## Cancer Strategic Clinical Network

# Quarterly Update: July to September 2020

The Cancer Strategic Clinical Network (CSCN) is committed to providing our Core Committee and stakeholders with updates regarding our projects and activities. Copies of these updates and other reports can be found on our webpage: <a href="http://www.ahs.ca/cancerscn">www.ahs.ca/cancerscn</a>

### **Cancer Trends in Alberta**

One in two Albertans will be diagnosed with cancer in their lifetime. The rising incidence of cancer and the growing numbers of cancer survivors, coupled with an ageing population who want to live well closer to home, are changing the way we think about cancer and the care people receive.

• The CSCN is collaborating with experts to compile Alberta's cancer trends and an economic analysis of its impacts. Understanding Alberta's cancer story- the burden of cancer in Alberta and its impacts on our health system, is the first step towards co-designing solutions that transform cancer care in Alberta.

#### **Cancer Diagnosis Program Planning and Pathways**

The CSCN seeks to build and implement a cancer diagnosis program with single-point access for all cancer diagnosis pathways, timely access to appropriate diagnostic work-up and referrals, and links for patients to appropriate supportive care and educational resources.

- The CSCN is completing an inventory of cancer diagnosis pathways across all tumour types in Alberta. This inventory will highlight cancer diagnosis pathways that should be prioritized for implementation.
- Lymphoma Diagnosis Pathway
  - Implementation planning is underway with Lab, DI, and lymphoma teams at Tom Baker Cancer Centre and Cross Cancer Institute for Oct-Nov launch of the pathway
  - Outreach is underway with Primary Care and Emergency Medicine for Oct-Nov launch of the pathway
- Colorectal Cancer Diagnosis Pathway
  - Criteria for high risk rectal bleeding and iron deficiency anemia pathways for suspected colorectal cancer have been defined
  - Design of referral and triage processes is underway with GI-CAT in Calgary and SHARPGI in Edmonton



#### Appropriate Cancer Treatments near End of Life Care

Prognosis of patients with advanced cancer is complex. It can be hard for patients, families, and oncologists to decide when to stop treatment and instead focus on quality of life, symptom management, and palliative care. Patients with advanced cancer who continue to receive treatment, even when it has almost no chance of helping them, may experience a decreased quality of life, unnecessary emergency department visits, inappropriate hospitalization and/or intensive care unit (ICU) admissions, and lack of referral or late referral to palliative care. This course may not be appropriate for all patients and clinicians need better support tools for treatment decisions.

- In July and August, the CSCN met with provincial tumour team leads to document how systemic therapies are used near the end of life and identify opportunities to improve appropriateness.
- The CSCN is working worked with Cancer Surveillance and Reporting (Cancer Research & Analytics, Cancer Care Alberta) to explore health system use during the last 14, 30, 60, and 90 days of life. Data for each cancer type will be reviewed with providers to identify opportunities for improving the appropriateness of cancer treatment near end of life.

#### **Appropriate Use of Imaging**

Oncologists use diagnostic imaging to measure how well cancer treatments are working and to detect cancer recurrence. Frequent imaging has become a routine part of cancer care. With guidelines for imaging use in cancer, there is an opportunity to evaluate whether unnecessary imaging tests can be avoided and contribute to increased system capacity.

- In July and August, the CSCN met with provincial tumour team leads to document how diagnostic imaging is used and identify opportunities to improve appropriateness.
- The CSCN is working with Cancer Surveillance and Reporting (Cancer Research & Analytics, Cancer Care Alberta) to quantify diagnostic imaging use in Alberta across cancer types. This information will be used to collaborate with providers to improve stewardship in the use of diagnostic imaging during and after cancer treatment, and inform the design and implementation of decision-support tools for oncologists and patients.

#### **CSCN Research**

The CSCN research team supports priority initiatives of the CSCN as required. It also continues to engage with multiple stakeholders to identify and nurture research-practice partnerships, which will create and apply knowledge that improves cancer outcomes.

- The CSCN reviewed current evidence related to COVID-19 and cancer, and developed a revised version of the recommendations developed in April 2020 on suitability of patients with cancer who are infected with COVID-19 for starting or resuming cancer treatment (<u>https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-sagstarting-or-resuming-cancer-treatment-rapid-review.pdf</u>). This work was completed with the AHS 2019-nCoV Scientific Advisory Group, which makes recommendations to the Emergency Coordination Centre to help with decision-making during the pandemic.
- Quality indicators, which will measure the progress and success of activities related to the CSCN's strategic plan or TRM, are being finalized.

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- Extensive literature reviews, expert consultation, and facilitated discussions with relevant stakeholders including our Core Committee have been conducted to develop a list of important and feasible indicators.
- Final selection of quality indicators is expected in September.
- The CSCN is supporting cancer-related applications to the Partnership for Research and Innovation in the Health System PRIHS 6 (2020/2021) funding competition submitted by research teams at the University of Alberta and the University of Calgary.
- The CSCN published the following article: Pujadas Botey A, Robson P, Hardwicke-Brown A, Rodehutskors D, O'Neill B, Stewart D. (in press). From symptom to cancer diagnosis: Perspectives of patients and family members in Alberta, Canada. *PLOS ONE*.
- Dr. Paula Robson co-led the launch and adjudication of a research funding competition enabled via a generous estate gift to the Alberta Cancer Foundation. The donor wished to support research in sarcoma and pancreatic cancer at the Tom Baker Cancer Centre, and following a call for proposals and a rigorous peer-review process, three projects were selected for funding in July 2020.

#### **Provincial Breast Health Initiative**

The Provincial Breast Health Initiative improved care for breast cancer patients, with a focus on processes for genetic testing, implementing multidisciplinary team reviews of complex breast cancer cases (e.g. tumour board rounds), and a provincial measurement framework for the end-to-end breast health pathway.

- This initiative is concluded. A final report will be available on our webpage.
- The Breast Health medical leads (Dr. Dave Olson, Dr. May Lynn Quan and Dr. Renee Perrier) presented on the project learnings and plans for sustainability to the Clinical Operations Executive Committee on September 9, 2020.
- The CSCN is working on establishing an Audit and Feedback Reporting Committee to ensure process and performance improvements are sustained.

\Last updated: Sep 2020