

Opening Title: The Clinical Specialist Radiation Therapist (CSRT): an innovative model of care. Effective, Efficient, Evidence-based

Michael Sherar, PHD President & CEO, Cancer Care Ontario: One of our burning platforms for our work in improving health systems in Ontario is the rising incidence of cancer in the province and this is largely driven by a growing and aging population.

Dr. Pdraig Warde, Interim VP, Clinical Programs & Quality Initiatives; Provincial Head, Radiation Treatment Cancer Care Ontario: The incidence of cancer is rising at the rate of 2.7 to 3% per year. So over the next 10 years alone we will have virtually a 30% increase in the number of patients requiring radiation treatment.

Michael Sherar: If the needs just continue to go up and we do nothing we know that providers will burn out.

Nicole Harnett, Project Lead, CSRT Projects: Around the turn of the century and into 2001 there was a grass roots organization of radiation therapists who had taken upon themselves to investigate advanced practice in radiation therapy. We approached the Ministry of Health with a proposal asking if they would fund us to conduct a feasibility study for whether advanced practice in radiation therapy could prove to be a non-traditional and creative solution to some of the problems that we had been cyclically experiencing here in Ontario.

Dr. Pdraig Warde: We need to have a different model of how we deliver care. And one of the aspects of that is the Clinical Specialist Radiation Therapist which can add another layer in between the radiation therapist and the radiation oncologist.

Jeff Goodyear, Director, Ministry of Health and Long-term Care: The Clinical Specialist Radiation Therapist is one the new roles that was put forward as part of the Health Force Ontario, which is Ontario's strategy to ensure that the population has access to the kind of care it needs, the type of people it needs, the place it needs and when they need it.

Nicole Harnett: The CSRT brings advanced knowledge skills and judgement to the existing inter-professional radiation medicine team. And although CSRT positions differ from centre to centre all focus on increasing capacity within the system, improving the quality of care delivered to patients and in accelerating innovation in their area of specialization.

Krista McGrath, CSRT – Palliative Care, Carlo Fidani Peel Regional Cancer Centre: By taking some of the responsibilities away from the doctors and even working in collaboration with them it smoothed out some of the wrinkles in the process that were there before.

Dr. Pdraig Warde: I think this is quite analogous to what has happened in nursing in the development of advanced practice role, which has really improved the quality of care in nursing and I expect the same to happen in radiation therapy.

Dr. Woody Wells, Radiation Oncologists, Stronach Regional Cancer Centre: In the last few months when we had our advanced practice therapists it's been quite a revolution.

Marcia Smoke, Manager-Radiation Therapy, Juravinski Cancer Centre & Walker Family Cancer Centre: There are very many benefits to the program and as a department manager it's very exciting to see some of these new projects come.

Julie Blain, CSRT- Palliative Care & Bone and Brain Sites, Juravinski Cancer Centre: I would say my biggest success has been implementing change and consistency within the department. I have a very good working relationship with therapists, with radiation oncologists so I was able to easily demonstrate what could be done and what positive results could happen.

Grace Lee, CSRT-Breast Site, Princess Margaret Cancer Centre: I'm contributing as a CSRT to delineate some of the targets for radiotherapy and also to help streamline the process.

Nicole Harnett: Of paramount importance to the Ministry of Health across all of the CSRT projects was trying to ascertain if advanced practice in radiation therapy could decrease wait times for the patients in Ontario.

Dr. Pdraig Warde: The radiation oncologist can see an increased number of patients by focusing on the task that only a radiation oncologist can do and these other tasks can be taken on by a clinical specialist radiation therapist. All of our data shows that patients are happier when these tasks are done because they are done in a more standardized fashion which helps the patients get through their treatment more quickly.

Marcia Smoke: When you think about it what's the most important thing? It's to have the care that the patient needs immediately. So having advanced practice therapists being able to educate patients, talk to patients, talk about their toxicities at the time when they need it has been really helpful to the patients.

Dr. Woody Wells: Healthcare as we know it will transform changes in healthcare funding in the very foreseeable future and so this is leverage for achieving that change.

Dr. Rob Dinniwell, Radiation Oncologists, Princess Margaret Cancer Centre: I could see this position growing quite significantly, either improving the current provision of care or just basically growing our ability to provide more care with fewer resources.

Amanda Bolderston, President, Canadian Association of Medical Radiation Technologists: We are actually using the original competency profile developed by the CSRT project. We have rolled that out nationally and we have validated it. So it is quite exciting to think that we are using that as a national framework and hopefully in a few years different provinces and different jurisdictions will be using that to develop their own CSRT roles.

Dr. Woody Wells: We should do a lot more of this and rely on the folks trained in radiation medicine, who get it, and rely a lot less on other allied professionals.

Michael Sherar: If we work in new and innovative ways together in collaborative teams in delivering care we will not only be better able to meet the future needs of patients as a whole but individual patient care will improve.

Dr. Padraig Warde: Because we are all focused on delivering quality care to patients.

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