



# CHWC

COMMUNITY HOSPITAL AND WELLNESS CENTERS OF BRYAN, OHIO

## 2017 Annual Summary of Cancer Program Activities

Providing the Community of Bryan and Surrounding Williams County  
with

# QUALITY Cancer Care

This report summarizes activities conducted in 2016.

## **Our Mission:**

**To provide quality patient care at every point of service; to respect the dignity and uniqueness of all patients; to promote safe medical practices; to encourage medical research; to permit access to all seeking healthcare; and to maintain fiscal soundness.**

## **CHWC AWARDS in 2016**

-Bryan Hospital received an A patient safety grade from national patient safety watchdog The Leapfrog Group

-CHWC earned gold award honors from The Healthy Ohio Business Council for comprehensive worksite health promotion and wellness programs

-Bryan Hospital earned 5-star award for patient inpatient OB/GYN services overall quality of care from Professional Research Consultants (PRC)

-Montpelier Hospital earned 5-star award for patient inpatient services overall quality of care from PRC

-Bryan Hospital earned 4-star in inpatient services overall quality of care from PRC

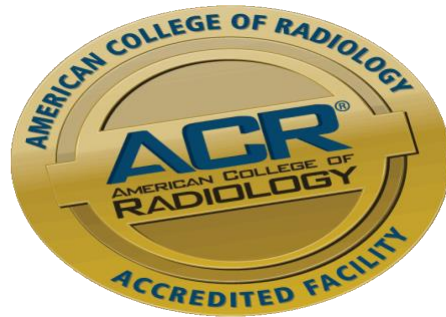
## Statement of Core Values

These Core Values will define and guide CHWC's leadership.  
 These Core Values will be embraced and upheld with passion by all staff.  
 These are values that we hold to be true at work and at home,  
 that we embrace, and that we will not tolerate deviance from.

<b>Compassion</b>	We recognize every person as a valued human being with different needs that must be met through listening, empathizing and nurturing. Therefore:
	I will deliver care with Compassion
	I will show Compassion to ALL - patients, patient's families, visitors and co-workers
<b>Integrity</b>	We recognize the importance of holding ourselves to the highest ethical and performance standards while demonstrating professionalism and sincerity. Therefore:
	I will do what is right, legal and morally correct at ALL times
	I will talk with, and not about, others
	I will treat ALL with dignity
<b>Honesty</b>	We recognize the importance of doing the right thing for the right reasons every time; that Honesty is part of the basis for Integrity. Therefore:
	I will be Honest at ALL times yet tactful
	I will expect Honesty from others
	I will not let fear keep me from being Honest
<b>Respect</b>	We recognize the value of receiving Respect and earning Respect; that Respect is part of the basis for Integrity. Therefore:
	I will seek to make ALL feel valued and appreciated
	I will be professional, courteous, and thoughtful in all my interactions
	I will protect others privacy and confidentiality
<b>Accountability</b>	We recognize the value of reliable and responsible staff, holding ALL accountable for their actions. Therefore:
	I will honor my commitments
	I will accept responsibility for my actions
	I will demonstrate ownership in my actions - Proceed until Apprehended

A RICH place to work!

Accountability Respect Integrity Compassion Honesty



In the interest of quality, our Radiation Oncology Center has continued accreditation from the American College of Radiology. The Radiation Oncology Center are also active participants in the Incident Learning System, which will facilitate a continuous improvement and achieving higher quality of care for patients.

The Community Hospital and Wellness Centers, with collaboration of Toledo Radiation Oncology, has brought the Bryan community the latest in Radiation Therapy Treatment. SBRT, or Stereotactic Body Radiation Therapy, is the method of radiation therapy that coordinates the body and a most precise delivery system to localized tumors. This radiation therapy is a delivery system of a single high dose radiation treatment to a highly precise treatment fields with a fewer fractionated (number) of treatments. This method increases the cure rates in a matter that was not previously achievable through other radiation modalities. This method of delivery also decreases the radiation that is given incidentally to healthy tissue that surrounds the tumor. SBRT is now available at Bryan, OH.

#### QUALITY OF RADIATION CARE

(Standard 4.6)

The Radiation Oncology Center conducted a study on the application of the newest treatment guidelines provided by ASTRO and NCCN. The particular guideline that was the center of the study was the offering of hypofractionated radiation therapy was offered to those that qualify for this treatment regimen. After analyzing the entire caseload of Breast Cancer Patients. Eight patients qualified for this new treatment measure, and eight patients were planned and treated with this new treatment guideline. This quality study results were 100% of the patients were being assessed and offered the appropriate treatment.

## **Cancer Committee**

The Following served on the Cancer Committee for 2016

M. H. Afifi, MD Chairperson  
W. Court, MD  
S. M. Keil, MD  
D. A. Myers, RN, OCN  
J. M. Martinez, RDLD  
M. M. Breitner, BS CTR  
K. Owen, RTTR

D. S. Rao, MD  
T. Sarosi, MD  
B. Schofield RN  
C. L. Day, RN, MSN  
  
L. A. Trausch, LISW  
J. A. David, RN, MSN

### **2016 Cancer Committee Meetings Held:**

January 13, 2016  
April 25, 2016  
June 27, 2016  
July 18, 2016  
October 24, 2016  
December 14, 2016

### **Tumor Board**

Tumor Board activities for 2016 are as follows:

- Met 21 times
- 27 different cancer sites discussed
- 100% of the cases were prospective (treatment planning for 1<sup>st</sup> diagnosis or reoccurrence)
- 36% of cases of total caseload were presented of the total 223 reported cases
- 100% of the NCCN guidelines were discussed
- 100% of the Staging and Prognostic factors were discussed
- 100% of the cases were assessed for eligibility for a clinical trial
- 100% of the cases that qualified for genetic testing were discussed
- Medical Oncology attended 100% of the meetings
- Radiation Oncology attended 100% of the meetings
- Surgeon attended 100% of the meetings
- Diagnostic Radiology attended 93.5% of the meetings
- Pathology attended 100% of the meetings

## **CANCER REGISTRY SUMMARY FOR 2016**

In 2016, 223 cases were accessioned/entered in the CHWC cancer registry. There were an additional 42 patients provided subsequent or follow up care, making the total of patients that were treated by our facility 265. Of those 265 patients, 223 were reportable in accordance to the State of Ohio and Multiple Primary and Histology policies.

223 cases were accessioned/entered in the CHWC cancer registry in 2016 and 100% of the cases were analytical. The top five cancer sites for CHWC are as follows:

### **CHWC**

Breast 76/223 – 34%  
Rectum/Colon 37/223—17%  
Prostate 30/223 – 13%  
Lung 23/223 – 10%  
Head/Neck 12/223—5%  
All other sites 21%

### **Extent of Disease at the Diagnosis - AJCC 7<sup>th</sup> edition Staging**

In situ	9
Stage I	69
Stage II	59
Stage III	33
Stage IV	43
Unknown	19
Total=	223 cases

### **FOLLOW UP/SURVIVAL ANALYSIS**

Total Cases for 2016 = 223

Total Cases with Follow up status = 223

100% Follow Up for all cases diagnosed in 2016

\*\*\*CRSTAR Site Specific Reports contain on the last three quarters of 2016 The above numbers were compiled by the CTR and represent the year of 2016 in its entirety. The following inserted reports are only of those cases diagnosed and treated in the last 3 quarters of the year.

**CP3R**  
**Cancer Program Practice Profile Report**  
 (Standard 4.4)

Due to low number of cases some measurements are not registering on the Cancer Program Practice Profile report. The following are the measures that had enough cases of how our facility responds to the measure.

<b><u>Breast</u></b>	Radiation administered within 365 days under 70 That receive breast conserving surgery	89%
	Tamoxifen, or third generation inhibitor, within 1 year For patients T1c-1B- III stage hormone receptor positive	52%
	Radiation therapy is recommended or administered following a mastectomy, within 1 year = 4 RLN	82%
	Image or palpated guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer	96%
	Breast conservation surgery rate for women with AJCC clinical stage 0, I, II,	84%
	Combination chemotherapy is recommended or admin. within 4 months with AJCCC T1c no or Stage 1B -3 w/ receptor negative breast cancer.	33%
<b><u>Cervix</u></b>	Radiation Therapy Completed within 60 days of initiation Of Radiation among women diagnosed with any stage of Cervical cancer	100%
<b><u>LUNG</u></b>	Surgery is not the first course of treatment for CN2 CM0	100%
<b><u>COLON</u></b>	12 lymph nodes were dissected with surgery	100%

**CONCLUSION**

All the other measures of the CP3R that didn't register or did not have a percentage/data, were measures in which there were not enough cases to register data sets or in other cases where our primary sites in which typical diagnosis occurs in late stages.

**2016**  
**The Community Hospital and Wellness Centers**  
**Year of Patient Centered Care**

(Standard 4.8)

In 2016, CHWC examined the notion of patient centered cancer care close to home should be the focus. There were new educational materials developed to ensure that all Cancer Patients were empowered to access individualized care.

Patient Care Navigators are appointed to all patients to guide them through diagnosis to each segment of their treatment. With the guiding hand of the Patient Care Navigators, the patient cancer care journey is a little less stressful, leading to a better understanding of their care throughout their treatment journey and their after care follow up appointments.

In addition to patient navigation, CHWC feels nutrition plays a large role in the journey of the Cancer Patient. Beginning in 2016, all radiation oncology patients receive nutrition consults as a CHWC standard of care.

CHWC believes care does not end with a cure but also with a Survivorship Care Plan. The Survivorship Care Plan is to provide the patient and future clinicians with the information of past care and future surveillance of the cancer patient for continuity in care.



## **The 22<sup>nd</sup> Annual Focus on Health And Colorectal Screening**

(Standard 4.1, 4.2)

CHWC has sponsored the Annual Community Outreach Event. During this educational event, clinicians explored what individuals can do to prevent colon cancer. Diet, exercise and receiving the recommended colon cancer screenings for their age, familial health history and current symptoms was discussed.

Screening guidelines are developed by the American Cancer Society and are a part of the NCCN treatment guidelines. In addition to the presentation of screening guidelines and healthy nutrition, a FIT test used for colorectal screening was given to each participant matching the screening criteria.

Seven participants matched the recommended screening parameters and seven participated in the FIT test, with seven screenings returning negative results. Continuing education credits were available for all nursing staff that participated in the event.

### **COMPREHENSIVE CANCER CARE CLOSE TO HOME**

CHWC is committed to providing the best cancer care close to home. As an organization, CHWC will provide opportunities for public screenings, education and prevention activities. The Commission on Cancer has mandated Cancer Prevention/Screening and educational activities be provided for the public each calendar year. Also care improvements will be inspired by public assessment as well as internal studies that examine and assess the following of NCCN guidelines in patient care.

These are some of the cancer services we provide or have an active referral process for those centers that are aligned with our quality of care initiatives.

Medical Oncology	Pastoral Care Services
Diagnostic Radiology	Oncology Nutrition /Dietician Services
Radiation Therapy	Rehabilitation Services
Hospice referral	Smoking Cessation
ACS Agency Assistance	Assistance with transportation
Medical Equipment referral	Patient Care Navigation
Psycho social services	Referral to Clinical Trials
Home care Referral	Counseling Services
Non clinical support services	Inpatient/Outpatient Surgery
General Support Groups	



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CHWC continues to partner with the American Cancer Society and the Williams County Health Department to provide additional services for those who are in need or are financially disadvantaged. The American Cancer Society and Williams County Health Department have been an integral part of our screening and outreach activities.

- Updated and approved Collaborative Action Plan: This will be document that will be utilized as a working document to improve ACS support CHWC program exceeding the COC Standards
- Provided Educational Materials/Support for CHWC Cancer Patients
- Psychosocial Services

#### **ACS REFERRALS BY COUNTY OF RESIDENCE**

WILLIAMS	64%
DEFIANCE	32%
PAULDING	4%

#### **ACS REFERRALS BY CANCER SITE**

BREAST	53%
LUNG	13%
OTHER	34%



## COLLABORATIVE ACTION PLAN REPORT FOR 2016

### Program Referrals

Reach to Recovery	9
Hope Lodge/Lodging	12
Transportation	12
Information	15
Support Group	10
Personal Health Mgrs	2
Look Good Feel Better	7
Wigs	7

## **A BIGGER PICTURE OF HEALTHCARE FOR 2016**

### **TOBACCO CONTROL**

FDA Deeming rule takes affect in order to assert its authority over all tobacco products. Including electronic cigarettes. This final regulation puts in place a number of strong provisions that will help protect the public and regulate the industry. Tobacco companies are now unable to communicate unfounded health claims or handing out free product samples.

### **CANCER RESEARCH, PREVENTION AND EARLY DETECTION**

On September 8, 2016, the American Cancer Society and the Alliance for Childhood cancer released the most current information in regards to pediatric cancer. Clinical trials, drugs, treatments and advancements were all brought together in a comprehensive report.

### **QUALITY OF LIFE BILL**

The House of Energy and Commerce Committee held a hearing and reviewed five bills, including ACS CAN priority legislation. HR 3119. The Palliative Care Hospice Education and Training act. (PCHETA)

### **HEALTHY EATING AND ACTIVE LIVING**

On May 20<sup>th</sup>, First Lady Michelle Obama announced the release of final regulations from the Food and Drug Administration. The labeling standards are supposed to include the new nutritional findings. Nutrition labels have not been changed since the early 1990s. All legislated food label changes must be incorporated on food packaging by July 2018.

### **NATIONAL REPORT NOW AVAILABLE**

The report "How Do You Measure Up" is now available. This report highlights the access to Medicaid sponsored breast and cervical screenings, as well as colorectal screenings. A full copy of the report is available at [www.ascan.org](http://www.ascan.org). You may also contact your local ACS manager for a report copy.

### **MASSIVE PETITION DELIVERY**

ACS CAN staff and volunteers presented over 4,000 petitions to Senator Robert Portman's office on August 19, 2016. These efforts are to urge the Senator to support PCHETA legislation.

### **TOBACCO 21**

This action continues to pick up support for the checks and balances for those who sell tobacco products not to the those under the age of 21. ACS CAN are cautiously optimistic that an ordinance of restriction will be proposed in the Fall of 2016

### **GENERAL AND PALLIATIVE CARE**

State Representative Sarah La Tourette and ACS CAN are in the process of constructing a bill on Palliative Care research and development.

