

QUALITY STANDARDS

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# Cancer Survivorship

A guide for people  
living with, through,  
and beyond a  
cancer diagnosis

MARCH 2026



**Ontario Health**  
Cancer Care Ontario

Ontario Health is committed to improving the quality of health care in the province in partnership with patients, clinicians, and other organizations.

To do that, Ontario Health develops quality standards. These are documents that outline what high-quality care looks like for conditions or processes where there are large differences in how care is delivered, or where there are gaps between the care provided in Ontario and the care patients should receive. These quality standards set out important steps to improve care. They are based on current evidence and input from an expert committee that includes patients, care partners, clinicians, and researchers.

This patient guide accompanies the quality standard on [Cancer Survivorship](#). It outlines the top 5 areas where clinicians can take steps to improve care for cancer survivors. The patient guide also includes suggestions on what to discuss with your clinicians, as well as links to helpful resources.

## WHO IS A CANCER SURVIVOR?

Ontario Health (Cancer Care Ontario)'s [Cancer Survivorship Program](#) defines “cancer survivorship” as the time period starting when a person is first told they have cancer, while they get treatment, when treatment is finished, and beyond into their life after treatment ends. It includes adults who are survivors of childhood cancers. Survivorship care usually means care that supports people after their treatment ends, including dealing with symptoms and side effects of cancer and its treatments.

# Top 5 areas to improve care for cancer survivors



## Quality Statement 1: Comprehensive Assessment at Regular Intervals

### What the standard says

Cancer survivors receive a comprehensive assessment of their survivorship care needs at regular intervals. Assessments are documented in an individualized, person-centred care plan that is updated regularly. Cancer Survivors with identified needs receive or are referred to appropriate care and services.

### What this means for you

You should be offered a check of your physical health, mental health, and overall wellbeing at least once a year. This check-up should be done by your main clinician (e.g., family doctor, nurse practitioner, or cancer specialist) working together with other health care team members. Your clinician should use what they learn from the check to complete or update your care plan. If you agree, they should also share this plan with everyone on your health care team and your care partners so that the team has the information they need to give you the best care and support to meet your unique needs.

### DID YOU KNOW?

“Clinicians” are health care professionals who provide care to patients. Clinicians include family doctors, oncologists, nurses, nurse practitioners, pharmacists, social workers, psychologists, registered dietitians, and many others.

You can ask who on your health care team is responsible for initiating your regular comprehensive assessment.

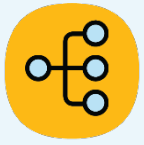
## WHAT IS A CARE PLAN?

A care plan is a written document (physical or digital) created by you and your clinician, that describes your health needs and goals, as well as the resources needed to meet them. The care plan should be based on your faith traditions, language preferences, culture, values, beliefs, wishes, goals, and needs.

For example, your care plan might include, but is not limited to:

- A description of what you want your care to look like
- A plan to incorporate traditional health practices in your care (see quality statement 5)
- Plans to manage any physical or mental health concerns you may have (see quality statement 3)
- Contact information of the cancer treatment team
- Contact information of the clinician or health care team responsible for your follow-up care

If you agree, your care plan can be shared with your health care team and care partners, as appropriate.



## Quality Statement 2: Transitions in Care, Care Coordination, and Primary Care Integration

### What the standard says

Cancer survivors transition between levels of cancer care as appropriate for their needs. Transitions in care for cancer survivors involve care coordination, shared care, and support between health care teams and settings, ensuring integration with primary care.

### What this means for you

Your care does not stop when treatment ends. You may move between different types of care depending on your needs. These transitions are meant to make sure you get the right care at the right time, and that your health needs are met. To support these transitions, your primary care clinician, cancer doctors, other members of your health care team, your care partner, or a designated navigator should work together and share information, as needed.

### **GETTING CARE FROM DIFFERENT PEOPLE WHEN YOU HAVE CANCER: “LEVELS OF CANCER CARE”**

You may move through different stages of care, from active cancer treatment to regular check-ups with your cancer care team or primary care clinician. To give the best support, your clinician or ideally health care team should check your needs, update your care plan, and provide care that fits where you are in your cancer care journey. This care can come from primary care clinicians, specialists, social workers, community partners, or survivorship clinics.

### **WHO IS A DESIGNATED NAVIGATOR?**

Moving through different stages of cancer care may be difficult. A designated navigator is ideally a person, possibly from your health care team (i.e., clinical navigator), a peer navigator, or a trusted care partner, who agrees to coordinate your move between levels of cancer care and other health care services (e.g., primary care, survivorship clinics). You can help decide who your navigator is. Your navigator and their role may change over time, as needed.



# Quality Statement 3: Psychosocial Support

## What the standard says

Cancer survivors and their care partners have access to psychosocial screening (as part of a comprehensive assessment) to identify any psychosocial needs or barriers to accessing care. Cancer survivors with unmet psychosocial needs receive information and support or are referred for treatment.

## What this means for you

You or your care partners may experience different physical, functional, emotional, and social challenges during your survivorship journey. Your clinician should ask you or your care partners about your emotional health, mental health, and overall well-being. This includes asking if:

- You feel sad a lot of the time
- You feel worried the cancer may come back
- You have questions about your sexual health
- You feel lonely
- You have questions about resuming or continuing your regular activities
- You are concerned about any physical symptoms you are experiencing

Once your clinician knows how you're feeling and which things you are struggling with, they can provide information or let you know about services and supports in your community that might help you or your care partners.

## IF YOU ARE A CARE PARTNER

It can be challenging to help manage the care of a cancer survivor. The cancer survivor's health care team should ask you about your emotional health, mental health, and overall well-being. If you would like it, they should also offer you information and support that might help you.



## Quality Statement 4: Patient Education and Self-Management

### What the standard says

Cancer survivors receive comprehensive, health-literate education about survivorship care, both during and after active treatment. They are offered self-management support and strategies to address their survivorship care needs, with the goal of optimizing their health and quality of life.

### What this means for you

You should get clear and comprehensive information about how to take care of yourself during and after your treatment. This information should be given to you in your preferred language, if possible, or in an official language, and in a way that makes it easy for you to understand and use (e.g., in person, printed, or from a computer or phone). The information will help you know what to expect throughout your survivorship journey. It may include information about your care plan, side effects that you could experience later, and what you may need after treatment ends. Your health care team should also give you information about groups in your community that can help, or research studies you might join if they fit your needs and phase of life. You should also get tips on how to help yourself feel better (e.g., how to eat well, safely exercise, sleep better, and make healthy lifestyle choices).

### DID YOU KNOW?

There are some things you can do to take care of your health and help you feel better, such as:

- Being active
- Eating healthy foods
- Not smoking
- Protecting your skin from the sun
- Getting enough sleep

If you are not sure what steps are right for you, talk to your health care team. They can give you information, suggest support services, or help you find other resources if needed.



## Quality Statement 5: Accessible, Culturally and Linguistically Responsive, Equitable Care

### What the standard says

Cancer survivors receive care in a health care system that is accessible, compassionate, and responsive to their culture, traditions, values, and linguistic and other needs. Health care teams work to build trust, remove barriers to accessing care, and provide equitable care, giving special consideration to First Nations, Métis, Inuit, urban Indigenous communities, racialized populations, Francophones, and additional equity-deserving populations.

### What this means for you

You should get care in a health system that is easy to use. Your health care team should always be kind and treat you with dignity and respect. They should care about your culture, language, and traditions. You should have the chance to be as healthy as you can be. This means that the health care team makes it easier for you to get help whenever you need it, no matter where you seek care (for example, whether you go to your doctor's office, use a computer or phone, or visit the hospital). They consider the needs of Indigenous peoples, racialized populations, Francophones, and additional groups who may need extra support. Your health care team should work with you to help identify appropriate ways to give feedback or report experiences of harm.

### DID YOU KNOW?

You can make a complaint if you have experienced racism or discrimination in your care. Making a complaint can feel difficult and emotionally challenging, but you do not have to do it alone. Ask someone you trust to help you.

- **Start with the health care organization:** The first step is to file a complaint with the health care organization where the experience happened. Use their complaint process to let them know about your experience. This helps them know about the problem and gives them a chance to make it better
- **Contact the Patient Ombudsman:** The Patient Ombudsman is an independent office created by the Ontario provincial government to help resolve complaints about health care experiences. If you are not happy with the way the health care organization responds to your complaint, or you do not feel that the issue has been resolved, the Patient Ombudsman may be able to help. They can also help if you do not feel comfortable reporting your experience to the health care organization. You can contact the Patient Ombudsman by phone at 888-321-0339 or [visit the agency's website](#) for more information.

# Suggestions on what to discuss with your clinicians

## Ask your clinicians:

- What does my survivorship care plan look like and are there any plans for follow-up?
- What tests or check-ups will I need, and how often will they happen?
- Who do I contact if I have a health concern between check-ups or treatments?
- How do I get back to the cancer centre or oncologist if needed?
- What symptoms should I watch out for during or after treatment?
- What long-term and late effects of cancer treatment should I expect over time?
- How can I manage the needs that come up after my treatment?
- If I don't feel like myself after treatment, is this normal and what can I do to feel better?
- What support groups or programs can you refer me to?
- What can I do to reduce my risk of recurrence (i.e., the risk the cancer comes back)?
- What lifestyle changes (e.g., nutrition and exercise) can help me stay healthy?
- What community resources and supports are available to me?

## Share with your clinicians:

- If you feel more comfortable receiving services in French (e.g., offered in a designated organization – an organization that has officially committed to providing services in French under the [French Language Services Act](#) – or by a French-speaking clinician) or in another language and would benefit from interpretation and translation services
- Any concerns, questions, or anything you do not understand you have about your care plan
- Any other health concerns you have
- If you don't feel like yourself after treatment

## If you are a care partner

You might have your own questions. It can help to identify yourself as the patient's care partner to their health care team. This will make sure they know and respect your questions and concerns.

- Let them know what your role will be in helping the patient manage their condition
- Let them know if you need help

# Learn more

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[Canadian Cancer Society](#) offers services for people diagnosed with cancer. The information is available in English and French.

[Ontario Health \(Cancer Care Ontario\)](#) provides information on managing many of the most common symptoms of cancer and its treatments in a variety of languages.

[Wellspring Cancer Support](#) offers programs free-of-charge and without referral for people living with cancer and care partners to overcome emotional, physical and practical challenges.

The [Ontario Caregiver Organization](#) offers support for care partners including counselling, peer support and other programs to support mental health and well-being

The Canadian Cancer Society offers a [community services locator](#) to help find services and programs for people living with cancer and their family and friends

University Health Network – Princess Margaret Cancer Center provides [resources](#) specific to adolescents and young adults with cancer.

Princess Margaret Cancer Center offers [online cancer classes](#) about treatments, side effects, and what to expect in survivorship.

Ontario Health has developed other quality standards and patient guides on conditions related to cancer survivorship that may be useful, including:

- [Anxiety Disorders](#)
- [Chronic Pain](#)
- [Insomnia Disorder](#)
- [Major Depression](#)
- [Transitions Between Hospital and Home](#)
- [Transitions From Youth to Adult Health Care Services](#)

# Need more information?

If you have any questions or feedback about this guide, please contact us at [QualityStandards@OntarioHealth.ca](mailto:QualityStandards@OntarioHealth.ca) or 1-877-280-8538 (TTY: 1-800-855-0511).

Need this information in an accessible format? 1-877-280-8538, TTY 1-800-855-0511, [info@OntarioHealth.ca](mailto:info@OntarioHealth.ca)

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ISBN 978-1-4868-9651-6 (PDF)

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