

SURGERY NETWORK

VISION: *the best possible outcomes for all cancer surgery patients in British Columbia*

OVERVIEW: THE SURGERY NETWORK WAS ESTABLISHED IN 2001 BY BC CANCER TO PROMOTE AND ADVANCE QUALITY CANCER SURGERY ACROSS BC THROUGH AN EFFECTIVE NETWORK OF SURGICAL ONCOLOGY CARE PROVIDERS. AS THE LEADING ADVISORY AND RESOURCE BODY FOR SURGICAL ONCOLOGY IN THE PROVINCE, THE NETWORK AIMS TO ENSURE THAT PATIENTS HAVE THE BEST POSSIBLE OUTCOMES THROUGH CONSISTENT ACCESS TO HIGH QUALITY MULTIDISCIPLINARY CARE. ITS MAIN FUNCTIONS ARE TO: PROMOTE BEST PRACTICES FOR QUALITY CANCER SURGERY; ENHANCE ACCESS TO MULTIDISCIPLINARY PATIENT-CENTRED CARE; EVALUATE AND IMPROVE PATIENT OUTCOMES THROUGH RESEARCH, QUALITY DATA AND REPORTING; AND PROMOTE CONTINUOUS QUALITY IMPROVEMENT OF SURGICAL ONCOLOGY THROUGH CONTINUING PROFESSIONAL DEVELOPMENT.

STRUCTURE: THE SURGERY NETWORK'S INCLUSIVE ORGANIZATIONAL STRUCTURE SERVES TO LEAD AND SUPPORT ITS STRATEGIC INITIATIVES. THE COUNCIL EXECUTIVE OVERSEES THE IMPLEMENTATION OF THE NETWORK'S MANDATE AND IS COMPRISED OF SURGEONS AND SENIOR HEALTH ADMINISTRATORS REPRESENTING ALL THE HEALTH REGIONS ACROSS THE PROVINCE. THE THREE NETWORK COMMITTEES - CLINICAL PRACTICE, CONTINUING PROFESSIONAL DEVELOPMENT & KNOWLEDGE TRANSFER AND RESEARCH & OUTCOMES EVALUATION - ASSIST WITH THE PLANNING, IMPLEMENTATION AND PROMOTION OF THE NETWORK'S GOALS AND PRIORITIES. IN ADDITION, THERE ARE THIRTEEN SURGICAL TUMOUR GROUPS, WHICH SERVE TO ADVISE THE COUNCIL EXECUTIVE AND THE COMMITTEES ON THE ISSUES AND CHALLENGES IN THE SURGICAL MANAGEMENT OF PATIENTS WITHIN EACH TUMOUR SITE.

PURPOSE: SURGERY PLAYS A CRITICAL ROLE IN THE DIAGNOSIS, STAGING AND TREATMENT OF CANCER. MORE THAN HALF OF PATIENTS DIAGNOSED WITH CANCER WILL REQUIRE SOME FORM OF SURGICAL PROCEDURE DURING THE COURSE OF THEIR ILLNESS, AND ABOUT A THIRD OF CANCER PATIENTS WILL RECEIVE ONLY SURGERY. FOR MANY CANCERS, SURGERY REPRESENTS THE BEST HOPE FOR CURE. WHILE MOST SURGICAL ONCOLOGY SERVICES ARE PROVIDED IN THE COMMUNITY, SURGERY IS FREQUENTLY THE GATEWAY INTO SERVICES PROVIDED BY BC CANCER. APPROXIMATELY 22,000 NEW CANCER CASES ARE DIAGNOSED IN BC EACH YEAR AND AROUND 60% OF THESE PATIENTS ARE REFERRED TO BC CANCER FOR TREATMENT. TO ENHANCE APPROPRIATE, EQUITABLE AND TIMELY ACCESS TO SURGICAL SERVICES FOR CANCER PATIENTS AS CLOSE TO HOME AS POSSIBLE, THE SURGERY NETWORK SUPPORTS COMMUNICATION AND KNOWLEDGE SHARING BETWEEN SUBSPECIALTY AND COMMUNITY SURGEONS, THEIR RESPECTIVE HOSPITALS AND HEALTH AUTHORITIES, AND THE FORMAL CANCER CENTRES OF BC CANCER.

ACTIVITIES: THE SURGERY NETWORK IS WORKING TO IMPLEMENT STRATEGIES TO ENHANCE ACCESS TO MULTIDISCIPLINARY CARE ACROSS THE PROVINCE, DEVELOP DATA COLLECTION AND REPORTING PROCESSES TO EVALUATE AND IMPROVE PATIENT OUTCOMES, AND DESIGN EDUCATIONAL PROGRAMS AND MATERIALS TO PROMOTE PROFESSIONAL DEVELOPMENT AND CONTINUOUS QUALITY IMPROVEMENT IN PATIENT CARE. TO ACHIEVE OUR VISION OF THE BEST OUTCOMES FOR ALL CANCER SURGERY PATIENTS IN BC REQUIRES COMMUNICATION, COLLABORATION AND COORDINATION WITH OUR PARTNERS ACROSS THE PROVINCE. THE NETWORK WORKS WITH HEALTH AUTHORITIES, BC MINISTRY OF HEALTH, HOSPITALS, UNIVERSITIES, HEALTH CARE PROVIDERS AND ADMINISTRATORS ACROSS THE PROVINCE TO ADVANCE THE NETWORK'S MISSION OF PROMOTING THE BEST SURGICAL ONCOLOGY CARE.

SURGERY NETWORK STRATEGY

PRIORITY 1: STRENGTHEN RELATIONSHIPS WITHIN BC CANCER, PHSA AND OTHER HEALTH AUTHORITIES, MINISTRY OF HEALTH, UNIVERSITIES AND HOSPITALS, AND ENHANCE THE NETWORK'S PROFILE PROVINCIALLY AND NATIONALLY

- Ensure surgical oncology representation on the BC Cancer Executive.
- Include surgical representation from each Health Authority on the Surgery Network Council Executive.
- Form collaborations with relevant PHSA and Ministry of Health programs and initiatives - eg. Surgical Patient Registry.
- Ensure Surgery Network representation on provincial/national initiatives.
- Ensure surgical oncology input on surgical advisory councils.
- Identify and introduce surgical oncology representatives in each health region across the province as key surgical oncology contacts.
- Promote surgeons on the Network's Council Executive and Chairs of Committees and Surgical Tumour Groups as key contacts and advocates for surgical oncology.
- Work with BC Cancer to develop models of effective local integration of surgical oncology within the cancer care system.

PRIORITY 2: EVALUATE AND IMPROVE PATIENT OUTCOMES THROUGH RESEARCH, QUALITY DATA AND REPORTING

- Work with the BC Cancer Registry and BC Cancer Surveillance & Outcomes to enable a comprehensive assessment of cancer surgery related measures and outcomes.
- Develop synoptic operative report templates and minimal datasets for cancer surgeries (cancer surgery checklists).
- Provide expertise and in-kind support with research design, statistical analyses, administrative and organizational support to Network surgeons with research and quality improvement projects.
- Provide Surgery Network Travel Award for BC Residents, Fellows & Medical Students to enable them to present research findings at conferences.
- Establish and maintain a provincial directory of surgeons who perform oncology procedures (Network Surgeon Directory).

PRIORITY 3: DEVELOP AND IMPLEMENT EDUCATIONAL PROGRAMS AND KNOWLEDGE TRANSFER MECHANISMS TO SUPPORT SURGICAL ONCOLOGY PRACTICE IMPROVEMENT

- Develop and implement professional development programs that meet the standards of The Royal College of Physicians and Surgeons of Canada - Surgery Network Annual Fall Update.
- Develop and publish the Surgery Network Newsletter.
- Communicate to surgeons best practices and changes to cancer management guidelines.
- Utilize the Surgery Network Surgeon Directory to better communicate with surgeons across the province and identify areas of expertise for particular events or educational initiatives.
- Redesign and update the Surgery Network website to improve the dissemination of information to surgeons.

PRIORITY 4: PROMOTE BEST PRACTICE GUIDELINES AND STANDARDS AND ENHANCE ACCESS TO MULTIDISCIPLINARY ASSESSMENT

- Identify, review, adapt, endorse and promote guidelines and standards for the surgical management of site specific cancers in BC.
- Collaborate with the Surgical Patient Registry to report on wait times for cancer surgery in BC.
- Identify quality indicators for cancer surgery and patient outcome measures for quality improvement and practice audit.
- Expand the integration of surgeons who perform cancer procedures into the BC Cancer Tumour Groups and Cancer Centres to enhance multidisciplinary assessment of patients.
- Work with BC Cancer to facilitate access to expert advice and direction for patient care.
- Work with Surgery Network Surgical Tumour Groups to develop patient care maps and cancer surgery checklists.

SURGERY NETWORK INITIATIVES

ACCESS TO MULTIDISCIPLINARY CARE

Patient assessment and treatment planning by multidisciplinary cancer conferences optimizes patient care by ensuring that all the appropriate diagnostic tests, treatment options, recommendations and referrals are determined. Multidisciplinary cancer conferences also contribute to standardized patient care and quality improvement activities, continuing education of health professionals, and build linkages and relationships between different health care professionals. The Surgery Network is working to implement strategies to enhance access to multidisciplinary assessment throughout the province so that surgeons can participate more readily in multidisciplinary care and have the understanding and knowledge to refer appropriate patients.

CANCER SURGERY CHECKLISTS (Synoptic Reports)

To improve the process of care for cancer patients, the Surgery Network has made cancer surgery operative report quality a priority to ensure that information is reliably captured in the dictated report. The quality and completeness of an operative report are highly variable and research has shown that narrative reporting does not consistently provide all the information required to make optimal treatment planning decisions. A cancer surgery checklist (synoptic operative report) is a structured, standardized list of data items with a pre-specified choice of responses that clearly and reliably records key information related to the tumour and operative procedure. The Network has developed a standardized process to establish tumour site specific checklists to be used by surgeons when dictating their operative reports.

CANCER SURGERY WAIT TIMES

The BC Surgical Patient Registry was created by the BC Ministry of Health and the PHSA to provide a reliable, consistent approach for prioritizing surgeries on a wait list via one central registry. Cancer wait time collection and reporting is still in the early stages of development across Canada. The Surgery Network is collaborating with the Surgical Patient Registry to identify and report on wait-time statistics for cancer surgeries.

CONTINUING PROFESSIONAL DEVELOPMENT

The Surgery Network is committed to continuous practice improvement through educational activities and events. Each year the Network develops, organizes and hosts a medical education program profiling a specific area of cancer surgery and care. These all day courses, called the Fall Update, are fully accredited by The Royal College of Physicians and Surgeons of Canada. Featuring expert speakers, the Fall Update is designed to improve surgical oncology practice and knowledge by providing the most current information in the field.

NEWSLETTER

The Surgery Network Newsletter is published twice a year and circulated to 500 surgeons and health care providers across the province. Serving as both a communications and educational vehicle, each issue contains a variety of articles highlighting recent developments, publication reviews and important information in the field of surgical oncology. Current and previous copies of the newsletter are available on the Network website.

NORTHERN CANCER CONTROL STRATEGY

The Northern Cancer Control Strategy is a joint initiative between the BC Ministry of Health, Provincial Health Services Authority/BC Cancer and the Northern Health Authority to enhance cancer control outcomes for people in northern BC. The Northern Health Authority serves 320,000 residents who are spread over the northern two-thirds of the province. The vast geography of this area means that many cancer patients do not experience the same quality and continuity of care as patients in other regions of the province. The Network is working with northern surgeons to address these disparities by improving knowledge and clinical care.

QUALITY INDICATORS AND OUTCOMES REPORTING

Data plays an integral part in the Network achieving its vision of best possible outcomes for all cancer surgery patients in BC. The Network is working on identifying measurable quality indicators for cancer surgeries and patient outcomes based on best practice guidelines and standards. The Network continues to work with its partners to identify mechanisms and processes through which surgical data can be efficiently collected for quality assurance purposes. A comprehensive provincial data collection and reporting system would provide surgeons, physicians, health care planners and administrators with the necessary data to support consistent, high quality cancer care for patients throughout the province.

SURGEON DIRECTORY

To support a more strategic approach to implementing Network activities, a provincial directory of surgeons performing cancer surgeries has been developed. The Directory allows the Surgery Network to better communicate with surgeons across the province, identify surgeons interested in joining Surgical Tumour Groups and Committees, capture surgeons' areas of interest and expertise, and identify speakers and mentors for various events and educational initiatives.

SURGICAL CANCER MANAGEMENT GUIDELINES

Surgery plays a critical role in the diagnosis, staging and treatment of cancer, and surgeons may be called upon to provide diagnostic, therapeutic, palliative and supportive care. All of these issues require guidelines or standards to ensure quality cancer care. Although surgery can play a central role in cancer patient care, cancer management guidelines infrequently include or inform surgical care. The Network is working through its Clinical Practice Committee and Surgical Tumour Groups, along with the BC Cancer Tumour Groups, to adapt, endorse and adopt surgery specific guidelines that will be suitable for BC.

RESEARCH AWARDS for UBC SURGERY RESIDENTS/FELLOWS & MEDICAL STUDENTS

The Surgery Network Travel Award is a competitive award intended to motivate physicians and medical students, early in their training, to pursue an interest in surgical oncology and to allow them to present research findings at conferences. Approved applications may be funded in whole or in part up to \$1000 to cover travel costs. The UBC Summer Student Research Award is a competitive award to support the funding of one MD student with a project in the field of surgical oncology. A stipend will be provided for up to 8-10 weeks. Please visit the Network website for more information on these awards.

IMPROVING PATIENT CARE

The BC Cancer Surgery Network is making a difference in the care of cancer patients across BC. Network research and education initiatives have led to direct improvements in cancer management and reduced variation in practice patterns. Network standardized cancer surgery reporting checklists improve the process of care by ensuring that essential information is captured in operative reports, facilitating treatment planning, communication and efficiency among health care providers. The Network's Annual Fall Update provides accredited continuing professional development to surgeons and is nationally recognized as the most successful and community integrated surgical oncology curriculum in the country. The Newsletter communicates research and best practices to surgeons throughout the province, helping to ensure consistent, high quality patient care. With cancer surgery wait times reports, developed in partnership with the Surgical Patient Registry, the Network can report on wait times for various cancers and procedures across the province. Network patient information resources such as the booklet, Colorectal Cancer Care: A Cancer Care Map for Patients, help patients to better understand their process of care and the role of surgery in treating cancer. The Network is an effective network of over 500 surgeons from all regions across the province working together to ensure that all cancer patients in BC have the best possible outcomes.

SURGERY NETWORK KEY CONTACTS

COUNCIL EXECUTIVE

Position

Chair, Surgery Network
 Chair, Clinical Practice Committee
 Chair, CPD-KT Committee
 Chair, ROE Committee
 Chair, UBC Department of Surgery
 UBC Department of Surgery Designate
 Fraser Health Authority Surgeon Rep
 Interior Health Authority Surgeon Rep
 Northern Health Authority Surgeon Co-Rep
 Northern Health Authority Surgeon Co-Rep
 Vancouver Coastal Health Authority Surgeon Rep
 Vancouver Island Health Authority Surgeon Rep
 PHSA - Director, Strategic Program Development

Member

Dr. Carl Brown
 TBD
 TBD
 Dr. Chris Baliski
 Dr. Gary Redekop
 Dr. John Yee
 Dr. James Bond
 Dr. Chris Baliski
 Dr. Nadine Caron
 Dr. Michelle Sutter
 Dr. Sam Wiseman
 Dr. William Orrom
 Ms. Stephanie Sainas

SURGICAL TUMOUR GROUP AND COMMITTEE CHAIRS

Surgical Tumour Group

Brain
 Breast
 Colorectal
 Esophageal/Lung
 GI Tumours
 Gynaecology

Chair

Dr. Brian Toyota
 Dr. Elaine McKeivitt
 Dr. Manoj Raval
 Dr. John Yee
 Dr. Trevor Hamilton
 Dr. Trevor Cohen

Surgical Tumour Group

Head & Neck
 Hepatobiliary
 Musculoskeletal, Bone and Soft Tissue
 Skin
 Thyroid
 Urology

Chair

TBD
 Dr. Charles Scudamore
 Dr. Paul Clarkson
 Dr. Chris Baliski
 Dr. Sam Wiseman
 Dr. Alan So

Committees

Clinical Practice
 Continuing Professional Development
 Research and Outcomes Evaluation

TBD
 TBD
 Dr. Chris Baliski

STAFF

Position

Operational Leader
 Program Assistant
 Desktop Publisher
 Director of Data Integration, BC Cancer
 ROEC Coordinator

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