

ATTENDANCE:

Steven Taylor, Sr. Director,
Cancer Services
Nancy Boutin, MD
Arnella Hennig, MD
Lawrence Konick, MD
Lichung Ku, PhD
Eric Laro, MD
Cathi Murray, Manager
Edward Orłowski, MD
Robert J. Ponec, M.D.

Nancy Reyes-Molyneux, MD
Bev Smith, RN, BSN, Cancer
Services Manager
Charles Petrunin, MD
John Strother, MD
Natasha Tiffany, MD
Ted Williamson, MD
Julie York, MD

Excused:

Aaron Crane, CFO
Andrew Clarke, MD
Christine Clarke, MD
Joseph Contino, MD
Beth Dayton, MD
John Donovan, MD
Jonathan Durning, MD
David Elmgren, MD
David Farthing, MD
Kamran Firoozi, MD
Matthew Gordon, MD
Kendall Graven, MD
Dana Hawkes, RN

Alan Hay, MD
Ken Hirasaki, MD
Katherine Hoda, MD
Ronald Jaecks, MD
Matthew Kang, MD
Mark Magilner, MD
Gloria (Rios)Marlowe, MD
Judy Marvin MD
Everett Mozell, MD
Tanja Pejovic, MD
William Pierce, MD
Alison Smith, MD

Guests:

Brian Gard, Gard Communications
Amie Wittenberg, RN
Lea Ann Morrow, RN, OCN

Issue	Findings/Discussion	Recommendation/ Action
<p>6:30-7:00 Updates</p> <ul style="list-style-type: none"> ▪ Breast committee – Natasha Tiffany ▪ Tumor Site Specific Initiatives – Steven Taylor, Robert Ponec Breast, GI, Thoracic ▪ Palliative Care – Nancy Boutin ▪ Radiation Oncology: Trilogy, SRS, HDR – Matthew Kang ▪ Gyn/Oncology – Eric Laro / Steven Taylor 	<p>Breast Committee</p> <ul style="list-style-type: none"> ▪ NAPBC Survey 9/9/10 will include chart reviews, tours, & attendance at Breast Committee. ▪ Primary care and OB/GYN physicians now represented as members of Breast Committee: Drs. Kahan, Goldsworthy, and Wild. ▪ Intra-operative machine requested for OR; this would allow immediate specimen filming to help with specimen orientation, pathological identification, and to identify if further surgery is necessary. ▪ Promotion of the Cancer Fatigue Program continues, including Physical Therapy, Lymphedema Clinic & RISE exercise programs; brochures available for physician offices; programs not limited to patients with cancer. (See handouts) <p>Tumor Site Specific Initiatives</p> <ul style="list-style-type: none"> ▪ Breast Committee: See above ▪ GI Committee: Second meeting held 7/19/10 with discussion of creating order sets using NCCN guidelines; initiating a physicians' list designating specific procedures performed by each to aid in the referral process. (See schedule attached) ▪ Thoracic Committee: To begin in October. (See schedule attached) ▪ 65% of the community population is treated at Salem Health; communication is key in letting primary care providers know the excellent quality of care provided at Salem Health. <p>Palliative Care</p> <ul style="list-style-type: none"> ▪ Foundation Grant of \$85,000 received. ▪ \$17,000 Regence planning grant received; implementation grant in the application process for \$125,000 each year for the next 2 years to further the Palliative Care Program; addition of ICU patients is the next step and intensivists are on board, per physician interviews/survey conducted in June & July. ▪ Approximately 180 patients seen in the first six months of the Palliative Care program, at full capacity. 	<p>Continue to update</p>

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	<p>Radiation Oncology</p> <ul style="list-style-type: none"> Replacement of Linear accelerator for a state-of-the art Trilogy machine capable of SRS; construction of dedicated HDR brachytherapy suite also ongoing; to be completed late November. This will allow faster, more precise patient treatment. 	
<p>7:00-7:30 Discussion Items</p> <ul style="list-style-type: none"> KSA visit July 26th and July 27th – Steven Taylor Interactive Lobby Design – Nancy Reyes-Molyneux / Steven Taylor OHSU Affiliation Meeting – John Strother Joint Grant Application – Bev Smith Research – Steven Taylor / John Strother 5-South – Amie Wittenberg / Nancy Boutin 	<p>KSA: Tabled Lobby Design: Tabled OHSU Affiliation Meeting: Tabled Joint Grant Application: Tabled Research: Tabled</p> <p>5-South Patient satisfaction greatly improved. (See handout)</p>	<p>Continue 5-South changes which increase patient satisfaction.</p>
<p>7:30-8:00 Presentation / Discussion SCI Branding Campaign – Gard Communications</p>	<p>The Plan</p> <ul style="list-style-type: none"> Develop a positioning strategy to increase market share Develop a brand that is consistent with SCI goals and a plan to promote that brand with consistent messages. Do this collaboratively. <p>Strategic Positioning</p> <ul style="list-style-type: none"> An organizing principle, defines the brand. Guides all subsequent strategies and tactics. <p>Possible Positioning Strategies for SCI</p> <ul style="list-style-type: none"> Currently developing and gathering input. Most powerful when it's authentic and particular. A way to package and market related services A way to provide patients with organized and convenient access to the best care A way to improve the health of the community <p>Tactics Under Consideration</p> <ul style="list-style-type: none"> Page-dominant ads in Salem S-J <ul style="list-style-type: none"> Introduction of SCI by Salem Health Definition of SCI – services and physicians 	<p>Plan is to be physician—driven. Physicians to identify how they want to be included in SCI.</p>

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	<ul style="list-style-type: none"> – Relationship with OHSU • Periodic ads/inserts in WSJ, NYT and Portland publications • Collateral “program” • Media relations <p>Discussion</p> <ul style="list-style-type: none"> • What does Salem Cancer Institute mean to you? • What would you like it to mean? • How would you describe it to your patients? • How would you like to “co-brand” with SCI? • How do you conceive of the marketing relationship with Knight Cancer Institute? • Other opportunities or challenges. 	

Signature: _____

Date _____