

Regional Cancer Plan 2024-2028



Prepared By
**The Champlain Regional
Cancer Program**



Table of Contents

Message from PFAC and RVP	03
Ontario Health East Champlain Region	05
Regional Cancer Statistics and Service Trends	06
Regional Cancer Program Leadership Team	08
Regional Cancer Program Hub-and-Spoke	09
Regional and Indigenous Priorities	10

OCP VI 2024-2028	12
Core Engagement Channels	13
Regional Cancer Plan Strategy	14
Regional Cancer Plan Strategic Goals	16
Conclusion and Contact Info	21

OCP V 2019-2023 Close Out	22
OCP V Overview	23
Pandemic Recovery Aims	24
Our Accomplishments 2019-2024	25
Credits	31



A message
from the
Champlain
Regional
Cancer
Program
Patient and
Family
Advisory
Council
(PFAC)



Susan Smith

Cancer Centre
Volunteer and PFAC
Member

For the past 16 years, I have volunteered at the Cancer Centre and for 15 years, I have served on the Patient and Family Advisory Council. I have witnessed the profound impact of early detection, personalized treatment, and holistic support on patients and families. I have seen survivors celebrate milestones, caregivers draw strength from our community, and medical professionals bring hope with cutting-edge research. Each day, the Cancer Program's vision transforms lives, proving cancer is a challenge we can overcome together.

On behalf of the PFAC, we are honored to have contributed to the Champlain Region's Strategic Plan. This plan emphasizes collaboration, patient-centered care, and innovative treatment and support services, all crucial for those navigating cancer care. Reece, Julie, and Michael, as senior leaders, ensure patient, caregiver, and healthcare professional voices shape the plan, addressing the region's real needs with practical, innovative solutions.

This Strategic Plan is more than a framework—it's a community commitment we, as patients and caregivers, deeply value. As a volunteer, I'm inspired by the team's tireless efforts and the courage of those affected by cancer.

With heartfelt gratitude,

- Susan Smith



Message from the RVP

This Regional Cancer Plan was developed through extensive consultation among health care providers, partner organizations, patients and family members, and others who are directly involved and/or impacted by cancer care. It reaffirms our commitment to excellence and lays out a comprehensive roadmap for future growth and innovation.

This direction will help us to transform service delivery to optimize regional health system resource utilization, enhance processes to support practice changing research and improve access to data that will not only measure our performance, but allow us to be flexible and make informed adjustments as needed.

We continue to remain committed to high-quality, innovative, and compassionate patient-centered care. This report outlines our new strategy and highlights past achievements that have significantly impacted cancer care and set a solid foundation for the future.

Reece Bearnes

Executive Vice-President, Clinical at The Ottawa Hospital
Regional Vice-President, OH (CCO) Champlain Regional
Cancer Program





Population:
1.5 million

East-West Distance:
Approximately 300 km

The Champlain Region is divided into five sub-regions, each with distinct characteristics that are important to consider when creating a regional cancer plan.

- **Western Champlain:** This rural sub-region includes areas such as Arnprior, Carleton Place, Kemptville, Renfrew, Pembroke, Petawawa, and the Pikwàkanagàn First Nation.
- **Western Ottawa:** The fastest-growing sub-region in Champlain, it includes Kinburn, Carp, Kanata, Stittsville, Barrhaven, and Manotick.
- **Central Ottawa:** This urban sub-region is the most populated, and includes Bayshore, Nepean, Downtown Ottawa, Vanier, and Riverside South.
- **Eastern Ottawa:** Extending from Cumberland to Osgoode, with about half residing in Orléans.
- **Eastern Champlain:** This sub-region includes Cornwall, the Mohawk Nation of Akwesasne, Hawkesbury and surrounding areas.



Indigenous Population

46,765 identified as Indigenous (2021).
CH RCP operates on unceded land of the **Algonquins** of **Pikwàkanagàn First Nation** and **Mohawks of Akwesasne**.
TOH provides tertiary care for the **Qikiqtaaluk Region** of Nunavut



Household Marginalization

Central Ottawa has the **highest quintile** for household and dwelling-related marginalization (2021)



Age and Labor Marginalization

Eastern and Western Champlain populations report high levels of **age and labor force-related marginalization**, ranking in the **2nd highest quintile** (2021)



Racialized Marginalization

The populations of **Central, Western, and Eastern Ottawa** report the **2nd highest level** of marginalization related to **racialized and newcomer communities** (2021).

FRANCOPHONE



18.4% of Champlain residents consider themselves **francophones**, with the majority living in **Eastern Ottawa and Champlain** (2016).

VISIBLE MINORITY



24.9% of Champlain residents identify as a visible minority (2021).



1.58M

Champlain Population
by 2030



11%

10 Year
Population
Growth

Prevention and Screening

341,000

Ontario Breast Screening
Program (OBSP) Eligible
40-74 year old females

429,000

Ontario Cervical Screening
Program (OCSP) Eligible
25-69 year old females

478,000

ColonCancerCheck (CCC)
Screening Program
Eligible 50-74 year olds

Cancer Incidence

11,300

Cancer Incidence in 2030

30% ↑↑↑

Projected 10-Year Rise in
Diagnosed Cancer Cases

Cancer Incidence by Disease Site (10-Year Projection Since 2020)



Breast
1,474 (2030)
↑↑ 22%



Prostate
1,197 (2030)
↑↑ 25%



Melanoma
627 (2030)
↑↑ 39%



Lung
1,431 (2030)
↑↑ 20%

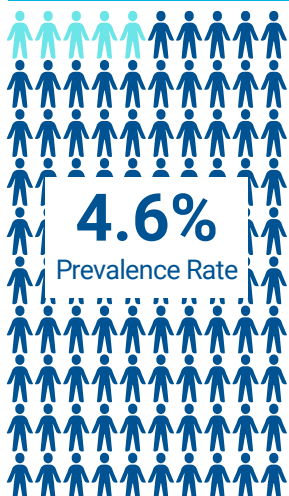


Colorectal
1,094 (2030)
↑↑ 21%



NH Lymphoma
652 (2030)
↑↑ 43%

Cancer Prevalence



65,525

People Living with
Cancer (2020)

Survival and Mortality



Champlain 5-year Relative Survival Ratio (2016-2020)



Ontario 5-year Relative Survival Ratio (2016-2020)

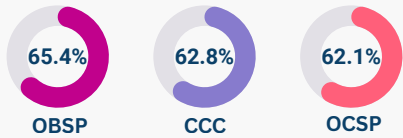
2,985 Champlain Region
Cancer Related Deaths (2020)

Cancer Screening, Surgery and New Cases Seen

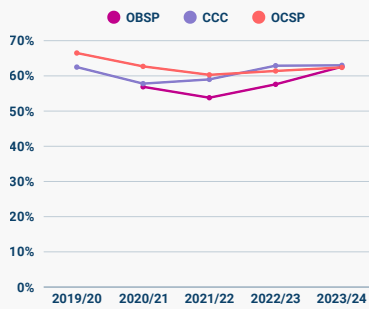
Participation in cancer screening programs is steady, with rates of 65.4% for OBSP, 62.8% for CCC, and 62.1% for OCSP. In FY2024/25, cancer surgeries totaled 6,192 cases, reflecting a 11% increase from FY19/20. Meanwhile, new cases at the RCC rose to 9,293, a 20% increase, highlighting the growing demand for diagnostic and treatment services.

Cancer Screening

FY24/25 Cancer Screening Participation Rates

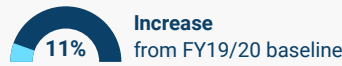


Champlain Region Cancer Screening Participation Rates

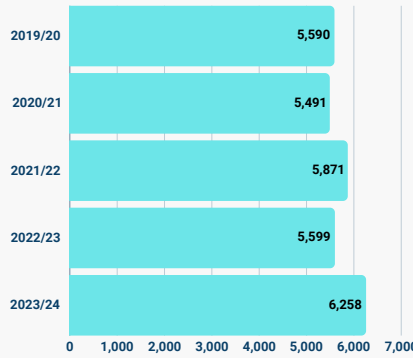


Cancer Surgery

6,192 FY24/25 RCP Cancer Surgery Completed Cases

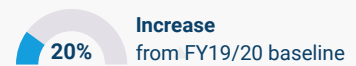


Champlain RCP Cancer Surgery Volumes

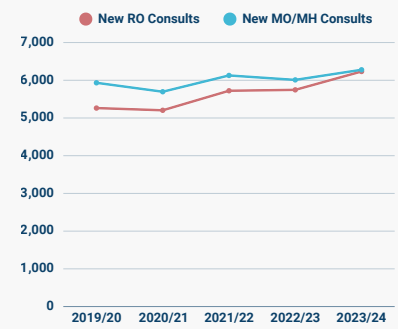


RCC New Cases

9,293 FY24/25 New Cases Seen at the RCC



The Ottawa Hospital RCC New Cases Seen

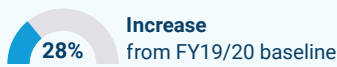


Cancer Treatments

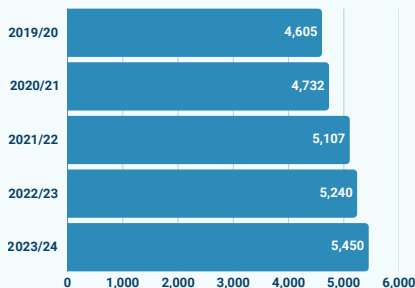
Cancer treatment volumes in the Champlain RCP have significantly increased since the FY19/20 baseline. Systemic therapy cases rose by 28% to 5,882, radiation therapy by 26% to 5,939, and cell therapies expanded to 293 episodes, also a 26% increase. The growth in cancer and cellular therapy activities and stable transplant activity emphasize the need for strategic planning to address evolving patient demands.

Systemic Therapy

5,882 FY24/25 Anti-Neoplastic Systemic Suite Treated Cases

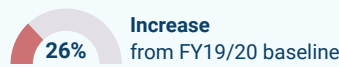


Champlain RCP Anti-Neoplastic Systemic Suite Treated Cases

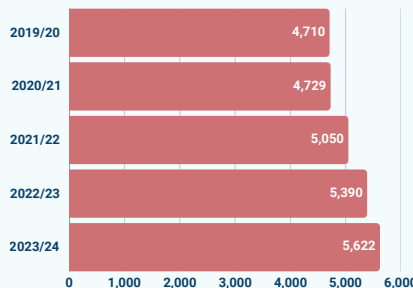


Radiation Therapy

5,939 FY24/25 Radiation Treated Cases

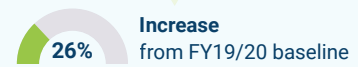


Champlain RCP Radiation Treated Cases

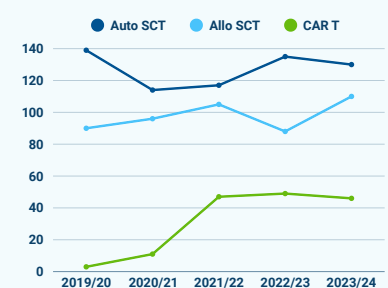


Cell Therapies

293 FY24/25 Transplant and Cell Therapy Episodes



The Ottawa Hospital Transplant & Cell Therapy Volumes



The Regional Cancer Program: A Collaborative Structure for High Quality, Integrated Care

The Ontario cancer system is designed to deliver high-quality, coordinated cancer care across the province through a network of regional and provincial partners. Collaboration is key to ensuring equitable access, consistent standards, and continuous improvement

Champlain Regional Cancer Program Administrative Leadership Team



Reece Bearnès
Regional Vice-President



Dr. M. Fung-Kee-Fung
Medical Director



Julie Renaud
Regional Director



Andrea Miville
Regional Manager

Role of Regional Clinician Leads

Regional Clinician Leads are designated by the RCP and collaborate closely with their respective OH (CCO) provincial program, as well as the RCP administrative leadership team, to fulfill the goals and objectives set forth in the Regional Cancer Plan.

Their roles include:

- Clinical Leadership
- Quality Improvement
- Engagement and Communication
- Data-Informed Decision Making



2025-2028 Regional Clinician Leads and Champions



Primary Care Lead
Dr. Anna Wilkinson



Cancer Imaging Lead
Dr. Cynthia Walsh



Pat Navigation Co-Lead
Dr. Erin Cordeiro (BHC)



GI Endoscopy Lead
Dr. Harinder Dhaliwal



Surgical Oncology Lead
Dr. Chris Morash



Pt Navigation Co-Lead
Mary Farnand (CAC)



Breast Imaging Lead
Dr. Raman Verma



Pathology Lead
Dr. Jason Wasserman



Patient Education Lead
Amber Killam



OBSP MRT Lead
Sylvie Lachance



Radiation Treatment Lead
Dr. Marc Gaudet



Symptom Mgmt Lead
Lynne Jolicoeur



Colposcopy Lead
Dr. Hélène Gagné



Systemic Therapy Lead
Dr. Stephanie Brulé



Patient Experience & Engagement Lead
Michelle Day



Indigenous Navigator
Carolyn Roberts



Acute Leukemia Lead
Dr. Mitchell Sabloff



Oncology Nursing Lead
Lynne Jolicoeur



Indigenous Lead
Dr. Treena Greene



Transplant & Cell Therapy Lead
Dr. Michael Kennah



Psychosocial Oncology Lead
Olivia Desjardins



Smoking Cessation Champion
Carol Mady



Multidisciplinary Case Conference (MCC) Lead
Marie Esper



The Champlain Regional Cancer Centre at The Ottawa Hospital: A Hub for Comprehensive Cancer Care

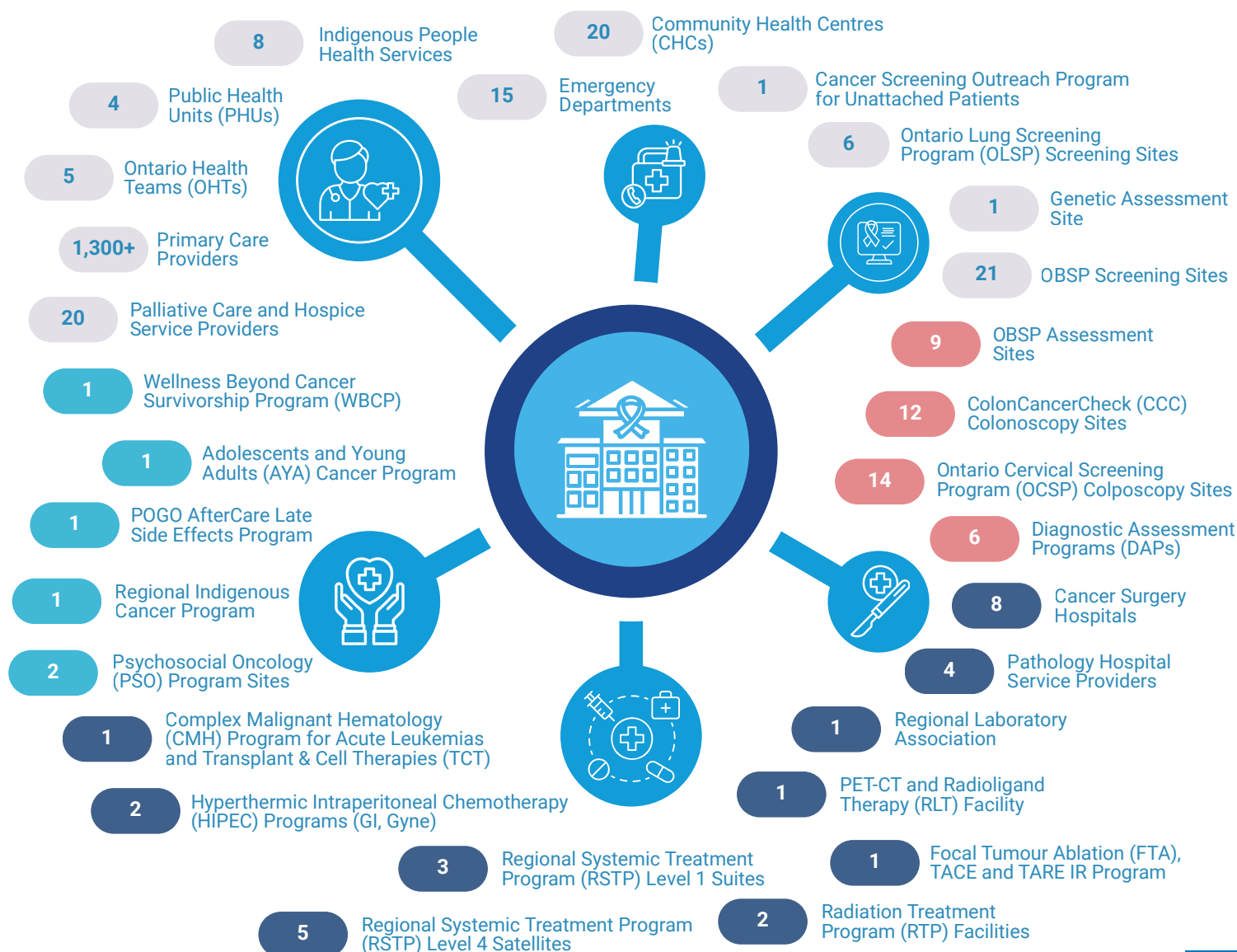
The Ottawa Hospital Regional Cancer Centre (RCC) functions as the central hub for the RCP, working in partnership with various cancer service providers to ensure coordinated, high-quality cancer care.

The RCC oversees operations to provide comprehensive cancer care. Its main responsibilities include:

- Leading the regionalization and implementation of the Ontario Cancer Plan.
- Engaging with health system providers at spoke sites for effective coordination of cancer services.
- Collaborating on strategies and quality improvement initiatives to align with provincial standards.

Additionally, The Ottawa Hospital offers oncology services to the Baffin Island community and provides support for specialized CMH treatments across expanded and inter-provincial regions.

Regional Hub-and-Spoke Model



Addressing Regional Needs



Rural Communities

We strive to make healthcare accessible for all residents, especially in remote areas, by developing strategies to overcome geographical barriers and enhance the availability of healthcare resources in rural communities.



Indigenous Health Services

Supporting Indigenous health services is crucial for the Pikwàkanagàn First Nation, Mohawks of Akwesasne, and other Indigenous communities. Our strategy focuses on culturally sensitive care and partnerships with Indigenous health organizations to provide holistic and respectful healthcare.



Healthcare Infrastructure

To meet the needs of a rapidly growing population, our plan outlines the requirements to expand healthcare infrastructure. This includes cancer service planning for the next 5, 10, 20 years, ensuring that healthcare services are equipped to handle the increasing demand for cancer care.



Marginalization

Addressing significant levels of household and housing-related marginalization is crucial. Our strategy involves adapting cancer care delivery models to various populations while ensuring effective service provision in densely populated urban settings. Prioritizing the unique needs of marginalized communities is essential to our mission.

BONJOUR

HELLO

Bilingual Services

Offering bilingual cancer care services is vital to support the francophone community. Our cancer service planning should stress the importance of addressing the specific healthcare needs of the francophone population and ensuring that services are easily accessible to all residents



Aging Population

Meeting the healthcare needs of an aging population is essential. Our strategy encompasses plans to support communities that experience significant age and labor force-related marginalization. A primary focus is to ensure sufficient healthcare infrastructure to effectively serve the aging demographic.

The Champlain RCP operates at The Ottawa Hospital Cancer Centre, which is situated on the traditional and unceded territory of the Algonquin people. We recognize our responsibility to honor and respect the rich contributions, diverse cultures, and traditional knowledge of all Indigenous Peoples, acknowledging their historical and ongoing relationship with this land.

Our program serves a diverse array of Indigenous communities: First Nations in the region, including Algonquins of Pikwakanagan and Mohawks of Akwesasne, Métis, Inuit, and Urban Indigenous, Nunavummiut travelling, and all those visiting the region for their cancer care.

Champlain Regional Cancer Program, First Nation, Inuit, and Métis Communities and Partners

First Nations Communities

- 13 Pikwakanagan First Nation

Inuit Community

- 1 Akousivik Inuit Family Health Team
- 2 Inuit Tapiriit Kanatami
- 3 Larga Baffin
- 4 Pauktuutit
- 5 Tungasuvvingat Inuit
- 6 Tungasuvvingat Inuit

Métis Governance

- 7 Ottawa Regional Métis council
- 8 Métis Nation of Ontario Renfrew

Indigenous Organizations

- 9 Wabano Centre
- 10 Minwaashin Lodge
- 11 Odawa Native Friendship Centre

Inuit Community

- 1 Akousivik Inuit Family Health Team
24 Selkirk St, Vanier, ON K1L 0A4
- 2 Inuit Tapiriit Kanatami
75 Albert St Suite 1101, Ottawa, ON K1P 5E7
- 3 Larga Baffin
2716 Richmond Rd, Ottawa, ON K2B
- 4 Pauktuutit
1 Nicholas St, Ottawa, ON K1N 7B7
- 5 Tungasuvvingat Inuit
604 Laurier Ave W, Ottawa, ON K1R 6K9
- 6 Tungasuvvingat Inuit
1071 Richmond Rd, Ottawa, ON K2B 6R2

Métis Governance

- 7 Ottawa Regional Métis council
66 Slater St, #1100, Ottawa, ON K1P 5H1
- 8 Métis Nation of Ontario Renfrew

Indigenous Organizations

- 9 Wabano Centre
299 Montreal Rd, Vanier, ON K1L 7G1
- 10 Minwaashin Lodge
2323 St. Laurent Blvd, Ottawa, ON K1G 4J8
- 11 Odawa Native Friendship Centre
815 St. Laurent Blvd, Ottawa, ON K1K 3A7

First Nations Communities

- 12 Mohawks of Akwesasne
- 13 Pikwakanagan First Nation

Strategic Framework

The Champlain Regional Indigenous Cancer Plan (RICP) is a collaborative initiative between the Champlain RCP and Ontario Health (OH), developed with Indigenous communities and organizations.

Its goal is to improve cancer service delivery for First Nations, Inuit, Métis, and urban Indigenous (FNIMUI) peoples, ensuring care is culturally safe, respectful, and responsive to community needs. The strategy aligns with the provincial FNIMUI Cancer Strategy 2024–2028 (Strategy 5) and builds on regional priorities identified by Indigenous partners.

8 Indigenous Cancer Plan Strategic Priorities

- Education
- Prevention and Wellbeing
- Palliative Care and End-of-Life Care
- Survivorship
- Measurement, Monitoring, Evaluation
- Building Productive Relationships
- Cancer Screening
- Equitable Access

Ontario Cancer Plan VI 2024-2028

Ontario Cancer Plan 6 Goals & Strategic Objectives

An Integrated Cancer System that Works for All 2024-2028



Advance Equity in the Cancer System

Address barriers to improve equitable access to effective cancer treatments

Improve equitable cancer planning and care delivery by collecting and using sociodemographic data

Strengthen the cancer system by advancing equity, inclusion, diversity, and anti-racism and embedding culturally responsive, trauma-informed, person-centred care

Address disparities in the cancer system by co-designing policies and programs and building trusting and reciprocal relationships with First Nations, Inuit, Métis and Urban Indigenous peoples, Black Ontarians and underserved populations

Implement the fifth First Nations, Inuit, Métis and Urban Indigenous Cancer Strategy with ongoing engagement with First Nations, Inuit, Métis and Urban Indigenous leadership, their health teams, and communities



Improve Patient, Care Partner, and Provider Experience

Implement a comprehensive model of care in hospital and community for patients and care partners to access psychosocial, symptom and side-effect management, throughout the care continuum

Establish integrated survivorship services to improve the patient and care partner experience

Implement the recommendations in the Palliative Care Health Services Delivery Framework for patients and their care partners in hospital and community settings

Promote provider well-being through measurement and integration of best practices



Achieve Seamless and Effective Integration of all Cancer Services

Leverage digital solutions to support coordination of care, access to comprehensive health information and system navigation for patients, their care partners and providers

Establish integrated diagnostic services supported by navigation and access to information to improve timely diagnosis and patient outcomes

Strengthen integrated community and home support models for patients and their care partners



Improve Cancer Outcomes and Quality of Life for Ontarians

Advance system-level approaches to promote health and well-being, improve disease outcomes and reduce risk factors relevant for cancer and other chronic diseases

Evolve the design and delivery of Ontario's organized cancer screening programs to improve access and increase participation

Drive safe, high-quality care to improve outcomes, survival and quality of life through best practice adoption and continuous quality improvement

Integrate data and new evidence, leveraging health services research, into practice and policy recommendations

Implement a streamlined approach for timely adoption of innovation and technologies



Ensure Sustainable Cancer System Infrastructure and Workforce

Develop and implement comprehensive and scalable health human resource and infrastructure strategies

Implement the ambulatory systemic treatment models of care recommendations to optimize service delivery for oncology providers and patients



Ontario Health
Cancer Care Ontario



Dr. Michael Fung-Kee-Fung
Medical Director

"The Ontario Cancer Plan VI (OCP VI) aims to improve cancer care in Ontario through five strategic objectives for an integrated cancer system. The Champlain RCP aligns with these goals by providing accessible, high-quality care and focusing on innovative regional services and research.

Our RCP Strategy emphasizes leveraging regional teams, building an adaptive learning health system, and enhancing integrated service delivery to improve population health.

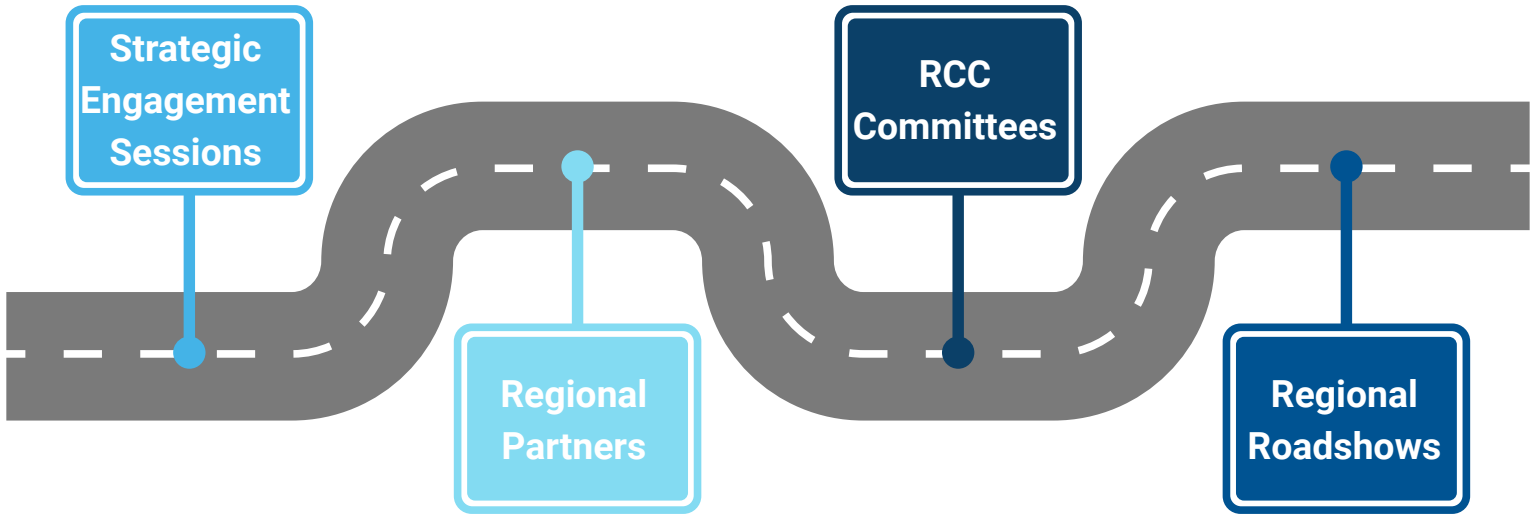
By aligning with OCP VI, we are dedicated to advancing equity, enhancing patient experiences, and ensuring a sustainable cancer care infrastructure."

Our Strategic Engagement Process

Meaningful engagement is vital for strategic planning, fostering trust and gathering insights to align cancer care strategies with community needs. Core engagement channels included leaders, clinicians, front line staff, support services, and patients within the Champlain Regional Cancer Program. By utilizing existing forums and creating new ones, participants shared valuable experiences, informing priorities and vision for the next planning cycle.

The **PFAC**, the **Psychosocial Oncology Program (PSOP)**, the **Regional Systemic Treatment Program (RSTP)**, and the **Regional Cancer Centre Leadership team** held strategic retreats in 2025. The goal was to identify regional priorities and initiatives associated with the OCP VI.

The **Cancer Care Executive** and **Clinical Leadership committees**, along with **The Ottawa Hospital Joint Cancer Services committee** and the **Disease Site Groups (DSGs)** created corporate linkages aligned with the overarching goals and objectives of the OCP VI. This collaboration resulted in a cohesive work plan that allows us to monitor progress throughout the cycle.



The **Partners Council for the RCP**, which includes **senior leadership representatives from 14 organizations**, along with the **Regional Ontario Health Teams (OHTs)**, **Screening Working Groups**, **Indigenous Cancer Program**, and the **Regional Clinician Leadership Team**, has integrated the OCP VI priorities into their discussions and planning efforts.

The **RCP Leadership Team** engaged with **seven hospital partners** to discuss OCP VI and identify opportunities for improving local cancer service access. Key themes included:

- **Equity & Access:** Addressing travel issues and engaging Indigenous communities.
- **Workforce & Capacity:** Highlighting staffing shortages and training needs.
- **Governance & Oversight:** Establishing local cancer committees and performance reviews.



Beth Brownlee,
Pembroke Regional Hospital,
VP Clinical Services, CNE

“For Pembroke Regional Hospital, being a partner in the Regional Cancer Program allows us to offer compassionate, high-quality care closer to home—where patients and their families in our community need it most. These partnerships are built on trust, shared expertise, and a deep commitment to coordinated care. Together, we create a circle of support that brings comfort, continuity, and confidence to those navigating a cancer journey.”

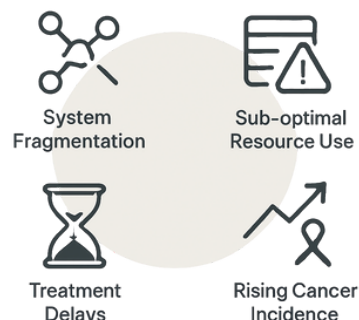
Our Cancer Strategy: A Population-Based Approach to Integrated Cancer Care

Why a New Approach Is Needed

For more than two decades, our regional cancer plans have provided a strong foundation for delivering high-quality cancer care across the Champlain Region, addressing the unique needs, strengths, and challenges of our local population. Despite significant progress, new challenges continue to emerge, impacting the system's ability to provide timely, integrated care and improve patient outcomes.

These challenges include system fragmentation, sub-optimal use of existing resources, treatment delays and a rising incidence of cancer.

Key Challenges in Cancer Care



Evolving Cancer Care Delivery

As the number of individuals diagnosed with, living with, and surviving cancer in our region continues to rise, it is essential for us to adapt our approach to care delivery.

In response to this need, The Ottawa Hospital (TOH) has crafted an innovative vision and regional model of care, which has been integrated into the cancer strategy for this planning cycle.

This vision seeks to enhance cancer services throughout the entire continuum of care by merging research with care delivery. It is supported by a population-based learning health system that encourages curiosity, fosters innovation, and values evidence and feedback to improve patient outcomes and overall system performance.



Aligning Our Regional Strategy with OCP VI

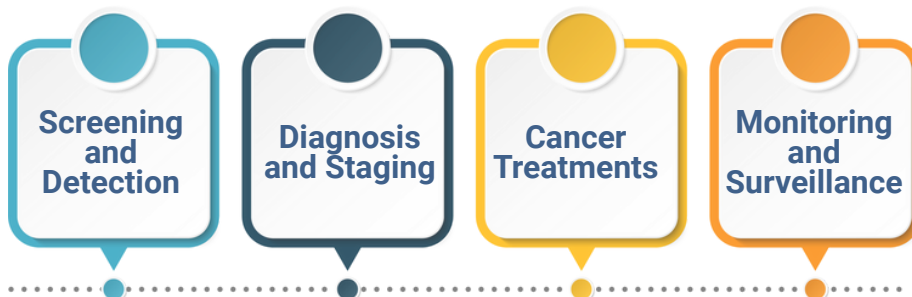
Our regional strategy is closely tied to the OCP VI, focusing on minimizing cancer risk, improving access to screenings, and providing safe, high-quality care at the most critical times and locations.

Through collaborative efforts with patients, care partners, primary care providers, Indigenous communities, and local health and social service organizations, we are dedicated to creating an integrated cancer system that serves everyone in our region effectively.

Goals for the Current Planning Cycle

Across the cancer care continuum, we aim to:

- Enhance clinical outcomes
- Increase system responsiveness
- Improve patient, caregiver and provider experiences
- Expand access to clinical research and innovative opportunities



Strategic Roadmap 2024-2028

Develop a Comprehensive Service Delivery Model

Create a detailed service delivery model that outlines the roles and responsibilities of the hub and spoke sites. This model will focus on optimizing healthcare services, ensuring seamless referrals, integrating molecular testing, and improving care coordination.

Enhance Population-Based Cancer Data Infrastructure

Build a robust data infrastructure to support the learning health system. This includes using iterative data to drive care, performance insights and support clinical decision making. Creating a central data repository linking past and new data, and improving data quality. The data will be accessible to key stakeholders through self-serve tools.

Implement Digital Tools

Develop and integrate digital tools which support clinical decision-making to improve access to care and facilitate better outcomes. This includes creating digital navigation hubs, real-time feedback systems, and digital pathways for disease site groups.

Establish Regional Disease Site Teams

Form multidisciplinary disease site teams that provide coordinated, comprehensive care across the entire cancer continuum. These teams redesign and optimize the disease site pathways and should include relevant providers and meet regularly to oversee the full spectrum of care for specific disease sites.

Optimize Resource Allocation

Align resources and designated funding to address challenges, gaps, and bottlenecks in the system. This includes leveraging data and clinical outcome information to identify areas for improvement and optimize resource scheduling.

Integrate Research Into Delivery

Formalize the integration of research into care delivery to facilitate access to clinical trials, new therapies and models of care. This will enable research insights to drive new research opportunities and inform clinical guidelines.

1 Advance Equity in Healthcare

Everyone deserves the opportunity to achieve good health, regardless of their identity, where they live or their financial situation. Yet, many individuals still encounter obstacles when accessing care. Tackling the social factors that influence access is essential to creating a more equitable health care system.



Community and Partnership Engagement

- Collaborating with the Ottawa Model for Smoking Cessation and the Indigenous Tobacco Program to implement culturally responsive smoking cessation support for Indigenous populations
- Partnering with Indigenous organizations and communities to co-create culturally appropriate, accessible survivorship resources for FNIMUI patients and families that reflect lived experiences and cultural values
- Partnering with community organizations, including Canadian Blood Services (CBS), to increase representation of diverse populations in the National Stem Cell Registry.



Enhancing Access to Services

- Piloting an interdisciplinary model of care to standardize take-home cancer drug treatment plans to enhance access, safety, consistency, and patient understanding of at-home treatments
- Implementing the 'FIT Kits on Hand' pilot, ensuring FIT kits are accessible to patients who face challenges accessing them through traditional methods.
- Optimizing access to appointments by leveraging advanced scheduling software and artificial intelligence tools to streamline clinical workflows and improve appointment scheduling and capacity planning.



Data-Driven Approaches

- Supporting the development of more equitable, targeted screening strategies using sociodemographic data collected as part of the cancer screening referral and onboarding processes.
- Enhancing Data Collection for Lung Cancer Screening to better understand population health trends and support a more equitable, data-driven approach.

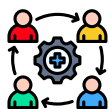
2

Improve the Patient, Care Partner and Provider Experience

We aim to enhance the experience of cancer patients, their care partners, and healthcare providers. Our initiatives focus on creating a compassionate and coordinated care environment by integrating patient-centered practices, improving communication, and addressing challenges in navigating cancer care systems.

- Integrating oncology-specific well-being factors into divisional and departmental workplans to align daily operations with broader priorities.
- Using defined provider well-being criteria to assess all new electronic medical record (EMR) changes to ensure they enhance staff experience and reduce burnout.
- Using co-design principles to partner with care teams in embedding resilience strategies into daily routines.
- Formalizing mentorship opportunities and growing communities of practice within the RCP, fostering professional development, staff empowerment, and career pathway clarity.

Provider Well-Being



Coordination and Integration

- Enhancing the current survivorship program to include all disease site groups, using EMR functionality for care plan development and communication among patients and their primary care providers.
- Improving patient access to advance care planning (ACP) resources through the use of technology (MyChart) to enable patients and care partners to upload documents, share care preferences, and access resources.
- Close gaps in care for adolescents and young adults (AYA) including the development of tailored resources for AYA patients transitioning from pediatric care, entering survivorship or experiencing recurrence in adulthood.
- Collaborating with the Analytics team to develop and implement a survey to gather insights from family members and care providers of patients who received palliative care and died in hospital settings.



Person-Centred Care and Support

- Implementing a streamlined, patient and caregiver-centred model of care for psychosocial oncology services with a focus on screening for distress, anxiety and depression.
- Implementing models of care that enhance patient navigation throughout the cancer care trajectory—this includes ensuring patients and their caregivers have a dedicated team to turn to for questions and support.
- Establishing a Supportive and Palliative Care Team presence in the Cancer Assessment Clinic to support patients with advanced cancer, high symptom burden, and quality-of-life concerns.
- Partnering with programs identified as priority areas (e.g., Transitional Care Unit, Geriatric Assessment Program) to create a care model for patients with chronic palliative needs, improving coordination, service access, and person-centred care.

3

Achieve Seamless and Effective Integration of All Cancer Services

Our goal is to establish a fully integrated cancer care system that is designed for patients to receive timely, coordinated, and comprehensive services throughout the entire care continuum. We are committed to eliminating fragmentation, minimizing delays, and improving communication among care teams.

Safe and Effective Cancer Treatments

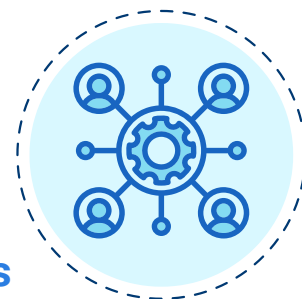


- Collaborating with external pharmacies to promote a model of care for safe oral chemotherapy administration, focusing on shared care models, patient education, safe drug handling, symptom management, and reducing financial burdens on patients.
- Enabling safe, effective delivery of novel cancer therapies in the home that improve the patient experience and reduce hospital stays by supporting collaboration with home care providers for the adoption of new processes or technologies.

Care Coordination and Integration

- Standardizing data capture including person-centred indicators to improve care coordination and navigation across diagnostic service programs.
- Enhancing coordination of care between cancer and community-based palliative care services by integrating electronic platforms to streamline palliative care referral processes and interagency communication.
- Collaborating with Digital Solutions and Analytics to continue developing and implementing the Cancer Data Model to integrate patient data across the cancer care continuum.
- Supporting equitable access and streamlined navigation through the development of a regional centralized intake model for diagnostic services pathways.

Strengthening Collaborative Networks



- Improving service coordination between RCC and Regional Hospitals through annual in-person visits to tackle local cancer service issues.
- Promoting the establishment of Joint Cancer Services Committees to unite departments involved in cancer care, facilitating idea exchange and coordinated solutions.
- Optimizing and redesign regional care pathways to ensure timely care and enhance capacity.

4

Improve Cancer Outcomes and Quality of Life for Ontarians

Improving cancer outcomes enhancing quality of life for all Ontarians is at the heart of our strategic vision. As cancer incidence continues to rise alongside advances in treatment, it is imperative that we build a responsive, equitable and patient centred cancer system to improve the lived experience of every person affected by cancer in Ontario.

Strengthening Prevention and Screening

- Partnering with Ontario Health Teams (OHTs) to strengthen cancer screening and disease prevention efforts for underserved and marginalized patients.
- Collaborating with diagnostic cancer programs to deliver targeted smoking cessation education and support to patients and their families in the diagnostic phase of care.
- Ongoing collaboration with key stakeholders, including public health, to support and monitor the uptake of the HPV vaccine including the implementation of pilot projects for the self-collection of HPV tests as an accessible, user-centered alternative to traditional clinic-based screening.
- Assessing regional constraints and evaluate capacity for providing supplemental breast screening for individuals with dense breast tissue.
- Collaborating with partner hospitals to facilitate onboarding of new sites as OLSP partner locations.

Leveraging Technology

- Utilizing EMR patient portals to support digital correspondence for breast and lung screening reminders and appointment booking, in alignment with provincial initiatives.
- Expanding the EMR Malnutrition Screening to include additional disease site groups to support early access to nutritional support for those in need.
- Increasing process mining capacity to analyze patient pathways and improve integrated wait times in partnership with the University of Ottawa.
- Standardizing referral processes and streamline data reporting for better integration and oversight.

Advancing Treatment and Research

- Increasing CAR T-cell therapy treatment capacity.
- Continuing involvement in research to assess the effect of evolving screening recommendations on prostate cancer mortality rates and inform future screening strategies.
- Collaborating with private infusion clinics to develop standardized procedures and best practice guidelines, to ensure systemic therapy delivered outside hospital settings maintains the same high quality and safety standards.
- Continuing to monitor and evaluate the CRS-HIPEC program using first-year data to improve patient intake, wait times, outcomes, and experience.
- Expanding patient-level data collection across regional MCCs to track quality indicators and drive practice improvements.
- Sustaining active participation in the REthinking Clinical Trials (REaCT) program, which compares standard cancer treatments to identify the most effective options.
- Implementing an advanced adaptive radiation therapy platform.

5

Ensure Sustainable Cancer System Infrastructure and Workforce

A sustainable cancer care system relies on the strength, resilience, and capability of its infrastructure and workforce. As the demand for cancer services rises and treatments grow more complex, it is crucial to invest in the foundational elements that ensure high-quality, equitable care throughout Ontario. This investment encompasses modernized facilities, integrated digital tools, and a skilled and supported workforce prepared to address both current and future needs.



Workforce Development

- Enhancing health and human resources planning to bolster recruitment and retention strategies, ensuring that we have skilled staff to support the evolving care models and emerging technologies.
- Incorporating advanced AI technologies into workflows to enhance capabilities, such as improving cancer screening processes for better decision-making and recall rates, as well as streamlining appointment scheduling for greater efficiency.
- Performing annual reviews and updates to fortify emergency preparedness across cancer services.



Increasing Regional Capacity

- Enhancing cancer clinical service planning at the RCC, guided by cancer incidence and prevalence data, as well as the expected effects of emerging technologies and evolving care models.
- Expanding PET-CT capacity by upgrading current equipment and introducing an additional PET-CT unit at a Theragnostic Centre of Excellence.
- Working together on the planning of the new TOH Civic Campus to ensure it embodies the interconnected nature of cancer care with other hospital programs and services.
- Carrying out a regional review of systemic treatment capacity and collaborating with regional partners to strategize for meeting demand effectively.

Fostering Education and Collaboration

- Establishing a Regional Community of Practice (CoP) for palliative care in collaboration with the Champlain Hospice and Palliative Care Program to facilitate learning, knowledge sharing, and skill development among palliative care providers across the region.
- Developing and implement a corporate palliative care education strategy to build competencies among physician, nursing, and allied health professionals.
- Strengthening a team-based, integrated model of care by implementing nurse-led clinics.

Moving Forward with Purpose

Our strategic plan reflects the collective insights expertise and perspectives gathered through extensive engagement with patients families healthcare providers partners and community representatives. The process ensured that the result is a shared vision that is grounded in real experiences and informed by the latest cancer statistics.



Moving forward, we will work closely with our partners to bring this plan to life, ensuring that implementation is coordinated, collaborative, and adaptive. We remain committed to monitoring outcomes, responding to emerging data, and staying true to the priorities identified through our engagement process.

We are confident that this plan will guide us in the right direction over the next three years, helping us to address current needs while positioning the program to respond to future challenges and opportunities.

Contact Us

If you have inquiries regarding our services, regional meetings and events, educational offerings, or performance support, or if you have an inspiring regional story to share, we would love to hear from you.



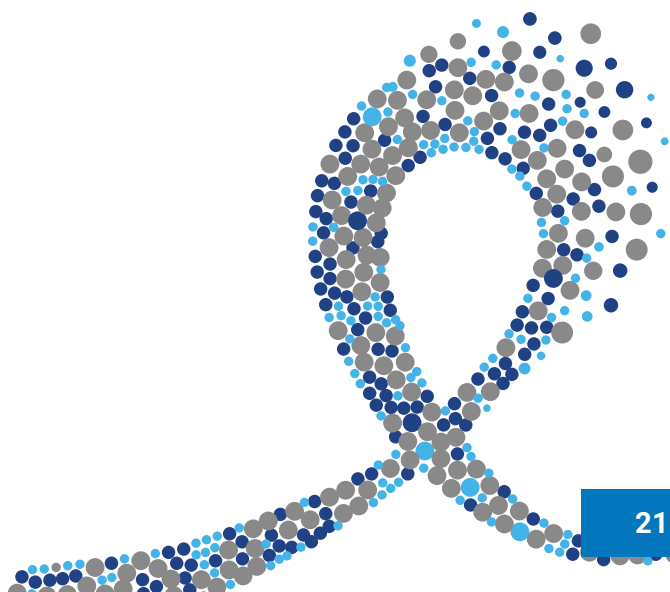
Email

champlainregcanpro@toh.ca



Location

The Ottawa Hospital Regional Cancer Centre
501 Smyth Rd,
Ottawa, ON
K1H 8L6



Ontario Cancer Plan V

Regional Plan Close Out

2019-2024



Ontario Cancer Plan V 2019-2023

Ontario Cancer Plan 5 2019-2023

cancercareontario.ca/cancerplan



Person-Centred

STRATEGIC OBJECTIVES:

Expand the use of patient-reported outcomes and improve symptom management

Expand patient experience measurement and equitable engagement with patients, caregivers and the public

Promote early conversations relating to advance care planning, prognosis and goals of care, and share identified goals with the care team

Improve health literacy competencies among healthcare professionals, patients and caregivers, to improve communication, self-management and quality of life

Improve access to cancer information for patients and caregivers



Safe

STRATEGIC OBJECTIVES:

Implement a model of care to provide comprehensive symptom and side-effect management

Develop and implement clinical standards and practices to improve treatment quality and safety

Strengthen the culture and system-level oversight for safety



Equitable

STRATEGIC OBJECTIVES:

Build capacity to address health equity through expanded use of data, tools and partnerships at provincial and community levels

Develop health policy advice and implement strategies for supporting identified underserved and vulnerable populations.

Implement the fourth First Nations, Inuit, Métis and Urban Indigenous Cancer Strategy with a focus on engagement with local communities

Plan and allocate funding, capital equipment and infrastructure, and health human resources to support equitable care across the province



Efficient

STRATEGIC OBJECTIVES:

Advance the chronic disease prevention strategies

Strengthen Ontario's organized cancer screening programs for breast, colorectal, cervical and lung cancer

Reduce variation in the quality of care for patients undergoing diagnostic assessment, from suspicion of cancer to treatment decision

Develop approaches to address healthcare professional burnout

Increase value of services through funding models, evaluation, policy development and new models of care

Assess real-world clinical benefit and value of treatment strategies

Facilitate the adoption of biosimilar drugs



Effective

STRATEGIC OBJECTIVES:

Expand measurement of clinical outcomes and compare outcomes against other jurisdictions

Examine the association between patients' receipt of evidence-based cancer care, and clinical and patient-reported outcomes

Develop strategies to support evaluation and implementation of innovative technologies and interventions

Implement a framework for using personal and tumour genetics (personalized medicine) to strengthen quality, service delivery and system planning

Work with system partners to promote effective and appropriate care for adolescents and young adults

Expand tobacco smoking cessation programs

Expand quality measurement to include non-hospital settings and reporting at the facility and provider level

Advance integrated standardized clinical documentation (synoptic reporting) and enable real-time clinical decision-making and system reporting



Timely

STRATEGIC OBJECTIVES:

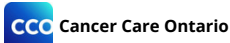
Improve transitions across the cancer care continuum

Expand and support timely access to psychosocial oncology services

Expand and support timely access to palliative care

Improve timeliness of diagnostic and treatment services by advancing wait time monitoring and performance management strategies

In time, the work of Cancer Care Ontario will be taken on by Ontario Health. Ontario Health is a single health agency that will oversee healthcare delivery, improve clinical guidance and support providers to ensure better quality care for patients.



Julie Renaud
Regional Director

As a Regional Director who began my tenure in this role during the pandemic, I have personally witnessed the remarkable resilience and commitment that have kept cancer care thriving in our region. Launched in the spring of 2019, OCP V provided a comprehensive four-year roadmap, guiding our collaboration with health system partners to address six key quality dimensions of cancer care for everyone in the Champlain Region.

This section of the report highlights the advancements made toward each of the six goals of OCP V.

Even with the changing priorities brought on by the COVID-19 pandemic, a review of our accomplishments clearly showcases our team's unwavering dedication to delivering high-quality care and promoting quality improvement during these challenging times.

The Covid-19 pandemic significantly disrupted cancer care across the healthcare system. In response, Ontario Health extended OCP V to 2024 and set three key priorities for recovery. The Champlain Regional Cancer Program supported these efforts by focusing on system-wide coordination, resource sharing, and adaptability.

Our team's commitment to cancer patients and the healthcare system was reinforced, even as we faced unprecedented growth in treatment programs.

Pandemic Recovery Aims

1 Recovery and Stabilization of Access to Cancer Services

- Transitioned Regional Communities of Practice to virtual meetings for discussing patient prioritization, wait times, and regional changes.
- Stabilized Ontario Breast Screening Program (OBSP) volumes by Spring 2024, with overdue screenings resuming after pandemic-related shutdowns.
- Added 2 Ontario Lung Screening Program (OLSP) sites to increase access to screening, addressing significant waitlists due to Covid-19 shutdowns.
- Implemented a monitoring process for key metrics, including monthly throughput and waitlist status.
- Cleaned up surgery waitlists to ensure accurate prioritization and reflect demand.

3 Minimize Impact of COVID-19 on Cancer Outcomes

- Implemented OH-CCO Covid-19 screening guidelines in collaboration with our hospital's Infection Preventing and Control teams to prevent the spread of illness among protect patients and staff;
- Implemented multiple waves of practice changes including vaccination guidelines with a focus on high-risk patients to ensure safety of patients, families and staff during the pandemic, ensuring adherence to Cancer Care Ontario guidelines throughout the process;
- Worked closely with diagnostic imaging, surgery and other leadership at TOH and across the region to ensure prioritization of cancer cases that could be negatively impacted by delays in care.

2 Advance Opportunities for System Change Enabled by the Pandemic

- Expanded virtual care to reduce hospital traffic and improve patient experience.
- Adopted hypofractionation guidelines for breast and prostate cancer treatment.
- Developed frameworks for modifying cancer care delivery during emergencies.
- Encouraged MyChart registration for better patient communication and engagement.
- Implemented COVID-FRI screening questionnaires for in-person appointments.
- Adopted a hybrid work model for administrative and clinical support teams.
- Established treatment protocols at Qikiqtani General Hospital to maintain care locally.
- Revised patient education resources to enhance accessibility and communication.
- Reviewed emergency protocols to clarify team roles during critical events.



"As a manager of a stem cell transplant unit during the pandemic, maintaining our services was challenging. Despite outbreaks and restrictions, our team adapted quickly to new safety protocols, ensuring patient and staff safety while maintaining care standards. The team's resilience and dedication shone through as we managed each wave, showcasing exceptional teamwork."

Tania Baird
Clinical Manager, Transplant and Cell Therapy Program

Enhanced efforts to capture Goals of Care (GOC)

Developed patient questionnaires and provider guidelines to facilitate discussions about care preferences, hosted speakers to emphasize patient empowerment, and provided education to staff.

Created educational resources with a focus on health literacy

Established a repository for existing educational materials, ensuring clarity and alignment with best practices.

Accelerated the adoption of hypofractionation guidelines

Reduced radiation treatment duration, improving patient experience, reducing hospital visits, costs, and the carbon footprint.

Improved tracking and management of patient symptoms

Integrated patient-reported outcomes into EMRs, enhancing data integration and patient experience in cancer and palliative care.

Implemented a 'dyad' model for patient and family engagement

Connected advisors with managers, fostering timely and collaborative engagement, receiving positive feedback.

Streamlined communication of survey findings

Co-designed a clear presentation of survey results using infographics for easy understanding and sharing among stakeholders.

Facilitated local administration of systemic therapies

Developed guidelines for administering therapies in Nunavut, supporting care closer to home.



Person-Centred



"By truly listening to our patients and empowering our teams, we have not only improved quality but continue to build a culture of empathy and innovation."

Michelle Day
Manager, Person-Centred Cancer Care
Patient Experience and Engagement Lead

Improved patient accessibility to nursing care outside regular hours

Established after-hours tele-nursing support for cancer patients, enhancing access to care during non-standard hours.

Enhanced patient safety through comprehensive pre-treatment screening

Developed clinical screening processes for systemic therapy patients, including Hepatitis B and DPYD testing, improving patient safety.

Standardized overdose management to ensure patient safety

Created a protocol for managing 5FU overdose, contributing to provincial safety standards.

Optimized treatment and management of immunotherapy toxicities and hypersensitivity reactions

Enhanced immunotherapy toxicity management through partnerships, educational tools, and a dedicated conference. Updated protocols for hypersensitivity reactions.

Provided targeted support for multiple myeloma patients

Piloted a counseling initiative for multiple myeloma patients, improving support through specialized oncology pharmacists.

Streamlined certification tracking to improve compliance

Implemented a Power BI dashboard for tracking nursing certification, adopted across departments, enhancing compliance and assessment.

Ensured accuracy and safety in radiation planning through peer collaboration

Integrated a peer review process in radiation planning to boost accuracy and safety,



"Patient safety in cancer care is our top priority, guiding all decisions from treatment protocols to supportive care to ensure high standards while minimizing risks."

Lynne Jolicoeur
Advanced Practice Nurse, Regional Systemic Treatment Program, Oncology Nursing/Symptom Management Lead



Safe

Enhanced cancer care accessibility and delivery across various regions

Delivered specialized cancer clinics at Qikiqtani General Hospital and implemented CAR-T cell therapy with a pan-Canadian approach, ensuring equitable access for patients from other provinces.

Increase community awareness and participation in cancer prevention and screening

Conducted targeted community outreach for cancer screening and smoking cessation, and engaged Indigenous communities through events and collaborations.

Addressed equity and cultural safety in cancer care for Indigenous populations

Developed the Indigenous Cancer Strategy, facilitated ongoing engagement with Indigenous communities, and delivered cultural safety sessions for staff.

Improved palliative care services and access for Indigenous communities

Partnered with the Champlain Hospice Palliative Care Program to advance objectives focused on equitable access and culturally safe care, and served on advisory councils to guide program planning.

Enhanced cancer screening and early detection among underserved populations

Implemented the Champlain Screening Outreach Program, partnered with Ontario Health Teams on quality improvement plans, and collaborated with Community Health Centres to offer targeted screening days.

Develop educational resources for cancer prevention and survivorship

Participated in the design of comic books for Indigenous communities to support cancer education and awareness.

Influenced policy and enhance strategic collaboration for cancer care improvement

Participated in steering committees and advisory councils, supporting the development of shared decision-making resources and policy recommendations.



Equitable



“Every patient deserves access to timely, high-quality cancer care no matter where they live or their circumstances. Equity and cancer care isn’t just an ideal- it’s a responsibility.”

Tennille Lecours

Manager, Cancer Assessment Centre, Breast Health Centre, Cancer Centre Intake

<p>Enhanced cancer screening accessibility</p>	<p>Expanded screening capacity in the Champlain region through the onboarding of two new OBSP Screening Sites, one new OBSP Assessment Site and formalizing lung cancer screening program with four active spoke sites</p>
<p>Enhancing healthcare workforce utilization</p>	<p>Maximized the role of physician assistants and specialized RNs in malignant hematology to increase program capacity and support the management of complex cases</p>
<p>Continuity of care through integrated patient navigation</p>	<p>Developed a patient navigation model that provides comprehensive support, streamlines care coordination, and seamlessly integrates into the healthcare system to enhance continuity of care</p>
<p>Enhancing patient care through digital integration</p>	<p>Embedded an electronic version of the patient self-reported health history questionnaire into the patient’s EMR for the completion of the survey ahead of the consultation appointment in the cancer centre</p>
<p>Optimizing breast cancer care through strategic efficiencies</p>	<p>Implemented strategies to support efficiencies in the breast cancer trajectory including; increased sites performing mammograms, standardized triage algorithms for referrals; redirecting referrals to regional hospitals to support care closer to home</p>
<p>Advancing personalized medicine</p>	<p>Established a process for eligible patients to access genetics testing and counselling to support treatment decisions using personalized medicine</p>
<p>Optimizing clinic operations</p>	<p>Established a new clinic scheduling system to maximize the use of existing space and introduced a process for weekly assessments of new patient consultations, incorporating strategies to handle surges and ensure timely patient appointments</p>



“In oncology, efficiency is not about speed—it’s about ensuring patients receive timely, coordinated, accurate treatment that maximizes outcomes and prioritizes access for all.”

Melissa Diffey
Manager, Radiation Treatment Program



Efficient

Managed waves of funding for new therapies for solid tumour and hematological malignancies

Ensured patients benefit from having access to the latest treatments. This strategic management of funding has facilitated the introduction of cutting-edge therapies, improving patient outcomes and expanding treatment options.

Implemented specialized urgent care nurse practitioner-led clinics for patients on systemic therapy

Created a sustainable acute symptom treatment model to avoid emergency department visits and improve access to specialized oncology professional care. This initiative has streamlined patient care, reduced hospital congestion, and provided timely assessments and interventions.

Increased bed capacity in Acute Leukemia Program inpatient and day care units

Enhanced the ability to accommodate more patients, thereby improving the overall care and management of malignant hematology patients. This expansion has reduced wait times and ensured that patients receive necessary treatments promptly.

Implemented Peptide Receptor Radionuclide Therapy (PRRT) for patients with neuroendocrine tumors

Introduced a treatment that has the ability to slow or stop tumor growth. This innovative therapy has provided new hope for patients with neuroendocrine tumors, offering a targeted approach to manage their condition effectively.

Secured funding to design a program for Adolescents and Young Adults (AYA) affected by cancer.

Established a tailored program that addresses the specific challenges faced by AYA patients. This initiative will improve support systems, provide age-appropriate care, and enhanced the overall experience for young cancer patients.

Implemented molecular testing to support targeted therapy

Enabled precise and personalized treatment plans by utilizing molecular testing. This advancement has allowed for better tracking of treatment efficacy and adjustments based on individual patient responses, leading to improved outcomes.

Improved patient access to new treatment approaches

Commissioned magnetic resonance guided adaptive therapies, offering patients access to state-of-the-art treatment options. This technology will enhance the precision of radiation therapy, minimizing side effects and maximizing treatment effectiveness.



Effective



“By integrating cutting-edge research and technology, we ensure precise, evidence-based cancer care tailored to each patient’s needs. This holistic approach maximizes treatment efficacy and enhances overall patient outcomes.”

Miller MacPherson
Head, Medical Physics

Expanded the “Rapid Palliative Radiation Therapy Program” to include the Civic Campus

This expansion has prevented unnecessary admissions and transfers, ensuring that patients receive timely radiation therapy without the need for additional hospital visits.

Developed advanced analytics for clinic block schedule optimization

Dashboards track key performance indicators for Medical Oncology, Radiation Oncology, and the Breast Health Centre, enhancing patient care through better monitoring of CCO QPR reports and surgery wait times.

Reviewed and updated Diagnostic Assessment Program (DAP) referral criteria

By sharing the updated criteria with all regional stakeholders, the process ensures that patients referred meet eligibility guidelines, thereby avoiding delays in accessing care and improving the overall referral process.

Partnered with AI start-up to deploy automated and optimized radiation therapy scheduling

This partnership has led to a streamlined scheduling process, reducing wait times and improving the efficiency of radiation therapy delivery. TOH received the 2024 Cancer Quality Council of Ontario Innovation Award with this initiative.

Increased access to psychosocial oncology services

By adding and modifying classes for patients and caregivers, and increasing the social work, physiotherapy, and dietician staff complement, the program has enhanced support services, ensuring that patients and their families receive comprehensive care.

Implemented visual representations of surgery wait times and queues through the Surgery WTIS

This initiative has provided clear insights into surgery wait times, allowing for better management and reduction of queues, ultimately improving patient access to surgical care.

Displayed visual representations of quarterly CCO QPR reports and performance change over time for all hospitals.

This has facilitated the tracking of performance metrics and trends, enabling hospitals to identify areas for improvement and implement strategies to enhance patient care and access.



“Providing timely care means giving patients the best possible chance for successful outcomes while reducing stress and uncertainty.”

Shannon Nelson
Clinical Manager, Solid Tumour Cancer Clinics



Timely



The creation of this Regional Cancer Plan would not have been possible without the outstanding leadership, guidance, and support from all those involved. We acknowledge the invaluable contributions from everyone, including our patient and family advisors, our regional councils, program teams, clinician leads, hospital partners, and leadership teams. We also extend our gratitude to all who contributed their insights during its development and review.