



Provincial Health Services Authority

# COMMUNITY ONCOLOGY NETWORK REFERRAL PROCEDURE: III-110

## Summary of Changes

	NEW	Previous
<b>BC Cancer</b>	<ul style="list-style-type: none"> <li>• Clarified delegate</li> <li>• Consolidated FAQ document into procedure</li> <li>• Addition of BC Cancer process to upload referrals to the patients electronic chart</li> <li>• Language adjustment to clarify procedure</li> </ul>	<ul style="list-style-type: none"> <li>• Name Change for clarification</li> <li>• Transition from Policy to Procedure due to content</li> </ul>

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# COMMUNITY ONCOLOGY NETWORK REFERRAL PROCEDURE: III-110

## 1. Introduction

A [Community Oncology Network referral \(CONRef\)](#) transfers the delivery of systemic therapy and [Delegates](#) the medical management from the BC Cancer Most Responsible Physician (MRP) at a BC Cancer Regional Centre to a physician at a [Community Oncology Network \(CON\)](#) clinic, facilitating the delivery of systemic therapy care closer to home for patients.

The BC Cancer MRP delegating care remains the MRP throughout the course of care at the CON clinic and thereafter until such a time as the patient is transferred to another MRP, discharged from BC Cancer, or dies.

### 1.1. Focus

This Procedure describes the minimum required process steps for safe delegation and transfer of care from a BC Cancer oncologist/Regional Center to a CON physician/clinic.

### 1.2. Health Organization Site Applicability

All BC Cancer Regional Centers and referring Community Oncology Network clinics are required to follow this procedure.

\*Out of Province or Country referrals cannot use the CON Referral system.

### 1.3. Practice Level

#### BC Cancer Staff:

- BC Cancer Oncologists (MRP)
- Health Information staff and Release of Information clerks
- Administration
- Pharmacists

#### CON staff may include:

- BC Cancer Oncologist (MRP)
- Physician (e.g., General Practitioner in Oncology – GPO)
- Pharmacist and pharmacy technician
- Nurse Practitioner (NP)
- Nurse
- Clerk
- Administration

### 1.4. Abbreviations and Definitions

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## Abbreviations used in this Procedure:

- **CON:** Community Oncology Network
- **CONRef:** Community Oncology Network Referral
- **MRP:** Most Responsible Physician (BC Cancer Oncologist)
- **GPO:** General Practitioner in Oncology
- **NP:** Nurse Practitioner
- **ROI:** Release of Information

**Community Oncology Network (CON):** Comprised of community cancer care treatment clinics based in Health Authority facilities located across British Columbia. Each CON clinic has a cancer care team of health care professionals with knowledge of oncology who provide a range of systemic therapy treatments and care for cancer patients. CON clinics are typically staffed by GPOs who deliver the patient care in collaboration with a BC Cancer oncologist at a regional cancer centre.

**CONRef:** A secure online web-based system through which BC Cancer oncologists submit requests for delegation of care for systemic treatments and medical care to one of the Community Oncology Network (CON) clinics. CONRef allows for electronic transfer of patient information, referral details, and relevant protocol guidance from the BC Cancer physician to the CON physician/clinic.

CONRef can be accessed on any BC Health Authority networked computer, or via Citrix, at: <https://conref.phsa.ca>

The **CONRef Form** and attached documentation outlines the medical management instructions regarding systemic therapy treatment(s) administered and managed at a CON clinic.

The **CONRef System** is a secure online web-based system that facilitates the transfer and delegation of care.

**Delegate:** The CONRef web form can be completed by a GPO, NP or Resident provided that the CONRef form is filled out under the direction of the MRP who is delegating a treatment plan that they are responsible for deciding in consultation with the patient.

## 2. Procedure

### 2.1. Steps and Rationale

#### 2.1.1. BC Cancer Oncologist (MRP)

1. **Define the treatment plan:** Determine the appropriate treatment plan for the patient.

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2. **Discuss with Patient:** Discuss referral with patient to determine CON clinic closest to home.
3. **Complete the form:** BC Cancer Oncologist (MRP) or [Delegate](#) completes a [CONRef Form](#) using CONRef for all patients whose systemic therapy treatment is being transferred to one of the CON clinics for delivery.
  - i. One protocol per referral form. Multiple protocols not permitted on the same form.
  - ii. The key required fields include: Refer back to MRP, Clinical Summary, and Recommended Monitoring.
  - iii. The referring physician contact box auto populates with the email of the person completing the referral form. If a referring physician wants to replace it with their phone number or that of their secretary they can do so by deleting the email address and adding their phone number. If a GPO or NP is filling out the form on behalf of the MRP, they can include the MRP contact email or phone number and should check with that individual regarding what their contact's preference.
4. **Dictate** a complete clinical note (this is the source of truth) and include:
  - The name and protocol code of the chemotherapy treatment regime
  - Any specific instructions, e.g. dose modification or special instructions
  - The discussion with the patient regarding risks and benefits of treatment
  - Instructions on follow-up
  - When and what monitoring investigations are recommended
  - When and how to refer patient back to BC Cancer MRP

**Note:** BC Cancer MRP must sign dictation in appropriate time frame for referral, as CON clinic requires this information to start therapy.
5. **Referral back to BC Cancer:** A force function was added to ensure that the MRP sends instructions for when the CON clinic GPO/NP should refer the patient back, so the MRP can advise on ongoing management or close the loop at the end of a course of therapy. Even if the plan is for the patient to be discharged following a course of e.g., adjuvant therapy, the MRP should still see that patient again to ensure appropriate transfer of care to a primary care physician at that time.
6. **Changes in treatment:** Communicate to the CON clinic any change in patient's treatment protocol or substantive changes to an existing protocol. MRP must submit a new [CONRef Form](#) and dictate a clinical note.
7. **Straightforward dose adjustments:** Dose adjustments as per BC Cancer **protocol do not** require a new [CONRef](#)

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**2.1.2. CON Clinic Staff including Physician, Pharmacist and Pharmacy Technician, Nurse Practitioner, Nurse, and Clerk:**

1. **Ensure referrals are received and processed** within two (2) working days of receipt. If the CON clinic is unable to accommodate the patient within the time frame requested for treatment, the CON clinic will liaise with the referring provider directly.
2. **Include [CONRef Form](#)** in the patient medical record (paper or electronic).
3. **Review the CONRef form and the dictated note** with specific patient details and instructions prior to prescribing, preparing and/or administering the first cycle of a new systemic therapy treatment regime.
  - Next systemic therapy date is the time frame the patient should be treated that is still clinically appropriate.
  - For any questions or concerns with regards to the treatment plan, contact the MRP before treating.
4. **Ensure appropriate documentation** regarding the patient during their course of care at the CON clinic is forwarded to the MRP.
  - Each physician visit at the CON clinic should be documented and sent back to the MRP and include details of any significant dose adjustments and toxicities.
  - For every treatment, these notes should include dosing, dosing modification and explanation for any dosing changes.
5. Patient safety is paramount; if concerns arise at any time during a course of therapy CON staff can and should **withhold systemic therapy** until they are satisfied that the safety concern has been addressed.
6. At the **completion of the course of therapy**, or as per instructions from the MRP, the CON clinic will **refer the patient back to the MRP**. It is the responsibility of the CON clinic physician to refer the patient back to the MRP at the instructed time. On transfer back to the MRP, there should be a summary that includes number of cycles received, significant side effects, new medical conditions and rational for any changes, if adjustments to the original treatment plan were made
7. The MRP will **determine the appropriate course of treatment** or advise on ongoing management.
8. **Notify the BC Cancer Regional Operations Director** of any planned CON clinic closures or provider absences.

**2.2. Site Specific Practices**

**BC Cancer Referring Centre:**

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## a) Health Information and Release of Information (ROI) Clerks:

1. Provide BC Cancer chart or faxed information to the appropriate CON clinic when requested.

### BC Cancer Regional Centers on CAIS:

#	Action	Role
1.	Receives email from <a href="#">CONRef</a> that a referral has been entered	HIM/ROI Staff
2.	Log into the <a href="#">CONRef System</a> and print the relevant CON Referral Form	HIM/ROI Staff
3.	Fax the referral to 604-708-2000 for uploading to CAIS	HIM/ROI Staff
4.	Destroyed printed referral form by the local process	HIM/ROI Staff
5.	Add the referral to patient's paper chart as part of regular chart processes	HIM clerk preparing patient charts

See [Appendix 1](#) for a visual flow chart of this process

### BC Cancer Regional Centers on Cerner:

#	Action	Role
1.	Receives email from <a href="#">CONRef</a> that a referral has been entered	HIM/ROI Staff
2.	Log into the <a href="#">CONRef System</a> and print the relevant CON Referral Form	HIM/ROI Staff
3.	The printed referral form is to be scanned into WorkQueueMonitor(WQM)	HIM/ROI Staff
4.	Electronic staff index the report and add it to the encounter in the patient charts - There is a 48hour turnaround time for the CONRef referral form to appear in the patient's chart as it requires indexing by the Electronic Health Records Staff. - The document becomes available under the documentation section of Powerchart	
5.	The printed referral is to be store or destroyed by the local process	HIM/ROI Staff

See [Appendix 1](#) for a visual flow chart of this process

## b) Operations Director:

1. Provide notification of CON clinic closures or physician absence to CONRef Support via the CONRef email address: [conref@bccancer.bc.ca](mailto:conref@bccancer.bc.ca)

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## 2.3. Patient/Client Education

The MRP is responsible for discussing with patient if care will be received at a Community Oncology Network clinic in advance of placing the referral.

## 3. Related Documents and References

### 3.1. Related Documents

[Policy III-10: Systemic Therapy Treatment Delivery](#)

### 3.2. References

1. BC Cancer ROI/HIM staff Workflow for uploading the CONRef referral to the patients BCC Chart
2. BC Cancer ROI/HIM staff Workflow for uploading additional documentation

## 4. Appendices

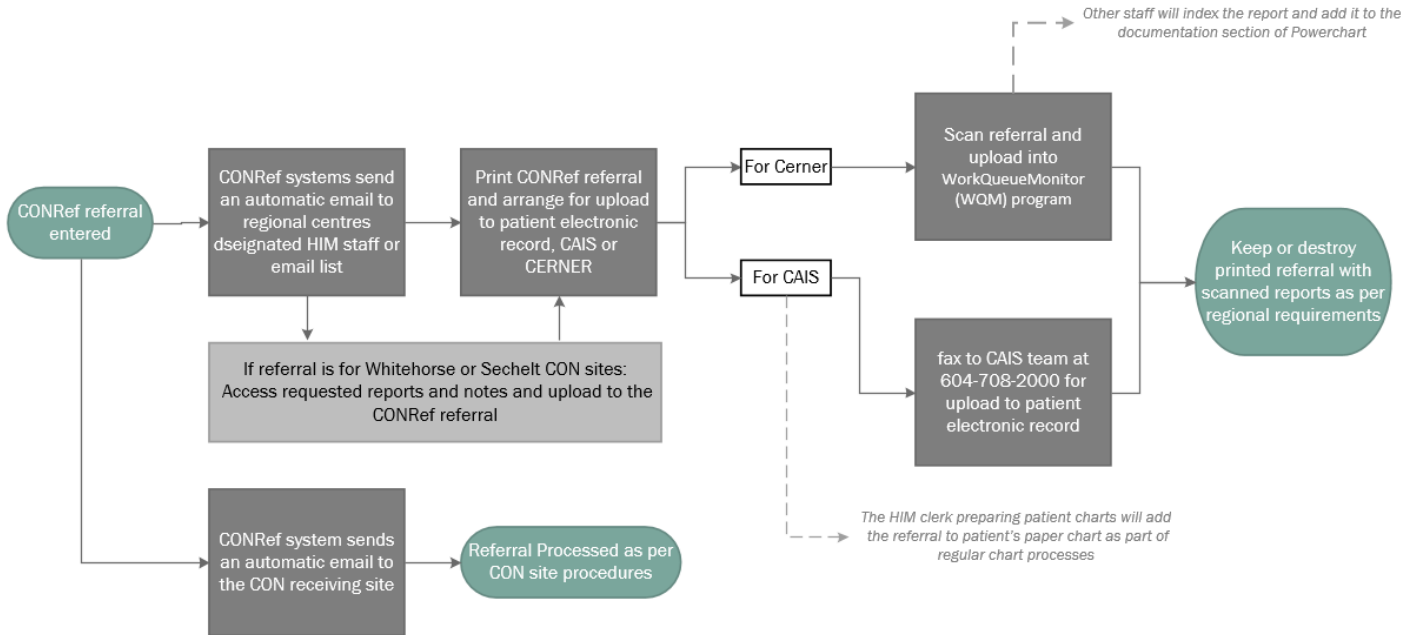
[Appendix 1: BC Cancer ROI/HIM Staff Workflow for Uploading the CONRef Referral to the Patients BC Cancer Chart](#)

[Appendix 2: BC Cancer ROI/HIM Staff Workflow for Uploading Additional Documentation](#)

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## Appendix 1: BC Cancer ROI/HIM Staff Workflow for Uploading the CONRef Referral to the Patients BC Cancer Chart



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## Appendix 2: BC Cancer ROI/HIM Staff Workflow for Uploading Additional Documentation

1. Sign into CONRef account
2. Located referral at top of screen
3. Select Process Referral

Referral#	PHN	BCCA#	Patient Name	Status	Protocol	CON Site	Date Submitted	Next Chemo Date	
1041626	9032823851			Submitted	LUSCPE	Whitehorse General Hospital	Jul 26 2023	Within 14 days	<a href="#">Process Referral</a>

4. scroll down to Referral Documents section and locate which documents have been identified as required

**Referral Documents:**

CAIS Consult Needed?:  Yes  
 Consult Physician Notes: Medical Oncology Consultation and Progress notes

Upload Consult:  No file chosen  
 ConsultROI Notes:

CAIS Pathology Report Needed?:  No  
 Pathology Report Physician Notes:  
 Upload Pathology Report:  No file chosen  
 Pathology ReportROI Notes:

5. Retrieve required documents from the patient’s record.
6. Create an electronic copy of the document is use by saving the required documents as a PDF or printing and scanning the document if required
7. Upload the electronic copy of the required documentation to the CONRef referral

**Referral Documents:**

CAIS Consult Needed?:  Yes  
 Consult Physician Notes: Medical Oncology Consultation and Progress notes

Upload Consult:  No file chosen  
 ConsultROI Notes:

CAIS Pathology Report Needed?:  No  
 Pathology Report Physician Notes:  
 Upload Pathology Report:  No file chosen  
 Pathology ReportROI Notes:

8. Scroll to bottom of CONRef referral and select “Complete Referral”

Other 4 Needed?:  No  
 Specify Physician Notes:  
 Upload Specify:  No file chosen  
 SpecifyROI Notes:

General ROI Notes:

**For Consult Notes and other relevant documentation, depending on your area of practice, please refer to CAIS, CST Corner, or CareConnect.**

9. Address electronic and/or printed copies of the patients documentation as per local processes

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	Dr. Helen Anderson	Medical Lead – Systemic Therapy	31-AUG-2023
	Dr. Sharlene Gill	Medical Oncologist – Committee Chair (MAC)	20-SEPT-2023
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