

Public Reporting of Outcomes 2014

ABOUT THE CANCER PROGRAM AT SANTA BARBARA COTTAGE HOSPITAL:

The Cancer Program at Santa Barbara Cottage Hospital has been accredited as a comprehensive community cancer program by the Commission on Cancer of the American College of Surgeons since 1976.

The Cancer Program at Santa Barbara Cottage Hospital provides comprehensive services across the continuum of cancer care, from cancer prevention outreach to cancer screening, treatment and palliative care. The program receives guidance and leadership from the Cancer Committee, which convenes regularly to ensure that we are meeting the patient-centered quality standards set by the American College of Surgeons' Commission on Cancer.

Included below are some examples of our many projects that were worked on by the cancer program in 2014.

Standard 4.1 Cancer Prevention Programs

Smoking Cessation Program at CHS

The Smoking Cessation Program consists of seven evening classes that provide group support as well as a comprehensive approach to the problem of smoking. The quarterly program emphasizes behavior changes as well as improvement in nutrition and self-esteem. A donation of \$20 is suggested to help cover the cost of materials, and free nicotine replacement therapy is available to individuals meeting income qualifications. In addition, Cottage Health System has a smoking relapse support program. Every Monday, former students can join a group to have continued support from their peers and instructor.

Summary	2014	2013	2012	2011	2010	2009	2008	2007
Registered	52	72	102	70	84	65	71	57
First Class	42	58	71	66	64	46	44	33
Graduates	29	46	42	48	43	36	28	23
Registrants to First Class	81%	81%	70%	94%	76%	71%	62%	58%
First Class to Graduation	69%	79%	59%	73%	67%	78%	64%	70%

Standard 4.2 Cancer Screening Programs

Skin Cancer Screenings

Cottage Health System and the Cancer Center of Santa Barbara with Sansum Clinic teamed up to offer free skin cancer prevention information along with free skin cancer screenings for ages 20 and older on Saturday, May 10, 2014 from 9:00 am to noon at Santa Barbara Cottage Hospital. The screenings targeted those who do not otherwise have access to medical services.

	English	Spanish	Total
Consent Forms	89	63	152
Screening Forms	99	49	148
Irregular Mole/ Suspected Melanoma	26	6	32
Biopsy Needed for Suspected BCC or SCC	23	2	25
Follow-up Needed	56	9	65
Patient Checked "Only exposed skin, per patient request"			46

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Standard 4.2 Cancer Screening Programs (continued)

Skin Cancer Screenings

Outcomes:

Melanoma Follow Up	31
Basal Cell Carcinoma Follow Up	16
Squamous Cell Carcinoma Follow Up	9
Actinic Keratosis Follow Up	27
Biopsy Recommended	41
Follow Up Needed Total	65
No Follow Up Needed	83
Total Screened	148

Colon Cancer Screenings

Cottage Health System and Cancer Center of Santa Barbara with Sansum Clinic teamed up to offer free colon cancer screenings for people ages 50to75. At the free and confidential screenings, attendees received a free take-home colon cancer screening kit. Patients with positive results were contacted and referred for a colonoscopy.

	Holy Cross	CCSB	GVCH	Senior Expo	Parish Nurses	
	3/23/2014	3/26/2014	3/29/2014	10/1/2014	Various	TOTAL

FIT handed out	66	36	21	11	22	156
FIT "to go" packages	13	12	1	1		27
Total distributed	79	48	22	12	22	183
(Spanish/English)	(56/23)	(20/28)	(10/12)	(0/12)		(76/51)

FIT "to go" packages returned	0	0	0	0	0	0
Total number of FIT returned	61	31	18	8	4	122
(Spanish / English)	(41/20)	(17/14)	(10/8)	(0/12)	(3/1)	
Percentage of FITs returned	77%	65%	82%	67%	18%	67%

Positive FIT's	2	1	1	1	1	6
(Spanish/English)	(2/0)	(0/1)	(0/1)	(0/1)	(0/1)	(2/2)

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Standard 4.4 and 4.5

Cancer Program Practice Profile Reports (CP3R)

The Cancer Committee ensures and monitors that patients treated at Santa Barbara Cottage Hospital receive care according to nationally accepted measures. The American College of Surgeons' Commission on Cancer measures compliance with current CoC quality reporting tools- the Cancer Program Practice Profile Reports (CP3R). Below is the summary CP3R performance grid that reports cases treated at Santa Barbara Cottage Hospital in 2012. We are proud that our hospital is exceeding all but one of the required performance expectations set by the Commission on Cancer.

We are slightly under the recommended performance rate for adjuvant chemotherapy within four months in Stage III colon cancer patients (although patients were offered this therapy). This was discussed at Cancer Committee resulting in a plan to better educate our patients on the value of getting chemotherapy in a timely manner. We are confident this education will reflect an increase to meet and exceed the guidelines in the coming year.

Oncology Metric	SBCH	Required Performance Rate
<i>BREAST</i>		
Radiation is administered within 1 year (365 days) of diagnosis for women under the age of 70 receiving breast conserving surgery for breast cancer.	95.2%	90%
Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c or Stage II or Stage III hormone receptor positive breast cancer.	94.6%	90%
Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1c or Stage II or III hormone receptor negative breast cancer.	100%	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.	95.2%	90%
Image or palpation-based needle biopsy (core or FNA) is performed to establish diagnosis of breast cancer.	100%	80%
<i>COLON</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.	87.5%	90%
At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.	100%	85%

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Standard 4.8 Quality Improvements

The Santa Barbara Cottage Hospital Cancer Committee reviewed and discussed two improvements for our cancer patients' care:

1. Using the "Palliative Care Triggers" tool on the oncology unit to identify patients who may benefit from Palliative Care Team referral.
2. Improved the referral rate to genetic counseling for ovarian cancer patients from 10.5 % in 2013 to 38 % on 2014 by faxing the genetic counseling referral form to the managing physician.