

Cancer Provincial Advisory Council
Saturday, December 9, 2017
8:30 a.m. to 12:00 p.m.
Sandman Signature Edmonton South
10111 Ellerslie Rd Edmonton AB

## **MINUTES**

Council Members: Dr. Margaret Churcher (Vice-Chair); Mr. Varinder Bhullar; Mr. Bryson Brown; Mr. Tim Buckland; Ms. Andrea DeYoung; Ms.

Chelsea Draeger; Mr. Ernie Grach; Mr. Kenneth Landry; Ms. Lorelee Marin; Ms. Michele Zielinski; Ms. Leanne Anderson

Permanent Resource Persons: Ms. Nancy Guebert; Dr. Matthew Parliament

AHS Council Coordinators: Ms. Laura Lee Clarke; Ms. Selene Snell

**Regrets:** Dr. Tony Fields (Chair); Dr. Heather Bryant; Dr. Angeline Letendre; Mr. Steven Herbert; Ms. Patti Morris; Mr. George

Andrews

Guests: Dr. Linda Watson, Lead Person Centred Care Integration, CancerControl Alberta

	Agenda Item	Discussion	Action
1.	Approval of Agenda	Mr. Tim Buckland moved to approve the agenda. Seconded by Ms. Michele Zielinski. All in favor.	MOTION CARRIED.
2.	Approval of Minutes	Mr. Bryson Brown moved to approve the Saturday, September 23, 2017 minutes as circulated. Seconded by Ms. Chelsea Draeger. All in favor.	MOTION CARRIED.
3.	Presentations		
3.1	Listening to Our Patients: Using Patient Reported Outcomes to Improve Outcomes and Experience Dr. Linda Watson	CancerControl Alberta has conducted the Ambulatory Oncology Patient Satisfaction Survey –AOPSS, which is nationally validated survey, every two years, with the most recent survey cycle in February of 2017. Consecutive Patient Reported Experience Measure (PREMs) such as this, are valuable as they allow for comparative performance measurement on elements of care particularly important to patient's overall satisfaction with the quality of their care.	
		The 2017 survey was sent to 4,000 patients who were currently on treatment or had been receiving treatment in the last 6 months. Over 2,200 surveys were returned which equates to a 56.7% return rate. Dr. Watson presented the survey distributed response rate across the province (by regional, tertiary, and community centres) as well as specifics to age group and gender.  A graph was presented that illustrated the six themes that have been identified as the most important areas to improve patient experience and the satisfaction trend. The six themes are:  © Emotional Support © Respect for Patient Preferences	

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Agenda Item	o Information Education and Communication o Access to Care o Physical Comfort o Coordination and Integration of Care Dr. Watson provided the response rates to the above themes by cancer site.  Why is patient experience important? Experience matters to patients and their families, patient care experience is linked to clinical quality, and patient experience and quality go hand in hand.  A member described an experience he had while undergoing chemotherapy treatment. An important question that needs to be asked on the survey is have you been properly informed about the treatment you will be receiving.  Patient Reported Outcome Measures (PROs) are instruments that patients complete to provide real time information on aspects of their health status that are relevant to their quality of life. Elements rated by patients through PROMs include symptoms, functional capacity, physical, emotional and social health. CCA began work on "Screening for Distress" in 2006. This work, funded by the Alberta Cancer Foundation (ACF) and the Canadian Partnership Against Cancer (CPAC) evolved over the years to constitute the core of CCAs current PRO strategy.  The Screening for Distress tool which is now referred to as the Putting Patient First (PPF) form is used at the point of patient care and helps the clinicians identify what symptoms the patient is currently struggling with. Staff education has taken place and the form is being used across all cancer sites. With this hybrid approach, over 25,000 PRO clinical interactions from over 8,000 individual patients have been entered into the electronic medical records to date. This electronic capture of data has opened new possibilities for electronic reporting, utility and analytics at the point of care, program or site level as well as at the provincial level. Dr. Watson presented samples of the three PRO dashboard tools that are available:  Individual patient dashboard System cluster reports (program/clinic level) Aggregate dashboard (site/provincial)	Action



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		<ul> <li>CancerControl Alberta wide entry of PRO information into the electronic medical records system</li> <li>Develop digital PRO tools and establish meaningful use</li> <li>Use PROs and PREMs for Health system decision making</li> <li>Design for Portal and patient direct entry</li> </ul>	
		PROs helps focus on what is unique and to respond in meaningful ways and when many patients receive this type of person centred care there is the opportunity to create a multitude of positive experiences.  Discussion took place related to end of life care and the importance of bridging cancer services with primary care. Ms. Lorelee Marin indicated that there is an excellent resource related to End of Life conversations.	Link to the resource related to End of Life conversations: <a href="https://hospicetoronto.ca/PDF/Acareg">https://hospicetoronto.ca/PDF/Acareg</a> <a href="https://www.check.pdf">ivershandbook</a> CHPCA.pdf
4.	Quarterly Report Updates		
4.1	Governance and Council of Chairs Dr. Tony Fields	Deferred.	
4.2	CancerControl Update Dr. Matthew Parliament Nancy Guebert	<ul> <li>Ms. Nancy Guebert provided the following update from CancerControl Alberta:         <ul> <li>There has been a high demand for oncologists in the country which has resulted in some challenges in recruitment of oncologists within CancerControl Alberta particularly in the regional centres.</li> <li>CancerControl continues to look at growing the hematology program in the south sector. A business case is currently being developed for hematology services in the north.</li> <li>A supportive care review has been underway over the last few days. External reviewers had extensive interviews with supportive care health providers and external partners. A high level verbal debrief was provided today to the CancerControl Alberta leadership team. The final report is expected to be released in January at which time a webinar will be held with staff. Discussion of the recommendations will also come to the Cancer PAC meeting.</li> <li>Connect Care provides healthcare providers one central access point for patient information, common clinical standards and best healthcare practices. It is the bridge between information, healthcare teams and our patients. CancerControl Alberta has recently put forward their</li> </ul> </li> </ul>	



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	recommendation on implementation of Connect Care (north and south approach).  • CancerControl Alberta is looking at a brand refresh to align with the programs priorities as well as AHS' foundational strategies. Further discussion and consultation will occur with the Cancer PAC members.  • Out of Country/Out of Province Referrals Standard Operating Process (SOP) was tabled at an AHS executive committee and determined that it should be reviewed and applicable to all appropriate AHS programs. Other cancer agencies are also looking at their guidelines around OOC/OOP referrals.  • CancerControl Alberta will be looking to develop a business case for Adolescent and Young Adults with Cancer. A pilot program is currently in place at the Cross Cancer Institute which is funded by the Alberta Cancer Foundation. Engagement of a variety of programs, teams, and external partners throughout the province will need to take place to determine what this program should look like.  Discussion occurred around experiences individuals have had with dental concerns after treatment. The dental policy/consultation process is being revised and stakeholder consultation will be taking place. An update will take place at a future Cancer PAC meeting.	
4.3 Cancer Strategic Clinical Network Core Committee Lorelee Marin	<ul> <li>Ms. Lorelee Marin provided the following update on the Cancer Strategic Clinical Network Core Committee:         <ul> <li>Grant meeting occurred last week to review the 3<sup>rd</sup> Annual Seed Grant applications. This year's focus is on Clinical Care Pathways, Choosing Wisely and Precision Medicine, within the activities of generating new knowledge or applying knowledge. Successful applicants are expected to be announced shortly.</li> <li>2017-2020 Cancer SCN Transformational Road Map has recently been refreshed. The Transformational Roadmap (TRM) is used to guide the work and direction of the network, with ongoing review and revision to respond to a changing environment and emerging issues. A consultation process was used with network members and provincial stakeholders to establish the network's priority areas over the next three years. Patient engagement is</li> </ul> </li> </ul>	Link to the 2017-2020 TRM is: https://www.albertahealthservices.ca /assets/about/scn/ahs-scn-cancer- transformational-roadmap.pdf

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		embedded across all activities and continues to be integral to our success moving forward. The three strategic goals are:  O Develop and implement clinical care pathways to improve health outcomes  Support initiatives that facilitate appropriate tests and treatments and reduce unnecessary tests and treatments to strengthen appropriateness of care  Engage in research and innovation to advance emerging priorities in cancer care delivery  Re-structure of the core committee has taken place.	
4.4	Officers Update LauraLee Clarke	LauraLee Clarke thanked the members that were able to attend the <b>Fall Forum</b> on October 27 <sup>th</sup> and 28 <sup>th</sup> and hoped they enjoyed the weekend and came away energized and full of information. A reminder to also complete and submit the evaluation form. <b>Annual reports</b> will be posted on the website and available in printed copy at the end of the month.  There is an opportunity to strengthen the support for and followers of <b>online communication tools</b> . Looking for a social media champion from the council to be part of the strategy to increase the use of these tools. <b>New brand standards</b> have recently been developed for the advisory councils to support the AHS vision and values. A brand session was held last week to unveil the new design with some positive feedback received.	Mr. Varinder Bhullar and Ms. Andrea DeYoung are interested in participating in the social media initiative.
5.	Outstanding Business	new design with some positive recassack received.	
5.1			
6.	New Business		
6.1			
7.	Standing Items		
7.1	2017-18 Workplan	Discussion was deferred to the afternoon meeting due to insufficient time.	



	Agenda Item	Discussion	Action
	All		
7.2	Council Roundtable All	Deferred.	
7.3	Future Meeting Speakers/Presentations All	<ul> <li>Medical Marijuana</li> <li>Cancer Strategic Clinical Network Update</li> <li>Vision of the Alberta Cancer Foundation – Perspective of the new CEO</li> </ul>	
7.4	Future Tours All	Wellspring Calgary	
8.	Future Business		
	Next Council Meeting	Saturday, March 17, 2018 Edmonton, AB	
9.	Meeting Adjournment	Dr. Margaret Churcher thanked Ms. Michele Zielinski for her contributions as a Cancer PAC member over the last 6 months. Members also thanked Ms. Zielinski and wished her all the best in her future endeavors.	