



Bringing the Primary Care Voice to Cancer Care in British Columbia Family Medicine Forum

October 30, 2019

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Faculty/Presenter Disclosure

- **Faculty:** Dr. Cathy Clelland

- **Relationships with financial sponsors:**
 - Grants/Research Support: **NONE**
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 - Patents: **NONE**
 - Other: **NONE**



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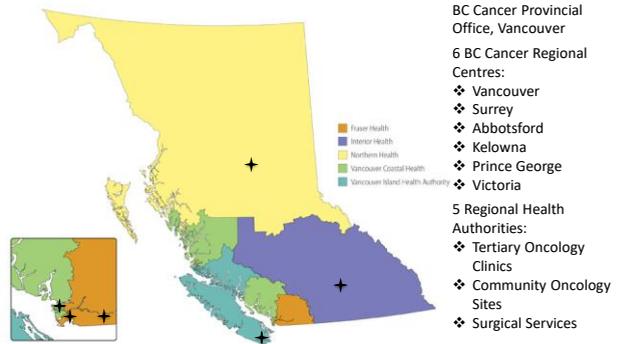
Presentation Upcoming

- Background
- Primary Care Needs Assessment
- Resulting Requests and Recommendations
- Questions?



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How BC Cancer Delivers Care Provincial Cancer Care System



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Provincial Cancer Care System

- **BC Cancer Regional Centres:** all radiation therapy, over 50% of chemotherapy, specialized imaging and patient assessment, follow-up and supportive care
- **Regional Health Authorities:** surgery, diagnostics and palliative care
- **Community Oncology Network:** chemotherapy through RHAs in partnership with BC Cancer
- **Community and RHAs:** cancer screening
- **Need for system coordination:** transitions between primary care, RHAs, and BC Cancer services so patients can easily navigate a complex system.



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BC Cancer Provincial Primary Care Program aka Family Practice Oncology Network (FPON)

Bringing the lens of primary care to BC Cancer, and providing cancer care education and resources for primary care providers throughout BC and the Yukon.

fpon.ca

Current Points of Interest:

- **Registration Open:** Nov 22 GPO Case Study Day and Nov 23 Family Practice Oncology CME Day @ the BC Cancer Summit [Agendas and full details.](#)
- **Sept 19** Oncology CME Webcast - Bone Marrow Transplant Survivorship Care: [Register](#)
- **Oct 17** Oncology CME Webcast - Upper GI Malignancies: [Register](#)
- [Primary Care Needs Assessment Executive Summary](#)



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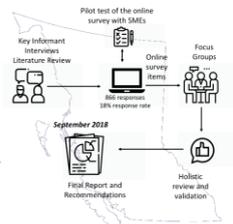
Primary Care Needs Assessment

Partnered with UBC CPD in 2017/18 province-wide engagement to:

- ✓ Understand unmet needs
- ✓ Support development of 2-way communication mechanism

Three phases of engagement:

1. Key informant interviews
2. Online survey to 5000 FPs and other PCPs across BC – 866 responses
3. Focus groups: new to practice FPs, rural FPs, urban FPs, and oncologists.



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Survey Focus

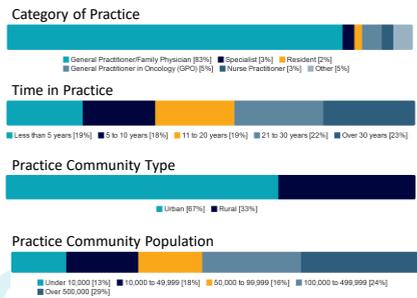
Themes:

- Demographics
- Current Attitudes and Practices
- Primary Care role in the cancer care continuum.
- Expanding FPON into the BC Provincial Primary Care Program
- Primary Cancer Care Knowledge and Education



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Survey Respondents



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Survey Findings

Family physician suggested resources:

- **Patient journey maps:** initial contact with BC Cancer and through treatment
- Cancer system **navigator** to guide patients through the process or ensure that they have the means
- **VIRTUAL CARE a top priority** – both rural and urban – barriers to travel: income, transportation, distance, frailty, or preference

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Rural Findings

Respondents from rural communities:

- **Easier to communicate with their local GPOs, cancer centres, and surgeons** suggesting better engagement between community FPs and specialists providing cancer treatment in smaller rural areas, facilitating better communication
- **Higher levels of confidence** managing post-treatment cancer stages and palliation, highlighting skills and confidences associated with the rural generalist role, BUT need for rapid access to reliable information
- **Concern** about being overwhelmed or stressed because the Cancer Centre will send patients back with recommendations for care not available locally

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Recommendations

Relationship Building

- Use **Quality Improvement projects** for relationship building.
- Develop **shared care** and inter-professional team approaches, including family physicians in cancer care **using existing processes adapted from other specialist-FP shared care work.**
- **Partner with key stakeholders** and organizations to ensure alignment of priorities.

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Recommendations

Communication Practices

- **Reduce the number of steps** to access advice or information
- Develop strategies to ensure clear and **accurate contact information**
- Discharge letter / care plan -> create a **template to ensure consistent information**
- Focus on two types of communication:
 - **Urgent:** real-time consults such as secure text messaging, direct phone
 - **Non-urgent:** asynchronous such as email or EMR
- Prioritize **communication to the FP community as a whole**
- Use existing and preferred communication channels to **increase awareness** of FPON/Provincial Primary Care Program programs



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Recommendations

Information Resources

- Continue developing relevant primary care **guidelines** and updating existing guidelines and set a timeline pattern for development as well as review/revision process.
- Create **resources** for commonly requested areas of knowledge.
- **Expand existing information tools** to include cancer care, including adding oncologists to **Pathways** and to the **RACE line**.
- Bring the **BC Cancer website up to a standard** ensuring that family physicians and cancer patients will not need to look beyond it for information. Improve ease of access to information.



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Recommendations

Educational Programming

- Create **new programming** to meet the highest **identified needs** along the cancer care continuum, particularly at transition points.
- **Coordinate** release of new guidelines and other information resources with more in-depth education opportunities.
- **Transition** existing and future in-person workshops to self-paced online modules after two years. Follow-up component done as a webinar, with the option to attend live for questions and discussion or view later as a recording.



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Recommendations

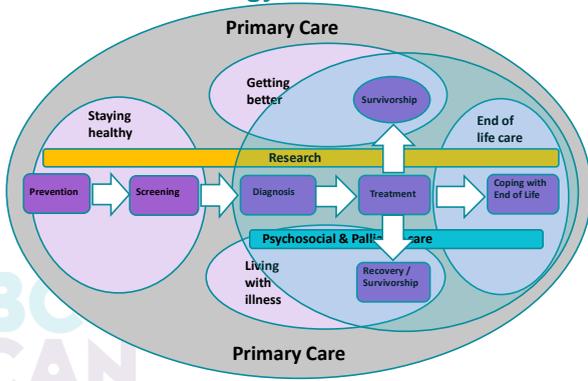
Top 3 Recommendations for the Provincial Primary Care Program:

- **Advocate** for improved access to appropriate clinical resources/services for patients (e.g. shorter wait times).
- **Develop practice tools** for supporting care for patients with cancer (e.g. treatment algorithms/pathways).
- **Provide education and training** for physicians.



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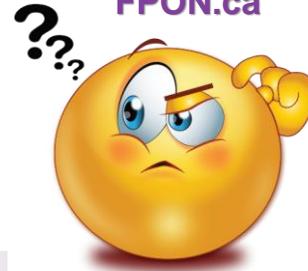
Cancer Care Continuum: BC Cancer Strategy



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Full Needs Assessment Report and Summary: FPON.ca



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