

## Innovations In Prostate Cancer Care Under a New Regional Cancer Surgery Model

In the fall of 2006, an innovative regional cancer surgery model was launched by the Champlain Regional Cancer Program serving Eastern Ontario, to improve access to quality cancer surgery and decrease wait times by collaboratively maximizing regional capacity. Identified gaps in care included long surgical wait times, practice variations, varied distribution of surgery and the need for integration of care. The new model was implemented to improve access to quality cancer surgery by implementing regional standards, developing communities of practice, and better aligning resources to address unused regional surgical capacity within the LHIN (Local Health Integration Network). For people affected by cancer who require surgical intervention, this means that regardless of where they live within the region, they will be assured of receiving the same quality of care, close to home, within the shortest possible time frame.

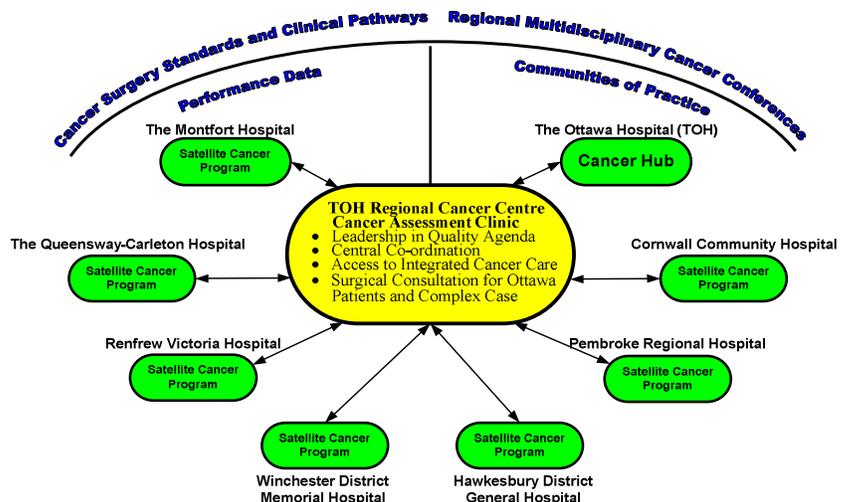
The Pipeline is a publication of Urology Nurses of Canada. The Pipeline is published each winter and summer for UNC members and sponsors and is also located at [www.unc.org](http://www.unc.org).

The Pipeline is looking for articles for publication about new initiatives in urology, latest technology, clinical research and evaluation, local chapter activities, patient and community resources.

There are several key ingredients embedded in our “hub and spoke” model of ensuring appropriate cancer surgery to the citizens of Champlain LHIN in a timely manner. These include: a comprehensive Cancer Assessment Clinic; regional satellite clinics; regional disease site specific multidisciplinary working groups: Communities of Practice (CoP); regional Cancer Care Facilitators; regional standards of care; the use of multidisciplinary cancer conferences and access to, and use of performance measurement data. See Figure 1.

Central to our “hub and spoke” innovation is The Ottawa Hospital

Champlain Model for Improving Access to Quality Cancer Surgery



Deadline for next issue:

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(TOH) Cancer Assessment Clinic (CAC), often referred to as a diagnostic assessment unit. It serves as “the hub” for the region and as the gateway for access to cancer services, and anchors this virtual regional model. It provides leadership in the quality agenda, central coordination and triage for cancer care, surgical consultation for patients within the catchment area of TOH, and importantly, surgical consultation for complex cases from across the region. Based on a common set of mutually determined standards and linked performance data, each regional institution, “the spokes”, are developing unique satellite cancer programs based on their capacity and their community’s needs.

Supporting the work of the CAC are the Champlain Cancer Surgery CoPs. Champlain Regional CoPs were implemented for each of the major disease sites to bring together healthcare professionals from across the region. These regional networks provided crucial building blocks for work within the Regional Cancer Surgery Model. CoPs help integrate i) clinical perspectives, including uptake of evidence and alignment of care with clinical guidelines and pathways, and ii) business perspectives, focusing on process optimization and institutional changes to support uptake of evidence.

A key component of the Regional Cancer Surgery Model is communication and knowledge transfer/information sharing within the regional group. This would not be possible without the introduction of a new role for the Champlain LHIN: the Cancer Care Facilitator. Under the model, hospitals that provide cancer surgery services received funding to support a nurse in the role of Cancer Care Facilitator one day per week. The Cancer Care Facilitators represent eight regional hospitals. The Cancer Care Facilitator acts as the leader and coordinator within his/her hospital’s cancer services team, and between the team and the Regional Cancer Program. These individuals are instrumental in ensuring the implementation of regional quality initiatives.

The prostate disease site group initiated a formal CoP process in 2007. Its strength was based on pre-existing strong regional relationships amongst its clinical members. The Prostate Cancer Surgery CoP membership includes representatives from the 5 regional hospitals performing prostate cancer care. Membership consists of urologists, radiologists, radiation oncologists, pathologists, medical oncologists, nurses, social workers and administrators. An initial regional workshop in May 2007 led to the development of regional priorities for prostate cancer care:

1. Standardization of regional prostate cancer assessment process
2. Standardization of surgical hospital care utilizing regional clinical pathways
3. Regional prostate cancer patient database
4. Development of innovative ways to increase tumour board participation

Professional development: development of a surgical mentorship platform

Working groups were established with representation from across the hospitals to address the first two priorities. The first priority was addressed through the creation of a regional guideline for peri-operative care. Currently in draft format, this evidence based guideline provides the standards for assessment, diagnosis, operative and postoperative care that has been agreed to for use across each regional hospital. Once finalized this tool will provide the foundation for quality indicator measurement.

Creation of a regional clinical pathway for the patient undergoing a radical prostatectomy is the second priority. Evidenced based key elements have been agreed upon and development is underway. The patient educational component to accompany the clinical pathway is being reviewed by multidisciplinary partners across the region.

The Prostate Cancer Assessment Unit located in the CAC, opened in May 2008. Planning for the unit started with a regional committee with administrative and clinical representatives from participating hospitals. This group developed guiding principles for care to ensure care is standardized between the CAC and the satellite programs:

Streamline prostate cancer patients from ↑PSA/abnormal DRE to diagnosis and treatment planning

Bridge the gap among professionals to ensure standardization of quality care

Provide patient centered care: Multi-professional team approach

Once guiding principles were devised then the patient flow was outlined based on collaboratively determined best practices.

The inter-disciplinary care provided in the CAC, and planned for in the satellite programs, incorporates nursing assessment, multidisciplinary physician assessment and diagnosis, social work assessment and

counseling, patient and family education and supportive care. This multidisciplinary team approach enables the patient to receive the appropriate information, support, counselling and follow up.

Given the complex nature of decision making required and the decisional conflict faced by prostate cancer patients and their families, the CAC provides multidisciplinary support and education to assist with the decision making process. Decision conflict regarding treatment options will be a focus of future CAC program development. The CAC and satellite programs will provide a strong venue for nursing research including investigation into utilization of prostate cancer treatment decision aids. Patient education is being streamlined and standardized across the region through the creation of a Prostate Cancer Information Guide and Personal Record. Once complete, this guide will be available to all newly diagnosed prostate cancer patients across Champlain.

Overall, the Regional Cancer Surgery Model has encouraged a more systemic and consistent regional approach for improving access to quality cancer surgery. The achievements to date could not have been accomplished without the positive influence of the Cancer Care Facilitator within each hospital. Knowledge, and the sharing of that knowledge, is the key! ☐

Suggested reading:

Fung-Kee-Fung, M., Goubanova, E., Abdulla, A, Crossley, C, Sequeira, K, Cook, R, Langer B, Smith A, & Stern H. Development of Communities of Practice to Facilitate Quality Improvement Initiatives in Surgical Oncology, QMHC 2007, in Press.

Sandoval, G. A., Adalsteinn, D. B., Sullivan, T. & Green, E. Factors that influence cancer patients' overall perceptions of the quality of care. International Journal for Quality in Health Care. 2006. 18 (4): 266-274.

Zellate, S. B., Ramsey, S. D., Penson, D. F., Hall, I. J., Ekwueme, D. U., Stroud, L. & Lee, J. W. Why do Men Choose One Treatment over Another?: A Review of Patient Decision Making for Localized Prostate Cancer. Cancer, May 2006. 106 (9): 1865-74.

Program in Evidence Based Care, Cancer Care Ontario. Organizational Standards for Diagnostic Assessment Programs. June 2007. Retrieved Nov. 30 2008 from: <http://www.cancercare.on.ca/pdf/pebcDAPs.pdf>

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*Meet Our New President!*  
*Francis Stewart*

Fran has been the Bladder Queen for 30+ years. She is dedicated to helping patients with incontinence. A Nurse Continence Advisor, working in Urogynecology-with her Pessary Clinic, promoting women's health in Urology. Received the Research Award in 2007. She has been very active with the UNC as VP Central. Chaired the committee for the 2008 UEC.

The President arranges and Chairs all meetings of Executive, Provincial Representatives and members. She serves as a spokesperson to promote and advance the UNC as a national nursing association. She networks with other organizations associated with the specialty of Urology. She provides assistance and leadership to the members of the Executive, and monitors their performance.

The President Appoints a sub committee of Executive to assist with planning of meetings at the CUA, and for the Urological Excellence Conference. ☐

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## AWARDS, AWARDS, AWARDS

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### UNC AWARD OF MERIT

It is time to recognize that “special” UNC nurse in your group. The one who has done that “extra something” for your chapter, your workplace, or your community.

Each year UNC proudly and publicly recognizes an individual who has made significant contribution through education, research or clinical practice or has achieved distinction through excellence in UNC promotion, UNC mentoring or other enhancement of the UNC Mission.

Over the years many of our finest nurses have been honored with this award.

We have some exceptional people within our ranks and they need to be recognized.

The Award of Merit will be presented at the Urological Excellence Conference in Victoria, British Columbia.

Urology Nurses of Canada needs your application for the annual awards that we are able to offer through the continued support of our corporate sponsors.

Awards available are:

#### Editorial Award

This award will be given to a UNC member who has written an article, paper or editorial that has been published in the past year and has not been previously published.

#### Research Award

This award is available to a UNC member proposing research related to urological nursing practice in one of the following sub-specialties: urodynamics, biofeedback, endourology, sexual health, uro-oncology or incontinence.

### Scholarship Award

This award is available to a UNC member who wishes to further his/her education as related to the practice of nursing.

This year \$1000 will be granted for each of the Editorial, Research and Scholarship awards. These awards are made available through unrestricted educational grants given via our Corporate sponsorship Program.

**The deadline for applications is August 31, 2009.**

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## Urology Nurses of Canada

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The Urology Nurses of Canada extends an invitation to all nurses and allied health interested in urologic nursing to join the association.

The Urology Nurses of Canada is a National Association whose mandate is to enhance the specialty of urologic nursing in Canada by promoting education, research and clinical practice.

The activities of the Urology Nurses of Canada are designed to enrich members’ professional growth and development.

The UNC hosts an annual conference each fall and convenes for an educational meeting at the Canadian Urological Association annual meeting each June.

Membership in the UNC now entitles you to receive 4 issues of Urological Nursing Journal, 2 issues of Pipeline, Annual Urological Excellence Conference information and discount on registration, UNC Membership Directory, UNC Constitution, UNC:

Standards of Urologic Nursing Practice and your personal access to UNC reports on the web.

**For more information about UNC, contact:  
Gina Porter, Membership Coordinator at  
memship@nbnet.nb.ca or visit [www.unc.org](http://www.unc.org).**

# UNC Info

## UNC Representative 2008-2009

### UNC Executive

#### UNC Executive

<b>President:</b>	<b>Frances Stewart</b>
Past President:	Susan Freed
Vice-President West:	Colleen Toothill
Vice-President East:	Emmi Champion
Vice-President Central:	Elizabeth Bowman
Membership:	Gina Porter
Sponsorship:	Cheryl Scott
Treasurer:	Lisa Lynch
Secretary:	Brenda Bonde

#### UNC Provincial Representatives

<b>VP West - Colleen Toothill</b> - Alberta:	Elizabeth Smits
British Columbia	Jill Jeffery
Saskatchewan:	Judy Pare
Manitoba	Catherine Schlosser
<b>VP Central - Elizabeth Bowman</b> - Ontario:	Sylvia Robb
Ontario:	LuAnn Pickard
Quebec:	Raguel De Leon
Quebec:	Carol-Anne Lee
<b>VP East - Emmi Champion</b>	Cathy Crocken
New Brunswick:	Nancy Carson
Nova Scotia:	Liette Connor
Newfoundland and Labrador:	Sue Hammond
Prince Edward Island:	Cathy Crocken

#### Local Chapter news info: [www.unc.org](http://www.unc.org)

**Victoria Info:** Sandra Rowan Tel: (250) 381-3747

**Edmonton Info:** Liz Smitz Tel: (780) 407-6154

**Calgary Info:** Laurel McDonough: lorned@shaw.ca

**Kingston Info:** Sylvia Robb Tel: (613) 549-6666 ex. 4778

**Ottawa Info:** Susan Freed Tel: (613) 721-4700 ex. 3900

**Montreal Info:** Carol-Anne Lee Tel: (514) 934-1934 ex. 35213

**Halifax Info:** Emmi Champion Tel: (902) 473-2570

**New Brunswick Info:** Gina Porter Tel: (506) 632-5720

**New Foundland Info:** Sue Hammond Tel: (709) 368-0101

**Hamilton Info:** Elizabeth Bowman: ebowman@mountaincable.net

**Regina Info:** Judy Pare: judy@crun.ca

#### How to form a local UNC Group

1. Contact nurses and allied health in your area interested in Urologic Nursing.
2. Pick a topic and a speaker (for initial meeting).
3. Book meeting room
4. Contact local sales rep for potential support of meeting.
5. Advertise meeting and distribute information about the UNC.
6. Create local executive e.g. chairperson, secretary, treasurer.
7. Organize educational meetings/events.
8. Contact UNC provincial representative regarding local business meetings.
9. Encourage submissions of articles and upcoming events to "Pipeline".

## The CUA 2008

The Urology Nurses of Canada manned a UNC booth at the Annual meeting of the Canadian Urological Association in Edmonton in June 2008. The CUA generously sponsored the booth and the registration of the nurses manning the booth. This provided the both the UNC and the Urologists an opportunity to meet and exchange information on what each association can provide to its members. It was a great opportunity to meet the representatives of the Pharmaceutical and Equipment companies.

Abbott sponsored the meeting of the UNC on Monday afternoon of the conference. We were fortunate to have two presentations. Dr. O'Rourke spoke on Reconstructive surgery and Karen Hershy spoke on the latest needle stick prevention legislation. The meeting was well attended by the nurses at the conference.☐

## UEC 2008 "Go with the Flow to Toronto"

The annual conference was held in Toronto, October 2, 3 and 4<sup>th</sup> 2008.

Thursday started with Registration, then a welcome reception with the Exhibitors.

The first chance to check out the booths and talk with the Reps, and reconnect with delegates from across the country.

Early Friday morning, breakfast, and then we heard from Dr Leslie Carr-Urologic Implications of BoTox, Fascinating. The next Keynote speaker Dr Janet Bodley covered Stress Urinary Incontinence, explaining "slings



and things".

After coffee break, we had concurrent sessions. Paediatric Biofeedback, Gardasil-HPV Vaccine, and Exploring Targeted therapies for Renal Cell Carcinoma, "improving outlook".

Then we enjoyed a panel discussion covering Prostate Cancer from diagnosis onward. Sandra Rowan, Cheryl Scott, and Lisa Lynch shared their knowledge and expertise following care of Prostate Cancer patients.

During a lunch with the Exhibitors, National Sponsors, Astra Zeneca (titanium) and Abbott (gold) were recognized with plaques by Sandra Rowan. UNC Awards were presented. The Award of Merit and the Editorial Award went to Frankie Bates. The Scholarship



award went to Raquel De Leon. The Research Award winner was Betty Ann Thibodeau.

After lunch LuAnne Pickard educated us on erectile dysfunction. Then Dr Andrew Matthew spoke on the psychosocial impact of ED on couples during Prostate Cancer Survivorship. The presentations ended for the day with a conversation with Pauline, Fran Stewart's sister, who told her side of the story dealing with cancer, from a patient's perspective.

Buses whisked us to a delightful evening of Dinner and Entertainment at the Famous Peoples Players Theatre. Amazing. Wow!

Saturday, early breakfast, the Annual General Meeting was held. Elections of new President- Fran Stewart, VP West Colleen Toothill, VP Central Elizabeth Bowman, Sponsorship-Cheryl Scott. Provincial Reps Alberta-Liz Smits. Ont LuAnne Pickard. Manitoba-Catherine Schlosser. The Constitutional changes for secret ballot were passed.

The next session was on Menopause and what's "Hot"

Then short papers, Cheryl Dalbec-Pessaries. BCG and Nursing Safety in MUHC presented by Raquel DeLeon and colleagues.

The Short Paper award went to Cheryl Dalbec. Following that Dianne Heritz explained HIFU to us and how this new technology is being tested in Canada, for treatment of Prostate Cancer.



Then another round of concurrent sessions followed. Frankie Bates discussed Stress Urinary Incontinence in the female patient.

Susan Freed and Robin Morash explained “Collaborative Nursing Roles across a Regional Cancer Surgery Program” detailing access to care for all patients with Prostate Cancer in the Ottawa Region.

Joanne Edmundson presented “Peri-Conceptual Folic Acid Use in Nova Scotia and its implications.

Another set of Concurrent Sessions. Joe Downey on Chronic Prostatitis/Chronic Pelvic Pain Syndrome. “Forgetfulness, Frailty and Functional Incontinence with Gloria Connelly. Laurel Emerson gave us an update on Interstitial Cystitis. Tough choices. All very informative.

The closing speaker, Kenneth Shonk MD had us hugging a stuffed dog and giggling again. Then Edmonton Chapter invited us to UEC 2009. 

## 3rd Annual Sex in your city - Agenda February 20<sup>th</sup>, 2009

<p><b>7:30 – 8:00</b> Registration and Continental Breakfast</p> <p><b>8:00 – 8:15</b> Welcome and Introduction - <i>Kate McBride, Coordinator of Sexual Health Rehab Service</i></p> <p><b>8:15 – 9:15</b> Chronic Illness and Sexual Rehab: Putting life back into living – <i>Stacy Elliott, MD</i></p> <p><b>9:15- 10:00</b> Supporting Sexual Health and Intimacy in Care Facilities: Developing BC Guidelines - <i>Marie Carlson, BSN, RN, CRN(C)</i></p> <p><b>10:00 – 10:30</b> Refreshment Break</p> <p><b>10:30 – 11:30</b> Incorporating Sex Health into your practice: stories from the front-line. - <i>Tracy Ewert, BSW, BSN, RN (Facilitator)</i>  - Panel of health care practitioners discuss their experiences and case examples.</p>	<p><b>11:30 – 12:15</b> Lunch</p> <p><b>12:15 – 1:15</b> What’s up and coming in Sexual Medicine Therapies and Interventions - <i>Stacy Elliott, MD and Sexual Health Clinicians</i></p> <p><b>1:15 – 2:30</b> The impact of illness and disability on Sexual Health - <i>Shea Hocaloski, BSN, RN (Facilitator)</i> - Panel of persons with disabilities discuss their personal stories and experiences.</p> <p><b>2:30 – 2:45</b> Refreshment Break</p> <p><b>2:45 – 3:45</b> Use it or Lose it: Empowering the Health Care Professional in Sexual Health Care - <i>Christine Zarowski, BSN, RN and Kate McBride, BSN, RN, CRRN Sexual Health Clinicians</i></p> <p><b>3:45 – 4:00</b> Evaluations and Closing</p>
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# Coming Events

## Canadian Urological Association

### 64th Annual Meeting

June 28 - July 01, 2009

Westin Harbour Castle, Toronto, ON

Website: [www.cua.org](http://www.cua.org)

## Urology Nurses of Canada at the CUA Meeting

Monday, June 20, 2009

16.00-18.00 hrs

Westin Harbour Castle, Toronto, ON

Details tba

Website: [www.unc.org](http://www.unc.org)

## 22<sup>nd</sup> Annual Urological Excellence Conference

“Evidence and Caring: Spanning the ages in Urological Nursing”

September 24 - 26, 2009

The Westin, Edmonton, AB

Website: [www.unc.org](http://www.unc.org)

2008 Corporate Sponsor



Abbott Canada

## 39th Annual ICS 2009

The Moscone Center

San Francisco, CA, USA

September 29 - October 3, 2009

Website: [www.kenes.com/isc](http://www.kenes.com/isc)

## Canadian Prostate Cancer Network

Fairmont Hotel

September 9 - 11, 2009

St Johns, Newfoundland/Labrador, AB

Website: [www.cpcn.org](http://www.cpcn.org)

## SUNA Annual Symposium

Hyatt Regency

San Francisco, CA

March 11-14, 2009

## SUNA Annual Conference

Hyatt Regency

Chicago, IL

Website: [www.suna.org](http://www.suna.org)

## SUI - 30<sup>th</sup> Congress of the Society Internationale d'Urologie

November 1 - 5, 2009

Shanghai, China

Website: [www.siucongress.org](http://www.siucongress.org)

2008 Corporate Sponsor

AstraZeneca

