"This commitment holds true for all of our patients; we are relentless in our pursuit of delivering the best possible cancer care."

A message from leadership

As we look back over 2016, we continue to see Summa Health Cancer Institute develop and progress the care and support we provide cancer patients. We have the privilege of working with patients to make the difficult journey from cancer diagnosis through treatment and survivorship as easy and seamless as possible. And we take that responsibility seriously. The entire team at Summa Health Cancer Institute is dedicated to advancing the care we provide so our patients have less anxiety, less toxicity and improved outcomes.

We continue to specialize in breast, colorectal, gynecologic, lung and orthopedic, although we do treat more than 100 cancer types. Cancer care continues to evolve, as do the cancer services and support programs we provide. Highlights from 2016 include:

- Oncology Care Model: thanks to a grant from CMS, Summa Health was able to offer higher quality, more highly coordinated oncology care at the same or lower cost to Medicare.
- Our Lung Nodule Program grew significantly, as we improved our access and outcomes for lung cancer patients. Our success was acknowledged with recognition from U.S. News & World Report as a high performer in pulmonology in 2016.
- We continue to serve our most vulnerable population, offering high quality breast and cervical cancer screenings to those patients struggling to pay for these services.
- We expanded our supportive care throughout the system.
- We continue to focus on providing access to timely pulmonology consults for patients identified with Lung Rads 4 Lung Screening CT Scans.
- Providing Seamless, Patient-centered Lung Cancer Care.
- Screening for Lung Cancer.
- What is the Oncology Care Model?
- Community Outreach to Prevent Breast and Cervical Cancer.
- Supportive Care Improves Patient Experience.

You can read more about all of these initiatives in the following pages.

Our work continues, as new innovations in our patient care continue to abound. In 2017, we improved the patient experience, and hopefully, outcomes, through our multidisciplinary clinics. This new care delivery model allows patients to receive a coordinated, comprehensive and personalized plan of care using nationally recognized best practice guidelines in one appointment.

Also, in March 2017 the Summa Health Breast Center—Akron Campus was granted a three-year/full accreditation designation by the National Accreditation Program for Breast Centers. This accreditation demonstrates our firm commitment to offer our patients every significant advantage in their battle against breast disease.

This commitment holds true for all of our patients; we are relentless in our pursuit of delivering the best possible cancer care.

Excellent, quality care provided for our patients locally—that is Summa Health.

Gilbert Padula, M.D.
Medical Director
Summa Health Cancer Institute
Access to timely pulmonology consultations for patients identified with Lung Rads 4 Lung Screening CT Scans

Authors: Brian Bauman, M.D., FCCP; Sandy Kohut, RRT, BSAS; Sally Olszewski, RN, OCN; Laura Musarra, MBA

Background
The National Lung Screening Trial (NLST) led to the start of Summa Health’s Lung Screening Program, stressing the importance of screening high risk patients and providing timely evaluation/follow-up for abnormal findings. Although findings were reported back to the ordering physician, Summa’s Lung Nodule Program had no structured process or procedure to follow up on abnormal lung screenings. This study is an attempt to improve the processes that will lead to more timely pulmonary referrals for patients classified with Lung Rads 4 findings.

Criteria
Upon reviewing the 2015 data, of the 272 screenings performed, 18 had findings of nodules > 8 millimeters or classified as Lung Rads 4 findings. Only two of the 18, or 11 percent, were seen or reviewed by a pulmonologist within 48 hours. The Thoracic Oncology multidisciplinary team identified a need to expedite pulmonary referrals within 48 hours for patients with Lung Rads 4 findings. Expediting to a pulmonologist will improve time from detection to diagnosis and ensure the most appropriate diagnostic management.

Data
There were 479 Lung Screening CT scans completed between Jan. 1, 2016, and Oct. 31, 2016. Thirty-seven patients met the Lung Rads 4 criteria for expedited referral to a pulmonologist. Thirty of the 37 patients (81 percent) had access to the referral/consult in the recommended 48-hour timeframe. This is a 636 percent improvement compared to 2015. Sixty-three patients were classified as Lung Rads 3 and will require a six-month follow-up CT for their positive findings. All patients with positive findings are continually tracked by the navigators to ensure follow-up occurs. The ordering physician and/or the patients are notified when follow-up imaging is due. Any barriers to care are addressed by the navigators as needed.

Data Compared to Guidelines
Lahey Hospital in Burlington, MA is considered an industry leader in lung screenings. They contact providers within two weeks if a pulmonary referral has not been made. Summa Health far exceeds Lahey’s standards at this time and is meeting the Thoracic Oncology multidisciplinary team’s recommendation of expediting pulmonary referrals within 48 hours for Lung Rads 4 findings.

Summary
Eighty-one percent of patients with Lung Rads 4 findings have received the recommended expedited referral to a pulmonologist. The remainder has had delays related to primary care physician’s preference to manage the patient through PET scan or biopsy, patient’s request of a delayed consult, and primary care physician’s preference to coordinate appointments without program assistance.

Action Plan
Identified barriers to pulmonary referral are currently being addressed through education to primary care physicians and patients, as well as increased access to EMR for physician practices for improved communication.

The Lung Nodule Program will continue to track pulmonary referrals and continue to attempt to overcome any barriers that lead to delays in pulmonary referrals.

Process
After identifying the need to improve access to pulmonary consults, the Lung Navigators began reviewing all scheduled lung screening CT scans at all of Summa Health’s imaging locations. If a screening report showed an actionable nodule (Lung Rads 4), the navigator contacted the ordering physicians, suggested a pulmonary referral, and offered to expedite and coordinate the referral to a pulmonologist within 48 hours. For screenings ordered by a pulmonologist, the results were communicated to the specialist with an offer to assist with expediting follow-up testing. If a patient did not meet the recommended 48-hour referral/consult with a pulmonologist, barriers were identified and attempts were made to improve them. The steps implemented throughout 2016 to improve access to pulmonary referrals included creating scheduling reports, improving provider communication through EMR access for the navigator, primary care physician education, patient education, and improving the radiologist report structure by emphasizing Lung Rads classification.

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Providing Seamless, Patient-centered Lung Cancer Care

Summa Health is committed to providing seamless care for patients at risk for lung cancer. We are actively expanding and improving our lung cancer screening and treatment programs. At the core of this goal is our multidisciplinary approach.

Lung cancer is the leading cause of cancer death, causing more deaths per year in the U.S. than breast, colon, prostate and esophageal cancer combined. The incidence of lung cancer is similar for example to breast cancer, but the mortality of lung cancer is more than five times higher. This is in large part because lung cancer is diagnosed late, with more than 50 percent of cases presenting as metastatic disease.

Recently, however, lung cancer screening with CT scan has been approved by CMS and is covered by insurance. This was based on the National Lung Cancer Screening Trial which demonstrated a 20 percent reduction in lung cancer mortality with CT screening. When detected early, lung cancer is highly curable, with survival rates in screening populations exceeding 90 percent if immediate resection is performed.

Summa offers screening CTs throughout the health system at eight hospital and satellite locations.

Lung cancer screening is recommended for high risk patients who meet all of the following eligibility criteria:

- Age 55-77 years old
- Current smoker or quit within the last 15 years
- Smoked at least 30 pack-years
- Asymptomatic for lung cancer
- No CT chest in the last 11 months
- No co-morbid conditions that would limit life expectancy within five years

All patients enrolled in our lung cancer screening program are followed by a “lung navigator.” The navigator is our patients’ personal liaison between Summa Health’s physicians and diagnostic services. The navigator communicates directly with patients and primary care providers to ensure that all questions are addressed and testing is performed in a timely and coordinated manner.

Summa’s lung cancer screening program is expanding. In 2016, 581 initial screening CT scans and 64 annual (repeat) scans were performed. Nearly half of the lung cancers detected by our screening program were stage I, offering our patients an outstanding hope for cure.

In 2016, Summa was awarded the designation as a Lung Cancer Screening Center of Excellence by the Lung Cancer Alliance. This award recognizes that Summa:

- Provides clear information on the risks and benefits of CT screening through a shared decision-making process.
- Complies with standards based on best published practices for controlling screening quality, radiation dose and diagnostic procedures.
- Ensures a referral process to a lung cancer multidisciplinary clinical team, including radiologists, pathologists, pulmonologists, thoracic surgeons, oncologists, radiation oncologists and nurses to carry out a coordinated process for screening, follow-up and treatment when appropriate.
- Includes a comprehensive cessation program for those still smoking.
- Reports results to those screened and their primary care doctors and transmits requested copies in a timely manner.
- Reports to the American College of Radiology Lung Cancer Screening Registry.

Lung cancer is deadly, but when found early is highly curable. We offer patients hope. CT screening improves the chance of finding lung cancer early and for cure. I am proud that our multidisciplinary lung nodule and lung cancer team provides personal and seamless care coordination from screening to the most advanced treatment options right here in our community. Throughout the difficult journey, our patients know that they have the Summa Health lung cancer team standing and fighting with them.

Sincerely,

Brian Bauman, M.D., FCCP
Medical Director, Summa Health Lung Nodule Program, Respiratory Care and Pulmonary Services
2016 Non-small cell lung cancer cases by stage

<table>
<thead>
<tr>
<th>Stage</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
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<tr>
<td>I</td>
<td>72</td>
</tr>
<tr>
<td>II</td>
<td>22</td>
</tr>
<tr>
<td>III</td>
<td>51</td>
</tr>
<tr>
<td>IV</td>
<td>86</td>
</tr>
<tr>
<td>Unknown</td>
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</table>

2016 Small cell lung cancer cases by stage

<table>
<thead>
<tr>
<th>Stage</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>3</td>
</tr>
<tr>
<td>II</td>
<td>1</td>
</tr>
<tr>
<td>III</td>
<td>14</td>
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<tr>
<td>IV</td>
<td>26</td>
</tr>
<tr>
<td>Unknown</td>
<td>5</td>
</tr>
</tbody>
</table>

Screening for Lung Cancer

2016 Lung Screenings
Summa Health System was awarded designation as a Lung Cancer Screening Center of Excellence by the Lung Cancer Alliance in 2016.

In 2016, there were 581 Initial Lung Screening CT Scans and 64 Annual Lung Screening CT Scans.

2016 Lung Rads Data for Initial Screenings at Summa Health
Lung Screening CT scans use the Lung Rads reporting system to classify findings and provide recommendations for follow up. All Lung Rads 4 patients are recommended to have an expedited pulmonary consult through Summa Health’s Lung Nodule Program and are presented at Summa Health’s Multidisciplinary Thoracic Oncology Conference. These patients are followed closely by a navigator to assist with expediting testing, coordinating follow-up, and overcoming any barriers to care.

2016 Lung Cancer Diagnoses
Screening high risk patients for lung cancer will allow us to diagnose patients at an earlier stage when they have the most treatment options. In 2016, 15 patients were diagnosed with lung cancer through Summa Health’s Lung Screening Program. Seven of the 15 (47 percent) patients were diagnosed at Stage I.

Percent of Cases & 5-Year Relative Survival by Stage at Diagnosis: Lung and Bronchus Cancer
According to SEER 18 2007-2013, All Races, Both Sexes by SEER Summary Stage 2000, only 16 percent of lung cancers are identified at Stage I.
What is the Oncology Care Model?

A cancer diagnosis can be devastating to patients and families. A rising incidence, advances in care and improving mortality leads to an increasing impact of cancer on healthcare resources. Costs associated with advances do not necessarily correlate with outcome. Thus, focusing on value is extremely important.

In lieu of the above challenges, Centers for Medicare and Medicaid (CMS) Innovation Center introduced the Oncology Care Model (OCM) which was implemented nationally as well as at Summa Health in July 2016. OCM aims to provide higher quality, more highly coordinated oncology care at the same or lower cost to Medicare. Summa Health Medical Group was selected by CMS after submitting a grant in 2015.

Summa Health is the only group in the Akron/Canton region, and one of only 12 in Ohio, to have received and implemented this grant.

What are the practice requirements for OCM?

Treat patients with therapies consistent with nationally recognized clinical guidelines

Document a care plan for every OCM patient that contains the 13 components in the Institute of Medicine Care Management Plan

Provide core functions of patient navigation

Provide 24/7 patient access to an appropriate clinician who has real-time access to patient’s medical records

Use an ONC-certified EHR and attest to Stage 2 of meaningful use (MU) by the end of the third model performance year

Utilize data for continuous quality improvement

Care plans involve clear communication with patients regarding their:

- Cancer characteristics
- Prognosis
- Goals of treatment
- Advance care planning
- Financial counseling to address total and out-of-pocket costs
- Psychosocial evaluation with action plan
- Survivorship plans

“This program basically takes care of all of the comprehensive needs of the cancer patient,” says Sameer Mahesh, M.D., Summa Health Medical Group—Oncology. “And because advanced care planning is a requirement, patients get a chance to plan ahead. For example, access to behavioral health during their cancer diagnosis is helpful, access to social work is helpful. This doesn’t differ from the way our team practices in principle, but it has differed in the aspect of implementation. We are more pro-active than re-active and, as a result, patients are benefiting from this.”

Under the OCM, physician practices have entered into payment arrangements that include financial and performance accountability for episodes of care surrounding chemotherapy administration to cancer patients. CMS is also partnering with 16 commercial payers nationally in the model and SummaCare is one of them. While CMS requires practice transformational activities only for Medicare beneficiaries, Summa Health Cancer Institute has implemented these activities for all patients regardless of payer.

Which Summa Health Medical Group practices are participating?

- Medical Oncology
- Gynecology Oncology
- Breast Center
- Urology

What do feedback reports from CMS show thus far?

Feedback from CMS for patients treated at Summa Health in 2016 is summarized below:

<table>
<thead>
<tr>
<th>Metric</th>
<th>SHMG</th>
<th>OCM practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Medicare beneficiaries</td>
<td>510</td>
<td>484</td>
</tr>
<tr>
<td>Medicare expenditures for all services per beneficiary per month</td>
<td>$4,505</td>
<td>$4,676</td>
</tr>
<tr>
<td>Number of inpatient admissions, all cause per 100 beneficiaries</td>
<td>20.4</td>
<td>21.3</td>
</tr>
<tr>
<td>Number of ED visits not leading to admission or observation per 100 beneficiaries</td>
<td>17.4</td>
<td>15.2</td>
</tr>
<tr>
<td>Ancillary services in all ambulatory settings per beneficiary per month (includes laboratory and imaging)</td>
<td>$197</td>
<td>$270</td>
</tr>
<tr>
<td>Drugs per beneficiary per month</td>
<td>$2,082</td>
<td>$2,300</td>
</tr>
<tr>
<td>Mortality (all beneficiaries)</td>
<td>4.7%</td>
<td>5.0%</td>
</tr>
</tbody>
</table>

End of Life Care

- Any hospice care within 30 days before death: Percentage of deaths 71.8% 65.2%
- Days of hospice care within 90 days before death 26.4 18.9
- Percentage of hospital use within 30 days before death 42% 54.9%
- Percentage in the intensive care unit within 30 days before death 22.6% 26.6%
- Percentage receiving chemotherapy within 2 weeks before death 7.4% 12.7%

Patients treated at Summa Health have equivalent outcomes compared to other practices nationally including large academic centers at a lower cost. They have less hospitalizations and chemotherapy in their last few months of life and spend more days on hospice which gives them opportunity to be more comfortable and spend quality time with family.

What are some areas of improvement?

Emergency Department visits is one key area. Summa Health Cancer Research initiated an investigator initiated trial titled “Prospective Randomized Trial to Assess Relative Effectiveness of Two Educational Methods on Reducing Emergency Room Visits and Hospital Admissions in Patients Receiving First Line Chemotherapy.” Other measures include effective use of Oncology Infusion Centers for hydration and transfusion needs and same-day access to outpatient appointments for patients calling in with symptoms.

Conclusion

Achieving high value for patients must become the overarching goal of healthcare delivery with value defined as health outcomes achieved per dollar spent. Summa Health Cancer Institute is not just embracing it, but leading from the front.

Summa Health Cancer Institute’s OCM management team includes Sameer Mahesh, MD, Oncologist and Principal Investigator OCM; Joseph Koenig, MD, Oncologist and Medical Director, Cooper Cancer Center; Gilbert Padula, MD, Medical Director, Summa Health Cancer Institute; Elise Longfellon, RN, OCM Program Manager; Karen Speckman, RN, OCM Program Coordinator; David White, Sr. Solution Architect; JT; David Westermann, Clinical Systems Analyst, JT; Jamie Kish, Sr. Management Engineer, Performance Solutions; Mindi Reinbolt, Practice Manager, Summa Health Medical Group; Robin Lotz, MBA, Manager, Breast Imaging Services; Jody Norris, Practice Manager, Summa Health Medical Group; Eileen Simcox, RN, Clinical Coordinator, Gynecologic Oncology; Karen Gil, Scientific Director, Research Administration; and Dawn Pittinger, Manager, Clinical Research Billing.
In 2016, Summa Health provided **236 procedures** and identified three positive breast cancer cases through the Pink Ribbon Program.

**Summa Screens**

Summa Screens provides low-income women who are uninsured or underinsured free screening mammograms, diagnostic mammograms, breast ultrasounds, breast core biopsies and breast health navigation services throughout the breast care continuum. This supports appropriate follow-up while being consistent with evidence-based national guidelines set forth by the American Cancer Society and the U.S. Preventative Services Taskforce. The awareness and education provided empowers people to make informed choices about their health.

In 2016 Summa Screens:

- Provided 194 total services, including screening mammograms, diagnostic mammograms, breast ultrasounds, breast core biopsies and breast health navigation.
- Provided 53 screening mammograms, 64 diagnostic mammograms, 65 breast ultrasounds and 12 breast core biopsies.
- Diagnosed 5 cases of breast cancer.

Financial support is provided by Susan G. Komen® Northeast Ohio, the Stephen A. Communale, Jr. Family Cancer Foundation and through private donors.

**Breast and Cervical Cancer Project (BCCP)**

Ohio’s Breast and Cervical Cancer Project (BCCP), also referred to as the Pink Ribbon Program, is a statewide, high-quality breast and cervical cancer screening, diagnostic testing and case management program offered at no cost to eligible women in Ohio.

Started in 1994, it is funded through the Centers for Disease Control and Prevention (CDC) and the State of Ohio General Revenue funds and through participating healthcare providers.

The services include:

- Pelvic exams
- Pap tests
- Clinical breast exams
- Mamograms
- Diagnostic testing, including ultrasound and biopsy

Women are eligible for Pink Ribbon if they meet the following criteria:

- Live in households with income less than 200 percent of the poverty level
- Have no insurance
- Are 40 years of age or older for Pap tests, pelvic exams, clinical breast exams and diagnostic mammograms
- Are 50 years of age or older for screening mammograms

If patients are diagnosed with cancer while enrolled in the Pink Ribbon Program, they are fast-tracked into an Emergency Medicaid program to pay for their cancer treatment.

In 2016, Summa Health provided 236 procedures and identified three positive breast cancer cases.

We continue to be committed to the early detection and treatment of all cancers and to providing underserved patients access to cancer screenings through programs like Ohio’s Pink Ribbon Program and through programs developed at Summa Health.

---

**Procedures and Clients**

<table>
<thead>
<tr>
<th>Service</th>
<th>Summa Screens</th>
<th>BCCP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening mammograms</td>
<td>53</td>
<td>11</td>
</tr>
<tr>
<td>Diagnostic mammograms</td>
<td>64</td>
<td>18</td>
</tr>
<tr>
<td>Breast ultrasounds</td>
<td>65</td>
<td>23</td>
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<tr>
<td>Breast biopsies</td>
<td>12</td>
<td>0</td>
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<tr>
<td>Total services</td>
<td>194</td>
<td>57</td>
</tr>
<tr>
<td>Diagnosed</td>
<td>3 (3A, 2B, 1)</td>
<td>26</td>
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</table>

**Breast & Cervical Cancer Project (BCCP)**

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast biopsies</td>
<td>11</td>
</tr>
<tr>
<td>Breast consultations</td>
<td>18</td>
</tr>
<tr>
<td>Clinical breast exams</td>
<td>34</td>
</tr>
<tr>
<td>Colposcopy with biopsy</td>
<td>0</td>
</tr>
<tr>
<td>Diagnostic mammograms</td>
<td>28</td>
</tr>
<tr>
<td>Endometrial biopsy</td>
<td>0</td>
</tr>
<tr>
<td>Fine needle aspiration</td>
<td>0</td>
</tr>
<tr>
<td>Gynecological consultation</td>
<td>0</td>
</tr>
<tr>
<td>HPV tests</td>
<td>16</td>
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<tr>
<td>LEEP</td>
<td>0</td>
</tr>
<tr>
<td>MRI</td>
<td>0</td>
</tr>
<tr>
<td>Pap test / pathology RPT</td>
<td>19</td>
</tr>
<tr>
<td>Pelvic exams</td>
<td>23</td>
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<tr>
<td>Screening mammograms</td>
<td>57</td>
</tr>
<tr>
<td>Ultrasounds</td>
<td>26</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total # of Procedures</strong></td>
<td><strong>236</strong></td>
</tr>
</tbody>
</table>
Supportive Care Improves Patient Experience

Summa Health Cancer Institute understands that it is not just about the medical care a patient receives. We focus on the whole person, mind, body and spirit, and offer a number of support services to assist patients on their cancer journey.

Renewal Nook
Patients who visit the Renewal Nook leave the clinical side of their care at the door. When they enter the space in the Cooper Pavilion on the Summa Health System – Akron Campus, they are treated to a spa-like experience and can choose from several complimentary services.

Massage Therapy
Massage or Reiki therapy can help cancer patients reduce stress, improve sleep which can be so elusive before and during treatment, ease anxiety and reduce pain.

Support Groups
Summa Health Cancer Institute offers several different support groups, all providing an opportunity to meet and talk with others who are having similar experiences coping with cancer. Patients, survivors, family members and friends are welcome.

Physical Therapy
Therapists work with the medical team to develop a plan to address weakness, fatigue, pain, swelling, soft tissue tightness or joint stiffness. Therapy can also help improve activities of daily living, balance and walking.

Wig Salon
Hair loss is a difficult and emotional side effect of cancer treatment. Many patients choose to get a wig to help ease them through the hair loss with confidence and grace. At the Renewal Nook, patients can visit the Wig Salon and choose from a variety of products. These free wigs are provided through a generous partnership between The American Cancer Society and the Summa Health Cancer Institute.

The chart above illustrates that Summa Health patients significantly reduced their anxiety and pain levels and improved their level of relaxation through massage.

2016 Totals
Massage 238
Reiki 11
Chair 215

109 wigs distributed

<table>
<thead>
<tr>
<th>Support Groups</th>
<th>2016 Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Cancer Support (Cooper Pavilion)</td>
<td>96</td>
</tr>
<tr>
<td>General Cancer Support (Parkview Pavilion)</td>
<td>48</td>
</tr>
<tr>
<td>General Cancer Support (Medina Medical Center)</td>
<td>N/A (started in 2017)</td>
</tr>
<tr>
<td>Breast Cancer Support (Cooper Pavilion)</td>
<td>107</td>
</tr>
<tr>
<td>Look Good, Feel Better Workshop (Akron Campus)</td>
<td>21</td>
</tr>
<tr>
<td>Look Good, Feel Better Workshop (Barberton Campus)</td>
<td>18</td>
</tr>
</tbody>
</table>

2016 Patients
Akron/Tallmadge Locations
- 112 new cases evaluated
- 143 total visits
  - Average number of visits was four
  - 85 patients met goals of either decreased edema or improved active range of motion upon discharge

Summa Health System – Barberton Campus
- 52 evaluations for cancer-related lymphedema or prevention education:
  - 32 - Breast
  - 11 - Gynecologic
  - 3 - Head/Neck
  - 6 - Other