THE QUARTERLY

COVID-19: Guidance for Primary Care to Resume Cancer Screening

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Ontario Health (Cancer Care Ontario) recommends gradually resuming routine breast and cervical screening tests, consistent with the Ministry of Health's direction, allowing for a gradual restart of deferred services. Ontario Health (Cancer Care Ontario) has developed tip sheets for healthcare providers to guide the reopening of these services. Please email screenforlife@cancercare.on.ca for a copy.

ColonCancerCheck

LifeLabs temporarily stopped mailing FIT kits to patients as of March 23, 2020. Please hold off on sending requisitions for FIT until further notice so LifeLabs can first process the requisitions that have been on hold since March. There will be more guidance about when to restart sending new requisitions for FIT kits as it becomes available.

Ontario Breast Screening Program

Average risk

- OBSP sites are now booking average risk patients, but delays may be expected
- Where capacity is limited, OBSP sites have been asked to prioritize initial screens, annual screens due to family history or history of high risk pathology, one year rescreens due to high breast density over 75%, or over due screens based on length of delay
- A delay of several months for participants on a 2-year recall schedule is still within the CTFPHC guidelines, which recommend screening every 2-3 years

High risk

- Where capacity is limited, priority will be given to initial and overdue screens for those with a known gene mutation that increases breast cancer risk (e.g. BRCA), or had radiation to the chest before age 30
- Some patients may only receive their annual mammogram or a delayed screening breast MRI

Ontario Cervical Screening Program



- If patients are being seen in person and if screening is feasible, there is no need to delay for people who are over the age of 25 and due for screening
- Consider not screening people with a negative human papillomavirus test (HPV) test in the past 5 years

Resume annual screening for people at elevated risk

- Immunocompromised (organ transplant, HIV/AIDS, immunosuppressive medications)
- Discharged from colposcopy with:
 - Persistent low-grade cytology, low-grade squamous intraepithelial lesion (LSIL), or atypical squamous cells of undetermined significance (ASCUS), or
 - HPV positive test and normal or low-grade cytology

Management of cervical screening abnormalities

- People with a first time LSIL or ASCUS should be rescreened with cytology within approximately 12 months. These people how a low 5-year risk of cervical cancer and do not require colposcopy. If repeat testing shows any cytological abornormality referral to colposcopy is recommended
- People who should be referred to colposcopy include:
 - First time LSIL or ASCUS who have had an HPV test and are HPV 16/18 positive
 - First time HSIL, AGC, ASC-H, AIS
 - Any 2 consecutive cytological abnormalities

For providers using the Screening Activity Report (SAR)

Ontario Health (Cancer Care Ontario) continues to update your SAR on a monthly basis. Please sign-in to view your most recent SAR report, as it may assist you in determining which patients are under/never screened or overdue for screening.



REDUCING BARRIERS TO CANCER SCREENING FOR TRANS AND BINARY PEOPLE >

Screening policy for trans people

Transgender people are medically underserved and may not be getting regularly screened for cancer through Ontario's organized screening programs. To address this, Ontario Health (Cancer Care Ontario) has developed a policy with 17 evidence-informed recommendations to support the inclusion of trans people in the OBSP and OCSP, and is committed to implementing the policy.

The policy includes specific screening recommendations for all transgender people, including those who have undergone hormone therapy and/or gender-affirming surgery. It also includes recommendations on the importance of creating safe and inclusive spaces in healthcare settings.

Download the policy here: bit.ly/2QXwk7b

The 4th edition of Sherbourne Health's Guidelines for gender-affirming primary care with trans and non-binary patients is now available for download on the website of Sherbourne's Rainbow Health Ontario (RHO) program: bit.ly/36uCeDr



guidelines for trans care

4th edition of Sherbourne's

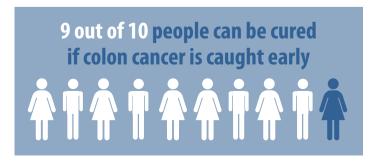
PREVENTION & AWARENESS >



Human Papilloma Virus (HPV) vaccination

The HPV vaccine is available for free in schools for grade 7 girls and boys, as part of the Ontario School-Based Immunization Program, however only 58.8% of students in the Central Region received the vaccine in 2017-2018. Canada's National Immunization Strategy set a target of 90% of 17 year old adoloscents vaccinated with two or more doses of the HPV vaccine. There are many reasons that all students are not being vaccinated. These barriers include concerns about safety of the vaccine, parents prefer to wait until child is older (unaware of importance of getting the vaccine before exposure to HPV), concerns that the vaccine is too new, and parents feel that their child getting the vaccine will encourage sexual activity.

It is important to remind parents the importance of the HPV vaccine for cancer prevention. The vaccine prevents cervical, vulvar, anal, penile, and mouth and throat cancers. Teens (born after 2003) can also visit a catch up clinic through Public Health to get their HPV vaccination for free, while still eligible. PHUs also offer the vaccine at cost. For more information on HPV and the vaccine, refer your patients to HPVinfo.ca. Eradication of cervical cancer is possible by vaccination, screening, and timely follow-up of abnormal results.





Talk to your eligible average-risk patients about getting screened for colorectal cancer with FIT. Not sure which patients to talk to? Access your Screening Activity Report (SAR) for a summary of which of your patients are eligible and due for their colorectal screening.

Email us at icsregional@southlakeregional.org for CCAM resources or if you would like support to increase your colorectal screening rates.

NEW INFORMATION & RESOURCES >

Cancer Care Ontario joins Ontario Health

Cancer Care Ontario, along with five other agencies and Local Health Integrated Networks (LHINs), are now part of Ontario Health. Cancer Care Ontario programs and services remain unchanged.



To learn more about Ontario Health, visit ontariohealth.ca For Cancer Care Ontario resources, continue to visit cancercareontario.ca

NEW: Vaping and Cannabis Evidence Summaries

Cancer Care Ontario (Ontario Health) released a Vaping Evidence Summary and Cannabis Evidence Summary in November 2019 for health care providers working in cancer and primary care. These will be accessible through the CCO website after February 7th, 2020.

Vaping products including e-cigarettes

This evidence summary addresses the observed and potential health impacts of vaping products, including the development of vaping dependence, vaping's impact on youth smoking rates and vaping as a smoking cessation aid.

Cannabis and cannabinoids: cancer risk and use to manage symptoms

This document discusses the evidence on the cancer risk of cannabis and cannabinoids (medical and non-medical), and their use in managing cancer symptoms.



Screening Activity Report (SAR) and the MyPractice: Primary Care Report

Health Quality Ontario and CCO, both now part of Ontario Health, are developing a plan for a single report that will make it easier for you to access confidential data on your performance and patients. As the first step in the process, if you currently receive these reports, you will start receiving notification for both reports in the same email. For now, each report will remain separate with their formats and indicators unchanged.

If you do not currently receive the SAR and would like to sign up, you will first need to register for ONE ID by visiting members.cpso.on.ca and clicking on "Getting an eHealth Ontario ONE ID". Once you have an account, email our team at icsregional@southlakeregional.org to gain access to your SAR.

For more information on the SAR, visit cancercareontario.ca/SAR

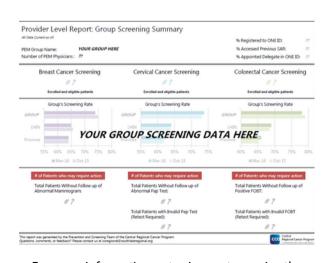
If you do not currently receive the MyPractice: Primary Care Report, visit www.hgontario.ca/pcreport for more information, or to sign up.

Provider Level Report: Group Screening Summaries Available

Do you want to improve your group screening rates?

Our team can summarize screening data and prepare a Group Screening Summary for your practice - teams of five or more (PEM physicians only). The purpose of this summary is to provide you with a snapshot of how the group is performing compared to the region.

This document includes group data for the three provincial programs and details such as your practice's number of enrolled and eligible patients, as well as the number of patients that may require additional follow-up for an abnormal screening test. In addition, it will indicate which physicians within your group are registered to ONE ID, who actively access their SAR, and have an assigned delegate.



For more information or to sign up to receive these summaries quarterly, email our team at icsregional@southlakeregional.org

OTHER PREVENTION AND SCREENING UPDATES >



Future of OCSP: HPV Testing

Ontario Health (CCO) is working towards making changes to the OCSP (Ontario Cervical Screening Program) to implement HPV testing as the primary screening for cervical cancer screening. There are several program and system changes involved with the transition and this will take time. Stay tuned for updates!

Quality Management Insider: Spotlight on Cervical Screening and Colposcopy

The Quality Management Insider is developed by Ontario Health (CCO)'s Analytics team and shares key cancer screening findings. Please find attached with this newsletter the November 2019 issue focusing on cervical screening and colposcopy.

If you do not receive this newsletter via email, please email icsregional@southlakeregional.org if you would like to get a copy of the Quality Management Insider.

OBSP Education Day 2019



The Prevention and Screening team held our 8th annual OBSP Education Day on November 7, 2019, at Southlake Regional Health Centre. We had 63 attendees consisting of radiologists, clerks, managers, and technologists from our OBSP sites across the region join us for the day.

Sessions included updates on cancer screening, person-centred care, a breast cancer survivor sharing her cancer journey, breast cancer treatment, and genetics and high-risk screening. We received wonderful feedback and it was an informative and enjoyable event! Thank you to all the OBSP sites who attended!