



Case Study 5
Organization: Cancer Care Manitoba
Program: Health Equity Education
Classroom: 415 Machray Hall
Agency key informant: Morgan Stirling
Facilitator: Shivoan Balakumar

1. Program description

Cancer Care Manitoba is the provincial cancer agency, serving Manitoba throughout the province. We are responsible for ensuring Manitobans have access to cancer care services such as education on risk reduction and prevention, cancer screening, and different types of treatment. In an effort to bring cancer care closer to home, Cancer Care has developed the Community Oncology Program (COP) which oversees and coordinates care in different sites across the province. In these sites, patients and families have access to chemotherapy, a family physician in oncology, nursing and psychosocial support.

The Underserved Populations Program, which is part of COP, works to reduce the cancer burden among groups not well served by the cancer care system, due to system barriers and differential access to social determinants of health. There are 14 program staff for COP and 4 for the Underserved Populations Program.

As a program, we focus on a variety of areas, such as community engagement and working to ensure projects and initiatives are responsive to the needs of underserved populations as they define and understand them. We also work directly with patients, families, and community services to ensure people are able to make informed treatment decisions and can access the care and support they need throughout the cancer care continuum.

In addition to providing support and engaging communities, a significant piece of work we do is educating staff about the barriers to care patients face and the social determinants of health influence patient and family experiences and outcomes. We provide this education in a variety of ways, such as presenting at different medical rounds for the various oncology specializations (i.e., medical oncology, radiation oncology, nursing, supportive care and psychosocial oncologists, etc.), conferences, short educational videos, and in staff communications. The goal of this education is to ensure that staff has the knowledge and understanding they require to provide equitable and culturally safe care to patients and their families.

There are usually two staff who provide this training/education. Morgan Stirling (Projects and Evaluation Coordinator) and Allison Wiens (Education and Liaison Nurse Health Equity). The size of groups ranges from 2 to 200 people. The amount of time we have ranges from 15 minutes for new employee orientation to 3 hours for a workshop. Most of the presentations are in the 45 min-1 hour range, with a mostly didactic approach. Longer sessions are typically more interactive. Depending on the group, we will ask participants to fill out evaluations, although this is not consistent.

Historically, education has been focused on First Nations and working towards creating a culturally safe environment for Indigenous people at Cancer Care. However, with our current





Manitoba Cancer Plan, we have expanded the breadth of populations we recognize to be underserved. To those ends, Cancer Care has identified three additional groups: older adults with cancer, newcomers and refugees, and rural/remote. As such, we have applied a broader health equity lens to the education work, focusing largely on building a foundation of understanding around concepts like health equity, social determinants of health, and intersectionality and then offering more specific population-based information.

2. Reason/s for the evaluation

A primary reason why we want to develop an evaluation plan is to demonstrate to senior leadership that there is value in delivering health equity education to staff and that it has a positive impact on patient and families experiences and outcomes.

The intended users of this information will be Underserved Populations and Community Oncology Program staff, Senior Leadership (CEO, COO, CMO and, Program Directors), funders including Manitoba Health. The information may also be used for potential grant applications.

3. Evaluation questions

Some questions we would like to answer are:

What kind of impact health equity education has on patient care, patient experience, and patient outcomes?

What gaps/challenges do staff face in providing equitable and culturally safe care?

Does health equity education provide staff with the knowledge they need to provide equitable and culturally safe care?

