



Centura Health Cancer Network

2016 Annual Report



Centura Health is a leading provider of cancer care in Colorado and western Kansas. Across the cancer continuum from screening to diagnosis, treatment and survivorship, our cancer teams provide exceptional and personalized care in your local community.



Centura Health Cancer Network



Expert care, close to home

As the only Cancer Care Network in Colorado awarded accreditation by the American College of Surgeons (ACoS) Commission on Cancer (CoC), Centura Health provides expert cancer care and specialists that offer the most advanced tools in the fight against cancer. From screenings that detect the earliest signs of cancer to innovative treatment options offering superior outcomes, our cancer care team is committed to providing the best care possible, right in your local community.

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Mission & Values

The Centura Health Cancer Network (CHCN) is committed to building a community of cancer care professionals who embrace evidence-based practice, quality improvement, community service and clinical research.

CHCN strives to be the preferred, value-based provider of services across the spectrum of cancer care, from prevention and screening, through diagnosis and treatment, to survivorship and palliative care.



About Centura Health Cancer Network

Our integrated approach brings together leading-edge technology and capabilities such as surgery, radiation, chemotherapy and immunotherapy, with complementary therapies including nutritional support, mind-body medicine, physical therapy, pain management and spiritual care. We connect you with a team of the greatest hearts and minds including surgeons, medical oncologists, radiation oncologists, genetic counselors, nurse navigators, cancer registrars, social workers, clinical research nurses and specialists with unimpeded access to clinical trials that provide the latest in treatment options for all types of cancers.

Our network includes nine accredited cancer centers and seven accredited breast centers recognized as leaders in improved quality of care through prevention, screening, early diagnosis, staging, rehabilitation, support services and more. We're here to give cancer the fight of its life.

- Penrose Cancer Center, Colorado Springs, CO
- Porter Cancer Care, Denver, CO
- Mercy Regional Medical Center, Durango, CO
- St. Anthony Cancer Center, Lakewood, CO
- Littleton Adventist Hospital, Littleton, CO
- Longmont United Hospital Cancer Center, Longmont, CO
- The Cancer Center at Parker Adventist Hospital, Parker, CO
- Dorcy Cancer Center at St. Mary Corwin, Pueblo, CO
- St. Anthony North Health Campus, Westminster, CO

Centura Health is the only accredited integrated Cancer Care Network in the state of Colorado. The American College of Surgeons has awarded the Commission on Cancer Network Accreditation to Centura continuously since 2012. All Radiation Oncology facilities are accredited by the American College of Radiology (ACR) and seven Centura Health Breast Centers are also accredited by the American College of Surgeons for breast care quality.



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OF THE AMERICAN
COLLEGE OF SURGEONS



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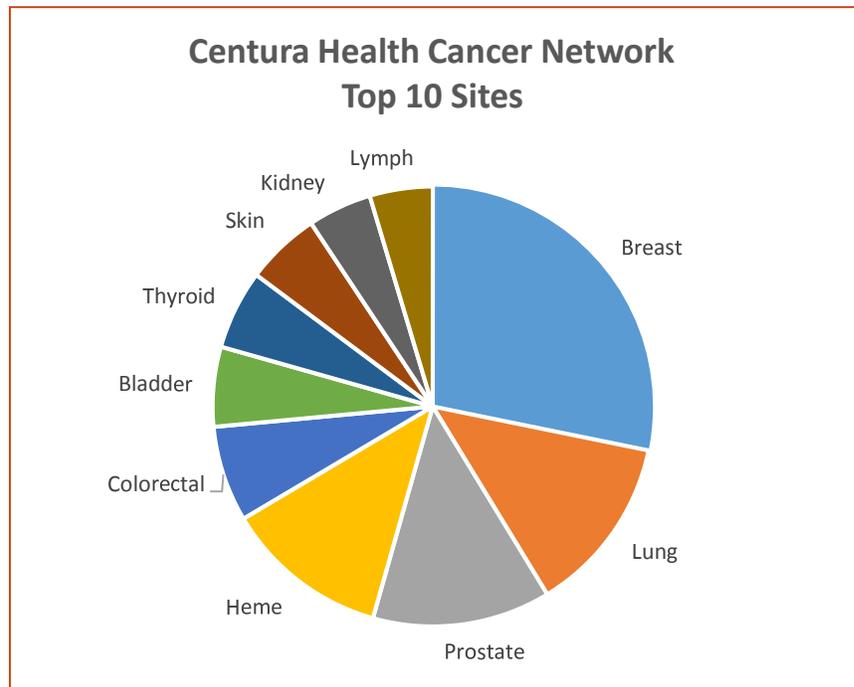
Cancers We Treat

Centura Health provides quality care for virtually all forms of cancer, with compassion and care in your local community. We care for the whole person — mind, body, and spirit — with the most advanced technology available and a focus on creating an environment of healing specifically for your individual needs.

Clinical Trials

Patients of CHCN are offered a variety of options for participation in clinical trials. These may include trials of new treatments sponsored by the National Cancer Institute (NCI) or pharmaceutical companies, registries designed to track patient outcomes, or even analysis of tumor specimens for biologic and genomic characteristics to populate large databases for future analysis.

CHCN has a commitment to make NCI clinical trials available for patients at all Centura oncology facilities. An estimated 85% of U.S. cancer patients are diagnosed at their local community hospitals, but many leave their communities in order to seek and receive the most advanced treatment. Through CHI Oncology Research Alliance (CORA) and NCI's Community Oncology Program (NCORP), Centura brings NCI clinical trials to its patients in community cancer centers, and our enrollment rates far exceed the national average of 2%.



Less than 2%
of patients diagnosed
with cancer
participate in a
clinical trial in the
United States.

Clinical Trials	Penrose	Porter	SAH	SMC	SAN	MRMC	PKR	LAH
Percentage of Patients Accrued in Clinical Trials in 2016	14%	1.5%	3%	7.5%	6%	2%	4%	4%

As a network, CHCN accrued **8.2%** of patients (analytic cases) to a treatment, prevention, screening, or genetics clinical trial in 2016, **exceeding** the national average.

CHCN's Reach in 2016:

24 COMMUNITY PARTNERSHIPS

50 HEALTH FAIRS REACHING OVER **7000** INDIVIDUALS

20 PREVENTION PROGRAMS REACHING OVER **3700** INDIVIDUALS

26 SCREENING PROGRAMS REACHING OVER **26,000** INDIVIDUALS

Prevention, Screening & Early Detection

Cancer is the second leading cause of death in the U.S., and CHCN recognizes the power of prevention and early detection. Programs throughout our communities focus on high-risk populations and providing the prevention, screening and early detection needed to catch cancer at its earliest, most treatable stages.

In addition to providing numerous free community screenings and educational events throughout the year, CHCN offers programs designed to encourage and remind patients of the following screening services available at all nine accredited facilities:

- Mammography
- Lung Cancer Screening
- Cervical Cancer Screening
- Colorectal Cancer Screening

*Penrose-St. Francis and St. Mary-Corwin performed over **200** FREE mammograms and Pap tests, over **300** head and neck screenings, and over **100** skin screenings in 2016.*



*Littleton Adventist, Parker Adventist and Porter Hospitals provided over **700** cancer screenings to community members.*

Education & Outreach

To increase awareness of cancer prevention, screening and early detection, CHCN facilities offer community outreach education including:

- Ways to decrease the risk of developing cancer through prevention, avoiding high-risk behaviors and early detection
- Self-examination and symptom-identification techniques
- Screening guidelines for the public
- Access to community resources for early detection
- Hereditary risk evaluations
- Meeting cultural, ethnic and religious needs of high-risk groups.

In 2016, CHCN committed to the American Cancer Society's "80% by 2018" colorectal cancer screening initiative to increase statewide colorectal screening.

Comprehensive Cancer Treatment

From diagnosis to survivorship, cancer has a profound effect on patients and their loved ones. A battle with cancer requires more than just exceptional care for physical health; it requires great emotional and spiritual strength, and having support is essential. That's why Centura Health offers a wide range of support services to help patients through their cancer experience, from diagnosis to treatment and beyond. CHCH provides the best in nurse navigation, multidisciplinary and evidence-based approach, genetic counseling, newest technologies and specialty physicians, and integrative therapies.

Nurse Navigation

CHCN's Nurse Navigators provide specialized, intentional, proactive guidance for those diagnosed with cancer and their families. They provide education on evidence-based treatments, ultimately removing barriers and improving outcomes through providing timely care, facilitating transitions and coordinating resources, all with a focus on the patient's well-being.

DID YOU KNOW?

CENTURA CANCER NETWORK'S

26 ONCOLOGY NURSE

NAVIGATORS PROVIDE EXPERT SPECIALTY CARE TO PATIENTS WITH BREAST, LUNG, GASTROINTESTINAL, GYNECOLOGIC, HEAD & NECK, NEURO, AND OTHER CANCERS.

Centura's experienced and robust Oncology Nurse Navigation program has seen the following positive outcomes:

- Early detection of cancer
- Expedited treatment start
- Improved patient outcomes:
 - Overall survival
 - Decreased unplanned hospitalizations and ED visits
 - Decreased costs to the patient
 - Improved timeliness of care
 - Minimized or prevented complications
- Improved patient satisfaction
- Improved systems of care
- Contributions towards achievement of Centers of Excellence accreditation
- Enhanced alignment with national standards

Multidisciplinary Conferences

A centerpiece of the CHCN philosophy is that cancer is most appropriately managed with a plan of care generated by skilled teams of professionals dedicated to the evidence-based management of a given tumor type. Toward this end, CHCN conducts multiple tumor conferences focused upon breast cancer, thoracic cancers, gastrointestinal cancers, hematologic malignancies, gynecologic cancers, and central nervous system cancers. The conferences bring together the expertise of physicians, nurses, clinical trials personnel, genetic counselors, social workers, cancer registry personnel, palliative care experts, and others.



In 2016, over 450 multidisciplinary conferences were held across the network, discussing over 2700 individual patients.

Genetic Counseling

Our genetic counselors provide individual assessment, counseling and testing to determine an individual's risk of inherited cancers. Their expertise guides the patient to participate in appropriate screening, early detection and preventive interventions to minimize their chances of developing cancer. Our counselors:

- Estimate risks for developing certain diseases or cancers
- Estimate the risk of an inherited cancer in a family
- Discuss ways to screen for and prevent cancer based on risks
- Review the impact of genetic lab testing
- Determine which genetic testing is appropriate, if any
- Provide treatment options and support resources



SIX Centura Health Genetic Counselors consulted with over 2500 patients in 2016.

Quality Study—Genetic Counseling in Ovarian Cancer

The National Comprehensive Cancer Network recommends that all women diagnosed with ovarian cancer be offered genetic counseling, yet nationally, only 20% of ovarian cancer patients pursue genetic testing. The results of genetic testing in ovarian cancer patients can impact treatment decisions, surveillance activities, as well as prevention options for family members of those affected. Although the CHCN rate was significantly better than the national average, the CHCN Cancer Committee formed the Ovarian Cancer Quality Improvement Task Force to set forth a goal to increase the number of newly diagnosed ovarian cancer referrals to at least 50%.

A position statement and goal were established to encourage the referral of all newly diagnosed ovarian cancer patients to genetic counseling within 6 months. The intent of the measure was to improve the number of individuals seen for genetic counseling and offered appropriate genetic testing. This initiative was implemented across all facilities within the Centura Health Cancer Network.

*Genetic testing is recommended for **ALL** women with ovarian cancer, but **only 20%** of ovarian cancer patients in the United States pursue genetic testing.*

Summary of Outcome: Centura Health surpassed the goal of 50% of ovarian patients referred or received genetics services. Centura Health also surpassed the goal of timeliness to genetics services being less than 6 months (or 180) days after diagnosis.

60.6% of Centura's ovarian cancer patients were referred or received genetics services **within 140 days** of diagnosis.

CoC Cancer Program Practice Profile Reports (CP3R) Quality Measures--Breast and Colorectal Cancer

The Commission on Cancer (CoC) has defined several quality measures for hospitals with accreditation status. Tracking these measures provides an opportunity for continuous practice improvement to achieve high quality care for our patients.

In the last year of available data for analysis, CHCN surpassed the required quality benchmarks for the breast and colorectal standards listed below.

Quality Measure	CHCN			CoC / NCDB
	2012	2013	2014	Required Performance
<i>Breast Cancer</i>				
Breast conservation surgery rate for women with AJCC clinical stage 0, I or II breast cancer.	54.2%	57.1%	57.5%	Not Yet Established
Image or palpation-guided needle biopsy (core or FNA) of the primary site is performed to establish diagnosis of breast cancer.	82.9%	92.3%	94.7%	>=80%
Radiation is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast-conserving surgery for cancer.	96.9%	90.7%	96.0%	>= 90%
Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with >= 4 positive regional lymph nodes.	92.9%	97.3%	100%	>= 90%
Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1c N0 M0 or Stage II or III ERA & PRA negative breast cancer.	95.2%	92.9%	97.1%	>= 90%
Tamoxifen or other third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c N0 M0, or Stage II or III ERA and/or PRA positive breast cancer.	95.0% (11/12)	92.0% (15/17)	96.4% (19/21)	>= 90%
<i>Colorectal Cancer</i>				
Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer.	97.1%	88.9%	95.6%	>= 90%
At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.	80.0%	100%	100%	>= 80%
Radiation therapy is considered or administered within 6 months (180 days) of diagnosis for patients under the age of 80 with clinical or pathologic AJCC T4N0M0 or Stage III receiving surgical resection for rectal cancer.	93.3%	82.9%	93.5%	>=85%

CHCN Cancer Committee Membership

Our Network Cancer Committee is comprised of leaders touching all aspects of cancer care, representing all nine accredited cancer centers in the network. These dedicated professionals meet regularly to make certain that our program meets or exceeds the standards of our accrediting body, the American College of Surgeons, Commission on Cancer. Our 2016 members were:

Membership	Name (Primary Member/ Alternate=A)
Committee Chair	James Young, MD
Cancer Liaison Physician (CLP)	Jeffrey Cross, MD /Chris Oliver, MD
Surgery	Toni Green-Cheatwood, DO/Glenn Bigsby, MD
Diagnostic Radiology	Raymond Mencini, MD/Jeffrey Quam, MD
Medical Oncologist	James Young, MD/Eiko Browning
Radiation Oncologist	Darlene Bugoci, MD/Jonathan Clark, MD
Pathologist	Erin Merboth, MD/David Newton
Oncology Nurse	Kelly Kovar, RN/Kathy Young, RN
Social Worker	Dannis Schanel/ Vicki Poploski
Certified Cancer Registrar – Registry QA Coord	Shawn Bonner/Jeremy Goins, CTR
Certified Cancer Registrar – Cancer Conf Coord	Tanya Dorobiala, CTR/Nancy Caldwell, CTR
Performance Improvement - Quality Mgmt Coord	Andrew Tanner, MD
Community Outreach Coordinator	Samantha Lippolis/Peggy Thomas, RN
Clinical Research Coordinator/Representative	Sheryl Giambartolomei, RN/Jodi Harr, CTR
Psychosocial Services Coordinator	Lorraine Hoyle, RN
Palliative Care/Hospice Nurse/Administrator	Inna Lozinskaya, MD/Carrie McDermott, MD
Genetics Counselor	Kate Crow, MS, CGC /Jeanine Ashley
Corporate Administrator	Lynn Smiley /Connie Wood
Pharmacist	Robin Mower, RPH
American Cancer Society	Hannah Nein/Jackie Woods
Registered Dietician	Amber Thomas, RD
Navigation	Teresa Labovich, RN, MSN, OCN
Rehabilitation	Andi McDonough, MPT
Pastoral Services	Glenn Sackett, Chaplain