Mobilizing Newcomers and Immigrants to Cancer Screening: Key Project Deliverables

Identify and reduce barriers that limit access to cancer information and screening programs

Increase awareness about cancer prevention and screening

Improve cultural safety of immigrant and newcomer cancer care experience

Promote participation of immigrants and newcomers in cancer screening

How to Access the Project Tool Kit:

To learn more about the project and to access project tools and resources go to:

www.southwestcancer.ca and click on "Health Care Providers" at the top of the screen, or contact swrcpcommunications@ lhsc.on.ca

CancerChatCanada provides online support to those affected by cancer

CancerChatCanada offers professionallyfacilitated online groups structured to provide emotional support for patients and families dealing with cancer.

Each session is 90 minutes and discussions are focused around common experiences or questions and concerns from patients and/ or family members. Groups are made up of 6-8 members that meet weekly for 10-12 weeks.

"CancerChatCanada is a great resource that providers can recommend to patients and families," says Jim Panchaud, Psychosocial Oncology Lead. " Social support results in both psychological and physical health benefits."

For more information, about how to register for a group, visit: cancerchatcanada.ca



south west regional ancer program



Mobilizing Newcomers and Immigrants to Cancer Screening

In June 2011, four local health service organizations received funding from the Public Health Agency of Canada to develop, deliver and evaluate an evidence-based cancer prevention and screening service delivery model targeted to newcomer and immigrant under/never screened populations in London.

Representatives from the South West Regional Cancer Program, Canadian Cancer Society of Elgin-Middlesex, London InterCommunity Health Centre, and Middlesex-London Health Unit worked collaboratively to identify and reduce barriers that limit access to cancer screening information and services for the identified populations. The team developed education modules, cultural competency knowledge exchange tools and resources, an evaluation methodology and most recently, a sustainability plan.

On September 25, almost three years after joining forces, project partners gathered to celebrate successes and highlight project outcomes with community partners. The team plans to share the evidence based project model with other like-minded organizations across Canada to help reduce cancer care disparities for other under and never screened immigrant communities.

Key Findings:

DON'T ASSUME: Take the time to draw conclusions using evidence based facts. Make no assumptions.

DO YOUR HOMEWORK: Seek to understand the population that you are targeting.

ENHANCE CULTURAL SAFETY: Identify ways to improve the cancer care experience for immigrant populations.

Key Successes:

PEER-TO-PEER MODEL: Peer Health Educators demonstrated positive outcomes when trained and employed to deliver education about cancer prevention and screening in a culturally safe environment.

MOBILIZING TO CANCER SCREENING: When

delivered by a trusted source in the language of the target group and using a culturally competent format, education about cancer prevention and screening increased awareness among 140 participants and mobilized 32 percent of those eligible to participate in screening.

CULTURAL COMPETENCY: Cultural competency was promoted as a key component of the patient/ physician experience at three CME-accredited events to over 170 providers.

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SOUTH WEST NEW LINK CANCER **NEWS**

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On The Road Again: Cancer Care Partnership Tour



Dr. Michael Sherar, April Mullen, Kim Paton and Corv Gosnell tour the LRCP radiation therapy area

The second stop on Cancer Care Ontario (CCO)'s Partnership Tour 2014 was in the South West region. On Monday, September 15 leadership from CCO visited the London Regional Cancer Program to discuss the changing healthcare landscape and ways to strengthen partnerships.

Dr. Michael Sherar, President and CEO at CCO, shared insight into the upcoming Ontario Cancer Plan IV and Ontario Renal Plan II, which are anticipated to be released in early spring.

Following Michael's Town Hall address, an interactive panel discussion took place. Panelists included cancer and renal leaders with differing perspectives and expertise, sparking transformative conversation about improved system quality and patient care. Elisa Agnelli, cochair of the Patient and Family Advisory Council at LRCP participated on the panel and shared her unique perspective about the cancer system.

The South West Regional Cancer Program invited Michael and colleagues to attend the Regional Strategy Session which took place later the same day. Partners from across the region engaged in conversation about how the regional program will support the themes outlined in the OCP IV. Leaders at the South West Regional Cancer Program have started preliminary work to draft the Regional Strategic Plan. Neil Johnson, Regional Vice President assured attendees that all hospitals in the region will be consulted and engaged in this process, and patients will play a key role in directing the future vision of the program.

In his closing remarks, Dr. Michael Sherar shared his perspective on the importance of partnerships, stating that, "Together, we can help to shape the future of healthcare in Ontario."

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Working together to provide quality cancer care close to home

MESSAGE FROM THE DIRECTOR

Brenda Fleming, Director South West Regional Cancer Program

Where has the summer gone? I hope everyone enjoyed the summer months and was able to recharge with a little rest and relaxation. Bring



on the cool, crisp breeze, changing autumn leaves and glorious aroma of apple crisp and pumpkin pie!

It's not just the weather that is changing. The health care provider section of the South West Regional Cancer Program website is being redeveloped to better meet your needs and assist the role that you play in the cancer system. Changes are based on feedback collected over the past year and include a new layout, easier access (no login required), and more robust search functions. Stay tuned for the unveiling in early 2015!

The South West Regional Cancer Program has an ongoing partnership with the DeGroote School of Business at McMaster University. We recently welcomed Kayla Merim to the South West team. Kayla is completing her Masters of Business Administration and will be assisting with various projects over the next several months. She will play a key role in the development of the South West Regional Cancer Program Strategic Plan. Welcome Kavla!

Be sure to check out the latest animated videos that have been uploaded to the South West Regional Cancer Program YouTube channel. One video describes what the South West Regional Cancer Program is, and the other explains why cancer screening is important (in a fun and cheeky format).

Improving Quality to Enhance Patient Outcomes

Quality improvement in cancer care is an ongoing and essential component of improving patient outcomes. When it comes to mammography and breast imaging, quality is critical to detecting breast cancer. In the South West region, Sandra McFarlane, Regional Medical Radiation Technologist is working to ensure quality remains a top priority.

"When it comes to mammography, quality is vital," says Sandra. "Proper positioning is critical to the quality of the final image and our ability to detect breast cancer early."

In addition to provincial quality initiatives, the South West Regional Cancer Program has recognized the benefit of regional initiatives to improve outcomes and maintain excellence in breast imaging. In an effort to drive this regional response, Sandra's position was created to evaluate site performance through image reviews, educate technologists on proper

positioning, and ensure quality standards are being met. She also acts as a liaison between Cancer Care Ontario and Ontario Breast Screening Program (OBSP) sites in the South West with regard to issues or concerns.

According to Sandra, many technologists working at OBSP sites are keen to improve the quality of their work and have reached out to ask for her help. She has made several visits

across the region to assist with mammography positionina.

Sandra has developed a presentation that illustrates proper positioning techniques, and has delivered the presentation to the technologists at Stratford General Hospital. According to Sandra, the presentation gives technologists a chance to refine their technique and see how they compare to colleagues in the region. "It ensures quality imaging," she says. "We want to make sure we're delivering mammograms in the best way we can, to obtain optimal results."

Sandra plans to continue visiting sites across the region to offer guidance and support. "Quality is an ongoing process. Together, we have the technology and skills to find breast cancer early, which in turn gives patients more options for treatment and better outcomes."

SOUTH WEST **CANCER NEWS LINK**

E-cigarettes 101

WHAT ARE E-CIGARETTES? E-cigarettes are battery powered electronic devices that look like a traditional tobacco cigarette. Although designed to resemble its tobacco counterpart, the e-cigarette is a different product altogether. When activated, these modular mechanisms heat a liquid solution forming a steam vapour that can be inhaled into the lungs. Tobacco consumption is referred to as "smoking", whereas the use of an e-cigarette is known as "vaping". While it is illegal to buy or sell e-cigarettes with nicotine in Canada, many people are finding ways to circumvent this law.

ARE THEY LESS HARMFUL THAN CIGARETTES? Combustible tobacco products can include up to 6000 chemicals, 60 of them known carcinogens. Compared to smoking a traditional cigarette, e-cigarettes expose users to fewer inhaled chemicals however, there is no current scientific evidence that shows e-cigarettes are safer than smoking tobacco. Health care professionals should be cautious about recommending the use of any product that involves inhaling foreign material into the airway. According to the Journal of Thoracic Oncology, it is likely to be many years before the harms (if any) associated with the acute and long-term exposure to e-cigarettes can be determined.

HOW DO I TALK TO MY PATIENTS? Explain that until more evidence is available, you cannot speak to the safety of e-cigarettes either as an alternative to smoking or as a smoking cessation aid. Offer to work with them, or refer them to their public health unit or Smokers' Helpline, to help them overcome their nicotine dependence. Provide information about the government-approved nicotine replacement therapies and other smoking cessation medications that are available.

REGULATIONS – WHAT CAN WE DO? Our provincial and federal governments are being urged to impose stricter regulations on the advertisement, sale, and public consumption of e-cigarettes. Following the lead of the U.S. Food and Drug Administration, several provinces are in the planning stages working to regulate e-cigarettes in the same manner they regulate tobacco. Some hospitals in the South West LHIN, including London Health Sciences Centre have implemented similar regulation policies. You can contact the tobacco team at your local public health unit for more information and support about how to develop an e-cigarette policy for your organization.

Following the launch, Regional Cancer Programs were tasked with the logistical planning required for compliance with the guidelines.

1) An affiliate partnership with a Gyne-Oncology Centre (GOC) that includes Multidisciplinary Cancer Conferences participation and/or multidisciplinary collaborative discussion.

2) Have a pathology quality assurance review process (have at least one pathologist onsite and the ability to have a secondary pathology review).

For more information contact Sheila Densham at 519-685-8600, ext. 54512 or sheila.densham@lhsc.on.ca

PROFILE: Regional Medical Radiation Technologist

Sandra McFarlane: Sandra is a Medical Radiation Technologist who completed her training in London and Kitchener. A native of St. Marys, she has over 30 years of experience and has focused the majority of her career working in breast imaging. In addition to her role as Regional Medical Radiation Technologist (MRT) for the South West Regional Cancer Program, she shares her expertise as part of the breast care imaging team at St. Joseph's Health Care London. When she's not in the imaging suite, Sandra embraces her rural roots and can be found enjoying life on the farm, gardening or spending time with her haflinger horses.

A new addition to the South West Regional Cancer Program, Sandra works alongside Dr. Keith Sparrow, Regional Breast Imaging Lead, performing MRT mammography image reviews at affiliated Ontario Breast Screening Program sites throughout the region. Together, they ensure quality standards are being met and provide positive feedback to mammography technologists. Sandra serves as a valuable resource to MRTs in hospitals across the region, assisting technologists in achieving and maintaining accreditation with the Canadian Associates of Radiologists Mammography Accreditation Program (CAR-MAP). Sandra is dedicated to ensuring standardized, high-guality breast imaging and care for patients across the region.



Contact Sandra McFarlane at: Sandra.McFarlane@ sjhc.london.on.ca

Renovations will Improve Cancer Care for Patients in Grey Bruce

An \$11.4 million fundraising campaign that kicked off earlier this year will significantly enhance the delivery of cancer care in Grey Bruce. The Hospital Campaign is being led by the five foundations that support Grey Bruce Health Services. Part of the money raised will go towards a major renovation to create a dedicated cancer care unit at the Owen Sound Hospital. Cancer care services are currently spread out across two floors of the hospital.

"We book over 14,000 oncology visits per year with patients from across our region," said Lance Thurston, CEO of Grey Bruce Health Services. "This much needed renovation will give us the space and the equipment to provide quality, compassionate care for people who are often facing a very challenging time in their lives."

The new unit at the Owen Sound Hospital will offer approximately 40 percent more space, give much needed privacy for patients, house two larger chemotherapy treatment areas, doctors' offices, a spacious waiting area for patients and families, and a dedicated pharmacy exclusively for oncology patients' needs. Slated to open in late 2015, the new unit will be a welcoming place that fosters healing, hope and well-being for patients and caregivers.

Update: New Gynecologic Oncology Guidelines

Last fall, Cancer Care Ontario (CCO) launched new gynecologic oncology guidelines aimed at enhancing patient outcomes by improving access to multidisciplinary care and appropriate treatments.

In November 2013, all gyne-oncology physicians who performed gyne-oncology surgeries across the region were invited to participate in a CCO -hosted provincial video-cast to launch the guidelines.

All sites where gyne-oncology surger is performed must have:

3) Perform surgery for low grade cancers, e.g. stage 1 endometrial cancers. All other cases should be referred to the GOC.

4) Have access to minimally invasive surgery equipment.

To date:

• London Regional Cancer Program (LRCP) has been declared a Gyne-Oncology Centre (GOC) and meets all compliance criteria.

 Windsor Regional Hospital has declared that they will participate as an affiliate site to LRCP. (Across the province, it is recognized that not every Regional Cancer Program will house a GOC and that there may be affiliate sites from other LHINs.)

Click here to review the new Organizational Guidelines for Gynecologic **Oncology Services in Ontario.**