

SIMCOE MUSKOKA REGIONAL CANCER PROGRAM e-newsletter

Simcoe Muskoka Regional Cancer Program—A Year in Review

The Team

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Reflecting on the last 12 months, the Simcoe Muskoka Regional Cancer Program has undergone a significant transformation. In late June 2012 - the Simcoe Muskoka Regional Cancer Centre began a phased opening, and by the fall, the centre was in full operation. What a year it has been! As a Cancer Care Ontario partner, we are "working to create the best cancer system in the world". The first 365 days has marked many key events and accomplishments. Here are just a few:

- The Regional Cancer Centre logged a total of 74,894 visits
- Consulted on 3260 new cancer cases
- Recruitment of an interim Head of Radiation Oncology, 2 Radiation Oncologists and 2 Medical Oncologists
- Expanded from a single radiation treatment unit to 3 state of the art Varian Clinac iX treatment machines
- Added a Philips Brilliance CT Simulator to allow for planning on site for patients undergoing radiation treatment at the Simcoe Muskoka Regional Cancer Centre
- Expanded the Radiation Team from a team of 12 staff to a team of 50 staff
- Opened Rotary House Cancer Lodge and accommodated 50 guests for a total of 434 nights in 7 months
- The development of a Patient and Family Advisory Council
- Expanded the Chemotherapy Suite from 22 to 34 treatment chairs
- Temporarily transitioned 320 Cancer patients from Orillia Soldiers Memorial Hospital to the Simcoe Muskoka Regional Cancer Centre-Now planning for the reopening in Fall 2014
- Expanded the use of the Ontario Telemedicine Network for remote cancer patient virtual assessment to support care close to home. Telemedicine visits increased from 10 visits/month to well over 200/month
- Developed the Prevention and Screening Program and recruited six highly qualified staff
- Transitioned the administrative component of the Ontario Breast Screening program from the Greater Toronto Area to the Simcoe Muskoka Regional Cancer Centre
- The Prevention and Screening Team hosted 50 community events within 10 different communities
- Expanded the Psychosocial Oncology Program to include 4 social workers, 2 dietitians, 1 occupational therapist and 1 physiotherapist.
- Secured grant funding for additional drug access coordinator support
- Opened 9 new clinical research trials providing access to new innovative treatments
- Clinical Trials managed 96 patients on clinical trials
- Relocated to the new Oncology and Acute Palliative 32 bed inpatient unit
- Developed a formal partnership with Orillia Soldiers Memorial Hospital and stronger ties with Muskoka Algonquin Healthcare.
- Achieved independent licensing from the Canadian Nuclear Safety Commission for the three linear accelerators
- Began manufacturing medication in RIVA, the Robotic Intervenous Administration system
- Implemented a pilot program for chemotherapy nurse navigator to support patients in the community
- Implemented a virtual diagnostic assessment program suspected colorectal cancer
- Developed a proposal for a pan-regional gynecology program
- Developed and implemented a new electronic record to facilitate the development of a comprehensive Oncology Information system
- Implemented a Well-Breast follow up clinic
- Initiated a Nurse Led Oral Chemotherapy Clinic

It has been a busy first year, and the list above is just a sample of the activities the regional team has been involved in. There is still much to do. Stay tuned; in 2013 we will be launching the Simcoe Muskoka Regional Cancer Plan.

Tracey Keighley-Clarke
Program Director



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Oral Chemotherapy in the SMRCC

More than 17% of all chemotherapy given today is in oral form. Greater than 25% of chemotherapy in clinical trials is in oral form. The aging population, number of concurrent therapies, physical limitations and adverse effects along with drug cost all significantly impact adherence, and therefore therapeutic benefit of treatment (Rittenberg, 2012; Moore, 2009, Winterhalder et al, 2011; Chlebowski & Geller, 2006). Patients retain little information at their initial teaching session and express the need for more information concerning adverse effects, interaction with other drugs and proper handling (Winkeljohn, 2010; Simchowit et al, 2010). To address these very significant deficits in care we have commenced an Oral Chemotherapy Navigation Program.

The oral chemotherapy navigation model of care is Nurse-led (RN), with collaborative linkages to primary medical oncology, pharmacy, psychosocial oncology and clinical dietician. The patient population is adults with the diagnosis of cancer (solid tumor or hematological) requiring oral chemotherapy as monotherapy or in combination with IV chemotherapy. This may be in the adjuvant (post surgery), neoadjuvant (pre surgery) or palliative setting. When the patient is seen by the Medical Oncologist in a new patient visit or follow up visit and the plan of care is to include oral chemotherapy, this will be communicated to the Oral Chemotherapy Nurse (OCN). Upon receipt of the referral, the OCN will meet the patient and make arrangements for education and counseling.

The patient and OCN will meet for an initial patient teaching session utilizing the MASCC Oral Agent Teaching Tool@appointment aids, symptom diary, specific patient drug information from Cancer Care Ontario and drug specific pharma-kits. The OCN may choose to combine part of this visit with a pharmacist depending on complexity and pharmacist availability. The OCN will follow up with patients by telephone weekly for two weeks following initiation of oral chemotherapy to review patient education, compliance and assessment of adverse effects. Telephone follow up beyond this point will occur on an as needed basis as determined by patient comfort and assessment by the OCN.

Lesley Moody, Manager, Outpatient Clinics
Colleen Campbell, Nurse Practitioner

Primary Care Network of North Simcoe Muskoka (PCN-NSM)

The Primary Care Network of North Simcoe Muskoka (PCN-NSM) is a grassroots group of primary care practitioners that has recently been created:

- To be the voice of primary care in NSM
- To be the primary conduit for organizations seeking to engage NSM's primary caregivers

The Primary Care Network (PCN) is composed of family physicians and NP leaders who will meet regularly to improve two-way communication about issues that affect primary care.

Main Goals:

- Allow frontline primary care providers to give input into issues that affect both practitioners and patients with a view to effecting worthwhile, meaningful changes to the healthcare system.
- Share Best Practices and Quality Improvement strategies amongst groups in the region.
- Improve communication between central organizations and individual practitioners with respect to clinical, political, systemic, and practice issues.
- Link with specialist physicians and organizations to improve patient care.

Please contact PCNofNSM@gmail.com with any questions, comments, or suggestions:

Submitted by:

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Primary Care Lead for Simcoe Muskoka Regional Cancer Program



Education



Palliative Care It's Not Just Cancer

September 19

Casino Rama, Orillia, Ontario

[click here](#) to register or for more information go to www.palliativecarenetworknsm.ca



Communication in Palliative Care

October 24, 2013

Brooklea Golf and Country Club
Midland, Ontario

[click here](#) to register or for more information go to www.palliativecarenetworknsm.ca

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Prevention, Screening & Education: Accomplishments to Date

The Prevention, Screening and Education (PSE) team of the Simcoe Muskoka Regional Cancer Program (SMRCP) has been together for a year. The PSE team is mandated to promote cancer prevention and increase cancer screening rates for breast, cervical, and colorectal cancer. Over the last year, the PSE team has participated in more than 50 community events in 10 different communities across the region, reaching over 8,000 people with our important messages.

A reminder of the Ontario cancer screening guidelines:

- **Ontario Breast Screening Program** – Women 50 to 74 should have a mammogram every two years. Women 30 to 69 at high risk for breast cancer should have a mammogram and MRI every year.
- **Ontario Cervical Screening Program** – Starting at 21, women who are or have ever been sexually active should have a Pap test every three years.
- **Colon Cancer Check** – Men and women 50 to 74 should complete a fecal occult blood test (FOBT) every two years. Men and women with a parent, sibling or child diagnosed with colorectal cancer should have a colonoscopy beginning at 50, or 10 years earlier than the age their family member was diagnosed (whichever occurs first).

Here are just some of the many highlights from the PSE team:

Screening

- Seamless administrative transition of the Ontario Breast Screening Program (OBSP) from the GTA Hub to the SMRCP
- RVH became an OBSP High Risk site and OBSP Assessment Affiliate site in November 2012
- Screening participation rates in our region have increased, and are higher than the provincial average for all three cancer screening programs (breast, cervical, colon).

Provider Quality Improvement (PQI)

- Implemented a quality improvement project involving over 100 primary care providers (PCP) across the region. The first phase of the project involved surveys and focus groups to understand barriers and enablers to cancer screening. Phase two will begin in summer 2013.
- Developed a waiting room resource for patients promoting the three provincial screening programs, with mass mail-out underway to 1,000 healthcare providers.
- Hosted a CME event, "Cancer Prevention, Screening & More: Pearls for Primary Care", with over 100 PCP in attendance.



Targeted Community Engagement

- The **iQuit campaign** was run with the primary goal of encouraging and supporting people throughout our region to quit tobacco for the month of March
 - ◇ 135 contest participants registered, with an average age of 41 years and average length of tobacco use of 19 years
- **Stylists Save Lives** was implemented in October to raise awareness about breast and cervical cancer screening.
 - ◇ Partnered with 10 salons in 7 communities
 - ◇ 76 Stylist Champions were trained and reached more than 3,000 women with their messages

iQuit. 



Education

- Education within the Cancer Program is a key focus, whether for patients, families, staff, or the community.
- Some resources that have been developed for cancer patients include: *A Cancer Patient's Guide to Radiation Therapy*, *Information for Your First Visit to the Simcoe Muskoka Regional Cancer Centre*, *Rotary House*, *Lymphedema*, and many more.





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SMRCP Family and Friends Event

This summer marked the one year anniversary of the Simcoe Muskoka Regional Cancer Centre (SMRCC)

On June 3rd, staff of the Simcoe Muskoka Regional Cancer Program (SMRCP) were invited to bring their friends and family so they could show off the beautiful cancer centre; which was built for our community—by our community. This also gave staff the opportunity to introduce colleagues to their loved ones, show them where they work by offering self-guided tours and explain to them the valuable work they do.



Friends and Family of the SMRCP staff



"Boobs and Bums" to promote cancer screening messaging



RuiLin and Ryan, student interns



Self Guided Tours



Patient Education display

**Congratulations
Simcoe Muskoka Regional Cancer Program
on your one year anniversary.**

A Message from our Regional Vice President

Wow! What a year it has been. Having only been in the region for a little over a year, I am continuously impressed by the dedication and commitment of all the providers across our region who ensure that our communities have access to the highest quality cancer care. In January, we established the Simcoe Muskoka Regional Cancer Steering Committee. This group has come together and worked diligently to develop the first ever Regional Cancer Plan for Simcoe Muskoka. All of the content is complete and we are taking the opportunity over the summer to produce a document that will be available throughout our communities. The SMRCP Regional Cancer Plan will have an official launch in September; stay tuned for event details to celebrate the launch! This Plan will be our guide over the next 4 years and hold us collectively accountable for developing an integrated and coordinated Cancer Care System in our region. We have already started to make progress on our goals and I am excited about the opportunities that are in store for our Program.

Have a safe and happy summer!

*Lindsey Crawford
Regional Vice President*