



Provincial Health Services Authority

Delivering radiotherapy in a rural environment

Marco Carlone

Outline

- Radiotherapy in British Columbia's interior region
- Our service delivery model
- A possible way forward



CANADA

Where we operate



Abbotsford



Kelowna



Prince George



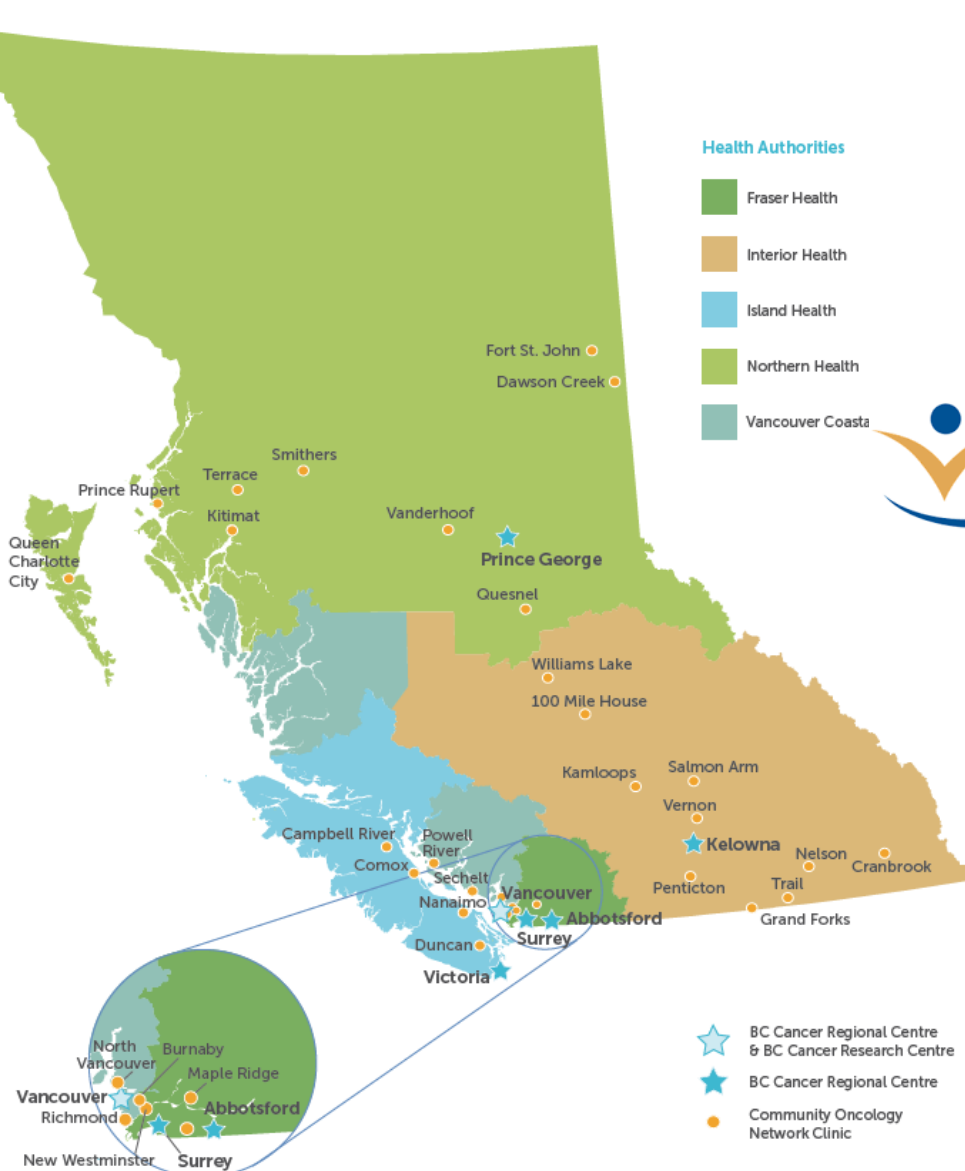
Surrey



Vancouver



Victoria



Health Authorities

- Fraser Health
- Interior Health
- Island Health
- Northern Health
- Vancouver Coastal



Provincial Health Services Authority
Province-wide solutions.
Better health.



Interior Health
Every person matters

- BC Cancer Regional Centre & BC Cancer Research Centre
- BC Cancer Regional Centre
- Community Oncology Network Clinic

BC
CAN



Interior Health
Every person matters

Physicians

Partners

Careers



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Careers

About Us

POTENTIAL
TO FUEL

POTENTIAL
TO DISCOVER

POTENTIAL
TO BRING US
TOGETHER

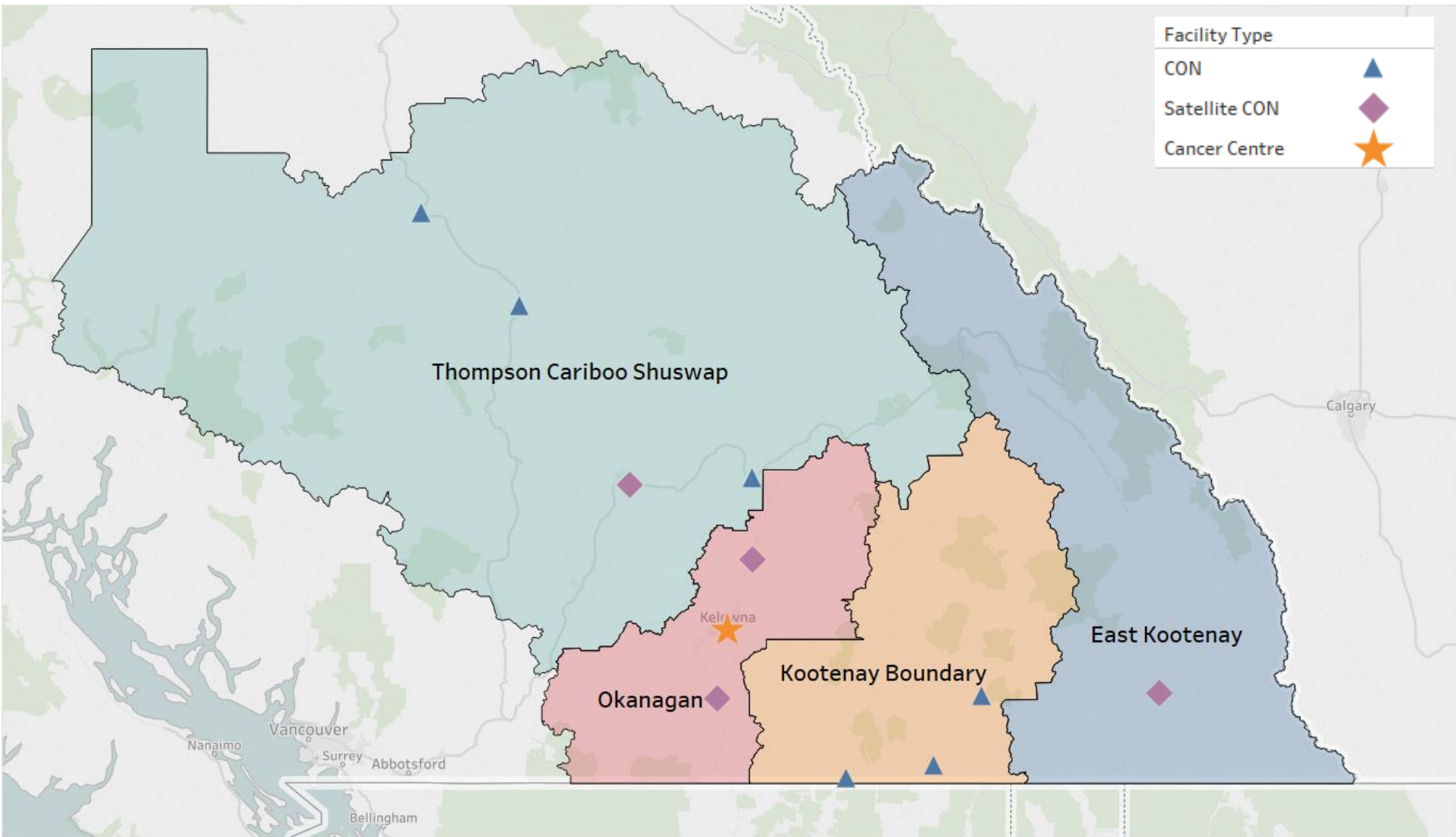
DIETITIANS
HELP YOU
UNLOCK
THE POTENTIAL
OF FOOD

FIND
HEALTH
CARE

JOIN OUR
TEAM

CAN

Cancer Care in the Interior

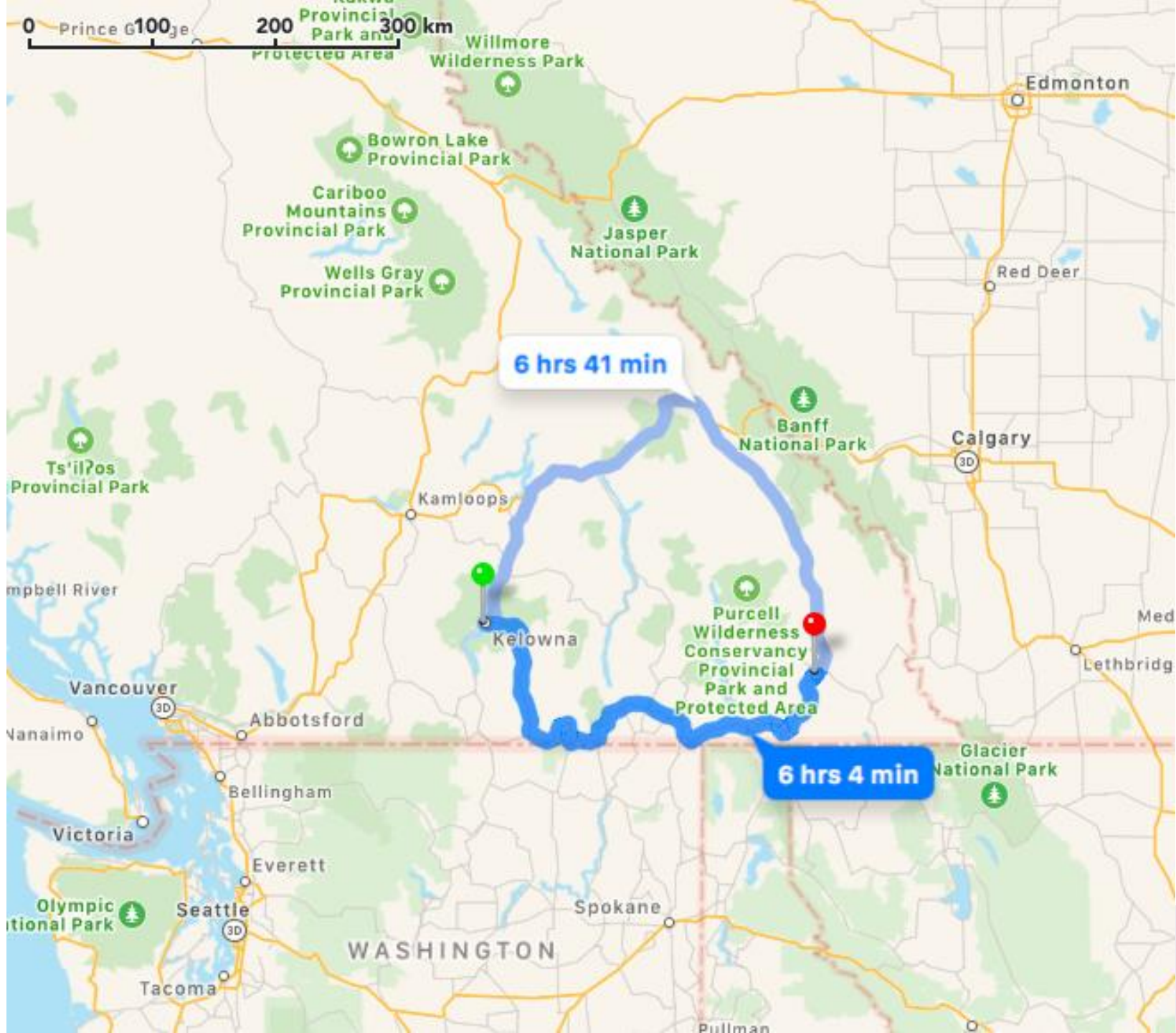


The BC Cancer Plan acknowledges the need to build capacity to meet the population's needs in the future

BC's Southern Interior

- Population ~ 900,000
- Only two cities with population > 100,000
- About 2/3 population lives in rural areas
- Area > England

BC
CAN



The Cancer Business: BC Cancer and Regional Health Authorities

BC Cancer

Radiation Services
PET Scanning
Chemotherapy Delivery
Diagnostics and Imaging
Supportive Care
Screening
Palliative Care
Prevention

Regional Health Authorities

Acute Care
Cancer Surgery
Chemotherapy Delivery
Diagnostics and Imaging
Supportive Care
Screening
Palliative Care
Prevention



Radiation services in BC Interior

1. Delivered only in Kelowna
2. Kelowna Cancer centre cannot easily be expanded
3. Our provincial cancer plan requires us to provide more patient centered services (= provide access to radiotherapy closer to patient homes)
4. We know that use of radiotherapy increases with access to radiotherapy

What are our requirements for providing rural radiotherapy?

1. Has to fit within our system
 - a) We have to have some medical facility that already exists
 - b) Must work within our existing partnerships
2. Has to have a sustainable staffing model
3. Must not be cost prohibitive
4. Should be something that we can replicate at several centres.

Most important features of Halcyon

1. Self Shielded
 2. Not a C-arm linac
 3. Modular design
 4. Simpler installation/commissioning
 5. Simpler QA measurements?
 6. Has almost all radiotherapy features we need
- } Facility Requirements are simplified
- } Maintenance is simplified


Operating model

1. Will do treatment planning at the main facility in Kelowna
2. May or may not do CT simulation in Kelowna
3. Shared responsibility with the Regional Health Partner
 - i.e. Regional Health Authority owns the facility, BC Cancer owns the RT equipment
4. Physicians will travel to the remote centre to run clinics (already do this)

Staffing model

Main Cancer centre in Kelowna:

- 16 RadOncs
- 10 Medical Physicist
- 55 RTTs
- 10 Nurses
- 3 Engineers
- 2 Physics Assistants
- 1 Tool & Die



Too many professions to cover illness, holidays, etc.

Staffing model

Remote Cancer centre staff model?

- 16 RadOncs

- ~~• 10 Medical Physicist~~

- ~~• 55 RTTs~~

- 10 Nurses

- ~~• 3 Engineers~~

- ~~• 2 Physics Assistants~~

- ~~• 1 Tool & Die~~

Combine RTT + Physics Assistant + Engineer

The combined staffing model is how BC's Mammography system works

BC Cancer Screening

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To book a mammogram call 1-800-663-9203 or send us an [email](#) and a booking clerk will call you back. Appointments can be made at locations across the province. Visit the [clinic locator](#) to find a location or mobile service visit near you.

BC
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Mobile Mammography Service

First piloted by BC Cancer Breast Screening in 1990, the mobile mammography service visits more than 170 rural communities across BC, including more than 40 First Nations communities annually.

