MESSAGE FROM THE REGIONAL VICE PRESIDENT

We are pleased to present to you the 2016 Annual Report for the Toronto Central South Regional Cancer Program. You will find in this report, highlights from each of the programs to demonstrate the contributions of the regional program, its scope, our focus on quality improvement and its impact on the patients that we serve. Throughout you will see integrated leadership and programs in partnership with our Toronto Central North colleagues where collaboration benefits the populations and programs we serve.

We also use this report to highlight and acknowledge each of the Regional Cancer Program leaders, hospitals, and partner organizations who have contributed to our program. The Regional Cancer Program relies on their continued collaboration and drive for excellence. We would like to thank them for their partnership and their willingness to learn and share knowledge with one another, and their commitment to cancer control.

Each year the Toronto Central Regional Cancer Program sets priorities. In 2016 we selected addressing the challenge of meeting the demand for complex malignant hematology, to improve screening rates in support of a sustainable cancer system, and to focus on cancer control in the Indigenous population. All three of these areas require attention. We hope you read more about these priorities in the report.

Thanks to everyone who has contributed to the work of the Regional Cancer Program in 2016. It has been an incredibly busy and productive year which we hope is well represented in this report. Exceptional teams and people dedicated to quality improvement have made this possible.
PROGRAM OVERVIEW AND HIGHLIGHTS
PROGRAM OVERVIEW

The Toronto Central Regional Cancer Program (TRCP) corresponds to the boundaries of the Toronto Central Local Health Integrated Network (LHIN) however, due to the size of the program and presence of two Cancer Centres, it is divided into North and South. The Regional Cancer Program is led by Dr. Mary Gospodarowicz, Regional Vice President, Toronto Central South and Dr. Calvin Law, Regional Vice President, Toronto Central North. While the two programs work in partnership, they have distinct performance targets and reporting relationships with Cancer Care Ontario (CCO).

TRCP South is comprised of a Regional Cancer Centre, the Princess Margaret Cancer Centre at the University Health Network and four partner hospitals: St. Michael’s Hospital, Sinai Health System, St. Joseph’s Health Centre, and Women’s College Hospital. We also collaborate and support partnerships with the Toronto Central LHIN, the Canadian Cancer Society, and the Toronto Central Community Care Access Centre.

This Annual Report describes the organizational structures, activities, and achievements of TRCP South in 2016. However, many programs and leadership roles are collaborative and integrated with TRCP North.
## PROGRAM AND CLINICAL LEADERSHIP

### Toronto Central Regional Cancer Program Executive Team

- **Executive Team**
  - **Regional Vice President, Cancer Care Ontario**
    - Dr. Mary Gospodarowicz, Princess Margaret Cancer Centre/UHN
  - **Director, Regional Cancer Program and Medical Affairs**
    - Ms. Martha Wyatt, Princess Margaret Cancer Centre/UHN
  - **Manager, Regional Cancer Program and Medical Affairs**
    - Ms. Upasana Saha, Princess Margaret Cancer Centre/UHN
  - **Administrative Assistant, Regional Cancer Program**
    - Ms. Anne Rodriguez-Hall, Princess Margaret Cancer Centre/UHN
  - **Manager, Regional Cancer Screening Program (TRCP North and South)**
    - Ms. Debbie Fisher-Holmes, Odette Cancer Centre/SHSC
  - **Breast Imaging Lead (TRCP North and South)**
    - Dr. Rene Shumak, Odette Cancer Centre/SHSC
  - **Colorectal Screening & GI Endoscopy Lead (TRCP North and South)**
    - Dr. Ian Bookman, St. Joseph's Health Centre
  - **Cervical Screening & Colposcopy Lead (TRCP North and South)**
    - Dr. Michael Shier, Odette Cancer Centre/SHSC
  - **Primary Care Lead**
    - Dr. Ed Kucharski, South East Toronto Family Health Team
  - **Smoking Cessation Lead**
    - Dr. Meredith Giuliani, Princess Margaret Cancer Centre/UHN
  - **Pathology Lead**
    - Dr. Runjan Chetty, Princess Margaret Cancer Centre/UHN
  - **Cancer Imaging Program Lead**
    - Dr. Martin O’Malley, Princess Margaret Cancer Centre/UHN
  - **Diagnostic Assessment Program Leads**
    - Ms. Terri Stuart-McEwan, Princess Margaret Cancer Centre/UHN
    - Dr. Fayez Quereshi, Toronto General Hospital/UHN
  - **Surgical Oncology Program**
    - Dr. Gelareh Zadeh, Princess Margaret Cancer Centre/UHN (September 2016 - Current)
    - Dr. Jonathan Irish, Princess Margaret Cancer Centre/UHN (Term End September 2016)
  - **Systemic Therapy Quality Lead**
    - Dr. Eitan Amir, Princess Margaret Cancer Centre/UHN
  - **Radiation Therapy Lead**
    - Dr. Fei-Fei Liu, Princess Margaret Cancer Centre/UHN
  - **Psychosocial Oncology Lead (TRCP North and South)**
    - Ms. Susan Blacker, St. Michael's Hospital
  - **Patient Education Lead**
    - Ms. Janet Papadakos, Princess Margaret Cancer Centre/UHN
  - **Nursing Lead**
    - Ms. Pamela Savage, Princess Margaret Cancer Centre/UHN
  - **Aboriginal Cancer Lead (TRCP North and South)**
    - Dr. Bernice Downey
  - **Aboriginal Patient Navigator (TRCP North and South)**
    - Ms. Joanna Vautour, St. Michael's Hospital
  - **Palliative Care Lead**
    - Dr. Kirsten Wentlandt, Princess Margaret Cancer Centre/UHN

### Toronto Central Regional Cancer Program Steering Committee

- **Cancer Screening Program**
  - Breast Screening Imaging
  - Colorectal Screening & Gastro-Intestinal Endoscopy
  - Cervical Screening & Colposcopy
  - Primary Care
  - Smoking Cessation

- **DIAGNOSTIC**
  - Pathology
  - Staging
  - Imaging
  - Diagnostic Assessment Programs (DAP)

- **TREATMENT**
  - Surgical Oncology
  - Systemic Therapy
  - Radiation Therapy

- **SUPPORTIVE CARE & PALLIATIVE CARE**
  - Person-Centred Care
  - Psychosocial Oncology
  - Patient Education
  - Ontario Cancer Symptom Management Collaborative
  - Nursing
  - Aboriginal Program
  - Palliative Care
The Toronto Central Regional Cancer Program Steering Committee is co-chaired by the two Regional Vice Presidents, Dr. Mary Gospodarowicz (Regional Vice President, TRCP South) and Dr. Calvin Law (Regional Vice President, TRCP North). The Steering Committee assists and guides the development and implementation of strategies to improve the delivery and quality of cancer services in the region. Key activities in 2016 included: regional performance, palliative care transformation, Aboriginal Cancer Program, complex malignant hematology, and screening.

CO-CHAIRS, REGIONAL VICE PRESIDENTS

Dr. Mary Gospodarowicz
Regional Vice President, CCO & Medical Director, Princess Margaret Cancer Centre

Dr. Calvin Law (TRCP North)
Regional Vice President, CCO & Chief, Odette Cancer Centre

REGIONAL DIRECTORS

Ms. Martha Wyatt
Director, Regional Cancer Program & Medical Affairs
Princess Margaret Cancer Centre

Ms. Janice Stewart (TRCP North)
Director, Operations & Regional Planning, Odette Cancer Centre

HOSPITAL ADMINISTRATIVE LEADS

Ms. Victoria Noguera
Clinical Director, Women’s College Hospital

Ms. Susan Blacker
Director, Cancer Services Planning and Performance
St. Michael’s Hospital

Ms. Farah Khan Choudry
Senior Director Nursing, Surgery & Oncology
Nursing New Knowledge & Innovation, Sinai Health Systems

Ms. Marnie Escaf
Senior Vice President, UHN, & Executive Lead
Princess Margaret Cancer Centre

Ms. Shelley DeHay-Turner
Administrative Director, Perioperative Services, Women & Children, IPAC, St. Joseph’s Health Centre
(Term End July 2016)

Ms. Elena Holt
Administrative Program Director, Surgery/Perioperative Services
St. Joseph’s Health Centre
(August 2016 - Current)

Ms. Melissa Morey-Hollis
Administrative Director, Medicine, Seniors Care, Cancer Care
St. Joseph’s Health Centre

Ms. Penny Walcott (TRCP North)
Director, Surgery Health Service, Michael Garron Hospital

CANCER PROGRAM HOSPITAL CLINICAL LEADS

Dr. Jing Li (TRCP North)
Medical Oncologist, Michael Garron Hospital

Dr. Ori Rotstein
Surgeon-in-Chief, St. Michael’s Hospital

Dr. John Semple
Surgeon-in-Chief, Women’s College Hospital
(Term End July 2016)

Dr. David Urbach
Surgeon-in-Chief, Women’s College Hospital
(July 2016 - Current)

Dr. Dorothy Lo
Medical Oncologist, St. Joseph’s Health Centre

Dr. Jay Wunder
Surgeon-in-Chief, Sinai Health System

PARTNER ORGANIZATION MEMBERS

Ms. Kim Pearson
Director, Specialty Programs, Toronto Central CCAC

Ms. Laura Burnett, Canadian Cancer Society, Ontario Division
(June - December 2016)

Ms. Julie Datta, Canadian Cancer Society, Ontario Division
(Term End June 2016)

Mr. Nello Del Rizzo
Senior Consultant, Performance Management
Toronto Central LHIN

EX OFFICIO MEMBERS

Regional Clinical Leads
TORONTO CENTRAL SOUTH REGIONAL CANCER PROGRAM PRIORITIES

PRIORITy 1: COMPLEX MALIGNANT HEMATOLOGY

Optimize access to quality care for patients requiring Stem Cell Transplantation at Princess Margaret
- Scaled up recruitment and volume activity in the program
  - Princess Margaret increased volumes by 13% in 2015/16
  - Launched Haploidentical program to expand patient’s access to Stem Cell Transplant
- Reduced wait times for stem cell transplantation for Acute Myeloid Leukemia patients by 45% after holding a Rapid Improvement Event (LEAN methodology), re-directing incoming referrals, and facilitating out of country referrals
- Expansion planning underway for a new inpatient unit including associated capital and health human resources
- Developed a patient tracker tool to improve: patient and data management for wait-lists, wait times, dashboards, and process flow analysis including alerts and activity process management tools
- Collaborated with labs to develop new diagnostic algorithms and enhance turnaround time for test results

Determine the optimum size of program, service flow and funds to support patients with Complex Malignant Hematology diagnoses
- Continued to engage in CCO’s Complex Malignant Hematology Strategy and Committees, including revising funding methodologies and models of care
- Continued to advance and expand shared-care partnerships to support patient care closer to home with the formalization of two more shared-care partnerships
- Participated in provincial planning for complex malignant hematology with the Ministry of Health and Long-Term Care and Cancer Care Ontario
- Established regional planning committee with Odette Cancer Centre to support development of a program at Odette Cancer Centre

PRIORITY 2: SCREENING RATES

Harness new Integrated Cancer Screening Administrative structure and clinical leads to improve screening rates and quality in the Toronto Central LHIN
- Collaborated with hospital colposcopy leads and colposcopists to drive early adoption of new Ontario Colposcopy Guidance Document
- Organized and delivered five Cancer Journey continuing medical education events to primary care providers
- Connected directly with physicians who have the greatest opportunity to improve screening and follow-up on abnormal screening tests
- Held four regional Quality Management Program events to engage in discussions about quality initiatives for mammography and colonoscopy
- Expanded the Cancer Prevention and Screening Language Instruction for Newcomers to Canada Curriculum to four neighbourhoods with low screening rates
PRIORITY 3: REGIONAL ABORIGINAL CANCER PROGRAM

In 2016, the Toronto Central Regional Cancer Program website (www.trcp.ca) launched an Aboriginal Cancer Program page that provides an overview of the services offered by the team, and the resources available to the patients, community members and health care providers in the region. The team also welcomed a new Aboriginal Cancer Program Coordinator, Ms. Madeleine Stoney. Ms. Stoney has a nursing degree and experience working in indigenous community settings in Ontario. She works directly to support and coordinate the efforts of the Regional Aboriginal Cancer Lead, program and team.

Increase awareness and drive forward the priorities of the Regional Aboriginal Cancer Plan
- Aboriginal Patient Navigator consulted and supported hospitals to develop formalized Smudging Ceremony policies. Policies are currently in place at St. Michael’s Hospital and Odette Cancer Centre
- Regional Aboriginal Cancer Lead (RACL) participated as a member of the newly formed Toronto Central LHIN Palliative Care Advisory Network and collaborated with the Aboriginal Cancer Control Unit to lead policy initiatives such as traditional healing and systemic barriers to screening
- In November 2016, hosted inaugural Honoring our Families Spirit Moon Reflections and Teachings: Cancer Program for Indigenous People, a cancer care awareness community event for Indigenous agencies

Improve awareness and screening rates in the community through Talking Circles and Health Fairs
- Partnered with Health Promotion Coordinator, Cancer Screening and TRCP to host cancer prevention and screening information booths at local health promotion events, and facilitated cancer screening Talking Circles for local Indigenous organizations

Raise awareness of Patient Navigator role in both the hospitals and indigenous agencies/structures
- Provided awareness and education presentations regarding the Aboriginal Cancer Strategy III, Aboriginal Patient Navigator role, and the Truth & Reconciliation Commission of Canada’s Final Report
- Collaborated with the Global Institute of Psychosocial Palliative & End-of-Life Care’s Indigenous palliative care symposium Search for Solutions – A Gathering on Palliative & End-of-Life Care for First Nation, Inuit & Métis

Increase uptake of the cultural competency courses throughout the LHIN
- Promoted the Aboriginal Relationship and Cultural Competency Courses through the enhanced redesign of Toronto Central Regional Cancer Program website’s Aboriginal Cancer Program page www.trcp.ca
- Included information and postcards on the Aboriginal Relationship and Cultural Competency Courses at each presentation or informational session
STATISTICAL HIGHLIGHTS

BREAST SCREENING

59,013
Ontario Breast Screening Program mammograms performed for the target screening population

2,334
Women confirmed to be at high risk by genetics assessment (counseling and/or testing)

DIAGNOSTIC IMAGING

96,330
Total MRI case volumes

182,697
Total CT case volumes

PSYCHOLOGICAL ONCOLOGY

(PM ONLY)

936
Number of new patient visits to a Dietitian

85%
Percentage of patients to see a Dietitian within 14 days

SMOKING CESSATION (PM ONLY)

65%
Percentage of new ambulatory cancer cases that were screened for tobacco use (21% increase from last year)

32%
Percentage accepted a smoking cessation referral among smokers

PATHOLOGY

4,676
Volumes

75%
Turnaround time in 14 days
**SYSTEMIC CONSULT VOLUMES**
**FISCAL YEAR 2015/16**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Volume</th>
</tr>
</thead>
<tbody>
<tr>
<td>Princess Margaret Cancer Centre, UHN</td>
<td>5,981</td>
</tr>
<tr>
<td>Sinai Health System</td>
<td>632</td>
</tr>
<tr>
<td>St. Joseph’s Health Centre</td>
<td>546</td>
</tr>
<tr>
<td>St. Michael’s Hospital</td>
<td>908</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>8,067</strong></td>
</tr>
</tbody>
</table>

**CANCER SURGERY VOLUMES**
**FISCAL YEAR 2015/2016**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Quality Based Procedure Volumes (colorectal and prostate only)</th>
<th>Cancer Surgery Agreement Volumes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Princess Margaret Cancer Centre, UHN</td>
<td>418</td>
<td>3,882</td>
</tr>
<tr>
<td>Sinai Health System</td>
<td>198</td>
<td>1,818</td>
</tr>
<tr>
<td>St. Joseph’s Health Centre</td>
<td>109</td>
<td>746</td>
</tr>
<tr>
<td>St. Michael’s Hospital</td>
<td>138</td>
<td>1,196</td>
</tr>
<tr>
<td>Women’s College Hospital</td>
<td>—</td>
<td>520</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>863</strong></td>
<td><strong>8,162</strong></td>
</tr>
</tbody>
</table>

**RADIATION**

- **8,067** Systemic consults
- **9,025** Cancer surgeries
- **10,457** Courses
- **90%** Percentage of radical courses peer reviewed at Princess Margaret Cancer Centre
PROGRAM ACTIVITIES AND ACHIEVEMENTS
PREVENTION & SCREENING

CANCER SCREENING

In 2016, the Toronto Central Regional Cancer Screening Program monitored screening sites performance and quality, supported quality improvement among screening sites and primary care providers, and developed and implemented public and provider educational initiatives to improve participation in breast, colorectal and cervical cancer screening.

Our regional leads fill a critical role in capacity planning and improving the quality, safety and accessibility of cancer screening services in Toronto. Work continued across the region to further build capacity for public and provider education and awareness through community engagement, stakeholder partnerships, and workplace strategies.

HIGHLIGHTS

• Collaborated with community agencies in various priority neighbourhoods to deliver colorectal, breast and cervical prevention and screening training to community peers
• Promoted the Cancer Prevention and Screening Awareness in the Workplace toolkit through workplace associations. Attended workplace health fairs at several hospitality, healthcare, education, and manufacturing facilities. Four other Regional Cancer Screening Programs in Ontario adopted and adapted our workplace toolkit
• Supported Cancer Care Ontario’s My CancerIQ announcement of two new cancer risk assessments – kidney cancer and melanoma
• Supported colorectal, breast and cervical awareness campaigns

Dr. Rene Shumak
Breast Imaging Lead, TRCP North and South

Dr. Ian Bookman
Colorectal Screening & GI Endoscopy Lead, TRCP North and South

Dr. Michael Shier
Cervical Screening & Colposcopy Lead, TRCP North and South

Dr. Ed Kucharski
Primary Care Lead

Ms. Debbie Fisher-Holmes
Manager, Regional Cancer Screening Program, TRCP North and South
BREAST IMAGING

- On-boarded three new Ontario Breast Screening Program sites at St. Joseph’s Health Centre Toronto, Roncesvalles X-Ray and Ultrasound, and Annex Medical Imaging
- Supported the implementation of the Quality Management Program for mammography by collaborating with neighbouring Regional Cancer Programs to plan four cross regional events for Radiologists to discuss quality concerns and initiatives launched by the Quality Management Partnership between the College of Physicians and Surgeons of Ontario and Cancer Care Ontario
- Support the dissemination and education of the newly launched mammography Quality Management Program report cards

CERVICAL SCREENING & COLPOSCOPY

- Participated in CCO’s Ontario Cervical Screening Program. This program established a Community of Colposcopy and a province-wide webinar was held to introduce new colposcopy initiatives to Colposcopists
- Collaborated with Hospital Colposcopy Leads and all Colposcopists in the region, leading to early adoption of new Ontario Colposcopy Guidance Document
- Participated in invitational meeting on human papillomavirus self-testing at Ryerson University
- Presented on Ontario Colposcopy Guidance Document at Grand Rounds at Sunnybrook Health Sciences Centre, St. Joseph’s Health Centre, and Society of Obstetrician and Gynecologists of Canada Regional Meeting
- Participated in Cervical Cancer Prevention Sunnybrook Speaker Series for Cancer Care Awareness Month

COLORECTAL SCREENING AND GI ENDOSCOPY

- Hosted two Quality Management Program for Colonoscopy events with facility leads and endoscopists to discuss quality concerns and initiatives launched by the Quality Management Partnership between the College of Physicians and Surgeons of Ontario and Cancer Care Ontario
- Supported the dissemination and education of the newly launched colonoscopy Quality Management Program report cards
- Identified the need to form a Regional Fecal Immunochemical Test Readiness Working Group consisting of Primary Care Leads, Facility Leads, and Diagnostic Assessment Program Leads in preparation for the launching of the new Fecal Immunochemical Test kits for colorectal cancer screening. For more information, search ‘Fecal Immunochemical Test’ at www.cancercare.on.ca

PRIMARY CARE

- Developed, circulated and promoted two editions of the Primary Care Cancer Update newsletter to physicians
- Collaborated with regional stakeholders to support continuing medical education events and provided education about cancer care
- Used both television and social media to promote organized screening programs
- Developed teaching module highlighting cervical, breast, and colorectal screening in the new Foundations curriculum at the University of Toronto Medical program

Dr. Michael Shier began his role as Regional Colposcopy and Cervical Screening Lead for Toronto Regional Cancer Program South and North in 2016. He is the Medical Director of the Colposcopy Unit at Sunnybrook Health Sciences Centre (SHSC) and the previous Obstetrician and Gynecologist in Chief of SHSC. Dr. Shier’s role in the TRCP is to support and develop CCO’s Ontario Cervical Screening Program that aims to provide women with access and coordinated quality cervical screening. We welcome Dr. Shier to the role and look forward to his leadership.
SMOKING CESSATION

In 2016, the Smoking Cessation Program successfully implemented the novel screening platform “CEASE” in all ambulatory clinics at Princess Margaret. The CEASE platform is integrated with our Distress Assessment and Response Tool - DART, and is electronically administered on iPads. Patients are screened for their smoking status, and if they are current smokers are provided with tailored patient education materials on the benefits of smoking cessation, and referrals to cessation services are facilitated.

- Overall, 65% of new cancer patients are being screened for smoking, up from 44% in 2015. A significant number of those patients are taking advantage of smoking cessation services
- A patient education campaign for smoking cessation was launched on the Princess Margaret website, which includes patient education videos and an eLearning module for smoking cessation. More information can be found by searching ‘smoking cessation’ at www.uhn.ca

The third annual community of practice event on smoking cessation was held in December 2016, co-hosted by the Toronto Central Regional Cancer Programs North and South, and was attended by forty people from eleven institutions. Key topics included:

1. Implementing a Nicotine Withdrawal Management Program: A Process Perspective for Point of Care
2. Medical Marijuana: The Evidence, Policies, Best Practices and Risks for its use as a Complementary Therapy for Patients
3. Update on Smoke Free Ontario Act and Hospital Grounds
4. Update on Smokers’ Helpline’s programs and services: free tools to help health care providers motivate quit attempts
5. Ethics & Policy: Addressing Smoking Cessation among Patients and Family Members
6. Cost/Benefit Analysis of a Hospital Smoking Cessation Program
DIAGNOSIS

CANCER IMAGING

The Cancer Imaging Program has developed strategic priorities to support and align with the Ontario Cancer Plan IV. The strategic priorities include imaging appropriateness, access, standardized radiology reporting, and participation in provincial advisory committees.

HIGHLIGHTS

- Cancer Imaging experts within the region contributed to CCO Cancer Pathways (eg. Bladder), and are involved in the governance of the High-Risk Lung Cancer Screening with Low-Dose Computerized Tomography pilot project promoting the appropriate use of Imaging
- Cancer imaging experts in the region are members of the Interventional Radiology Steering Committee that advise on appropriateness and access for oncologic interventional radiology procedures
- Funding is now available for Focal Tumor Ablation services such as radiofrequency ablation for hepatocellular carcinoma and renal cell cancer. University Health Network provides a large majority of these procedures in the province
- The use of structured radiology reporting continues to be promoted for Oncology-related imaging studies
- A lecture on the Cancer Imaging Program was well received at the University of Toronto Medical Imaging Alumni meeting that enhanced and supported our Community of Practice

PATHOLOGY AND LABORATORY MEDICINE

Pathology and Laboratory Medicine in the Toronto Central South Regional Cancer Program continued to focus on quality and equal access for patients by striving to meet CCO Turnaround Time guidelines and developing contingency initiatives and strategies for unmet goals. Value has been added to cancer diagnostics by providing companion diagnostics in the form of ancillary molecular and biomarker diagnostics.

HIGHLIGHTS

- New College of American Pathologists checklists have been implemented
- Established effective working relationship and co-ordination between clinicians and pathologists in the region
- Delivered state of the art molecular diagnostics in the provision of precision medicine
- Two pathology events were held in 2016, one community practice event and one symposium on quality and safety

In March 2016, Under The Microscope: A Closer Look At Quality Pathology Community of Practice event was held about implementing a provincial Quality Management Program for pathology. Discussion items included Quality Management Partnership program overview, standards and indicators, governance structure, Quality Management Model, reporting, resourcing, and implementation.

Dr. Martin O’Malley was reappointed to an additional three year term in the role of Regional Cancer Imaging Lead, Toronto Central South. He has made significant contributions to the regional and provincial programs since taking on the Regional Imaging role in 2010. He is a keen collaborator and connector and has been referenced as a pillar of the CCO imaging community. We look forward to his continued leadership in the program.

An interactive symposium, Pathology Quality and Patient Safety, was held at University Health Network to address issues regarding quality locally, nationally and internationally. Speakers presented on synoptic cancer reporting, digital pathology – application of quality assurance and quality control, interpretative diagnostic error in surgical pathology, Quality Management Partnership, and immunohistochemistry. Keynote speaker, University Health Network’s President and CEO, Dr. Peter Pisters, presented on pathology quality and patient safety in a high reliability organization.
DIAGNOSTIC ASSESSMENT PROGRAM

The Toronto Central Regional Cancer Program South Diagnostic Assessment Program (DAP) continued to collaborate in the further development of Cancer Care Ontario supported Colorectal and Lung Diagnostic Assessment Programs. The objectives of these programs are to reduce delays in diagnosis and improve coordination of services. Patients in the DAP pathway have access to a multidisciplinary team including a navigator who provides a single point of contact for patients, coordinates appropriate testing, utilizes evidence-based diagnostic pathways, and provides patient education and supportive care.

Participating sites are University Health Network, St. Michael’s Hospital, and Sinai Health System. These sites share best practices, develop standardized approaches to care and strategic quality initiatives. DAPs are also integrated with primary care for strategic planning and promoted at primary care continuing medical education events. More information can be found at www.trcp.ca by searching ‘DAP’.

HIGHLIGHTS

University Health Network Lung DAP
• Recruited two new staff thoracic surgeons to address gaps in resources, Dr. Laura Donahoe, a thoracic and lung transplant surgeon and Dr. Jonathan Yeung, a thoracic surgeon

University Health Network Colorectal DAP
• Added a new surgeon – Dr. Sami Chadi, a colorectal surgeon with a specialty focus in advanced approaches to sphincter-preservation in rectal cancer; including Transanal Total Mesorectal Excision using transanal endoscopic approaches, to an oncologically appropriate proctectomy and coloanal reconstruction
• Hosted the 2nd annual Knowledge Transfer Event, Colorectal Cancer Management for the Gastroenterologist in 2016 - New Advances in the Endoscopic & Surgical Management of Colon Cancer

Sinai Health System Colorectal DAP
• Dr. Danielle Bischof and Dr. Mantaj Brar joined the Colorectal team in 2016 bringing the total number of surgeons supporting the program to ten
• 98% satisfaction rate with care provided during diagnostic process
• Women’s College Hospital Gastroenterologist’s have access to on-site general surgery consultation for suspicious colorectal cancer through DAP during endoscopy time at Sinai Health System
• Implemented a referral process with family practice at Sinai for efficient access to colorectal DAP
SURGICAL ONCOLOGY

The Toronto Central Regional Cancer Program South Surgical Program continued to focus on interdisciplinary programs to advance clinical and translational research, innovation and education. There was a commitment to collaborate with TRCP North colleagues to provide best practice of care, and to meet the increasing demand for surgical management of cancer by increasing volumes and reducing wait times.

The TRCP Surgical Oncology committee continued to meet quarterly to review and discuss best practices to achieve volume and wait time performance, and discuss opportunities for Quality Improvement related to patient care. Some of the achievements and activities are highlighted below:

- Wait 1 (referral to consult) performance is 86%
- Wait 2 (date of decision to operate to date of operation) performance is 89% - just 1% below the provincial target of 90%
- New guidelines for Breast reconstruction were released with a regional focus on education and knowledge translation to enable guideline implementation
- Advocated to Health Quality Ontario and Cancer Care Ontario for robotic surgery
- Continued implementation of Quality Based Procedures (QBP) for Prostate, Colorectal, Thyroid, Breast and Breast Reconstruction
- Developed quality improvement initiatives around QBP performance metrics and initiated a network of care for Breast QBP

Dr. Jon Irish, the Regional Surgical Oncology Lead for Toronto Central South stepped down after 15 years in September 2016. Dr. Irish has been a strong and influential leader with many accomplishments. He will continue in his role as the provincial head of Surgical Oncology at Cancer Care Ontario. After a robust search for a successor, Dr. Gelareh Zadeh has accepted the role as Regional Surgical Oncology Lead for TRCP South. Dr. Zadeh is the Head of Surgical Oncology at University Health Network, a Surgeon Scientist in University Health Network’s Division of Neurosurgery with a dedicated neuro-oncology and skull based practice, including a number of multidisciplinary specialized programs. She also has an active research laboratory focusing on integrated multi-platform molecular analysis of brain tumors, with a focus on understanding molecular response to targeted therapies. We welcome her to the role and look forward to her leadership in the program.
# Toronto Regional Cancer Program Surgical Oncology Committee

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Princess Margaret/UHN</strong></td>
<td>Dr. Jonathan Irish, Co-Chair</td>
</tr>
<tr>
<td></td>
<td>Ms. Mary Ann Neary</td>
</tr>
<tr>
<td></td>
<td>Ms. Martha Wyatt</td>
</tr>
<tr>
<td></td>
<td>Dr. Gelareh Zadeh (September 2016)</td>
</tr>
<tr>
<td><strong>Women’s College</strong></td>
<td>Ms. Victoria Noguera</td>
</tr>
<tr>
<td></td>
<td>Dr. John Semple</td>
</tr>
<tr>
<td><strong>St. Michael’s Hospital</strong></td>
<td>Ms. Susan Blacker</td>
</tr>
<tr>
<td></td>
<td>Dr. Ori Rotstein</td>
</tr>
<tr>
<td><strong>Sinai Health System</strong></td>
<td>Ms. Farah Khan Choudhry</td>
</tr>
<tr>
<td></td>
<td>Dr. Jay Wunder</td>
</tr>
<tr>
<td><strong>Odette/SHSC</strong></td>
<td>Dr. Danny Enepekides, Co-Chair</td>
</tr>
<tr>
<td></td>
<td>Ms. Janice Stewart</td>
</tr>
<tr>
<td><strong>St. Joseph’s Health Centre</strong></td>
<td>Dr. Chris Compeau</td>
</tr>
<tr>
<td></td>
<td>Ms. Shelley DeHay-Turner</td>
</tr>
<tr>
<td></td>
<td>Ms. Elena Holt (September 2016)</td>
</tr>
<tr>
<td><strong>Michael Garron Hospital</strong></td>
<td>Ms. Penny Walcott</td>
</tr>
<tr>
<td></td>
<td>Dr. Rob Zeldin</td>
</tr>
</tbody>
</table>
SYSTEMIC THERAPY

2016 was a successful year for the Systemic Therapy Program in Toronto Central Regional Cancer Program South. The region has continued to address the human resource changes during the year, maintaining its performance in wait-time targets. The region has also managed to secure additional funding for physicians to manage increase in systemic therapy volumes (especially in complex malignant hematology), as well as the increasing complexity of care of delivering systemic therapy across most disease sites.

HIGHLIGHTS

• Developed and implemented a survey tool to understand if patients know how to access out of hours advice for symptom management. The results from the survey will inform future interventions related to unscheduled hospital visits (Emergency Room visits and hospitalizations) among ambulatory oncology patients.
• Continued outreach between the Regional Cancer Centre and non-Regional Cancer Centre sites about improvement to data quality for Activity-Level Reporting and Quality Based Procedure funding.
• Three hospitals in the region participated in a province-wide systemic therapy toxicity call-back program exploring whether nurse-led telephone calls can reduce unscheduled hospital visits. Hospitals in the region contributed to both the experimental and control arms of this study. Results are expected in 2017.

TORONTO CENTRAL REGIONAL CANCER PROGRAM SOUTH SYSTEMIC TREATMENT PROGRAM COMMITTEE

Princess Margaret /UHN
Dr. Eitan Amir (Chair)
Ms. Celina Dara
Ms. Marina Kaufman
Ms. Rita Kwong
Ms. Upasana Saha
Ms. Pam Savage
Ms. Terri Stuart-McEwan
Ms. Martha Wyatt

St. Michael’s Hospital
Ms. Susan Blacker
Dr. Christine Brezden-Masley
Ms. Ruth Law
Ms. Charmaine Mothersill

Sinai Health System
Dr. Ron Burkes
Mr. Andrew Han
Ms. Lisa Wayment

St. Joseph’s Health Centre
Mr. Jiten Jani
Dr. Dorothy Lo
Ms. Melissa Morey-Hollis
Ms. Sheila McEwen
RADIATION THERAPY

Radiation Therapy is delivered at Princess Margaret Cancer Centre, the Regional Cancer Centre for TRCP South. The Strategic Roadmap for 2020, which was launched in 2015, laid the path in 2016 to improve patient care and outcomes through innovation in research, education, clinical practice and system operations for the Radiation Medicine Program. Over the past year, great strides have been made in four strategic priorities:

1. Accelerate discovery to deliver precision medicine for best patient and population outcomes
2. Integrate research and education with clinical practice
3. Strengthen internal and external community linkages
4. Extend high reliability with systems thinking

HIGHLIGHTS

- Work continued towards attaining the vision of Precision Radiation Medicine. Personalized Care. Global Impact by driving improvements in access to high quality radiation therapy for patients in the region
- Ongoing successful collaborations with partners (St. Michael's Hospital, St. Joseph's Health Centre, Women's College Hospital, Michael Garron Hospital, and Southlake Regional Health Centre) and targeted outreach to referring partners, have improved access to radiotherapy within the region and beyond
- First-ever joint symposium with Radiation Medicine Programs at Southlake and Princess Margaret Cancer Centre to discuss successes. Since the formal partnership began, opportunities have developed for continued improvements and ongoing treatment planning innovations
- Continued to develop and distribute the well-received Radiation Medicine Program newsletter, ConneXions available at www.radiationatpm.com
- Continuing Education event was held for colleagues from St. Michael's Hospital, St. Joseph's Health Centre, and Humber River Regional Hospital

Study of the Efficacy and Safety of Lutetium-177 Octreotate

Innovative models of clinical care continued to expand in the Radiation Medicine Program with the first Gallium 68Ga-DOTATATE PET scan in Ontario being performed in July 2016 at the Princess Margaret Cancer Centre. This marked a notable milestone for the Ontario neuroendocrine cancer patient community, as 68Ga-DOTATATE PET is considered to be one of the most effective tests for identifying patients who will benefit from radionuclide therapy (e.g. Lu177 DOTATATE). Led by the CCO Neuroendocrine Tumor Consortium (University Health Network, Odette Cancer Centre, Juravinski Cancer Centre, London Cancer Centre) and sponsored by Princess Margaret Cancer Centre, this Health Canada approved clinical trial is expected to generate data that will contribute to expanded access for patients in other Canadian provinces. The Principal Investigator is Dr. Rebecca Wong, a Radiation Oncologist and Director of Education for the Radiation Medicine Program at the Princess Margaret Cancer Centre. Eleven patients were recruited and nine were treated with Lu177 DOTATATE in 2016.

MULTIDISCIPLINARY CANCER CONFERENCE PARTICIPATION

Princess Margaret Cancer Centre Radiation Oncologists maintained greater than 75% participation at regional partner sites as outlined below.

St. Michael's Hospital
- Breast
- Genitourinary
- Neurology
- Gynaecology
- Lymphoma

St. Joseph's Health Centre
- Breast
- Genitourinary
- Gastrointestinal
- Hepato-pancreas biliary (HPB)
- Thoracic (lung, esophagus)
MULTIDISCIPLINARY INITIATIVES

MULTIDISCIPLINARY CANCER CONFERENCES

Multidisciplinary Cancer Conferences (MCCs) are scheduled sessions where clinicians discuss patient diagnosis and treatment options. MCCs enable the multidisciplinary treatment team of medical oncologists, radiation oncologists, surgeons, pathologists, radiologists and nurses to develop the best individual plan of care. The Toronto Central Region South has increased MCC compliance to 90% from 83% in 2015. Performance is measured by percent compliance with MCC standards related to frequency, discipline participation, and appropriate roles being in place to support the MCC.

<table>
<thead>
<tr>
<th>MCC Hospital</th>
<th>Q1 - FY 16/17</th>
<th>Q3 - FY 16/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sinai Health System</td>
<td>97%</td>
<td>97%</td>
</tr>
<tr>
<td>St. Joseph’s Health Centre</td>
<td>90%</td>
<td>86%</td>
</tr>
<tr>
<td>St. Michael’s Hospital</td>
<td>64%</td>
<td>77%</td>
</tr>
<tr>
<td>University Health Network</td>
<td>96%</td>
<td>96%</td>
</tr>
<tr>
<td>Women’s College Hospital</td>
<td>94%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Overall TRCP South</strong></td>
<td><strong>88%</strong></td>
<td><strong>90%</strong></td>
</tr>
</tbody>
</table>

COMMUNITY OF PRACTICE EVENTS (NORTH AND SOUTH)

Community of Practice events are one of the foundational elements of the Surgical Oncology Program to support continuous quality improvement. One of the ways we move this agenda forward is through community of practice events. Local champions support the development of these events and target a multidisciplinary group of clinicians. These events are an opportunity to come together and consider and discuss local quality issues, with a goal of improved care and outcomes for patients.

Highlights from the 2016 Prostate, Colorectal and Breast events are outlined in the sidebar.

PROSTATE (FEBRUARY 2016)

The event included thirty eight participants from three different LHINS; Toronto Central (North and South), Central and Central East. We had representation from all but one hospital in Toronto Central and all invited disciplines.

- Active Surveillance
- Prostate Biopsy Synoptic Reporting Development and Standards
- Gleason staging review
- Review of current regional performance data including prostate margins
- Emerging treatment RA-223 indications review
- Advance the implementation of the new quality based funding for prostate cancer
- Advocacy for robotic funding
- Representation on Health Quality Ontario subcommittee on Robotic Surgery

COLORECTAL (MARCH 2016)

The event included thirty five participants from Toronto Central (North and South) LHIN with representation from each hospital in the region and all invited disciplines.

- Preoperative evaluation of rectal cancer patients
- MRI synoptic reporting project
- Implementation of Quality Based Procedure for colorectal surgery
- Review of performance metrics

BREAST (MARCH 2016)

The event included twenty seven participants from three different LHINS; Toronto Central (North and South), Central and Mississauga Halton. We had representation from all but one hospital in Toronto Central and all invited disciplines.

- Introduction of Quality Based Procedure for breast cancer surgery and implications for service delivery in our region
- Review of breast reconstruction guidelines and discussion regarding Toronto Central South implementation
- Assessment of regional capability to meet demand for breast cancer reconstruction
The Psychosocial Oncology portfolio at Cancer Care Ontario is tied to the Ontario Cancer Plan IV domain of Quality of Life and Patient Experience: Ensure the delivery of responsive and respectful care, optimizing individuals’ quality of life across the cancer care continuum.

Its specific aims are:
- To improve timely access for patients and families to quality psychosocial oncology care throughout the cancer journey and beyond
- To reduce psychosocial morbidity of patients and families related to unmet physical, emotional, practical and spiritual needs

The Regional Psychosocial Oncology committee continued to meet quarterly in 2016. The committee’s purpose is to organize regional responses to the Ontario Cancer Plan IV and the provincial psychosocial oncology program goals. It also provides a communication forum for sharing by its members across cancer programs on psychosocial oncology related initiatives, best practices and new resources.

HIGHLIGHTS
- Continued work on wait time measurement for psychosocial oncology services in the regional cancer centres
- Disseminated and implemented the Cancer Care Ontario practice guidelines regionally for depression, exercise, and sexual health
- Created an exercise and rehabilitation program directory to support clinicians in implementing the Exercise guideline
- Held two workshops in partnership with Wellspring Cancer Support Centre’s Money Matters program
- Continued regional participation in Cancer Care Ontario’s monthly person centered care rounds

In March of this year, Cancer Care Ontario aligned four programs - Psychosocial Oncology, Nursing, Patient Education and the Ontario Cancer Symptom Management Collaborative/Patient Reported Outcomes with patient engagement and satisfaction to develop a new portfolio, Person-Centred Care. This new alignment leverages the expertise of all these programs, with similar mandates, to support and engage patients and healthcare providers in ensuring the delivery of responsive and respectful care that supports patient needs and preferences.

Regionally, we are working together to develop stronger, more cohesive ways to meet our patient needs by ensuring their perspective is included in the design and implementation of programs and care.

TORONTO CENTRAL REGIONAL PSYCHOSOCIAL ONCOLOGY COMMITTEE

St. Michael’s Hospital
- Ms. Susan Blacker (Chair)
- Ms. Jessy Mathai
- Ms. Joanna Dixon

Princess Margaret /UHN
- Ms. Sheila Weinstock
- Ms. Nafeesa Ladha
- Ms. Upasana Saha

Women’s College
- Ms. Catharine Fox
- Ms. Aronela Benea

Sinai Health System
- Ms. Lisa Wayment
- Ms. Christina Fabbruzzo-Cota

Odette/SHSC
- Dr. Karen Fergus
- Ms. Manisha Gandhi

St. Joseph’s Health Centre
- Ms. Carmel Richards

Michael Garron Hospital
- Ms. Mikki Layton

Regional Aboriginal Patient Navigator
- Ms. Joanna Vautour

*Dr. Janet Ellis, Odette Cancer Centre was committee co-chair until March 2016.
ONTARIO CANCER SYMPTOM MANAGEMENT COLLABORATIVE

Cancer Care Ontario released the 2016 - 2019 Patient-Reported Outcomes and Symptom Management Program Strategic Framework this year which aligns with the Ontario Cancer Plan IV to highlight five key focus areas for implementing patient reported outcomes and symptom management. Three key areas of work done in the Toronto Central South region are:

1. Ensured additional technology resources to enhance symptom screening
2. Targeted clinician engagement to improve symptom management
3. Piloted projects iPEHOC and EPIC-CP to advance specialized symptom screening, see below

Improving Patient Experience and Health Outcomes Collaborative (iPEHOC)

The iPEHOC project aimed to develop a sustainable patient experience measurement system applicable to all jurisdictions in Canada to improve the patients’ care and health outcomes. The main objective was to facilitate the uptake of a standardized set of patient-reported outcome measures (PROMs) and actionable use of those measures in clinical practice. Princess Margaret Cancer Centre is one of six sites in Ontario and Quebec that participated in this initiative over a three-year period from 2014 to 2016. Over forty members of the inter-professional team from the Lung and Sarcoma disease sites are part of the project, and they collectively see about eleven hundred patients each month.

- Successfully implemented PROMs for pain, fatigue, anxiety and depression triggered from Edmonton Symptom Assessment System screening
- Launched interactive case-based education for management of pain, fatigue, emotional distress and symptom clusters for staff
- Preliminary evidence shows impact of iPEHOC on decreased anxiety, as well as reductions in emergency room visits and hospitalizations after project implementation compared to pre-implementation

Expanded Prostate Cancer Index Composite for Clinical Practice (EPIC-CP)

To address the disease-specific concerns of prostate cancer patients and effects of specific treatments, Cancer Care Ontario conducted a phase II pilot evaluation for the implementation of EPIC-CP. EPIC-CP is a sixteen-item patient reported outcome measure for prostate cancer patients. Princess Margaret Cancer Centre participated as one of four sites across Ontario to implement the screening tool in routine care and to evaluate its impact on patient experience. After the end of the pilot in 2015, it was recommended that EPIC-CP be implemented in all Ontario cancer centres for early stage prostate patients because results showed the tool fostered person-centred communication, facilitated customization of prostate cancer patients’ treatment plans, and improved patient experience. Readiness assessments and phase I province-wide implementation began in 2016.

- Continued the use of EPIC-CP as standard practice for prostate cancer patients past end of the pilot project
- Collaborated with national and international groups to implement an expanded EPIC tool in 2017
NURSING

The nursing program in 2016 focused on training and certification of ambulatory oncology nurses who work in chemotherapy suites in TRCP South.

- 52% of nurses have completed the Certification in Oncology Nursing (Canada), meeting the provincial target
- 71% of nurses have completed deSouza Institute or Ontario Nursing Association Chemotherapy/Biotherapy Certificate Programs

PATIENT EDUCATION

The Patient Education Program from the Toronto Central Regional Cancer Program South focused on several new initiatives in 2016, as well as continuing to work on projects that are currently underway. New initiatives are outlined below.

- Developed a strategy in response to the second distribution of the CCO Your Learning Matters survey. Data was collected from three hundred patients and family members at the Regional Cancer Centre and included questions that addressed perception and satisfaction with information provided. The strategy includes two parts:
  - To improve patient information provision at the Regional Cancer Centre
  - To improve consistency in patient information provision at the Regional Cancer Centre
- Developed a Patient Education communication e-Blast meant to promote resource sharing across the Region
- Collaborated with the CCO Patient Education Committee to complete translation of the ten CCO Patient Symptom Management Guides. Each of these guides is now available in the following languages: English, French, Italian, Spanish, Tamil, Simplified Chinese, and Traditional Chinese. Funding for translation was provided by the Elizabeth Walters Patient Education Fund through the Princess Margaret Cancer Foundation. These guides can be found on the CCO website at www.cancercare.on.ca if you search patient symptom management guides
- Launched a needs assessment to understand health care provider perceptions of factors that could facilitate their ability to teach patients in clinic. Results indicated that access to current and reliable education resources would optimize teaching time with patients. In response, Patient Education Stations in ambulatory clinics were developed to house resources tailored to the specific disease site to augment teaching, standardize information provision, and support patient learning

Oncology Nursing was developed in 2016 under the Person-Centered Care portfolio at Cancer Care Ontario to drive provincial nursing initiatives to deliver better outcomes and value to patients. Ms. Pamela Savage joins the Toronto Central Regional Cancer Program South as the inaugural Lead for Oncology Nursing. Ms. Savage is the Nursing Professional Practice Leader for the Oncology Program at the Princess Margaret Cancer Centre and has worked in Oncology for twenty five years as a Clinical Educator, Clinical Nurse Specialist and Professional Practice Leader. We welcome Pamela to her new role and look forward to her leadership in the program.

Ms. Pamela Savage
Nursing Lead

Ms. Janet Papadakos
Patient Education Lead
PALLIATIVE CARE

Palliative care saw several new developments this year, both provincially and regionally. In March, the Ontario Palliative Care Network (OPCN) was launched to support the development of a coordinated and standardized approach for delivering hospice palliative care services in the province, visit www.ontariopalliativecarenetwork.ca. The OPCN is a partnership of community stakeholders, healthcare providers, and health systems planners. It is funded by the Ministry of Health and Long-Term Care to help deliver on Ontario’s commitment to palliative care. This group will provide leadership to the province and link activities across the Local Health Integration Networks (LHINs), Cancer Care Ontario, the Quality Hospice Palliative Care Coalition of Ontario, and Health Quality Ontario. Their mandate for the first year was focused on the development of their network, infrastructures to support collection and dissemination of information, and communication strategies. Two main projects that are underway include residential hospice capacity planning and the formation of an education working group.

TORONTO CENTRAL PALLIATIVE CARE NETWORK

In fall 2016, the Toronto Central Palliative Care Network (“the Network”) was created under the joint leadership of the Toronto Central LHIN Chief Executive Officer and the Toronto Central Regional Cancer Program Regional Vice Presidents. This new Network serves as the regional advisor on high quality palliative care, and is accountable for local quality improvement, data and performance measurement, and for driving quality improvement across all sectors based on best practice. Leadership for this Network includes Dr. Kirsten Wentlandt as the physician co-lead, Ms. Susan Blacker as the non-physician co-lead, and Ms. Rose Cook as the administrative lead.

The Network supports and reports into OPCN to develop provincial quality standards, data and performance measurement, connect current research, and lead best evidence to clinical practice in a purposeful way.

HIGHLIGHTS

- Governance structure developed and three leadership positions were appointed, including a Network Director and two Clinical Co-Leads to provide strategic and operational leadership to the Network
- Hosted a Regional Palliative Care Stakeholder consultation with over sixty care providers and family members attending to lend their voice in shaping the priorities of the Network in 2017/18
- Community engagement and partnership with palliative care providers, patients, and families, and the sub-regions are underway and will form the foundation to drive a more seamless and integrated palliative care system
- With the assistance of the regional stakeholders and partners, foundational work was initiated to help drive local improvement efforts

INTEGRATE

The INTEGRATE project was developed in 2014 by Cancer Care Ontario in collaboration with the Canadian Partnership Against Cancer, with the goal of improving the delivery of palliative care through early identification and management of patients who could benefit from advanced care planning. Two models of care were designed and implemented; one in Primary Care practices and one in Regional Cancer Centres. Forest Hill Family Health Team and Princess Margaret Cancer Centre participated from the Toronto Central South Region.

The project concluded in 2016 with overall provincial results showing an increase in clinician confidence to provide palliative care and discuss advanced care planning, and an increase in knowledge about support services available for patients. Sustainability and spread plans to drive effective components of the project at Princess Margaret Cancer Centre and Forest Hill Family Health Team were developed. See plans outlined below:

- Increase access to patient education Speak Up booklets about Advanced Care Planning
- Develop two knowledge translation documents for clinical staff and fellows: cancer services available to Central Nervous System patients and a structure for advanced care planning discussions with patients
- Consultation with Ontario Palliative Care Network to spread Learning Essential Approaches to Palliative Care training courses to relevant disease sites at the Cancer Centre
This past year has been a time of both reflection and critical thinking regarding Indigenous peoples in Canada, from both historical and contemporary perspectives. A momentum of awareness building among Canadians emerged as a spotlight was shone on our shared history of the Indian Residential School system, and the resulting devastating impact on Indigenous people and families in this country. The Truth and Reconciliation Commission’s (TRC) Final Report shone a beam of dark truth that has never been fully illuminated regarding colonizing policies that shaped the federal government’s assimilative agenda towards First Nations, Inuit and Métis peoples. The outcome on their physical, emotional, mental and spiritual well-being can be measured in the inequitable health status that is reported today.

All of Canada now faces the work ahead to address the inequities in a response to the 94 Calls to Action identified in the TRC report. The Toronto Central Regional Cancer Program Aboriginal Team and our Lead partners are well situated in this objective due to the culturally relevant Aboriginal Cancer Strategy -III which was developed in partnership with Indigenous leadership in the Province and reflects a self-determining approach towards addressing the serious inequities with respect to the prevalence of cancer among Indigenous people. The TRCP-Aboriginal Cancer Plan is guided by the Aboriginal Cancer Strategy -III and tempered to accommodate the needs of urban First Nations, Inuit and Métis people residing here in the region, and those individuals and families who are referred here from other regions. While significant progress had been made towards improving the cancer care journey for First Nations, Inuit and Métis individuals and families dealing with cancer, there is still a long way to go. For example, the development of culturally safe healing spaces within care sites for clients who need to engage in spiritual healing ceremony is an urgent need; supporting and collaborating with health care professionals in the development of protocols and practice towards implementing culturally competent care is a priority. We need to continue to raise awareness and refer clients and families for Aboriginal Navigation services. We need to continue to collaborate with various networks and organizations within the region towards addressing systemic barriers and facilitating the development of a more equitable cancer care system. Finally, the ongoing informed support and leadership of champions at all levels in our region will continue to inspire us all towards a reconciliation-cancer care journey experience for First Nations, Inuit and Métis people, and their families.
REGIONAL PARTNER
HOSPITALS
AND
ORGANIZATIONS
PARTNER HOSPITALS

PRINCESS MARGARET CANCER CENTRE

In 2016, Princess Margaret and University Health Network (UHN) renewed its Purpose, Values and Principles to reflect our organization both today and 50 years from now. A major outcome of the renewal is the Caring Safely transformation, with the purpose of ensuring that everyone at UHN is committed to safety, both for one another and the individuals we serve. For more information on UHN’s Purpose, Values and Principles, and Caring Safely initiative, visit www.renewinguhn.ca.

To meet the growing demand for cancer care and to address the evolving needs of our patients and families, Princess Margaret relocated nearly five hundred of our staff to new off-site space, resulting in much needed capacity at the cancer centre for clinical program and research growth as well as enhancing patient amenities.

Highlights in 2016 included the refresh of 9 of 14 Site Group Leaders, responsible for integrating clinical practice, research and education to support the delivery of high quality, multidisciplinary programs. Dr. Rebecca Wong (Principle Investigator) launched an innovative trial that is expected to generate data to support future directions in treatment for the Ontario Neuroendocrine Cancer community. The focus on Complex Malignant Hematology has resulted in additional capacity, improved wait times and quality of care as well as new partnerships focused on access to care closer to home. Our long standing Interventional Radiology Program was funded for the first time by Cancer Care Ontario to improve access to these services for defined indications. Finally, we celebrated Dr. Jonathan Irish’s 15 years of dedicated service to the Cancer Centre in his role as Head of Surgical Oncology and the Surgical Oncology Lead for the Toronto Central Regional Cancer Program South. He is succeeded by Dr. Gelareh Zadeh who is highlighted in the Surgical Oncology section of the report.

ST. MICHAEL'S HOSPITAL

St. Michael’s continued to focus on a broad range of initiatives in 2016, from screening to survivorship, to symptom management within endoscopy, medical oncology, surgery, and palliative care. Highlights include:

• The 29th annual International Meeting for Therapeutic Endoscopy was hosted on October 12-14th
• New this year is a procedure called endoscopic sub-mucosal dissection - a technique to do en-bloc removal of early gastric and rectal lesions (dysplastic lesions and intramucosal carcinoma)
• An inter-professional team, in partnership with IT, developed and launched E-prescription, which is an innovative online prescription tool for oncologic oral medications
• A national gastric cancer non-profit support and advocacy group called MyGutFeeling was launched in 2016 and meets monthly providing much needed support to patients
• The 5th Kinnear Lectureship in Oncology was held for a hospital-wide audience on October 19th and focused on the advances being made in immunotherapy for patients
• Led by Dr. Rashida Haq, a study of personalized multifaceted care plans for breast cancer survivors was completed and published
• The 8th annual Breast Care Symposium for primary care was held in October, focusing this year on Breast Health in Young Women
SINAI HEALTH SYSTEM

2016 has been a significant year for Sinai Health System, with continued integration of the model of care across Mount Sinai Hospital, Bridgepoint Active Healthcare, Circle of Care, and the Lunenfeld-Tanenbaum Research Institute.

• Began development of long-term strategic plan in alignment with Cancer Care Ontario’s goals and objectives, including:
  • Clear identity for Sinai Health System’s cancer program
  • Strengthen our partnerships with other hospitals and community providers across the continuum
  • Review of community need, emerging trends, and innovations, in order to ensure patient needs are met
• Dr. Russell Goldman appointed to the new role of Director of Inter-Departmental Division of Palliative Care, with the goal to establish an integrated, comprehensive clinical and academic palliative program model spanning primary care to hospital to home
• Ear, Nose and Throat team completed an innovative clinical trial for heat moisture exchange filters for patients who are post total laryngectomy. Evaluation found cost savings in supplies, shortened healing time, and an increase in patient and staff satisfaction
• Acquired four tablets for ambulatory oncology unit to support patients completing symptom screening
• Established an integrated multidisciplinary team of researchers bridging Mount Sinai Hospital/ Lunenfeld-Tanenbaum Research Institute; and Princess Margaret Cancer Centre/ Princess Margaret Research Institute: the Hold’em for Life Breast Cancer Research Program at the Marvelle Koffler Breast Center

ST. JOSEPH’S HEALTH CENTRE

2016 was an eventful year in Oncology Care at St. Joseph’s Health Centre. Highlights include:

• Ontario Breast Screening Program was added at the Health Centre, ensuring the provision of comprehensive care for patients being investigated, diagnosed, and treated for breast cancer
• Added an Oncology Counsellor role and Oncology Educator role to the oncology care team to facilitate more timely access to support for both the inpatient and outpatient populations and the clinical teams
• Continued phase two of the Computerized Physician Order Entry Project to support patient safety, best care delivery, and activity level reporting
• Renovations have been started on the Oncology Clinic waiting room to create a more therapeutic environment for patients and families during their time in the clinic
• Supported integrated care and education through the Partnership Series on Cancer Screening and Treatment for primary care providers, developed by the Oncology Physician team. The Hematology Partnership Series was launched in 2016 and will continue into 2017
Women’s College Hospital continued to focus on its three signature programs, thyroid surgery, breast surgery, and colposcopy.

- Created a program for same day Total Thyroid Surgery. The model of care and toolkit were developed by an interdisciplinary team to provide a standardized approach to patient selection, pre and post op care, patient education and patient satisfaction
  - 61% same day Total Thyroid patient surgeries have successfully been completed, with a 70% reduction in average length of stay from 21 hours to 6.1 hours
  - Patient and staff satisfaction rates are over 95%
  - Additional positive outcomes included: increased staff confidence, improved patient advocacy, standardized practices and goal-oriented patient communication
- Developed a partnership with the Canadian Breast Foundation to provide peer support and information. There is an onsite Support and Information Specialist to help patients:
  - Understand the medical, emotional and practical issues relevant to them
  - Cope effectively with the challenges of living with breast cancer or an increased risk for developing breast cancer
  - Navigate patient’s breast cancer journey or the options for managing breast cancer risk
  - Navigate or find resources and services in the community
- Continued to develop our Integrated Hereditary Breast and Preventive Ovarian Cancer Program with the Henrietta Banting Breast Centre and Familial Ovarian Cancer Program by creating care pathways to support integration with surgeons, gynecologists, health disciplines, genetics, and researchers to create an integrated team that provides personalized seamless patient pathways from prevention to post cancer care
PARTNER ORGANIZATIONS

CANADIAN CANCER SOCIETY

Through partnerships with community organizations, health professionals, government and people with cancer, the Canadian Cancer Society has worked towards the eradication of cancer and enhancement of the quality of life of people living with cancer throughout 2016. The organization has supported the Toronto Central Regional Cancer Program South by providing:

- Improved access to cancer screening programs through our Screening Saves Lives program, evidence based information about cancer via our cancer.ca website, our Cancer Information Service, and via webcasts
- Access to peer support services, both online and over the phone
- Transportation to and from their cancer treatment through our Wheels of Hope program
- A comprehensive database of cancer related services through our online database www.info.cancer.ca/CSD
- Help to quit smoking via our Smokers’ Helpline

COMMUNITY CARE ACCESS CENTRE

The Toronto Central Community Care Access Centre (TC CCAC) hospital care coordinator team works directly with hospital patients and staff to provide smooth and safe transitions from hospital to home. Patients getting care at TRCP South sites may reside in one of the 14 CCACs across the province and Toronto Central CCAC manages these transitions in partnership with other CCACs. In addition to this work, the CCAC is engaged in a variety of initiatives and quality improvement projects, some of which are highlighted below:

- Leveraged Temmy Latner’s existing Electronic Medical Record and extended it to the interdisciplinary team of Care Coordinators and Nurse Practitioners at the CCAC to enable care team members to create shared records and seamlessly exchange high-quality information about shared clients in a timely and secure manner, enhancing team collaboration, coordinated care planning and integration of care delivery
- TC CCAC has four Nursing Clinics within the City of Toronto that provide quick and easy access to specialized nursing services for CCAC clients who require nursing services. One of the clinic services offered seven days a week is Intravenous (IV) therapy, including chemotherapy disconnect
  - The nursing clinics have provided nursing services to approximately 2,108 clients from April to December 2016
- As part of the TC CCAC short stay program, a client care population-based model of home care was implemented to better support people with similar illnesses. The Chemo/Oncology sub-population model includes a dedicated Care Coordinator to support the care needs of adults receiving active treatment for cancer diagnosis e.g. chemotherapy and or radiation
  - From April to December 2016, we served 816 clients
- Continued to participate in Cancer Care Ontario Systemic Treatment Provincial Plan working group project to develop a provincial standardized delivery model of chemotherapy in the home, both in the community and clinic settings
AWARDS AND NOTABLES

AWARDS

Ms. Janet Papadakos was elected Chair- Cancer Patient Education Network, Canadian Chapter and will serve as its Chair in 2017.

Dr. Mary Gospodarowicz is the 2016 recipient of the CCSRI (Canadian Cancer Society Research Institute) O. Harold Warwick Prize, in recognition for her outstanding research achievements in cancer control.

Dr. Meredith Giuliani was the recipient of the 2016 Canadian Medical Association (CMA) Award for Young Leaders.

Dr. Ed Kucharski, as a member of the St Michael’s Hospital Academic Family Health Team Cancer Screening Working Group was selected for the 2016 recipient of the Department of Family and Community Medicine Quality Improvement Award of Excellence.

PROVINCIAL CLINICAL LEADERSHIP

TRCP South clinicians have made significant contributions to cancer care through their provincial clinical leadership roles in 2016 at Cancer Care Ontario, see highlights below.

Sinai Health System
Dr. Erin Kennedy, Ontario Gastrointestinal Cancers Lead
Dr. Aaron Pollett, Provincial Head, Pathology & Laboratory Medicine

St. Michael's Hospital
Dr. Nancy Baxter, Gastrointestinal Endoscopy, Lead
Dr. Derek Muradali, Radiologist-in-Chief, Ontario Breast Screening Program

University Health Network/Princess Margaret Cancer Centre
Dr. Stephen Breen, Clinical Quality Lead for Medical Physics, for the Radiation Treatment Program
Dr. Gail Darling, Ontario Thoracic Cancers Lead, and Provincial Lead High Risk Lung Cancer Screening
Dr. Sarah Ferguson, Ontario Gynecologic Cancers Lead
Dr. Tony Finelli, Ontario Genitourinary Cancers Lead
Dr. Jonathan Irish, Provincial Head, Surgical Oncology and Models of Care
Dr. John Kim, Ontario Head and Neck Cancers Lead
Dr. Monika Krzyzanowska, Clinical Lead, Quality Care and Access, Systemic Treatment Program
Dr. Vishal Kukreti, Clinical Lead, eTools and Technology
Dr. Ur Metser, Chair of PET Steering Committee
Dr. Padraig Warde, Provincial Head, Radiation Treatment
Dr. Alice Wei, Lead, Quality & Knowledge Transfer, Surgical Oncology Program

Women’s College Hospital
Dr. Heidi Schmidt, Radiology Quality Lead, Lung Cancer Screening for People at High Risk
PROGRAMS IN EVIDENCE BASED CARE CONTRIBUTIONS

Program in Evidence-Based Care within Cancer Care Ontario produces evidence-based guidance documents in partnership with clinical experts in all major cancer disease sites and across all clinical programs and modalities. TRCP South clinicians have made significant contributions to guidelines released in 2016, see highlights below.

Use of Adjuvant Bisphosphonates and Other Bone-Modifying Agents in Breast Cancer
- Dr. Ralph George, Surgical Oncology, St Michael’s Hospital
- Dr. David McCready, Surgical Oncology, Princess Margaret Cancer Centre

Systemic Therapy of Incurable Gastroenteropancreatic Neuroendocrine Tumours
- Dr. Jolie Ringash, Radiation Oncology, Princess Margaret Cancer Centre (Co-Chair)
- Dr. Rebecca Wong, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. Christine Brezden-Masley, Medical Oncology, St. Michael’s Hospital,
- Dr. Erin Kennedy, Surgeon, Sinai Health System
- Dr. Fayez Quereshy, Surgical Oncology, University Health Network

The Treatment of Locally Advanced Pancreatic Cancer
- Dr. Jolie Ringash, Radiation Oncology, Princess Margaret Cancer Centre (Co-Chair)
- Dr. Rebecca Wong, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. Christine Brezden-Masley, Medical Oncology, St.Michael’s Hospital,
- Dr. Erin Kennedy, Surgery, Sinai Health System
- Dr. Fayez Quereshy, Surgical Oncology, University Health Network
- Dr. Robert Gryfe, Surgery, Sinai Health System
- Dr. Jennifer Knox, Medical Oncology, Princess Margaret Cancer Centre

Bone Health and Bone-Targeted Therapies for Prostate Cancer
- Dr. Antonio Finelli, Surgical Oncology, University Health Network

Management of Suspicious Adnexal Mass
- Dr. Jason Dodge, Medical Oncology, Princess Margaret Cancer Centre
- Dr. Anthony Fyles, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. Helen Mackay, Medical Oncology, Princess Margaret Cancer Centre

Adjuvant Care for Stage 1 Ovarian Cancer
- Dr. Jason Dodge, Medical Oncology, Princess Margaret Cancer Centre
- Dr. Anthony Fyles, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. Helen Mackay, Medical Oncology, Princess Margaret Cancer Centre

Systemic Therapy in the Curative Treatment of Head and Neck Squamous Cell Cancer
- Dr. Ralph Gilbert, Surgical Oncology, University Health Network
- Dr. John Waldron, Radiation Oncology, Princess Margaret Cancer Centre

Systemic Treatment of Acute Myeloid Leukemia (AML)
- Dr. R. Michael Crump, Medical Oncology, Princess Margaret Cancer Center
- Dr. Lisa Hicks, Medical Oncology, St. Michael’s Hospital
- Dr. David Hodgson, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. Andre Schuh, Medical Oncology, Princess Margaret Cancer Center

Systemic Treatment for Patients with Advanced Non-Small Cell Lung Cancer
- Dr. Ron Feld, Medical Oncology, Princess Margaret Cancer Center
- Dr. Natasha Leighl, Medical Oncology, Princess Margaret Cancer Center
- Dr. Alex Sun, Radiation Oncology, Princess Margaret Cancer Centre
Radiotherapy with Curative Intent in Patients with Early Stage, Medically Inoperable, Non-Small Cell Lung Cancer
- Dr. Ron Feld, Medical Oncology, Princess Margaret Cancer Center
- Dr. Natasha Leighl, Medical Oncology, Princess Margaret Cancer Center
- Dr. Alex Sun, Radiation Oncology, Princess Margaret Cancer Centre

The Use of Adjuvant Radiation Therapy for Curatively Resected Cutaneous Melanoma
- Dr. Alex Sun, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. David McCready, Surgical Oncology, Princess Margaret Cancer Centre
- Dr. Alexandra Easson, Surgical Oncology, University Health Network
- Dr. Danny Ghazarian, Pathology, University Health Network
- Dr. Anthony Joshua, Medical Oncology, Princess Margaret Cancer Center

Surgical Management of Patients with Lymph Node Metastases from Cutaneous Melanoma of the Trunk or Extremities
- Dr. Alex Sun, Radiation Oncology, Princess Margaret Cancer Centre
- Dr. David McCready, Surgical Oncology, Princess Margaret Cancer Centre
- Dr. Alexandra Easson, Surgical Oncology, University Health Network
- Dr. Danny Ghazarian, Pathology, University Health Network
- Dr. Anthony Joshua, Medical Oncology, Princess Margaret Cancer Center

Magnetic Resonance Imaging for Pre-treatment Local Staging of Prostate Cancer
- Dr. Antonio Finelli, Surgical Oncology, University Health Network
- Dr. Neil Fleshner, Surgical Oncology, University Health Network
- Dr. Kartik Jhaveri, Radiology, University Health Network
- Dr. Sangeet Ghai, Radiology, University Health Network
- Dr. Theo van der Kwast, Pathology, University Health Network

Self-Management Education for Patients with Cancer: Evidence Summary
- Dr. Doris Howell, Nursing, Princess Margaret Cancer Centre

Interventions to Address Sexual Problems in People with Cancer
- Dr. Andrew Matthew, Psychology, Princess Margaret Cancer Centre

Breast Cancer Reconstruction Surgery (immediate and delayed) Across Ontario: Patient Indications and Appropriate Surgical Options
- Dr. Toni Zhong, Surgical Oncology, University Health Network
- Dr. Jon Irish, Surgical Oncology, University Health Network
- Dr. Alice Wei, Surgical Oncology, University Health Network
- Dr. Susan Done, Pathology, University Health Network

Follow-up Care for Survivors of Lymphoma who have Received Curative-Intent Treatment
- Dr. Lisa Hicks, Medical Oncology, St. Michael’s Hospital

Stem Cell Transplantation in the Treatment of Acute Lymphoblastic Leukemia
- Dr. John Kuruvilla, Medical Oncology, Princess Margaret Cancer Centre

Positron Emission Tomography in Hodgkin Lymphoma Patients Undergoing Curative-Intent Treatment
- Dr. Martin O’Malley, Radiology, University Health Network
- Dr. Ur Metser, Radiology/Nuclear Medicine, University Health Network