Cleveland Clinic
Akron General
McDowell Cancer Institute

2016
Public Reporting of Outcomes

“Rooted in Strength”
Find out more inside.
Program outcomes are distributed to the public each year to demonstrate the results of activities completed by our cancer program as required by the American College of Surgeons (ACOS) Commission on Cancer (CoC) Standards for Accreditation. CoC accreditation is granted to facilities that are committed to providing the best in cancer care and demonstrate compliance with CoC Eligibility Requirements and Standards. This year’s report includes outcome information based on Patient Outcomes: Standard 4.1 – Cancer Prevention Programs, Standard 4.2 – Screening Programs and Standard 4.5 – Quality Improvement Measures.

We are also including our annual art therapy project (cover page) and an update from our art therapist, who began working with our patients in 2013.

If you have any questions or feedback about this report, feel free to call us at 330.344.HOPE (4673).

Prevention & Screening Programs (Standard 4.1 & 4.2)

Skin Cancer Screening, Prevention and Education

We know that skin cancer is on the rise and can be impacted by modifiable lifestyle factors. In conjunction with the American Academy of Dermatology (AAD) and the Cleveland Dermatological Society, we offered a free skin cancer screening along with education about the importance of sun protection, early detection and risk factors. We followed AAD, American Cancer Society (ACS) & American Society of Clinical Oncology (ASCO) guidelines. Our hope is to decrease the number of skin cancers diagnosed and to decrease the number of patients with late-stage disease.

May 7, 2016
in the Akron General Ambulatory Care Center from 8 a.m. – 1 p.m.
• 101 adults screened
• 12 presumptive diagnoses were detected and referred for follow-up
• Six area dermatologists volunteered their services
• 10 caregivers from Cleveland Clinic Akron General assisted with the event

Our participation was slightly lower than in 2015, but percentage of presumptive diagnoses remained similar: 14% in 2015 and 12% this year. Building on 2015, a pre- and post-test focusing on sun exposure and skin protection habits due to the education received at the screening showed an 8% increase in knowledge and awareness. Attendees who completed the survey – 152 out of the 210 – said they would make changes based on what they learned during their screening.

Breast Cancer Screening, Prevention and Education

National Comprehensive Cancer Network® (NCCN®) and ASCO guidelines were followed for determining women who needed a breast exam and/or mammogram. Prevention education was provided to make women aware of the signs and symptoms of breast cancer as well as the importance of living a healthy lifestyle and risk factors associated with breast cancer. Our hope is to promote early diagnosis of breast cancers and to decrease the number of patients with late-stage disease. A pre and post-test to question and educate participants’ knowledge of risk factors associated with breast cancer was included at the October 8 event.

May 14, 2016
in the Ambulatory Care Center from 9 a.m. – 12 noon
• Seven women received a clinical breast exam
• Five screening mammograms completed and one needed diagnostic testing, which was completed
• Woman who had diagnostic testing had normal results
• One woman not due for her mammogram and completed it in June
• Results for all women were normal and are returning to screening mammograms
• Navigation: All women being followed by our Reflections Breast Center
October 8, 2016
at the Arlington Church of God Health Luncheon from 10 a.m. – 2 p.m.

- 56 participants participated in a lecture on breast cancer prevention, risk and treatment
- All completed a post-quiz to check their knowledge of breast cancer risk factors and prevention
- Results were reviewed afterward in the group setting with a show of hands
- 85% of women only missed 0-2 of the questions about preventative screening, diagnostic testing and treatment of breast cancer
- After the education part, women were offered a breast exam by 2 of our breast surgeons
- 10 women received a clinical breast exam
- Nine had normal findings
- One completed diagnostic testing & had negative results
- Five had completed a screening mammogram within the year
- Five scheduled their mammogram appointment and had negative results
- One of those scheduled did not complete her mammogram and has not answered repeated phone calls to reschedule
- Navigation: All women who participated in the screening portion are being followed by our Reflections Breast Center

Thanks to the continuous and generous support from the Stephen A. Comunale, Jr. Family Cancer Foundation, this year’s group art therapy project made by cancer patients and their families at the McDowell Cancer Institute has been completed. The Comunale Foundation has been sponsoring our art therapy projects and annual patient art exhibit since 2013. Three other completed projects which included, Wings of Hope, Pieces of Peace and Ribbons of Courage are displayed in the lobby of the McDowell Cancer Institute.

The newly completed art therapy project, Rooted in Strength, consists of a tree made from twisted wire and paper leaves. Patients and their family members were asked to decorate a leaf that symbolized strength, and then the leaves were added to the tree. Nearly 70 patients and family members participated. The completed project is framed and on permanent display in the lobby of the Infusion Center at the Health & Wellness Center, Bath. It is the art therapist’s goal to have a piece of art made by patients in the lobby at each of our Infusion Centers located within the Health & Wellness Centers in Bath, Green and Stow where cancer patients receive treatment.

The new art therapy project called Forging Ahead has been started and will soon be available for patients to start decorating. The project consists of a sailboat, and will focus on moving forward after treatment. For more information, the art therapist can be reached at 330.344.7844.

- There were 415 art therapy visits for 2016

Amber Smith, MA, ATR-BC, PC
Board-Certified Art Therapist
The CoC requires accredited cancer programs to treat cancer patients according to nationally accepted quality improvement measures indicated by the CoC reporting tool, Cancer Program Practice Profile Reports (CP³R). The function of the quality measures is to monitor the need for quality improvement. Each calendar year, the Estimated Performance Rates (EPR) is met for each quality improvement measure as defined by the Commission on Cancer. The following table shows that we have exceeded the CoC Standards EPR in all 5 Quality Improvement Measures for the latest data published (2014 CP³R).

<table>
<thead>
<tr>
<th>Annual Evaluation of Quality Improvement (2014 CP³R)</th>
<th>CoC Standards EPR</th>
<th>Cleveland Clinic Akron General EPR</th>
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</thead>
<tbody>
<tr>
<td>Breast - Image or palpation-guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer.</td>
<td>80%</td>
<td>100%</td>
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<tr>
<td>Colon - At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.</td>
<td>85%</td>
<td>89.20%</td>
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<tr>
<td>Gastric - At least 15 regional lymph nodes are removed and pathologically examined for resected gastric cancer.</td>
<td>80%</td>
<td>100%</td>
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<tr>
<td>Lung - Systemic chemotherapy is administered within 4 months to day preoperatively or day of surgery to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic lymph node-positive (pN1) and (pN2) non-small cell lung cancer.</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>Lung - Surgery is not the first course of treatment for cN2, M0 lung cases.</td>
<td>85%</td>
<td>100%</td>
</tr>
<tr>
<td>Rectum - Preoperative chemotherapy and radiation are administered for clinical AJCC* T3N0, T4N0, or stage III; or postoperative chemotherapy and radiation are administered within 180 days of diagnosis for clinical AJCC* T1-2N0 with pathologic AJCC* T3N0, T4N0, or stage III; or treatment is recommended; for patients under the age of 80 receiving resection for rectal cancer.</td>
<td>85%</td>
<td>100%</td>
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* American Joint Committee on Cancer
2016 Types of Cancer
Total sites: 1433

Data finalized as of June 30, 2017