

Chairperson's Message

I am pleased to provide the 2014-15 Annual Performance Report for the Provincial Cancer Control Advisory Committee, in accordance with the requirements of the *Transparency and Accountability Act* for a Category 3 Government Entity. In the development of this report, consideration was given to the mandate and activities of the Advisory Committee, as communicated by the Minister responsible for this entity.

It should be noted that on September 30, 2014, the Department of Seniors, Wellness and Social Development (SWSD) was created with a specific mandate to address health promotion and wellness in the Province. While the Provincial Cancer Control Advisory Committee continues to report to the Minister of Health and Community Services, the Committee will maintain a working relationship with SWSD as officials from that department attend regular committee meetings.

This Annual Performance Report provides an overview of the activities of the Provincial Cancer Control Advisory Committee and the extent to which planned results were met during the first fiscal period covered by the 2014-17 Activity Plan. As the Committee Chairperson, my signature below is indicative of the entire Committee's accountability for the results reported.

Sincerely,

Sharon Smith, Chairperson

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Provincial Cancer Control Advisory Committee

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1.0 Overview

In June 2011, the Minister of Health and Community Services established the Provincial Cancer Control Advisory Committee (CCAC). The Minister appointed the membership from a broad representation of the cancer control community throughout Newfoundland and Labrador. The establishment of the Committee was an early action of *Gaining Ground: A Provincial Cancer Control Policy Framework for Newfoundland and Labrador* ("the Framework") released in November 2010. Policy Direction 9 of the Framework: Accountability and Measuring Success, identified the creation of the committee. This policy direction committed the Provincial Government to establish a committee to advise the Minister of Health and Community Services on actions to advance and improve cancer prevention and control in Newfoundland and Labrador.

To advise the Minister on cancer control issues, the CCAC reviews current reports and research findings, receives presentations from content experts, and prepares recommendations on the issue. The CCAC strives to collect and review the best information available and to consider the information from various perspectives to provide the best advice to the Minister.

Membership

In 2014-15, the CCAC had 13 members, including one vacant seat. The membership consisted of a diverse cross-section of individuals who were familiar with cancer prevention and control issues, and included representatives from the Regional Health Authorities, community organizations, Memorial University, cancer survivors, volunteers, the Department of Health and Community Services, and other stakeholders. All members and the Chairperson are appointed by the Minister of Health and Community Services (see Appendix A).

Meetings and Expenditures

In 2014-15 the committee met four times in St. John's: May 26 and September 9, 2014; and January 22 and February 24, 2015. Meeting expenses totalled \$265. Associated costs incurred by the CCAC are covered by the Department of Health and Community Services.

Mandate

The role of the Provincial Cancer Control Advisory Committee is:

- i. To advise the Minister on:
 - priorities for action;
 - monitoring progress;
 - the development of an evaluation plan for the Framework;
- ii. To liaise with the cancer control community nationally and provincially, including patients, survivors, advocates and community organizations; and
- iii. To identify for the Minister's consideration, additional evidence-based objectives or priority directions that have the potential to improve the control of cancer in Newfoundland and Labrador.

Primary Clients

The CCAC recognized the Minister of Health and Community Services, Government of Newfoundland and Labrador, as its primary client. By fostering an environment of understanding with the Provincial Government about cancer prevention and control, individuals living with or at risk of developing cancer were also served.

Values

The Department of Health and Community Services' values are reflected daily as employees fulfill their roles and responsibilities in serving their clients. The CCAC considered the departmental values for the 2014-2017 planning cycle and adapted the values to better align with the role of the Committee:

Transparency and Accountability

Each member takes their responsibilities seriously and contributes to a culture of openness in decision-making and reporting.

Collaboration

Each member engages others in the health and community services system and in the broader cancer control community, in a positive manner, respectful of others and their different perspectives.

Innovation

Each member actively considers current evidence and new approaches to inform the development of committee recommendations for improving cancer prevention and control efforts in this province.

Privacy

Each member manages and protects information related to persons/families/ organizations/communities and the Department of Health and Community Services appropriately.

Excellence

Each member brings an important perspective to the committee and from that perspective makes decisions based on the best evidence and information available to provide a high standard of advice to the Minister.

Vision

The CCAC supported the following vision of the Department of Health and Community Services:

The vision of the Department of Health and Community Services is for individuals, families and communities to achieve optimal health and well-being.

The CCAC contributed to achieving this vision by providing advice to the Minister on: priorities for action, monitoring progress, and the development of an evaluation plan for the Provincial Cancer Control Policy Framework.

Mission

The CCAC adopted the 2011-2017 mission of the Department of Health and Community Services as follows:

By March 31, 2017 the Department of Health and Community Services will have provided leadership to support an enhanced health care system that effectively serves the people of the province and helps them achieve optimal health and wellbeing.

The CCAC contributed to the above mission statement through its mandate, identified actions and the collaborative efforts of the members and member organizations to further cancer prevention and control efforts within the Province. The CCAC shared the same vision and supported the mission of the Department. The CCAC provided leadership through an advisory capacity to the Minister and this role was reflected in the Committee's indicators and actions.

2.0 Shared Partnerships

The CCAC valued the support of the Department of Health and Community Services in fulfilling its mandate.

The achievement of the CCAC's primary objective would not be possible without the valuable input of many key stakeholders including, but not limited to: the Canadian Cancer Society, Young Adult Cancer Canada, Memorial University Faculty of Medicine, experts in the field, national organizations and working groups, the Regional Health Authorities, the Provincial Cancer Care Program, community volunteers, cancer survivors, and Departmental staff.

In 2014-15, the CCAC worked with its partners in the following ways:

- Department officials updated the CCAC on cancer prevention and control priority actions;
- Members of the CCAC reported on cancer prevention and control efforts within their own organizations; and,
- Members of the cancer prevention and control community provided the CCAC with current information, expert advice, and status reports on various initiatives.

3.0 Report on Performance

Issue: Cancer Control

The Canadian Cancer Society (CCS) estimates that two out of five Canadians (45 percent of men and 41 percent of women) are expected to develop cancer during their lifetimes, and that one out of four Canadians will die of cancer. These statistics highlight the far-reaching impacts of cancer, as it touches most people either directly or indirectly at some point in their lives.

The CCS also estimates that there will be 3,500 new cases of cancer and 1,510 deaths from cancer in Newfoundland and Labrador in 2015. Newfoundland and Labrador, along with the rest of Canada, is expected to see an increase in the number of new cases of cancer, largely because of the aging population. However, high rates of cancer risk factors, such as smoking, inactivity, unhealthy eating, alcohol consumption, and sun exposure, are also to blame for this rising trend. Preventive interventions to reduce these risk factors have the potential to influence future incidence rates for certain cancer types, such as lung and colorectal cancer.

The Canadian Strategy for Cancer Control (2006) recognizes that true cancer control "aspires to prevent cancer, to detect cancer at an early stage, and to treat and hopefully cure the disease in those who are diagnosed, and to increase the survival and the quality of life in those who develop it." The World Health Organization states that interventions are available which permit the early detection and effective treatment for approximately one third of cancer cases. Due to advances in cancer care, cancer is increasingly viewed as an illness from which people can survive.

In 2014-15, the CCAC contributed to cancer prevention and control efforts in the province by advising the Minister of Health and Community Services on current issues in the cancer prevention and control environment. This advice helped to direct decisions on policies and programs that directly benefit the people of Newfoundland and Labrador.

Through the provision of advice to advance and improve cancer control efforts, the CCAC has addressed or made contributions towards Government's strategic direction to strengthen population health and healthy living.

Objective: By March 31, 2015 the Cancer Control Advisory Committee will have provided advice to advance and improve cancer control efforts in Newfoundland and Labrador.

Measure: Provided advice

Planned for 2014-15	Actual Performance for 2014-15
Provided advice on select priority actions of the Cancer Control Policy Framework	 The CCAC provided advice on priority actions of the Cancer Control Policy Framework by monitoring progress towards the achievement of the stated goals of the Framework. For example, the CCAC: Received regular reports from Eastern Health's Cancer Services Quality Committee for the purposes of informing advice provided to the Department on priorities and operational issues that may support or hinder the achievement of Framework goals; and, Invited representatives from the new Department of Seniors, Wellness and Social Development to attend regular meetings, in order to provide updates on provincial initiatives related to health promotion and cancer prevention, in support of Policy Direction 1 of the Framework. These updates helped to inform advice provided to the Minister on the issue of Tobacco Control Legislation.
Provided advice on identified emerging cancer control issues and interests	The CCAC provided advice and recommendations, at the request of the Minister, regarding the issue of flavoured tobacco and electronic cigarettes, based on recent Canadian research on the use of flavoured tobacco and electronic cigarettes by youth. The advice was also informed by a presentation to the committee by the Alliance for the Control of Tobacco. In addition, the CCAC provided advice to the Minister on the issue of hookah (waterpipe) use, and requested that the recommendations be forwarded to the Minister of Seniors, Wellness and Social Development, as the Minister responsible for Tobacco Control legislation.
Provided advice on the monitoring of progress of select cancer control initiatives	The CCAC received a presentation of the final recommendations stemming from the review of the Provincial Cancer Screening Programs, completed in 2014. The CCAC then provided advice and recommendations, at the request of the Minister, regarding the how best to implement the suggested actions. In addition, the Minister requested that the committee consider what other messages, initiatives and interventions would help to further prevent cancer in this province. This request will be completed in the coming year.

Discussion of Results

In the 2014-15 fiscal year, the Committee considered the issues of flavoured tobacco, electronic cigarettes, hookah, and clinical breast exams for the purpose of developing recommendations for the Minister, examined emerging evidence regarding breast cancer screening, and discussed future priorities for cancer control in this province. Therefore, the CCAC met its objective by providing advice to the Minister on priority actions of the Policy Framework, emerging issues and interests, and on monitoring progress of select cancer control issues in the coming year.

As communicated in the Committee's 2014-17 Activity Plan, work for 2015-16 will be based on the same objective, measures and indicators as noted above for 2014-15. The activity plan can be found on the Department of Health and Community Services website at: www.health.gov.nl.ca/health/publications.

4.0 Challenges and Opportunities

The CCAC expects to fulfil its mandate in 2015-16, given the Minister's support for the Committee's work. In addition, following a recruitment process, the committee expects to have a full membership which will provide a comprehensive view of issues and topics in cancer prevention and control.

There are a number of partnership opportunities and initiatives which may support and/or direct the CCAC's work in the coming year. The CCAC has identified the following:

- Monitoring the issue of access to radiation therapy and PET/CT services;
- Monitoring the First Nations Inuit Métis cancer control initiative; and,
- Advising on an audit of supportive care programs.

In addition, the Minister of Health and Community Services has identified cancer prevention and screening as a continued area of interest and has asked the CCAC for advice on these issues. The CCAC will prepare additional recommendations in this regard during 2015-16.

Appendix A – Committee Membership as of March 2015

Members:

Chairperson – Ms. Sharon Smith
Department of Health and Community Services – Mr. Bruce Cooper
Eastern Health – Representative appointed by the CEO: Ms. Katherine Chubbs
Central Health – Representative appointed by the CEO: VACANT
Western Health – Dr. Susan Gillam
Labrador-Grenfell Health – Representative appointed by the CEO: Ms. Delia Connell
Memorial University Faculty of Medicine – Dr. James Rourke or designate
Canadian Cancer Society - NL Division – Mr. Matthew Piercey
Young Adult Cancer Canada – Mr. Geoff Eaton
Representative for Cancer Survivors – Mrs. Rosemary Hedderson
Representative for Community Volunteers – Mrs. Margot Reid
Representative for Family Physicians – Dr. Elizabeth Bautista
Stakeholder Representative – Dr. Anne Kearney

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