

# Ontario Cancer Plan 5

Our Progress Together  
2019 – 2024



**Ontario Health**  
Cancer Care Ontario

# Ontario Cancer Plan 5: 2019 – 2024

[Ontario Cancer Plan 5](#) originally covered 2019 to 2023. Due to the COVID-19 pandemic, there was a refocus of priorities within the health system; as a result, the Ontario Cancer Plan 5 was extended to 2024.

Throughout the pandemic, our teams played a key role in supporting the provincial pandemic response and recovery efforts. This work included the development of more than 25 COVID-19 pandemic planning [guidelines and resources for patients with cancer and clinicians](#). These guidelines included prioritization of care and ensuring access in an environment of depleted health human and physical resource.

At the same time, we continued to work towards the six goals set out in the Ontario Cancer Plan 5. Below are highlights of how, with our partners, we have been improving the cancer system to deliver person-centred, safe and effective services in an efficient, equitable and timely manner from 2019 to 2024.

## Goal: Deliver responsive and respectful person-centred care, optimizing quality of life across the cancer care continuum

- We redesigned the [Your Voice Matters](#) patient experience survey to ensure it provides hospitals with actionable insights on the aspects of in-person and virtual care that matter most to people with cancer.
- We expanded the use of patient-reported outcomes by implementing [Your Symptoms Matter](#) – General Symptoms + (ESAS-r +), which includes sleep, diarrhea and constipation in addition to the nine symptoms included with the original tool. Implemented in 68 hospitals and partner facilities, ESAS-r + enables patients to speak to their health care team about common cancer symptoms that impact their health status and quality of life and how to manage those symptoms. The tool is supported by updated symptom guides and resources for patients, providers, and volunteers.
- We completed the provincial roll out of [CareChart Digital Health](#), an after-hours toxicity management telephone support line, across all Regional Cancer Programs in Ontario. Since implementation of the service, there has been an estimated 5,211 emergency department visits saved annually, resulting in an estimated annual provincial emergency department cost reduction of \$3.8 million. Patient experience surveys revealed more than 90% of patients who completed the survey agreed or strongly agreed that they had a good experience with this service and expressed high satisfaction with the quality of the service.

- We developed and implemented the [Goals of Care Toolkit for Oncology Settings](#). This toolkit supports earlier conversations taking place between patients and their care teams on advance care planning, prognosis and goals of care.
- Health literacy training was developed and launched for health care professionals, patients and care partners. The aim of this training is to support health literacy competencies through improved communication, self-management and quality of life. In addition, we supported provincial health literacy through:
  - Updating the “How to write clear and effective information for patients” guidance document to give staff and health care providers clear directions about how to adhere to health literacy best practices when writing for patients.
  - Producing a “Guide to Inclusive Language for Health Literacy and Patient Education,” with a focus on using gender-inclusive language.
  - Hosting a speaker series for health care providers, patient and family advisors and others across Ontario Health to raise awareness of the intersection of health equity and health literacy for racialized, Indigenous, sexually and gender diverse, and differently abled patients and family members.
- In addition, access to cancer information for patients and care partners was improved through:
  - Program consultation on the systemic treatment drug formulary information sheets (medication and regimen) to ensure that they adhere to health literacy best practices for resource development.
  - In partnership with the Regional Cancer Programs, an assessment of the quality and comprehensiveness of existing patient education resources for patients undergoing radiation treatment was completed.
  - Collaboration with multiple programs through the direction of the COVID-19 guidance table to produce high-quality, evidence-based and up-to-date information about COVID-19, vaccines and the impact of the pandemic on cancer care in the regions.
- We led pan-Canadian negotiations for the first CAR T-cell therapy. Ontario was among the first provinces to offer access to this new therapy. The therapy is now available at four Ontario hospitals, giving more patients with cancer access to this potentially lifesaving therapy.
- We launched the High Cost Therapy Funding Program, which alleviates hospital budgets by funding expensive cancer therapies delivered in the inpatient setting and ensures equitable access to these drugs across the province.

## Goal: Improve the safety of patients, caregivers and health care professionals across care settings

- The new [Cancer Medication-Related Infusion Reactions Toolkit](#) facilitates a standardized evidence-based approach to managing cancer medication-related infusion reactions in Ontario.
- [Prevention and Outpatient Management of Febrile Neutropenia in Adult Cancer Patients](#) provides standardized guidance for this adverse effect of systemic treatment and aims to keep vulnerable patients from experiencing severe complications requiring hospitalization.
- We launched a reimbursement program to fund rectal spacers for eligible patients with prostate cancer receiving radiation treatment; the spacers reduce toxicity during radiotherapy and significantly improve the quality of life for patients with prostate cancer in a cost-effective way.
- Developed and implemented two new clinical guidance documents on screening and testing for patients receiving systemic treatment to minimize safety issues or complications arising from systemic treatment. These include:
  - [Hepatitis B Virus Screening and Management for Patients Receiving Systemic Treatment](#)
  - [Fluoropyrimidine Treatment in Patients with Dihydropyrimidine Dehydrogenase \(DPD\) Deficiency: Guidance for Clinicians](#)
- New standards and recommendations to increase the high-quality, safe delivery of systemic treatment were developed, including:
  - Regional Models of Care for Systemic Treatment: [Standards for the Organization and Delivery of Systemic Treatment](#)
  - [Enhancing the Delivery of Take-Home Cancer Drugs in Ontario](#)
  - [Enhancing the Delivery of Oncology Systemic Treatment in the Home and Community in Ontario](#)

## Goal: Improve health equity across the cancer system such that people are not disadvantaged by who they are, where they live, or what resources they have

- The [First Nations, Inuit, Métis and Urban Indigenous Cancer Strategy 2019 – 2023](#), developed for and with Indigenous partners, provides a road map to address the unique health issues of Indigenous populations.
- Several research projects were completed and released to advance equitable outcomes for First Nations, Inuit, Métis and Urban Indigenous peoples, including:
  - “Increasing Cancer Screening in the Métis Nation of Ontario: Final Report from the Métis Cancer Screening Research Project,” in partnership with the Métis Nation of Ontario;

- “Wequedong Lodge Cancer Screening Research Project” and “Steps in Cancer Screening: Guide for First Nations,” in partnership with Wequedong Lodge of Thunder Bay; and
  - Indigenous Lens Tool to complement the ministry’s Health Equity Impact Assessment resource.
- Three [cancer comic books](#) are now available to help First Nations, Inuit and Métis community members of any age understand cancer and the journey to survivorship.
  - The [Indigenous Relationship and Cultural Awareness courses](#), refreshed in March 2023, help health care professionals provide more culturally appropriate and person-centred care to First Nations, Inuit, Métis and Urban Indigenous people. Since 2015, more than 43,000 courses have been completed (as reported in 2021/22).
  - The Indigenous Data Governance Matters process was soft launched in April 2023. This process provides direction and a standardized approach to appropriate Indigenous data use at Ontario Health in partnership with First Nations, Inuit, Métis and Urban Indigenous organizations and communities.
  - To reduce barriers to care that result in poorer health outcomes for 2SLGBTQIA+ people, we updated our [policies for the screening of trans people in the breast and cervical screening programs](#) and incorporated 2SLGBTQIA+ inclusive language across several patient-facing resources and communications.
  - Data updates and other enhancements were made to the [Ontario Cancer Profiles](#) dashboards, which continue to help health system planners, health researchers, public health professionals and others create profiles that support targeted cancer control efforts.
  - Care gaps for uncommon cancers were identified through current state assessments for mesothelioma, central nervous system cancers and bladder cancer. These were addressed with the development of workers compensation education materials for mesothelioma, organizational/system guidance for primary central nervous system cancers, and a guideline to provide clinical guidance for penile cancers.
  - More patients are able to access sustainable radiation treatment and PET imaging closer to home as a result of replacing 37 end-of-life linear accelerators (LINAC) and nine end-of-life PET machines and adding one linear accelerator and five new PET machines. The sequencing of PET machines and new LINACs is guided by Ontario Health’s PET Capital Investment Strategy and the Radiation Treatment Capital Investment Strategy, respectively.
  - Implementation of provincial master pricing agreements for PET and radiation treatment machines resulted in streamlined procurement processes, best pricing and access to emerging technologies for all Ontario cancer centres.

- We collaborated with the Centre for Addiction and Mental Health (CAMH) and seven Regional Cancer Programs to implement the Smoking Treatment for Ontario Patients program. This program provides free nicotine replacement therapy to people who want to quit or reduce their smoking.
- Expanded smoking cessation programs in the Regional Cancer Programs are reaching approximately 7,200 additional patients in diagnostic settings, inpatient units and partner hospitals, who could benefit from smoking cessation support.
- The [Indigenous Tobacco Program](#) is working with First Nation, Inuit, Métis and Urban Indigenous communities and organizations to address commercial tobacco, cannabis and vaping cessation and prevention.
- We successfully piloted the tobacco use survey, a systematic way to measure cancer patients' smoking cessation outcomes, at two regional cancer centres and planned for expansion of the survey at two additional sites.
- Ninety-three new Provincial Oncology Alternate Funding Plan physician positions were regionally allocated for medical oncology/ malignant hematology, complex malignant hematology, gynecologic and radiation oncology. They will contribute to supporting care closer to home for approximately 95,000 new patients with cancer annually.

### Goal: Improve the efficiency and coordination of cancer services

- The [Chronic Disease Prevention Strategy 2020 to 2023](#) outlined concrete strategic objectives and actions to support efforts with our partners to prevent chronic disease and improve population health outcomes.
- The [Ontario Lung Screening Program](#), the first of its kind in Canada, is helping find lung cancer early, when treatment has a better chance of working, in high-risk patients.
- From 2019 to 2023, the Ontario Breast Screening Program (OBSP) expanded to 26 new screening sites, two High Risk OBSP sites and an additional 19 OBSP Breast Assessment sites. This ensures more people are receiving the benefits of organized breast screening and assessment.
- In June 2019, we replaced the fecal occult blood test with the fecal immunochemical test (FIT) as the recommended test for [ColonCancerCheck](#). Research shows that people prefer the new, easier-to-use FIT, which leads to increases in screening.
- In March 2023, we launched the Sioux Lookout and Area FIT Kit Initiative as part of efforts to mitigate barriers and increase access to colorectal screening for individuals living in remote and rural communities. FIT kits are now available at nursing stations and health centres in 28 communities in Sioux Lookout and area.



- We led in the development and implementation of Complex Malignant Hematology models of care recommendations to optimize and build capacity by shifting care to outpatient settings. This model introduced nurse practitioner roles and provided specialized training to more than 1,000 health care providers (e.g., registered nurses, registered practical nurses, pharmacists and others). It also supports nurse practitioner mentorships and acute leukemia and hematopoietic cell transplant fellowships.
- Recommendations were developed for an enhanced model of care for clinical cancer genetic services to support timely and equitable access to genetic counsellors with the advent of new genetic tests, personalized cancer therapies and increased public awareness of hereditary cancer. The recommendations include strategies to optimize the roles and functioning of the clinical cancer genetics team as well as the streamlining of key processes to improve access and the patient experience in receiving genetic counselling services.
- [Models of care recommendations for ambulatory systemic treatment](#) were developed to address a significant increase in demand for systemic treatment therapies associated with population aging and due to continued advances in treatment and lines of therapy. The comprehensive set of recommendations aims to modernize system treatment delivery in Ontario and covers all aspects of systemic treatment for outpatients from referral through to active treatment and supportive care, toxicity and symptom management, survivorship and palliative care.
- We led a pan-Canadian initiative to improve patient access to [biosimilar cancer drugs](#) enabling not only Ontario but all provinces to save millions of dollars in drug expenditures. To educate patients, care partners and health care providers on cost-saving biosimilar use, we developed an accredited Massive Open Online Course for biosimilars in collaboration with the University of Toronto and published additional education materials on the Ontario Health website.
- We streamlined access to publicly funded drugs, resulting in funding for 12 generic cancer drugs transitioned from the New Drug Funding Program to [Systemic Treatment – Quality- Based Procedure](#), reducing reporting requirements from hospitals.
- In 2021, the Provincial Genetics Program was launched to ensure provision of comprehensive, coordinated and evidence-based genetic services in Ontario, encompassing rare and inherited diseases, hereditary cancer and tumour biomarkers.

## Goal: Provide effective cancer care based on best evidence

- Ontario’s cancer registry continued to maintain a high level of data quality despite the challenges presented by evolving data collection standards and delays during the early years of the COVID-19 pandemic. The robustness of these data continues to be essential as the basis for clinical quality improvement, program evaluation, surveillance and research in Ontario.

- From 2019 to 2024, we produced 66 new [clinical guidance](#) documents and updated 19 existing clinical guidelines, providing clinicians with the best evidence available from health care research and expert opinion.
- We added funding for more than 60 new cancer indications, providing approximately \$2.7 billion to hospitals treating a variety of solid tumors and hematological malignancies.
- We developed a new five-year plan for the expansion of complex malignant hematology services in Ontario to ensure people have access to timely, high-quality care. To support the expansion of services, we developed the [Organizational Requirements for Acute Leukemia Service Providers in Ontario: Recommendations Report](#).
- We released the Surgical Quality Indicator report to all hospitals performing cancer surgery which measures performance for more than 15 quality indicators. It provides hospitals with an understanding of their quality performance to review and improve upon.
- We implemented new funding to support drug costs and the delivery of care associated with less intensive, potentially curative, chemotherapy for approximately 300 acute leukemia patients in Ontario.
- We released [Ontario Cancer Statistics 2022](#), the fourth in a series of population-level cancer surveillance reports that provide comprehensive information on the burden of cancer in Ontario. This edition also included a chapter that explores the estimated future prevalence of cancer to help health system planners anticipate the future demands for cancer-related services.
- We released [Ontario Cancer Facts](#), a series of short fact sheets on cancer and cancer risk modifiers. Ontario Cancer Facts highlight new cancer patterns, areas where research is needed and effects of intervention.
- We released the [Prevention System Quality Index 2020](#) and [Prevention System Quality Index 2023](#), a series that outlines Ontario's progress on policies and programs that can reduce the prevalence of cancer risk factors and exposures in the population.
- In December 2022, we released a [Special Report on Cancer Prevention for People Living with Serious Mental Illness](#) that provides an overview of cancer disparities experienced by people living with serious mental illness in Ontario.
- In January 2023, we released [Cannabis and cannabinoids: Cancer risk and use to manage cancer symptoms](#), a brief evidence summary for health care providers working in primary care and cancer care, on the cancer risk of cannabis and cannabinoids (medical and non-medical), and on using cannabis and cannabinoids to manage cancer symptoms.
- In collaboration with Public Health Ontario, we released the [Burden of Health Conditions Attributable to Smoking and Alcohol by Public Health Unit in Ontario](#) report, providing estimates of the prevalence of smoking and alcohol consumption, as well as smoking and alcohol attributable deaths, hospitalizations and emergency department visits by public health unit and across Ontario.



- We released a brief evidence summary on [vaping products, including e-cigarettes](#) in January 2023. This evidence summary addresses the observed and potential health impacts of vaping products, including the development of vaping dependence, vaping’s impact on youth smoking rates and vaping as a smoking cessation aid.
- We worked with provincial, territorial and federal health system partners to release the [progress measurement reporting tool](#) for the Canadian Strategy for Cancer Control, which will allow Ontario and its peer jurisdictions to track and report on their progress against more than 20 common cancer system improvement indicators between 2019 and 2029.
- With international partners, we closed the second phase of the International Cancer Benchmarking Partnership. This is an ongoing, unique multi-jurisdictional research collaboration which, since 2008, has allowed Ontario to measure its cancer system’s performance against other international leaders in cancer control and adopt best practices.
- We developed a keratinocyte cancers (non-melanoma skin cancers) repository by successfully leveraging advanced machine learning/natural language processing tools to extract data from narrative clinical pathology reports. This enables us to understand the number of Ontarians affected by this most common cancer diagnosis and advance work in understanding health care utilization and outcomes for these patients. Learnings from this proof-of-concept initiative will also inform future work to leverage advanced tools and methodologies to address critical cancer data gaps for key outcomes such as recurrence.
- We were awarded a competitive Canadian Agency for Drugs and Technologies in Health grant to establish the Canadian Cancer Real-World Evidence Platform. This multi-province cancer analytics team will provide important information to federal/provincial/territorial decision-makers and will expand Ontario Health’s work in evaluating the real-world effectiveness of cancer drugs.
- The first ever [Radiation Treatment Quality-Based Procedure](#), introduced in April 2022, enables reducing variation, improving quality of care and a consistent funding model across 17 facilities offering radiation treatment. It also allows funding to more accurately follow the patient.
- We implemented a funding mechanism to support the incremental supply costs of robotics surgery for three disease indications (endometrial cancer BMI > 35, partial nephrectomy and prostatectomy). Evidence indicates that in comparison to open surgery, robotic cancer surgery reduces hospital length of stays, blood transfusion rates, wound complications and postoperative pain control.
- We expanded treatment options for patients by introducing seven net new indications for PET scanning – including support for novel PET tracers for clinical use, and the implementation of new minimally invasive image-guided technologies (e.g., using microwave or cryoablation, or transarterial radioembolization).

- We implemented a new type of targeted radionuclide therapy as part of standard of care treatment for patients with neuroendocrine tumours and expanded the number of hospitals that provide this care.
- In collaboration with the Pediatric Oncology Group of Ontario, we developed a data cohort for adolescents and young adults diagnosed with cancer. In addition, tools and resources were developed by three Regional Cancer Programs to improve access to onco-fertility screening and counselling.
- Cancer research knowledge translation and exchange activities were regularly undertaken through e-bulletins, rounds and research meetings to foster dissemination of best evidence in cancer care to decision-makers, scientists, research staff, health care practitioners and other stakeholders.
- We engaged thousands of Ontarians across the province on behalf of cancer researchers to participate in research studies that ultimately benefit current and future patients.

### Goal: Deliver timely care across the cancer care continuum

- The [Oncology Caregiver Support Framework](#) is a best practice guide to support regional planning for care partner support strategies and foster more discussion between health care providers and care partners.
- To advance wait time monitoring and performance management, recommendations were implemented to streamline regional reporting products and their dissemination to the regions.
- We developed principles and guidelines to support out-of-hospital palliative care, virtual palliative care, and palliative care in the home setting. This will enable timely access and delivery of palliative care across the province.
- To support patient access to standardized, evidence-based and coordinated genetic testing across the province, we implemented comprehensive cancer biomarker testing at diagnosis, provincial hereditary cancer testing for adult and pediatric patients and consolidated oversight for genetic testing. We developed guidelines and recommendations for the diagnosis of complex malignant hematology, bone and soft tissue (sarcoma); utility of multigene profiling assays in early stage breast cancer, as well as hereditary cancer testing eligibility criteria.
- Two new integrated systemic treatment wait time indicators were developed to better capture the patient journey and monitor timely access to systemic treatment services.
- Wait time indicators for CT-guided biopsy, PET scanning and focal tumour ablation procedures were added to provincial performance management discussions, adding visibility to issues impacting key milestones in the diagnostic phase for cancer patients and enabling provincial and regional interventions to support timely care.