

DEPARTMENT OF ONCOLOGY STRATEGIC PLANNING SURVEY THEMES

Vision Concepts: Department of Oncology



Executive Summary:

- Lead in generating, applying and transmitting knowledge to enable and advance personalized cancer care

General Summary

- Personalized treatments and therapies are the norm. This could be done through researchers investigating into diagnostic markers, and oncologists performing tests to determine certain patient signatures. This could then lead to medicines being prescribed on a more per-case basis than is done now. Providing best quality, evidence based patient care. Providing support and resources for innovative and clinical research including increasing participation in clinical trials
- Earlier detection of aggressive or metastatic cancers by incorporating themes such as personalized medicine
- Personalized treatment based on patients individual needs

- Leader in delivery of personalized and patient-centred cancer care, education in oncology, clinical trial research, and translational research
- Advancing personalized cancer care now and future
- Excellence and innovation in: (1) generation of new knowledge related to the causes, prevention and treatment of cancer; (2) translation of this knowledge to our patients in order to deliver superior, personalized care; and (3) education of the next generation of oncology physicians and researchers
- Leader in implementing genomic testing and imaging techniques for cancer patients, whenever it is of potential benefit. Leader in embracing personalized cancer care. We need to become a community that is fully engaged in cancer research, regardless of position within the department, realizing that this leads to optimal patient outcomes.
- Immunotherapy is the future of oncology. We should transform our centre to an immunotherapy centre on clinical care, research, and education. We should make sure London is known for its strength in Immunotherapy in the next 5 years.
- We must focus on the academic oncology mission (research and education in cutting edge science and medicine). It is the mission of BOTH the cancer program and the Department of Oncology to transfer information in both directions, between their programs, to create impact on patients. The department must find its way to addressing its primary academic role first then working with the clinical department to apply the lessons learned to improve the lives of patients.
- Providing quality, evidence based education to learners based on competency-based model.
- High quality patient care and innovative and translational research
- Creative, innovative interprofessional collaboration
- Evidence based research and patient care. Translating basic science outcomes from the lab to the bedside/ clinic.
- Caring. Integrity. Discovery.
- Innovative; impactful, relevant, patient centred
- To continuously improve the patient experience through awareness and implementation of the latest scientific and technological breakthroughs
- A seamless excellent patient care that applies both clinically proven methods and current standard of care
- Facilitate the delivery of leading-edge cancer treatment and compassionate, patient centred care through the integration of scientific discovery, translational research advances, clinical training and curriculum development, in the context of our SWO patient population
- Provide seamless and supportive cancer care for all patients using the most innovative and evidence-based practices that our centre can offer
- A pioneer in education, research and clinical care
- Coherent highly effective team of cancer researchers and clinicians

- Provide patient-centred care inspired by research and education locally, with connections to the worldwide medical community
- Proactive in addressing new technology rather than reactive and catch-up - hire visionary researchers and clinicians and support them well.
- Excellence, Discovery, Strength, Innovation, Knowledge, World Leader
- Lead in the development of new knowledge, improvement in patient care and in training the next generation of cancer providers.
- Every single person in the Department of Oncology is engaged in Research and Education. There should be no clinicians that do not do research, and no researchers that do not do education. Every patient should be enrolled in a clinical trial. Every case is a learning opportunity.
- Patient-centered world-class care from a Department that values educating trainees and advancing evidence based medicine through research
- Deliver outstanding care today (the idea of the bench to bed of translational research) while shaping what outstanding care looks like in the future.
- Lead the way in advancing patient centred care for all, translating knowledge to measurable patient outcomes and improvements and ensuring a high quality, patient focused approach to care is embedded in the hearts and minds of all current and future oncology health care providers.
- Driving force to unite and promote cancer research in London as well as patient-centered care and education.
- Improve survival and quality of life
- Caring, compassionate
- We are a team of multi-dimensional individuals united in our expertise & dedication in providing excellence & innovative solutions towards the "circle of care" (clinic, education, research).
- Through the integration of clinical care, education and research be recognized as a leader in advancing the understanding of the underlying basis of cancer and enabling improvement in outcomes for patients and the community.

Themes in Clinical Care

Executive Summary:

- Deliver a high quality, personalized and patient centred experience throughout the patient's cancer journey

General Summary

- Expand outpatient clinic areas, and increase outpatient chemotherapy and pharmacy capacity
- Personalized medicine
- Precision medicine and theragnostics
- Return to true patient-centered care, for example increase same-day chemotherapy.

- Greater access for patients to:
 - Proton therapy, more PET imaging, biological treatment planning optimization
 - New and expensive medications
 - Supportive care and psycho-oncology aspects of patient care which significantly impact patient experience, outcomes and patient well-being
- High quality, seamless and patient centred patient experience and journey from:
 - Diagnosis
 - Planning
 - Treatment
 - Support – emotional, spiritual, wellness, mental
 - Access to services; convenience
 - Environment that patients are in (i.e. ESAS kiosks)
 - Collaboration and seamless integration across the entire care team and specialties
 - Patient involvement
 - Patient education
- Innovative methods to deliver health care to our patients
- Ability to adapt to innovative and changing advances, knowledge, delivery methods and techniques and drugs for patient care

Themes in Cancer Research

Executive Summary:

- Strengthen the translational enterprise
- Promote a culture of translation and optimum support for research teams
- Recruit and mentor clinical researchers
- Strengthen scientist to clinician linkages
- Establish linkages to clinical trials
- Expand upon genomics utilization for prognostics and research
- Engage industry and other partners

General Summary

- The entire team, from researchers to clinicians must be focused on translation into patient outcomes
- Translation of basic discoveries or ideas into clinical use
- Clinicians must have a strong research emphasis.
 - They will provide an appreciation for how disease-specific questions that impact patient care can be addressed in the laboratory. This focus is especially asking in medical oncology.
 - Research think tanks to focus on areas / opportunities / needs

- Facilitate the interaction of basic scientists with people that know how to translate, including connecting scientists with potential, non-traditional funding sources and with pharmaceutical companies that may be interested in assisting with the translation.
- We need more clinician scientists
- Creating a research positive environment and foster the careers of clinician scientists
- Optimum support for researchers to be successful
 - Resource teams to support collaborative academic efforts between clinicians, scientists and other health care providers and patients
 - Teach our team how to be successful with grants – writing and administration
 - Grant-writing administrative supports
 - Protected research time
 - Roles and responsibilities and accountabilities defined for clinicians doing research
 - Provide educational modules focused on current research and research techniques
 - Greater support from hospital leaders to achieve research success
 - Administrative support
 - Support for LRCP initiated clinical trials
 - Compensation of scientists
- Advance educational research
- Expand research partnerships
 - Industrial collaborations
 - City-wide research collaborations
- Increase clinical trials – need to address cost competitiveness, multiple research ethics boards, patient recruitment and retention issues.
 - Leveraging our clinical trials to incorporate translational research questions and supporting investigator initiated clinical trials are important ways to advance our tripartite mission.
- Perform comprehensive evaluation of knowledge gaps in treatment delivery to identify areas where merging data from multiple institutions (provincially and/or nationally) may improve understanding. These would form a set of priority projects with high impact and higher likelihood to improve treatment outcomes. Examples: research questions that cannot be answered in context of randomized clinical trials (or too costly), research questions previously addressed but low impact (smaller studies based on single institutions), or research questions unable to answer based on currently available data through CCO, CIHI, and/or ICES.
- Clinical personnel should be facilitated and encouraged. Even if each faculty member sat in on lab meetings with a particular basic science group, they could not only get ideas for possible research projects, to which they have a direct line for funding, but they could offer their expertise on clinical problems that should be better addressed - something as simple as drug-dosing or unexpected toxicities or potential synergies, that basic personnel may not have thought about.

- Encourage scientists to work on areas that are potentially translatable (which some are a bit reluctant to do)
- Work with LHRI and hospital foundation to enhance security of future basic research, by helping to establish funds for research chairs
- Oncologists need to be persuaded that research is critical to their development as physicians with up to date knowledge of where fast moving and innovative treatment regimes can be implemented

Areas of Research

- Genomics – patients will suffer if we don't advance in this area
- Prostate cancer
- Imaging-based cancer treatment
- Immunotherapy research

Themes in Oncology Education

Executive Summary:

- Educate our faculty in focused areas of importance related to patient / family needs and emerging areas of importance
- Prepare for excellence in competency based teaching, new cancer therapeutics and diagnostics
- Build leadership and resiliency
- Provide interdisciplinary opportunities for our clinical and basic trainees
- Expand and embed mentorship and coaching at all levels

General Summary

- Mentor our faculty and staff to be successful
- Expand focus in areas like competency based teaching; identification and development of potential future leaders
- Partner with educational leaders in other departments at Western (office of CPD, individual leaders from other departments e.g. leaders in simulation) to deal with the challenges associated with implementing competency based education
- Provide protected teaching time
- Expand collaborative and inter-disciplinary teaching:
 - Opportunities for clinical and basic trainees to interact
 - Opportunities for basic trainees to interact with disease site MDTs.
 - Opportunities for clinical trainees to interact with research labs.
- CME is critical – educate our clinicians on new treatment modalities that are expanding rapidly like immunotherapy
- Provide greater integration of the medical oncology residency training program with wet lab research
- Enhance med oncology's appeal to more to UWO residents. Too few residents

- Continually renew our teaching focus with residents to incorporate frequent advances in personalized molecular diagnostics and therapies
- Expand upon genomics and bioinformatics training resources for trainees and mentors
- Increase learning opportunities to gain knowledge from different research groups with more discussion about how research is done. It would also be beneficial for junior laboratory members to learn about more laboratory techniques.
- Provide more training related to competencies, such as time management, leadership, knowledge management, innovative thinking
- Develop a structured co-op placement program (4/8/12 month terms) for undergraduate students to participate in clinical cancer research
- Enhance the residency program to incorporate:
 - Opportunities to participate in all areas & disciplines in oncology
 - A better integration between the resident's program and learning from the Psycho-Oncology expertise in the Supportive Care team would be highly beneficial to training oncology residents to be skilled in their knowledge, assessment and basic therapeutic skills for addressing the psycho-social-spiritual needs patients bring to consultations with them.

Themes in Inter / Multi-disciplinary Teamwork / Partnerships

Executive Summary:

- Expand partnerships and networks to effectively solve the cancer issues and problems
- Break down existing barriers to collaboration and true multidisciplinary excellence
- Establish mechanisms for researchers to interact with their research and clinical peers in a cooperative and stimulating academic environment.

General Summary

- Expand interaction between the basic and clinical sides - extremely important for research and educational purposes
- Make greater efforts to collaborate with other institutions nationally and internationally, and increase the number of times we are the leaders of these collaborations
- The cancer problem is too complex to work in isolation. Partnerships are essential to meeting the proposed strategic plans.
- Being part of research networks – national and international and city wide to tackle the cancer issues
- Break down the existing collaboration barriers to enable a truly integrative cancer research program. That means biologists talking to radiation oncologists and imagers and looking for areas of synergy.
- Provide venues for collaboration and sharing of information
 - Multidisciplinary large grant applications
 - Think tanks

- Ensure physicians have available time to participate in these collaborative activities
- Enhance community-building and non-bureaucratic support with oncologists as an academic group, while respecting each individual researcher's contribution
- The cancer problem globally is growing at an alarming rate. In view of our wealth and capabilities, we have an obligation to support this international concern. This is driving many institutions into developing a global perspective. It would be good to be involved in this near the front of the curve since many institutions will be moving into this direction in the near future.
- Significantly improve the relationship, collaboration and synergies with the Cancer Research Laboratory Program to generate and improve cancer research results and impact
 - Break down the barriers and issues that currently exist between CRLP and the LRCP
 - Deal with city-wide research issues

Themes Related to Efficiencies

Executive Summary:

- Optimize existing resources, capacity and practices to support integrated cancer care, research and education

General Summary

- Current human resources are underutilized because of space
- Go digital, Wi-Fi, iPADS, get better organized
- Currently, the cancer care system (multiple clinic visits, coordination between care at the cancer centre and in the community) can lead to duplication and gaps in patient-centred care
- Enhance integration of pathology, surgery, medical and radiation oncologists and imaging to be more efficient and seamless. Need better hospital support.
- Reduce "red tape" & streamline processes involved with applying for & securing resources to further enhance the clinical/research/education missions of the department
- Devolve areas of patient follow-ups to community based physicians (GP's, specialists), to give time and space for new, recurrent, complex patients and research.
- Consolidate and eliminate any internal politics between scientists/departments focused on cancer research

Themes Related to Department of Oncology Culture

Executive Summary:

- Define our culture and then 'walk the talk'
- Embed innovation in the LRCP culture in order to meet our academic mission

General Summary

- Supportive

- Innovative
- Champion of technology
- Agile
- Faculty are aggressively supported in order to enable them to succeed
- Creative, innovative interprofessional collaboration
- There needs to be a seminal change in culture at the LRCP where we get rid of the lip service to research and really do it in a translational way with oncologists having a realistic mandate to be involved in the research mission.
- Everyone needs a desire to be part of the innovation - getting involved in thinking about important research problems that they see on a daily basis with their patients and conveying these ideas to bench scientists and leading the research project, rather than the other way around.
- Oncologists have a unique perspective on what's important to study and tackle and scientists need to listen. We need more clinician scientist leaders.

Themes in Recruitment of Talent

Executive Summary:

- Strategically optimize our recruitment efforts
- “Build through the draft”
- Pay attention to junior and mid-career faculty and researchers

General Summary

- We need to be very strategic in recruiting for academic interests/ability as well as clinical care
- Strategic recruitment is essential to increase departmental focus on the proposed strategic directions.
- Strategic succession planning is required: leadership, clinical care, teaching and research
 - What talents and competencies do we need to advance our mission
 - For example, we need to expand the number of clinician scientists
- Stabilize salary programs to ensure that faculty who leave will indeed be replaced

Types of roles we need

- Radiochemist
- Radiobiologist
- Bloodwork Techs
- Nurse practitioners

Themes in Retention of Talent

Executive Summary:

- Ensure appropriate wellness programming / support is in place for department faculty and staff

- Make it as efficient and effective for faculty and staff to be successful and feel that they are making important contributions

General Summary

- Burnout is a huge issue, especially for medical oncologists.
- Staff feels bypassed in decision making at higher levels.
- Opportunities for academic achievements have been declining in recent years due to increased work demands and reduced meaningful research opportunities.
- Expand wellness programs
- Provide support to researchers
- Improve communication and reduce delays in responding to initiatives

Themes in Infrastructure

Executive Summary:

- Ensure facility planning incorporates considerations of all aspects of our mission: research and teaching as well as exemplary care

General Summary

- We need to have the infrastructure and funding to support their level of productivity
- Spaces need to be expanded / improved as it is a constant pressure and interferes with the conduct of patient based teaching and research
- Must establish clinical and basic genomic training/core facilities equivalent to other cancer institutes
- Build new cancer centre as suboptimal for patient capacity, flow and comfort
- To achieve our potential, we require funding for cutting edge research equipment, tools and lab spaces in CRLP

Themes in Technology

Executive Summary:

- Optimize our resources and prioritize all investments
- Expand the implementation of innovative technology and ensure faculty know how to use it
- Implement PowerChart module to mine patient data for potential clinical trial patients
- Provide access to PDX models at subsidized costs
- We need to be current with ultrasound technologies
- Invest in latest technology and manpower - in/out patient setting to improve patient care. For example, new computers, software, more Nurse practitioner/ physician assistants, etc.

Themes in Sustainability

Executive Summary:

- Secure support for key priorities, such as laboratory program, clinical trials, training, strategic recruitments; in direct alignment to our strategic priorities
- Ensure we have an effective succession planning and talent renewal process in place

General Summary

- Develop and implement quality outcome metrics that go beyond CCO
- Find ways to maintain the activities of the CARRT program after the government funding has expired
- Work with LHSC to maintain and improve research infrastructure, including compliance with new federal guidelines, computer technology (available work-stations, software programs, teleconferencing of seminars and other meetings between LRCP and UWO not only in seminar rooms but at individual computers
- Expand funding needed to hire basic and clinical researchers, and to create and sustain training programs to further our academic research role.
- Develop a plan to ensure we have the funds to carry out our academic mission
 - Reinvest the program portion of the Lawson overhead back into clinical trials.
 - Invest a portion of cancer research donations from the Foundation into clinical trials
- Implement a fellowship program in oncology for family medicine to sustain cancer care in London and Region.
- Develop a plan for survival at the clinical level in the face of stable resources and rising patient load
- Succession planning is critical for sustainability as faculty members approach retirement; some should move towards retirement quicker

Strengths That Responders Identified

- Radiation Oncology Boot Camp and Personalized Medicine Fellowships are educational innovations that "play to our strengths" and we should look to other opportunities like this.
- The Translational Research program seems to have developed into a good size for critical mass.
- The research faculty (scientists and clinician-researchers) is making headway academically, including good success in attracting external research funding in an increasingly challenging funding environment, and implementing highly innovative connections with the public and the private sector.