

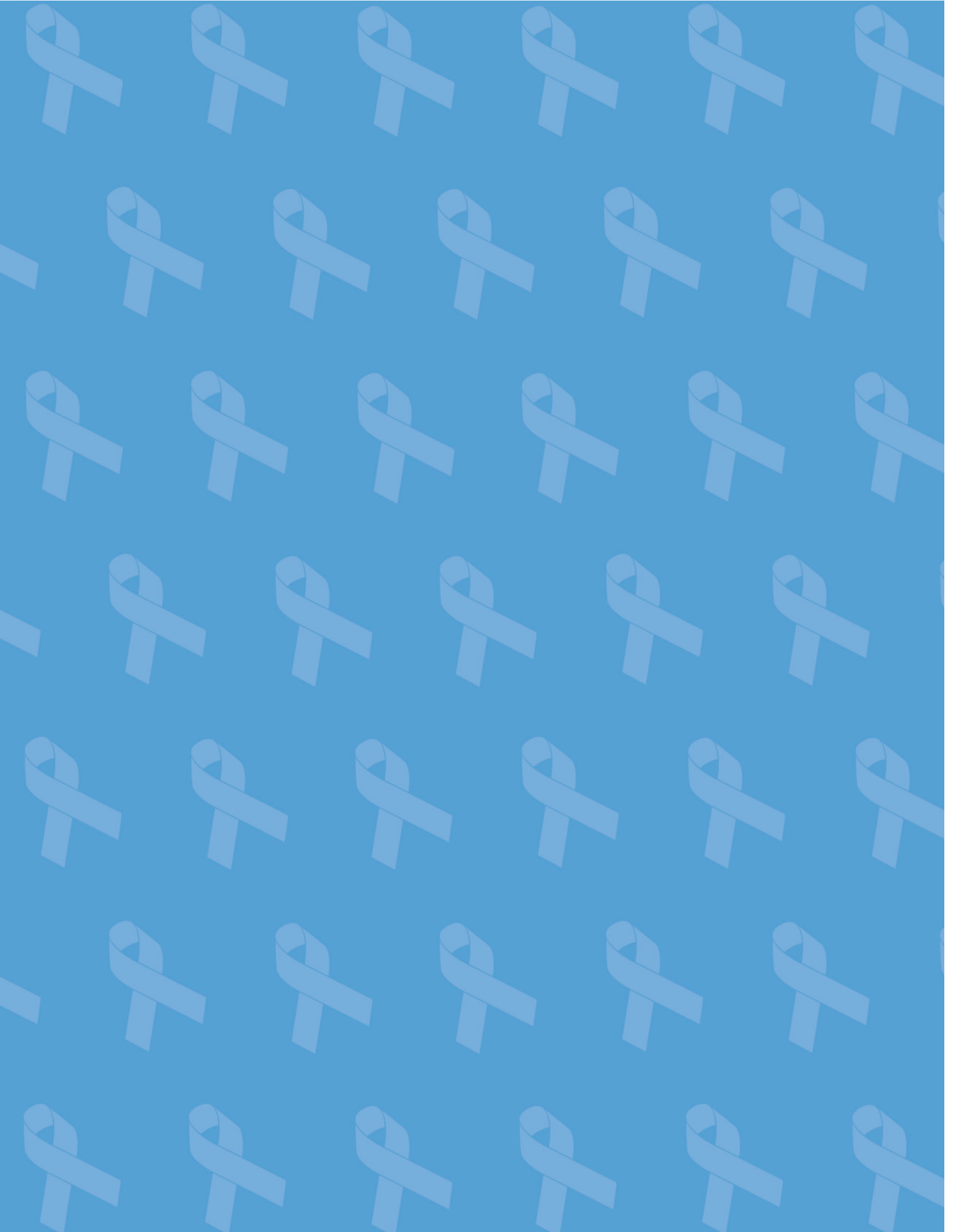
# JOHNSTON HEALTH CANCER SERVICES ANNUAL REPORT

 **JOHNSTON**  
UNC HEALTH CARE

2017

Statistical Data From 2016





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## Johnston Health Cancer Care Committee Members 2017

**Dr. Russell Anderson**  
Medical Oncologist  
Cancer Conference Coordinator\*

**Dr. Padma Kamineni\***  
Medical Oncologist

**Dr. Debra Harr**  
Radiation Oncologist  
Chair, Cancer Committee

**Dr. Daniel Oh\***  
Radiation Oncologist

**Dr. Craig Carter**  
Vascular & Thoracic Surgeon  
Surgeon

**Dr. Dennis Koffer\***  
General Surgeon  
Surgeon

**Dr. Jeffery Jones**  
Interventional Radiologist  
Diagnostic Imaging Radiologist

**Dr. Jonathan Lozevski\***  
Interventional Radiologist  
Diagnostic Imaging Radiologist

**Dr. Leslie Taylor**  
Pathologist  
Cancer Liaison Physician

**Dr. Cyrus Manavi\***  
Pathologist

**Bryant Washington**  
RN, BSN, MHA, MBA  
Director Cancer Center  
Cancer Program Administrator

**Tracey Carson\***  
RN, BSN, MHA  
Admin. Director Patient Care Services  
Cancer Program Administrator

**Amy Brown**  
Cancer Accreditation Analyst  
Cancer Conference Coordinator

**Jay Renfrow, PharmD**  
Oncology Pharmacist  
Clinical Research Coordinator  
Pharmacy Services

**Mike Bridle, Rph\***  
Clinical Research Coordinator  
Pharmacy Services

**Kathy Foote, CTR**  
Manager Cancer Registry  
Cancer Registry Quality  
Coordinator

**Charity Pate, BSW**  
Social Worker  
Psychosocial Services Coordinator

**April Barbour-Matthews, MSW\***  
Social Worker  
Psychosocial Services Coordinator

**Cynthia Holloman, RN**  
Director of Quality  
Quality Improvement Coordinator

**Vera Barnes, RN\***  
Quality Improvement Coordinator

**April Culver**  
VP of Planning and External Affairs  
Community Outreach Coordinator

**Leah Johnson\***  
Corporate & Community Outreach  
Coordinator

**David Dennis, RN**  
Director of Home Care & Hospice  
Palliative Care Services

**Melanie Joyner, RN\***  
Palliative Care Services

**Regina Sherman, RN-ADN**  
Oncology Coordinator  
Oncology Nursing Leadership

**Denise DeBlois, RN\***  
Oncology Nursing Leadership

**Melinda Ferguson, RN**  
Patient Navigation

**William Bennett**  
Director of Radiology  
Radiology Services

**Josh Hoover\***  
Manager of Radiology  
Radiology Services

**Vanessa Narron, R-RT**  
Manager of Radiation Oncology  
Radiation Oncology Services

**Shawn Leagan, RN\***  
Radiation Oncology Services

**Kelli Wallace, RD**  
Nutrition Services

**Kathy Rikard, RD\***  
Nutrition Services

**Wanda Howell**  
Director of Rehabilitation  
Rehabilitation Services

**Reverend Greg McClain**  
Spiritual Care & Volunteer Services

# Cancer Care Program Accreditation Overview

The American College of Surgeons Commission on Cancer (ACoS-CoC) is a consortium of professional organizations dedicated to improving survival and quality of life of patients with cancer through standards setting, prevention, research, education, and the monitoring of comprehensive care. Cancer Accreditation is granted to facilities that have voluntarily committed to provide the best in cancer diagnosis and treatment and is able to comply with the established CoC standards.

The CoC challenges cancer programs to enhance the care they provide by addressing patient-centered needs and measuring the quality of the care they deliver against national standards. Johnston Health was awarded Cancer Accreditation in June, 2015 by the CoC as a nationally recognized cancer treatment center for enhancing our care and treatment of cancer patients and providing the framework to improve the quality of patient care through various cancer-related programs that focus on the full spectrum of cancer care, including; prevention, early diagnosis, cancer staging, optimal treatment, rehabilitation, life-long follow-up for recurrent disease and end-of-life care. By participation in the CoC Accreditation Program, Johnston Health

demonstrates its commitment to meet the rigorous standards and improve patient outcomes across all domains of care: access and service, satisfaction and well-being, quality of care and cancer outcomes.

Johnston Health is provided with National recognition, access to the National Cancer Data Base, and educational and training opportunities, which ensures that patients with cancer will be offered and provided with a full range of diagnostic, treatment, and supportive services with high-quality, patient-centered care through multidisciplinary approaches.

Johnston Health is proud to offer such comprehensive cancer services to patients in Johnston County through our Smithfield and Clayton cancer centers. We have joined with UNC REX Healthcare and Duke Medicine to bring the best physicians, technology and treatment to our patients, right here at home. We offer screenings, diagnostic tests, chemotherapy treatments, radiation therapy treatments, surgery options, and more to design a comprehensive treatment program for each patient. Our next Cancer Accreditation Survey by the CoC will be June 2018.

## Meet Our New Cancer Center Director

Bryant Washington joined the Johnston Health Oncology team in June of this year, bringing with him a diverse background from his 22 years of nursing experience. Bryant has had experience in both inpatient and outpatient health care settings, and most recently spent some time in the health care technology sector.

Bryant began his oncology pursuits as a Nurse Navigator specializing in Thoracic Oncology. Later, Bryant became Coordinator of the Cancer Specialty Center at one of our sister organizations, ultimately moving into a management role. Bryant's previous oncology experience centered largely on program growth and development of support services.



**Bryant Washington**  
*Cancer Center Director*

# A Message from the Johnston Health Cancer Care Committee Chair

The primary charge of the Johnston Health Cancer Program is to develop and provide oversight of its comprehensive cancer care and services for residents of Johnston and surrounding counties.

In 2013, the Johnston Health Cancer Care Committee was established to bring a formalized approach to the individualized, comprehensive and multi-disciplinary treatment and care of cancer patients by initiating the process of accreditation by the American College of Surgeons', Commission on Cancer. The primary goal of the Commission on Cancer is to improve the survival and quality of life for cancer patients through standard-setting, prevention, research, education and the monitoring of comprehensive quality care. The opportunity, means and personnel for accomplishing these goals were present within the Johnston County community which included medical, radiation, and surgical oncology, diagnostic radiology and pathology as well as professionals in oncology nursing, nutrition, social work and pharmacology.

One of the keys to accomplishing our committee's goal was to hold regular multi-disciplinary conferences (tumor board meetings) to include all the oncologic specialties. Since 2013, these meetings have been held three times a month during which time we endeavor to review the information on hand for each patient, the need for further investigation(s) to make timely decisions regarding the appropriate therapy and support for the patient.

Over the past several years the Cancer Care Committee has continued to address the needs of the cancer patients we serve. We initiated a process to obtain Commission on Cancer accreditation and were accredited in 2015. This is a voluntary commitment by a cancer program that ensures patients will have access to services required to diagnose, treat and support patients with cancer.



**Dr. Debra Harr, MD**

It is a program which requires a commitment by Johnston Health as well as the time and energy of the many people involved in cancer care.

A Health Needs Assessment is conducted every three years by Johnston Health. The first assessment was conducted in 2013 and Johnston Health completed the second assessment in 2016. The Health Needs Assessment identified several factors adversely affecting the health of Johnston County residents. These factors included a low frequency of regularly scheduled PAP smears and mammograms,

high tobacco use, obesity and poor eating habits. As a result of our commitment to addressing the needs of the county, several initiatives have commenced including a Patient Navigation program for cancer patients, low-dose chest CT lung cancer screening program for former and current smokers, and 3-D breast mammograms made available to all patients as a method to minimize radiation dose to the heart in a patient requiring radiation for a tumor in the left breast.

Accreditation by the Commission on Cancer is the hallmark of a program's commitment to patient-centered cancer care. This is no more evident than in the commitment of the many members of the committee who are all concerned with improving the survival and quality of life for the cancer patient, contributing their own expertise to accomplishing our goals.

**Dr. Debra Harr, MD**

*Chairperson, Johnston Health Cancer Committee  
Radiation Oncologist*

# Cancer Liaison Physician Report



**Leslie Taylor, MD**  
*Cancer Liaison Physician*  
*Pathologist*

Breast cancer remains the most commonly diagnosed and invasive malignancy among women. Treatment innovations over the last twenty-five years have been made in surgery, chemotherapy and radiation therapy. The survival rates have improved along with the recognition that early diagnosis is the keystone of surviving this disease. Increased public awareness and higher rates of mammography have resulted in finding more cases of this disease at earlier, treatable stages. Likewise, proliferating knowledge about the effects of post-menopausal hormone therapy, obesity, exercise, smoking, and genetic factors have all combined to allow novel therapeutic approaches. Recognizing the consideration all of these variables requires a concerted team approach; comprehensive tumor boards have brought together all the professionals involved in patient care to tailor individualized programs for every person who is diagnosed with breast cancer.

At Johnston Health, our Cancer Committee has been accumulating all relevant data for each new breast cancer case and analyzing it on a yearly basis. For 2016, we had 92 new cases of carcinoma of the breast, the top site specific diagnosis for the year. Our statistics indicate that for 2016, 45% of our patients were either stage 0 or I; a group with a projected five year survival over 98%. For the 36% with stage

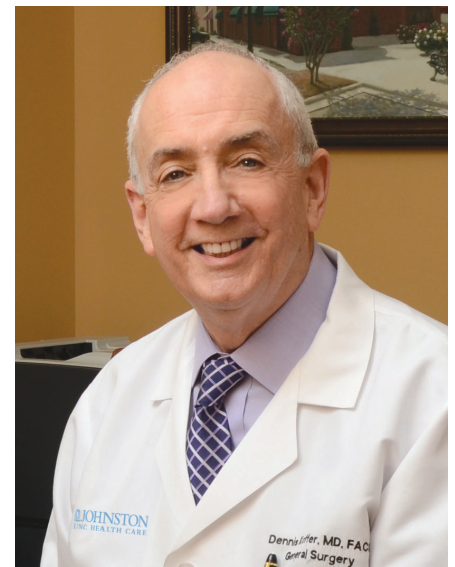
II disease, the five year survival is still expected to exceed 84%. Our incidences for this disease are consistent for those of North Carolina and the country as a whole. In reviewing each of these cases, we are proud to report that our treatment programs have been in accord with recommended strategies as outlined by the National Comprehensive Cancer Network.

While the effective treatment of breast cancer continues to improve both survival statistics and quality of life for our patients, early diagnosis is foremost in our assault. Even as we continue to provide the most comprehensive, current therapy, we expect that the trend towards discovering this disease at earlier stages will continue.

## Surgeon's Report

While the initial approach to the treatment of breast cancer is usually surgical, the surgeons at Johnston Health have benefitted from the expansion of services offered at our facility. The new 3-D mammography allows for the identification of more early-stage breast cancers. Most cancers can now be diagnosed with minimally invasive, needle biopsies reducing the number of trips to the operating room for our patients. As for the operations themselves, our surgeons increasingly are able to perform minimally invasive, breast-conserving surgery because of the two services described above. In addition, using increasing evidence-based decision making, our surgeons are more often able to minimize the amount of surgery needed under our patients' arms, sparing them pain, swelling, and other complications. Thanks to improvements in directed radiation therapy and genetically specified chemotherapy, the prognosis for patients with breast cancer continues to improve even along with these less debilitating procedures.

At Johnston Health, we have the personnel and expertise for expert care following evidence-based best practice standards. Patients no longer have to venture outside of Johnston County to receive excellent care.



**Dennis Koffer, MD**  
*General Surgeon*

# Breast Cancer Overview

Breast cancer is the 2nd most commonly diagnosed cancer (after skin cancer) in the world, and the leading cause of cancer death among women in the US. One in eight women will get breast cancer in their lifetime; although, it is more common later in life. (See the data for Johnston County in this report). Breast cancer is rare in men but does occur. Despite a rise in the incidence of cancer cases over the last two decades, the death rate has declined due to early detection and more effective treatments.

Breast cancer awareness and risk should be assessed with a health care provider starting at age 25 according to the National Comprehensive Cancer Network (NCCN) guidelines. Risk factors for women include a personal history of breast cancer, strong family history, previous breast exposure to radiation therapy and previous breast biopsies with high-risk features such as lobular carcinoma in situ or atypical hyperplasia. Average risk women should begin yearly mammograms at age 40. Women at higher risk might start 10 years before her youngest family member was first diagnosed with breast cancer and consider other screening methods such as ultrasound, breast MRI and genetic testing. Suspicious breast abnormalities may be biopsied by a surgeon or a radiologist.

Optimal therapy for breast cancer is evolving rapidly and requires multiple diagnostic and treatment modalities which are all available at Johnston Health. The Johnston Health compliance rate with national guidelines for treatment of breast cancer approaches 100%. Surgery for earlier stage cancers may consist of lumpectomy or mastectomy since survival with either option is equivalent. Lymph nodes under the arm are sampled at the time of surgery usually using the sentinel lymph node biopsy technique. The chance of curable outcome depends on whether or not cancer cells have already spread elsewhere in the body before the surgeon removes the identifiable cancer in the breast and lymph nodes. Unfortunately, individual cancer cells or small tumors (micro metastases) are usually undetectable with scans or other testing.

The chance of spread, however, is predicted by the



**Russell Anderson, MD**

cancer stage and other cancer cell characteristics; such as, the presence of estrogen receptors, Her-2 protein and other genes products which can be measured in the cancer cells (Oncotype Dx and similar gene expression tests). Cancer which has spread but is undetectable can sometimes be eradicated with radiation therapy, anti-estrogen therapy and chemotherapy. These are referred to as adjuvant therapies, given after the primary therapy (surgery) just in case cancer cells (undetectable by testing) remain in the body. Stage I (small tumors less than 2 cm), stage II (larger tumors or spread to a few lymph nodes) and stage III (even larger tumors or spread to many lymph nodes) are

usually treated with surgery. Chemotherapy may be used before or after surgery if the at-risk cancer cells have spread is estimated to be high enough. Radiation therapy may then be employed after surgery and chemotherapy. Anti-estrogen pills (such as tamoxifen or anastrozole) are usually given to patients with estrogen receptor-positive cancers after chemotherapy and radiation therapy (if they are used) for at least 5 years.

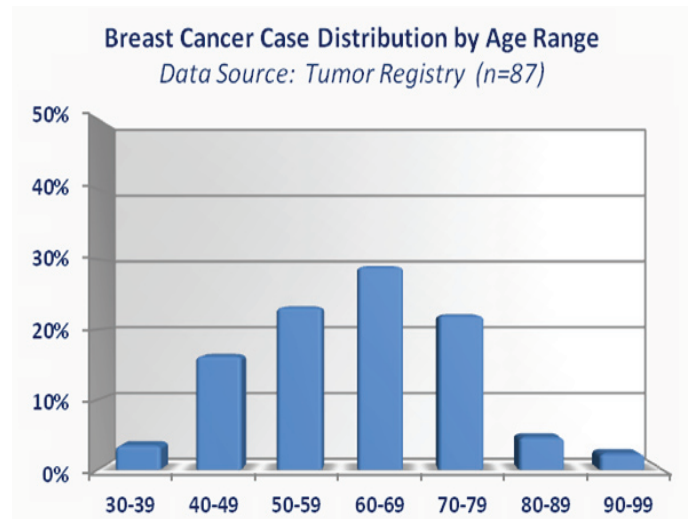
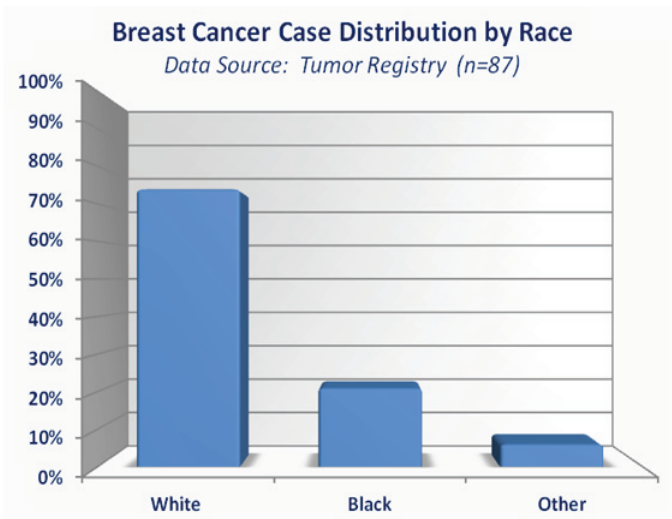
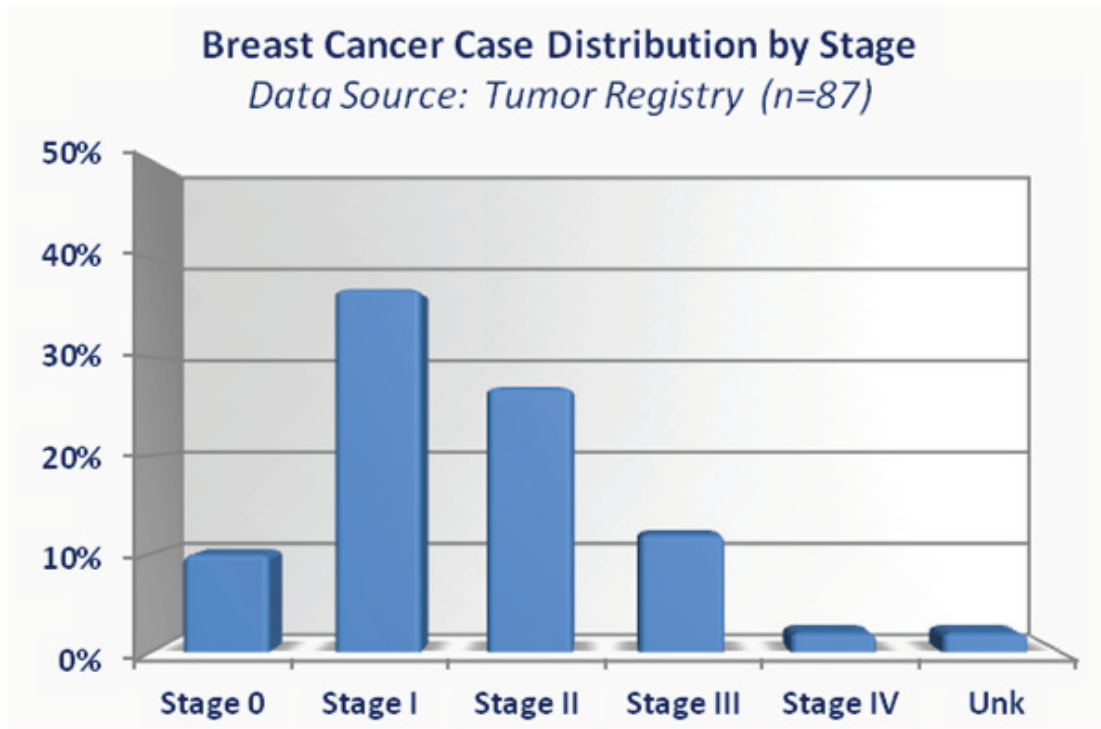
Stage IV breast cancer consists of cancer which has been confirmed by testing and/or physical exam to have spread (metastasized) to organs beyond the breast and lymph nodes. Stage IV cancer most commonly involves bone, lung and/or liver. It is usually incurable.

Nonetheless, many patients with stage IV cancer can live for years to even a decade or more with the help of anti-estrogen therapies and chemotherapy. More and more, newer targeted therapies which may have fewer side effects are also used. For example, Her-2 is the target for newer breast cancer drugs including trastuzumab (Herceptin), pertuzumab (Perjeta) and ado-trastuzumab emtansin (Kadcycla), which generally have fewer side effects than conventional chemotherapy and are available at Johnston Health.

**Russell Anderson, MD**

*Medical Oncologist*

# Breast - 2016 Site Review



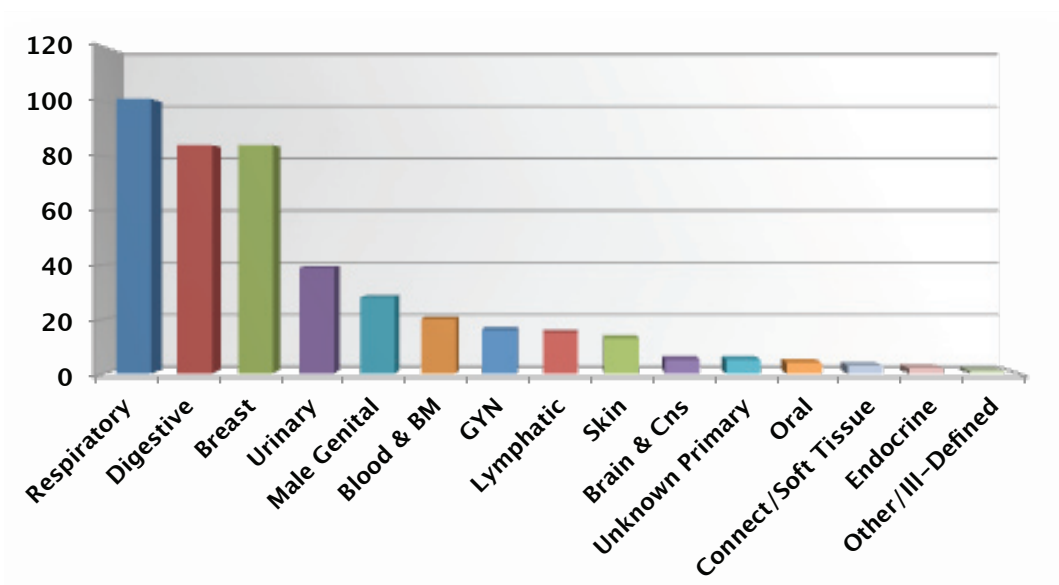
***Of the 84 total breast cancer cases for 2016, all were female except one.***



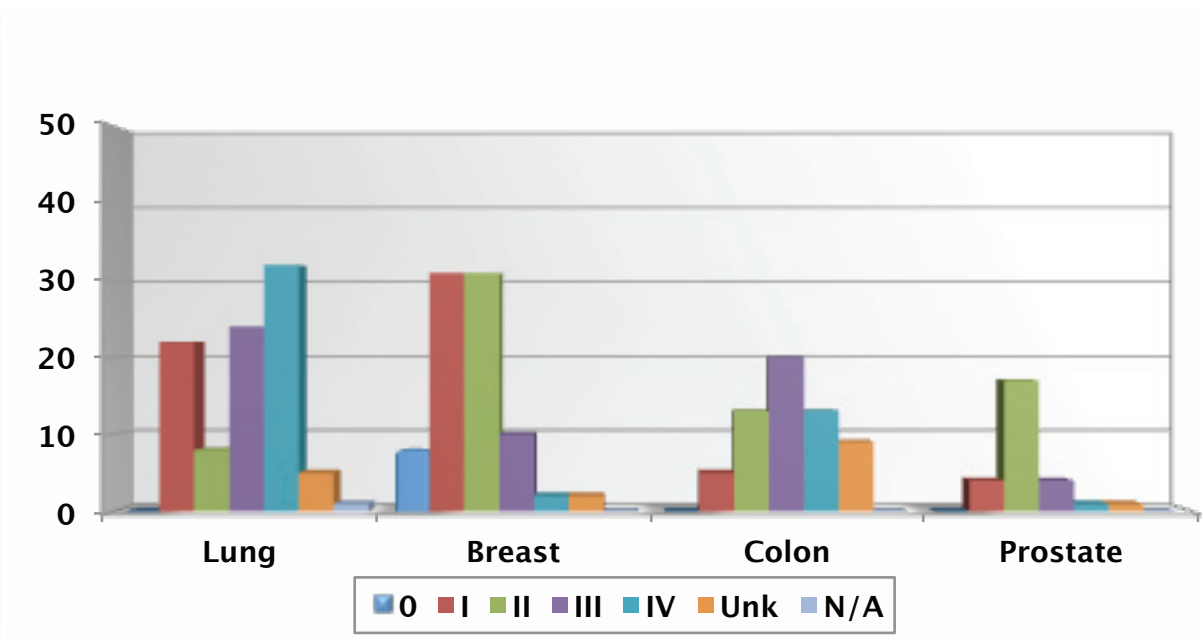
# Cancer Cases

## Primary Site Distribution & Stage Of Disease At Diagnosis

**Cancer Cases 2016: Primary Site Distribution by Volume**  
by Volume Data Source: Tumor Registry (n=420)



**Cancer Cases 2016: Stage of Disease at Diagnosis**  
Top 4 (n=420) Data Source: Tumor Registry



Treatment options depend on the stage of disease at diagnosis. One of the goals of the Johnston Health cancer program is to diagnose the cancer as early as possible to prevent spread to lymph nodes and surrounding tissues. The higher the stage, the more

advanced the disease. Screening programs, such as the low dose screening for lung cancer is helping to increase earlier diagnoses and reduce patients presenting at a more advanced stage, Stage IV, or already metastatic (distant spread) at time of diagnosis.

# Essential To The Team

## Advancing the Standard of Care Through Specialization, Leading-Edge Techniques and State-of-the-Art Technology

### Surgery

**Program Leader: Dr. Dennis S. Koffer**

**Department of Surgery**

#### Overview:

Surgery is used to both diagnose and treat cancer. In a diagnostic surgery, a tissue sample is collected to see if cancer is detected and, if so, to identify the type of cancer. Often surgery is the best treatment option for certain cancers. Our general surgeons and specialists have years of experience in diagnosing and removing malignant tumors. Also, our da Vinci robotic surgical system offers the least invasive option for patients with certain types of cancer.

### Diagnostic Radiology

**Program Leader: Dr. Jeff Jones**

**Vascular Interventional Radiology**

#### Overview:

Johnston Health is proud to partner with Carolina Radiology Consultants to offer a wide variety of radiology services at multiple locations in Johnston County. Our skilled technologists utilize the latest technology to ensure the best possible treatment for our patients. We conduct outpatient procedures in Smithfield and Clayton, where we offer a wide range and the latest in diagnostic and interventional radiology services accredited by the American College of Radiology. Diagnostic imaging services including MRI, Breast MRI, CT, Pet CT, Low-dose chest CT, 2D and 3D digital mammography and bone dosimetry.

Interventional radiology provides extensive therapeutic procedures for our oncology patients. These procedures include image-guided biopsies, intra-arterial chemoembolization, radio-frequency ablation, cryoablation, venous access for systemic chemotherapy and Pleurex Catheter placement for malignant pleural effusion.

We are committed to providing quality care to all of our patients, and that begins with a friendly and caring staff of experts. Our well trained, certified technologists uphold the highest standards of the American Registry of Radiologic Technologists (ARRT), and the American Board of Radiology certifies our radiologists.

### Pathology

**Program Leader: Dr. Leslie Taylor**

**Laboratory Medical Director**

#### Overview:

Pathology is essential to study the nature, effects, causes and consequences of disease. Tissue and/or fluid samples are obtained through biopsy or surgery and examined under a microscope. The tissue diagnosis given by the pathologist indicates the type of cell that is proliferating, its histological grade, genetic abnormalities, and other features of the tumor. Together, this information is used to evaluate the prognosis of the patient and to choose the best treatment.

Cytogenetic and immunohistochemistry are other types of testing that the pathologist may perform on the tissue sample. These tests may provide information about the molecular changes that have happened in the cancer cells, and may thus also indicate the future behavior of the cancer and best treatment.

### Hematology & Oncology

**Program Leader: Dr. Russell Anderson**

**Medical Director, Hematology & Medical Oncology**

#### Overview:

Cancer is not one disease, but a general term covering many distinct diseases. Hematology is the study and treatment of blood disorders while Oncology is the study and treatment of cancer. Many blood disorders and cancer types require a variety of cancer treatment therapies including chemotherapy, hormone therapy, biological therapy, targeted therapy, immune therapy, transfusions, growth factors, coagulation therapy, iron infusions and supportive therapies. These therapies and treatments are more often in combination than alone.

Through an affiliation with Duke Medicine, Johnston Health is able to provide specialists in the diagnosis and treatment of blood disorders and cancer. Because there are so many variables, different types of treatments are required for every patient, and no single treatment is right for everyone. Our physicians, who see patients in the Smithfield and Clayton medical oncology centers, customize treatment plans to meet every patient's specific condition and requirements. Clinical trials of newer therapies are also available and participation is encouraged. Our goal is to provide compassionate and supportive care to the people in our communities.

### Radiation Oncology

**Program Leader: Dr. Debra Harr**

**Radiation Oncology**

#### Overview:

Through a partnership with UNC REX Healthcare, we are able to bring radiation therapy to patients at our Radiation Oncology offices in Smithfield and Clayton. Radiation therapy is used in most types of cancer either alone for cure, in the early stages, or in combination with chemotherapy and surgery in more advanced tumors. Radiation also play an important role in palliating the pain caused by malignant tumors. The role of radiation is to damage the DNA of the cancer cell to stop it from growing. However, the same damage can occur in normal tissues surrounding the tumor. Our goal is to try to minimize the radiation dose to normal tissue and maximize the dose to the tumor. We can accomplish this with advance therapy machines, and improved techniques aided by advanced computer planning systems. The relationship between UNC REX Healthcare and Johnston Health is vital to providing these programs to the cancer patient of Johnston County.

# Clinical Support

## Key Services Available Before, During and After Treatment

### Pharmacy

**Program Leader: Jay Renfrow, PharmD  
Registered Pharmacist**

#### Overview:

Our Johnston Health Hematology and Oncology centers in Smithfield and Clayton have dedicated outpatient oncology pharmacies each staffed with an oncology-specialist pharmacist. The oncology pharmacists specialize in oncology medications and infusion therapy. They work with patients, medical oncologists, physician assistants, nurse practitioners, oncology nurses and other health care providers to ensure safe medication use. Both centers achieved successful results following inspections in 2014 from the Joint Commission and the North Carolina Board of Pharmacy.



The pharmacy prepares chemotherapy and other oral and infused medications for the patients at each center. These medications are prepared using a special biological safety cabinet to ensure a sterile, accurate and timely product. Each dose of chemotherapy is compounded on site for each patient on the day of his or her appointment.

One of our goals is to continue to grow our clinical trial program. It is our desire to keep our patients close to home while offering them the benefits of participating in the newest research available in cancer care. The outpatient oncology pharmacy is responsible for managing investigational study medications used in clinical trials. Each pharmacy prepares and dispenses study medications for patients participating in a clinical trial.

### Nutrition Services

**Program Leader: Kelli Wallace, LDN, RD  
Department of Food Services**

#### Overview:

Maintaining optimal nutrition is extremely important when going through cancer treatments. Our registered dietitian provides complementary one-on-one nutrition counseling with patients and their caregivers. She provides diet education, tips for dealing with nutrition-related side effects, referrals and other resources to help the patient maintain an optimal nutrition status during cancer treatment. The nutritional needs of patients dealing with cancer differ from other individuals and also vary from patient to patient. Therefore, these consultations are individualized and tailored to meet the patient's needs and requests.

### Physical Rehabilitation

**Program Leader: Wanda Howell, LPT  
Department of Rehabilitation**

#### Overview:

Our department evaluates patients and devises treatment plans to maximize recovery after injury, surgery, illness, long-term disability or other debilitating conditions. Our licensed staff provides one-on-one evaluations to determine the best treatment plan for your needs. Our specialties include physical therapy, aquatic therapy, occupational therapy and speech therapy.



# Patient Support

## Core Services For Delivering Comprehensive Cancer Care

### Social Work Services

**Charity Pate, BSW**  
**Oncology Social Worker**

#### Overview:

An oncology social worker helps patients, families, and caregivers with both practical and emotional needs. The social worker can assess patient needs, refer to community resources, provide emotional support, and work with patients to overcome barriers to treatment.

During 2017, the oncology social worker saw approximately 80 patients monthly. Patients were often seen more than once, averaging 165 social work encounters each month. Needs and barriers to treatment addressed during these encounters include transportation, medication assistance, financial assistance, psychosocial support, nutrition / food assistance, and more.

The social worker often collaborates with agencies such as Community & Senior Services or Johnston County Department of Social Services, Adult Services department, to connect patients to community resources and meet identified needs. In-house services such as cancer support groups and Look Good Feel Better Workshops are also utilized. Emotional support provided by the oncology social worker through one-on-one counseling or support programming was the primary focus of most encounters. Transportation continues to be another significant barrier to treatment addressed during social work encounters. There are times when there are no resources or programs to meet a patient's practical needs. The Johnston Health Foundation's Angel Fund is available during these times to assist with needs such as gas cards and oral nutritional supplements.

#### Initiatives:

##### Angel Fund:

Patients often face times when there are no financial resources available in the community, through their insurance company, or in their own support systems to assist with the cost of practical needs that arise during cancer treatment. The Johnston Health Foundation's Angel Fund assists oncology patients who are experiencing financial hardship to ensure these needs are met. Support includes gas cards, one-time medication copay costs, oral nutritional products, transportation, wigs and durable medical equipment. During 2017, over 80 patients received assistance from the Angel Fund.

### Chaplaincy Services

**Program Leader: Rev. Greg McClain**  
**Director of Spiritual Care and Volunteer Services**

#### Overview:

Chaplains sustain, support, guide and help people in their search for meaning and hope during illness and for reconciliation in relationships.

We have chaplains who offer consultation and counsel regarding spiritual, emotional and ethical matters. Spiritual care of patients and families is always done in collaboration with the multi-disciplinary cancer care committee.

### Patient Navigations Services

**Melinda "Mindy" Ferguson, RN**  
**Department of Medical Oncology**

#### Overview:

As the oncology service line continues to grow and evolve at Johnston Health, so does the role of patient navigation. Patient navigation refers to individualized assistance offered to cancer patients, families, and caregivers to help them overcome barriers to care.

This role also facilitates timely access to care and is available along the entire cancer care continuum, from suspicion and throughout the treatment journey.

Johnston Health's Nurse Navigator supports patients by:

- Acting as a single point of contact for patients and caregivers to resolve barriers to care.
- Accompanying patients to initial appointments when possible.
- Assess patient's needs including physical, emotional, spiritual and financial.
- Initiating referrals.
- Coordinating care.
- Providing patient education.
- Collaborating with the entire oncology team.

This service is free to both patient and referring providers. For more information please call 919-989-2192.

# Clinical Research

## Advancing The Understanding And Treatment of Cancer

### What Are Clinical Trials?

Clinical Trials are carefully designed research studies that test promising new cancer treatments. Patients who take part in research studies will be the first to benefit from these treatments. The study results will also help other patients. In a clinical trial, you get either standard treatment or a new treatment that's thought to be as good as – or maybe better than – the standard treatment. Studies are never done to see if you would recover from cancer without treatment at all. As with any other medical care, you are free to withdraw from a clinical trial at any time and seek other treatment options.

### Why Are Clinical Trials Important?

Clinical trials show us what works (and what doesn't) in medicine and health care. They are the best way to learn what works best in treating diseases such as cancer. Clinical trials are designed to answer two important questions:

**Does the new treatment work in humans?** If it does, doctors are also looking for how well it works. Is it better than what's now being used to treat a certain disease? If it's not better, is it at least as good, while perhaps causing fewer side effects? Or does it work in some people who aren't helped by current treatments? In other words, is it a step forward? A treatment that doesn't offer anything new probably isn't worth studying.

**Is the new treatment safe?** This must be answered while realizing that no treatment or procedure – even one already in common use – is entirely without risk. But do the benefits of the new treatment outweigh the possible risks?

Clinical trials are available for these disease groups: breast, colon, lung and supportive care.

**Jay Renfrow, PharmD**

*Johnston Health Hematology Oncology Pharmacist*

## Quality and Standards

### Cancer Registry

The Cancer Registry at Johnston Health was established in 2013, and accredited by the American College of Surgeons Commission on Cancer (ACoS-CoC) in May 2014.

The registry has 2,948 cases in the database since the reference date of 2012. 2,379 (81%) of those cases are analytic cases with initial diagnosis and/or first course of treatment at Johnston Health. The additional 557 (19%) cases are non-analytic cases which represent patients with recurrent disease, initially diagnosed and/or treated elsewhere.

The primary function of the Cancer Registry is to collect and manage statistical data on our cancer population. Information collected includes patient demographics, medical history, anatomical site and histology of the primary cancer, extent of disease and treatment. The Cancer Registry data provides our physicians and administration with information to help improve quality and treatment for our patients and statistical reports to study survival and support research.



**Kathy Foote**

### Accountability and Quality Improvement Measures

As part of Johnston Health's CoC accreditation, the Cancer Registry reports data to the National Cancer Data Base (NCDB). The NCDB has defined several accountability performance and quality improvement measures that are monitored for quality of care and national evidence-based practices to ensure high-quality patient-centered care in our community.

We are committed to providing the right care at the right time at Johnston Health.

### Certified Staff

The Johnston Health Cancer Registry team is a group of highly trained, qualified and experienced data management experts.

They are Certified Tumor Registrars and active members of the Association of NC Cancer Registrars and the National Cancer Registrars Association.

**Kathy Foote, CTR**

*Cancer Registry Manager*



# Cancer Program

## Cancer Program Goals:

- 1. Clinical Goal:** Sepsis is a serious complication caused by the body's overactive response to an infection which can lead to organ failure and death. Chemotherapy patients are at a higher risk to develop an infection that can lead to sepsis. To address this concern, the Cancer Committee developed and implemented a standardized protocol to identify patients at risk for sepsis for outpatient center patients who are actively receiving chemotherapy. This Clinical Goal was accepted as complete by the Cancer Committee on June 1, 2017.
- 2. Programmatic Goal:** Patient engagement continues to receive increased attention on a national level. An identified method to increase patient's engagement in their medical care is by utilizing patient portals; but the functionality of the patient portal is dependent upon the number of active users. Our My UNC Chart Patient Portal is a way all patients can actively engage in their medical care. The Cancer Committee developed and implemented a workflow process to assist with MyChart activation in the oncology clinics to improve patient engagement.

## Studies of Quality:

- 1. Opioid Prescribing and Management for Oncology Patients:** Greater opioid prescribing has led to an increased risk of harm related to opioid use. The problem of opioid misuse, abuse, and diversion has been escalating in the past few years leading to the declaration of an "opioid epidemic" in the United States. This has triggered legislative and regulatory responses. A retrospective study of 12 randomly selected patients who are being prescribed opioid medications by the Cancer Center was completed to identify opportunities to improve patient education, medication compliance, informed / shared decision making between provider and the patient and other processes to enhance patient safety was completed and presented to the Cancer Committee on April 6, 2017. Of the 12 randomly selected patients, the Opioid Prescribing and Management Study indicated that 83% did not have a pain agreement / informed consent signed and in the medical record, 67% were receiving active treatment for a hem/ onc diagnosis, and 50% had a cancer-related diagnosis and were not on active treatment. From this Quality Study, action was taken by the Cancer Program to implement a structured prescribing process for opioids by implementing several quality improvements to ensure appropriate communication, education and safe prescribing practices. The Quality Improvement to develop a safer opioid prescribing and management for oncology patient was presented to the Cancer Committee and approved on April 6, 2017.
- 2. External Beam Radiation Therapy for Bone Metastases:** Bone metastases are a common manifestation of malignancy that can cause severe and debilitating effects, including pain, spinal cord compression, hypercalcemia, and pathologic fracture. The optimal care of bone metastasis patients requires interdisciplinary care among radiologists, radiation oncologists, medical oncologists, surgeons, pain medicine specialists, and palliative care professionals. Radiotherapy (RT) provides successful palliation of painful bone metastasis that is time efficient and has been associated with few side effects. External Beam RT (EBRT) can provide significant palliation of painful bone metastases in 50–80% of patients, with up to one-third of patients achieving complete pain relief at the treated site. A quality study opportunity was approved by the Cancer Committee on February 2, 2017 to proactively evaluate our current state, as well as inform practice, identify opportunities for improvement, communicate, educate, and engage collaborative action in improving care when identified.

## Quality Improvements:

- 1. Process to Decrease No-Show Rate of Oncology Patient Appointments to 5%:** Patient no-shows for scheduled oncology appointments have become common. Unused appointment slots reduce patient quality of care, access to services and provider productivity while increasing a loss to follow-up, continuity of care, complications with their illness, increase in hospital readmissions and medical costs. This negatively affects access to health care. No-show appointments are defined as "patients who neither kept nor cancelled a scheduled appointment". Data was abstracted from EPIC EMR system for dates of service June-Dec 2016: Smithfield average - 12% and Clayton - 13%. With an average of a 2-4 week wait time for an appointment in our office, a no-show significantly affects access to care. With the implementation of this Quality Improvement we have decreased our no-show rate in Smithfield and Clayton in efforts towards the target rate of 5%.
- 2. Process Development for Safer Opioid Prescribing and Management for Oncology Patients:** Greater opioid prescribing has led to an increased risk of harm related to opioid use. The problem of opioid misuse, abuse, and diversion has been escalating in the past few years leading to the declaration of an "opioid epidemic" in the US. As a result of our quality study of opioid prescribing practices in the cancer center, the Cancer Committee implemented a structured prescribing process for opioids by applying several quality improvements to ensure appropriate communication, education and safe prescribing practices. Our goal is to increase oncology patient signed pain medication contracts, education on opioid use and abuse, and safer prescribing practices from 17% to 80% by November 2017. With the implementation of this Quality Improvement we have increased our oncology patients signed pain contracts substantially in efforts to meet the goal of 80%.

# Cancer Conference Report

Cancer conferences (also called Tumor Board Conferences) are a treatment planning approach to review and discuss the medical condition and treatment options for cancer patients. The initial evaluation and treatment decisions are the most critical in the outcome for a patient diagnosed with cancer. With cancer being a systemic illness that can rarely be detected, diagnosed, and adequately treated by only one physician, the cancer conferences offer a multidisciplinary patient-oriented approach that can lead to improved care and management of the cancer patient.

The primary goal of cancer conferences are to improve the care of the community’s cancer patients through the exchange of information and expertise among participating and treating physicians; which include Medical Oncologists, Radiation Oncologists, Surgeons, Pathologists, and Diagnostic Radiologists. Other cancer care providers include social workers, nurses, nurse navigators, pharmacists, and nutritionists. All other medical staff is encouraged to attend and participate in the cancer conferences, which also provides continuing medical education credits for all physicians and cancer care staff who attend.

The Cancer Conference Coordinator monitors all cancer conference activity, including; cancer conference frequency, multidisciplinary attendance, total number of case presentations, percentage of prospective case presentations, discussion of stage, prognostic indicators and treatment planning using nationally recognized evidence-based treatment guidelines (NCCN), options and eligibility for clinical trial enrollment, and adherence to the cancer conference policies. Additional areas that are being monitored in 2017 by the Cancer Conference Coordinator are genetic testing and counseling, discussion of palliative care services, psychosocial care services, and rehabilitation care services for the cancer patients.

The monitoring and evaluation of cancer conference activity ensures that conferences provide consultative services for cancer patients to formulate an effective treatment plan and offer education to physicians and allied health professionals who are in attendance. The monitoring of cancer conference activity may also identify opportunities to improve the patient care process. The Cancer Conference Coordinator reports all the cancer conference activity to the Cancer Committee at least annually, and recommends corrective action if any area falls below the annual goal or requirement set forth by the Commission on Cancer.

## Cancer Conference Data 2016

Johnston Health held 36 cancer conferences and discussed 275 cancer cases.

Measure Description	Measure Requirement	Measure Obtained
Multidisciplinary Attendance Rate	100%	100%
Prospective Cases Presented of the Cases Discussed	80%	97%
Prospective Cases Presented of the Total Analytic Cases	15%	76%
Discussion of Stage	Monitor	86%
Prognostic Indicators and Treatment Planning using NCCN Guidelines	Monitor	100%
Discussion of Options and Eligibility for Clinical Trial Enrollment	Monitor	71%
Adherence to Cancer Conference Policies	100%	100%



The cancer conferences are held every Thursday, except the first Thursday of the month, at 7:15 a.m., and are coordinated by Amy Brown, Cancer Accreditation and Cancer Conference Coordinator, and led by Dr. Russell D. Anderson, Medical Oncologist.

**Amy C. Brown**  
Cancer Accreditation & Cancer Conference Coordinator

# Community Outreach: Education, Prevention, Support & Events

Johnston Health Cancer Services believes that one of the best avenues to success in prevention, early detection and successful treatment is through education and awareness. Our Community Outreach programs involve many events, activities and seminars. Some, like our Ladies Night Out and 5k, are annual events. Others vary year to year. This year, we had quite a few.

## Support

Monthly support group meetings provide patients with the unique opportunity to share concerns, give hope, receive encouragement, and build community, all while knowing that they are not alone in their journey. Charity Pate, oncology social worker, facilitates monthly support groups in two locations.

Topics addressed during 2016 meetings included Understanding Your Patient Journey / Patient Navigation, Coping with Grief and Loss, Multiple Myeloma, Navigating Blood Cancers, and Caregiver Support. Several meetings were “open discussion” format in which participants had the opportunity to share their own journey and encourage one another through personal experiences.

Support groups are open to patients, families, caregivers, and survivors.



**Charity Pate, BSW**  
*Oncology Social Worker*

## Angels Among Us

Angels Among Us provides a place for patients, families, caregivers, and survivors to share common concerns and get emotional support from each other. It is held the fourth Tuesday of every month, 6:00 pm at Johnston Medical Mall. This year we had 6 participants

## Prostate Screening

Free prostate cancer screenings were provided to men who registered for the event. The screenings tested for PSA levels which could indicate the prevalence of prostate cancer. This year we had 22 participants, 3 of which had elevated PSA levels, and 1 out of those 3 sought follow up treatment.

## Healing Hope

Healing Hope provides a place for patients, families, caregivers, and survivors to share common concerns and get emotional support from each other. They meet the third Monday of every month, at 6:30 pm, at Mount Zion United Methodist Church. This year we had 10 participants.

## Look Good Feel Better Workshops

Look Good Feel Better Workshops offer practical education on managing appearance-related side effects of cancer treatment. Licensed cosmetologists trained and certified through the American Cancer Society lead workshops monthly. Workshops are held on the 2nd Monday of each month from 1:30pm-3:30pm in Smithfield at the Johnston Health Medical Mall, Room 1404A.

## Public Service Announcement Programs

Public service announcements and programs like our Johnston Health Talk, hosted by Physician Recruitment & Integration Specialist Liz Thurston, have an effective way to communicate information about our services. This year through WARZ-TV, EWTV & WTSB we aired six radio programs and seven TV programs highlighting many topics related to cancer, from breast cancer awareness to surgical oncology and Hematology /Oncology treatments.

## Johnston Health Champions 5K & 10K

More than 600 people participated in the Champions 5K and 10K race on May 6, making it the largest in the event's history. We appreciate everyone who ran, walked, cheered, visited and volunteered. With the support of our wonderful sponsors, we raised \$24,000 for the Angel Fund, which assists cancer patients with medical needs they can't afford. This marked the 2nd year in a row dogs were welcome participants, and has been a huge hit among dog owners and dog lovers. The 5K helped to spread awareness about the various cancer support services that Johnston Health offers to the community.





# Ladies Night Out

It's a gathering like no other. You can shop, get your nails painted, your blood sugar checked and your mammogram scheduled—all at the local hospital.

Five years ago, Ladies Night Out at Johnston Health Clayton started as an event to raise awareness about breast cancer and to highlight the services offered to prevent and treat the disease. It has grown in popularity, and morphed into a festive women's health event.

More than 300 women attended the most recent LNO, many of them wearing shirts and hats decorated with pink ribbons. In an exit survey, more than 50 of the participants took advantage of blood pressure and glucose screenings, and 13 used the opportunity to schedule their mammograms.

There were also opportunities to learn about breastfeeding, arthritis research and memberships to HealthQuest Fitness and Wellness Center. Among the activities that drew lines were the chair massages, heavy hors d'oeuvres and cupcakes.



# Program & Support Services: Contact Information

## Resource Directory

### Medical Oncology/Hematology

Smithfield	919-989-2192
Clayton	919-585-8835
Director - Bryant Washington	919-938-7830

### Radiation Oncology

Smithfield	919-209-3555
Clayton	919-585-8550
Manager - Vanessa Narron	919-209-3555

### Support Services

Oncology Social Worker Charity Pate	919-938-7834
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Spiritual Care Services	919-209-3655
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### Oncology Dietician

919-934-8171  
Ext. 6229

### Johnston Health Foundation

Angel Fund	919-938-7834
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### Cancer Registry

Kathy Foote	919-784-7204
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### Patient Navigator

Mindy Ferguson	919-938-6562
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### Cancer Accreditation/Cancer Conference Coordinator

Amy Brown	919-938-7569
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### Diagnostic Imaging

Smithfield	919-938-7190
Clayton	919-585-8450

<b>Ambulatory Imaging</b>	919-938-0467
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### HealthQuest

<b>Fitness &amp; Wellness Center</b>	919-938-7581
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<b>Nutritional Services</b>	919-934-8171 Ext. 6718
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<b>Home Health Services</b>	919-938-7560
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### Hospice Services

In Home	919-938-7560
SECU Hospice House	919-209-5100

<b>Wound Care</b>	919-938-7716
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### American Cancer Society

Local Contact Brenda Robinson	919-302-4557
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### Breast Prosthesis & Bras

Johnston Medical Supply	919-934-4997
Lovely Lady	919-934-2960

### Wigs

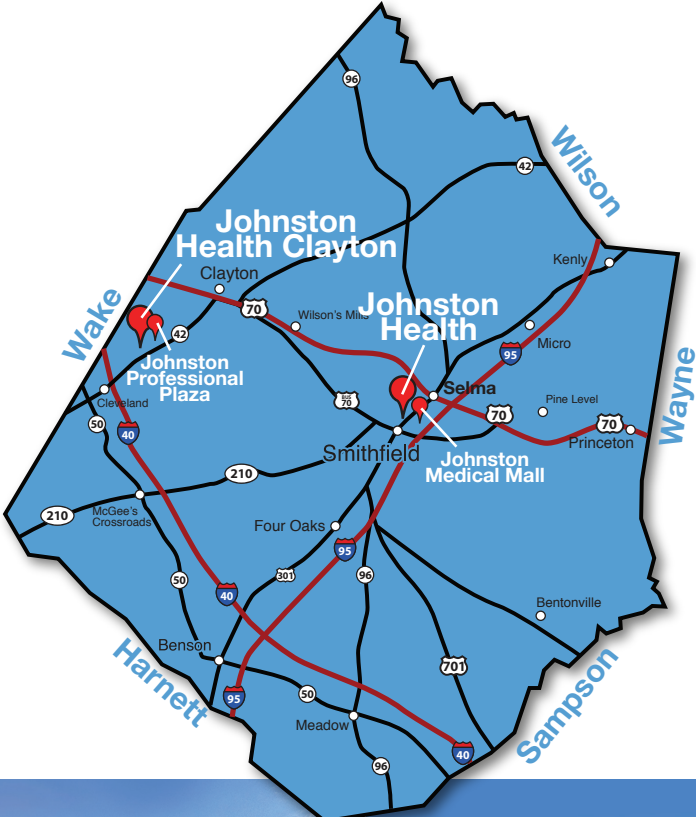
Bare Essentials Boutique	919-938-7834
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## Acknowledgements

We would like to acknowledge and send a warm thank you to all of the members of the Johnston Health Cancer Care Committee, physicians, cancer staff and all others who support our cancer program each year.

This report was prepared by Johnston Health and UNC REX Healthcare staff with guidance from the Cancer Care Committee. Requests for more information can be directed to the Johnston Health Marketing and Communications Department at 919-938-7103.

# Johnston Health Cancer Services Locations



**Johnston Health  
Hematology & Oncology  
Johnston Medical Mall**  
514 N. Bright Leaf Boulevard  
Suite 1100  
Smithfield, NC 27577  
(919) 989-2192

**UNC Radiation Oncology at  
Smithfield\***  
**Johnston Medical Mall**  
514 N. Bright Leaf Boulevard  
Suite 1200  
Smithfield, NC 27577  
(919) 209-3555

**UNC Radiation Oncology at  
Clayton\***  
**Johnston Professional Plaza**  
2076 Highway 42 West  
Suite 120  
Clayton, NC 27520  
(919) 585-8550

**Johnston Health Clayton  
Hematology & Oncology  
Johnston Professional Plaza**  
2076 Highway 42 West  
Suite 130  
Clayton, NC 27520  
(919) 585-8835

\*A joint partnership between Johnston Health and UNC REX Healthcare



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