SMOKING CESSATION IN CANCER CARE ACROSS CANADA

Helping patients with cancer to quit smoking





Contents

- 2 INTRODUCTION
- 4 CANADA
- 6 YUKON
- 7 NORTHWEST TERRITORIES
- 8 NUNAVUT
- 9 BRITISH COLUMBIA
- 10 ALBERTA
- 11 SASKATCHEWAN
- 12 MANITOBA
- 13 ONTARIO
- 14 QUEBEC
- 15 NEW BRUNSWICK
- 16 NOVA SCOTIA
- 17 PRINCE EDWARD ISLAND
- 18 NEWFOUNDLAND AND LABRADOR
- **19 REFERENCES**

SMOKING CESSATION:

A critical part of cancer treatment

2 mo sar Commercial tobacco use is the leading preventable cause of cancer in Canada. Patients who continue to smoke after a cancer diagnosis have worse treatment outcomes, including an increased risk of cancer recurrence and death.¹

Continued smoking increases the cost of additional cancer treatments by an average of \$4,800 to \$7,200 for each patient who smokes. Costs are even higher when the treatment costs of other tobacco-related health conditions are considered.²

Smoking cessation increases the effectiveness of patients' cancer treatment, lowers patients' risk of dying by approximately 40 percent and could result in \$50-\$74 million in cost savings for every 5 percent of patients with cancer that quit smoking.^{1,2}

PROGRESS IN INTEGRATING SMOKING CESSATION INTO CANCER CARE

Excellent progress is being made across Canada to integrate comprehensive smoking cessation supports into cancer care settings. Patients with cancer are screened for tobacco use, advised of the benefits of quitting, and, depending on the jurisdiction, offered smoking cessation support in the cancer care setting and/or referred to a community program such as a quitline. Many provinces and territories are also partnering with First Nations, Inuit and Métis organizations and communities to expand the availability of culturally appropriate smoking cessation supports.

The Canadian Partnership Against Cancer (the Partnership) is supporting this work through its Pan-Canadian Tobacco Cessation and Cancer Care Network, the publication of an evidence-based smoking cessation in cancer care <u>Action</u> <u>Framework</u>, and funding for smoking cessation projects in all provinces and territories. The goal is to provide smoking cessation in all cancer care settings by 2022, make progress towards the priorities of the 2019-2029 Canadian Strategy for Cancer Control and move us closer to Health Canada's goal of reducing tobacco use to less than 5 percent by 2035.^{3,4} This report demonstrates the progress that has been made in Canada and in the provinces and territories to help patients with cancer to quit smoking.

VIRTUAL MODELS OF SMOKING CESSATION DURING THE COVID-19 PANDEMIC

Since the pandemic started, many provinces and territories have shifted to provide mailing of smoking cessation medications, virtual counselling, free nicotine replacement therapy (NRT), and virtual modules for health professionals and patients. With in-person appointments for patients with cancer down due to COVID-19, the Partnership has worked with partners to maintain smoking cessation supports.

In this document, tobacco refers to commercial tobacco products, not traditional or sacred tobacco. Traditional or sacred tobacco is used by some First Nations or Métis communities in ceremonial or sacred rituals for healing and purifying.



To support the integration of smoking cessation supports into cancer care settings, the Canadian Partnership Against Cancer has funded projects in all provinces and territories to help patients with cancer to quit smoking.

Provinces and territories are also partnering with First Nations, Inuit and Métis organizations and communities to expand the availability of culturally appropriate smoking cessation supports.

IMPORTANCE OF SMOKING CESSATION

Smoking cessation increases the effectiveness of patients' cancer treatment, lowers their risk of dying by approximately 40% and results in \$50-\$74 million in cost savings for every 5% of patients with cancer that quit smoking.

PERCENTAGE OF CANCER CARE SETTINGS OFFERING SMOKING CESSATION SUPPORT

2012-2017	2017/18	2018/19	2019/20	2020/21	2021/22
0	O	O	O	O	O
26%	56%	66%	73%	87%	GOAL OF 100%

MOST CANCER CARE SETTINGS OFFER SMOKING CESSATION SUPPORT

- All provinces and territories are working towards integrating smoking cessation into cancer care settings and the majority of patients with cancer in Canada have access to smoking cessation supports.
- In 2020:
- > 11 provinces and territories had integrated smoking cessation into some or all cancer care settings.
- > 87% of cancer care settings in Canada offered outpatients support to quit smoking.
- > 44% of cancer care settings in Canada offered culturally appropriate smoking cessation supports for First Nations, Inuit and Métis patients with cancer.

IMPLEMENTING SMOKING CESSATION IN CANCER CARE

The smoking cessation in cancer care <u>Action Framework</u> establishes the gold standard for smoking cessation support in the cancer system. Cancer care settings can use the Action Framework's <u>Implementation Checklist</u> to assess their current supports and identify steps to move from pre-implementation to a bronze, silver or gold level of implementation. In 2020, two provinces and territories were at the bronze level, four were at the silver level and seven were at the gold level. The average implementation level for Canada was silver.

COVID-19 RESPONSE

Since the pandemic started, many provinces and territories have shifted to provide virtual smoking cessation services.

SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVELS IN CANADA, 2020

	BEHAVIOURAL COUNSELLING	PHARMACO- THERAPY	PERSON- CENTERED	CULTURALLY COMPETENT	PARTNERSHIP	INDICATOR MEASUREMENT AND REPORTING	PROVINCIAL/ TERRITORIAL LEVEL
Yukon	G	G	Ρ	S	G	G	GOLD
Northwest Territories	Р	G	Ρ	S	Р	Ρ	BRONZE
Nunavut	В	G	В	S	S	Ρ	SILVER
British Columbia	G	G	G	S	G	G	GOLD
Alberta	В	S	S	В	S	В	SILVER
Saskatchewan	S	В	в	В	G	G	SILVER
Manitoba	S	G	G	В	G	S	GOLD
Ontario	S	S	G	S	S	G	GOLD
Quebec	Ρ	S	Ρ	Ρ	S	Ρ	BRONZE
New Brunswick	G	G	S	Ρ	G	G	GOLD
Nova Scotia	S	S	в	Ρ	S	В	SILVER
Prince Edward Island	S	c	s	В	G	S	GOLD
Newfoundland and Labrador	S	G	G	S	S	S	GOLD
Average level for each category	SILVER	SILVER	SILVER	BRONZE	SILVER	SILVER	CANADA: SILVER

Smoking Cessation Action Framework Implementation Checklist

G = GOLD

S = SILVER B = BRONZE

P = PRE-IMPLEMENTATION



YUKON CANCER CARE CLINIC – SMOKING CESSATION SERVICES

Offers smoking cessation support to ambulatory patients with cancer:

- Cancer care clinic staff screen patients for tobacco use, advise them to quit smoking and refer patients to Quitpath, Yukon's commercial tobacco cessation program, for behavioural counselling and free nicotine replacement therapy (NRT).
- Patients registered with the federal Non-Insured Health Benefits (NIHB) Program are eligible to receive free smoking cessation medications.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, the cancer care clinic in Yukon* offered outpatients support to quit smoking, including culturally appropriate supports for First Nations, Inuit and Métis patients with cancer.

COVID-19 RESPONSE

Smoking cessation services in Whitehorse have shifted from in-person to virtual counselling and from pick-up to drop-off of NRT.

*Many patients requiring cancer care in Yukon receive part of their care at cancer centres in British Columbia or Alberta.

GOLD

PARTNERSHIP-FUNDED PROJECT - INTEGRATING TOBACCO CESSATION WITH CANCER CARE IN YUKON

2019 2020	 2021	-
Develop and implement a system where all new patients with cancer are screened for tobacco use, advised to quit and referred to culturally safe smoking cessation support, using an opt-out approach	Enhance and sustain tobacco cessation services and work to include commercial tobacco cessation as a standard of care for patients with cancer in hospital accreditation	

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach and mechanisms for relapse prevention, follow-up and extension of support to family and friends	GOLD
Pharmacotherapy	Offers free NRT	GOLD
Person-Centered	Assessing the availability of a patient representative to participate in program planning	PRE- IMPLEMENTATION
Culturally Competent	Offers staff cultural competency training and patient resources	SILVER
Partnership	Works with multi-disciplinary team and community partners, with mechanisms for information sharing to track patient progress	GOLD
Indicator Measurement and Reporting	Collects and reports on adoption, reach, uptake and outcome data	GOLD

Northwest Territories

HELPING PATIENTS WITH CANCER TO QUIT SMOKING

GOVERNMENT OF NORTHWEST TERRITORIES

- Most patients requiring cancer care in Northwest Territories go to the Stanton Territorial Hospital in Yellowknife and/or the Cross Cancer Institute in Edmonton, Alberta.
- At Stanton Territorial Hospital, patients with cancer are asked about their tobacco use at regular intervals, using a patient survey. Patients who want to reduce their tobacco use can receive a prescription for a smoking cessation medication and information about the NWT Quitline.
- The hospital is developing a more formal approach to supporting patients with cancer to quit smoking, including coordinating smoking cessation care between cancer care settings.

 Clients registered with the federal Non-Insured Health Benefits Program (NIHB) are eligible to receive free smoking cessation medications; residents not covered under NIHB can receive free smoking cessation medications through the Extended Health Benefits Program.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

• In 2020, Stanton Territorial Hospital was working to increase the accessibility of smoking cessation supports to patients with cancer.

COVID-19 RESPONSE

The Partnership-funded project to integrate tobacco cessation in cancer care was temporarily stopped in March 2020 due to staff redeployments to respond to the pandemic.

PARTNERSHIP-FUNDED PROJECT - INTEGRATING SMOKING CESSATION IN CANCER CARE

2019	 2020	2021	2022

Develop and implement a formal approach to supporting patients with cancer to quit smoking, including coordinating smoking cessation care between Stanton Territorial Hospital in Yellowknife and Cross Cancer Institute in Edmonton

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:



CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Working towards implementing a 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model	PRE- IMPLEMENTATION
Pharmacotherapy	Offers free varenicline, bupropion and/or nicotine replacement therapy	GOLD
Person-Centered	Assessing the availability of a patient representative to participate in program planning	PRE- IMPLEMENTATION
Culturally Competent	Offers staff cultural competency training and patient resources	SILVER
Partnership	Determining the availability of smoking treatment expertise	PRE- IMPLEMENTATION
Indicator Measurement and Reporting	Developing tools and infrastructure to track program performance and collect data	PRE- IMPLEMENTATION



DEPARTMENT OF HEALTH – TOBACCO AND CANNABIS PROGRAM

- All Nunavummiut patients with cancer receive care at cancer centres in Ontario, Manitoba, Alberta or Northwest Territories, depending on which region of Nunavut they reside.
- The Tobacco and Cannabis Program supports patients to receive smoking cessation services at cancer centres outside of the territory. The program provides patients returning to Nunavut with educational information about cancer and smoking cessation and referrals for cessation services at the Quitline or in communities.
- The Tobacco and Cannabis Program is working to implement the Ottawa Model for Smoking Cessation (OMSC) for patients at Qikiqtani General Hospital and scale up the OMSC territory-wide in the long term.
- Clients registered with the federal Non-Insured Health Benefits Program (NIHB) are eligible to receive free

smoking cessation medications; residents not covered under NIHB may be eligible to receive free smoking cessation medications through the Extended Health Benefits Program.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, Qikiqtani General Hospital did not yet provide a smoking cessation program to all outpatients undergoing cancer treatment, but many Nunavummiut patients receiving cancer treatment outside the territory had access to culturally appropriate smoking cessation support.

COVID-19 RESPONSE

Medical travelers and others staying at isolation hubs in Ottawa prior to entering Nunavut are offered smoking cessation support, including free nicotine replacement therapy (NRT). These services will be available in Winnipeg in 2021.

PARTNERSHIP-FUNDED PROJECT - TOBACCO CESSATION FOR NUNAVUMMIUT CANCER PATIENTS

2019	2020 2021	2022
Hire a dedicated staff member at Qikiqtani Ge	neral Hospital to oversee the tobacco cessation progra	ram Provide enhanced tobacco cessation
	Systematize identification of tobacco users tobacco cessation services and follow-up, a provide training to health care providers	services integrated into cancer care and spread to the other regions in

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

SILVER

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model	BRONZE
Pharmacotherapy	Offers free varenicline, bupropion and/or NRT	GOLD
Person-Centered	Engages patients in program planning	BRONZE
Culturally Competent	Offers staff cultural competency training and patient resources	SILVER
Partnership	Works with a multi-disciplinary team and community partners	SILVER
Indicator Measurement and Reporting	Developing tools and infrastructure to track program performance and collect data	PRE- IMPLEMENTATION

British Columbia

HELPING PATIENTS WITH CANCER TO QUIT SMOKING

BC CANCER SMOKING CESSATION PROGRAM

Offers smoking cessation support to ambulatory patients with cancer:

- Patients are screened for smoking status on intake forms. Nurses follow up with patients who smoke, advise them of the benefits of quitting, and refer patients to the provincial quitline, QuitNow, for cessation services.
- Free nicotine replacement therapy (NRT) is available for all residents and subsidized smoking cessation prescription medications are available to eligible residents.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, all 6 cancer centres in British Columbia offered outpatients support to quit smoking, including culturally appropriate supports for First Nations, Inuit and Métis patients with cancer.

COVID-19 RESPONSE

The smoking cessation program has continued to remain a priority during the pandemic.

PARTNERSHIP-FUNDED PROJECT - BC CANCER SMOKING CESSATION PROGRAM

2019	2020 202	21 2022
Initiate a smoking cessation program for outpatients in all six regional cancer centres	Monitor program uptake and quit/reduction rates at 30 days and 6 and 12 months	Enhance and sustain smoking cessation program, including additional training for cancer centre staff

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach and mechanisms for relapse prevention and follow-up	GOLD
Pharmacotherapy	Offers free varenicline, bupropion and/or NRT	GOLD
Person-Centered	Engages patients in program planning, gathers patient feedback, and evaluates patient outcomes	GOLD
Culturally Competent	Offers staff cultural competency training and patient resources	SILVER
Partnership	Works with multi-disciplinary team and community partners, with mechanisms for information sharing to track patient progress	GOLD
Indicator Measurement and Reporting	Collects and reports on adoption, reach, uptake and outcome data	GOLD



ALBERTA HEALTH SERVICES – CANCER CARE ALBERTA SMOKING CESSATION SERVICES

Offers smoking cessation support to ambulatory patients with cancer:

- Front-line staff at cancer centres screen patients for tobacco use, advise them to quit smoking and refer patients to community-based smoking cessation services.
 Community-based smoking cessation services include the helpline (AlbertaQuits) and smoking cessation groups (QuitCore).
- Patients enrolled in a smoking cessation program or in some provincial social support programs are eligible for financial coverage of smoking cessation medications, including nicotine replacement therapy (NRT) and prescription medications.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, all 17 cancer centres in Alberta offered outpatients support to quit smoking; however, culturally appropriate supports for First Nations, Inuit and Métis patients with cancer were not yet available.

COVID-19 RESPONSE

Cancer Care Alberta partnered with Alberta Health Services Tobacco Reduction Program to offer virtual group cessation programs (QuitCore) for patients with cancer.

PARTNERSHIP-FUNDED PROJECT - SMOKING CESSATION TO OPTIMIZE CANCER OUTCOMES PROJECT

2019	2020	2021
Improve and sustain screening, brief intervention and referral at cancer	Develop a referral process from cancer centres to co	ommunity-based smoking cessation supports
centres	Update patient education resources and provide enhanced information on how patients can access financial support for smoking cessation medications	Offer online education for health professionals to develop the awareness, knowledge and skills needed to assess and implement smoking cessation interventions for patients with cancer

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model	BRONZE
Pharmacotherapy	Offers subsidized varenicline, bupropion and/or NRT	SILVER
Person-Centered	Engages patients in program planning and gathers patient feedback	SILVER
Culturally Competent	Offers staff cultural competency training	BRONZE
Partnership	Works with a multi-disciplinary team and community partners	SILVER
Indicator Measurement and Reporting	Collects and reports on adoption and reach data	BRONZE

Saskatchewan

HELPING PATIENTS WITH CANCER TO QUIT SMOKING

SASKATCHEWAN CANCER AGENCY – SMOKING CESSATION SERVICES

Offers smoking cessation support to ambulatory patients with cancer:

- New patients with cancer are asked about tobacco use at intake, advised to quit and referred to their community pharmacist for counselling and smoking cessation medications, as well as the Smokers' Helpline (provincial quitline) or Talk Tobacco (Indigenous quitline) for virtual support. Community pharmacists provide smoking cessation services through the Pharmacy Association of Saskatchewan's Partnership to Assist in the Cessation of Tobacco program.
- Patients enrolled in provincial social support programs are eligible for financial coverage of prescription smoking cessation medications through the Saskatchewan Formulary. Patients registered with the federal Non-Insured Health Benefits (NIHB) Program are eligible to receive free smoking cessation medications.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, the two cancer centres in Saskatchewan offered outpatients support to quit smoking and, in June 2020, began referring First Nations, Inuit and Métis patients to the Talk Tobacco helpline for culturally appropriate support.

COVID-19 RESPONSE

Smoking cessation services for patients with cancer shifted from in-person to virtual counselling by community pharmacists and the Smokers' Helpline. Using short-term funding, patients with cancer received free smoking cessation medications by mail in 2020, and until March 2022, can receive free samples of nicotine replacement therapy (NRT) at the cancer centres.

PARTNERSHIP-FUNDED PROJECT – SASKATCHEWAN CANCER AGENCY'S TOBACCO CESSATION PROJECT

2019	2020 2021
Provide health care providers and community pharmacists with access to training and resources on culturally appropriate smoking cessation in cancer care	Build capacity to implement the 3A (Ask, Advise, Act) model for all new patients with cancer, with free smoking cessation medications and referrals to community pharmacists and the Smokers' Helpline

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach	SILVER
Pharmacotherapy	Offers prescription for varenicline, bupropion and/or NRT	BRONZE
Person-Centered	Engages patients in program planning	BRONZE
Culturally Competent	Competent Offers staff cultural competency training	
Partnership	Works with multi-disciplinary team and community partners, with mechanisms for information sharing to track patient progress	GOLD
Indicator Measurement and Reporting	Collects and reports on adoption, reach, uptake and outcome data	GOLD



CANCERCARE MANITOBA – QUIT SMOKING PROGRAM

Offers point-of-care smoking cessation support to ambulatory patients with cancer:

- Patients with cancer are screened for tobacco use and trained staff offer clinical counselling and free smoking cessation medications.
- The program provides ongoing counselling, educational information and resources for patients with cancer.
- Staff and family members of patients and staff can also join the program.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, all 22 cancer clinics in Manitoba offered outpatients support to quit smoking, including culturally appropriate supports for First Nations, Inuit and Métis patients with cancer.

COVID-19 RESPONSE

The Quit Smoking Program has moved many of its smoking cessation counselling appointments to telephone or virtual appointments.

GOLD

PARTNERSHIP-FUNDED PROJECT – CANCERCARE MANITOBA'S QUIT SMOKING PROGRAM—ECONOMIC ANALYSIS AND STAKEHOLDER ENGAGEMENT

2019 2020	2021
Conduct an economic analysis of the Quit Smoking Program to demonstrate value for money and support its ongoing funding	
Engage administration, clinicians and staff to promote smoking cessation support as a part of the standard of care for cancer treatment	

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with mechanisms for relapse prevention, follow-up and extension of support to family and friends	SILVER
Pharmacotherapy	Offers free varenicline, bupropion and/or nicotine replacement therapy	GOLD
Person-Centered	Engages patients in program planning, gathers patient feedback, and evaluates patient outcomes	GOLD
Culturally Competent	Offers staff cultural competency training	BRONZE
Partnership	Works with multi-disciplinary team and community partners, with mechanisms for information sharing to track patient progress	GOLD
Indicator Measurement and Reporting	Collects and reports on adoption, reach and uptake data	SILVER



ONTARIO HEALTH – SMOKING CESSATION IN REGIONAL CANCER PROGRAMS

Offers smoking cessation support to ambulatory patients with cancer:

- Outpatients at cancer centres are screened for tobacco use, advised to quit smoking and provided with a referral to on-site or community smoking cessation services, including the provincial quitline.
- Free or low-cost smoking cessation medications, including nicotine replacement therapy (NRT), are available in some cancer centres. Prescriptions for smoking cessation medications may be offered to patients and are covered under the provincial drug benefit program for many patients. Limited free NRT is available to Ontario residents through the STOP on the Net program.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

- In 2020, all 14 regional cancer centres in Ontario offered outpatients support to quit smoking.
- In 12 of the 14 regional cancer centres, culturally appropriate supports were offered to First Nations, Inuit and Métis patients with cancer, such as through Indigenous Navigators. Tobacco-Wise Leads work across the province to provide culturally appropriate supports to First Nations, Inuit, Métis and urban Indigenous people. The Talk Tobacco helpline is also available to support Indigenous people in Ontario.

COVID-19 RESPONSE

An online, interactive learning module is being developed to connect patients with cancer to virtual smoking cessation supports. New educational resources on smoking, COVID-19 and cancer, and quitting smoking before surgery were developed to meet the needs of people with cancer during the pandemic and beyond.

PARTNERSHIP-FUNDED PROJECT – IMPLEMENTING MEASURES FOR PATIENT-REPORTED OUTCOMES TO VERIFY THE EFFECTIVENESS OF SMOKING CESSATION

2019	2020	2021
Develop a system to measure and report on additional opportunities for cessation support	cancer patients' smoking cessation outcomes to demonstrate impact of the prog ort	ram and allow
Improve connections for Indigenous patient	s to access culturally safe support	
Develop and launch a smoking cessation pa		lluate the smoking sation patient-
OVERALL SMOKING CESSATION IN CA	rep	orted outcome survey prepare for provincial -out
CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach	SILVER
Pharmacotherapy	Offers subsidized varenicline, bupropion and/or NRT	SILVER
Person-Centered	Engages patients in program planning, gathers patient feedback, and evaluate patient outcomes	S GOLD
Culturally Competent	Offers staff cultural competency training and patient resources	SILVER
Partnership	Works with a multi-disciplinary team and community partners	SILVER
Indicator Measurement and Reporting	Collects and reports on adoption, reach, uptake and outcome data	GOLD



QUEBEC CANCER PROGRAM

- The Ministry of Health and Social Services' Quebec Cancer Program has identified smoking cessation for patients with cancer as one of its priorities.
- Smoking cessation support is offered to outpatients in several cancer centres in Quebec. Patients are referred to smoking cessation resources, including one-on-one and group programs, Quit Smoking Centres and the telephone quitline (J'ARRÊTE).
- Seniors, individuals receiving social assistance and individuals without private health insurance are eligible for 12 weeks of free quit smoking medications each year, including nicotine replacement therapy (NRT) or prescription medications.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, 22 of the 30 cancer centres in Quebec offered outpatients a referral to a community resource to quit smoking, with five of the centres offering a comprehensive smoking cessation program. Culturally appropriate supports for patients with cancer from Indigenous communities were available in three of the five programs.

COVID-19 RESPONSE

Dedicated staff time has been made available so that the Smoking Cessation Treatment in Cancer Care project can be implemented, even with staff redeployments due to the COVID-19 pandemic.

BRONZE*

PARTNERSHIP-FUNDED PROJECT - SMOKING CESSATION TREATMENT IN CANCER CARE

2019	2020	2021	2022 _
Smoking Cessation (OMSC, a p	5 5 1 5	for patients with cancer and their families usin wa Heart Institute), at two Integrated Universit Centre-Sud-de-l'Île-de-Montréal	5

A longer-term goal is to share the practices, tools and training from the Smoking Cessation Treatment in Cancer Care project with all cancer centres in Quebec, to have a concerted approach across all centres

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	ing Working towards implementing a 3A (Ask, Advise, Act) or 5A (Ask, Advise, Ask, Advise, Assess, Assist, Arrange) model	
Pharmacotherapy	Offers subsidized varenicline, bupropion and/or NRT	SILVER
Person-Centered	Assessing availability of patient representative to participate in program planning	PRE- IMPLEMENTATION
Culturally Competent	Working to develop cultural competency training materials for untrained staff	PRE- IMPLEMENTATION
Partnership	Works with a multi-disciplinary team and community partners	SILVER
Indicator Measurement and Reporting	Developing tools and infrastructure to track program performance and collect data	PRE- IMPLEMENTATION

*Overall evaluation based on a survey of cancer centres in March 2021.

Smoking Cessation Action Framework Implementation Checklist

Canadian Partnership Against Cancer



HORIZON HEALTH NETWORK – TOBACCO CESSATION SUPPORT IN CANCER CARE SETTINGS

Offers point-of-care tobacco cessation support for ambulatory patients with cancer:

- Patients with cancer are screened for tobacco use when their appointment is booked, a smoking cessation consult is completed in clinic during the initial visit, and follow-up support is offered post-visit.
- Project funding allows patients with cancer access to free smoking cessation medications, including nicotine replacement therapy (NRT) from the cancer clinic, or varenicline or bupropion from the patient's pharmacy.
- Patients who qualify can receive coverage for smoking cessation medications through the provincial drug program.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, the five cancer centres in the Horizon Health Network regional health authority offered outpatients support to quit smoking; however, culturally appropriate supports for First Nations, Inuit and Métis patients with cancer were not yet available. The three outpatient cancer centres in the Vitalité Health Network regional health authority had not yet implemented smoking cessation services.

COVID-19 RESPONSE

Some smoking cessation consults are being completed virtually. Home delivery of smoking cessation medications via courier has been used more frequently by patients during the pandemic.

PARTNERSHIP-FUNDED PROJECT – EXPANDING TOBACCO CESSATION SUPPORT IN OUTPATIENT CANCER CARE SETTINGS

2019	2020	2021	2022	
Develop and implement a re support for family members	ferral pathway for tobacco cessation	Demonstrate the impact of providing patients cessation medications, including NRT, at the p	•	
Expand tobacco cessation follow-up support to better meet the needs of patients with cancer				
Improve data capture and re	porting and conduct an economic evaluati	on of the program		

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach and mechanisms for relapse prevention, follow-up and extension of support to family and friends	GOLD
Pharmacotherapy	Offers free varenicline, bupropion and/or NRT	GOLD
Person-Centered	Engages patients in program planning and gathers patient feedback	SILVER
Culturally Competent	Working to develop cultural competency training materials for untrained staff	PRE- IMPLEMENTATION
Partnership	Works with multi-disciplinary team and community partners, with mechanisms for information sharing to track patient progress	GOLD
Indicator Measurement and Reporting	Collects and reports on adoption, reach, uptake and outcome data	GOLD



NOVA SCOTIA HEALTH – TOBACCO CESSATION IN CANCER CARE

Offers smoking cessation support to ambulatory patients with cancer:

- New patients with cancer are screened for commercial tobacco use at intake using a patient survey and smokers are advised by a nurse of the benefits of quitting.
- Using an opt-out approach, patients are referred to the provincial quitline (Tobacco Free Nova Scotia) or Mental Health and Addictions group smoking cessation programs. The Cape Breton Cancer Centre provides on-site smoking cessation support to patients prior to program referrals.
- Patients enrolled in Nova Scotia Health Mental Health and Addictions group smoking cessation programs can receive free or subsidized smoking cessation medications, including nicotine replacement therapy (NRT), and patients in some provincial insurance programs are eligible for financial coverage of prescription smoking cessation medications.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, eight of the ten cancer care settings in Nova Scotia (including two cancer centres) offered outpatients support to quit smoking; however, the pandemic resulted in a reduction in tobacco use screening and cessation support in some settings. Culturally appropriate supports for First Nations, Inuit and Métis patients with cancer have not yet been implemented.

COVID-19 RESPONSE

Until March 2022, short-term funding is being used to provide free NRT to patients with cancer experiencing financial need. In addition, some smoking cessation consults are being done virtually. A delay in the roll-out of the provincial patient intake survey tool has resulted in a delay in tobacco use screening in some cancer settings.

PARTNERSHIP-FUNDED PROJECT – INTEGRATING EVIDENCE-BASED TOBACCO CESSATION INTO THE NOVA SCOTIA CANCER CARE PROGRAM

2019	2020	202	2022
Develop and implement a tobacco cessation and cancer care policy, including an opt-out approach to referrals	5 1		Train cancer clinic staff in tobacco cessation and cultural competency

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

SILVER

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach	
Pharmacotherapy	Offers subsidized varenicline, bupropion and/or NRT	SILVER
Person-Centered	Engages patients in program planning	BRONZE
Culturally Competent	Working to develop cultural competency training materials for untrained staff	PRE- IMPLEMENTATION
Partnership	Works with a multi-disciplinary team and community partners	SILVER
Indicator Measurement and Reporting	Collects and reports on adoption and reach data	BRONZE



PEI CANCER TREATMENT CENTRE – TOBACCO CESSATION AND RELAPSE PREVENTION PROGRAM

Offers point-of-care smoking cessation support for ambulatory patients with cancer:

- All new patients with cancer are asked about their tobacco use status at intake and a tobacco cessation consultation is integrated into a tobacco user's initial appointment at the cancer centre. Front-line staff routinely discuss tobacco use with patients with cancer, advise them to quit smoking and offer a referral for further support.
- A multi-disciplinary team of on-site tobacco cessation educators provides patients with cancer with behavioural counselling, recommendations for smoking cessation medications, follow-up support and referrals to community smoking cessation resources, including the provincial quitline, Smokers' Helpline. Caregivers that smoke can also receive on-site counselling and a referral to the PEI Tobacco Cessation Program.

 All residents enrolled in the PEI Tobacco Cessation Program are eligible for free nicotine replacement therapy (NRT) or prescription smoking cessation medications. With short-term funding, PEI Cancer Treatment Centre is piloting the provision of free NRT for patients with cancer at the point of care.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 In 2020, the two cancer centres on Prince Edward Island offered outpatients support to quit smoking, including culturally appropriate supports for First Nations, Inuit and Métis patients with cancer.

COVID-19 RESPONSE

Cancer centres are offering tobacco cessation support by phone, and referrals are being made to community services, such as the PEI Tobacco Cessation Program and Smokers' Helpline.

PARTNERSHIP-FUNDED PROJECT – ENHANCING SMOKING CESSATION SERVICES TO SUPPORT OPTIMAL OUTCOMES FOR CANCER PATIENTS

2019	202	20 2021	2022
Implement an opt-out approach to toba cessation services for patients with can		Develop and implement on-site tobacco cessation counselling and NRT at patients' existing appointments and throughout treatment, and support caregivers with counselling and referrals	Establish a business plan
		Train tobacco cessation counsellors and update educational materials for providers and patients	for program sustainability

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL:

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach	SILVER
Pharmacotherapy	Offers free varenicline, bupropion and/or NRT	GOLD
Person-Centered	Engages patients in program planning and gathers patient feedback	SILVER
Culturally Competent	Offers staff cultural competency training	BRONZE
Partnership	Works with multi-disciplinary team and community partners, with mechanisms for information sharing to track patient progress	GOLD
Indicator Measurement and Reporting	Collects and reports on adoption, reach and uptake data	SILVER



PROVINCIAL CANCER CARE PROGRAM, EASTERN HEALTH – SMOKING CESSATION PROGRAM

Offers point-of-care smoking cessation support to ambulatory patients with cancer:

- Pharmacists, Nurse Practitioners and General Practitioners in Oncology provide clinical smoking cessation counselling and free smoking cessation medications, at the cancer centre or by telephone and mail.
- The program also provides follow-up support and offers referrals to the provincial quitline, Smokers' Helpline.

CANCER PATIENTS' ACCESS TO SMOKING CESSATION SUPPORT

 Smoking cessation support, including culturally appropriate support for First Nations, Inuit and Métis patients, is available to all ambulatory patients with cancer.

COVID-19 RESPONSE

Smoking cessation services have shifted from in-person to telephone counselling and from point-of-care to mail-out smoking cessation medications.

PARTNERSHIP-FUNDED PROJECT – ENHANCEMENT OF SMOKING CESSATION SERVICES IN AMBULATORY ONCOLOGY IN NEWFOUNDLAND AND LABRADOR

2018 :	2019	2020	2021
Integrate smoking cessation as a standard of contract of contract of contract of the standard of contract of the standard of t	•	Expand smoking cessation access to all four regional c and peripheral sites	ancer centres
		Enhance the delivery of smoking cessation services to patients with cancer	Indigenous

OVERALL SMOKING CESSATION IN CANCER CARE IMPLEMENTATION LEVEL: K GOLD

CATEGORY	IMPLEMENTATION CRITERIA MET	LEVEL
Behavioural Counselling	Offers 3A (Ask, Advise, Act) or 5A (Ask, Advise, Assess, Assist, Arrange) model with an opt-out approach	SILVER
Pharmacotherapy	Offers free varenicline, bupropion and/or nicotine replacement therapy	GOLD
Person-Centered	Engages patients in program planning, gathers patient feedback, and evaluates patient outcomes	GOLD
Culturally Competent	Offers staff cultural competency training and patient resources	SILVER
Partnership	Works with a multi-disciplinary team and community partners	SILVER
Indicator Measurement and Reporting	Collects and reports on adoption, reach and uptake data	SILVER

References

- National Center for Chronic Disease Prevention and Health Promotion (US). The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta (GA): Department of Health and Human Services; 2014 Jan. 943 p.
- 2 Iragorri N, Essue B, Timmings C, Keen D, Bryant H, Warren GW. <u>The cost of failed first-line cancer treatment related to</u> <u>continued smoking in Canada</u>. Current Oncology. 2020;27(6).
- Canadian Partnership Against Cancer. (2019). Canadian Strategy for Cancer Control 2019-2019. Toronto, ON.
 Retrieved from: <u>https://www.partnershipagainstcancer.ca/</u> <u>cancer-strategy/</u>
- 4 Government of Canada. (2019). Canada's Tobacco Strategy. Ottawa, ON. <u>https://www.canada.ca/en/health-canada/</u> <u>services/publications/healthy-living/canada-tobacco-</u> <u>strategy.html</u>



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partnershipagainstcancer.ca/smoking-cessation-cancer-care

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