A Year in Review

APRIL 2020 - MARCH 2021



A Year in Review April 2020 to March 2021

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OUR VISION

Pan-Canadian cancer control systems that are collaborative, person-centred and high-performing by international standards.

OUR MISSION

To improve cancer control systems across Canada by working together to enhance quality, support innovation and strengthen sustainability.

2020 / 2021: A Year in Review

For over twenty years the Canadian Association of Provincial Cancer Agencies (CAPCA) has provided a forum for leaders of Canada's cancer control systems to discuss and collaboratively address issues that affect the delivery of cancer care in Canada.

CAPCA's positive impact is driven by an unwavering focus on a core set of issues, and by serving as a nimble forum for cancer system leaders to identify best practices and address complex policy challenges within tight timeframes. Our approach is pan-Canadian, evidence-driven and person-centred, and these core values help us strengthen partner collaboration and catalyze new opportunities to improve cancer control across Canada.

Over the past year, cancer care and the broader health system faced unprecedented challenges caused by the COVID-19 pandemic. Cancer surgeries and cancer screening programs were put on hold as healthcare resources were redeployed in response to surging numbers of patients suffering serious complications from COVID-19. Many healthcare providers moved to virtual care wherever possible.

In the face of these challenges, CAPCA focused on supporting members to respond to the pandemic in a coordinated manner, while continuing our core work of enhancing the quality of cancer care, driving innovation and strengthening system sustainability.

CAPCA's New Strategic Plan

Our work is guided by CAPCA's new three year <u>Strategic Plan</u> (2020 to 2023) and informed by the refreshed <u>Canadian Strategy for Cancer Control</u> (2019 to 2029).

CAPCA's new Strategic Plan is visionary and pragmatic in its approach to driving real systems-level change across Canada. Building on the exceptional work achieved by CAPCA and its partners, the new Strategic Plan outlines three strategic pillars, each encompassing key programs of work.



Enhancing Quality

Improving quality of cancer control is a goal shared by every provincial cancer program. CAPCA is committed to monitoring and improving patient safety, expanding access to diagnostic screening, and improving palliative care. Identifying opportunities to create, implement and endorse standards of care that will lead to more harmonized care for cancer patients is another important consideration.

Key priorities:

- **1.1** Improving patient safety through better and more integrated data.
- 1.2 Expanding lung cancer screening.
- **1.3** Improving integration of palliative care.

Pillar 1

CAPCA Year in Review 2020 - 2021

1.4 Prioritizing and implementing pan-Canadian standards.



Supporting Innovation

Supporting innovation in cancer care is imperative for patients and care teams to access new tools, techniques and therapies. CAPCA is committed to building on expertise gained during development of the clinical access framework for the introduction of CAR T-cell therapy in Canada, and to capture and integrate insights gathered from initiatives such as the multi-jurisdictional procurement for radiation treatment linear accelerators.

Key priorities:

- **2.1** Coordinating access to CAR T-Cell therapy.
- 2.2 Leveraging learnings from previous access to care initiatives.

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Strengthening Sustainability

Given current demographic trends, treatment costs and budgetary constraints, CAPCA actively supports its members in their efforts to ensure sustainability of cancer systems across Canada. CAPCA is committed to strengthening system sustainability.

Key priorities:

- **1.1** Integrating drug implementation issues into CADTH.
- **1.2** Forging a collective response to system shortages.
- **1.3** Optimizing the use of oncology biosimilars.
- 1.4 Incorporating lessons from realworld evidence into formulary management.
- **1.5** Developing and implementing new models of care.

Pillar 2

Pillar 3

CAPCA Board of Directors

April 2020 to March 2021

- Board Chair, Jon Tonita, President & CEO, Saskatchewan Cancer Agency (replaced Eshwar Kumar in September 2020)
- Kim Chi, Vice President & Chief Medical Officer, BC Cancer
- Matthew Parliament, Senior Medical Director, Cancer Care Alberta Alberta Health Services
- Sri Navaratnam, Vice President & Chief Medical Officer, CancerCare Manitoba
- Garth Matheson, Interim President & CEO, Cancer Care Ontario Ontario Health
- **Eshwar Kumar**, Co-Chief Executive Officer, New Brunswick Cancer Network
- Jean Latreille, Directeur national, Programme québécois de cancérologie
- Philip Champion, Medical Director, PEI Cancer Treatment Centre
- Helmut Hollenhorst, Senior Medical Director, Cancer Program, Nova Scotia Health (replaced Drew Bethune in January 2021)
- Debbie Walsh, Vice President, Clinical Services, Eastern Health Cancer Care Program
- Cynthia Morton, CEO, Canadian Partnership Against Cancer

A special thank you to Dr. Eshwar Kumar who served as CAPCA's Chair in 2019 and 2020, and to Dr. Drew Bethune who served as Nova Scotia Health's representative from 2016 to 2020.

"In a year marked by unprecedented challenges, CAPCA provided critical support to provincial cancer programs. CAPCA's unwavering focus on implementation issues that are common to all of us, together with our unique capacity to act quickly and efficiently, allows our team to drive meaningful change. I'm proud of CAPCA's contributions to enhancing the quality of care, supporting innovation and strengthening sustainability across all our provincial cancer programs." Dr. Jon Tonita, CAPCA Board Chair



Responding to the COVID-19 Pandemic

Every CAPCA discussion and decision in 2020/21 was influenced by COVID-19. As health systems across Canada struggled in the face of the pandemic, CAPCA quickly responded to members and supported pandemic response efforts. This is possible because of our unique capacity to bring together cancer program leaders to discuss urgent issues, optimize safe cancer care delivery for patients and staff and harmonize efforts across the country.

Enhancing Quality: Protecting front-line cancer patients and staff

To support our members in protecting patients and front-line staff, CAPCA worked with partners to gather evidence and best practices, and to mobilize knowledge across the country. Four examples of our impact:

- O COVID-19 vaccines are a critical tool for overall pandemic recovery, and for cancer programs to offer services even more safely. As the first vaccines were introduced in late 2020, CAPCA commissioned an evidence review of the potential impact on cancer patients of the available COVID-19 vaccines. The results are being used by CAPCA members to support planning and advocacy efforts across the country.
- In spring and summer of 2020, there were significant disruptions to breast, colorectal and cervical cancer screening programs. CAPCA collaborated with CPAC to understand the management of cancer screening services during the pandemic and to support CAPCA members in returning screening services to normal capacity. The information will also help jurisdictions plan for future mitigation strategies.
- A significant issue for front-line healthcare staff early on in the pandemic was access to personal protective equipment (PPE). To understand the issue, CAPCA partnered with Canadian Partnership for Quality Radiotherapy (CPQR) to survey radiation treatment departments across Canada about access and use of PPE.

The results supported jurisdictions to understand the challenges, and advocate for more PPE.

 Our investigation of PPE availability also led to a collaboration with the European Society for Therapeutic Radiation and Oncology (ESTRO). Our European colleagues adopted CAPCA's survey approach to collect data across European countries and is also developing a peer-reviewed manuscript that outlines these efforts and acknowledges CAPCA's leadership and contributions.

Strengthening Sustainability: Service planning and delivery

Throughout the pandemic, CAPCA worked closely with partners to strengthen system sustainability. This will continue as health systems prepare and implement recovery efforts. Two noteworthy examples are:

- Recognizing the impact of the pandemic on service planning and delivery, CAPCA launched the COVID-19 Modelling Community of Practice. It provides a pan-Canadian forum for modellers and planners across jurisdictions to examine downstream impacts of COVID-19 on cancer services and patients. Monthly interactive sessions and a collaborative space help members to; share information; answer questions about issues impacting programs and patients; make informed decisions; and harmonize efforts across Canada.
- Pre-pandemic cancer supply shortages were exacerbated this year due to some cancer treatments being used to treat COVID-19, and some drugs being delayed or stopped at the border. CAPCA's Supply Disruptions Committee, which has been in operation since 2015, carefully monitored for shortages and were ready with mitigation strategies in the event of a shortage.

"The COVID-19 pandemic highlighted CAPCA's unique capacity to bring Board members together quickly and in real-time to discuss issues impacting the safety and wellbeing of both cancer patients and frontline healthcare workers." Dr. Jean Latreille, Directeur national, Programme québécois de cancérologie.



Introducing Cutting Edge Therapies

It is a priority for all provinces to ensure a sustainable, high-quality cancer treatment delivery system that provides timely access to the most effective cancer therapies, tools and techniques. CAPCA works closely with members and partners to enhance evidence-based implementation of new and emerging technologies.

Prioritizing and Implementing Standards: Proton Beam Therapy

As new treatment therapies and technologies are introduced, CAPCA plays an important role in working with members and partners to prioritize and implement standards. Proton beam therapy (PBT) is a novel therapy that is an alternative to new photon technologies and traditional radiotherapy. Currently there is limited availability of PBT in Canada and most patients who are eligible for treatment are referred out-of- country.

To coordinate consistent access to planning and delivery of PBT for Canadian patients, CAPCA convened the expert Proton Beam Therapy Consensus Working Group in 2020. They conducted a current-state analysis of provincial and national clinical guidelines and recommendations in Canadian jurisdictions, in Australia and across Europe to determine availability and scope of clinical and costing data. The analysis is informing a pan-Canadian guidance document about access to proton beam therapy for Canadian patients that will be completed in the summer of 2021.

Coordinating Access to CAR T-Cell Therapy

Delivery of CAR T-cell therapy – a powerful immunotherapy – is very complex. The first CAR T-cell therapy was approved for use in Canada in September 2018. Ontario and Quebec were the first provinces in Canada to provide the therapy. Ministries of health and provincial cancer agencies are working together to coordinate patient access across Canada while system capacity expands in other provinces.

Throughout 2020/21, CAPCA worked with member organizations and partners to facilitate the introduction of CAR T-cell therapy through the adoption of a pan-Canadian adult clinical consensus access prioritization framework. CAPCA's Adult CAR T-cell Therapy Clinician Advisory Committee consists of clinical experts from each province, who meet every six months to review evidence and update the prioritization framework as required. Provincial decision makers in the cancer programs and ministries use the framework to guide and inform decisions relating to access to CAR-T therapy for Canadians.

"As new cancer technologies like CAR T-cell and proton beam therapy emerge as important treatment options for many cancer patients, CAPCA is helping jurisdictions stay ahead of the curve by informing important discussions about access to innovative therapies and harmonization." Dr. Matthew Parliament, Senior Medical Director, Cancer Care Alberta – Alberta Health Services.



Collaborating to Improve Cancer Control

CAPCA collaborates with a wide range of partner organizations and institutions to advance cancer planning and delivery and to strengthen quality, innovation and sustainability of cancer control across Canada. Together we are better able to identify and advance opportunities to address common challenges and identify shared solutions.

Drug Funding Sustainability

CAPCA's Cancer Drug Funding Sustainability Initiative was launched in 2016 to ensure Canadian patients have access to innovative and effective cancer treatments while supporting jurisdictions to achieve maximum value for publicly funded cancer therapies.

A core element was CAPCA's Cancer Drug Implementation Advisory Committee (CDIAC). A pan-Canadian committee of experts, CDIAC provided advice to provincial Ministries of Health and the pan-Canadian Pharmaceutical Alliance (pCPA) about how to address issues relating to implementation of new drugs into existing treatment pathways.

In 2020, CAPCA transitioned key functions into CADTH's existing pCODR Health Technology Assessment process to ensure long-term sustainability.

CAPCA remains focused on issues relating to sustainability through continued work with CADTH and other partners. This includes providing advice and support to CADTH as implementation issues are assessed through this new process and ensuring that all cancer agency perspectives are considered during each phase of funding deliberation.

"CAPCA and CADTH have a long history of productive partnership that builds on our respective strengths.

CADTH provides health care decision-makers with objective evidence to help make informed decisions about the optimal use of health technologies, while CAPCA facilitates the nuanced discussions needed to support implementation decisions. Together we strengthen the sustainability of our health systems"

Brent Fraser, Vice-President of Pharmaceutical Reviews

Expanding Lung Cancer Screening

Lung cancer kills more people than colon, breast, and prostate cancers combined. Large randomized controlled trials show that early detection of lung cancer with low dose CT (LDCT) is feasible, clinically effective, and reduces mortality by 20 to 26%, and possibly up to 33% for women. ^{2 3 4}

Lung cancer screening is currently delivered on an opportunistic (ad hoc) basis across Canada. This results in low risk individuals being screened for lung cancer and being exposed to higher than recommended radiation. Health resources are also impacted as there are no mechanisms to assess or monitor effectiveness and safety of opportunistic screening. It can also lead to inappropriate invasive follow-up procedures.

Establishing organized lung cancer screening programs across Canada will ensure that high-risk people are screened with the best technology. CAPCA is providing advice and guidance to CPAC in their work to support provinces to develop organized lung cancer screening, which includes the development of a business case and readiness assessment toolkit. CAPCA looks forward to providing ongoing assistance to this important work as it is a key priority of the Canadian Strategy for Cancer Control, 2019 to 2029.

¹ Canadian Cancer Society. Why tobacco control is important [web page]. Canadian Cancer Society; 2019 [cited 2019 Mar 29]. Available from: http://www.cancer.ca/en/get-involved/take-action/whatwe-are-doing/tobacco-control/?region=on.

²National Lung Screening Trial Research T, Aberle DR, Adams AM, Berg CD, Black WC, Clapp JD, et al. Reduced lung-cancer mortality with low-dose computed tomographic screening. N Engl J Med. 2011;365(5):395–409.

³ Emmons KM, Colditz GA. Realizing the potential of cancer prevention: the role of implementation science. N Engl J Med. 2017;376(10):986–90.

⁴ Edelman Saul, E., Guerra, R.B., Edelman Saul, M. *et al*. The challenges of implementing low-dose computed tomography for lung cancer screening in low- and middle-income countries. *Nat Cancer* **1**, 1140–1152 (2020). https://doi.org/10.1038/s43018-020-00142-z

Looking Ahead

There is no doubt that the coming year will present new and complex challenges as health systems continue to respond to the pandemic while moving towards normal service levels. To help strengthen our collective post-pandemic response, CAPCA will continue to supports members with cancer service planning.

Looking ahead to the coming year, an exciting area of collaboration for CAPCA will be the adoption of the <u>Canadian Partnership for Quality Radiotherapy</u> (CPQR) as a new CAPCA committee. The CPQR Committee will build on a decade of work by CPQR and partners to improve cancer care for Canadians by supporting high quality, patient-centered and safe radiation treatment across the country.

In addition to finalizing our proton beam therapy guidance document to get it into the hands of planners and clinicians, we are participating in a biosimilars evaluation working group to support rollout across the country. CAPCA will also continue its long-term commitment to monitoring cancer supply shortages, an issue that has been exacerbated during the pandemic.

Overall CAPCA looks forward to maintaining focus on supporting members to enhance the quality of cancer care, drive innovation and strengthen sustainability.

Details on CAPCA's full range of programs can be found at www.capca.ca.

Contact Information

Canadian Association of Provincial Cancer Agencies

145 King Street West, Suite 900
Toronto, ON M5H 1J8
416-619-5744

info@capca.ca / www.capca.ca