

NORTHEAST REGIONAL CANCER PLAN

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Charting Our Course



Northeast Cancer Centre
Health Sciences North
Ontario Health (Cancer Care Ontario) partner

Centre de cancérologie du Nord-Est
Horizon Santé-Nord
un partenaire de Santé Ontario (Action Cancer Ontario)

A MESSAGE FROM OUR REGIONAL VICE PRESIDENT FOR CANCER CARE

I am pleased to share the Northeast Regional Cancer Plan for 2020-2024.

Despite the many challenges brought by the COVID-19 pandemic, this plan was developed through extensive engagement and thoughtful work with our many partners, including patient and family advisors, our dedicated physicians, clinical leaders and Northeast Cancer Centre staff including those serving Indigenous communities, our partner hospitals, scientists and volunteers. We are also always grateful for the support and collaboration of the Northern Cancer Foundation.

Everyone who worked on this plan shares the common goal of continuing to improve the quality of cancer care for our patients and their families throughout their entire cancer journey.

Our patients are at the heart of everything we do and I'm incredibly proud of the way everyone working in cancer care in the Northeast has maintained focus on our patients and their families during this world wide crisis. Adapting to new ways of delivering care and innovating to keep patients safe, our staff and physicians never faltered in their dedication.

This plan represents that commitment to the health of Northeastern Ontario and we are proud to be putting it into action together.

Thank you,

Maureen McLelland, BScN, MHSc, CHE

Vice-President, Social Accountability, Health Sciences North
Regional Vice-President Ontario Health (Cancer Care Ontario)



*From left: Dr. Lacey Pitre, Regional Systemic Therapy Clinical Lead;
Dr. Sathish Gopalakrishnan, Director for Complex Malignant Hematology;
Maureen McLelland; Dr. Andrew Pearce, Medical Lead Radiation Oncology; Stephanie Winn, Administrative Director NECC*



Dr. Silvana Spadafora, Medical Oncologist and Medical Director for the Algoma District Cancer Program (ADCP)

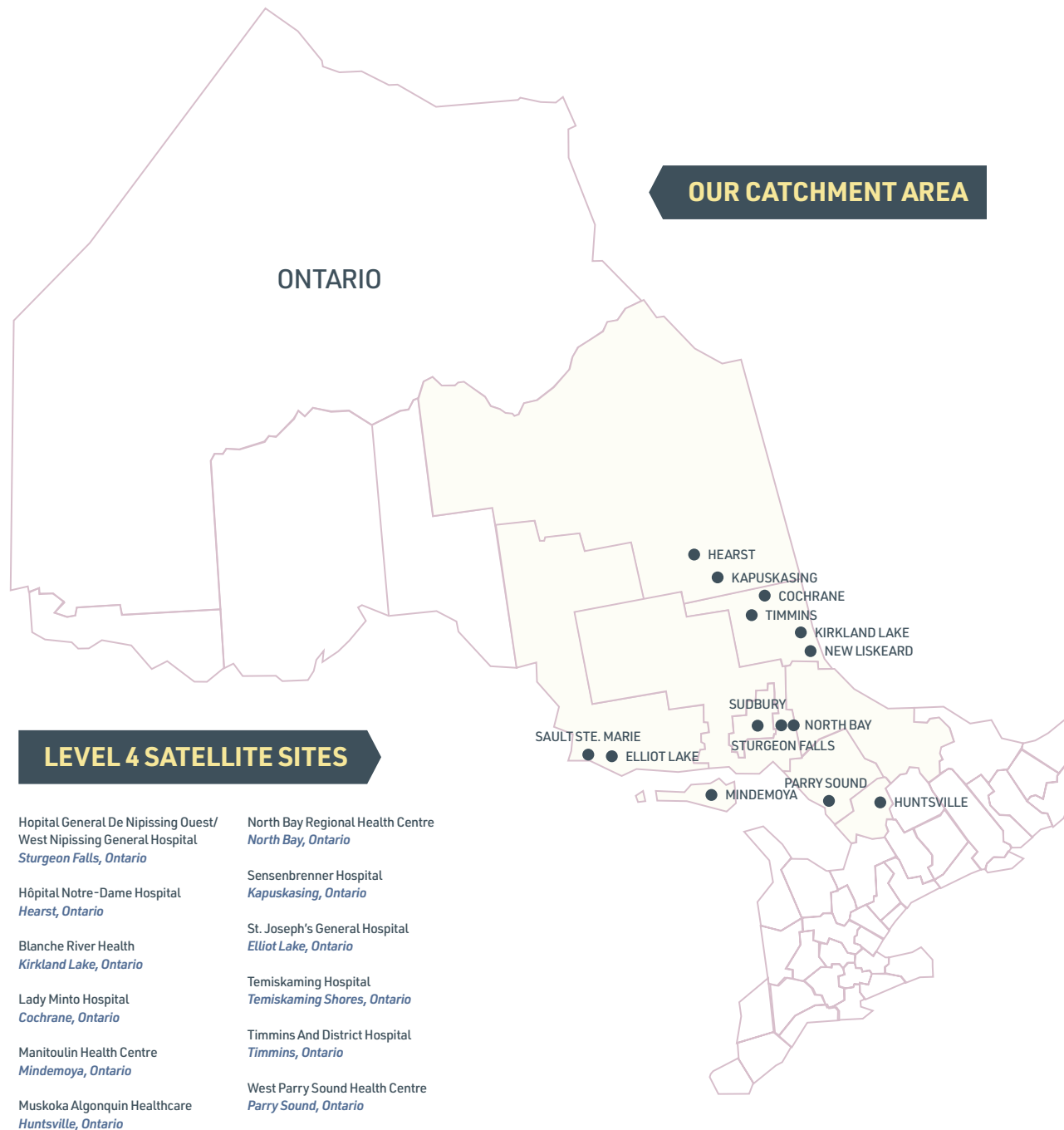
EXECUTIVE SUMMARY

The Northeast Regional Cancer Plan (2020-2024) represents our regional priorities for cancer care that align with the *Ontario Cancer Plan V (2019-2024)*.

This regional plan was developed through engagement with our many partners (see Appendix A) including patient and family advisors, our dedicated physicians, clinical leaders and Northeast Cancer Centre staff including those serving Indigenous communities, our partner hospitals, scientists and volunteers.

Through engagement and outreach with these many regional stakeholders in early 2020, we were able, despite a global pandemic, to develop and validate regional priorities in late 2020 that will guide us these next few years.

The Northeast Cancer Centre provides cancer care to patients living throughout the Northeast. Individuals living in the remote First Nations Coastal Communities of James Bay and Hudson Bay generally receive cancer treatment through the Cancer Centre in Kingston due to historical referral patterns and existing transportation routes. Oversight for cancer screening is provided by the NECC Cancer Screening Team, engagement is performed by the NECC Indigenous Health Team.



EXECUTIVE SUMMARY

This Regional Cancer Plan builds upon previous regional plans taking into account the realities of the COVID-19 pandemic which has dramatically impacted how services are accessed and delivered in the Northeast.

The focus of the plan is to continually improve the quality of cancer care in the Northeast region for patients and their families, through adoption of evidence-based treatment guidelines, partnerships in care delivery and innovation to bring new treatment and technological advances to those we serve.

Patients' and families' experiences and feedback have shaped this plan and they remain our most important partners in how services are planned and delivered.

The Regional Cancer Plan sets out the priorities that we have established for the next four years (2020-2024), organized around the opportunities and challenges we have in our region against the framework of the six dimensions of quality.

SIX DIMENSIONS OF QUALITY



BUILDING THE PLAN

Our regional priorities were identified and refined through four iterative rounds of stakeholder engagement that started in the Fall of 2019, including an in-person regional planning day held in January 2020.

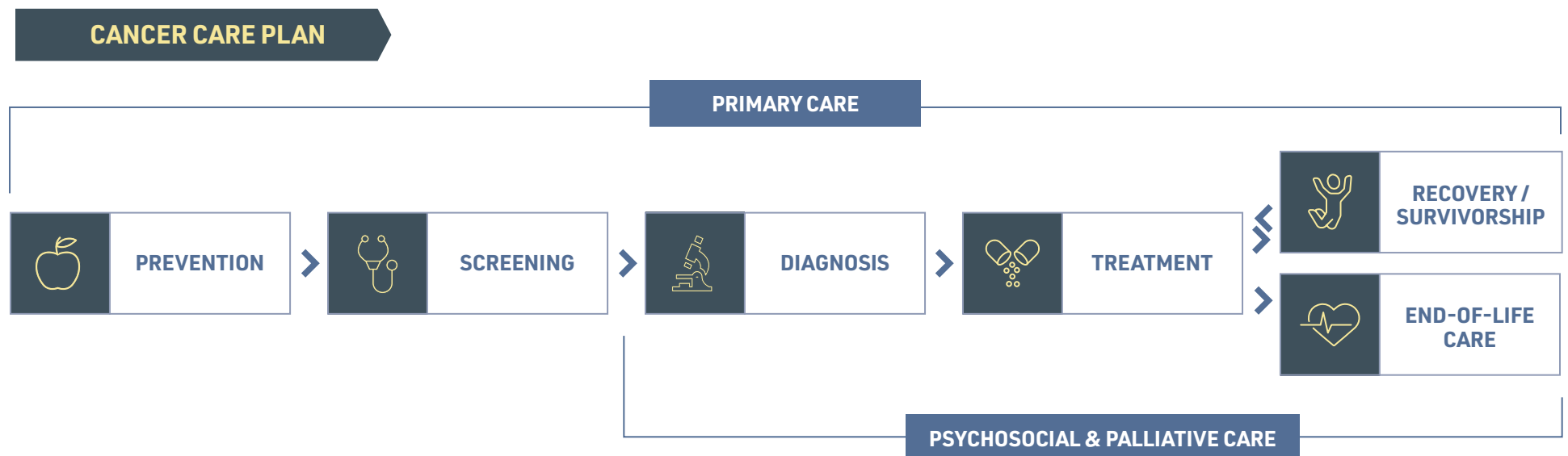
Due to the restrictions brought about by the COVID-19 pandemic, post-COVID surveys in the summer of 2020 and virtual Regional Council meetings held later in 2020 were methods used to validate priorities.

The plan recognizes that cancer is a journey that affects all of us.

From the things we do in our daily lives to prevent cancer, to the activities we engage in with a variety of health care providers to screen for cancer, to the approaches we take as a cancer system to research, diagnose, treat and support recovery and palliative care.

This plan aligns with the *Northeast Regional Palliative Care Plan* which addresses system improvements in providing palliative and end of life care.

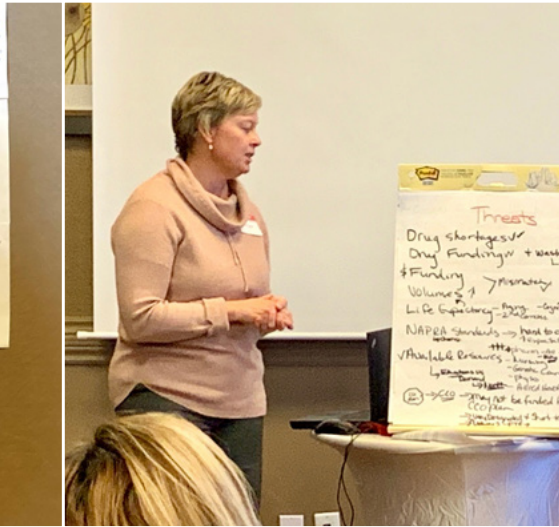
It also aligns with the *Regional Indigenous Cancer Plan* where specific goals have been established to support the cancer journey of First Nations, Métis and Inuit people living in the Northeast.



REGIONAL CANCER PLAN VISIONING DAY

Thank you to our Patient and Family Advisors and Colleagues who participated!

(Session took place in January 2020, prior to the pandemic)




PERSON-CENTRED CARE

As a Regional Cancer Program we have agreed that by 2024 we will:

- ▶ Provide care as **close to home as possible for patients and their families** through expansion and sustainment of virtual care options including at-home person-to-provider virtual assessments and consults
- ▶ Work on **transforming our clinical models** of care to respond to the increasing demands on the cancer system. Our goal is to provide high quality, well-coordinated, patient-centered care that supports the efficient use of healthcare resources
- ▶ Where an at-home consultation or treatment option is not possible, ensure financial processes are in place to **lessen the up-front burden of travel costs for patients and families**
- ▶ Optimize the use of oral take-home chemotherapy to **reduce the need for patient travel** and the requirement for patients to visit hospital-based chemotherapy suites
- ▶ Work with the Regional Meditech Expanse team to **develop automated processes that advance Goals of Care** discussion and document patients' wishes
- ▶ Work with the Regional Meditech Expanse team to **develop an online patient portal that improves patient access to their own health information** including lab and imaging results
- ▶ Expand the use of patient-reported outcomes through introducing online at-home access to "Your Symptoms Matter" in all program areas resulting in **improved symptom management**
- ▶ **Improve access to accessible cancer information** for patients and caregivers by updating patient and family education on the Regional Cancer Program's web page and making it available in electronic format for all patients and families



Married couple Emile and Bette met while volunteering together at the NECC in Sudbury



Over the past 20 years new treatments and tools have helped many cancer patients to live longer and better lives. Virtual care allows cancer patients to access state of the art cancer care, close to their home, without compromising the quality of their treatment.

< **Dr. Luisa Bonilla**

Medical Oncologist



Virtual care appointments have been a godsend for us. Going for an in person appointment in Sudbury is very stressful for my wife and I since she has to be the primary driver now and it's a long distance for us. Being able to have some of my appointments virtually made a huge difference for my wife and I.

Donald Grosz

Patient

I'm thankful virtual cancer care has been an option for me. I live two hours from the cancer centre. Weather and feeling unwell can make it difficult to travel. So, having the ability to see my team from the comfort of my home really makes a difference.

< **Natalie Iserhoff**

Patient

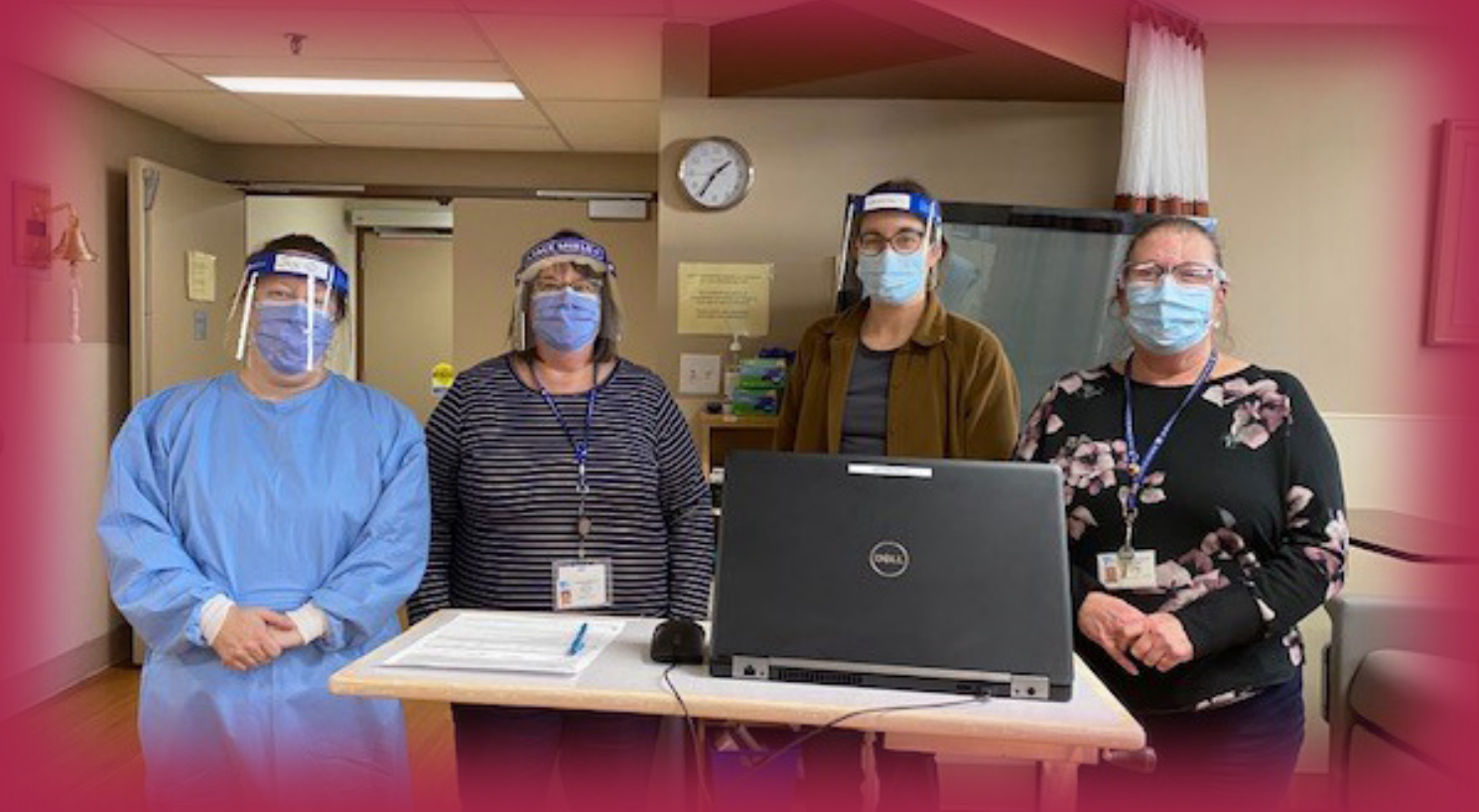
SAFE CARE

As a Regional Cancer Program we have agreed that by 2024 we will:

- ▶ **Further develop the region's Cellular Therapy (Stem Cell) Program** that treats hematological malignancies such as Leukemia, Lymphoma and Myeloma with an aim to achieve accreditation by the Foundation of Accreditation for Cellular Therapy (FACT), the international threshold for excellence in cellular therapy
- ▶ Design, build and implement the Oncology module of the Meditech Expanse electronic medical record (EMR) across all sites in the Northeast to **prevent treatment errors and delays due to information gaps**
- ▶ Plan with the Algoma District Cancer Program to **modernize and update equipment** that is due for replacement and standardize radiation therapy equipment between sites
- ▶ **Improve medication reconciliation practices** at care transitions of admission, transfer between the Northeast Cancer Centre and other chemotherapy (COCN) sites, and discharge from treatment modalities



Members of the NECC Pharmacy Team



Timmins satellite site team.

“ We could not manage the volume of patients we do without the help of our 12 satellite sites and our team and partners at the Algoma District Cancer Program who competently provide systemic cancer treatment and care to patients during their cancer journey so they can stay close to home and family at this difficult time in their lives.

We are grateful for our partnership with these sites and our ability to work collaboratively as a team to provide the best possible care to patients residing in Northeastern Ontario. ”

Shelley Lacelle

Nurse Clinician Chemo/COCN

EQUITABLE CARE

As a Regional Cancer Program we have agreed that by 2024 we will:

- ▶ Integrate the Regional Genetics Program, historically delivered by four different service providers in the Northeast, into an integrated service that ***provides equitable access to genetic testing and counselling for cancer patients and their families***
- ▶ ***Expand access to clinical trials and expand number of clinical trials at the NECC to capture all disease sites by the end of 2024***
- ▶ ***Streamline and modernize our referral and intake system*** for primary care using a new electronic platform (OCEANS) to provide real-time triage, standardized and equitable access for new patients at the Northeast Cancer Centre (Systemic, Radiation, Genetic and Dental Oncology)
- ▶ In the pandemic recovery period, ***renew efforts of engagement and outreach with First Nations, Métis and Inuit Peoples*** to implement the fourth Indigenous Cancer Plan



Trish Green, Administrative Assistant, HSN Indigenous Health Team & Mshkikii-Gamik Medicine Lodge



“By partnering with other hospitals in Northern Ontario, Health Sciences North is expanding its clinical trials, giving more patients access to new and cutting-edge cancer treatments.”

Dr. Lacey Pitre

Medical Oncologist
Regional Systemic Therapy Clinical Lead Northeast
Clinical Lead, NECC Cancer Clinical Trials,
Health Sciences North Research Institute
(Left)

“Our goal is to provide hope for all cancer patients in the north by providing access to clinical trials beyond the five common cancers that afflict the majority of our patients.”

Dr. Deborah Saunders

DMD, CTE, Co-Lead, Cancer Solutions and
Medical Director, Department of Dental Oncology
(Right)

TIMELY CARE

As a Regional Cancer Program we have agreed that by 2024 we will:

- ▶ Commit to aggressively **promoting cancer screening efforts and addressing the diagnostic backlog** brought about by the COVID pandemic
- ▶ **Make cancer surgery backlogs visible**, coming out of the COVID pandemic, and work with partner hospitals to ensure cancer surgeries are prioritized
- ▶ **Expand treatment hours** in the Chemotherapy Suite and Radiation areas as necessary to meet expected wait-time targets and patient demand
- ▶ Advocate for an **increase to new funded Oncologist positions** in Systemic Therapy and Radiation Therapy and successfully recruit specialists to meet targets for timely specialist care
- ▶ **Optimize use of physician extenders (GPOs/NPs)** to support in-patient and out-patient care as well as increased care needs



Ontario Breast Screening Program Staff in Sudbury



Dr. Sutherland (2nd from the left) and the Integrated Cancer Screening and Diagnostic Assessment, Genetics team

“Patients that are invited to participate in cancer screening are more likely to follow through with their primary care provider. This, together with the knowledge that early detection of breast, colorectal, cervical, and lung cancers leads to improved outcomes for our patients, highlights the vital role of primary care providers in the cancer screening journey.

As we continue to learn how to efficiently provide care during the pandemic and catch up our patients on their cancer screening, we must ensure that primary care providers are well supported and feel confident in our capacity to provide timely care to their patients.”

Dr. Jason Sutherland MD PhD CCFP

Regional Primary Care Lead Northeast Cancer Centre

EFFICIENT CARE

As a Regional Cancer Program we have agreed that by 2024 we will:

- ▶ **Plan and implement models of care that make the best use of the Program's Health Human Resources** including day-before processes that make treatment visits more efficient, nurse-led clinics, and outpatient models of care that reduce use of inpatient resources
- ▶ Conduct a thorough review of all clinical services and **develop robust reconciliation processes to ensure cancer funding** (including quality-based procedure revenue) is optimized and revenue is directed back to improvements in cancer services
- ▶ Implement daily processes and systems that **reduce drug wastage and reduce unfunded high cost drugs**
- ▶ Where possible and informed by evidence, continue with hypofractionated radiation treatment (fewer, larger doses to improve dose intensity) for breast and prostate patients to **cut down on time spent away from home for those who have to travel to receive treatment**



Nursing staff at the Northeast Cancer Centre



NECC nursing staff celebrating their award from the Canadian Nurses Association

“Oncology nurses are vital to delivering the best possible cancer care. Their contribution is unique in delivering person-centred integrated care throughout our patients cancer journey from prevention, early detection, treatment delivery, end of life care and survivorship.

The pandemic has created many hardships from a workload and staffing perspective yet the regional nursing supports continue to go above and beyond to ensure our oncology patients are receiving the very best care possible.

They continue to advocate for their patients and have pulled together to meet complex care needs despite the stressful and unpredictable work environment that they are currently facing.”

Lise Paquette

Manager, Systemic Treatment

Natalie McInnis

Manager, Outpatient Clinics, NECC

EFFECTIVE CARE

As a Regional Cancer Program we have agreed that by 2024 we will:

- ▶ **Build upon the previous Regional Cancer Plan** that introduced new treatment called Stereotactic Ablative Radiotherapy (SABR) for lung, brain and liver cancer and implement the final disease site for patients diagnosed with cancer in the spine
- ▶ Implement Human Papilloma Virus (HPV) testing as an **early screening process for cervical cancer**, in line with provincial efforts to make this test widely available
- ▶ Introduce an Oncology-Cardiology clinic at the Northeast Cancer Centre **that improves care and treatment for cancer patients who have cardiac comorbidities**
- ▶ **Invest in and promote Cancer Solutions Research for the Northeast** under the clinical leadership of local cancer clinicians and scientists
- ▶ **Implement standards and processes** for provision of Radiation Therapy, consistent with the provincial target to introduce Quality Based Procedure (QBP) funding for Radiation Therapy in fiscal year 2022/23.



HSN Radiation team, Algoma District Cancer Program, Sault Area Hospital



Radiation Oncologists

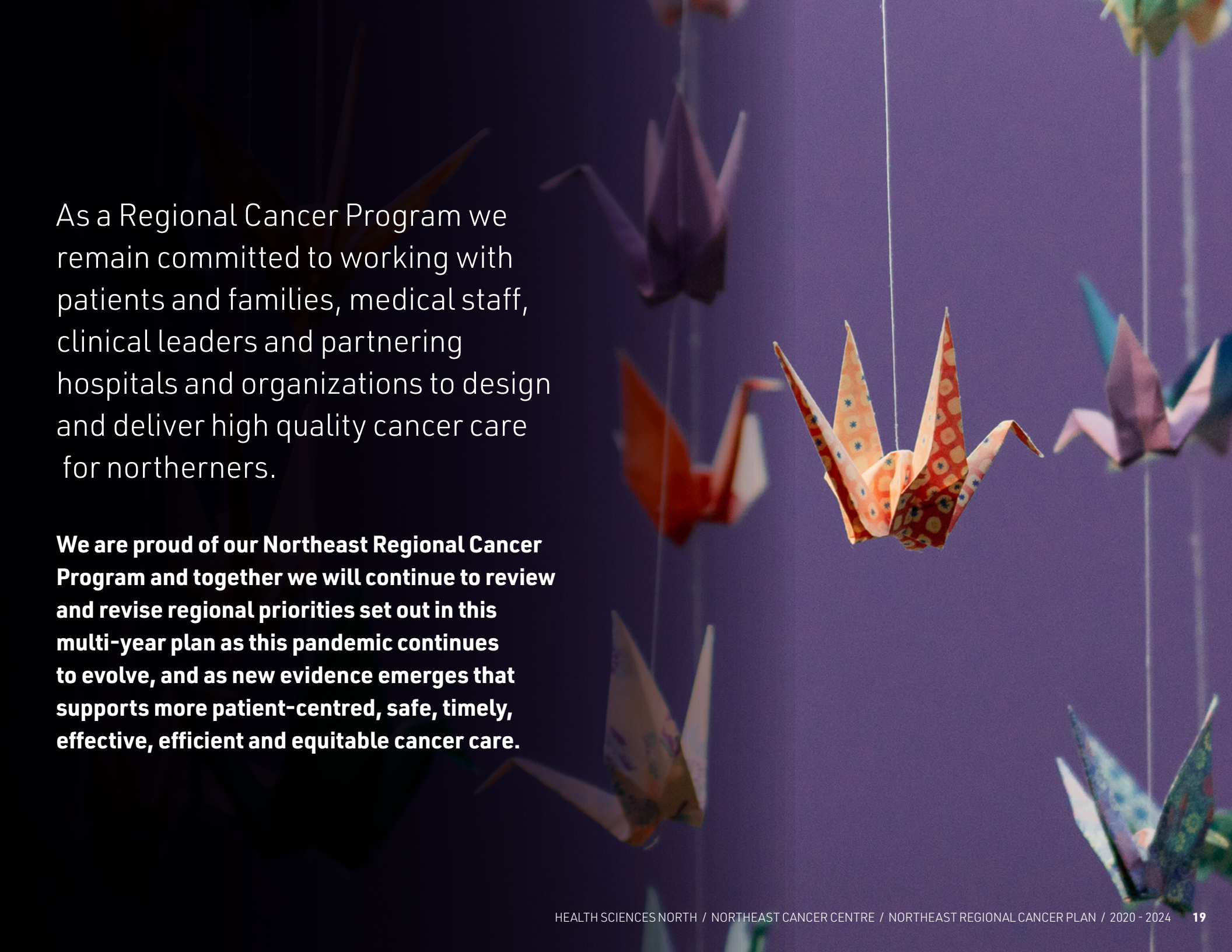
“Stereotactic ablative radiotherapy (SABR) is a highly focused radiation treatment that gives an intense dose of radiation concentrated on a tumor, while limiting the dose to the surrounding organs. This treatment is allowing us to treat small tumours in different parts of the body including the brain, lung, prostate and liver.

Under the guidance of our newest radiation oncologist Dr. Thangarooan, a radiation oncologist with fellowship training in this area,

NECC is now offering SABR to also treat cancer in the spine, completing the gradual expansion of the program which started with lung cancer in 2011 to now offer SABR to all standard disease sites here in Northern Ontario.

Dr. Andrew Pearce, MD, MSc, FRCPC

Head of Service, Radiation Oncology
Northeast Cancer Centre



As a Regional Cancer Program we remain committed to working with patients and families, medical staff, clinical leaders and partnering hospitals and organizations to design and deliver high quality cancer care for northerners.

We are proud of our Northeast Regional Cancer Program and together we will continue to review and revise regional priorities set out in this multi-year plan as this pandemic continues to evolve, and as new evidence emerges that supports more patient-centred, safe, timely, effective, efficient and equitable cancer care.

REGIONAL CANCER PLAN REFERENCE GROUP 2020

Steering Committee

Koop Alkema

Regional Manager
Manager, Cancer Screening, Diagnostic
Assessment Program, Genetics
NECC/HSN

Barb Ballantyne

Regional Palliative Care Lead
NECC/HSN

Eric Bouchard

ED Manager
North Bay Regional Health Centre

Isabelle Boucher

Chief Nursing Officer
Lady Minto

Tina Delorme

Quality Improvement Consultant &
Patient Representative
HSN

Jennifer Dumont

Manager, Clinical Trials, Research
Administration
HSNRI

Lianne Dupras

Patient Advisor
HSN

Lori Eastick

Director, Organizational Excellence
HSN

Paula Fields

Vice President of Clinical Services
Chief Nursing Officer
Manitoulin Health Centre

Connie Free

Chief Nursing Executive
St Joseph's General Hospital

Tracy French

Manager, Patient Care Services (CNO)
Kirkland and District Hospital

Christopher George

Manager, Patient Care
West Parry Sound Health Centre

Dr. Sathish Gopalakrishnan

Medical Oncologist
Director for Complex Malignant Hematology
NECC/HSN

Lorna Green

Manager
Timmins & District

Darlyn Hansen

Patient Advisor
HSN

Colleen Hill

Patient Advisor
HSN

Dr. Jennifer Jocko

Regional Cervical Screening &
Culposcopy Lead
HSN

Anthony Keating

President and Chief Development Officer,
Foundations
HSN

Dr. Scott Kerrigan

Regional Pathology Lead
North Bay Regional Health Centre

Jill Kirwan-Daviau

Patient Advisor
HSN

Dr. Andrew Knight, succeeded by Dr. Christine Pun April 2020

Regional Palliative Care Lead, GP Oncology
NECC/HSN

Sharon Henderson

Patient Advisor
HSN

Dr. Supriya Kulkarni

Regional Breast Imaging Lead
UHN/ HSN

Joanne Laplante

Director
North Bay Regional Health Centre

Tannys Laughren

Executive Director, NCF
Northern Cancer Foundation

Chris Lavoie

Manager of Clinical Research
HSNRI

Jo-Ann Lennon-Labelle

Chief Nursing Officer
West Nipissing General

Konrad Leszczynski

Chief Physicist
NECC/HSN

Kerri Loney

Clinical Manager, Supportive Care Oncology
NECC/HSN

Susanna Mansell

Coordinator, Accreditation and
Patient Experience
NECC/HSN

Laura Mattila, succeeded by Mindy Lindsted in May 2020

Director, Clinical Programs (ADCP)
Sault Area Hospital

Dr. James Masters

Regional Surgical Oncology Lead
HSN

Natalie McInnis

Manager, NECC Clinics Operations
NECC/HSN

Maureen McLelland

Regional Vice President Cancer Care
NECC/HSN

REGIONAL CANCER PLAN REFERENCE GROUP 2020

Erin Montgomery

Chief Nursing Officer /
Director of Patient Services
Temiskaming Hospital

Pina Paluzzi

Manager, Algoma District Cancer Program
Sault Area Hospital

Lise Paquette

Manage, Systemic Therapy and
Regional Nursing Lead
NECC/HSN

Dr. Andrew Pearce

Regional Radiation Therapy Lead
NECC/HSN

Dr. Erin Peltier

Regional Indigenous Cancer Lead
NECC/HSN

Lauri Petz

Patient Advisor
HSN

Rose Pitawanakwat

Indigenous Navigator
NECC/HSN

Dr. Lacey Pitre

Regional Systemic Therapy Lead
HSNRI Cancer Solutions Research Co-Lead
NECC/HSN/HSNRI

Deborah Randall-Wood

Chief Nursing Executive
West Parry Sound Health Centre

Dr. Greg Ross

Vice President Academic and Research Impact
HSN/HSNRI

Dr. Debbie Saunders

Regional Smoking Cessation Lead
HSNRI Cancer Solutions Research Co-Lead
NECC/HSN/HSNRI

Monika Schallenberger

VP Clinical Services & Chief Nursing Officer
Blanche River Health (Kirkland Lake)

Dr. Heidi Schmidt

Regional Cancer Imaging Lead/
Chief HSN Medical Imaging
UHN/HSN

Tiz Silveri

VP Clinical Services & Chief Nursing Officer
North Bay Regional Health Centre

Dr. Scott Shulman

Regional Colorectal Screening/
GI Endoscopy Lead
North Bay Regional Health Centre

Dr. Silvana Spadafora

Regional Systemic Lead
Sault Area Hospital

Tyler Speck

Administrative Director, Medical Imaging
HSN

Laurie Stillwaugh

Manager, Radiation Treatment,
Radiation Treatment/Therapy
NECC/HSN

Dr. Jason Sutherland

Regional Primary Care Lead
NECC/HSN

Lianne Valiquette

Regional Palliative Care Planning Lead
NE LHIN

Clifton Wassengesou

Indigenous Engagement Liaison Worker
NECC/HSN

Stephanie Winn

Administrative Director of NECC
NECC/HSN

Planning Support

Lise Pothier


Executive Assistant,
RVP Cancer Care & Social Accountability
HSN

Sherri Rancourt

Executive Assistant,
Associate VP Clinical Services
HSN

Karen Teddy

Administrative Assistant, NECC
HSN

A portrait of Rose Jacko-Pitawanakwat, a woman with long dark hair and bangs, wearing a grey textured sweater. She is looking slightly upwards and to the right. The background is blurred, showing some greenery and a blue sign.

We dedicate this plan to our beloved colleague and champion for quality care-

Rose Jacko-Pitawanakwat

Spirit Name: Niio Benessi Nimkii

(Four Directional Thunder Bird Woman)

An Indigenous Patient Navigator at the Northeast Cancer Centre, Rose passed away this fall and is greatly missed by her colleagues, friends and clients at HSN and throughout the Northeast.

Rose began her good work with Health Sciences North in 2017 as the Aboriginal Coordinator with the Northeast Cancer Centre and later transitioned into her role as the Indigenous Patient Navigator, with the Indigenous Health department. She was pivotal to progressing the role of Indigenous Coordinator and the role of Indigenous Patient Navigator.

Rose's life experiences guided her to achieve this fundamental role and offer all those who walk the cancer journey the opportunity to achieve their spiritual purpose.

Her calm, warm and lovely presence was a gift to staff and patients alike. She will be remembered for her profound character and fierce pride in her roots, family and community.



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