



Cancer Provincial Advisory Council Meeting Minutes

October 2, 2021 | 8:30–12:15pm | Zoom

ATTENDEES & INTRODUCTIONS	
Members	Brad Gillespie (Chair), Wendy Plandowski (Vice-Chair), Mark Armstrong, Wendy Beauchesne, Jill Bernhart, Sheena Clifford, Diane Huband, Marilyn Hundleby, Lorri Winship
AHS	Mauro Chies, Mark Joffe, Matthew Parliament, Brenda Hubley, Janine Sakatch, Monica Schwann, Huiming Yang, Barbara O’Neill, Laura Lee Clarke
Regrets	Leanne Anderson, Andrea DeYoung, Courtney Kerrigan, Wanda Redel, Wally Sinclair
Public	1
Welcome & Introductions	Brad opened the meeting with Acknowledgement of Traditional Lands. Brad welcomed all in attendance.
Approval of previous minutes	June 5, 2021 minutes were reviewed and approved by consensus.
STANDING ITEMS	
Action items from previous meeting	<p>Action items from the June 5, 2021 meeting:</p> <ul style="list-style-type: none"> • Cancer Screening in Alberta poster to be distributed to members for sharing with community connections. Additional resources can also be found on the Screening for Life website, under Patient Resources: Patient Education Resources - Screening For Life Screening For Life - COMPLETE • A doodle poll will be sent out for a Virtual Café to be held in early July. These are informal sessions that provide an opportunity for members to connect between Council meetings - COMPLETE • Members to review the Commitments and Priorities Plan to ensure alignment with the Cancer PAC Bylaws and Terms of Reference - COMPLETE • Key messages and a one page summary on Delayed Cancer Diagnosis Public Awareness Campaign to be distributed to members - COMPLETE



	<ul style="list-style-type: none"> Final version of the updated Cancer PAC Terms of Reference and Bylaws will be emailed to members for approval the first week of July - COMPLETE
Alberta Health Services Updates	<p>Mark Joffe, Vice President & Medical Director, Cancer Care Alberta, Clinical Support Services & Provincial Clinical Excellence and Mauro Chies, Vice President, Cancer Care Alberta & Clinical Support Services, shared the following:</p> <ul style="list-style-type: none"> As of yesterday, AHS had 374 ICU beds open in Alberta, including 201 additional spaces (a 116% increase over the baseline of 173). There were 316 patients in ICU, 263 of whom were COVID-19 positive. More than 90 per cent of all COVID-19-positive patients in the ICUs are either unvaccinated or partially vaccinated (with only the first of the two-dose series administered). Provincially, ICU capacity (including additional surge beds) is currently at 84%. AHS in partnership with the College of Physicians and Surgeons of Alberta, Alberta Medical Association, Faculty of Medicine and Dentistry at the University of Alberta and the Cumming School of Medicine at the University of Calgary have issued an open letter to media addressing vaccine concerns and misinformation. Planning is underway to support organizational preparedness and decision making post COVID-19. This will outline strategies, opportunities and actions to mitigate the indirect impacts of COVID for AHS. <p>Matthew Parliament, Senior Medical Director and Brenda Hubley, Chief Program Officer, Cancer Care Alberta shared the following in addition to the written update:</p> <ul style="list-style-type: none"> Cancer surgery pandemic protocol was developed to support clinical decision making for triaging cancer surgeries. Clinicians triage cases based on priority with the most serious and urgent cases performed first. This is standard in every healthcare system in the country. Follow-up care on any suspected or confirmed cancer is taking place, as are all urgent surgeries and treatments scheduled to treat cancer. Oncologists and cancer teams evaluate every patient’s unique situation and treatment plan to make certain that all patients receive the care they need when they need it. <p>Janine Sakatch, Director, Community Engagement shared the following in addition to the written update:</p> <ul style="list-style-type: none"> Recordings of presentations that were given on National Day for Truth and Reconciliations have been posted. There were some excellent presentations and events. Members can watch the recordings here.



	<ul style="list-style-type: none"> • A reminder that as a volunteer with AHS you are required to be fully immunized. Proof of immunization must be submitted no later than October 31st. <p>No additional updates or questions related to the written updates provided by Cancer Screening and Cancer Strategic Clinical Network.</p>
<p>Council Round Table</p>	<p>The following was shared by Council members:</p> <ul style="list-style-type: none"> • Melissa Smith and Ernie Grach have resigned from the Cancer PAC. On behalf of the Cancer PAC, Brad expressed appreciation for their participation and contributions. • Members are encouraged to reach out within their communities/networks for potential individuals who may be interested in joining the Council. A formal recruitment process will take place in the new year. • Wanda Redel and Lorri Winship will be renewing their membership for another term. Board approval is expected in the Fall. • Members continue to hear concerns about delayed cancer diagnosis' and treatment. It is important to spread the message that if people have signs and symptoms to seek timely medical attention. Resources are available at Listen to Your Body: Watch for Signs & Symptoms of Cancer. • The capital campaign for the Calgary Cancer Centre – in partnership with Alberta Cancer Foundation, University of Calgary, and Alberta Health Services will launch on Tuesday October 5th. This \$250M fundraising campaign will support improved cancer research, treatment and care in the new Calgary Cancer Centre. Additional information can be found at OWN.Cancer. • Wellspring Calgary offers programs and services that meet the emotional, social and practical needs of people living with cancer – those diagnosed, caregivers and kids. Services and programs are provided from Red Deer to Southern Alberta 5-6 days a week, including evenings online and via telephone. Compared to last year's monthly average, membership has increased slightly. • Wellspring Edmonton has noticed an increase in the need for peer support and will be embarking on further training for volunteers. Work continues to ensure that people in Edmonton and Northern Alberta are aware and have access to the programs and services offered.



	<ul style="list-style-type: none"> • Vaccine hesitancy is evident. Members are hearing that people within their communities are unsure of the vaccine. The debate is growing between non-vaccinated and vaccinated people. • Kudos to AHS on implementing a mandatory immunization policy for staff and volunteers.
Cancer PAC Commitments/Priorities 2021-2023	<ul style="list-style-type: none"> • A small working group met to further establish and refine the details in the 2021-2023 Commitments and Priorities document. • Commitments were reviewed by the CE Committee of the Board on September 29th. The document can be considered approved and supported.
Action Item(s) from Standing Items	<ul style="list-style-type: none"> • Distribute to members the open letter that was submitted to media addressing vaccine concerns and misinformation – COMPLETE • Arrange a date for the next Virtual Café session – COMPLETE
NEW BUSINESS	
Presentation(s)	<p>Ambulatory Oncology Patient Satisfaction Survey (AOPSS)</p> <p><i>Dr. Linda Watson, Scientific Director Applied Research & Patient Experience, Cancer Care Alberta</i></p> <p>This presentation shared the results of the recent AOPSS survey results. Highlights include:</p> <ul style="list-style-type: none"> • Survey is conducted every two years to help Cancer Care Alberta (CCA) better understand how cancer patients perceive the quality of cancer care delivered in Alberta. This survey provides a national benchmark for comparison of cancer patient experience in Canada. This year’s benchmark includes surveys completed here, BC Cancer and Cancer Care Ontario. • In mid-February, a random selection of 4000 patients currently receiving treatment or who had been treated in the last 6 months at a CCA cancer centre were invited to share their experiences by completing this nationally standardized and validated questionnaire. 55.6% of the patients surveyed responded. • Patients reported higher levels of satisfaction in all 6 dimensions of care when compared to the national benchmark. Emotional Support and Physical Comfort were statistically significant higher than the national average. Since the last survey (2019), there have been satisfaction improvements in every dimension provincially. These are remarkable results given this survey was conducted during the COVID-19 pandemic.



- Several unique questions were added to this national survey. As the COVID-19 pandemic required an urgent conversion of many cancer appointments to virtual, a question was added to assess patients' perception of the overall quality of care they received virtually. 94.4% of respondents that had a virtual encounter reported a positive rating (combined results for excellent -40.8%, very good - 34.7% and good - 18.9%).
- The results are in the process of being delivered to each cancer care centre and tumour group, where they will be used to identify priority areas for quality improvement.
- Based on the survey results, members were asked to review the data and provide recommendations/advice on which dimension(s) the cancer centres should focus on for improvement.

Virtual Care in Cancer

Dr. Dean Ruether, Associate Senior Medical Director, Cancer Care Alberta

Dr. Linda Watson, Scientific Director Applied Research & Patient Experience, Cancer Care Alberta

This presentation shared what has taken place to date, key learnings, current state, and future plans for virtual care in cancer.

Key highlights included:

- AHS has recently released a Virtual Health 2021-24 Strategy Plan to support clinically appropriate, effective virtual care across the care continuum. Cancer Care Alberta (CCA) is aligning its virtual care delivery with the new AHS strategy.
- A comprehensive evaluation has been conducted with engagement from over 800 staff/clinicians and patients/advisors.
- The use of virtual care in CCA has allowed a more equitable distribution of resources and access to cancer expertise across the province.
- CCA is focusing on four main areas for virtual care. Each area we will focus on coordination, harmonization, modernization and transformation. Through that, the goal is to achieve improved outcomes, improved patient experience, improved staff experience, and cost effectiveness.
- A patient advisor consultant group has been established to offer advice, innovate, and co-design solutions for CCA.
- Virtual care has a real potential to increase access to cancer care in underserved populations. A new partnership with Maskwacis Health Services is being explored to enable more virtual care in this community.
- Members were asked to think about their experiences with virtual care, what worked well and what could have been better and provide advice back to the project team.



2020-2021 Cancer PAC Annual Report	<ul style="list-style-type: none"> • Minor revisions have been made to the Annual Report since the approval (in principle) of content at the June meeting. • This version was approved at the CE Committee of the Board last week. AHS Board approval is expected in the Fall.
Action Item(s) from New Business	<ul style="list-style-type: none"> • Members to provide recommendations/advice related to the domains that the cancer sites should focus on as it relates to the patient satisfaction survey (AOPSS presentation). • Members to provide feedback based on their experience with Virtual Care in the cancer system, what worked well and what could have been better? Any advice you would like to pass on to the project leads (Cancer Virtual Care presentation).
Date of Next Meeting	Date: Saturday, January 8, 2022 Time: 8:30am - 12:30pm Location: Zoom

Our meetings are open to the public. Dates and locations are [available here](#).
 Visit [Together 4 Health](#) (T4H) to engage with AHS online.