

Word count: 299

Title: Canadian Team to Improve Community-Based Cancer Care along the Continuum (CanIMAPCT)

PI: Dr. Eva Grunfeld

Background: Cancer patients rely on good coordination of care between their primary care providers (PCP) and cancer specialists throughout their cancer journey. However, there are often problems of communication, continuity, and coordination of care that can lead to suboptimal care and anxiety for patients and their families, as well as inefficiency within the healthcare system. We are a pan-Canadian team of healthcare providers, researchers and policy makers spanning seven provinces who are committed to improving care for cancer patients.

Research Objectives: To develop an inter-disciplinary multi-jurisdictional program of research and knowledge transfer to enhance the capacity of PCP to provide care to cancer patients and those at increased cancer risk, and improve the link between PCP and speciality care along the cancer care continuum. We will examine current practice, identify inter- and intra-provincial care gaps across healthcare sectors, and develop and test a shared care framework for comparative evaluation across jurisdictions.

Methods: The CanIMPACT team was funded to conduct a program of research that involves four streams of inquiry: diagnosis of symptomatic cancer, treatment, survivorship, and personalized medicine as it pertains to cancer. We will use a mixed methods approach involving: 1) quantitative methods that are population-based descriptive and analytic studies; 2) qualitative methods that incorporate diverse perspectives of stakeholders to explore contextual factors; 3) knowledge translation strategies for collation and synthesis of evidence to identify best practices and care gaps; and 4) community-based pragmatic randomized trial design.

Impact: Outcomes from this program of research will result in: 1) tested explicit strategies useful to healthcare policy makers to direct system change; 2) demonstrated ability to use administrative health databases to measure and monitor system change; and 3) a rigorously tested framework for shared care and supporting tools and resources to be used by PCP and cancer specialists to improve care.