# 2019 Annual Report



Grady Health System will lead in the transformation of the health and well-being of the populations we serve, advancing health status through access to effective, innovative, and efficient care, and care coordination across the continuum.

## **OUR MISSION**

The mission of the Georgia Cancer Center for Excellence at Grady is to reduce the number of lives lost to cancer in Georgia through prevention and screening, treatment, research, and education. In collaboration with key partners, we provide patient-focused services that emphasize access, customer service, cultural competence, and the highest level of ethics and fiscal responsibility. Recognizing that research is the key to improving all phases of cancer services, we focus on research to improve patient outcomes, as well as basic scientific, clinical, and population-based studies.

























# Georgia Cancer Center for Excellence



In 2018, the Georgia Cancer Center for Excellence at Grady Health System began to reap benefits from the financial investments and process improvements we made in previous years. As a result, we were able to provide more care to more patients in a timely manner – while increasing patient satisfaction.

Patients expressed their approval as nearly 90% said they would "recommend" their provider in patient satisfaction surveys, a 10% uptick in 12 months. During the year, we also increased clinic visits by 6%, grew service procedures by 14%, and dramatically reduced our time to treat:

- We reduced the time to next appointment for infusion.
- We reduced the time from diagnosis to lung cancer treatment by 44%.
- We reduced the time from diagnosis to breast cancer treatment by 33%.

The success stems from initiatives to overcome barriers to treatment that prevent patients from going to scheduled treatments. Patients typically miss appointments because they do not understand the importance of making all scheduled visits, or they are confused about their conditions, or they do not have access to transportation.

We introduced two key programs to help cancer patients overcome these obstacles.

Working with Georgia CORE, we launched a Lay Navigator program to supplement our Nurse Navigator program supported by Merck Foundation grant. Lay Navigators are former cancer patients who understand the details of treatment and the life challenges that can get in the way of care. They provide patients with guidance, emotional support, and the personal touch that is so important to keep cancer patients engaged.

Second, we began a transportation initiative to help cancer patients get to their appointments. Now our navigators, in addition to social workers, can arrange transportation, including ride shares, for individuals who need it. That way patients do not miss scheduled treatments.

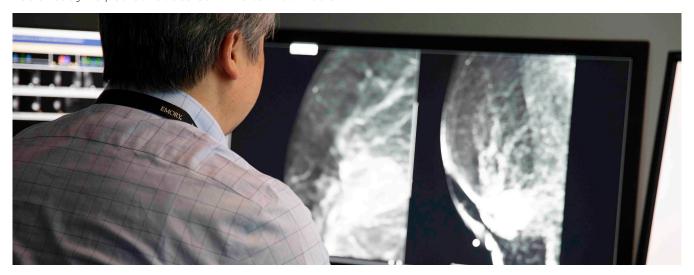
The result is clear: Significantly improved patient satisfaction – and we can treat more patients more efficiently because people show up when they are scheduled.

### But the story of 2018 includes other successes:

### **ADVANCING TECHNOLOGY**

In 2018, we introduced digital breast tomosynthesis system, also known as 3D mammography. It detects early signs of breast cancer in women with no symptoms and enables us to screen the 40% of women who have dense breasts that make it hard to spot cancers with standard mammography. The system is available at Grady and our Camp Creek Comprehensive Care Center. We also launched Saturday mammograms to support women who need flexibility to fit in their breast screening.

We worked with partners to develop advanced technology to speed access to care. A collaboration with Epic Systems, Grady's medical records software provider, produced a revolutionary module to identify newly diagnosed cancer patients for our Nurse Navigators and track their treatment progress. Similarly, we deployed iQueue software to manage infusion scheduling. The technology, used by hospitals nationwide, has already helped us reduce our time to first infusion.



### **PATIENT-CENTERED CARE**

During the year, our Patient Family Advisory Council (PFAC), grew strong, and helped us better understand what patients need to make their treatments more comfortable and accessible. Working with Planetree International, an organization devoted to patient-centered care, we implemented many enhancements based on patient feedback - like signage changes throughout the center to make it easier for patients to find their way.

The Epic technology module initiative also enabled navigators to text cancer patients reminders directly through Grady's MyChart app, empowering seamless communication.

And, working with the Merck Foundation, we introduced a oncology certified exercise coach to help cancer patients regain their strength and flexibility, as well as nutrition counseling by a certified cancer dietitian who screens cancer patients for food insecurity, offers nutritional guidance, and provides enhanced support for interested patients.

#### **COMMITMENT TO EXCELLENCE**

In 2018, we opened the Grady Survivorship Clinic to leverage partnerships with primary care physicians in Grady's neighborhood health centers. The goal is to provide cancer patients with improved health care services while monitoring their long-term treatment compliance.

During the year, the Commission on Cancer, a program of the American College of Surgeons, awarded us accreditation recognizing our commitment to comprehensive, high-quality, multidisciplinary, patient-centered care. The National Accreditation Program for Breast Centers also recognized our commitment to excellence. And, we achieved the Quality Oncology Practice Initiative (QOPI®) Certification, acknowledging high-quality outpatient care.







### **COMMITMENT BEGINS WITH PEOPLE**

It is easy to talk about investments or recognitions. However, the one constant at Grady has been our staff's embrace of this institution's mission: to provide the highest quality care to those who need it. The shared commitment to the mission is what truly distinguishes us from other cancer centers. It is what drives our continuing effort to improve the quality of care, what attracts new talent to Grady and what motivates us to do what we do each day. In the following pages, you will see examples of how our embrace of Grady's mission continually makes a difference to patients and cancer care at Grady.



Pooja Mishra
Georgia Cancer Center
for Excellence
Executive Director of
Oncology



Dr. Roland Matthews Georgia Cancer Center for Excellence Medical Director



Dr. Sheryl Gabram-Mendola Avon Comprehensive Breast Center Medical Director

# **Technology**

#### IMPROVING PATIENT EXPERIENCE

LeanTaas helps Grady use predictive analytics - an advanced form of statistics that includes data mining, predictive modelling, and machine learning - to analyze current and historical facts to make predictions about future events. The goal is to ensure we improve our patient experience by optimizing appointments for our patients - so we can schedule more services in a single visit.



### **INCREASING CAPACITY**

iQueue is software developed by LeanTaas to free up capacity in hospitals. Grady uses iQueue to optimize patient scheduling at its infusion center. iQueue recognizes that some infusions take longer than others and helps Grady schedule the maximum number of patients who can be treated safely each day. Thanks to iQueue, Grady has already reduced the time from doctor order to first infusion.



# Patient Centered Care

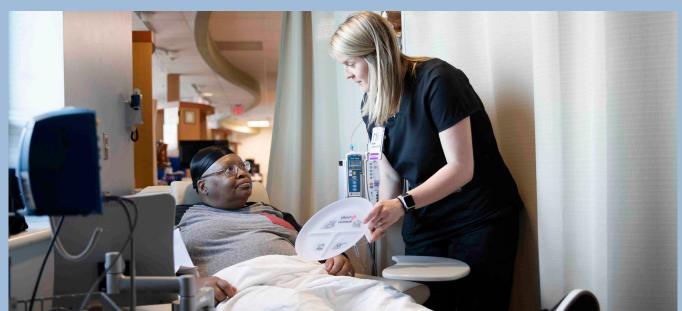
### **EXPERIENCED HANDS GUIDE NEW PATIENTS**

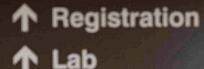
Grady Navigators provide critical guidance and support for cancer patients. The navigators understand cancer treatment because they lived through it. Their intimate knowledge of the experience helps new patients understand what to expect and how to cope with the experience. Grady created its Lay Navigator team to support nurse navigators in improving timely access to care and reducing disparities in care for vulnerable and underserved populations.



## TREATING THE WHOLE PERSON

It takes more than medicine to fight cancer. That's why Grady has introduced exercise and nutrition programs to provide patients support after treatment. Recognizing that exercise is critical recover maximum motion, Grady's dedicated certified exercise coach works with hundreds of patients each year in group stretching, meditation, and yoga programs. She also provides individualized exercise prescriptions to help patients with unique issues. During the year, a dedicated dietician launched a nutrition counseling program to make sure patients do everything they can to regain their health.





# PET/CT Scan ↑ Pharmacy ↑

### REVISIONING THE EXPERIENCE

To make sure we are doing everything possible to meet patient need, Grady created a Patient Family Advisory Council (PFAC). Its mission is to provide us with insights about what patients and their families go through as they are dealing with cancer. They remind us of details that make the experience for patients and families better. In addition to sharing their personal insights, PFAC members help us reach out to cancer patients to fully understand their experiences so that we can ease their burdens as we treat their illnesses.



# **Quality Practice**

In 2018, Grady became one of just 300 oncology practices worldwide – including hospital-based and private practices – to be accredited by the Quality Oncology Practice Initiative (QOPI) of the American Society of Clinical Oncology (ASCO). QOPI certification means that oncologists at the Georgia Cancer Center for Excellence at Grady embrace the highest standards for quality in the treatment of all kinds of cancer. The certification is difficult to obtain and is rarely earned by safety net institutions, like Grady.

# **ASCO** QOPI<sup>®</sup> Certification Program

Grady is making a big commitment to cancer research. Scientific studies suggest that clinical trials and other institutional research lead to improved patient care and outcomes. With significant support from Emory School of Medicine, the Georgia Cancer Center for Excellence at Grady has redoubled its commitment to medical research, including clinical trials. Though most cancer patients do not participate in trials, research shows that patients of institutions that conduct clinical research tend to get better treatment and experience superior outcomes. In 2018, Grady began ramping up its clinical research in cancer. The goal is to become a leading cancer research institution focused on the needs of African Americans, who face unique health challenges. Grady's commitment to this research is critical since 95% of clinical trial participants are white. This means that most trials cannot identify how drugs being tested will interact with the medical needs of more than 12% of the U.S. population.





**CONCURRENT CHEMOTHERAPY AND RADIATION WITHIN 2 DAYS** 

GOAL: To assess the percentage of patients meeting concurrent chemotherapy and radiation within 24 hours for 2018.

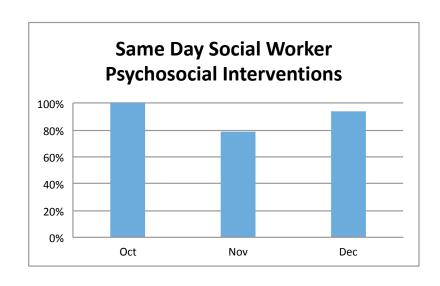
- 107 patients between January, 2018 November, 2018
- 98 Patients (Concurrent chemo/radiation) / 74% started within 24 hours
- 26 patients did not meet 24-hour goal

### **Key Takeaways:**

- EPIC report identifying patients for concurrent chemo/radiation helped review
- Simply by measuring, we were able to improve adherence from 67% to 87%
- Communication between Medical Oncology, Infusion, and Radiation Oncology helped in achieving the improvement
- Challenges to getting to a higher percentage are scheduling issues, coordination with the patient given transportation challenges, patient education regarding the importance of concurrence chemo/radiation, disparate location of Medical Oncology and Radiation Oncology

NATIONAL COMPREHENSIVE CANCER NETWORK (NCCN) DISTRESS SCREENING TOOL ADMINISTRATION

GOAL: Increase the % of newly diagnosed cancer patients with 6 or greater NCCN score receiving same day social worker psychosocial intervention from 75% to 85% as measured by Qlikview report by Dec 31, 2018.

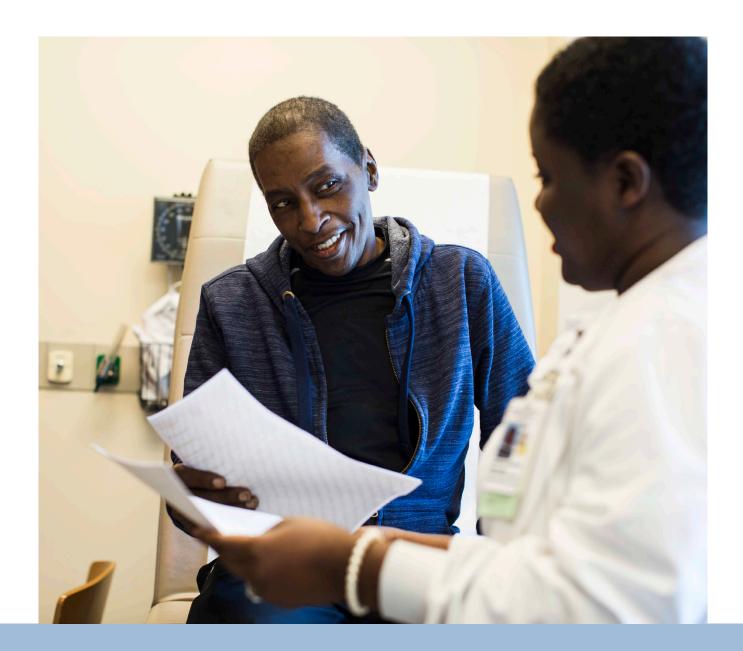


## Psychosocial End-of-Year Report:

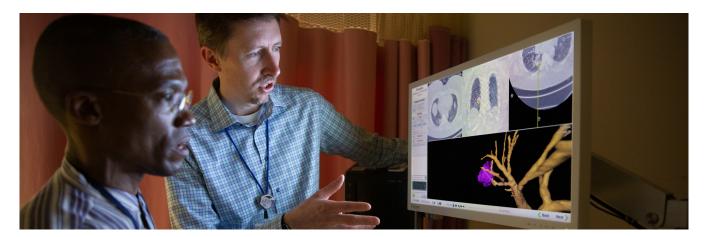
- Completed over 1100 NCCN screenings
- Jan to Nov results showed 74% of newly diagnosed patients are receiving same-day interventions

## 2018 Psychosocial Improvements:

- New infusion patients assessed by Oncology Social Worker with NCCN tool
- Laptops for Social Workers to increase same day documentation
- New Epic data collection on Nurse Navigator and Social Work interventions/goals to improve same day assistance for patients



# Research & Publications



Research by Dr. Eric Flenaugh, chief of pulmonary and critical care and interventional pulmonary medicine at Grady, found that the standards for lung cancer screening are inadequate for African Americans, who are at higher risk of developing lung cancer. As a result, Grady has adjusted its approach to screening African Americans and the U.S. Preventive Services Task Force, which sets the standards for screening, is reviewing lung cancer screening guidelines.

#### 2018-2019 Cancer Center Publications

- Wernke K, Bellcross, Gabram SGA, Ali N, and Stanislaw C: Implementing B-RST in an Academic Safety Net Hospital to Identify Women at High Risk for Hereditary Breast and Ovarian Cancer. Clinical Breast Cancer 2019 Aug: 19(4):e547-e555 PMID: 31005475.
- 2. Binkley JM, Stratford P, Kirkpatrick S, Farley C, Okoli J, and Gabram-Mendola SG: The Reliability Validity and Clinical Utility of the Upper Extremity Functional Index in Patients Following Breast Cancer Surgery. Clinical Breast Cancer 2018 Dec;18(6):e1261-e1267 PMID: 29551249
- 3. Lal A, LaFollette J, and Terrell C: Opioid Prescribing upon Discharge for Patients with Solid Malignancies. Journal of Clinical Oncology 36, no. 34\_suppl (December 01, 2018) 50-50. DOI: 10.1200/JCO.2018.36.34\_suppl.50
- 4. Patel N, Wu C, Draper A, LaFollette J, Brutcher E, El-Rayes BF, Alese O, Shaib WL, Akce M, Chen Z, and Kim C: Retrospective Study of the Safety of Administering Pegfilgrastim on the Same Day of 5- Fluorouracil Pump Disconnect. Journal of Clinical Oncology 2018 Jun; 36, no. 15\_suppl DOI: 10.1200/JCO.2018.36.15\_suppl.e16190
- 5. Redelico T, Walton S, LaFollette J, Curry M, and Bernal-Mizrachi L: Assessment of Provider Adherence to Recommended Monitoring Parameters for Oral Anticancer Medication. American Society of Clinical Oncology 2018 May; DOI: https://doi.org/10.1200/JOP. 17.00018
- 6. Cass A, Joyce A, Kim C, Curry M, LaFollette J, Chen Z, and Alese O: Analysis of Opioid Use Following Curative Cancer Treatment at a Large Urban Safety-net Hospital. Clin J Pain 2018 Oct; Volume 34, Number 10
- 7. Bari S, Muzaffar J, Chan A, Jain S, Haider A, Curry M, and Hostler C: Outcomes of Programmed Cell Death Protein 1 (PD-1) and Programmed Death-Ligand 1(PD-L1) Inhibitor Therapy in HIV Patients with Advanced Cancer. Journal of Oncology 2019; Volume 2019, Article ID 2989048, 5 pages https://doiorg/10.1155/2019/2989048
- 8. Chineke I, Curry M, Bell W, Flood D, Mishra P, Power S, and Bernal-Mizrachi L: Improving Documentation of Pain and Constipation Management within the Cancer Center of a Large Urban Academic Hospital. American Society of Clinical Oncology 2019 Aug; DOI: https://doi.org/10.1200/JOP.19.003

# Community Partners

American Cancer Society

Atlanta Beltline

Atlanta Dream - Dream Too

Atlanta Legal Aid

Avon Foundation for Women

Common Courtesy

Feel Beautiful Today

Frances Wood Wilson Foundation, Inc.

Georgia Breast Cancer and Cervical Program

Georgia Cancer Coalition

Georgia Center for Oncology Research and

Education

Georgia Institute of Technology

Georgia State University

It's the Journey

Lois & Lucy Lampkin Foundation

McKesson Foundation

Merck Foundation

Open Hand

Susan G. Komen Greater Atlanta & Sisters of

Promise

The Daniel P. Amos Family Foundation

The Eric R. Beverly Foundation

The Fulton-DeKalb Hospital Authority

The Serenbe Institute for Art, Culture and the

Environment

Westside Future Fund

YWCA of Greater Atlanta

## **Person Centered Cancer Care Progress:**

Certified (ACE) Exercise Coach

Food Prescription Program

Music & Equine Therapy

Oncology Certified (CSO) Dietician

Open Hand Chronic Disease Self-Management

Program

Transportation Program

Wayfinding improvements







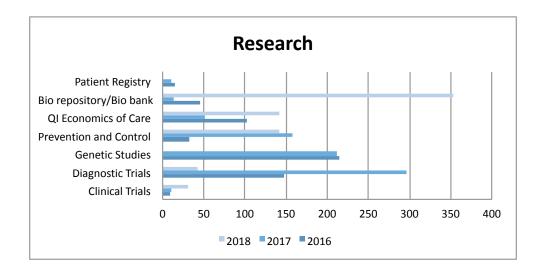


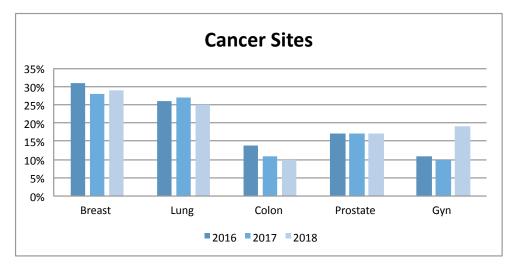


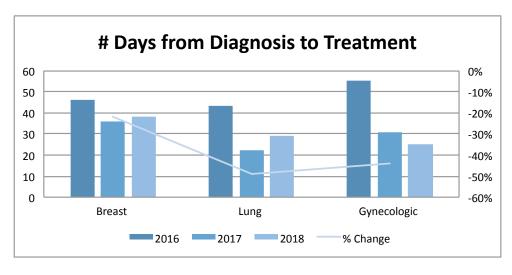


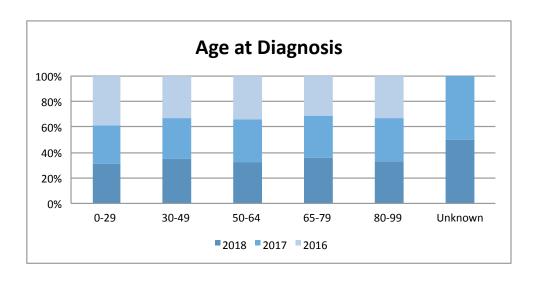
# Data

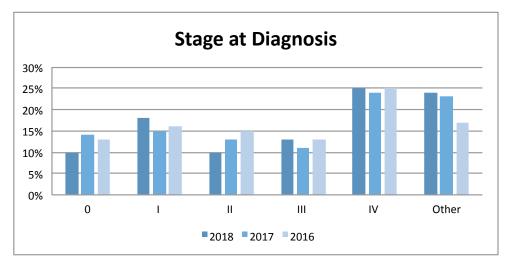
Since 2003, Grady has served 19,201 total patients

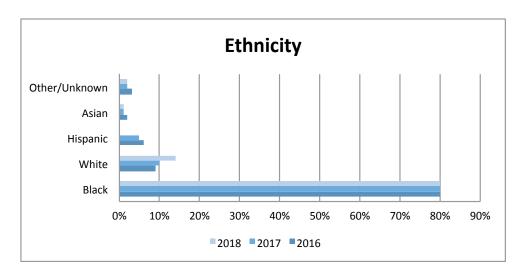














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