# The difference partnerships make

Canada's cancer control strategy in action



### Cancer affects all of us.

Nearly 1 in 2 Canadians will develop cancer in their lifetime.<sup>1</sup>

177,800 people are diagnosed with cancer each year, at an estimated cost of \$6.58 billion.<sup>2,3</sup>

1 in 4 Canadians will die from cancer.<sup>4</sup>

75,000 lives are lost to cancer each year.5

Cancer is a single word, but it represents more than 200 different diseases. With a large-scale population health challenge as complex as cancer, we need to make significant headway on many fronts to have an impact.

Out of this need, the Canadian Partnership Against Cancer was born. It represents the work of hundreds of cancer professionals and patients across the country who, over many years, developed a cancer control strategy for Canada and then advocated successfully for its funding.

Working with the cancer and broader health communities, the Partnership's role is to coordinate the cancer control work taking place in different parts of the country, with the goal of reducing the impact of cancer on Canadians. No single cancer organization in the country carries such a broad mandate.

Understanding that cancer is the leading cause of early death in Canada – and the number one health concern for Canadians – the Partnership has taken up the cancer control challenge with a sense of urgency. Already the early results of many initiatives are having an impact on how cancer care is planned and delivered.

Together with our partners, we are...

<sup>&</sup>lt;sup>1</sup> Canadian Cancer Society's Steering Committee on Cancer Statistics. Canadian Cancer Statistics 2011.

Toronto, ON: Canadian Cancer Society; 2011.

<sup>&</sup>lt;sup>2</sup> lbid.

<sup>&</sup>lt;sup>3</sup> Economist Intelligence Unit Limited, Breakaway: The global burden of cancer - challenges and opportunities (2009).

Note: costs include medical, non-medical and productivity losses

<sup>&</sup>lt;sup>4</sup> Canadian Cancer Society. General Cancer Statistics at a glance, May 2011. www.cancer.ca

<sup>&</sup>lt;sup>5</sup> Canadian Cancer Society's Steering Committee on Cancer Statistics. Canadian Cancer Statistics 2011. Toronto, ON: Canadian Cancer Society; 2011.



# Saving lives by collaborating on cancer and chronic disease prevention

Will he get cancer? Will his children? Together with our partners, we are working to prevent cancer and to understand why some people develop it and others do not.

Canadians are seeing early benefits from their national cancer strategy in the form of innovative initiatives that aim to prevent cancer and detect the disease early, when it can be treated more effectively. By bridging provincial and territorial efforts to leverage the expertise that already exists across the country, partner collaborations are propelling meaningful change. The following initiatives are just a few examples demonstrating how the whole is greater than the sum of its parts:

■ The Canadian Partnership for Tomorrow Project will help researchers unlock the secrets of why some people develop cancer and other chronic diseases, and others do not. As the national funder and coordinating body of this project, the Partnership is bringing together five regional studies – in British Columbia, Alberta, Ontario, Quebec and Atlantic Canada – to recruit Canadians between 35 and 69 years of age and track them over decades. The project will result in a "population laboratory" of a size and scale not previously seen in Canada. Funding for this type of long-term population research can be difficult to secure, but with support from the Partnership and regional partners this study will leave a legacy for future generations of Canadians.

■ Coalitions Linking Action and Science for Prevention (CLASP) is mobilizing research, practice and policy professionals to work together to improve the overall health of Canadians. Recognizing that lifestyle and environmental factors can influence the development of many chronic diseases, including cancer, CLASP has engaged more than 60 organizations in seven distinct projects that tackle different disease prevention priorities - including nutrition, physical activity, body weight, tobacco use, and environmental exposure to air pollution from automobiles. With lead funding from the Partnership and co-funding from the Public Health Agency of Canada and the Heart and Stroke Foundation, this cross-organizational, cross-country approach to chronic disease prevention accelerates action to reduce common risk factors.

■ The Colorectal Cancer Screening Initiative is endeavouring to improve screening rates for colon cancer, the second-leading cause of cancer death, through the expansion of population-based screening programs across the country and through focused awareness initiatives. Work in this area includes hosting the National Colorectal Cancer Screening Network, which is composed of screening professionals representing every province and territory, as well as national patient and professional organizations. As a result of collaborations stemming from the Network, all 10 provinces have announced screening programs, a substantial increase from the three programs announced prior to the Initiative's establishment. The Initiative also includes colonversation.ca, which was developed to help inform Canadians about early detection.

### Maximizing the impact of cancer care by supporting informed decisions

How will better information. help with her care? Quality data enables health system planners to make decisions based on evidence so patients can benefit from the best possible care.

Optimizing the cancer control system for Canadians is at the heart of the Partnership's work. But without good data and related tools that provide the basis for decision-making, it is difficult for cancer agencies and other health partners to know where to focus their efforts. By compiling and building on existing cancer information from across the country, the Partnership is helping to provide a sharper picture of cancer control in Canada so health system planners are better supported to focus their improvement efforts and plan effectively for the future. Some of the work underway is:

- System performance analysis and reporting focus on the needs and performance of the cancer control system. Integrating cancer-related data from across the country, this highly collaborative approach provides cancer agencies, health ministries and other stakeholders with a national mechanism for measuring progress. Annual reports on system performance are helping to shape effective cancer control planning and delivery.
- The Cancer Risk Management Model helps health planners to project the long-term impact of cancer control initiatives in their jurisdictions for example, the impact of adopting one cancer screening test over another, or of adopting a new drug over a standard one. Modelling and comparing the impact of different scenarios from both an economic and disease burden perspective helps determine where health dollars can be used most effectively. The platform currently focuses on lung and colorectal cancer. It will soon expand to include breast and cervical cancer.
- A \$20 million infrastructure and technology investment by the Partnership, the National Staging Initiative engages provinces, territories and national partners, including Statistics Canada, in systematically collecting standardized, population-based stage information for the four most common cancers prostate, lung, breast and colorectal to show how early or late they are diagnosed and track whether this is changing over time. To ensure reports are complete and evidence based, this initiative is also seeing to the implementation of standardized pathology reporting across the country. As a result, cancer system decision-makers can identify areas of greatest need so Canadians benefit from more targeted investments in cancer screening and treatment.

# Promoting greater efficiencies and better care by acting on knowledge

Will her cancer be caught early? Innovative approaches to sharing information will result in her symptoms being identified.

With multi-jurisdictional delivery systems, a vast geography and a highly diverse population, Canada's federated approach to health is complex. In a specialized area like cancer, knowledge is constantly evolving and the sheer amount of it can be overwhelming, making it difficult to pick out what's most important. Accelerating uptake of cancer knowledge is central to the Partnership's mandate to ensure that people working or interested in cancer control can find and share trusted information in a timely and efficient way. Examples include:

- Cancerview.ca enables people working in and affected by cancer to benefit from the best available cancer control information from across Canada as well as collaborative tools to help them work more effectively. More than 140 groups are using cancerview.ca as a hub to work virtually together, and more than 30 organizations are profiled on the site as partners with their content accessible through a simple search tool. Prevention policies, clinical practice guidelines, clinical trials, patient videos and palliative and end-of-life care resources are among the many tools available.
- The **@YourSide Colleague® Cancer Care Course**, a joint initiative of the Partnership and Saint Elizabeth Health Care, provides professional development and education to community-based health providers in more than 280 rural and remote First Nation communities and organizations. It is being expanded to reach more than 600 communities and organizations across Canada. Accessed online, the course overcomes geographic and cultural barriers as well as isolation challenges: it enables participants to share information virtually on topics such as current cancer control programs, common treatments and symptom management, community leading practices, and First Nation approaches. It is credited with helping community health workers to identify people at risk.
- The Partnership is actively collaborating with surgeons across the country to implement **synoptic reporting**, which refers to the use of content and informatics standards. By developing and embedding pan-Canadian quality standards into reporting tools, clinicians will be able to assess and compare their practice and outcomes against best evidence and with those of their colleagues practising in other areas of the country.
- Numerous international studies are assessing whether screening tests are effective at detecting cancer to reduce deaths and the results of these studies can raise important questions for screening practices. To respond to pending study results, the Partnership's **Anticipatory Science** initiative convenes ad hoc panels of experts from across the country who help the cancer community quickly come to a shared understanding of the implications of new studies. This approach promotes streamlined, timely synopsis and distribution of key information and equips provinces and territories to explore policy consequences.

### Improving the experience of Canadians affected by cancer



Cancer's emotional toll is huge. The thousands of Canadians newly diagnosed with cancer every year must learn to navigate a complex care system, consider treatment options, deal with psychosocial and practical challenges, and adjust to a post-treatment "new normal." Improving how the health system addresses these human needs can reduce the cancer burden for individuals, families, our communities and our economy as a whole. These are just a few of the initiatives driving change:

- Research shows that 35 to 40 per cent of cancer patients feel enough emotional distress to benefit from additional support. While common, this distress can make coping with cancer diagnosis and treatment that much more difficult. Organizations in six provinces are involved in **Screening for Distress**, which is referred to as the sixth vital sign. This Partnership initiative is implementing a survey tool that facilitates rapid identification of a patient's key concerns and enables health-care professionals to conduct further assessments or make appropriate referrals. Participating regions are working toward a goal of 90 per cent of patients being screened, and in under three years have already screened more than 15,000 patients.
- Physical, emotional and practical challenges from employment, finances and psychological struggles to the fear of recurrence often persist long after cancer is diagnosed and treated. Through numerous **Survivorship** projects the Partnership, together with survivors and health-care professionals, is developing approaches to support the needs of survivors as identified and prioritized at a national workshop. Projects include care plans to empower patients to manage their own care, transition programs to support the transition from active treatment to post-treatment care, and professionally led online support groups to offer real-time counselling to patients and families.
- Adolescent and young adult cancer patients and survivors often fall through the cracks of a system that focuses on cancer in children or adults, but does not provide specialized care for this in-between group. To understand why and develop solutions to better meet the unique needs of young cancer patients, the Partnership has co-funded a task force to evaluate care, assess how survivors are monitored over time, develop recommendations for research priorities, and establish guidelines and recommendations to improve outcomes and quality of life.

The initiatives highlighted here are only a sampling of the Partnership's work across the cancer control continuum. Open up this page to see a fuller picture of these and other initiatives underway to change the cancer landscape in Canada. For complete information, visit partnershipagainstcancer.ca.

### Charting our progress

### Long-term impact

Fewer people diagnosed with cancer, enhanced quality of life for those diagnosed with cancer and lower numbers of cancer deaths.

### Mid-term impact

Coordinated efforts bring greater efficiencies and effectiveness to cancer control in Canada.

### We are here

### Early impact

Initiatives yield preliminary results as they become part of policy and practice. Strategy is renewed for a second five-year mandate starting in 2012. (2011)

### Implement / Adapt / Share

Initiatives move from the planning stages into action. (2008–2010)

### Build

More than 40 groups, committees and networks collectively representing 150+ partner organizations collaborate to move from planning to evidence-based best practice implementation. (2007–2008)

### Strategize

Working from the strategy as a blueprint, the Partnership prioritizes activities with the greatest potential for impact within its mandate and engages partners from across Canada's cancer community. (2007)

### Establish

The federal government funds the strategy with \$250 million over five years and creates the Canadian Partnership Against Cancer to implement it. (2006–2007)

### Convene

700 cancer leaders, advocates, patients and survivors across Canada develop a national cancer control strategy and advocate for its funding. (2002–2006)

### **Shared Commitment**

Harnessing the collective expertise and insights of researchers, clinicians, provincial and territorial cancer agencies and health ministries, patient groups and non-government organizations, the Partnership is a uniquely Canadian approach to a global health challenge. Working with the cancer and broader health communities to improve consistency and coordination across the entire cancer system, the Partnership's goals are to ensure:

- fewer people are diagnosed with cancer
- · more people are surviving cancer
- a better quality of life for people affected by cancer.

Approaching the end of its first mandate, the Partnership is undertaking groundbreaking work – work that could not happen without the commitment and collaboration of hundreds of people who are advancing and improving cancer control across the country. Their efforts have transformed Canada's first cancer control strategy from a plan into action and impact.

To ensure that the right expertise and perspectives inform the Partnership's work, more than 40 networks have been established. With the involvement of more than 400 people across Canada working in or affected by cancer – including clinicians, system leaders, researchers, patients and survivors – these networks are contributing to the advancement of the Partnership's initiatives across all priority areas.

Active initiatives as of December 2011 are:

### **Primary Prevention**

- Coalitions Linking Action and Science for Prevention (CLASP)
- Canadian Platform to Increase Usage of Real-World Evidence (CAPTURE)
- CAREX Canada
- Healthy Public Policy Knowledge Exchange

### Research

- Canadian Partnership for Tomorrow Project
- Translational cancer research
- Pan-Canadian Cancer Research Strategy

### Screening

- Colorectal Cancer Screening Initiative
- Cervical cancer control
- Anticipatory Science

### **Cancer Guidelines**

- Synoptic Surgery Reporting
- Guidelines CAN-IMPLEMENT/CAN-ADAPTE
- Capacity Enhancement Program
- Cancer Guidelines Resource Centre

### Surveillance

- National Staging Initiative
- Surveillance and Epidemiology Networks

### **Cancer Journey**

- Survivorship
- Integrated person-centred care
- Palliative and end-of-life care
- Guidelines, Education and Practice

### Knowledge Management

- Cancer Risk Management Model
- Cancerview.ca

### **Quality Initiatives and System Performance**

- System performance analysis and reporting
- Diagnostic immunohistochemistry
- Endoscopy quality
- International Cancer Benchmarking Partnership
- Ambulatory Chemotherapy
- Canadian Partnership for Quality Radiotherapy

www.partnershipagainstcancer.ca