

Manitoba's Cancer Strategy

2012 - 2017

Introduction

Cancer is the leading cause of death in the country and the number of new cases identified continues to rise. More than 6,100 patients are diagnosed annually with cancer while up to ten times more Manitobans are suspected to have cancer before it is ruled out. Like other jurisdictions, it is expected that in the next 15 to 20 years, the number of Manitobans diagnosed with cancer will increase by 50 per cent. As our population ages and grows larger, the need for prevention and cancer-related health services continues to grow. It is evident that current service levels will not be able to meet increased demand for treatment, cure and care. There is a clear need for ongoing strategic investment and planning for cancer services in Manitoba.

In June 2007, the province introduced a five-year plan called *Cancer Services in Manitoba: A Strategic Framework* to guide investments in prevention, screening and care to address cancer. This framework has helped focus the investments in cancer services by Manitoba Health and its partners, including the health-care sector, universities, the private sector, non-government organizations, communities and individuals, which are all working together to prevent premature deaths and improve cancer outcomes.

The range and capacity of cancer services have been significantly enhanced since the first cancer strategy in 2007. Manitoba has made progress on all of the 38 priorities for action identified in the 2007 framework. The many significant achievements include:

- investing \$24 million for the development of the Western Manitoba Cancer Centre, the first facility to provide radiation therapy outside of Winnipeg as well as chemotherapy and outpatient care
- introducing a new colorectal cancer screening program called ColonCheck that has achieved the highest self-reported screening rates in the country
- expanding both cervical and breast screening programs (CervixCheck, BreastCheck)
- increasing the number of oncology specialist positions by almost 50 per cent
- more than doubling the oncology drug budget
- implementing the most aggressive wait times guarantee in Canada for radiation therapy, reducing the wait times from an average six-week wait in 1999 to a best-in-Canada median of one week
- building an additional five rural community cancer sites to provide chemotherapy;
- introducing the first Community Cancer Resource and Support Program (CCRSP) in Manitoba in Eriksdale in 2010
- investing in health promotion initiatives such as Manitoba *in motion*, Healthy Schools, developing fitness tax credits for children, youth and young adults and supporting a variety of healthy eating initiatives

The cancer journey from suspicion of cancer to the beginning of treatment is complex and can be highly stressful for the patient. This journey often starts with a visit to a family doctor, followed by screening and testing, referrals and re-testing as well as diagnosis and treatment planning before treatment begins. CancerCare Manitoba estimates this journey can take approximately three to nine months for patients today.

Currently 10 to 15 per cent of Manitoba patients do not have a family physician or primary care provider. Public awareness of cancer related symptoms, signs and risk factors is relatively low and leads to delays in seeking help. Delays can raise anxiety and may affect clinical outcomes, especially in advanced stages of the disease that require more intensive treatment costs and have reduced survival rates.

Although the majority of cancer patients in the province feel their care needs were met, they raise a number of concerns that need to be addressed. These include:

- multiple health care providers
- a lack of coordination, integration and information flow among care providers
- poorly defined diagnostic, treatment and care pathways
- access to care

This strategic framework for cancer control aims to build on the major successes in cancer that have been delivered under the 2007 provincial cancer strategic framework. To address the rapidly rising burden of cancer, this updated strategy for cancer services in Manitoba advocates an integrated and cohesive approach to cancer that involves prevention, screening, diagnosis, treatment, palliative care and survivorship. It places a major emphasis on measuring need and on addressing inequalities, and directs the focus on ensuring all elements of cancer policy and service are delivered to the maximum possible extent.

There is evidence of considerable variation in cancer survival between regions and also significant fragmentation of services for some cancer patients. This strategic framework also focuses on reorganizing the way we deliver cancer services, to ensure future services are consistent and associated with a high-quality experience for patients and their caregivers.

The fight against cancer in Manitoba is carried out by a large group of stakeholders and partners, each contributing a unique set of resources and skills. These include all levels of government, Manitoba Health, CancerCare Manitoba, Manitoba's regional health authorities, Diagnostic Services of Manitoba, the University of Manitoba's Faculty of Medicine, the Canadian Cancer Society, CancerCare Manitoba Foundation, hospitals, specialists, researchers and family physicians, community and social agencies, charitable organizations, the private sector, volunteers and individuals. Although Manitoba's current level of cancer care and control is comparable to national averages, breakthrough objectives must be realized in the next five years to meet future demands. Only through coordinated and collaborative action with all our stakeholders, can results be achieved.

Manitoba Health's role in the health care system is to set out the strategic direction for the delivery of health care services to ensure they are provided effectively and efficiently. Government also supports health care organizations, such as CancerCare Manitoba and the regional health authorities as they deliver services, and partners with other government departments to address healthy living and promote prevention.

This strategic framework provides a renewed commitment to build on Manitoba successes, to continue our momentum and to work collaboratively with stakeholders and partners to prevent and control cancer on multiple fronts over the years to come.

Background: Cancer in Manitoba

In June 2010, CancerCare Manitoba released a new community health assessment report that examined cancer risk factors such as smoking and limited physical activity, wait times for screening and treatment, and incidence, mortality and survival rates. These factors provide a high-level snapshot of cancer in Manitoba.

Risk factors for cancer such as obesity, smoking and alcohol consumption, show considerable variation by region and are frequently higher in the North. In Manitoba, 55 per cent of the population is overweight or obese, 45 per cent are inactive and 27 per cent are smokers.

As a result of where we live, the state of our environment, our income and education level, and our relationships with friends and family, some populations are more likely to experience these risk factors than others. This includes Manitoba's aging population, the growing First Nations population and an increasing number of new Canadians. This will affect cancer rates and service delivery in the future.

The report further examines a number of other factors, such as screening participation rates, access to diagnosis and treatment, patient satisfaction and cancer trends over time. It shows that services are affected by challenges of geography, type of cancer and patient choice. Some of the key findings included:

- some Manitoba communities have higher cancer screening rates than others. Screening uptake is lower in northern communities
- manitoba's colorectal cancer screening rates are the highest in the country.
- radiation therapy waits are the lowest in Canada
- more than 95 per cent of patients report they are satisfied with their cancer treatment and care

The good news is that the mortality rate from cancer is declining and long-term survival rates are increasing. However, there is more work to be done over the next five years, as the number of cases is expected to grow in the years ahead - primarily due to Manitoba's aging population.

The number of Manitobans diagnosed with cancer has risen from about 3,300 in 1976 to about 5,500 in 2005 and is projected to increase to more than 8,000 new cases by 2026. Most of the increase in new cancer cases over the last 20 years is due to the aging population. As in the rest of the country, Manitoba's aging population will be the single largest contributor to the expected increase in cases in the future.

The report also reveals there are serious challenges ahead for cancer services if current risk factors do not improve.

Making the Case for Primary Prevention: An Economic Analysis of Risk Factors in Manitoba has assessed the potential future changes in the economic burden associated with the risk factors of tobacco smoking, physical inactivity and overweight/obesity. If the proportion of the population with these risk factors decreases by just one per cent per year starting in 2011, the annual economic burden in 2026 is projected to decrease from a projected \$2.3 billion with no risk factor reduction, to \$1.92 billion, a decrease of \$210 million.

This data provides the opportunity to review past successes and further outline strategic goals in the next five years and beyond. This includes:

- continuing to invest in prevention to reduce the incidence of cancer
- ensuring quality service provision, including early detection services
- focusing on enhancing access to safe, timely, patient-focused cancer services
- continuing to focus on research in cancer control and treatment

Everyone needs to take responsibility for reducing the number of cancer cases in our province. The government must support the development of better measures and stronger systems to assess the health of Manitobans and monitor the needs of the health care system to target investments in prevention, detection and care wisely.

The health care sector, including regional health authorities, CancerCare Manitoba and other organizations, must use these investments to provide timely, safe and quality patient-focused care where it is most needed.

Given the many factors that impact health and well-being, the increasing cancer burden will require a collaborative effort. Those who work to address economic, environmental, social and cultural well-being must also be involved. Living conditions are affected by the quality of communities, housing situations, work settings, health and social service agencies, and educational institutions. Future investments must acknowledge that living conditions shape the well-being of Manitobans.

Communities, including municipalities, other levels of government and non-government organizations, all have a role to play in developing environments that make the healthy choice the easy choice. Families and individuals also have a role to play. Making healthy lifestyle choices now, such as reducing tobacco use, lowering alcohol consumption and getting more physically active, will help Manitobans reduce their risk of developing cancer.

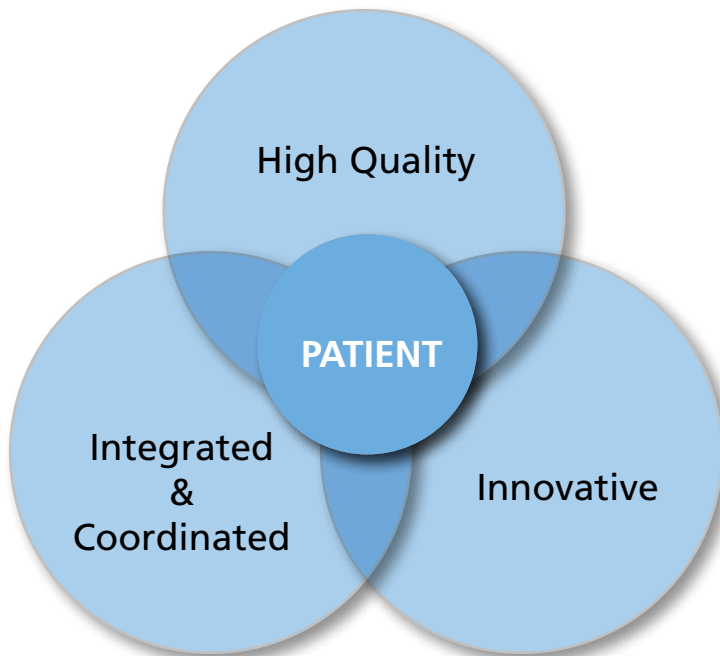
The Manitoba government will keep working with partners to target investments in cancer services to promote healthy living, to diagnose early, to further reduce the number of cancer-related deaths, to improve the odds of survival and to enhance the quality of life for cancer patients around the province while using resources even more efficiently.

Together, we will continue to make a difference in the battle against cancer in Manitoba.

This strategic framework will guide future investments and the implementation of cancer-related health care services across the province.

Manitoba Strategy for Cancer Control

GOAL: Reduce Cancer Rates and Improve Outcomes and Care



Guiding Principles

- The patient will be involved in all decisions and engaged at all steps of the journey
- All cancer patients will receive the highest quality care available
- The cancer system will be coordinated at all steps by multi-disciplinary teams of healthcare providers
- The system will embrace innovation and flexibility to adapt to changing needs

PREVENTION & PROMOTION	SCREENING & DIAGNOSIS	CARE & TREATMENT	FOLLOW-UP & SURVIVORSHIP
Improve the patient experience			
Build and foster partnerships			
Focus on paediatric and adolescent and young adult cancers			
Reduce disparities and financial burdens			
Reduce wait times			
Increase access			
Increase education and research			
Ensure appropriate capacity			
Enhance use of effective technology			
Enhance evaluation, analysis and monitoring			

Areas For Action

The data from the most recent community health assessment from CancerCare Manitoba shows the need for strong action to reduce the burden of cancer in Manitoba. We must continue to encourage Manitobans to reduce their risk factors and make positive lifestyle choices about physical activity, diet, smoking and alcohol intake as well as taking part in screening programs. At the same time, we need to continue to make strategic investments in testing, treatment, care and research to ensure quality care for people living with cancer.

AREA FOR ACTION:

Primary Prevention and Health Promotion

Where We've Been

Primary prevention means preventing disease before it develops, or decreasing or eliminating exposure to risk factors and increasing factors that promote health. Risk factors are characteristics associated with getting the disease.

For cancer, risk factors include age, gender, heredity, exposure to carcinogens or certain infectious agents, as well as certain lifestyle choices such as diet and activity levels.

Some risk factors such as age and genetics cannot be changed, but research shows that up to 50 per cent of cancers can be prevented through positive lifestyle changes.

Manitoba has made a number of investments in prevention and health promotion that are seeing results. From the successful Manitoba *in motion* provincial physical activity strategy to investment in chronic disease prevention initiatives to aggressive anti-tobacco legislation, we support Manitobans as they choose to live healthier lives. Two provincial campaigns are offered each year which includes the promoting of physical, emotional and social health of students, their families, school staff and communities recognizing that schools are uniquely positioned to positively influence several of the determinants that affect healthy child, adolescent and family development. An "After the School Bell Rings" campaign focuses on after school active recreation and safe and active school travel planning targeting children ages six to twelve and their families throughout the province. In addition an after school vegetable and fruit program through the Child Nutrition Council of Manitoba targets school age children and youth attending after school programs in urban, rural and remote areas of lower socioeconomic status.

Through written school nutrition policies schools can create environments and practices that support healthy eating choices.

The Provincial Health Contact Centre also offers a Dial-A-Dietitian phone service in which the public throughout Manitoba can call and speak to a registered dietitian about food and nutrition.

Manitoba has also implemented the Provincial Tobacco Control Strategy. The Provincial Tobacco Control Strategy has an established strategy of protection, cessation and de-normalization for smoking cessation. The provincial strategy provides education to the schools to target youth.

The smoking cessation drug Champix became an eligible benefit on November 24, 2011. Since the product was listed on November 24, 2011 to September 30, 2012, approximately 12,151 Manitobans have filled a prescription for Champix.

In January, 2012 CancerCare Manitoba (CCMB) announced a comprehensive smoking cessation program to cancer patients, their immediate families, and CCMB staff to help them stop smoking. Supported by funding from the CancerCare Foundation and CCMB, the program uses the best practice approach of combining counselling with treatment such as nicotine patches or medication. Starting with patients facing Thoracic, Head & Neck cancers, smoking cessation services will be available to cancer patients and their immediate family at no cost. According to latest results from the Canadian Community Health Survey, almost 19 per cent of Manitobans are smokers. Adults between the ages of 20 to 34 years have the highest rate of smoking. Quitting smoking at any age helps, with greater benefits realized the younger the smoker kicks the habit.

We also invest in collaborative efforts to measure risk factor data at the community level to facilitate local change as well as guiding healthy public policy. An on-line tool (Health e-Plan) is available that can help adults better understand their current health (including physical activity and healthy eating) and learn ways to improve their health over time.

A “Healthy Together Now” program based on a population health approach focuses on health disparities and is aimed at populations at high risk for chronic disease. It is community-led and coordinated by the Regional Health Authorities. This includes implementation of community action plans aimed at reducing the risk factors of physical inactivity, unhealthy eating and smoking.

Manitoba participates along with other provincial, territorial and federal governments in setting targets to increase steps (physical activity).

In their most recent community health assessment, CancerCare Manitoba found that Manitobans are moderately physically active and now eat more fruit and vegetables than before. In addition, the number of Manitobans smoking has dropped.

However, there is still more to do. Obesity rates and alcohol consumption remain above the national average while fruit and vegetable consumption is below the Canadian average, and more Manitobans need to add physical activity to their lifestyles.

Where We’re Going

We will continue to work with our partners to increase prevention and health promotion efforts to keep people healthy and reduce the number of new cancer cases.

This includes:

- collaborating with partners to support coordinated cancer prevention efforts such as:
 - raise awareness of cancer risk factors
 - promote healthy eating, physical activity and sun safety
 - focus on further reducing tobacco and alcohol use
- updating the criteria for HPV vaccine coverage based on current research
- ensuring all Manitobans have access to a family doctor by 2015
- undertaking rapid improvement in primary care to streamline processes and reduce delays
- developing additional cancer surveillance and epidemiology resources
- expanding initiatives that provide improved access to clinical information and incentives for cancer screening, physical activity counselling and smoking cessation

**AREA
FOR
ACTION:**

Early Detection through Screening and Diagnosis

Where We've Been

Early detection is another key way to reduce the cancer burden in Manitoba. When cancer is detected early, people may be able to receive less invasive or complex treatment, which can reduce mortality rates and costs associated with care.

Every year in Manitoba, about 360 men and women die of colorectal cancer. When detected early, treatment of colorectal cancer is successful up to 90 per cent of the time. The Manitoba Colorectal Cancer Screening Program was established in April 2007, and became known as ColonCheck in 2009. It targets individuals of average risk between the ages of 50 and 74 for colorectal cancer screening using a Fecal Occult Blood test (FOBT).

Regular screening reduces the risk of women developing cervical cancer by up to 80 per cent. CervixCheck, the provincial cervical cancer screening program, facilitates increased access to screening and educates women and health care providers about the importance of Pap tests in addition to HPV screening based on new clinical research for the prevention of cervical cancer.

Although breast cancer can occur at any age, more than 80 per cent of new cases occur among women between 50 and 69 years of age and older. Early detection, combined with effective treatment, remains the best option available to continue reducing deaths from breast cancer in this age group. Research indicates that regular screening mammograms can lower breast cancer deaths in women aged 50 to 69 years by up to 25 per cent. BreastCheck, the provincial breast cancer screening program operated by CancerCare Manitoba, provides mammograms every two years for all eligible Manitoba women 50 years and older.

Currently, cancer screening rates in Manitoba compare favourably to rates across Canada. Cervical and breast cancer screening rates are similar to the national average, while Manitoba's rates for colorectal screening are the highest in Canada based on self-reporting.

Where We're Going

We will continue to work with our partners to improve cancer outcomes and reduce anxiety by detecting new cases earlier and improving access to timely diagnosis. This includes:

- developing diagnostic referral paths and protocols
- undertaking diagnostic rapid improvement events to streamline processes and reduce delays
- establishing regional diagnosis networks to facilitate rapid access to diagnosis
- updating provincial guidelines for genetic and molecular testing, such as for Lynch Syndrome
- expanding the use of mobile ultrasound in rural areas



**AREA
FOR
ACTION:**

- establishing an MRI at Grace General Hospital, Dauphin Regional Health Centre and Selkirk and District General Hospital
- hiring additional pathologists and technologists
- raising awareness of the importance of cancer screening
- monitoring emerging research and literature to evaluate the need for additional cancer screening programs
- improving access to screening for colorectal, breast and cervical cancer
- establishing provincial guidelines for HPV testing
- expanding the Breast Health Centre
- introducing digital mammography in Manitoba

Access to Quality Patient-Focused Cancer Treatment and Care

Where We've Been

Accessible care means that appropriate cancer services are available to those that need them, at the time they are needed, and in a way that will help them most. Factors that affect whether or not patients can benefit from available cancer services include geographical distance to care and transportation limitations, the availability of a primary care provider to refer the patient to care, and cultural and language barriers. Some Manitobans, such as First Nations, Metis, Inuit peoples and new Canadians, are vulnerable and experience differences in access to cancer care.

The Community Cancer Programs Network (CCPN) has helped patients receive cancer care in, or near, their home communities for more than thirty years. The CCPN began as a pilot project in 1978. At that time, five rural Community Cancer Programs were opened: Brandon, Dauphin, Flin Flon, The Pas and Thompson. Today, cancer health care services are delivered across the province at 16 community cancer program sites by specially trained teams of nurses, pharmacists and pharmacy technicians. These sites include oncology outpatient units in rural acute care hospitals focused mainly on delivering chemotherapy close to home. Primary health care physicians are supported by specialists to ensure patients receive coordinated and timely care in or near their home communities. With more than 23,000 patient visits per year, these sites avoid nine million kilometres of travel to and from Winnipeg for patients and their families.

In 2010, the CCPN welcomed the first Community Cancer Resource and Support Program (CCRSP) located in Eriksdale. The focus of the CCRSP is supportive care across the cancer spectrum, from pre-diagnosis through survivorship or palliative care. However, unlike the CCPs, the CCRSP does not provide chemotherapy treatment.

Manitoba has made significant investments to enhance access to cancer services. The new Western Manitoba Cancer Centre, offering radiation therapy and other services opened in June 2011, and work is underway to develop targeted information for hard-to-reach populations.

Prescription drugs are an integral part of delivering effective health care in our province and the Pharmacare program helps Manitobans afford this important health care service. Pharmacare is designed to protect every Manitoban against financial hardships associated with prescription drug costs. The program provides universal drug coverage to all Manitobans on an income basis, regardless of disease or age.

Cancer drugs and supportive therapies administered at CancerCare Manitoba, WRHA Oncology Services, or at Community Cancer Program Clinics are provided at no charge to the patient. In April 2012, a new Home Cancer Drug Program was announced covering 100 per cent of the cost of approved cancer treatment and support drugs with no deductibles. Prior to the announcement of the new Home Cancer Drug Program patients often chose to travel to hospital for treatment due to the high cost of the medications, for some rural patients this meant a lot of travel. In addition to approved cancer treatment medications, the cost of appropriate cancer support drugs is also covered which includes anti-nausea medications to counter the difficult side effects often experienced with chemotherapy treatment.

The Northern Patient Transportation Program (NPTP) is a travel subsidy for medically necessary transportation for residents of Manitoba located in the north (above the 53rd parallel) that cannot access these health services in their regional health authority. The NPTP is not intended to cover all costs of medical travel and is intended as a “subsidy” program and is unique in Canada, as medical travel subsidies are not available in other provinces.

Investing in new ways to provide effective and efficient services allows the health system to better support quality patient care. Clinical trials are playing an increasingly important and common role in treating cancer patients. Because of progress made through clinical trials, many people treated for cancer are now living longer and have a better quality of life.

The cancer journey is often complex, difficult to understand and highly stressful. While more than 6100 patients are diagnosed annually with cancer, up to ten times more undergo investigations for suspected cancer. Although the majority of patients tested turn out not to have cancer, the journey can be traumatic and affects large numbers of families. Manitoba is the first province to put in place a spiritual health care coordinator to directly serve CancerCare Manitoba sites as part of psychosocial and spiritual services.

Work has also been done to reduce wait times, and Manitobans access to radiation therapy is the fastest in the country. CancerCare Manitoba has worked with primary care physicians to identify wait times early on in the patient journey to help patients avoid waiting for referral to a cancer specialist.

In June 2011, Manitoba announced the Transforming the Cancer Patient Journey initiative. This initiative is a five-year, \$40-million, system-wide cancer transformation strategy aimed at shortening the entire cancer patient journey from first suspicion to treatment in 60 days or less.

This will be achieved by:

- establishing the Manitoba Cancer Partnership Steering Committee to ensure all parts of the health-care system are working together to deliver seamless access to patient care as quickly and efficiently as possible
- implementing a tracking system and hiring cancer patient journey trackers to monitor and help cancer patients and families through their entire journey, identify delays and issues, and work to resolve them to ensure timely diagnosis and treatment
- implementing efficiency and quality improvement initiatives within clinical care environments by analyzing current practices, processes and problem areas, and prioritizing areas for action in order to reduce the amount of time cancer patients wait for testing, treatment and care
- implementing rapid diagnostic networks with cancer lead clinicians working with patient navigators, and local care providers to facilitate rapid access to cancer diagnosis and treatment
- enhancing Community Cancer Program (CCP) services into hubs for cancer patient navigation and supportive services to provide a wider range of clinical services and expertise delivered closer to home
- establishing a Vulnerable Population Cancer Control Program improving access to cancer services for vulnerable populations, such as First Nations, Inuit, Metis people and new Manitobans
- implementing effective and efficient coordination, integration and transitions between care environments by enhancing capacity for assessment, measurement, monitoring and reporting

Where We're Going

As the cancer burden is projected to increase by 50 per cent over the next two decades, more work will be done to reduce wait times for treatment for Manitobans living with cancer. This aggressive strategy to reform the cancer patient journey will build on investments in cancer treatment over the last decade and help prepare Manitoba for the increase in cancer cases expected in the years ahead. This includes:

- expanding the Home Cancer Drug Program to include new medications as they become available and approved for use
- supporting the establishment of a Provincial Oncology Surgery Program
- improving access to and education of Palliative Care services to provide optimal end-of-life care which includes access to spiritual palliative care
- developing a model for after-hours care of cancer patients
- developing protocol for care of cancer patients attending emergency departments
- supporting additional research space at CancerCare Manitoba to increase enrolment in clinical trials
- undertaking rapid improvements in surgery to streamline processes and reduce delays
- implementing a province-wide symptom screening tool for distress
- hiring additional nurse practitioners and social workers in rural Manitoba

**AREA
FOR
ACTION:**

- providing increased awareness and educational resources to support the preservation of reproductive capacity for young adults undergoing cancer treatment
- Introducing public reporting on wait times for radiation therapy, chemotherapy, cancer diagnosis, cancer surgery and referral to an oncologist
- transforming CCP sites into rural CancerCare hubs to expand cancer services available in rural and northern regions
- using cutting edge technology to connect rural CCP site staff to CancerCare Manitoba regarding treatment options for patients and to increase access to educational opportunities for staff without having to travel to Winnipeg

Follow-up Care and Survivorship

Where We've Been and Where We're Going

Over the last decade, there have been significant improvements in the long-term prognosis for cancer due to a number of advances in early detection and treatment. Canadian projections estimate that the number of people living with a diagnosis of cancer will increase two and a half times between 2007 and 2031.

While this trend of declining mortality rates means that the number of cancer survivors and people living with a cancer diagnosis is growing, it does create new challenges. Ensuring that physicians and patients are aware of follow-up care plans is an important area of work. Those affected by cancer have expressed challenges in transitioning back to their community, school or workplace. In addition, employers have expressed challenges with understanding how to better support employees affected by cancer. As the population of survivors continues to grow, more and more communities, schools and workplaces will be facing these issues.

This is an emerging area of focus, and further planning for action needs to occur through collaboration with patients, families and caregivers, employers, insurers and benefits managers, as well as provincial and national partner organizations such as the Canadian Partnership Against Cancer and the Canadian Cancer Society. Over the next five years, work will be done to:

- develop optimal follow-up care pathways for survivors and people living with a diagnosis of cancer, including side-effect management
- develop resources to support survivors and people living with a diagnosis of cancer as they re-integrate into the workplace
- provide employer education on accommodation and reintegration of survivors and people living with a diagnosis of cancer as they re-integrate into the workplace
- support research on cancer survivorship

Cross-cutting Objectives

Health care services continue to evolve over time as education and research leads to new discoveries and the development of new procedures. Building partnerships with provincial and national stakeholders provides opportunities for education and information sharing to promote best practices that improve care. Improving the performance and responsiveness of the system is key to reducing disparities, ensuring quality care and improving the cancer patient experience.

To reduce the burden of cancer in Manitoba, we must first study the patterns of this disease in the province and work to understand the reasons behind the trends. Cancer research is essential for progress in treating cancer and answering scientific questions to find new and better ways to treat diseases.

We will invest in activities that support us in meeting these objectives, including:

- establishing a Manitoba Partnership Against Cancer
- establishing a Vulnerable Populations Program at CancerCare Manitoba to improve access to cancer services for vulnerable populations, such as First Nations, Inuit, Metis people and new Canadians
- providing professional education through surgical networks, tele-oncology and workshops, focusing on standards, guidelines, quality, safety and optimal resource use
- sharing patient communication guidelines and principles as developed by the Cancer Patient Journey: Patient Participation Advisory Group
- consulting with patients on the design and layout of physical spaces to promote emotional well being during treatment as recommended by the Cancer Patient Journey: Patient Participation Advisory Group
- implementing a cancer patient tracking information system and hiring cancer patient journey trackers to monitor patients through their entire journey
- promoting and supporting cancer research to inform future decisions and improve health outcomes for patients
- building a new, additional CancerCare Manitoba building to increase research and clinical trials capacity and improve access to care
- providing professional education through surgical networks, tele-oncology, and workshops focusing on standards, guidelines, quality, safety and optimal resource utilization

Conclusion

Much has been achieved since the introduction of the strategic framework for cancer services in Manitoba in 2007, but there is still more work to be done. The 2010 community health assessment report by CancerCare Manitoba has provided a basis to update our framework and refocus our priorities.

Our partners, including CancerCare Manitoba and the CancerCare Manitoba Foundation, the Canadian Cancer Society, First Nations, Metis, and Inuit communities, the regional health authorities, Diagnostic Services of Manitoba, front-line health providers, the federal government, the Canadian Partnership against Cancer, Partners in Planning for Healthy Living as well as all Manitobans, must help us to accomplish these goals.

Working together, we will succeed.

