Cancer Care Ontario

Provincial Psychosocial Oncology Newsletter

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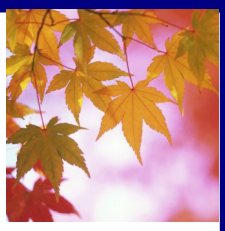
A note from Esther...

Improving the Patient Experience has always been a focus of Cancer Care Ontario, but this past year with the launch of the Ontario Cancer Plan III, there has been a groundswell of support for what this means to the cancer system. The approach we are exploring is by measurement, management and engagement to improve the patient experience. Building on the successes of the Ontario Cancer Symptom Management Collaborative, many more hospitals are recognizing the value of asking patients' first hand about their cancer-related symptoms and health care providers are coming together embracing the interdisciplinary symptom management guides (see article below and pg. 2). In addition impacts on sexual function and finances are also coming to the fore (read more about how Peel Region Cancer Program and the Juravinski in Hamilton are addressing these issues). Ottawa has also raised the bar by engaging a large group of patients in their transformation project (see page 3). We also have an exciting line-up of PSO rounds and look to you to suggest potential topics and speakers for 2012. Please keep in touch.



Sincerely,
Esther Green
Provincial Head of Oncology Nursing and Psychosocial Oncology

Inside this issue:

Electronic Symptom Screening through the Ontario Cancer Symptom Management Collaborative (OCSMC)

All 14 regional cancer centres (RCCs) now offer patients the ability to report their symptoms electronically. Electronic symptom screening is considered the gold standard as it puts patients in control of their symptom assessment and allows for better tracking of symptoms over time and across care settings. As of May 2011, 53 % of all RCC patients are being screened monthly with ESAS, and 65% are completing it electronically, e.g. at touch-screen kiosks. The goal is that all cancer patients in Ontario will have the ability to report their symptoms electronically to their care provider team.

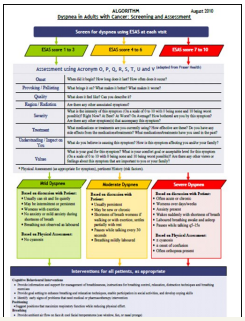
Over the last few years, CCO has been expanding the use of the electronic tool Interactive Symptom Assessment and Collection (ISAAC) to partner systemic treatment hospitals. ISAAC is being implemented using touch-screen kiosks and, where available, is being integrated with hospital electronic health records.

To date, there are ten partner hospitals who have implemented ISAAC, and ten more are engaged to implement by March 2012. CCO and the RCCs provide support for ISAAC implementation with a standard process of orientation and provision of training materials to the staff and volunteers.

"The time has come for electronic patient interfaces that allow symptom reporting to become a part of standard clinical cancer care."

(Ethan Basch, MD, *J Clinical Oncology,* 2011)

Advancing Patient-Centred Care in Northeastern Ontario – Launching Guides to Practice



Download the guides at www.cancercare.on.ca/symptools

Expanding Screening for Distress in Northeastern Ontario, was a two year quality improvement project in partnership with the Canadian Partnership Against Cancer – Cancer Journey Action Group (CPAC-CJAG), the Regional Cancer Program (RCP) of the Hôpital régional de Sudbury Regional Hospital, and the 14 Community Oncology Clinic Network (COCN) sites in Northeastern Ontario. It furthered the systematic screening and symptom management of cancer patients beyond the tertiary centre in Sudbury, to rural community hospitals where patients receive chemotherapy treatment closer to home. This project has advanced the work of Cancer Care Ontario's (CCO) Ontario Cancer Symptom Management Collaborative and is congruent with the mandate of the Supportive Care Oncology Network-NE Region in ensuring access to supportive care services for cancer patients and their families across northeastern Ontario.

This process ensured the promotion of evidence-based practice and formed the basis for dialogue about practices

An interdisciplinary working committee met monthly by telemedicine to identify and resolve process difficulties, address concerns, share practices and encourage continuation of screening and response to elevated scores. The Symptom Management Guides to Practice for: Anxiety, Depression, Dyspnea, Fatigue, Nausea & Vomiting, and Pain, and their accompanying algorithms were also reviewed. This process ensured the promotion of evidence-based practice and formed the basis for dialogue about practices at the COCN sites.

Since the project's completion, coordinated and interprofessional knowledge translation and exchange activities continue within the RCP and the region. Between April 1 and June 30 there have been 23 presentations to program teams, professional disciplines and outside agencies. Although attendance is mandatory within the RCP, there have been requests for presentations by health care organizations where inservicing is not mandatory. One symptom and its algorithm are featured per month and case studies are used to illustrate elevated scores and clinician response. Staff are advised on how to access the technical documents through the CCO website. Pocket guides and algorithms have been posted in clinics and treatment areas. Knowledge dissemination has been an interprofessional collaboration between the Supportive Care and Systemic Therapy programs at the RCP. This work builds on our experience in advancing the guidelines as part of a national project, ensures continuity and consistency of information, and readiness to meet the Accreditation Canada standard to screen patients for distress.

~Sheila Damore-Petingola, MSW, RSW

Sdamore-petingola@hrsrh.on.ca

Sexual Health Group program for Women with Gynecologic Cancers

Over the past year, the Psychosocial Oncology staff at the Peel Regional Cancer Centre have successfully implemented a sexual health program for women struggling with changes in sexual functioning as a result of cancer treatment. Under the guidance of Dr. Nelson Byrne, Psychologist, the group-based psychoeducational program was adapted from an evidence-based intervention developed at the renowned Kinsey Institute (Indiana University) for women with gynecologic cancers.

The 6-session program is currently facilitated by Social Worker Lisa Roelfsema, and Registered Nurse Shannon Farley, with input from Dr. Byrne. Entitled "Reclaiming Your Sexual Health After Cancer: A Psycho-Educational Program for Women," the program provides a safe space for women to learn and share discussion about topics such as the impact of cancer on sexuality, methods for enhancing sexual intimacy, and communicating with partners. So far, participant feedback has been tremendously positive, and the initial outcome data suggested that this type of program may have the potential to positively impact sexual functioning in female cancer survivors, thus enhancing quality of life. Women who attended the group have reported that it has helped them rediscover themselves sexually, increased their sexual intimacy, and improved communication with their partners about this sensitive topic that is often avoided.

~Trish Beardsley, MSW, RSW

tbeardsley@cvh.on.ca

Money Matters

A referral for financial assistance can bring feelings of dread and anxiety to even the most seasoned social workers. Understanding the rationale behind government programs, dealing with private insurance and putting it all together for each unique patient is a daily challenge. A group of thirteen social workers from Hamilton Health Sciences and St. Catharine's General Hospital recently attended the Wellspring Money Matters workshop conducted by Pamela Bowes. The event was organized through Supportive Care at the Juravinski Cancer Centre and held offsite at the new Wellwood Juravinski House. Fortified by breakfast, lunch and an afternoon break, the day flew by, leaving participants feeling they had spent a worthwhile day learning and networking. Pamela's well-prepared, no nonsense and straight forward style cut through the hazy maze of financial programs, organizing the material into a practical and applicable format. Pamela repeatedly reviewed the basic concepts, using "the chart", and building to more complex and detailed information. Limited small group discussion allowed for excellent interaction with Pamela. Questions were responded to with respect and with a theoretical framework that will help participants remember the important aspects. Slides, written material and case examples were well thought out and easily understood. Attendees have expressed unanimous appreciation for the workshop, going as far as recommending it be offered to all Hamilton Health Sciences' social workers at our yearly clinical day.

~Linda Learn, MSW, RSW

Linda.Learn@jcc.hhsc.ca

Helping navigate through the maze government and employer-based income and support programs.

The Ottawa Hospital's Transformation Project

The Ottawa Hospital has recently embraced a new vision which emphasizes a commitment to patient-centered care and service excellence: "To provide each patient with the world-class care, exceptional service and compassion we would want for our loved ones." To support the implementation of this vision, we felt there was a need to re-evaluate and challenge ourselves as to how we can organize care delivery in a manner which focuses on the needs of our patients. As a result, The Ottawa Hospital Cancer Program has embarked on a transformational journey which will focus on how care is delivered from a patient and family centred care perspective.

Patient and family centred care involves an innovative approach to the planning, delivery, and evaluation of health care. It is founded on the important role that patients and families have in decision-making and the unique perspective they bring to the organization. Viewing service delivery through the eyes of those who use our services and making changes that will improve the patient experience, will ultimately lead to better health outcomes and greater patient and family satisfaction. We have successfully completed Phase 1 of the project plan which focused on reviewing the literature, collecting background data on the Cancer Program and visiting other centres considered leaders in the delivery of patient and family centred care. Phase 1 also involved an extensive stakeholder engagement process which provided us with important feedback from our patients, family members, physicians, and staff. Recommendations received through this process were grouped into the following 6 thematic areas:

- *Increasing patient participation*
- *Improving system navigation*
- *Enhancing communication and information*
- *Addressing the impact of illness*
- *Building relationships*
- *Adopting a 'whole-person' approach to care*

The Transformation Project Team is now ready to launch Phase 2 - designing the 'future state' of cancer care. This involves re-visiting a process review of how care is provided, and identifying what needs to be changed with respect to the current service delivery model in order to best addresses the issues raised by our stakeholders and in keeping with the patient and family centred approach to care.

~Gwen Barton, BNSc, MHA,

gwbarton@toh.on.ca

Announcements

Connect, share, collaborate, create with CPOP

The Canadian Psychosocial Oncology Partnership (CPOP) recently launched its new website, at www.cpoponline.ca. Designed to serve as common ground for community-based organizations, health care providers, and researchers focused on psychosocial oncology, the site offers news, features, events, screening tools, support materials, blogs, a document repository and discussion forum, directories, links, newsletter, and anything else the community can use.

The community has responded with warmth and enthusiasm. Within weeks of launching, for instance, organizations began providing resource materials and links. Researchers submitting a grant proposal for C-CANS, the Canadian Cancer Activity Network, requested space on the site. Several people have volunteered to blog in French. A graduate student has approached CPOP to help recruit study participants. Health care professionals are submitting events and news for posting.

CPOP is an initiative of CAPO, the Canadian Association of Psychosocial Oncology. The site is run by Jan Matthews, a magazine journalist with a master's degree in health promotion. To get in touch, email her at Jan@cpoponline.ca . Visit the site at www.cpoponline.ca, then take a few minutes to fill out a survey that will help direct the site's evolution and provide data to assist with funding.

Cancer Care Ontario

620 University Ave.
Toronto, ON
M5G 2L7

Phone: 416-971-9800 X 2702
Fax: 416-971-6888
E-mail:
naomi.greenberg@cancercare.on.ca

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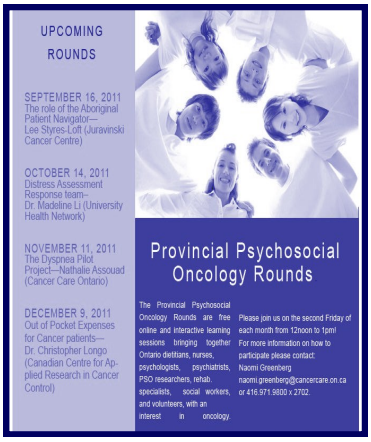

Posters are available for posting around your organization. Recordings of past presentations may also be available, please contact Naomi to request recordings.

The Provincial Psychosocial Oncology Rounds are free online and interactive learning sessions bringing together Ontario dietitians, nurses,

psychologists, psychiatrists, PSO researchers, rehab.

specialists, social workers, and volunteers, with an

interest in oncology.

Upcoming Provincial Psychosocial Oncology Rounds

OCTOBER 14— Distress Assessment Response team, Dr. Madeline Li & Alyssa Macedo.

NOVEMBER— no rounds.

DECEMBER 9, 2011—Out of Pocket Expenses for Cancer patients, Dr. Christopher Longo

JANUARY 13, 2012—Dyspnea Project, Natalie Assouad.

If you have a topic or speaker to suggest for rounds, we'd love to hear from you. Please contact naomi.greenberg@cancercare.on.ca to submit your ideas.