Linking the BC Psychosocial Community Oncology Network

This newsletter is published by the BCCA Provincial Psychosocial Oncology Program for health care professionals in communities throughout British Columbia and the Yukon.

What’s New?

BCCA will be co-hosting the annual Canadian Association of Psychosocial Oncology (CAPO) conference this spring - May 3-5

Pinnacle Harbourfront Hotel, Vancouver

KEY NOTE SPEAKERS (as see here left to right):

- Preston Guno, BC Cancer Agency - Indigenous Cultural Resurgence: The System Finally Recognizing the Critical Role of Culture in Health Care/Patient Care
- Bill Breitbart, MD, PhD - Meaning Centered Psychotherapy
- Kristin Campbell, BSc, PT, PhD - Making the case for physical activity and physical rehabilitation to improve the psychosocial impacts of cancer treatments

Don’t miss this exciting professional development opportunity happening here in BC. Along with presentations from these renowned key note speakers there will be a full agenda of concurrent sessions on a broad range of psychosocial oncology topics including: research, clinical and leadership initiatives.

Please invite patients to attend the

FREE PUBLIC FORUM:

Does Stress Cause Cancer?
May 3rd at 7:30pm - Pinnacle Hotel Harbourfront, 1133 West Hastings Street, Vancouver

Featuring a panel of Cancer Care professionals, including medical and alternative perspectives. There will be a time for questions from the audience.

For more information and to register go to www.capo.ca
Announcing a pilot group:
Looking for work using social media

This small hands-on group in a computer lab provides instruction (group and individual guidance) and support to cancer survivors on how to use social media to aid in job search. The course provides instruction on creating a profile on LinkedIn and Facebook with a focus on privacy and preventing disclosure about a history of cancer. Participants are encouraged to explore how they rise to the ever changing demands of technology. Discussion will include understanding the unspoken norms/etiquette of social media. The group is led by Yvonne Chen, Vocational Rehabilitation Counselling Intern with the assistance of Mark Goodwin, Reference Librarian and Maureen Parkinson, Provincial Vocational Rehabilitation Counsellor and two volunteers. The group will be offered two more times at the Vancouver Cancer Centre and then Provincial Psychosocial Oncology and Library Services will explore opportunities to expand the course to other cancer centres across the province.
Commentary on new anxiety research study
by Dr. Alan Bates, Provincial Practice Leader for Psychiatry, BC Cancer Agency

A research study by Vodermaier and colleagues entitled “Anxiety after diagnosis predicts lung-cancer specific and overall survival in patients with stage III non-small cell lung cancer” is an example of how BCCA has been at the forefront of screening for distress and collecting data about depression and anxiety for many years. It remains a high priority for us to identify patients who are struggling with emotional distress in order to be able to offer them the full suite of psychosocial supports.

In short, the study demonstrates the high-level work being done to try to answer complicated questions about factors that make a big difference to the patients with whom you work. Patients should consider this relationship in the context of many factors.

There are two things about the relationship (discussed by the authors in the paper) that are important to consider when wondering what the results might mean for individual patients. One is that "statistical significance" is not the same thing as clinical significance". For example, a study might show that taking a certain drug every day of one’s life increases life span by 30 seconds (statistical significance). Most people would not want to take a daily medication with possible side effects for the chance of achieving an extra 30 seconds of life (clinical significance).

Another important factor is that just because two things are associated with each other does not mean that one caused the other in a particular order. This factor was discussed in the article. Maybe patients with worsening cancer had greater symptoms that were making them feel more anxious and it was the cancer progression that led to sooner death. Even if anxiety does play a kind of causal role, it could be an indirect one.

To read the full article on this population-based cohort study, go to: www.ipsmjournal.com/article/50885-3924(16)31239-8/fulltext

Update from the Centre for the Southern Interior (CSI)

A recent publication entitled: "Resting While Working - Mindful Self-Care" by David Greenshields MA, RSW, Professional Practice Leader, Patient and Family Counselling, Centre for the Southern Interior, was published in the BC Association of Social Workers newsletter called "Perspectives (Winter, 2017 edition).

We wish Valerie Colquhoun well on her recent retirement after 6 years of work at CSI.

Stacey Creak joined the Patient and Family Counselling team in January. Stacey comes with a wealth of experience in a variety of roles with Interior Health both in Kelowna and Vernon (hospice, residential care, acute care, psychiatry, emergency, intensive care, renal care and community social work). She completed her MSW at the cancer centre at Sunnybrook hospital in Toronto.

Amanda Kerr is the newest member of the CSI Patient and Family Counseling Program. She completed both her Bachelors and Masters in Social Work here at the University of British Columbia, Okanagan (UBCO). Following her BSW, she worked with people struggling with homelessness, the First Nations population, and victims of crime. Since she completed her MSW in 2012, she has been working in a variety of hospital based positions both in Vernon and Kelowna. She has a particular interest in oncology, having both completed an extensive practicum in the Vernon Cancer Clinic, and having worked for 18 months as the social worker on the oncology unit in Kelowna General Hospital (KGH).

Update from the Centre for the North (CN)

Lunch and Learn

In the Fall of 2016, PFC presented a “Lunch and Learn” for CN staff entitled: “Emotional Distress and Cancer”. The presentation was informed by attending a professional development educational series offered by Beth Burton-Krahn, a counsellor with Victoria Hospice. We were inspired
by Beth’s presentation and wanted to share our learning with other staff members.

The presentation was developed and led by CN PFC Counsellor, Leslie Warner. Leslie described common reactions to a cancer diagnosis, including stress, grief, anxiety and depression. The presentation provided staff with examples of physical and emotional signs of these common reactions. The presentation ended with a discussion of resiliency and how staff can work to acknowledge and support common reactions to cancer diagnosis while building a patient’s resiliency and coping skills. Staff from across disciplines attended making for a lively discussion.

**Indigenous Cancer Care Counsellor**
A new position was recently posted – namely, the Indigenous Cancer Care Counsellor position. This position replaces the previous position – Indigenous Cancer Care Coordinator. Dana Marshall, who filled this position, left the agency in January. Creating this position was a collaborative effort – including Provincial Psychosocial Oncology leadership, CN PFC Leadership, CN Operations leadership, and Preston Guno, Provincial Director for Indigenous Cancer Care. We anticipate filling this position by the Spring. We will work with the new counsellor to develop both programs and support available to Indigenous patients and families.

**Northern Health Cancer Care Social Worker**

Centre for the North welcomes Northern Health Cancer Care Social Worker Chiduzie Ezedebego! Chiduzie is an employee of Northern Health working from the Centre for the North in an office adjacent to Patient and Family Counselling area. Chiduzie’s position will provide psychosocial support to the Community Oncology Network (CON) Clinic patients and their families. Referrals can be made directly to Chiduzie via email, phone or fax. Referral forms are in the process of being printed and distributed to Northern BC CON Clinics.

Chiduzie holds a Bachelor of Science degree in Finance from Nigeria, a Bachelor of Arts degree in Justice Studies from Royal Roads University, and a Master of Social Work Degree from the University of Northern British Columbia. He is a registered Social Worker with the BC College of Social Workers, and a Professional Member with the Canadian Counselling and Psychotherapy Association.

Chiduzie worked for five years with the BC Ministry of Justice Adult Custody Branch as a Correctional Officer before joining Northern Health in 2012. Since joining NH, Chiduzie has worked as a clinician in the Adolescent Psychiatry and Assessment Unit, the Acquired Brain Injury Program, and as a Community Social Worker with the Elderly Services Program. Chiduzie has also worked as the UNBC Counsellor In-Residence and as a Counsellor in the UNBC Wellness Centre.

Chiduzie looks forward to providing psychosocial support to cancer patients and their families in Northern BC and working closely with both Patient and Family Counselling staff and other staff.

**Update from Vancouver Centre (VC)**

**Dr. Carole Richford** joined the Psychiatry team at the Vancouver Centre. Dr. Richford has been the Head of Consult-Liaison Psychiatry at St. Paul’s Hospital for many years where she is also the lead for the Cardiac Psychiatry and Renal Psychiatry clinics. She is also a Consultant Psychiatrist at VGH, has won numerous teaching awards, and is a Fellow of the American Board of Addiction Medicine. In addition to seeing outpatients in our clinic, Dr. Richford will be joining Dr. Alan Bates in better serving our inpatient unit than BCCA Psychiatry has traditionally been able to do due to limited resources and focus on the outpatient clinic.

We have begun attending inpatient rounds and are now better able to follow inpatients.

**Sharon Paulse**, MSW, RSW, is the successful candidate for the second Counsellor position in the Adult Survivors of Childhood Cancer Program.

Her clinical background is an excellent fit for this position. Sharon has a Master of Social Work from Dalhousie University and
a Bachelor of Social Work from the University of Manitoba. She has extensive experience in establishing patient service programs in hospital and community settings. Many of us are familiar with her in her position as the Patient Education and Support Manager at the Leukemia & Lymphoma Society where she assisted long term survivors of childhood cancer. She also has worked in the Pediatric Oncology/Hematology Department at BC Children’s Hospital.

Sharon will be working closely with Dr. Karen Goddard, Kimberley-Anne Reid (Nurse Practitioner) and her Counselling colleague, Beverley Biggs. Heather Rennie will be providing clinical supervision and Avril Ullett is the Clinic Manager. The program has become increasingly busy as they are now contacting adult survivors treated in BC for a childhood cancer for a follow up appointment in addition to young people transitioning from Children’s Hospital to Adult Oncology.

Update from Vancouver Island Centre (VIC)

Foxes and Owls and More

By Helen Wong, Patient & Family Counselling

Lana Paddy is the creator and knitter of the bevy of foxes, owls and other animals that inhabit the shelves of the Children and Family section of the VIC Patient Information Library.

“The support that my family members have received from the clinic here has made my life so much easier and I am glad to give back something [to the centre],” says Lana.

When Lana heard about the Children’s Group at VIC, she was keen to knit stuffed animals for the young participants. What a wonderful and happy coincidence that she created a fox that looks just like the one in the new children’s workbook, My Adventures with Fox and Owl. The workbook then inspired her to create an owl.

The Fox and Owl workbook for children came out this fall, along with Scribble & Paste, a journal for young teens. Both were written and illustrated by Sara Prins Hankinson, art therapist, and Karen Janes, RN, with input from the BCCA Patient & Family Counselling team.

Fox and Owl “stuffies” made their debut in our fall Children’s Group at VIC. The children were sent a picture of the “stuffies” reminding them of the group. One six year old recognized these mascots and had a big smile on his face as soon as he saw them sitting by the window in the children’s group activity room.

These wonderfully expressive hand-knitted foxes and owls engaged the children’s attention and facilitated their involvement in the group. The critters explored the clinic with the kids on a Saturday afternoon with nurse Jennifer Finck. Participants’ imaginations led them to invite Fox and Owl on their field trip at VIC.

Fox and Owl also helped children to focus on the pages of the workbook by inspiring their imagination. The boys and girls were intrigued by what these characters had to say about the cancer journey in their family.

Fox and Owl also participated in counselling sessions at VIC. The friendly look of these “stuffies” seemed to help children connect to the characters and stories in the workbook in a tangible way.

Recently, there has been an explosion of fox pups and owls each with their uniquely expressive faces, thanks to Lana. These critters will soon make their way to meet children in other BCCA centres who are in Patient & Family Counselling sessions and Children’s Groups there.

A gender neutral Nurse Bunny is making a debut in 2017!
Thank you Lana for gifting to our Counselling program a way to be more effective in helping young families with cancer!

We are grateful that you have shared your wonderful talent and time. We also appreciate your very kind donation of resources to enhance the care we provide to patients and their families. Thank you for your creative gifts!

**Article: Should I pursue genetic testing? – A potentially challenging decision**

*By Nili Heidary, Counselor, Hereditary Cancer*

Individuals with a striking personal and/or family history of cancer may react differently when presented with the option of genetic testing; some express great interest, others decline. The latter may become interested at a later date after consideration of the implications of the information and/or due to changes in their personal circumstances.

1) **Knowledge = power**

Some individuals clearly decide before genetic counselling that they would like to pursue genetic testing. For many, they are aware of the implications of testing and realize that it may provide valuable risk assessment information, guide cancer screening and/or treatment recommendations, and provide information for family members.

2) **Undecided**

There are many reasons why a patient may not wish to have genetic testing. Examples:

- **Anxiety: the impact of “knowing”**
  Patients may be concerned that results will impact their daily lives in a negative way, perhaps adding to existing anxieties and fears. The prospect of confirming an increased risk for additional cancers in their family can be overwhelming.

- **Uncertainty of results**
  All genetic test results have limitations in terms of clarifying if, when, and how additional cancers in a family may be diagnosed. Often, the cause of a cancer family history will remain unknown.

- **Surveillance recommendations – will results alter current care?**
  Are recommendations acceptable to an individual and their family? Is it the right time to consider these? Personal beliefs, age, child-bearing may be some of the factors here.

- **Impact of results on family relationships**
  Relatives may have very different views on genetic testing. A tested person may also experience feelings of guilt or blame resulting in apprehension regarding disclosure of results to family.

- **Insurance discrimination**
  In Canada, the preliminary Bill S-201 (Genetic Non-Discrimination Act), may limit the potential for genetic test results to be used in determining eligibility for and cost of insurance, such as life or disability. Currently, discrimination is unlikely for individuals who have had cancer; their results are also unlikely to impact their relatives’ insurance. Individuals who have not had cancer and are considering their own genetic test may choose to delay testing until insurance is in place.

In all cases, it is important for individuals to have the opportunity to weigh the potential benefits, harms and limitations of genetic testing. Eliciting factors contributing to decision-making is helpful in ensuring informed consent/dissent and in supporting families over time.
Educational Opportunities:

**Psychosocial Oncology Rounds**
These rounds occur the 3rd Thursday of the month.

To call in and listen refer to the rounds flyer for the number and passcode.

We recognize that the demands of your work may make it difficult for you to attend these rounds in person or by video link. Unfortunately, we don’t have the resources to create and post videos of our monthly Psychosocial Oncology Rounds, at this time.

However, presentation materials are, for the most part, posted online, on the Provincial Health Services Agency (PHSA) Learning Hub, http://learninghub.phsa.ca under Psychosocial Oncology Rounds where you can view PowerPoints and/or handouts during (if you are calling in) or after the presentation. Please note you may not see all presentations on this site because some presenters do not give us permission to share their slides. All presentation materials that are posted, are NOT TO BE COPIED WITHOUT PERMISSION of author/s.

You must have a Learning Hub account to access rounds presentation materials. Once you have an account you can search for Psychosocial Oncology Rounds or follow this link: http://learninghub.phsa.ca/moodle/course/view.php?id=247

**MARCH 16, noon -1pm**

An evidence-based approach to understanding and treating personality disorders

Presenter: Dr. Sheila Soja completed medical training and residency at UBC and is currently doing inpatient Consult Liaison work at VGH. She also does outpatient work as the psychiatric consultant for the Provincial Voice Clinic. Her special interests include Somatoform disorders and psychotherapy.

In this presentation, Dr Soja will describe a framework for understanding personality disorders based on empirical evidence including the prognosis and longitudinal course of Borderline Personality Disorder. In addition, she will consider the evidence for medication management for this condition.

**APRIL 20, noon -1pm**

‘If I were Tom website’ http://ifiweretom.ubc.ca/

Presenter: Dr. John Oliffe is a Professor at the School of Nursing at the University of British Columbia. Founder and lead investigator of UBC’s Men’s Health Research program (www.menshealthresearch.ubc.ca), his work focuses on masculinities as it influences men’s health behaviors and illness management in the areas of psychosocial prostate cancer care, smoking cessation and male suicide prevention.

His presentation focusses on the *If I were Tom* website http://ifiweretom.ubc.ca/- a unique resource informed by the work of prostate cancer support groups with the goal of reaching men and their families who may not be able to attend ‘in person’ group meetings.

To see PowerPoints:

*If you are a PHSA employee*, sign in to your Learning Hub account with your Employee ID number, then log in and search for ‘Psychosocial Oncology Rounds’ to see a list of presentations.

*If you do not have an employee number*, follow the steps below to create an Affiliate Account which will give you limited access to the Learning Hub.

1. Go to https://learninghub.phsa.ca/
2. Click Sign Up for an Account
3. Read agreement and click I Agree
4. Select appropriate account type - Affiliate account
5. Follow the step by step account creation process.
6. Contact eshearer@bccancer.bc.ca to request to be enrolled into the Psychosocial Rounds section of the Learning Hub.
May 18, noon - 1pm  
**Reflections on CAPO**

Presenters: a Panel of BC Cancer Agency staff who attended the Canadian Association of Psychosocial Oncology Conference May 3-5 will talk about their highlights, in particular the new learnings that could be incorporated into practice will be discussed.

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**Pre-conference workshops**

The following will be offered on May 3, 2017 (in the morning) Pinnacle Hotel Harbourfront, 1133 West Hastings Street, Vancouver - Go to www.capo.ca to register.

1. **Meaning Centred Therapy** – a workshop led by Dr. Bill Breitbart, Chief of Psychiatry Service at Memorial Sloan Kettering Cancer Center, New York

2. **Art Therapy with Cancer Patients** – an interactive session led by Sara Prins Hankinson and Catherine Dunlop, Art therapists with the Provincial Psychosocial Oncology program, BC Cancer Agency

3. **Resting While Working – Integrating Mindfulness Practice With Your Work Life** facilitated by David Greenshields, MA, RSW, Practice Leader, Patient and Family Counselling, Sindi Ahluwalia Hawkins Centre for the Southern Interior, BC Cancer Agency

4. **Research Grant Writing** – details on CAPO website

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**Launch of an innovative new website**

University of British Columbia (UBC) research team led by Dr. John Oliffe, founder of the Men’s Health Research program at UBC, launched the website: www.ifiweretom.ca, an on-line prostate cancer support group that features information on treatment options, side effects, psychosocial needs and healthy lifestyle behaviours, and introduces a series of interactive video dramas. You can read more about the development of this website in featured articles in The Province and Sun newspapers: http://www.theprovince.com/health/local-health/website+walks+through+prostate+cancer+diagnosis+treatment/12691289/story.html

Mark your calendar - Dr. Oliffe will be offering rounds on this resource on April 20th.

**‘Here comes the sun’**


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**Information & Resources:**

**March:**
- 2nd week of March is Social Work Week  
  National Social Work Month  
  National Colorectal Awareness month  

**April:**
- Daffodil Days – Cancer Awareness Month

**May:**
- Melanoma Awareness Month  
  2nd week of May is National Hospice/Palliative Care week

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**IPODE Continuing Education Courses**

Register for courses online at www.ipode.ca.  
For more information contact Natasha Boutilier: Natasha.Boutilier@cdha.nshealth.ca or 902-473-6618
CALL TO ARTISTS
Brain Tumour Awareness Month
ART EXHIBIT | MAY 3-9, 2017

TO MARK BRAIN TUMOUR AWARENESS MONTH AND TO SHOWCASE THE REMARKABLE CREATIVITY OF THE BRAIN TUMOUR COMMUNITY, THE PATIENT FAMILY ADVISORY COUNCIL OF THE BC CANCER AGENCY, IN PARTNERSHIP WITH VISUAL SPACE GALLERY, INVITES ART SUBMISSIONS BY ANYONE IMPACTED BY A BRAIN TUMOUR.

FOR MORE INFORMATION OR TO SUBMIT AN EXPRESSION OF INTEREST, PLEASE EMAIL: BCDMTART@GMAIL.COM
BY MARCH 10.

PLEASE INCLUDE THE FOLLOWING:
- NAME, EMAIL, TELEPHONE
- MEDIUM (ALL ARTISTIC MEDIA CONSIDERED MAXIMUM DIMENSIONS: 3FT X 3FT)
- A SHORT STATEMENT EXPLAINING HOW YOU’VE BEEN IMPACTED BY A BRAIN TUMOUR

* FINAL SUBMISSION DUE: APRIL 10, 2017

PLEASE NOTE: PIECES WILL BE SELECTED VIA A JURY PROCESS. SELECTED ARTWORK WILL BE INCLUDED FOR SALE AND/OR PUBLIC EXHIBITION.