



# Waterloo Wellington Regional Cancer Program

Ontario Health (Cancer Care Ontario)



## Waterloo Wellington Regional Cancer Program (WWRCP)

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### 2024-2028 Strategic Plan



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# Improving Cancer Care For Everyone

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**Sara Kaune**  
Director, Cancer Program and Regional Director,  
Waterloo Wellington Regional Cancer Program (WWRCP)

I'm pleased to share the 2024–2028 Waterloo Wellington Regional Cancer Plan (RCP). As a regional cancer program, we're proud to support the increasing demand for cancer services across the communities we serve. We are entering the next 4 years with the launch of the autologous stem cell transplant program and will continue expanding the complex malignant hematology program, including the development of a 7-day-per-week outpatient medical day unit.

We will also continue working closely with Ontario Health – Cancer Care Ontario (OH-CCO) and the local Ontario Health Teams (OHTs) to enhance cancer screening efforts. A key milestone will be the introduction of the region's first Ontario Lung Screening Program and the launch of Human Papillomavirus (HPV) screening for the Ontario Cervical Screening Program. Advancing equity in cancer care remains a priority, with initiatives such as the development of an Indigenous Cancer Care Team and a dedicated program for adolescents and young adults.

The next four years, 2024 to 2028, will be eventful. I am thrilled that Audrey Hill (Regional Indigenous Cancer Coordinator) and Melanie Turner (Indigenous Cancer Navigator) have joined our team. It's time for tangible change and reconciliation. As someone who treats lung cancer, I'm excited that we are starting Lung Cancer Screening next year (2026) at the Queen's Blvd. site. I love being able to tell a patient that their chance of cure for stage 1 lung cancer is greater than 90% with just 4 non-invasive radiation treatments.

Next on the list, we're expanding our Stem Cell Transplantation program in 2026 to include Apheresis (the collection of stem cells), so basically, we will be doing the entire stem cell transplant. And we're getting a Positron Emission Tomography (PET) scanner! Finally, patients will be able to get their PET scans in the nuclear medicine department at Midtown.

I love this team. I love the 'we-can-do-this-here' spirit. I love working alongside such smart, talented, dedicated, hard-working team members each day. I will continue to lead by listening and I very much look forward to what we will accomplish together in these next 4 years and beyond.

**Dr. Joda Kuk**  
Medical Director, Oncology  
Waterloo Regional Health  
Network (WRHN)







**Sophia Esmail and Amanda Nova**  
Co-Chairs, Oncology Patient and Family Partner Council (PFPC)  
Waterloo Regional Health Network (WRHN)

The Waterloo Regional Health Network (WRHN) Oncology Patient and Family Partner Council (PFPC) is pleased to see that improving patient, care partner, and provider experience is a central goal of the 2024–2028 Regional Cancer Plan. We are encouraged to see equity prioritized through efforts to address financial barriers, and a strong commitment to supporting all patients, especially those who have been historically underserved. These steps represent not only recognition, but also meaningful action toward a more inclusive, accessible, and compassionate healthcare system.

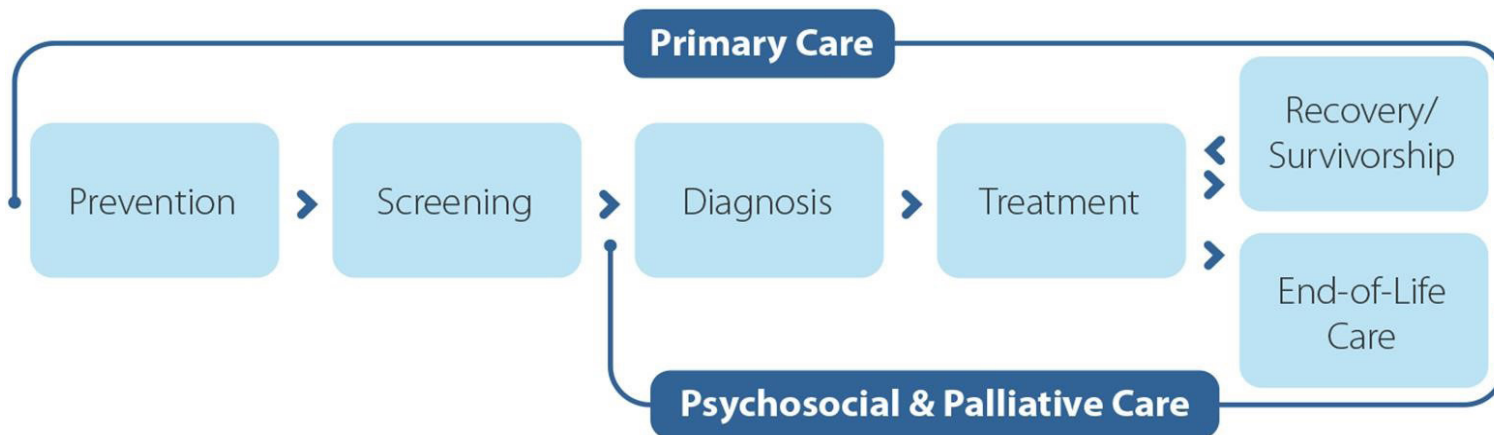


# Cancer Care In The Province

The new Ontario Cancer Plan (OCP) 6 builds on progress made in past cancer plans. It aims to lower the risk of cancer and to connect services inside and outside of the cancer centre. This will make it easier for Ontarians to receive cancer care, especially as they enter or exit the cancer system. The plan outlines how we will work together to improve cancer care in the province to help ensure that Ontarians get the care they need, when they need it. The WWRCP works closely with local hospitals, healthcare services, and community groups to make sure you get fair, timely, high-quality care.

The WWRCP supports cancer care in the region. The Program provides leadership with all parts of cancer care such as:

- Preventing cancer
- Testing for cancer
- Treating cancer
- Survivorship (life after cancer)



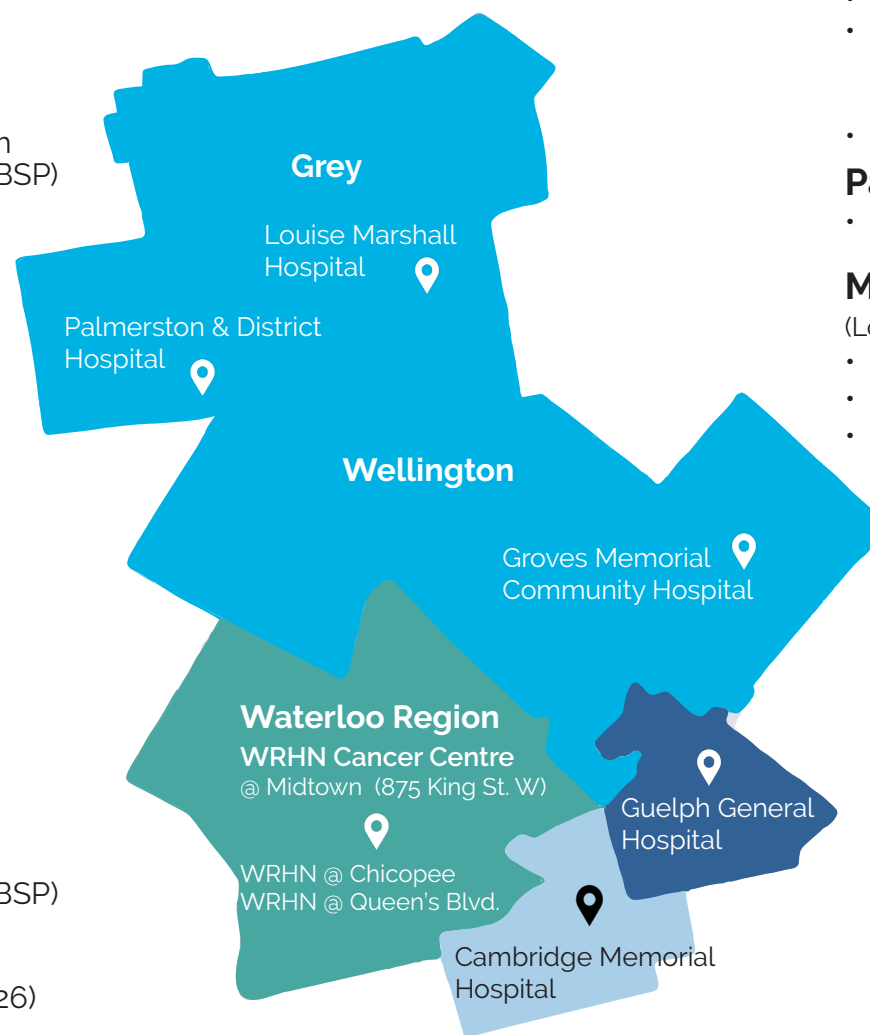
# Cancer Care In Our Region

## Kitchener-Waterloo

- Complex Malignant Hematology
- Cancer Surgery
- Clinical Trials
- Diagnostic Imaging
- Endoscopy
- Genetic Counselling
- Interventional Radiology
- Lung Diagnostic Assessment Program
- Ontario Breast Screening Program (OBSP)
  - Breast Screening
  - Breast Assessment Program
  - High Risk OBSP
- Ontario Lung Screening Program (launching 2026)
- Palliative/Hospice Care
- Pathology
- Radiation Therapy
- Specialized Psychosocial Oncology Services
- Systemic Therapy
- Waterloo Wellington Coordinated Colonoscopy Access Program
- Waterloo Wellington High-Grade Colposcopy Central Referral Program

## Guelph

- Cancer Surgery
- Diagnostic Imaging
- Endoscopy
- Ontario Breast Screening Program (OBSP)
  - Breast Screening
  - Breast Assessment
  - High Risk OBSP (launching Fall 2026)
- Palliative/Hospice care
- Pathology
- Systemic Therapy



## Fergus

(Groves Memorial Community)

- Cancer Surgery
- Endoscopy
- Ontario Breast Screening Program (OBSP)
  - Breast Screening
- Systemic Therapy

## Palmerston

- Endoscopy

## Mount Forest

(Louise Marshall)

- Cancer Surgery
- Endoscopy
- Systemic Therapy

## Cambridge

- Cancer Surgery
- Clinical Trials
- Diagnostic Imaging
- Endoscopy
- Ontario Breast Screening Program (OBSP)
  - Breast Screening
  - Breast Assessment Program
- Palliative/Hospice Care
- Pathology
- Radiation Therapy Consultations
- Specialized Psychosocial Oncology Services
- Systemic Therapy



# Regional Statistics



## 2024 Patient Volumes in Waterloo Wellington

**4,147**  
New Patients To  
Cancer Centre

**13,450**  
Total Patients  
(New and Current)

**167,620**  
Total Appointments



## Cancer Incidence

Cancer Incidence is how common cancer is in a population. Nearly 1 out of every 2 people (43.7%) are expected to develop cancer in their lifetime, with a slightly higher likelihood for males (45.1%) than females (42.6%).

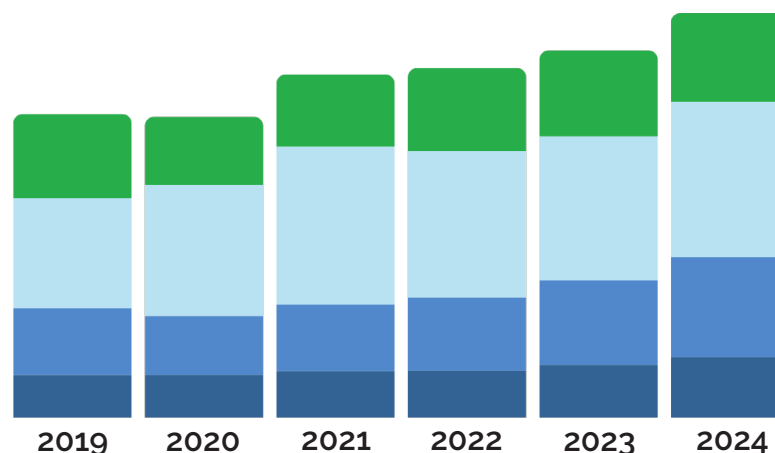
## WRHN Total Clinic Visits



\*Systemic Therapy includes:

- Chemotherapy
- Hormone therapy
- Immune therapy
- Targeted therapy
- Supportive care treatment

● Systemic Therapy   ● Bloodwork & Lab Visits   ● Outpatient Clinic  
● Radiation Therapy



**49,923**  
Males

**47,270**  
Females

**97,193**

New Ontario cancer cases  
expected in 2024

The average growth rate of WRHN total clinic visits between 2019 to 2024 is 6%



# Patient Story

## Care Close To Home

A first-of-its-kind partnership between Waterloo Regional Health Network (WRHN) Cancer Centre (formerly known as Grand River Regional Cancer Centre) in Kitchener and Juravinski Hospital and Cancer Centre (JHCC) in Hamilton is bringing an innovative and collaborative approach to connect patients to the care they need, when they need it, close to home.

## WRHN Cancer Centre Performs First Local Stem Cell Transplants

On July 4, 2024, the Transplantation and Cellular Therapy Program at WRHN Cancer Centre completed their 1st stem cell transplant. This was a major step in bringing advanced care closer to home.

Stem cells are special cells found in bone marrow (the inside part of your bones). They grow into red blood cells, white blood cells, and platelets. When high-dose chemotherapy damages bone marrow, stem cell transplants help restore it, aiding recovery and treating specific cancers. A stem cell transplant gives the body new, healthy stem cells and puts them back into the bone marrow.

Joey Lovecchio is the 1st person to get a stem cell transplant at WRHN Cancer Centre. He had an autologous stem cell transplant (taking stem cells out before treatment and inserting them back after treatment). The 1st part of Joey's care was at JHCC, in Hamilton. This is where doctors collected, filtered, and froze Joey's stem cells for future use. WRHN provided his pre-transplant treatment and once ready, he received his cells at WRHN. With this plan, it significantly reduced the need for him to travel to Hamilton for care. This milestone marked the launch of WRHN's transplant program, made possible by support from the WRHN Foundation, Lyle S. Hallman Foundation, and JHCC.

After over 2 years of planning, the first successful procedure confirmed the program's promise and reinforced WRHN's commitment to patient-centred care. Just months later, Paule Charland, who works as a medical physicist at WRHN, found herself on the other side of the care team. Paule was diagnosed with stage 4 mantle cell lymphoma in September 2024. Her stem cells were first collected at Juravinski Hospital and Cancer Centre (JHCC). Afterwards, she received high-dose chemotherapy and a stem cell transplant, both performed locally at the WRHN Cancer Centre. The collaboration between the hospitals ensured a smooth and integrated process from stem cell collection to the transplant procedure.

Although recovery was tough, Paule was deeply moved. "What brought me to tears was seeing the compassion, care, and teamwork during one of the most vulnerable times in my life," she said. Now in maintenance therapy, Paule reflects with gratitude and hope, knowing that if her cancer returns, it can be treated again, right where she needs it.

"Months into my treatment for multiple myeloma, I heard the news that WRHN could do the transplant locally and the timing would work for me to be their very first stem cell patient," Joey shares. "When the big day came for my transplant, there were a lot of positive emotions in that room. Excitement, positivity, confidence, and absolute trust."

Joey Lovecchio,  
First Stem Cell Transplant Patient @ WRHN



# Building On Our Accomplishments



Linear Accelerator (Linac)



Magnetic Resonance Imaging (MRI)



PET (Positron Emission Tomography) scanner

Our direction for 2024-2028 is built on a foundation of accomplishments from our previous plan. In the last 5 years, we made significant advancements towards our goals of delivering patient-centred care to:

- Make life better for patients
- Keep patients safer
- Shorten wait times
- Make it easier for everyone to access care
- Help cancer services run smoothly
- Offer cancer care that is effective and based on research

Building on these accomplishments, we took meaningful steps to plan and advocate for capital and infrastructure expansion to meet the growing demand for cancer care services in Waterloo Wellington. A comprehensive proposal was submitted to expand radiation therapy treatment capacity through the addition of a sixth linear accelerator (Linac), which will greatly help deliver timely and effective radiation treatment.

Furthermore, the Ministry has approved the acquisition of a PET scanner, a first for Waterloo Wellington, to support care close to home so that patients will no longer have to travel to Mississauga, Hamilton or London for this important cancer diagnostic test. In addition, investments in diagnostic imaging resources have been secured, resulting in 3 new MRI machines in Kitchener-Waterloo and additional CT scanning capacity.

With these infrastructure enhancements, measurable improvements have been achieved in reducing wait times for these key imaging modalities. The result of tripling MRI capacity and increasing CT capacity allows the W/WRCP to outperform OH-CCO targets, ensuring patients receive high-quality care when they need it most. By the end of 2024, the W/WRCP performed the best in Ontario for CT guided biopsy wait times on OH-CCO's scorecard. These strategic investments are critical to ensure equitable access to high quality cancer diagnostic tests for the patients in Waterloo Wellington.

# Integrated Care Through Strong Partnerships

The WWRCP works with Ontario Health Teams (OHTs) in the region to connect and make it easier for patients to get cancer care.

- Cambridge North Dumfries OHT
- Guelph Wellington OHT
- Kitchener Waterloo, Wellesley, Wilmot, and Woolwich OHT

This partnership helps align cancer services with the broader healthcare needs of the communities we serve. We support the OHTs' efforts to improve quality care and strengthen primary care planning, ensuring our work fits with their goals.

Looking ahead, cancer screening will be changing. New technology is going to make cancer screening more personalized, precise, and reliable. Some new changes to our programs include:

- The Ontario Cervical Screening Program using new lab tests to make screening more accurate.
- The Ontario Breast Screening Program growing to be able to assess more of our population.
- We are starting a new Lung Screening Program to help find lung cancer earlier in people at high risk.
- The ColonCancerCheck program using new digital solutions to reach more people.

Additionally, Primary Care Networks (PCN) within an OHT bring local primary care providers together to better support the community. They also hope to improve the patient experience in our health system. The WWRCP, PCN and OHT team up to create ways to have more people screened for cancer. The proposals also focus on helping:

- People without a family doctor or nurse practitioner
- People living in priority neighborhoods
- Underserved populations

The efforts of linking these groups makes the healthcare system easier to use. When it's easy to use, more people can access services and maintain their health.





# Compassionate Care Through Innovation

Applied research and clinical trials bridge scientific discovery and patient care in oncology. At WRHN, this work translates into better ways to prevent, diagnose, and treat cancer. Clinical trials test new therapies such as drugs, immunotherapies, and radiation techniques to evaluate their safety and effectiveness. WRHN's Research & Clinical Trials Team oversees more than 30 active cancer studies, supporting patient participation, data collection, and ethical compliance.

Participation in clinical trials not only provides access to promising treatments but also benefits through:

- Giving patient's access to new, promising cancer treatments
- Helping healthcare providers better understand the best ways to treat cancer
- Making care better so that patients have better results
- Training healthcare teams in new types of therapies
- Helping teams to follow what research shows works best (evidence-based practice)

**30**

Active Trials

**25+**

Physician Investigators

**1200+**

Patients participated in cancer clinical trials since 2003

One powerful example is Rachel Bartholomew. She was diagnosed with cervical cancer at age 28 and treated at WRHN Cancer Centre. Inspired by her experience and by other women facing chronic pelvic pain after radiation, she founded Hyivy Health. In 2025, her company launched its first clinical trial at the same cancer centre where she was given care.

Hyivy's innovation, Floora™, is a smart pelvic health rehab system designed to address radiation-induced vaginal stenosis. Unlike traditional hard plastic dilators, Floora™ uses soft air chambers, gentle heating, and biosensors to provide comfortable, data-driven rehabilitation. Through its app and clinician dashboard, patients can monitor their progress and take charge of their recovery.

*"Clinical trials are a core part of the care we offer," says Carla. "Since 2003, our oncologists, physicists, and research team have led innovative cancer trials. It's a team effort from patients to physicians, coordinators, pharmacy, laboratory, and imaging team. I'm proud to support ethical, meaningful research in the communities we serve."*

**Carla Girolametto,**

Director of Research Operations, WRHN

## Disease sites:

Breast, Colon, Prostate, Heatology, Lung, Renal, Skin

## Multi-method trials:

Chemotherapy, Radiation, Exercise, Endocrine Therapy, Trial Registries, Patient Experience



**Hyivy Health**

Your resource for innovative care,  
community, and confidence for your pelvic floor





# Developing Our Strategy

The Waterloo Wellington Regional Cancer Plan (RCP) 2024–2028 is shaped by a collaborative and inclusive engagement process involving patients, caregivers, the Patient & Family Advisory Council, and healthcare partners across the region. Insights gathered through the Stakeholder Engagement process reflect the voices of clinical, operational, community-based, and academic contributors, offering a comprehensive understanding of the region's cancer care needs.

This diverse input has informed the development of a strategy focused on advancing equity, access, and quality across the cancer system. Stakeholders' feedback identified key opportunities to strengthen partnerships, address gaps in care, and align with system-wide changes, including Ontario Health Team integration. In response to this input, the RCP 2024–2028 will focus on:

- Offering culturally safe cancer care
- Joining efforts with other healthcare partners/organizations
- Using data to guide the planning of our cancer services
- Trying new, cutting-edge treatments and care ideas

We hope that these goals will complement each other to meet the demands of our region so that we can offer the best care possible.

The plan addresses the full continuum of cancer care from prevention and early detection to treatment, survivorship, and palliative care, ensuring that patients receive seamless, high-quality support throughout their journey. In the coming years, through continued engagement with our communities and care teams, we will work together to improve outcomes and quality of life for all individuals affected by cancer in the Waterloo Wellington region.



**250+**

Stakeholders  
Consulted

**13**

Focus Groups  
Sessions

**20+**

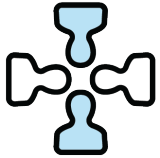
Survey  
Engagements  
Groups Sessions

**90+**

People Engaged at  
Strategy Planning  
Day

# Our Goals for 2024-2028

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**Goal One: Advance Equity in the Cancer System**



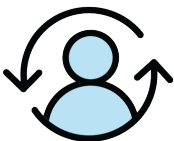
**Goal Two: Improve Patient, Care Partner, and Provider Experience**



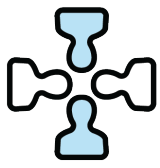
**Goal Three: Achieve Seamless and Effective Integration of Cancer Services**



**Goal Four: Improve Cancer Outcomes and Quality of Life for Ontarians**



**Goal Five: Ensure Sustainable Cancer System Infrastructure and workforce**



# Goal One: Advance Equity in the Cancer System

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## Strategic Objectives:

1. Onboard an Indigenous Cancer Navigator and Indigenous Cancer Coordinator to advance Indigenous cancer care in alignment with the 2024-2028 Waterloo Wellington Regional Indigenous Cancer Plan.
2. Develop adolescent and young adult (AYA) resources and services in collaboration with the Princess Margaret Cancer Care Network.
3. Roll out sociodemographic data collection, following Indigenous Data Governance Matters principles and local hospital initiatives.
4. Work with local Indigenous and Black communities to understand the barriers to accessing care and co-design programs to address barriers.
5. Ensure patients without a primary care provider have access to essential cancer services and work with OHTs partners to support increased attachment to primary care.
6. Provide staff education on equity, inclusion, diversity, and trauma-informed care and incorporate principles into patient education materials and policies and procedures.
7. Take steps to identify financial barriers to accessing cancer care and provide supports to help address barriers.
8. Deliver high-quality cancer care close to home with enhanced access to clinical trials.
9. Ensure evidence based best practices are used in the development of patient education materials and reduce barriers for patients to access education to meet their learning needs.



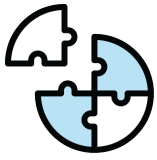
# Goal Two: Improve Patient, Care Partner, and Provider Experience

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## Strategic Objectives:

1. Develop survivorship programs for seamless transition from cancer centre based care to the primary care setting.
2. Perform a review of palliative care services in collaboration with OHTs using the following to provide guidance for potential improvements:
  - a. Ontario Palliative Care Competency Framework
  - b. 2024 SMGH/GRH Palliative Services Recommendation Report
  - c. Ontario Palliative Care Network: Recommendations for Model of Care
3. Continue to advance and improve uptake of patient reported outcome measures to enhance patient-centered symptom management.
4. Partner with OHTs to improve navigation for patients in cancer screening, diagnostic, and treatment pathways.
5. Implement an Oncology 7 Day per Week Medical Day Unit to support earlier discharge from inpatient care.
6. Improve access to virtual care to optimize capacity in outpatient clinics and provide patients with more options for outpatient visits.
7. Enhance access to comprehensive supportive care services such as OH@Home, CareChart@Home, Health 811 including urgent Waterloo Regional Health Network (WRHN) Cancer Centre ambulatory services such as Patient Access Clinic for those Experiencing Symptoms (PACES).
8. Partner with WRHN and CareNext to leverage emerging technologies such as development of a digital application to track the cancer journey and the adoption of artificial intelligence to enhance clinical decision support tools and care coordination.





# Goal Three: Achieve Seamless and Effective Integration of Cancer Services

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## Strategic Objectives:

1. Expand cancer screening and diagnostic programs including implementing regional central referral for the following programs:
  - a. Waterloo Wellington Coordinated Colonoscopy Access Program (WWCCAP)
  - b. Central Colposcopy Referral through the SCOPE program
  - c. High Risk OBSP Screening Program
  - d. Ontario Lung Screening Program (launching in 2026)
  - e. Lung Diagnostic Assessment Program
  - f. WeCare2Image for MRI and CT
2. Support the expansion of systemic therapy treatment including oral treatments and pharmacy partnerships to ensure safe delivery of care.
3. Support care close to home with implementation of the transfer of care models to the regional systemic treatment partner sites and the regional implementation of Oracle Power Chart Oncology.
4. Expand access to interventional radiology services in the region.
5. Improve access to molecular testing and tumor profiling by partnering with local lab programs to co-create solutions to address increasing demand.
6. Participate in the provincial roll out of AAPM TG-263 nomenclature standard for external beam radiation therapy planning as a step towards creating a central repository for radiation plans in the province.
7. Participate in the development of a neurosurgery program at WRHN to provide care closer to home for patients with brain tumours

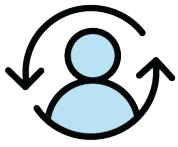


# Goal Four: Improve Cancer Outcomes and Quality of Life for Ontarians

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## Strategic Objectives:

1. Partner with OHTs to increase cancer screening participation, particularly for equity deserving populations (e.g., Indigenous communities, priority neighborhoods, Afrocentric screening model).
2. Monitor and support the expansion of the Ontario Breast Screening Program for ages 40-49.
3. Support expansion of a High Risk OBSP screening site at Guelph General Hospital.
4. Monitor and support HPV screening rollout for the Ontario Cervical Screening Program including participation in HPV self collection pilot.
5. Partner with OHTs and primary care providers to explore a regional approach to expanding smoking cessation services in Waterloo Wellington.
6. Enhance cancer treatment options in radiation therapy by incorporating techniques such as surface image guidance, adaptive radiotherapy and AI auto contouring technology.
7. Expand the provision of immunotherapy and T-cell engaging antibody treatments.
8. Improve access to cancer genetic risk assessment and inherited risk services including investing in infrastructure to support growing demand.



# Goal Five: Ensure Sustainable Cancer System Infrastructure and Workforce

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## Strategic Objectives:

1. Invest in people and infrastructure at WRHN Cancer Centre Midtown location to prepare for increased cancer care demand.
2. Support the phase 3 planning of the new hospital implementation plan at the University of Waterloo site as the future home of the regional cancer centre
3. Implement OH-CCO ambulatory systemic treatment models of care to enhance workforce planning.
4. Support a growing regional Complex Malignant Hematology program including the expansion of the Stem cell transplant program (Apheresis in 2026, FACT accreditation in 2027, CAR-T program in later phases).
5. Leverage technology and innovation to support frontline healthcare workers including reducing administrative burdens to improve provider wellbeing.
6. Introduce the first PET scanner to the region to improve cancer diagnosis and treatment planning.
7. Expand radiation therapy services by implementing the 6th linear acceleration at WRHN Cancer Centre.

# Conclusion

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The WWRCP remains committed to advancing equity, improving patient experiences, integrating cancer services, enhancing cancer outcomes, and building sustainable infrastructure. By aligning with Cancer Care Ontario's 2024-2028 plan, we will ensure that Waterloo Wellington residents receive world-class cancer care close to home.



Systemic Therapy Team at the Midtown site.



Volunteers at the WRHN Cancer Centre.



# References

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## Cancer Screening Programs

<https://www.cancercareontario.ca/en/cancer-care-ontario/programs/screening-programs>

## Hyivy Health

<https://hyivy.com/>

## Linear Accelerator | Canadian Cancer Society

<https://cancer.ca/en/cancer-information/resources/glossary/l/linear-accelerator>

## Magnetic Resonance Imaging (MRI) | Canadian Cancer Society

<https://cancer.ca/en/treatments/tests-and-procedures/magnetic-resonance-imaging-mri>

## Ontario Cancer Plan 6

<https://www.cancercareontario.ca/en/cancerplan>

## Ontario Cancer Statistics 2024

<https://www.cancercareontario.ca/en/statistical-reports/ontario-cancer-statistics-2024>

## PET (Positron Emission Tomography) Scanner | Canadian Cancer Society

<https://cancer.ca/en/treatments/tests-and-procedures/positron-emission-tomography-pet-scan>

## Radiation Treatment: Radiation | Cancer Care Ontario

<https://www.cancercareontario.ca/en/cancer-treatments/radiation>

## Systemic Treatment: Systemic Treatment Program | Cancer Care Ontario

<https://www.cancercareontario.ca/en/cancer-care-ontario/programs/clinical-services/systemic-treatment>

# Glossary

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**Culturally safe care:** A way to offer care that makes people feel valued. It respects a person's identity, culture, and life experience. It aims to foster equal partnership between patients and their healthcare team.

**Equity:** Equity is not about each person being treated the same. It is knowing that not everyone starts out in the same place. Some people may need more support to reach the same health outcomes as others. This means we must notice the barriers people face and take action to adjust the care we offer. Healthcare resources might also be planned in a way to help "level the playing field" for all.

**Linear Accelerator (Linac):** A machine that creates and delivers high energy x-ray beams to treat cancer.

**Magnetic Resonance Imaging (MRI):** A machine used to take 3-dimensional (3D) images of organs in the human body.

**PET (Positron Emission Tomography) scanner:** Uses a form of radioactive sugar to create 3-dimensional (3D) photos to see how the cells in your body are working.

**Underserved populations:** Groups who have a harder time getting access to key services like healthcare, education, or social support. This can be due to factors like:

- Where they live
- How much money they make
- Race or Ethnicity
- Speaking a language other than English or French
- A disability, or
- Immigration status

These factors can cause some people to get less help or have worse results when they need healthcare.



