# Cancer Strategic Clinical Network Quarterly Update April - June 2021

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="https://www.ahs.ca/cancerscn">www.ahs.ca/cancerscn</a>

## Alberta Cancer Diagnosis (ACD) Initiative and Cancer Diagnosis 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 supports for primary care and patients. Two diagnosis pathways are being implemented with support from the Health Innovation Implementation and Spread (HIIS) fund.

- Governance for the ACD initiative is being established with patients and families and primary care.
   The Steering Committee is launching this summer.
- Lymphoma Diagnosis Pathway (HIIS)
  - Pathway launched in South and Central Zones with distribution of practice support documents and quick reference guides to regional teams
  - Measurement dashboard developed to track post-implementation indicators, metrics and trends in Calgary and Edmonton
- Colorectal Cancer Diagnosis Pathway (HIIS)
  - o Pathway launched in Calgary and Edmonton
  - Selection of criteria, metrics and indicators for ongoing post-implementation measurement completed

#### **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 has been awarded a CIHR Health System Impact Fellowship (HSIF) co-developed with Dr. Fay Strohschein, a postdoctoral fellow at the University of Calgary, under the academic supervision of Dr. Sandra Davidson, Professor and Dean, Faculty of Nursing. Fay will collaborate with the Cancer SCN during two years (starting September 2021), and help address the needs and concerns of older Albertans with cancer and their families.
- A qualitative study examining the perspectives of a group of family physicians and specialists in
  Alberta regarding potentially avoidable delays in diagnosing cancer, and approaches that may help
  expedite the process has been accepted for publication. Findings suggest the need for enhanced
  support for family physicians, and better integration of primary and specialty care before cancer
  diagnosis. Streamlining cancer diagnosis, with the goals of enhancing patient outcomes, reducing
  physician frustration, and optimizing efficiency is required.





- The CSCN is collaborating with the University of Alberta and Dr. Lee Green to understand family physicians' mental models of using clinical pathways for cancer diagnosis. The study documented how family physicians use pathways to gather information, confirm what they already know, support what they are already doing, and as a quick guide for what steps to take when unsure. Successful implementation of pathways in primary care should ensure pathways are easy to find, easy to use, and easy to be incorporated into family physicians' workflows.
- In partnership with Screening Programs, the CSCN has developed a position paper on cancer overdiagnosis. Key messages include: 1) population-based cancer screening programs contribute to improved survival, but are associated with a small risk of overdiagnosis; 2) incidental findings can lead to overdiagnosis of some cancers; 3) benefits of early diagnosis and treatment for most cancers at the population level outweigh the risks of overdiagnosis at the individual level; and, 4) proposed strategies to mitigate risks of overdiagnosis and overtreatment for some cancers must avoid increasing overall cancer mortality rates.

# Future of Cancer Impact (FoCI) 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 FoCl Working Group continues to synthesize what is currently known about cancer in Alberta as well as complete projections of future incidence, mortality, and survival. A draft report will be ready Summer 2021.
- Once the report is complete, the CSCN will undertake extensive engagement and consultation with cancer leaders and key strategic partners across Alberta, with the goal of achieving consensus on future cancer-related priorities for the health system.

### **CSCN Innovation Pipeline**

The CSCN Innovation Pipeline is a process to help identify and invest in innovative ideas aligned with our strategic directions. The Pipeline framework describes five steps for innovations to progress in the health system: idea generation; proof of concept testing; implementation test in Alberta; implementation work to scale; and implementation for sustainability.

- The CSCN Innovation Pipeline competition is funding early stage innovations in cancer care.
- Five submissions for *idea generation* projects were received and one has been supported. Dr. Sangjune Laurence Lee, University of Calgary, will look at "Definitive chemoradiotherapy versus neoadjuvant chemoradiotherapy followed by surgery for locally advanced esophageal adenocarcinoma" (6 months, \$15,000).
- Twelve letters of intent for *proof-of-concept* projects were received and one has been supported. Dr. Sonya Lowe, University of Alberta, will test "Virtual interdisciplinary rehabilitation and therapeutic exercise intervention in advanced cancer patients receiving palliative care" (12 months, \$73,588).

\Last updated: July 2021