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# What is the Provincial Sarcoma Services Plan?

The Provincial Sarcoma Services Plan provides an overview of how adult sarcoma services are organized in Ontario. It was developed collaboratively by regional, clinical, and patient representatives through a steering committee facilitated by Ontario Health (Cancer Care Ontario).

## The plan was designed to:



Provide equitable access to the best quality sarcoma services, tailored to the individual needs of patients



Optimize care and the use of sarcoma services across the province



Provide an open and transparent explanation of Ontario Health (Cancer Care Ontario)'s process for funding sarcoma services

#### **The Rationale for Organizing Sarcoma Services**

Sarcomas are cancers that arise in soft tissue and bone. They can affect all age groups, may occur in any part of the body and are rare. The appropriate investigation, management, and rehabilitation of patients with sarcoma require a high degree of coordination among healthcare disciplines. Quality sarcoma care includes pathology review at the Host Centre by pathologists with a specialty or special interest in sarcoma, molecular diagnostics, site specific imaging, advanced limb salvage and abdominal surgery, high precision radiotherapy, and the delivery of complex chemotherapy regimens.

Under this model, resources are organized and supported to ensure all patients have coordinated access to expert, multidisciplinary care. All of these services are available at, or through, the Host Sarcoma Services Provider Sites. Partner Sites and hospitals in Partner Regions provide a sub-set of services appropriate to their level of expertise and under stewardship of the Host Site.



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# The Organization of Sarcoma Services

In Ontario, sarcoma services are organized through three multi-regional collaborative sarcoma programs, centred in Toronto, Hamilton, and Ottawa. Each program has a Host Site which provides a full spectrum of specialized sarcoma services.

There are also Partner Sites and hospitals in Partner Regions that provide a sub-set of clinical services as part of their programs and refer patients for more specialized care as appropriate (Figure 1).

Figure 1 | Multi-regional collaborative sarcoma programs in Ontario

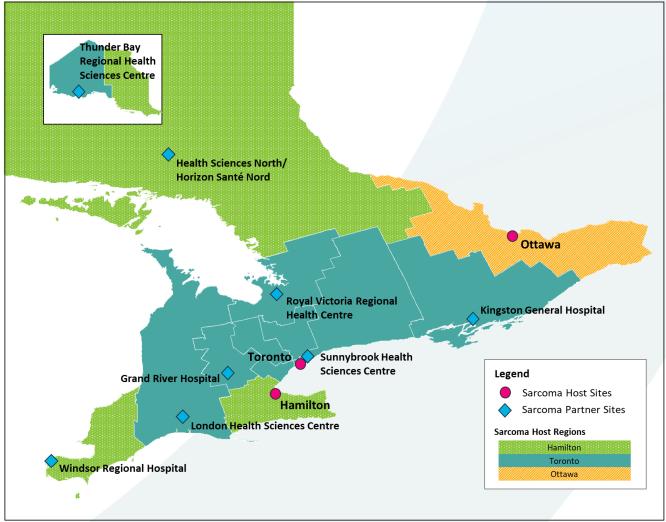


Table 1 | Service delivery and referral patterns for Ontario's 14 Regional Cancer Programs<sup>1</sup>

Host Site	Partner Sites	Partner Regions
Hamilton  Hamilton Health Sciences Corporation –  Juravinski Hospital and Cancer Centre	<ul> <li>Health Sciences North/Horizon Santé-Nord</li> <li>Windsor Regional Hospital</li> </ul>	<ul> <li>Erie St. Clair</li> <li>Hamilton Niagara Haldimand Brant</li> <li>North East</li> </ul>
Toronto  University Health Network – Princess Margaret Cancer Centre, Sinai Health System	<ul> <li>Grand River Hospital</li> <li>Kingston General Hospital</li> <li>London Health Sciences Centre</li> <li>Royal Victoria Regional Health Centre</li> <li>Sunnybrook Health Sciences Centre</li> <li>Thunder Bay Regional Health Sciences Centre</li> <li>Windsor Regional Hospital</li> </ul>	<ul> <li>Central</li> <li>Central East</li> <li>Mississauga Halton Central West</li> <li>North Simcoe Muskoka</li> <li>North West</li> <li>South East</li> <li>South West</li> <li>Toronto Central North</li> <li>Toronto Central South</li> <li>Waterloo Wellington</li> </ul>
Ottawa The Ottawa Hospital		Champlain

 $<sup>^{\</sup>rm 1}$  Patient preference should be considered in making referrals.

Table 2 | The following services will be provided at each of the sites across Ontario

Service	Host Sarcoma Site (Hamilton, Toronto, Ottawa)	Partner Sarcoma Site	Other Hospitals and Cancer Centres in Partner Regions
Diagnostic Imaging	YES – provide secondary review	YES – initial imaging	YES – initial imaging
Case Review Multidisciplinary Cancer Conference (MCC)	YES –host weekly/bi-weekly MCCs	Should attend MCC	Can attend MCC
Pathology Review	<ul> <li>Must provide secondary review and initial testing (in-house and referredin cases):</li> <li>Morphological Review</li> <li>Immunochemistry</li> </ul>	May provide initial testing (inhouse cases):  Morphological Review Immunochemistry	NO – provide initial diagnosis only
Molecular Diagnostics	<ul> <li>Must provide secondary review and initial testing (in-house and referredin cases):</li> <li>Molecular Analysis</li> <li>CNV Analysis</li> </ul>	May provide initial testing (inhouse cases):  Molecular Analysis CNV Analysis	Should limit investigations to avoid duplication of services
High Precision Radiotherapy	YES – provision of curative, supportive and palliative radiotherapy  Should be able to provide:  IMRT  MRI image fusion capabilities  3D and 4D treatment planning  CNS and body stereotactic radiation treatment  Provide regional radiation peer review	YES – provision of curative, supportive and palliative radiotherapy  Treatment provided after discussion at central MCC and if real time peer review measures are in place	<b>May</b> provide supportive and palliative radiotherapy

## Table 2 cont'd | Chemotherapy

Service	Host Sarcoma Site (Hamilton, Toronto, Ottawa)	Partner Sarcoma Site	Other Hospitals and Cancer Centres in Partner Regions
Treatment Decision	YES – decision made by MRP; discussion takes place at MCC	YES – after discussion at central MCC and if real-time QA measures are in place	NO
Delivery of Adjuvant Chemotherapy	YES – chemotherapy regimens will be updated as needed to support evolving clinical practice	YES – after discussion at central MCC and if real-time QA measures are in place	YES – under limited circumstances following discussion at central MCC and if QA measures are in place
Delivery of Supportive and Palliative Chemotherapy	YES	YES	YES

## Table 2 cont'd | Surgery

Service	Host Sarcoma Site (Hamilton, Toronto, Ottawa)	Partner Sarcoma Site	Other Hospitals and Cancer Centres in Partner Regions
Bone	YES	NO*	NO
Bone Prosthetic	YES	NO	NO
Bone Allograft	YES	NO	NO
Soft Tissue	YES	Non-complex cases after discussion at central MCC	NO
Anesthesiology	YES – Ensure there is a dedicated group of anesthetists who provide sarcoma anesthesia services for sarcoma patients	YES – Non-complex cases after discussion at central MCC	NO

Rehabilitation Services (e.g., physiotherapy, pain management, speech and language pathology, occupational therapy, mental health services)	YES	YES		YES
Anatomy Specific Disciplines (E.g., head and neck, gynecologic oncology, thoracic)	YES	If available and after central MCC	discussion at	NO
Other Services <sup>†</sup> (E.g., travel and accommodation assistance)	YES	YES		YES

CNS: Central nervous system; FISH: Fluorescence In Situ Hybridization; IMRT: Intensity Modulated Radiotherapy; MRI: magnetic resonance imaging; MRP: most responsible physician; QA: quality assurance

<sup>\*</sup>Bone sarcoma surgery should be done at the Host Site. Partner Sites may perform bone sarcoma surgery only in exceptional cases where the MCC and the Host Site determine that it is reasonable to do so.

F Other services (such as travel and accommodation assistance) should either be provided at all sites or sites must have information to connect patients to other services.

## **Developing the Sarcoma Plan**

#### 1 | Expert Panel

In 2009, Cancer Care Ontario facilitated an Expert Panel of physicians, nurses, and hospital administrators to help identify how to make the best use of resources while providing the best possible care to sarcoma patients.

The Expert Panel developed recommendations for the organization of sarcoma services – Adult Sarcoma Services Management in Ontario.¹ Recommendations centred on the essential need for each case to be reviewed at an MCC and for care to be supervised by a multidisciplinary sarcoma team (MST).

# 2 | Regional Collaboration & Submissions

Submissions were made to Cancer Care Ontario and reviewed by the Sarcoma Services Steering Committee in 2013.

These submissions identified:

- A small number of Ontario regional cancer centres/hospitals which would commit to being Host Sarcoma Services Provider Sites, where a full scope of sarcoma expertise and care would be available
- Partner Sarcoma Services Provider Sites, which would provide a subset of sarcoma services and refer patients for sarcoma care
- Partner Regions, in which some hospitals would also provide a subset of sarcoma services and refer patients for sarcoma care.

To implement the recommendations, regions across the province designed multi-regional, multi-disciplinary programs focused on ensuring equitable access to high-quality sarcoma care for all Ontarians.

Regions across the province identified the partnerships necessary to ensure access to coordinated, expert, multidisciplinary care for their patients. It was important to address both the needs of patients residing in the Host Sarcoma Services Provider Site's region, and the need to offer services to patients from other regions in the province, as required.

This ensures that all patients in Ontario, no matter where they reside, will have access to comprehensive sarcoma services.

### 3 | Steering Committee

The submissions were reviewed and evaluated by the Sarcoma Services Steering Committee and resulted in the development of the three programs making up the Provincial Sarcoma Services Plan. The Plan lays out clear expectations for Host Sites, Partner Sites and Partner Regions. (See Table 2)

# **Moving Forward**

Ontario Health (Cancer Care Ontario), the Sarcoma Services Advisory Committee and the regions continue to work together to support an organized, integrated, multidisciplinary model of adult sarcoma care across the province. Inter- and intra-regional collaboration leverages the existing expertise and capacity within the system to provide appropriate care for all Ontario sarcoma patients.

More information is available on our website
Sarcoma Services Program | Cancer Care Ontario

For more information, please contact OH-CCO ssoinfo@ontariohealth.ca

