

INDIAN CHILDHOOD CANCER INITIATIVE (ICCI) NEWSLETTER, JUNE 2024

Welcome to the second edition of ICCI's newsletter. We are excited to share with you the updates and key work done in the last three months. In this newsletter, we are sharing an update on the ICCI meetings and a summary of the goal statement and key focus areas of our ten taskforces.



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ICCI, LOGO



The logo for ICCI, was finalised on the **12th March 2024**, after sharing three drafts with the all the members of ICCI taskforces.



What does the logo mean?

The four petals in the flower, similar to periwinkle, which is the most commonly used cancer drug for children, signifies the four important partners involved in the journey of child suffering from cancer



The golden ribbon is the child suffering from cancer, who is the centre and the most important stakeholder.

CHAIRS MEETING



ICCI Governance Council & Taskforce Chairs Meeting

🛗 29th & 30th April 2024

🧕 Novotel, Mumbai



First Governance Council meeting on 29th April 2024 in Mumbai

We conducted the first in person meeting of the Governance Council members on 29th April in Mumbai. The meeting was a great opportunity for the Governance Council members to meet, interact and work together on strengthening the council. It was also an ideal platform to apprise the council on the work done by ICCI in the last one year.

The topics of discussion in the meeting were:

- 🖳 ICCI Summary and progress so far
- 🛃 ICCI Structure and Processes
- Ҷ ICCI Funding and Budget
- 👆 ICCI SWOT analysis
- 🖳 Summary on Strategy and Roadmap based on SWOT Analysis
- ᆋ Governance Council SOPs, TOR, Members

CHAIRS MEETING



ICCI Governance Council & Taskforce Chairs Meeting

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🤶 Novotel, Mumbai



Governance Council and Taskforce Chairs meeting on 30th April in Mumbai

- ♂ It was the first meeting where the Governance Council met the Taskforce chairs.
- ♂ Day 2 of the meeting was dedicated for the taskforces, where the taskforce chairs presented their key focus areas, ongoing projects, potential targets and projects about to initiate.
- ♂ The individual budget for each taskforce for July 2024 to June 2025 was also discussed.
- Feedback on the work planned and the budget was taken from the council and other taskforce chairs and core members.
- ♂ A summary of the Governance Council meeting done a day before was shared with the taskforce chairs.
- The chairs who couldn't make it to the meeting physically, presented their session online.

SUPPORTIVE CARE









Goal statement

To provide timely and standardized optimal multidisciplinary supportive care.

Key Focus Area

- To develop consensus guidelines/SOPs for nutrition assessment & management
- To optimize management of fever and febrile neutropenia
- 📀 Template for febrile neutropenia management
 - 1. Fever Registry
 - 2. Quality Improvement initiative
 - 3. Implement and test PEWS
- Implement infection control bundles/ WHO Hand Hygiene



Supportive Care taskforce meeting on infection control

25th May, Bengaluru







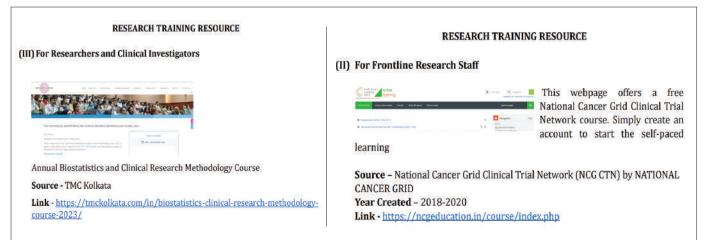


Goal statement

To increase the utilization of protocols and the percentage of children on trials/Aims at promoting research related to childhood and adolescent cancer

Key Focus Area

- Developing and delivering training and research content for patients, caregivers, CRCs, and research staff to enhance cancer registry management and patient engagement
- To do the Childhood Cancer Research Priority Setting Exercise (PSE) by a collaborative effort to identify research priorities and develop protocols for childhood cancer research
 - Creation of a Clinical Trial Unit dedicated to Childhood Cancer with Human and Other Resources



Glimpse of Research Training Document







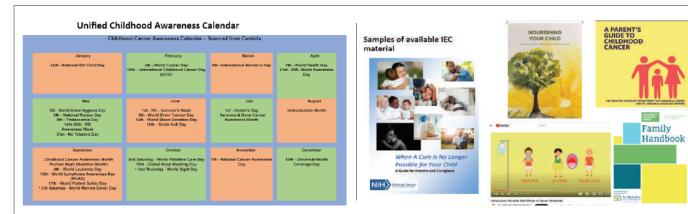


Goal statement

To spread awareness of childhood cancer and to involve patient & parent groups in awareness and decision making

Key Focus Area

- Develop and/or collate IEC materials in different languages and different mediums including on awareness of signs, symptoms, reducing stigma and myths, survivorship, etc.
- Oreate a One stop Web portal to disseminate IEC and all other ICCI generated information
- Oreate unified content calendar of relevant national and international events



Unified Childhood Awareness Calendar

Samples of available IEC material

PSYCHOSOCIAL SUPPORT







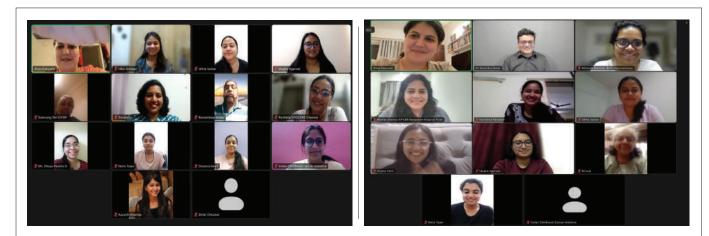
civil societies & other organizations

Goal statement

Every child & their families with cancer should have the assessment of their social & psychological needs and access to holistic social support as per their needs

Key Focus Area

- Publish a position statement on psychosocial support
- Creation of special interest group for paediatric psycho oncology
- Mapping Food/ Nutrition, psychology services, social workers etc.
- Develop and implement standardized psychosocial assessment tool/ pathways/processes, including education and training



Monthly discussion meetings by the Special Interest Group of Paediatric Psyco Oncology (SIGPPO)

FINANCING AND POLICY









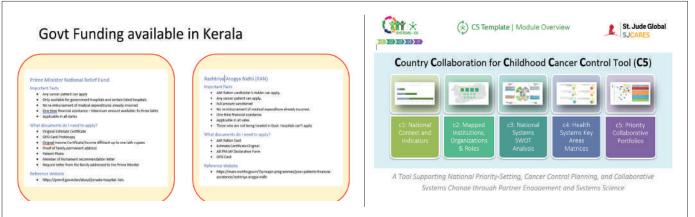
Goal statement

To achieve quality & timely care through structured/ strategic plans & adequate resources

Key Focus Area

- Oreate a comprehensive resource document for all the funding Govt, NGO, CSR, Crowd Funding and increase visibility
- Make a list of NGOs for all hospitals and the support they provide
- Ocuntry Collaboration for Childhood Cancer Control (C5) Tool consists of 5 modules and provides a platform for sustainably improving childhood cancer outcomes in low- and middle- income countries. We plan to do two modules of c5 tool, c1 – National Context and Indicators and c2 – Mapped Institutions, Organizations & Roles in the next six months.

• Undertake a costing exercise to determine cost of cancer treatment



An example of how the information on available government schemes will appear on ICCI website Country Collaboration for Childhood Cancer Control (C5 Tool)

ACCESS TO CARE







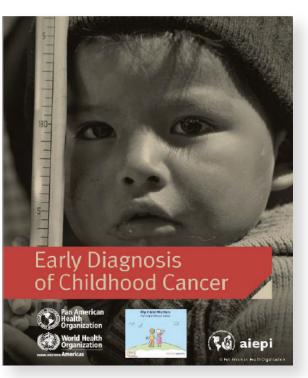


Goal statement

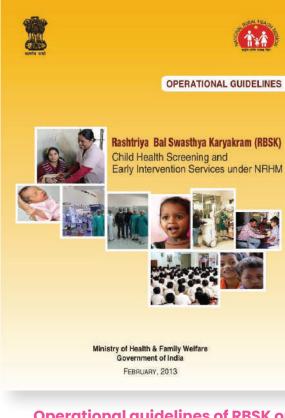
To develop well defined referral pathways, networks and linkages in each state

Key Focus Area

- Map all the centers across the country
- Develop the IEC material for use at grassroot level (PHC, CHCs etc.)
- Define guidelines for pediatric cancer centers
- Setting pediatric oncology standards
- Update the NTP-PPO



Module on Early Diagnosis of Childhood cancer by PAHO



Operational guidelines of RBSK on Child Health Screening and Early Intervention Services

WORKFORCE AND TRAINING







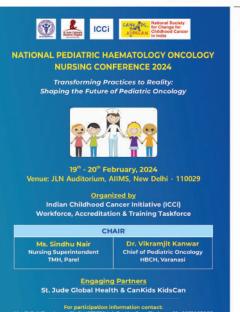


Goal statement

To develop and implement training and accreditation of all verticals of pediatric oncology workforce

Key Focus Area

- Create Nursing Apex body and decide priorities
- Expanding and scaling up the available courses and to do need assessment & identify gaps in training
- To do need assessment and identify gaps including workforce mapping



Flyer for The National Pediatric Haematology Oncology Nursing Conference



The National Pediatric Haematology Oncology Nursing Conference, 19th-20th February, 2024 at AlIMS, New Delhi







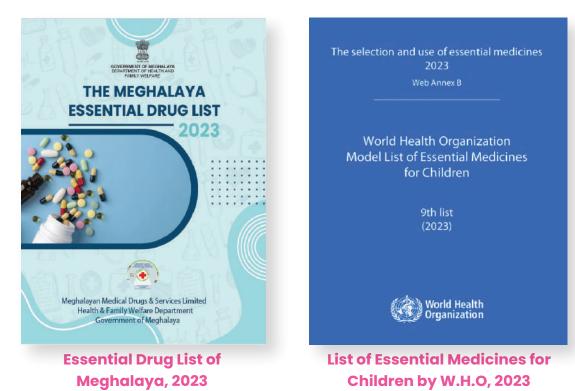


Goal statement

To generate recommendation for uninterrupted supply of good quality drugs and diagnostics

Key Focus Area

- Random testing for drug quality.
- Ocmpilation of national essential medicine list- childhood cancers
 - 1. Compiling of all available states and UTs list of anticancer drugs is done
 - 2. Comparing of WHO EMLc with all states and UTs
 - 3. Final analysis will be done after the compilation





DATA AND REGISTRY









Goal statement

To facilitate the collection of high-resolution data on pediatric cancer

Key Focus Area

- Establish a REDCAP Database for collecting HBCR data and implement a Backup Server to ensure data security and integrity
- Training CRCs, Data Managers, and Cancer registry staff for accurate data entry and management in the HBCR database
- Increase centers contributing data to HBCR



REDCAP Server installed in Chennai

ESTABLISHING THE FIRST DEDICATED POPULATION-BASED CHILDHOOD CANCER REGISTRY (PBCCR) AND A NETWORK OF HOSPITAL-BASED CHILDHOOD CANCER REGISTRIES (HBCCRs) IN INDIA			
	DATA COLLECTION FORM		
		Patient Number:	
A. Essential Information			
A. Essential Information	(NOTE; this form may be completed	on admission to reporting hospital)	
	lame:Last Name:		
Date of birth://	Gender: Male Female Other		
Are you attempting to report a second Yes No NOTE: If yes, these cases will now be linked in you confirm this is accurate? Yes No			
B. Demographics	(NOTE: this form may be complete	d on admission to regorting hospital)	
National ID: Medical	record number:		
Usual residence address:			
Address line 1:			
City:	r Dunknown Declined to respon	d 🗆 notapplicable	
Parent/Primary Caregiver Highest Edu	ucation:		
None	1-8 years (grade school)	9-12 years (high school/O-	
		level), but did not graduate	
Completed high	Trainings after high school,	College graduate	
school/GED/A-levels	other than college		
Post-graduate level	(vocational/community college)		
Parent/Contact information:	L Chanown		
Best phone number:	Best e-mail for contac	t	
C. Diagnosis	(NOTE: this form may be co	mpleted +3 months postadmission)	
Date of initial onset of cancer-related			
Date of First Medical Assessment for			
Does the patient have a confirmed ca	incer diagnosis? 🗆 Yes 🗆 No wore i	"No", data collection for this patient ends here)	
Date of diagnosis:///			
Best method of diagnosis: (select the		wagnosis Methods were used.	
(Lowest: Clinical exam, highest: Autop	sy/beach cerujicate)		
Lab exams (including tumor mark	(arc)		

Data Collection Form for HBCR and PBCR in India

CONTINUITY OF CARE









Goal statement

To establish pediatric palliative care programs in all pediatric cancer centers. To establish survivorship clinics in all cancer centers and develop guidelines for follow up care

Key Focus Area (Palliative Care)

- Map all existing pain and palliative care services in India
- Publish a position statement on palliative care
- Train and educate health care professionals on palliative care
- Oevelop guideline for palliative chemotherapy and palliative radiotherapy
- Develop SOPs on PPC services

Key Focus Area (Survivorship and Reintegration)

- Rehab introductory session for Patients, Survivors & Health Care Professionals
- Develop national surveillance/follow-up guidelines.
- Develop position statement on fertility preservation
- INPHOG C2S study expansion to capture national survivorship data
- Conduct research studies to understand the long term effects of childhood cancer treatments and survivorship outcomes in India
- Establish fertility preservation working group

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