

# The Quarterly

A Newsletter for Primary Care Providers

## A message from... Dr. Erica Mantay



Erica Mantay, MD, FRCSC  
Regional Colposcopy Lead –Central LHIN  
Regional Cancer Screening Program

*Understanding why the participation rate for eligible women is approximately 65% might help us reduce obstacles to screening*

I am happy to announce my recent appointment as Regional Colposcopy/Cervical Screening Lead for the Central LHIN. I am a generalist Obstetrician Gynecologist who has practiced in Newmarket since 1995.

I anticipate the next five years will bring significant changes to how we screen for cervical cancer and I will be happy to help primary care providers and colposcopy providers as we transition.

It is anticipated that HPV high risk screening will, in the near future, become the primary screening test for cervical cancer for women 30 years and older. Cytology will be the secondary screen and colposcopy will continue to be the diagnostic test for investigation of abnormal screening or abnormal cervical exam. Revamping the screening schedule and lab processes will depend on education of both providers and women who participate in

screening, and reliable information systems for recall and follow-up.

Colposcopy services and treatments for pre-invasive disease in Ontario have been provided in community office settings and hospital clinics. CCO aims to increase accessibility of colposcopy services and increase quality assurance measures to ensure that our practice is in accordance with current evidence based guidelines. It will be my role to lead some of these changes and help to keep providers informed as they are implemented.

Perhaps most important of all, I hope that we can work together to find more approaches to recruit the women who are under screened or never screened. Understanding the reasons why the participation rate for eligible women is only approximately 65 per cent overall might help us reduce obstacles to screening and ultimately save more women from preventable morbidity and mortality.

## “Why I screen for cancer” video

See the NEW “Why I screen for cancer” video at [www.youtube.com/CentralRCP](http://www.youtube.com/CentralRCP). This video highlights the three organized screening programs in Ontario: breast, cervical and colon. Please share it with your colleagues, community partners, friends and family. If you are interested in using this video in your office, or have any questions please contact [ICSRegional@southlakeregional.org](mailto:ICSRegional@southlakeregional.org) or call 905-895-4521 x 6065.



## Recipients of regional quality improvement funding

*Continued on page 3...*

The Regional Cancer Screening Program’s (RCSP) request for applications for funding was a resounding success. The RCSP is funding five quality improvement projects throughout the LHIN and a brief description of each project can be found on page 3. Look for information and resource sharing resulting from these projects in the coming months.

### Inside this issue:

Screening partners update	2
Smoking cessation and the RCP	2
Expanding the SAR	2
QI funding update	3
Oncology day 2014	3
Mammoth	4
Profile—Mike Caine	4

## Screening partners—update

In the past three months, Dr. Marla Ash and members from the RCSP had the opportunity to visit a number of primary care providers' (PCP) practices in the region. The goal of meeting with regional stakeholders was to share cancer screening information and to better understand barriers to cancer screening specific to each patient demographic.



The common themes gathered from these visits were:

- ◆ Not enough time to discuss screening during office visits
- ◆ Patients don't like having the screening tests done
- ◆ FOBT kit instructions are time consuming to explain and difficult for patients to follow
- ◆ Data quality is an issue for many practices
- ◆ Difficulty optimizing EMRs to identify patients who are due or overdue for screening

The RCSP considered these central themes when allocating funds for quality improvement projects. Please see page 3 for a summary of quality improvement projects currently underway in the Central LHIN.

## Smoking cessation and the Regional Cancer Program

In order to align with the Ontario Cancer Plan 2011-2015, regional cancer programs have been allocated funding by the MOHLTC and CCO to implement smoking cessation activities within ambulatory care clinics.

The Central Regional Cancer Program is implementing a smoking cessation program starting at Stronach Regional Cancer Center (SRCC). Using the 5A's approach, all new patients to the centre are screened for their smoking status. If found to be a smoker or recent quitter, they are provided with support to help them get the most out of their cancer treatments by living smoke free. Along with support literature, patients are encouraged by their team to speak with their primary care provider or pharmacist about quit planning and smoking cessation pharmacotherapy options.

**If you receive a smoking cessation referral from a patient being treated at SRCC, please consider the following 5A's:**

- ◆ **Ask** your patient about their current smoking status, history and exposure to passive smoke
- ◆ **Advise** your patient of the benefits of quitting smoking and how they may go about quitting
- ◆ **Assess** your patient's readiness to quit
- ◆ **Assist** your patient with quit planning support based on their level of readiness to quit
- ◆ **Arrange** additional supports and follow-up quit plans for your patient

*For more information about the smoking cessation and the Regional Cancer Program, please see our video at [www.southlakeregional.org/Default.aspx?cid=1207&lang=1](http://www.southlakeregional.org/Default.aspx?cid=1207&lang=1)*



## Expanding the Screening Activity Report (SAR)

Did you know.....

- ◆ The SAR is expanding to include all three screening programs: breast, cervical and colon
- ◆ Sixty-six per cent of primary care providers in the Central LHIN are registered for their SAR but only six per cent of PCPs actually access their report
- ◆ Primary care providers who are registered and access their SAR have higher screening rates
- ◆ You can add a delegate (usually clinical/office staff) to manage your SAR

*If you have not yet registered for your SAR or if you are having difficulty accessing your report, please contact Kate Smith at [KASmith@southlakeregional.org](mailto:KASmith@southlakeregional.org)*

## Regional cancer screening—quality improvement funding recipients

Thank you to all of the primary care providers who acted on our call for project proposals, as featured in the January 2014 issue of the Quarterly newsletter. The RCSP has selected five proposals to be funded in the 2014/2015 fiscal year.

All of the chosen projects focus on increasing cancer screening rates in the under/never screened patient population in the Central LHIN. As a condition of funding, the projects must have measurable outcome plans that will be shared with you in future issues. Sharing successes will help to ensure continued outreach to those in our community who are in need.

### **Southlake FHT**

The team will examine root causes of both patient and systemic barriers to colon cancer screening by:

- ◆ Analysing current barriers to screening
- ◆ Implementing reminders, recalls and targeted health promotion activities

### **New Family Medicine Network FHO**

The organization plans to increase colon cancer screening through the use of screensavers by:

- ◆ Displaying evidence based messaging on colon cancer
- ◆ Including translated screening materials in Russian, Persian and Urdu

### **North York FHO**

The organization will target under/never screened patients who are due for breast, cervical and colon cancer but have not had a reminder letter since 2011 by:

- ◆ Researching the benefit of additional reminders over and above the two currently sent
- ◆ Initiating an annual reminder letter for patients overdue with their routine cancer screening

### **Carefirst FHT**

The team plans to increase colon cancer screening rates in its immigrant patient population by:

- ◆ Establishing personalized prevention plans to assess risk
- ◆ Providing multilingual FOBT screening and outcomes education in Tamil and Chinese
- ◆ Calling all eligible patients who have not completed colon cancer screening

### **Markham FHT**

The team plans to increase the number of wellness visits provided to patients by:

- ◆ Reviewing best practice guidelines for wellness visits
- ◆ Updating the current wellness visit posters
- ◆ Increasing general health discussions generated from the reinvented wellness posters

## Oncology Day 2014—save the date: Friday, November 14th

### **3<sup>rd</sup> Annual Central LHIN Oncology Day for Primary Care: Oncology Update 2014**

As the regional cancer centre for the Central LHIN, the Stronach Regional Cancer Centre at Southlake invites our LHIN partners to participate in the 3<sup>rd</sup> Annual Central LHIN Oncology Day. This educational event is open to family physicians, nurse practitioners, internists, other specialists, nurses, and allied health professionals with an interest in the care of patients with a cancer diagnosis.

**Friday, November 14, 2014**

**Angus Glen Golf Club in Markham**

7:30 – 8:30 a.m. Breakfast and Registration

8:30 – 4:30 p.m. Conference (includes breaks & lunch)

Program and registration details to follow. We are in the process of applying for CME accreditation.

### **Needs Assessment**

We would like to hear from you! To determine your level of interest on specific topics, please refer to the following link to complete a brief survey. This should take approximately 5 minutes to complete, and will be helpful in addressing the needs of our primary care providers in caring for oncology patients: [www.surveymonkey.com/s/D7VJSDX](http://www.surveymonkey.com/s/D7VJSDX). Thank you!

*For additional information please contact: Danielle De Castro, Administrative Assistant  
ddecastro@southlakeregional.org; 905-895-4521 x 6366*

## Mammothon—May 7, 2014

On May 7, six OBSP sites in the region are participating in *Mammothon*, a one-day event to encourage eligible women who have never been screened or who are under screened for breast cancer to walk-in for a mammogram without an appointment.

**Why:** To serve our under/never screened women.

**Who:** Participating OBSP sites include *Bluewater Imaging, MacKenzie Health, Markham Stouffville Hospital, North York General-Branson site, Southlake Regional Health Centre, and Stevenson Memorial Hospital.*

To learn more visit [www.facebook.com/Mammothon](http://www.facebook.com/Mammothon)

## Profile—Mike Caine, Coordination Advisor—Data Performance, RCSP



### Mike's Profile

Mike is the Coordination Advisor – Data Performance and comes to the RCSP with a wealth of experience from his previous roles at Southlake and COHPA working in Finance and at the Stronach Regional Cancer Centre as a Business Analyst. Throughout his educational and professional career, Mike has developed a skillset for analysing, reconciling and report writing of financial and clinical information. Mike's goal is to utilize these strengths to provide reliable and quality data to all levels of the regional program. Outside of work, Mike can be found at baseball fields, hockey arenas and golf courses around the city.

### Questions for Mike

#### What inspired you to work in healthcare?

*From being exposed to the financial and business side of hospital operations early in my healthcare career I was able to recognize the importance of data in a healthcare setting. The increasing emphasis on data is evolving and reshaping the delivery and quality of patient care.*

#### What are the most rewarding aspects of your job?

*Working within a regional program that is highly dedicated and passionate along with providing meaningful data to help make informed decisions pertaining to cancer screening.*

#### What have you learned about cancer screening that others may not know?

*Despite the clear evidence that regular cancer screening and early detection can save lives, there is still a high percentage of the population that fall in the category of under/never screened.*

### Stay tuned... The July 2014 issue will feature:

- Meet a new Regional Clinical Lead
- Pap clinics and the community
- PCP team education day 2014
- New screening dashboard
- FHT profile
- FOBTFlu clinics

*As always, your stories and feedback are encouraged.*

*Please forward your ideas or submissions to:*

*ICSRegional@southlakeregional.org*

*If you would like to receive this email electronically, please let us know by emailing:*

*ICSRegional@southlakeregional.org*

### Remember, your patients listen to your advice!

ONLY 1 IN 10 PATIENTS  
WILL CHOOSE TO SCREEN  
FOR CANCER  
ON THEIR OWN.


HELP INCREASE THESE ODDS.

Evidence shows that with a doctor's encouragement, up to 61% of people will get screened. So talk to your patients about screening for breast, cervical, or colorectal cancer.

visit: [cancercare.on.ca/screenforlife](http://cancercare.on.ca/screenforlife)

**Screen for Life**  
Cancer screening sees what you can't

- Breast
- Cervical
- Colorectal



**Ontario**  
Cancer Care Ontario  
Action Cancer Ontario

Paid for by the Government of Ontario