

# WHO WE ARE & WHY WE'RE HERE



*Cancer Care  
Nova Scotia*



**C**ancer Care Nova Scotia (CCNS) was established by the Nova Scotia Department of Health in 1998 to strengthen the cancer system in Nova Scotia. Specifically, our mandate is to coordinate, strengthen, and evaluate cancer services in Nova Scotia. We work with, support, and provide leadership and expertise to health professionals and administrators in all health districts to realize our mandate and achieve our goals. In addition, CCNS initiates and maintains working relationships with educational institutions, health charities, professional associations and others to meet shared goals, such as addressing the continuing education needs of health professionals and promoting healthy public policy.

Working with stakeholders in the field of cancer and health, CCNS programs cover the cancer continuum, which includes prevention, screening, education, treatment, follow-up care and palliation. CCNS programs are community-focused, patient-centered, cost-effective and evidence-based.

### **Mission**

**CANCER CARE NOVA SCOTIA WILL HELP ACHIEVE EXCELLENCE IN CANCER PREVENTION, TREATMENT, CARE AND RESEARCH FOR ALL NOVA SCOTIANS.**

### **Our Goals**

**CANCER CARE NOVA SCOTIA'S WORK IS FRAMED BY FOUR BROAD GOALS:**

- To ensure all Nova Scotians have access to high quality cancer care;
- To reduce the number of people getting cancer and the number of cancer deaths;
- To provide reliable and helpful cancer information to Nova Scotians; and
- To facilitate stronger cancer research programs in Nova Scotia.

### **Vision**

**CANCER CARE NOVA SCOTIA WILL REDUCE THE EFFECTS OF CANCER ON INDIVIDUALS AND FAMILIES THROUGH PREVENTION, SCREENING AND RESEARCH, AND WILL LESSEN THE FEAR OF CANCER THROUGH EDUCATION AND INFORMATION.**

**ALL NOVA SCOTIANS, DIAGNOSED WITH CANCER, TOGETHER WITH FAMILY, FRIENDS AND COMMUNITY, WILL FIND ALL ASPECTS OF CANCER TREATMENT AND CARE EXCELLENT IN QUALITY, PROFESSIONAL IN DELIVERY, COMPASSIONATE IN FOCUS AND CARING IN SPIRIT.**



## Working together for change

*Cancer Care Nova Scotia* is led by a voluntary Board of Directors, appointed by the Minister of Health. Board members are representative of Nova Scotia's geographic and cultural diversity. Led by Board Chair, Jack Keith, our board members include business and community leaders, health professionals, cancer patients, survivors and family members. Through the leadership and expertise of this dedicated team of volunteers, *Cancer Care Nova Scotia* staff work to enhance and improve the cancer system for all Nova Scotians.

### *CCNS Board members:*

Mr. Jack Keith (Chair), *Halifax*  
Mr. Wayne Adams, *East Preston*  
Mr. Donald Ferguson, *Glace Bay*  
Mr. Ron Francis, *Sherbrooke Lake*  
Mr. Brian Gallivan, *Halifax*  
Ms. Susan Haley, *Wolfville*  
Dr. Gerald Johnston, *Halifax*  
Ms. Carmelita Kavanaugh,  
*New Waterford*  
Dr. Brian Lynch, *Antigonish*  
Ms. Jane Mealey, *Halifax*  
Ms. Nancy Milford, *Glen Haven*  
Mr. David Mooney, *Yarmouth*

Ms. Darlene Morrison, *Halifax*  
Mr. David Muise, *Sydney*  
Mr. Bruce Saunders, *Amherst*  
Ms. Sheila Scaravelli, *New Glasgow*  
Ms. Francine Wallace, *Saulnierville*  
Ms. Judith Wesley, *Truro*  
Dr. David White, *Mahone Bay*  
Dr. Mark Dorreen,  
*Medical Oncologist,*  
*Capital Health Cancer Care*  
*Program (Ex Officio)*  
Dr. Jeff Scott, *Department of Health*  
*(Ex Officio)*

## Meet the Executive Team

### **Mr. Jack Keith, Board Chair**

Mr. Jack Keith assumed the role of *Board Chair* for *Cancer Care Nova Scotia* in November 2001. Mr. Keith was Senior Vice President of the Bank of Nova Scotia - Atlantic Region from 1986 until he retired in 2001. Mr. Keith was named as a member of The Order of Canada in 1993. He also received an honorary Doctor of Commerce degree from Saint Mary's University in 1998. Throughout his career, Mr. Keith has played an active role in the community.

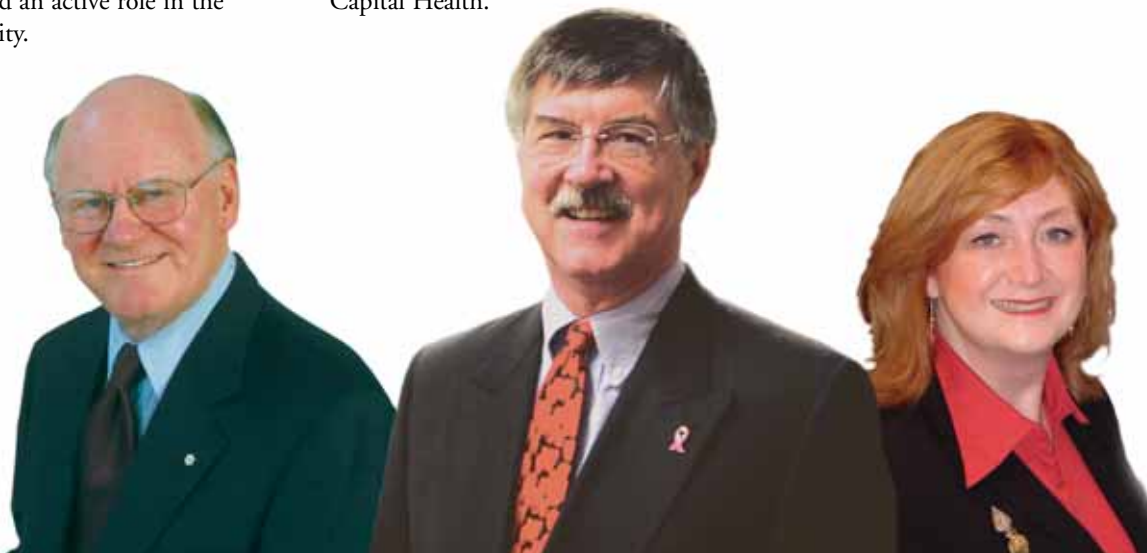
### **Dr. Andrew Padmos, Commissioner**

In September 1998, Dr. Andrew Padmos assumed the role of Commissioner for the newly formed *Cancer Care Nova Scotia*. He also holds the roles of Head of the Capital Health Cancer Care Program at the QEII Health Sciences Centre, and Associate Dean for Cancer Programs at Dalhousie University's Faculty of Medicine. In 2003, he was appointed Vice President, Research, Academic Affairs and Quality for Capital Health.

### **Ms. Theresa Marie Underhill,**

#### *Chief Operating Officer*

Ensuring operational efficiency and achieving strategic goals are the responsibilities of Ms. Underhill. Working with *Cancer Care Nova Scotia* since its inception in 1998, she manages programs and develops policy to ensure an effective, integrated and quality organization.



## Programs and People

*Cancer Care Nova Scotia's* executive team and program staff work with district health authorities and others to lay a foundation for an integrated, coordinated, quality cancer system. Our programs, staff, and accomplishments, to date, include:



**Cancer Patient Family Network**  
**Emmie Luther-Hiltz,**  
*Coordinator,* works with patients, cancer survivors and families in districts throughout

the province to facilitate the sharing of information, foster grassroots support for cancer patients and offer members a collective voice to enhance the cancer system. Under Emmie's leadership, our annual Celebrate Life event to mark National Cancer Survivors Day, the first Sunday in June each year, has done much to build a community of cancer survivors and inspire hope for the future.

Through her work with *Cancer Care Nova Scotia*, Emmie played an integral role in the development of the Sunshine Room, a comfortable supportive area where people undergoing cancer treatments can relax. As program manager, Emmie trains volunteers who staff the room and coordinates schedules of registered therapists who have volunteered to introduce patients to supportive therapies such as Therapeutic Touch, massage therapy and reflexology.

The Sunshine Room, which opened in June 2003, is located at the Victoria General site of the Queen Elizabeth II Health Sciences Centre in Halifax. The development of this space has served as a model for other health districts that have worked to create similar supportive environments for cancer patients.

### Cancer Outreach Clinics

Cancer patients in Yarmouth and Antigonish, and neighbouring communities now receive more of the care they need without making regular trips to Halifax or Sydney. Medical and radiation oncologists from the Capital Health Cancer Care Program at the Queen Elizabeth II Health Sciences Centre and the Cape Breton Cancer Centre have been making monthly visits to outreach oncology clinics in these communities since spring 2000, monitoring current patients and seeing new patients for assessment and care planning.



**Cancer Patient Navigation**  
*Cancer Care Nova Scotia* developed and implemented Cancer Patient Navigation to work with family

doctors, cancer specialists, patients and families to improve access to and coordination of cancer services. It is now available in five health districts: Pictou County Health, South West Health, Guysborough Antigonish Strait Health, Annapolis Valley Health, and South Shore Health. As *Project Manager, Cancer Patient Navigation*, **Sandra Cook** provides leadership and direction to Cancer Patient Navigators.

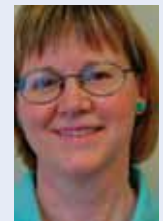
*Cancer Care Nova Scotia's* Cancer Patient Navigation program is often referenced as a national benchmark standard for improving access to and coordination of care for cancer patients and their families.

### Cancer Site Teams

*Cancer Care Nova Scotia* has adopted the Cancer Site Team (CST) approach to cancer care. There are 13 Cancer Site Teams, each of which has an interest in one kind of cancer or cancer "site." Teams are made up of different health care professionals such as oncologists, nurses, pharmacists, surgeons, dietitians, and social workers, among others. Cancer Site Teams review care plans and develop clinical practice guidelines to ensure consistent treatment.

### Cervical Cancer Prevention Program

The Cervical Cancer Prevention Program joined the *Cancer Care Nova Scotia* team in January 2002. The goal of the program is to decrease the incidence of cervical cancer in Nova Scotia.



**Dr. Rob Grimshaw, Medical Director,** together with **Margery MacIsaac, Coordinator,** and their team of professionals, work with family physicians, laboratories, colposcopy centres, nurses, lay persons, researchers and educators from across the province. Enhancing awareness about the importance of regular Pap tests in preventing cervical cancer is key to the program's mandate.

Maintaining the provincial cytology/colposcopy registry, a database of all pap smears performed in Nova Scotia, and establishing and monitoring province-wide standards of care, are the foundation stones of this program.

Among the program's recent accomplishments are: system improvements in data collection and analysis, enabling program staff to provide valuable information to Pap test providers to assist them in serving more women; planning Pap Test Awareness Week, an annual media and public awareness campaign to communicate and reinforce messaging about the importance of regular Pap tests in preventing cervical cancer; and development of a three-lesson resource kit for Personal Development and Resource teachers to use in educating their grade nine students about the value of regular Pap tests.



#### **District Cancer Programs**

*Cancer Care Nova Scotia*, under the direction of **Jill Petrella**, *Quality Coordinator*, worked

with district health authorities in Nova Scotia to help each develop and now sustain a District Cancer Program. This network of cancer services across the province ensures consistency and quality in cancer treatment and care.

Currently, Jill is working with districts to develop a framework of standards. Known as Levels of Care, the standards will define the type of cancer services that can safely and appropriately be provided in a particular location, such as a hospital, a doctor's office or a patient's home. Levels of Care will take time to develop, but should be ready for gradual implementation across the province in April 2007.

Jill also coordinates the work of *Cancer Care Nova Scotia's* 13 Cancer Site Teams, whose members from across the province develop guidelines for cancer care.



#### **Education for Health Professionals and Patients**

Under the leadership of **Anne Murray**, *Provincial Manager, Education and Patient*

*Navigation, Cancer Care Nova Scotia* has developed, pilot-tested, and implemented a suite of continuing education programs for health professionals called Excellence in Cancer Care, Oncology Education for Health Professionals. Dalhousie Continuing Medical Education and other health professional groups provided expertise in program development. Programs under this umbrella, including Interprofessional Core Curriculum and Communication Skills for Health Professionals, were developed in response to information learned from comprehensive needs assessments *CCNS* conducted with health professionals.

In her role as provincial manager, Anne has overall responsibility for Cancer Patient Navigation and professional and patient education programming.

#### **Oncology Interactive Education Series**

*Cancer Care Nova Scotia* recognizes that reliable, accurate patient information results in better care. Research indicates that when patients understand their disease, they feel more in control, experience less anxiety and take a more active role in decisions about their treatment. This results in better outcomes and better care.

For this reason, *CCNS* introduced the Oncology Interactive Education Series (OIES), an interactive, computer-based cancer education program for patients, their families and health professionals. The program includes information on each of 24 kinds of cancer. Each topic follows the patient experience, providing information about disease prevention, early detection, symptoms, diagnosis, staging,

treatment options, nutrition, pain management, psychosocial care and community support services. It also provides answers to a number of commonly asked questions. The learning is supported by three dimensional anatomy, patient experiences and clear graphics. OIES is available in many health districts throughout the province.



#### **Palliative and Supportive Care**

*Cancer Care Nova Scotia* recognizes that trained professionals with the appropriate skill set are key to

providing quality care. **Judy Simpson**, *Coordinator, Palliative and Supportive Care*, is working in partnership with health professionals, professional and volunteer groups, district health authorities, and the Nova Scotia Department of Health, to ensure comprehensive palliative care programs and support services are available to cancer patients and their families at the right time and in the most appropriate setting.

Under Judy's leadership, *Cancer Care Nova Scotia* developed a three-day Palliative Care Front-Line Education Program. An *Excellence in Cancer Care* offering, to date more than 1,800 health professionals have completed the program. In doing so, they have improved and enhanced their knowledge, skills and understanding of issues surrounding palliative care. Program implementation is the result of a partnership between *CCNS* and the district health authorities.

*Cancer Care Nova Scotia's* expertise in palliative care has been recognized by the Nova Scotia Community College. *Cancer Care Nova Scotia* has an agreement with the Community College, enabling them to offer the Program as part of their core curriculum to all continuing care assistants and practical nursing students.



### Patient Navigation Community Liaison

*Cancer Care Nova Scotia* created the position of Patient Navigation Community Liaison

to help meet the unique needs of African Nova Scotians, First Nations, Immigrants and other diverse communities. As *Community Liaison*, **Donna Smith** has visited over 14 African Nova Scotian communities and has shared with them their collective response to the needs assessment they completed. She has hosted community education sessions on cancer prevention and has established a lay education program in East Preston.

Donna has also worked with First Nations community researchers to find out about their cancer related health needs. Research has also been conducted with various communities of immigrants to ask them about their needs. *Cancer Care Nova Scotia* will work with these communities and the Department of Health to implement their reports' recommendations.



### Prevention

Research shows that as many as 50 per cent of cancers are preventable through diet and healthy lifestyle choices, supported by societal changes.

Eliminating tobacco use and exposure to second-hand smoke, eating a healthy diet, reducing exposure to the sun, being physically active and maintaining a healthy body weight are steps individuals can take to reduce their cancer risk.

*Prevention Coordinator*, **Judy Purcell** supports community capacity for action on these risk factors, facilitates collaborative effort and works toward the creation of public policy, which makes the healthy choice the easy choice.

Key among *Cancer Care Nova Scotia's* accomplishments in the area of prevention are: Action in your Community against Tobacco (ACT), Sun Safe Nova Scotia and the Nova Scotia Alliance for Healthy Eating and Physical Activity.

ACT is a program designed to support individuals and groups in taking action against tobacco in their own communities.

Under Judy's leadership, Sun Safe Nova Scotia is a coalition of organizations whose goal is to denormalize tanning and raise awareness among Nova Scotians about the dangers of overexposure to the sun. With expertise from *CCNS*, Sun Safe Nova Scotia is working to provide government with evidence to initiate a policy restricting tanning bed use to individuals over the age of 18 years.

Also under Judy's guidance, the Alliance for Healthy Eating and Physical Activity is a collaborative group of like-minded organizations working to encourage the development of public policy to support its ultimate goal of healthy living for all.

### Research

*Cancer Care Nova Scotia* provides the leadership and vision to ensure a coordinated approach to cancer research in Nova Scotia through the Dalhousie Cancer Research Program (DCRP). Since the recruitment of world-renowned cancer researcher, Dr. Patrick Lee, as the Cameron Chair in Basic Cancer Research in April 2003, Nova Scotia's cancer research community has grown considerably. This province now has a total of six Dalhousie University Endowed Chairs in Cancer Research, making Nova Scotia an emerging Canadian leader in cancer research.

The DCRP is a joint initiative of *Cancer Care Nova Scotia*, Dalhousie Faculty of Medicine, Dalhousie Medical Research Foundation, the Canadian Cancer Society – Nova Scotia Division, the Queen



Elizabeth II Health Sciences Centre and the IWK Health Centre.

Under the leadership of **Dr. Eva Grunfeld**,

*Director, Cancer Outcomes Research Program* and first recipient of *Cancer Care Nova Scotia's* Peggy Davison Cancer Research Scientist Award, our organization is building an expert team in cancer health services research. Dr. Grunfeld and her team are exploring Nova Scotians' access to cancer care; how much the care costs and what happens to patients as a result of that care. Cancer Outcomes Research answers the question, "Are patients getting the very best care possible – based on the information we have available?"

*Cancer Care Nova Scotia* is a provincial funding partner of the **Cancer Research Training Program (CRTP)**. This program provides graduate students, postdoctoral fellows, physicians and other health professionals with the opportunity to train and work with leaders of Nova Scotia's research community to hone their research skills. In the last five years, the CRTP has awarded 35 traineeships to students involved in cancer research at Nova Scotia universities.

*Cancer Care Nova Scotia* established the **Norah Stephen Oncology Scholar Awards** to foster interest in cancer research among students in Nova Scotia. A total of 12 awards, each worth \$5,000, are awarded each spring to undergraduate and graduate health sciences students enrolled in a Nova Scotia university. Four awards are dedicated to cancer-related research projects in basic sciences and four are dedicated to cancer-related research projects in other disciplines such as informatics, epidemiology, outcomes and/or sociobehavioural research. The remaining four awards are dedicated to clinical training / experience projects.

## Roundtables

*Cancer Care Nova Scotia* engages stakeholders in focused discussions, through Roundtables, to bring about changes and improvements to the cancer system. It has proven to be one of our most important vehicles to drive system changes and improvements. Each one-day, facilitated meeting brings a representative mix of cancer patients, survivors, their families, volunteers, doctors and other health care professionals together to focus on topics including: Palliative Care, Patient Navigation, Cancer Patient Family Network and District Cancer Programs.



### **Surgical Oncology Network (SON)**

As *Head of Cancer Care Nova Scotia's* Surgical Oncology Network, **Dr. Carman**

**Giacomantonio** brings together surgeons from across the province for education to improve quality. The goal is to ensure patients have access to high quality care regardless of where they live. Through the network, educational opportunities, quality assurance studies and guidelines for clinical care are developed. Network members also work to enhance participation in oncology research and clinical trials.



### **Surveillance and Epidemiology Unit**

As *Director*, **Maureen MacIntyre** leads a team of professionals

including researchers and epidemiologists who collect and analyze the data to enable a better understanding of the causes and risk factors associated with various cancers, to determine the relative success of cancer treatment methods and to enable the development of preventative

measures to reduce cancer incidence in the population. Unit staff work closely with district health authorities to provide district-specific information to help them in planning and projecting expected needs of their communities.

The Surveillance and Epidemiology Unit plays an important role in understanding the magnitude of the cancer challenge in Nova Scotia and its impact on communities throughout the province.

Operation of the Nova Scotia Cancer Registry is a key component of the cancer surveillance effort. The registry, in existence since 1964, is a repository of data on all diagnosed cases of cancer in Nova Scotia.



### **Systemic Therapy Program (STP)**

*Cancer Care Nova Scotia's* Systemic Therapy Program (STP) standardizes

how cancer drug therapies are administered in Nova Scotia. **Larry Broadfield**, *Manager, Oncology Pharmacy*, manages this program in collaboration with *Oncology Pharmacist*, **Marlene Sellon**. With guidance from Cancer Site Team members, Larry developed the Systemic Therapy Manual for cancer health professionals. The 1000-page reference outlines comprehensive standards and treatment regimens, including specific details about drugs and combinations. The development of evidence-based guidelines and policies for new and emerging drugs in cancer is also a major activity of the program, led by Marlene. Larry and Marlene also work with the Department of Health to identify funding recommendations for new cancer drugs. Larry has also worked with site team members to develop medication information sheets for patients and families. Current work

includes monitoring new evidence and clinical practice changes and updating the Systemic Therapy Manual as necessary. In addition, Larry works closely with **Jill Petrella**, *Quality Coordinator*, and with the cancer site teams to facilitate the development of clinical practice guidelines.



### **Administration & Special Projects**

As *Director, Administration and Special Projects*, **Rose Marie Ali** is

responsible for the administrative functions of finance, human resources and information management. She is also involved with cancer control planning, policy development and special projects. Key partners include the Department of Health, QEII Health Sciences Centre, IWK Health Centre and the District Health Authorities.



### **Communications**

**Christine Smith**, *Communications Coordinator*, is

responsible for developing, coordinating and implementing the communication strategy for *Cancer Care Nova Scotia*. She partners with a number of organizations throughout the province, including district health authorities, Dalhousie University Faculty of Medicine, health professional associations and health charities to increase public awareness of *CCNS* programs by ensuring the timely release of information through appropriate communication venues such as the *CCNS* website and newsletter, print materials such as fact sheets and brochures, and media campaigns.



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