







# Cancer Care Nova Scotia

VOLUME III – ISSUE TWO  
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*Many Hearts ❁ Many Minds ❁ One Goal*

## Working with Diverse Communities to ensure equal access to quality cancer care

**"You have cancer."** This year, approximately 4,900 Nova Scotians will hear these devastating words. This means, that each week, 94 Nova Scotians will hear this life-changing news. These people will come from all walks of life and from all areas of the province. Some will be from the black or aboriginal communities. Others may be immigrants or members of the gay and lesbian community. Still others will be from rural areas. Regardless of our defining characteristics, it is essential that all Nova Scotians have equal access to quality cancer care.

Culture and life experiences define who we are and it is not surprising that our needs will vary accordingly. **Cancer Care Nova Scotia**, working with African Nova Scotian researchers, Winnie Benton and Sandra Loppie, learned about the African Nova Scotian experience in navigating the cancer system, and identified and recommended ways to enhance cancer care for African Nova Scotians. The research indicated a need for more culturally specific materials, a need for African Outreach

Workers of a similar background, more health professionals with an understanding of cultural backgrounds and differences, and recognition of

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*"I want to open the door, so we all have equal access to cancer care and treatment."*

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(L-R) Amina Russell & Donna Smith review information about the role of the Community Liaison.

supports already available in the community.

In an effort to meet the unique navigation needs of African Nova Scotians and other diverse communities, **Cancer Care Nova Scotia** hired Donna Smith for the newly created role of Patient Navigation Community Liaison. Donna will work closely with the Patient

Navigation Project Manager and the Patient Navigators to identify needs, specific to Nova Scotia's diverse communities.

Initially, she will work with the African Nova Scotian community to discuss and prioritize their recommendations for change. She will also work with other diverse

communities to promote a better understanding of their values and beliefs by sharing information learned with Patient Navigators and other members of the cancer team.

"As Community Liaison, I'll work with diverse communities to ensure their cultural values and beliefs are factored into cancer services," said Donna, a breast cancer survivor, cancer advocate and nurse. "In the African Nova Scotian community alone, I know first-hand that there are lots of fears about the big 'C'. By meeting with people and sharing information, I'll learn about their needs and work with Patient Navigators and other members of the cancer team to address them. I want to open the door, so we all have equal access to cancer care and treatment."

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## Addressing Physicians' Educational Needs

**P**roviding timely access to continuing education for health professionals is essential to ensure quality cancer care is delivered throughout the province. Educational needs are unique to each profession and often to each district. **Cancer Care Nova Scotia (CCNS)** is working with a number of organizations including, Dalhousie Continuing Medical Education (CME) and the Canadian Association of Nurses in Oncology (CANO) to develop and conduct tailored needs assessments for health practitioners in Nova Scotia. To date, family physicians, community-based specialists, oncologists and nurses have received surveys. Pharmacists will be surveyed this month.

Through this process, **CCNS** is collecting information about the current barriers to providing cancer care in Nova Scotia, educational needs and resources required to improve the provision of care and models for providing cancer care at the district level.

The results from a random sample of 400 family physicians and 200

community-based specialists surveyed are now being compiled. The surveys covered a broad range of categories including, prevention and screening, current challenges to care, educational needs, preferences for learning and models of community care.

Forty per cent of physicians and specialists completed the survey. Their comments about barriers to screening and prevention included: lack of time, MSI reimbursement and lack of patient education materials. More public education, increased access to screening programs and more education material were suggested as ways to improve screening.

While there are a number of challenges to providing care, the major ones include: system issues like reimbursement, difficulty in scheduling appointments with specialists and unclear guidelines for continuing care.

Physicians and specialists have similar educational needs: communication skills, symptom management, pain management, chemotherapy, oncology

emergencies. Family physicians also indicated a need to learn about supportive / palliative care.

Both physicians and specialists believed a combined lecture / workshop style would work well for learning. Physicians suggested small group discussions would be beneficial and specialists suggested lecture presentations. Both groups mentioned the value of incorporating programming into Dalhousie Continuing Medical Education (CME). They said a one or two-day symposium would work, as well as an interactive video-conferenced CME.

Among the informal learning tools family physicians suggested were checklists or instructions for continuing care and a help line to oncologists. Specialists indicated a database of oncologists and reading journals and texts would be helpful.

The next step is multi-disciplinary focus groups, which will be held this spring, to learn about district-specific needs and to determine areas where programming can be provided in a multi-disciplinary environment. Information from the focus groups and the needs assessments will be used to create educational programming to address the needs of the health professionals, enabling them to fully participate in the cancer care system. This will ensure that cancer patients in Nova Scotia receive the highest quality of treatment and care possible.

For more detailed information regarding the survey results for physician and community-based specialists, contact Anne Murray, Education Coordinator at 902-473-3781 or by email at [anne.murray@ccns.nshealth.ca](mailto:anne.murray@ccns.nshealth.ca). ☺

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Donna will work with Patient Navigators, in each of the pilot districts, to develop a list of community contacts including church groups, community leaders, community and professional associations, business owners and others. She'll meet with these groups, share information about cancer services available, inquire about potential barriers they face in accessing these services and develop strategies to overcome these barriers.


"When I was diagnosed with breast cancer, it would have been helpful to have someone in the system I could have called," said Donna. "As a nurse I had read all the worst case scenarios. It was also difficult to find information, that reflected an understanding of my needs as a black woman.

"My goals, as Community Liaison, are to tell people where to go for cancer information and to inform them about the scope of services available. I will ask

communities what we need to do to better meet their needs and I'll work with Patient Navigators and other members of the cancer team to effect the necessary change. It won't happen overnight, but I'll consider each step forward a success."


For more information about Patient Navigation, contact Sandra Cook, Patient Navigation Project Manager by email at [sandra.cook@ccns.nshealth.ca](mailto:sandra.cook@ccns.nshealth.ca) or by phone at 902-473-3675. ☺



 **CCNS** recently launched Phase one of its Web site. A source of quality cancer information for all Nova Scotians, it includes details about the organization, its current projects and accomplishments to date, as well as information related to prevention, treatment, research and statistics.


Organizational publications such as news releases, **CCNS** newsletters, fact sheets, position statements and roundtable reports are available on the site. Links to other cancer-related sites are also included. A section dedicated to health professionals will be available as the Web site evolves in Phase two.

Visit the **CCNS** Web site at [www.cancercare.ns.ca](http://www.cancercare.ns.ca) and let us know what you think. If you would like to begin receiving our newsletter by email, rather than waiting for the paper copy, please email us at [info@ccns.nshealth.ca](mailto:info@ccns.nshealth.ca)

 **CCNS** invites all pharmacists to participate in a survey to assist us in meeting your cancer education needs. Developed in collaboration with pharmacists from several areas of practice, the survey will ask about the

current challenges of pharmacists in cancer care to obtain information about their educational and resource needs.

The questionnaire was mailed in late April to the work address of all pharmacists in Nova Scotia. Please take the time to complete it, as it will ensure **CCNS** has the best information possible to assist in planning educational programs for pharmacists.

 **Plan to celebrate** National Cancer Survivors' Day on Sunday, June 2 from 2-4 p.m. at Pier 21 in Heritage Hall. Bring your family and friends and join hundreds of other Nova Scotians, whose lives have been touched by cancer, for an afternoon of fabulous entertainment on the Halifax waterfront. This event is free and everyone is welcome.

Terry Kelly and Raylene Rankin, well known musicians and cancer survivors, will headline an afternoon of terrific Nova Scotian entertainment. There will be an opportunity to lovingly pay tribute to the people closest to our hearts who have been diagnosed with cancer and to those who dedicate

## News and Notes

their lives and their careers to cancer patients. But mostly, this will be an opportunity to reflect on the richness and the fullness of life. Let's celebrate the hope that, in future, heartache will be lessened for people diagnosed with cancer, and for those who love them.

 **The Supportive Care Cancer Site Team** is looking for health professionals and other cancer caregivers to join its Community Resources and Guideline Development Working Group. Please contact Larry Broadfield at 902-473-5845 or by email at [larry.broadfield@ccns.nshealth.ca](mailto:larry.broadfield@ccns.nshealth.ca) for more information. (continued on page 4)

# RESEARCH COLUMN

## *Stimulating immune responses against cancer*

Dr. Ken West, a Kidney Specialist and Basic Science Immunologist, and Dr. Geoff Rowden, a Pathologist, both of whom hold joint appointments with Dalhousie University and the Queen Elizabeth II Health Sciences Centre, are considered world leaders in their area of immune system research.

They have spent the last three years studying how the dendritic cell, the most powerful antigen-presenting cell, works. These cells stimulate all immune responses and have the power to pick up bits of cancer and viral proteins and move them to the immune system headquarters - the lymph nodes. Here, they engage the lymphocytes, which act as the 'army' of the immune system, attacking and killing foreign invaders like cancer and viruses.

"Activating immune responses against cancer is not a new idea," said Dr. West. "It's been around 30 or 40 years, but has shown only limited success. It's only in the last couple of years that the importance of the dendritic cells in activating immune responses against tumours has been universally accepted."

While dendritic cells are challenging to study, because they only present in small numbers, Drs. West and Rowden

have had considerable success in understanding the relationship between the dendritic cells and the lymphocytes.

"When the dendritic cell and the lymphocytes get together, the dendritic cell changes shape to activate the T-cell," said Dr. West. "It's almost like they're dancing. Everyone believed that the dendritic cell was a passive partner, but our research has concluded that the dendritic cell actually takes the lead."

These results were published in the Cutting Edge section of the Journal of Immunology in February 2001.

All of their work to-date has involved cells from mice. The next step is to work with human dendritic cells. Learning from this research will mean an easier application into clinic.

"As clinicians, we're always looking to enhance patient care," said Dr. West. "This is a lifetime project, but we'll see results that will impact the clinic. It's just that there will still be more questions that need to be answered. By understanding how these cells work, we'll be able to achieve the best results."

Funding for this project is provided by the Canadian Institute of Health Research (CIHR), Nova Scotia Health Research Foundation and the Kidney Foundation of Canada. ✧



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This is a newsletter for and about the people and issues affected by Nova Scotia's cancer care system. It is produced by Cancer Care Nova Scotia.

We welcome and encourage everyone's input to this newsletter. Please submit your stories or story ideas to:

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If you want to be added to our mailing list, or if you want to receive additional copies of this newsletter regularly for your office or waiting room, please feel free to contact us at the above address with the number of newsletters you need.

The deadline for articles and story ideas for Volume III, Issue Three is June 10, 2002.

Cancer Care Nova Scotia is a program of the Nova Scotia Department of Health, in partnership with the Dalhousie University Faculty of Medicine and the QEII Health Sciences Centre.



# District Cancer Program: UPDATE

By Jill Petrella, Quality Coordinator, CCNS

Cancer Care Nova Scotia has been "on the road" again, visiting districts' senior leadership teams, focusing on the structures and supports necessary to facilitate the development of District Cancer Committees. These will lead and guide District Cancer Programs. We have also been holding public meetings to ensure that the public is informed of our activities. Now that spring is here and the weather more predictable, we will ensure that at least one public meeting is held in each of the remaining districts by early June. We always enjoy meeting the people who come to the public meetings and hearing what they have to tell us.

Our hope is that all districts will have a formal District Cancer Committee to identify the gaps in service in their district and to develop strategies to address them. The committee's mandate would also include planning for an effective, coordinated, quality cancer system within their district that is well linked to the provincial components of the system.

I am pleased to have been invited to attend the first meetings of District Cancer Committees in Pictou County and Cumberland-East Hants

districts. CCNS is working with all districts towards this goal.

As I write this article a meeting of all District Cancer Committees is being planned for May 9 in Halifax. This is an opportunity for representatives from all districts to come together to discuss the first steps in establishing District Cancer Committees. At this meeting, the focus will be on developing common approaches and processes to ensure consistency across the province. Through sharing our successes, we can collectively benefit from best practices, while recognizing the uniqueness of each district.

The meeting will provide an opportunity to identify the other supports and resources that CCNS can provide to the districts to assist them. We appreciate that districts have to focus on service delivery and managing within a difficult fiscal umbrella. CCNS is pleased to be able to provide supports through planning analysis, education and monitoring for quality to ensure we achieve the kind of cancer system to which we are all committed. I will keep you posted on the outcomes of this meeting and further developments of the District Cancer Program. ☺

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**The Nova Scotia Cancer Registry** has changed its name to the Surveillance and Epidemiology Unit to better reflect its evolving scope and focus. The Unit is responsible for collecting and analyzing data on all diagnosed cases of cancer in Nova Scotia, in addition to epidemiological research. The Cancer Surveillance and Epidemiology Unit can be reached by calling 902-473-5172.



**The Canadian Cancer Society's Relay For Life**, May 31 to June 1 at St. Mary's University, is a unique overnight fundraising event, celebrating the lives of family, friends and co-workers who

have battled cancer. Teams of 10-12 participants raise pledges in support of the Canadian Cancer Society - Nova Scotia Division and on May 31 through to June 1, they enjoy an evening of fun, friendship and entertainment as they walk, jog, wheelchair or run around the track at St. Mary's University Stadium. The Luminary Ceremony will be a very memorable moment. At sunset, thousands of candle lit luminaries will be placed around the track in a special ceremony. As participants walk the track throughout the night, they will be encouraged by the candlelight and the warmth of the personal messages written on each luminary. For more information on Relay For Life, please call 1-800-639-0222. ☺

