

2007 OUTMIGRATION (Quality Report)

Quality of life for patients with cancer is receiving increasing attention at St. Joseph Hospital. One of the recognized patient priorities is to have excellent, coordinated care in our own community. The Cancer Committee has been reviewing "outmigration" for the past few years to assess how many patients need, or feel the need, to seek some of their care away from home. Using preliminary 2007 data from the SJH Tumor Registry, this outmigration update looks at the number of patients with one of the "major" cancers who have at least one aspect of care – diagnosis, imaging, chemotherapy, radiation or surgery -- out of area. In this data, a patient with breast cancer who is diagnosed and has surgery in Whatcom County, then some or all of their remaining treatment (radiation and/or chemotherapy) in another community, will be included in both the local care and outmigration counts. All medical providers in our community who diagnose or treat cancer participate in the SJH Registry, however patients who don't get any aspect of their cancer care (including diagnosis) in this local network of providers will not be represented in this study.

Out Migration of SJH cases for 2007 (not completely abstracted) by site										
Primary Site	Total	Part or all of tx elsewhere								Part or All Non-Local Tx:
		UWMC	VMMC	Swedish	Prov Everett	Skagit	United Gen	Other	Mult facilities	
Colorectal	113	2	1	2		1	1			7 (6%)
Breast*	205	5		3		5	1	2	4	20 (10%)
Lung	108	3	2	2		2		1		10 (9%)
Prostate	215	4	6	11				3		24 (11%)
GYN	47	13	9	2				2		26 (55%)
Lymphoma	63	1		1		1				3 (5%)
leukemia	32	4								4 (13%)
brain(benign & malig)	34			2	1			2	1	6 (18%)
Esophagus	7	3						1		4 (57%)
Stomach	13		1						1	2 (15%)
pancreas	23	1	3					1		5 (22%)
Malig melanoma*^	123	8		1						9 (7%)
	983	44	22	24	1	9	2	12	6	120 (12%)
		37%	18%	20%	1%	8%	2%	10%	5%	
*Includes insitu cases in total										
^101 if these were dx & tx in physician office only										

Table 1

Table 1 above shows that about 12% of patients receive part or all of their care outside the community. This percentage has held steady for the past few years. Also holding fairly steady is the diagnosis mix. Gyn Oncology other than Stage 1 Endometrial Cancer is usually referred to Gyn Oncologists. Esophageal Cancer is also frequently sent out of town since we do not have

esophageal ultrasound for staging, nor do we have a sufficient volume of cases for surgeons to feel fully comfortable with resections.

There has been anecdotal evidence that Seattle Cancer Care Alliance (SCCA) has been capturing an increasing share of patients leaving the community. This was confirmed, with the finding that patients who leave the community choose SCCA by at a twofold number over its closest competitor. Skagit Valley Cancer Center is an affiliate of the SCCA, but this does not seem to have influenced patient care decisions.

Although most cancer care is provided in outpatient settings, hospital inpatient care is still important. Data from the CHARS statewide reporting system (Table 2 below) shows that 61% of hospital stays for cancer by patients from Whatcom County occurred at St. Joseph Hospital. Since SJH does not have a specialized inpatient oncology unit, the number of patients and the conditions treated at out-of-area inpatient facilities seems appropriate.

Whatcom County Inpatient Oncology Market								
January To June 2007								
	Lymphoma Breast	Male Reproductive Leukemia (excl. prostate)	Medical Oncology	Oncology (Surgical)	Urinary Other System	Total	Mkt. Share	
St. Joseph Hospital - Bellingham	18	20	100	5	1	13	157	61.6%
University of Washington Medical Center	3	9	28	8			48	18.8%
Swedish Medical Center		2	14	2	1		20	7.8%
Children's Hosp & Regional Medical Ctr		3	12				15	5.9%
Virginia Mason Medical Center			4	6	1		11	4.3%
Overlake Hospital Medical Center			2				2	0.8%
Seattle Cancer Care Alliance			1				1	0.4%
Skagit Valley Hosp				1			1	0.4%
Total	21	34	161	22	1	15	255	100.0%
SJH Market Share	85.7%	58.8%	0.0%	62.1%	22.7%	100.0%	86.7%	61.6%

Table 2

In conclusion, there does not seem to be an increase in out of area care, even with increasing marketing of Seattle and Skagit based Cancer Programs in our community. Overall, few patients receive any of their outpatient care out of area. The pattern of where patients go for out-of-area care should play a significant role as St. Joseph considers whether to explore strategic alliances with other Cancer Centers.