



BC Cancer Agency
CARE & RESEARCH

BC Provincial Surgical Oncology Council and Network

AGENDA

June 5, 2002 - 3:30 – 5:30 p.m.

VCC City Square Conference Room

Attending: A. Coldman, N. Fatim, D. Miller, C. Rusnak, N. Davis, R. Cheifetz, F. Lasser, M. Mackinnon, L. Benedet, P. Ruttan.

Attending by Phone/Video Conference: M. Leia-Stephen, P. Doris.

Guests: T. Strack, D. Henkelman, B. Fergusson (CAIS Project).

Regrets: S. Sutcliffe, R. Finley, G. Warnock, D. Manson, B. Rudston-Brown.

1. Council Manager Introduction

2. Decision Items

2.1 Membership

2.2 Support of Projects

- Dr. Terry Phang
- Dr. C. Skudamore

3. Update Items

- Web site
- Video Conferencing
- CAIS Project
- ROE Committee
- Clinical Practice Guidelines
- CME

4. Other

5. Monthly Meetings – Decision re: date and time

July 3
August 7
September 4
October 2
November 6
December 4

All dates are the first Wednesday of each month, 3:30 – 5:30 p.m.

M. Leia-Stephen contact number (250) 372-9995

P. Doris contact number (604) 583-1559



Meeting: Wednesday, June 5, 2002 3:30 – 5:30 p.m.

Attendees: Dr. N. Fatin, Dr. C. Rusnak, Dr. Cheifetz, Dr. M. Leia-Stephen, Dr. A. Coldman, Dr. L. Benedet, Dr. P. Doris, Dr. N. Davis, and M. Mackinnon, F. Lasser, P. Ruttan.

Regrets: Dr. G. Warnock, D. Manson, Dr. S. Sutcliffe, Dr. R. Finley, Dr. B. Rudston-Brown, Dr. D. Miller.

Guests: T. Strack, D. Henkelman, B. Fergusson.

MINUTES

1. Minutes from Previous Meeting

Minutes from May 1, 02 Council and Network Meeting reviewed and approved.

2. Council Manager Introduction

F. Lasser introduced T. Strack to the Council. T. Strack stated that her most recent background is the position of Administrative Manager at G.F. Strong working with Medical and Academic Affairs. She has also managed outpatient clinics. In the past T. Strack has done project work with Vancouver Richmond Health Board and projects with finance at B.C. Women's and Children's. T. Strack is looking forward to working with the Council. Welcome Tina.

Action: T. Strack will start in the position of Network Manager on June 24, 2002. T. Strack will attend the next Council meeting by phone scheduled for July 5, 2002.

2. Decision Items

2.1 Membership

N. Davis stated that the Council needs to be representative of all surgeons, tumor group sites and surgical subspecialties. N. Davis proposed that the Council send a letter to the B.C. Medical Association Section Heads to identify a person who could sit on a broader Council that would meet at least three times a year. C. Rusnak stated that the Council is in place to empower the tumor groups to do the work and create a standard for the province and for them to recommend through their committees to the Council how to meet their objectives. N. Davis recommended that S. Sutcliffe be involved as an executive member.

Action: Everyone was in agreement with the structure proposed by C. Rusnak and N. Davis. Therefore, the Council will proceed to implement over the next month or two. N. Davis and C. Rusnak will create a letter to send to the B.C. Medical Association Section Heads to invite them to be a part of the Council.

2.2 Support of Projects

- Dr. Terry Phang

T. Phang sent a letter to the Council requesting funds to cover travel, accommodation, and food in order to host an initial meeting for rectal surgeons representing Kelowna, Victoria, Surrey, Prince George, and Vancouver. N. Davis stated that the meeting should be broader perhaps to include

Medical Oncology, Radiation Oncology, and Pathology. N. Davis suggested looking at Mark Simunovic's project in Ontario to see what they are doing rather than creating a new project. N. Davis suggested that the Council invite Mark Simunovic to Vancouver to give a lecture on how the Ontario project and its funding was set-up. N. Davis recommended that the Council could design the lecture into a few hour retreat to be included as part of our next broader Council meeting and then the Council could invite the low rectal group chairs to the retreat. N. Fatin suggested that the Council allocate T. Phang some money and then ask him to address the issues revolving around pathology, follow-up therapy, the operative procedure, and compliance to the provincial standards. M. MacKinnon suggested that the proposal from T. Phang come back in the form of a ROE application form template and then the points made by N. Fatin could be incorporated into the template.

Action: N. Davis to write a letter to T. Phang stating that the Council will support the low rectal tumor group meeting. With this in mind the Council has agreed to give T. Phang up to \$5,000 for planning of the meeting. However, the Council would like to see a ROE proposal that includes some measurable outcomes looking at the roles of methodology focusing on pathology and adjuvant therapy. The Council would also like to refer the low rectal committee to the other projects already going on in Ontario.

- Dr. C. Scudamore

N. Davis stated that C. Scudamore would like to start a hepatobiliary site.

Action: N. Davis stated that the Council has agreed to give C. Scudamore up to \$5,000 to establish a hepatobiliary site. Also, implementing the ROE proposal template will be helpful in standardising the process.

3. Update Items

- Web site

M. MacKinnon stated that content management server and management software has now been implemented which gives a standard look to the site. The Educational Needs Assessment has been loaded on the site, and one preliminary piece of the atlas is now on the site while the rest of the Atlas is under review. F. Lasser commented that one of the things that she and M. MacKinnon have talked to the Extranet Committee about is the surgeons only access to discussion groups and a much more interactive process. The issue of the two-way authentication was also discussed.

Action: F. Lasser and M. MacKinnon will be meeting with two people from the Extranet Committee next week to talk about how the Council will proceed with developing the surgeon's only access. They are supportive of working with the Council on this and also looking at the SON Web site as an example for other groups who may want to use the physicians only access.

- CAIS Project and Video Conferencing

D. Helkelman updated the Council the next phase the Extranet Project which is expanding into storing diagnostic images electronically and then relocating those images throughout the province. Also, another Extranet project deals with the portion of CAIS that supports a secure e-mail service for all physicians in the province. D. Helkelman stated that he would like to get some surgeons on board in the early stages. D. Helkelman told the Council that it is PHSA's vision that information is to be captured only once and shared appropriately elsewhere. B. Fergusson spoke about a project that would connect about 10 pilot surgeons throughout the province to the Virtual Private Network (VPN) technology. He would like to meet with the Council and get feedback as to what portions of CAIS

can be used and modified in terms of how it is used in surgeon's practices and then take this feedback and work on the application.

Action: B. Fergusson will contact C. Rusnak, N. Davis, P. Doris, B. Rudston-Brown, and M. Leia-Stephen to get them established with the VPN network and report back to the Council in July. Also, at the July Council meeting B. Fergusson will look for other surgeons to involve in phase two of the project to fill his quota. B. Fergusson will review the Needs Survey for other possible surgical candidates to ask to be a part of the VPN pilot program.

- ROE Committee

M. MacKinnon stated that the ROE group now has the statistics on procedure counts on a per surgeon basis and on a per hospital basis. In addition, there is a hospital database indicating where people are being treated, as well as, the referral patterns, making it possible to calculate the distance a patient travelled.

Action: The ROE committee is setting up a meeting with the College of Physicians and Surgeons of B.C., to enable utilisation of some of their data. ROE Committee would like to use some of the sensitive data such as the years post fellowship to be able to stratify the outcomes. They are sending a letter to the subspecialties to seek help in moving from the Ontario framework, which is considered therapeutic to diagnostic and palliative. The ROE Committee is writing a letter with A. Coldman and M. MacKinnon and people from the Systemic Program to get summary information to incorporate with our surgical outcomes. M. MacKinnon thanked N. Fatin for helping the ROE get six years of data from the Ministry. M. MacKinnon stated that he plans to schedule the ROE meeting once every two or three months at the start of the Council and Network meeting for half-an-hour rather do both meetings per month.

- Clinical Practice Guidelines

F. Lasser asked N. Fatin if it was possible for the Council be able to use the Ministry's Guideline Committee to assist in developing guidelines and also use their resources for the Council. N. Fatin stated that the person who looks after that committee is H. Platt, who would at least be able to put you in touch with the connected people.

Action: C. Rusnak will meet with H. Platt from the Ministry. M. Leia-Stephen will check to see if she can be in Victoria for the end of the month and let C. Rusnak know.

- CME

R. Cheifetz stated that there are three projects that she is working on concurrently. The first project is the Internet course for Surgical Oncology to teach surgeons how to successfully use Medline. R. Cheifetz and D. Lambier are working on developing this course. The second area is starting to develop two of the seminar-based sessions. The first seminar that the CME is planning is for the fall of this year. The CME has managed to get an agreement to link the fall B.C. Surgical Society Update and the UBC Continuing Medical Education Update and the Partners In Cancer Care Session to organise a joint meeting scheduled for the last weekend in November. The CME has arranged for one day on Saturday to offer a Rectal Cancer Update. T. Phang has developed a two-day rectal cancer management course. The third project is to offer a spring CME course in gynecologic oncology in Kelowna (March or May). Gynecologist first choice topic is ovarian cancer and some of the areas to be discussed are screening of high-risk patients, genetic issues etc.

Action: R. Chiefetz to proceed with the three initiatives for the CME program.

4. Other

5. Monthly Meetings – Decision re: date and time

F. Lasser stated that the Council meetings be rescheduled to the first Friday of the month in the afternoon between 3:00 – 5:00, as per the surgeons request.

Action: The Council agrees to try to meet on the first Friday of the month instead of Wednesdays.

July 5
August 9
September 6
October 4
November 6
December 4

Dates from July to October are the first Friday of each month, 3:00– 5:00 p.m. November and December are still booked for Wednesday until further notice.