming Events

OBSP 20th Anniversary Celebration Kick-Off
Date: Tuesday, September 28, 2010
Time: 9:00 a.m.
Location: Sunnybrook Health Sciences Centre, 2075 Bayview Avenue, Toronto - M Wing, 1st Floor

Board Retreat
Date: Thursday, September 30, 2010
Time: 8:00 a.m. - 4:00 p.m.
Location: The Bram & Bluma Appel Salon at the Toronto Reference Library, 789 Yonge Street, Toronto, ON

HealthAchieve2010
Date: November 8, 9, 10, 2010
Location: Metro Toronto Convention Centre, Toronto, ON - 255 Front Street West, Toronto, ON
For more information visit **HealthAchieve2010**

Clinical Council Fall Event
December 3, 2010

Signature Event and Quality and Innovation Awards

December 8, 2010

Ontario Cancer News is issued every two months by Public Affairs at Cancer Care Ontario. The next edition will be distributed on December 10. Share your cancer news! The deadline for submissions is November 17. Send your news to publicaffairs@cancercare.on.ca

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