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More than a decade ago, three world-renowned medical and research centers had a vision that together they could lead the world in the fight against cancer. That vision became Seattle Cancer Care Alliance.

At Fred Hutch, interdisciplinary teams of world-renowned scientists work together to prevent, diagnose, and treat cancer, HIV/AIDS, and other life-threatening diseases. Fred Hutch's pioneering work in bone marrow transplantation led to the development of immunotherapy, which harnesses the power of the immune system to treat cancer with minimal side effects. An independent, nonprofit research institute, Fred Hutch houses the nation's first and largest cancer prevention research program.

The roster of internationally acclaimed scientists at Fred Hutch includes a MacArthur Fellow, seven members of the National Academy of Sciences, five members of the Institute of Medicine, six members of the American Academy of Arts and Sciences, five members of the American Association for the Advancement of Science, and eight current and former Howard Hughes Medical Institute investigators.

The rigorous, innovative research at Fred Hutch lays the foundation for groundbreaking advances in treatment at SCCA.

Consistently ranked as one of the best children's hospitals in the country, Seattle Children's Hospital specializes in meeting the unique physical, emotional, and developmental needs of children from infancy through young adulthood.

With the most comprehensive pediatric cancer care team in the Pacific Northwest, Seattle Children's also consistently ranks among the nation's top treatment centers for children, adolescents, and young adults with cancer.

Seattle Children's pediatric oncologists have special training diagnosing and treating childhood cancer. They care for their young patients in clinics (as outpatients) and in the Cancer Care Unit (as inpatients) on the hospital's main campus.

Seattle Children's Research Institute is pushing the boundaries of medical research to find cures for pediatric diseases.

As one of the world’s leading academic medical centers, UW Medicine has a commitment to improve health by advancing medical knowledge, providing outstanding primary and specialty care, and providing outstanding preparation for tomorrow’s physicians, scientists, and health professionals. UW Medicine is consistently ranked among the top hospitals in the country for cancer treatment. Many of SCCA’s medical oncologists, radiation oncologists, and surgeons are UW Medicine doctors. SCCA’s adult patients receive surgery and inpatient care at UW Medical Center.

The UW Medicine faculty includes researchers who have received Nobel Prizes in Physiology or Medicine, members of the National Academy of Sciences and the National Academy of Medicine, and Howard Hughes Medical Institute investigators.

UW Medicine ranks among the top academic research institutions in National Institutes of Health (NIH) funding, and the UW School of Medicine is consistently recognized as one of the nation’s top providers of medical instruction by U.S. News & World Report.
An entire ecosystem around our patients

The incredible success of the original concept of Seattle Cancer Care Alliance has evolved into a comprehensive system of care that extends access to patients in communities across a five-state region including Alaska, Idaho, Montana, Oregon, and Washington.

Community-based clinical care sites at EvergreenHealth and UW Medicine’s Northwest Hospital & Medical Center offer access to SCCA providers, innovative treatments and one-of-a-kind clinical trials.

Network members allow patients to receive breakthrough treatments and exceptional care across the five Northwestern states. Patients can come to SCCA for diagnosis and development of a treatment plan, then receive care closer to home.

Each of our founding partners brings a truly unique set of skills and expertise to the fight against cancer, and together, we are creating unprecedented progress in that fight through the SCCA.

Better Together
At the heart of our unique cross-disciplined approach to cancer care is a commitment to translate discovery in our labs into new therapies, drugs, and treatment protocols as quickly as possible.

In 2015, SCCA was able to offer our patients access to more than 200 active clinical trials that are pushing the boundaries of how cancer is treated and cured.

Nowhere is this more true than in the area of immunotherapy—stimulating the body’s natural immune response to fight cancer. In 2015, we saw unprecedented progress in the use of immunotherapy in the treatment of lung cancer and melanoma. And SCCA has received global attention for a promising new approach of using T-cells to eliminate cancers that were previously considered incurable.

Breakthroughs, scientific advances, and a desire to stay on the cutting edge of science allow us to recruit the most respected doctors, scientists, and clinicians in the world to SCCA to do their best work.
Together with Jenna
Cord blood transplant

Jenna was nine years old when her mother, Julie Gibson, took her to a pediatrician, suspecting her daughter had a case of strep throat. “The pediatrician took one look at me and knew something was wrong,” Jenna said.

Jenna’s doctor quickly ordered a blood test, and two hours later, Julie received the terrifying call telling her to take Jenna to the ER at Seattle Children’s.

“It was such a surreal moment,” Julie remembered.

Blood results indicated leukemia. “We all felt really scared,” Julie said.

More scary news was on the way.

After Jenna’s first round of chemotherapy, the doctors knew she would need a bone marrow transplant. But Jenna was adopted, so a sibling donor match wasn’t an option, and the percentage of viable donors was very limited.

Jenna took it hard. She broke down in tears, not knowing what was going to happen to her.

The oncology team at Seattle Children’s collaborated with their colleagues at SCCA, and Jenna’s situation began to turn around.
Jenna’s case was brought to a team of SCCA oncologists specializing in cord blood transplantation. Dr. Colleen Delaney—director of the cord blood transplant program at SCCA—was doing breakthrough clinical trial research that held a great deal of promise for saving Jenna’s life.

Working with Dr. Paul Carpenter, a pediatric oncologist and outpatient clinical director of pediatric blood and marrow transplantation, they devised a comprehensive plan that would give Jenna the best hope of a full recovery. “You become a part of their life from the minute they walk in the door for the consult,” noted Dr. Carpenter. “They put their trust in you to make the best decisions for their child.”

To help them navigate the often scary waters of cancer treatment, Jenna and her family could always rely on the compassion and commitment of Joan Suver, pediatric oncology physician assistant. “We have a close-knit group in our clinic. We’re like a family, and together, we can make things happen for our patients and their families,” said Joan. “I do my job because of the reward of seeing patients come through on the other side.”

Now 13, Jenna is far more concerned about perfecting her hip-hop moves than the results of her wellness checks. Her prognosis is outstanding, and she has decided that she is going to turn her love for science and medicine into a career as a nurse. “I’m three years cancer-free, and going on four.”

“On the day of the transplant, it was amazing to watch those cells go into her,” noted Julie. “I kept thinking, ‘This little bag of cells is going to save Jenna’s life.’”

The science

The basic science of cord blood transplantation was developed at Fred Hutch, translated in the clinic at SCCA, and administered at Seattle Children’s. As Dr. Delaney noted, “It’s just like it sounds. We take blood that is left over after a baby is born, collect it from the umbilical cord, and use those blood stem cells to perform a bone marrow transplant.

“We can find cord blood donors for 99% of those patients who can’t otherwise find a donor with quicker time for white-blood cell recovery and much less risk of infection.”

“The future

Now 13, Jenna is far more concerned about perfecting her hip-hop moves than the results of her wellness checks. Her prognosis is outstanding, and she has decided that she is going to turn her love for science and medicine into a career as a nurse.

“I’m three years cancer-free, and going on four.”

Today, cord blood transplants offer hope across a wide range of blood cancers and immune deficiency disorders. Cord blood transplants offer a much greater likelihood of a match for a much larger percentage of people requiring transplants. Additionally, cord blood transplants are more forgiving than other procedures, such as bone marrow transplants, when the donor is not a perfect genetic match.
Together with Ali

Triple negative breast cancer

Anybody who knows Ali Spain will tell you she is the model of health and fitness. An avid runner, Ali had just reached the pinnacle of her running career: the TransRockies Run, a six-day ultra trail race that covered 120 miles at elevation in the Rocky Mountains.

Then she noticed a small lump under her armpit.

It wasn’t painful, so Ali didn’t think anything of it. But within a couple of months, it had grown significantly. So she went to her primary care physician at the UW Neighborhood Clinic in Woodinville, who quickly referred her to SCCA.

Ali was diagnosed with triple negative breast cancer, an aggressive cancer that makes up about 12% of all breast cancer cases and requires a more aggressive treatment protocol.

“I was shocked,” Ali said. “At the time, I was very healthy and fit. Then my mind went to my daughter, and I thought, ‘How will she grow up without me?’”

It was her new reality. Ali was 47 years old, and her life would never be the same. It was time to approach cancer with the same energy and commitment she brought to her running.
The team

After a review of Ali’s situation, her team at SCCA decided on a multistep, coordinated approach to treatment. Dr. VK Gadi would be her medical oncologist; Dr. Janice Kim would handle radiation oncology; and Dr. David Byrd would be Ali’s surgical oncologist. Noted Dr. Kim, “We decided that her breast cancer warranted treatment from all three of us.”

In addition to these capable physicians, Ali also had nurses like Bente Dalby, RN, to coordinate her care among the many different appointments and specialists she would need to see. Bente explained, “I really like to get to know my patients. I like to understand their situations and see how I can support them on their journey.” Ali could also rely on the services of Elisabeth Tomere, physical therapist, to help with her recovery following her mastectomy and reconstructive surgery.

“You’re definitely part of the team with your care providers,” Ali said. “One of the biggest things I am so proud about is how we work as a team. It is a very well coordinated dance,” noted Dr. Kim.

Ali’s care team encouraged her to stay active even during treatment. Shortly after her mastectomy, she began running again and continued doing so during radiation. “Running is my ultimate freedom,” she said.

The science

Ali received five months of chemotherapy, followed by a mastectomy, six weeks of radiation, and reconstructive surgery.

In addition, Ali participated in a clinical trial of an oral chemotherapy treatment. The trial lasted three months, during which Ali took a pill weekly. The commitment was minimal, since it didn’t require an additional procedure or special trip to the clinic. Ali also participated in an imaging research study. This required extra time and commitment, but “It also gave my care team more insight into the shrinkage of the tumors, which gave me peace of mind knowing the chemo was working,” she said.

The future

Ali continues to see both Dr. Gadi and Dr. Kim every six months for checkups—something she’ll continue to do until she’s five years out from treatment.

She is also in the process of selling her business and plans to take some months off to decide what’s next.

“I’m not sure where I’ll land, but I do know my next chapter will involve more creativity and balance — two things that were missing in my pre-cancer life.”

For now, she is cherishing time with family and friends. She says cancer brought her closer to her family. Ali is looking forward to being active with her daughter, who is now 12, and running continues to be a big part of her life. She did a three-day run in California with some girlfriends in May.

“Our bags are transported for us and we run from one inn to the next on trails along California’s coastal hills,” she says. “A bit of a luxury trek … this is just my speed now.”
Better Together

SCCA doctors are exceptionally talented in their respective fields. Working together, they are able to do extraordinary things. Here is a brief look at just a few of the talented people who are part of our team.

**Shailender Bhatia, MD**
Immunotherapy for melanoma

In 2015, President Jimmy Carter announced that the melanoma that had spread to his brain and liver was no longer growing. The drug used in his immunotherapy treatment had its start at Fred Hutch with researchers who included Dr. Shailender Bhatia and others around the world. Dr. Bhatia is a medical oncologist who cares for patients with skin and kidney cancer at SCCA and an assistant professor in the medical oncology division at UW Medicine.

“Our immune system has the power to eradicate cancer cells completely,” said Dr. Bhatia. “What we have seen over the last few years is that when stimulated the right way, the immune system can work really well.”

**V.K. Gadi, MD, PhD**
Fertility and cancer

Dr. V.K. Gadi is a medical oncologist at SCCA who specializes in caring for patients with breast cancer. He is an assistant professor of medicine in the division of oncology at UW Medicine and an assistant member in the clinical research division at Fred Hutch. In addition to taking care of breast cancer patients, Dr. Gadi participates in clinical research and teaches and trains junior physicians. His research at Fred Hutch is dedicated to understanding how the exchange of cells during pregnancy between a mother and her baby could contribute to or predict future cancer risk. “We can now go after cancer cells in a way that we never have before,” said Dr. Gadi.

**Ajay Gopal, MD**
Better treatment options for lymphoma

Dr. Ajay Gopal is the director of clinical research for hematologic malignancies and hematology at SCCA, where he specializes in the treatment of lymphoma, chronic lymphocytic leukemia, and low-toxicity therapies. Dr. Gopal is also a professor of medical oncology at UW Medicine and a member in the clinical research division at Fred Hutch.

Dr. Gopal’s upcoming research will focus on treating mantle cell lymphoma, a type of non-Hodgkin’s lymphoma that begins in white blood cells, which are key to fighting infection. “The median age for a lymphoma patient is 60 to 66,” Dr. Gopal said. “In my research, I’d like to find a way to get these most effective therapies to this group, which represents half of all lymphoma patients.”

**Janie M. Lee, MD, MSc**
Tailoring breast screening to risk level

Dr. Janie M. Lee is the director of breast imaging at SCCA, where she applies technologies and clinical research to the early detection of breast cancer. She is also Section Chief of Breast Imaging and Associate Professor of Radiology at UW Medicine.

Dr. Lee combines expertise in breast cancer diagnostics, technology assessment, and outcomes with information about patient risk factors, cancer biology, and new imaging tests to improve the diagnosis of new breast cancers or recurrences in survivors. “Detecting second breast cancers earlier while minimizing the potential harms of additional screening will help breast cancer survivors live longer, healthier lives,” said Dr. Lee.

**Sylvia M. Lee, MD**
Tumor-infiltrating lymphocytes to treat melanoma

Tumor-infiltrating lymphocytes (TILs) are part of the body’s immune response to recognize and attack melanoma cells. Dr. Sylvia Lee, an SCCA medical oncologist and an assistant professor with UW Medicine, is the lead investigator on a clinical trial to study the effectiveness of TILs to treat melanoma.

“Enhancing your own immune system’s natural ability to recognize and attack cancer cells is perhaps the most promising new form of treatment in a field long limited to surgery, chemotherapy, and radiation,” Dr. Lee said.

**Renato G. Martins, MD, MPH**
Advances in lung cancer treatment options

The Food and Drug Administration (FDA) approved new cancer therapies for non-squamous small cell lung cancer in 2015 following clinical trials conducted at SCCA and UW Medicine. Dr. Renato G. Martins was one of several researchers who worked on early clinical trials for the drug.

Dr. Martins is the medical director for outpatient general oncology and hematology at SCCA and the medical director of thoracic/head and neck oncology at SCCA, and a professor at UW Medicine. Dr. Martins is proud that SCCA patients have access to clinical trials that undergo a rigorous approval process. “Clinical trials are now responsible for significant improvements in the lives of lung cancer patients,” said Dr. Martins. “Patients treated at the SCCA have the opportunity to receive these promising therapies, sometimes years before they are approved.”

**Seth Pollack, MD**
Immune-based therapy for sarcoma

Sarcoma is about 1% of all cancers, yet more than 70 types of sarcoma exist. Dr. Seth Pollack is a medical oncologist who treats adult patients with sarcoma at SCCA, an assistant professor with UW Medicine, and an assistant member at Fred Hutch. His clinical expertise is immune-based therapies for sarcoma, including adoptive T-cell therapy.

“Survival rates are higher for patients who receive a sarcoma diagnosis and are treated early,” said Dr. Pollack. “More treatment options are still needed for patients living with a more advanced stage of the disease.”
Clinical trials turn cancer research into real-world treatments and cures. SCCA is proud to have one of the most active clinical trial programs in the world—providing new hope for our patients and giving them a way to play a role in the fight against cancer.

**Clinical trials by the numbers**

- **988** Total number of patients enrolled in therapeutic and supportive care clinical trials in 2015
- **112** Number of new therapeutic and supportive care trials opened for the first time in 2015
- **48** Different types of cancer addressed by these new trials
- **500+** Clinical trials in process to bring tomorrow’s treatment to our patients today
- **24%** Total percentage of SCCA patients enrolled in clinical trials in 2015
- **97** National Cancer Institute-designated comprehensive cancer hospital in the Pacific Northwest

**Seattle Cancer Care Alliance is the only**

**SCCA nurses drive research**

SCCA nurses are instrumental to the research process. They provide knowledge and leadership that help drive innovation and improve outcomes for patients. In 2015, SCCA nurses led numerous research posters and presentations at national and international nursing conferences. Kari Ann Kastle, RN, presented “Innovations in Nursing Education and Transition to Professional Practice” at the Seattle Nursing Research Conference in January 2015. Ann Breen, RN, MN, APRN, OCN and Leslie Vietmeier, RN, BSN, MN, ARNP, FNP-BC, along with certified genetic counselor Robin Bennett, MS, Doctor of Science, and medical oncologist Stephanie Lee, MD, MPH, served as faculty members for the Annual Puget Sound Oncology Nursing Symposium in Lynnwood in March 2015.

Elizabeth Barnett, BA, RN, HP, and Lindsay Palomino, RN, BSN, presented “HP2: Use of a Heparin/ACD-A Anti-Coagulant Solution for MNC and JPC Collections Using The Spectra Optia Apheresis System” at the American Society for Apheresis Conference in San Antonio, Texas, in May 2015 (see photo at right).


*Research team: the face of clinical trials*

For many SCCA patients, access to clinical trials enhances care and treatment options. Members of research teams monitor every step of clinical trials in partnership with patients. They are the face of research, providing compassionate, quality care to patients.

As a research manager, Nichole Real Pelz, MPH, works in coordination with clinical trial team members to enroll patients, coordinate logistics, and monitor workflows between the patient’s care team and other departments, like blood draw, radiology, and pharmacy.

Delivering the most innovative, safe, and promising care is vital. For Nichole’s daily work, that translates into having a “big picture” understanding of the work and a commitment to each and every person she works with. And no one knows that better than patients.

“I have nothing but thanks, admiration, and appreciation for the research teams I’ve worked with at SCCA,” says Stan Collender, SCCA clinical trial patient undergoing treatment for Merkel cell carcinoma. “Whether it was dealing with me personally during my visits or remotely between my visits [from my home in Washington, D.C.], the research associates and outstanding nursing staff have made me feel welcome, safe, and well cared for. I want especially to thank Nichole, the first research associate I worked with and the one who from the start showed me how great it was to be treated at SCCA. She was an integral part of my treatment. I am truly grateful for her outstanding support and additional attention.”

The research programs at SCCA are dedicated to making novel and scientifically exciting therapies available to patients. “The primary focus of all teams across the SCCA system is to improve science and research for our patients,” says Nichole. “SCCA doctors and research teams have the privilege of offering the studies and upcoming therapies we feel make the most sense scientifically, as well as which studies and therapies best meet our patients’ needs.”

“Celebrating new [FDA] approvals, especially for therapies we have participated in, is great, but it’s important to continue to search for better options,” says Nichole. “Our end goal is to help provide therapies that extend lives while also improving quality of life until we reach the point of finding cures.”
We are proud to be in the top rankings for patient survival in the National Cancer Data Base for the 13th straight year.

We’re equally proud to be ranked among the top five Best Hospitals in the Nation for Adult Cancer Treatment. Not because we seek accolades for our work, but because these rankings are objective indicators of our performance against the measures that matter most to cancer patients and their families.

In 2015, Memorial Sloan Kettering Cancer Center commissioned a first-of-its-kind study that offered insight into why some cancer centers were able to achieve consistently better results. Their research clearly indicated centers that follow the kind of multi-disciplinary collaborative approach pioneered by SCCA offer their patients a 10% better survival rate.

The MSKCC study proved that Better Together is not just an appealing way to build a community of people committed to the fight against cancer, it is a proven strategy to create real hope for the patients we serve.
Together with Karen

Follicular non-Hodgkin’s lymphoma

“When I was diagnosed in 2008, I had two young kids at home, and my first thought was, ‘Will I see them graduate from high school? Will I see them get married?’” said Karen Allen, Stage IV follicular non-Hodgkin’s lymphoma (FNHL) patient.

FNHL is often diagnosed in its later stages because it is a type of cancer that causes little to no pain. Currently, there is no cure.

After three months of treatment at SCCA, Karen was feeling much better—“remarkably normal,” according to her. “It’s been interesting being a cancer patient who looks healthy and is happy,” she said. There is also no doubt that Karen is able to live life to its fullest.

“As a patient at SCCA, I don’t feel like I am taking this cancer journey alone. They helped me understand my fears don’t have to rule my life. I have a team.”

But Karen’s journey is not without its ups and downs.

In March 2015, she received another diagnosis. This time, it was breast cancer.

It was time, once again, for Karen and her team at SCCA to get to work on treatment and recovery, to focus on wellness.
As a nurse navigator, Leslie Irving provides information about diagnosis, treatment, coping, support groups, and community offerings to patients like Karen. She also coordinates all treatment between two teams at SCCA.

Dr. Ajay Gopal, director of clinical research, hematology malignancies/hematology at SCCA, heads Karen’s FNHL treatment team and has been working closely with her for several years.

Dr. Kristine Calhoun, a dedicated breast surgery specialist, removed Karen’s tumor. Oncology nurses like Ceybom Newton provided excellent support throughout the process. Ceybom explained, “To make sure our patients know they are not in this alone is really awesome.”

“Everyone collaborated with everyone,” Karen said. “I felt surrounded by knowledgeable, caring people.”

“No one works in a silo here,” noted Leslie. “We were one of the first multi-disciplinary clinics in the country, and have become a model around the world.”

Karen was able to become part of an innovative clinical trial on the leading edge of cancer care, effectively treating her FNHL like a chronic disease. “It was a game-changer,” explained Karen. “If I hadn’t been at Seattle Cancer Care Alliance, I might not have known about it. Without it, I don’t think I’d be able to live such a normal life.”

And thanks to new ways to mitigate the effects of chemotherapy, Karen also didn’t have any of the “typical” challenges, such as hair loss, from her breast cancer treatment program. It did not have an overly debilitating impact on her life and she has recovered fully.

Karen’s experience with cancer helped her live life more boldly. “I would never have learned to ride a motorcycle without having cancer first,” she said. And “riding” is an understatement. Karen now raises money for cancer research by riding her motorcycle all over the U.S.

“There’s nothing like being on a motorcycle, especially when you’re helping others at the same time. It was a huge gift of wellness for me and I have many people to thank for that.

“Even though I’m sick, I can still live well and look forward to the future.”

“Having cancer has made me bolder and braver, but Seattle Cancer Care Alliance gives me a sense of security that lets me do the things I want to do.”

Though follicular non-Hodgkin’s lymphoma remains incurable, the team at SCCA is at the forefront of research in trying to change that fact.
Together with Steve
Prostate cancer

Steve Fleischmann was living a joyful, active life, and running a successful business when he learned he had prostate cancer after a routine physical in 2003. "I sat in silence, I called my wife. She immediately came to my office," remembered Steve. "We sat together for a couple of hours. A lot of tears."

After doing his own research, Steve sought the care of SCCA's Prostate Oncology Center, where he received a radical prostatectomy and was soon cancer-free and back to normal.

His regular three-month checkups went well, until in 2007 tests showed the cancer had returned. So Steve returned to SCCA for more surgery and 36 days of radiation therapy.

"Getting cancer is one thing," Steve said. "But getting it back is worse. Every ache or pain becomes a worry. I feared that I could die from this someday."

He and his wife Patty decided it was time to celebrate their lives together by traveling around the world with their children, and ultimately living abroad in Florence, Italy.

In the fall of 2012, SCCA doctors coordinated with Italian specialists to get a positron emission tomography (PET) scan for Steve. He learned at the age of 56 that the cancer had returned for a third time.
Steve's prostate cancer was treated by Dr. Paul Lange, director of the Institute for Prostate Cancer Research at Fred Hutch and professor of urology at the UW School of Medicine. Both Steve and his wife, Patty, were impressed by Dr. Lange's credentials and by the fact that he, too, is a prostate cancer survivor.

Dr. Kenneth J. Russell, professor of radiation oncology at UW Medicine, is in charge of all of Steve's radiation therapy.

During hospital stays at UW Medical Center, Steve is under the care of Dana Malick, RN, who noted, “I feel like it’s ‘soul work’ that we do. You get to step into a sacred space with patients and their families. Every day I go to work, I am working from my heart.”

In the months between his recurrence and treatment, Steve went full-speed into improving his strength with weight training and dietary recommendations from SCCA nutritionist Kerry McMillen, RD, to prepare for treatment. “I think it’s the collaboration between the care providers that really does lead to the best patient care,” noted Kerry.

Following Steve’s initial cancer diagnosis, Dr. Lange treated Steve’s cancer with an operation called a nerve-sparing radical prostatectomy, in which his entire prostate gland and seminal vesicles were removed. There were other treatment choices Steve could have made, but he felt surgery was the right choice for him.

The nerve-sparing surgery was a success and preempted the occurrence of two of the usual side effects of prostate surgery: impotence or incontinence. Steve started walking the next day, even though it was painful. He was told to expect a six-week recovery but was quickly back at work part-time.

After Steve’s prostatectomy, his doctors kept close watch on his blood levels every three months and were able to catch the next recurrence fairly early. Dr. Lange said, “The cancers were the size of a lima bean and two peas, and they were in the same area as the previous surgery and radiation, so it was quite a surgical challenge. But we found them and took them out.”

The most recent round of treatment included an innovative surgery known as a salvage pelvic and retroperitoneal lymphadenectomy. This particular approach to treatment is designed to remove all infected lymph nodes. Dr. Lange performed the surgery, this time with Dr. Daniel W. Lin, chief of urologic oncology and professor of urology at the University of Washington School of Medicine. “I think I was the second person to have this surgery at UW Medical Center,” Steve said.

Since September 2012, Steve has been cancer-free.

Steve now balances his time with his family and staying active in many sports—in addition to being president of POP! Gourmet Foods.

But he has also become a fundraiser for cancer research and an advocate for cancer patients. When Steve was first diagnosed in 2003, he founded and chaired a breakfast to raise money for prostate cancer research. Such events are commonplace for breast cancer, but Steve believed his breakfast was the first in the country for prostate cancer at the time. The first “Survivors Celebration” breakfast took place in early December 2003.

“The purpose of the breakfast was to get this disease out of the closet,” Steve said. “We asked men who had had prostate cancer to be table captains and to fill a table.”

The event has raised more than $2 million for the Institute for Prostate Cancer Research, a collaborative effort between UW Medicine and Fred Hutch to support the discovery of new therapies and technologies for prostate cancer.

Along with his breakfast fundraiser, Steve and his daughter, now 18, give talks for various cancer support groups and events.

“I will never stop fighting for a cure for cancer. I advocate for men diagnosed with cancer or who get their cancer back,” Steve said. “I will do that the rest of my life.”
The people of SCCA tend to favor progress over self-promotion and hard data over hyperbole. We humbly offer hard data on what others are saying about the meaningful progress being made by our uncommon collection of uncommon people at SCCA.

SCCA is one of 11 U.S. hospitals to rank higher in survival outcomes

Survival outcomes for treatment of cancer vary widely among facilities across the U.S., concludes a study commissioned by Memorial Sloan Kettering Cancer Center (MSKCC). Results published in the October 2015 issue of JAMA Oncology strengthen the ability to measure data related to cancer treatment report outcomes. SCCA is one of 11 hospitals profiled in the study where survival outcomes are higher.

Until recently, measuring outcomes with administrative data alone for cancer patients receiving treatment has yielded limited results. This is due in large part to the lack of cancer-specific information available, including disease stage. The MSKCC study used national and hospital-specific Medicare claims data for 750,000 patients treated for cancer between the years 2005 and 2009 to evaluate the performance of hospitals. Similar analyses were conducted using Surveillance, Epidemiology, and End Results (SEER) and Medicare data.

Results provide the first risk-adjusted data for a difference in survivability rates in relation to treatment provided at specific types of cancer centers.

Outcomes include a reliable set of proof points for how and why seeking treatment at SCCA is different from other NCI-designated cancer centers, academic medical centers, and community cancer centers.

Dr. Fred Appelbaum, president of SCCA and deputy director at Fred Hutch, shared a few theories on the reasons behind differences between the categories, including:

- Doctors at SCCA have access to the newest laboratory and imaging facilities, which are overseen in-house by individuals specializing in cancer. At most community hospitals, specimens are sent away to commercial laboratories.
- At SCCA, our clinical pathways are backed by teams across a variety of disciplines, which leads to better outcomes. At community hospitals, patients are treated individually by a variety of practitioners each working on their own.
- At SCCA, there is access to the newest therapies as they are being studied and before they become available to the general public.

According to the study’s authors, findings suggest an opportunity to use administrative data to assess the quality of cancer care provided by U.S. hospitals. “These findings offer the first set of clear data to measure and report outcomes,” said SCCA’s Dr. Keith Eaton. “We are excited by this potential to explore this more deeply for the potential discoveries it will yield, as well as outcomes for our patients and their families.”

Seattle Cancer Care Alliance is #1 for adult cancer care in Washington state

In July 2015, SCCA/University of Washington Medical Center was named one of the top five Best Hospitals in the Nation for Adult Cancer Treatment by U.S. News & World Report for 2015–2016.

U.S. News analyzed over 5,000 hospitals for adult and pediatric care to find the best in the nation, based on critical criteria, patient outcomes, and survey results from more than 140,000 physicians. “A hospital that emerged from our analysis as one of the best has much to be proud of,” said Ben Harder, chief of health analysis at U.S. News.
March of Dimes honors SCCA nurses

Two SCCA nurses were honored by the March of Dimes for outstanding contributions in care management and long-term acute care and rehabilitation at the 13th annual Nurse of the Year awards in Bellevue in November 2015.

- Anne Reese, RN, OCN, received the Case Management & Care Coordination award.
- Mihkai Wickline, RN, MN, BMTCN, AOCN, received the Long-Term Acute Care & Rehabilitation award.

“We are honored to have the deep skill-set and unwavering commitment to quality and compassionate patient care that Anne and Mihkai both bring to their work every day at SCCA recognized by the March of Dimes,” said Angelique Richard, PhD, RN, chief nurse executive and vice president of clinical operations for SCCA. “Their work exemplifies the incredible team of nurses at SCCA.”

Seattle Cancer Care Alliance achieves 2015 Leader in LGBT Healthcare Equality status

In November 2015 Seattle Cancer Care Alliance received notification from the Healthcare Equality Index (HEI) that it had successfully achieved 2015 Leader in LGBT Healthcare Equality status. SCCA has received this recognition consecutively each year since 2013.

The Healthcare Equality Index (HEI) is the national LGBT benchmarking tool that evaluates healthcare facilities’ policies and practices related to the equity and inclusion of their LGBT patients, visitors and employees. The Human Rights Campaign (HRC) is the sponsor of this index.

Achievement of LGBT Healthcare Equality status is based on health care organizations meeting four foundational criteria for LGBT patient-centered care known as the “Core Four.”

80 SCCA providers receive top rankings

Throughout the year, 80 SCCA providers received top recognition in Newsweek, Seattle magazine and Seattle Met — three publications with highly respected lists compiled through peer nominations. We are proud these exceptional providers call SCCA home.

Benjamin O. Anderson, MD  S  A
Frederick Appelbaum, MD  S
David R. Byrd, MD  S  A
Kristine E. Calhoun, MD  S  A
Timothy M. Carlos, MD  S
Marc C. Chamberlain, MD  S
Shannon M. Colohan, MD, MSc  A
Bruce L. Dalkin, MD  S
Julie R. Gralow, MD  S
Heidi J. Gray, MD  S  A
Benjamin E. Greer, MD  S
William P. Hammond, MD, FACP  A
William P. Harris, MD  S
Douglas S. Hawkins, MD  S
Celestia S. Higano, MD  S
Fuki Marie Hisama, MD  S
John M. Inadomi, MD  S
Sara H. Javid, MD  S  A
Siobhán Bridget Keel, MD  S
Wu-Jin Koh, MD  S  A
Aimee D. Kohn, MD, PhD  S
Paule Langer, MD  S
George E. Laramore, MD, PhD  S
Scott D. Lee, MD  S
Constance D. Lehman, MD  S
David H. Lewis, MD  S
Jay J. Liao, MD  S
Daniel W. Lin, MD  S  A
Hannah M. Linden, MD  S
Michael L. Linenberger, MD  S  A
Matthew Lonergan, MD  S
Gary H. Lyman, MD, MPH  S
David K. Madtes, MD  S
David G. Maloney, MD, PhD  S
Gary N. Mann, MD  S
Renato G. Martins, MD, MPH  S  A
Dana C. Matthews, MD  S
Debra K. Mattson, PA-C  S
Eduardo Mendez, MD, MS, FACS  S

Alix Dassler, ARNP  S
H. Joachim Deeg, MD  S
Mary (Nora) L. Disis, MD  S
Keith D. Eaton, MD  S
Richard G. Ellenbogen, MD  S
Georgiana K. Ellis, MD  S
William Ellis, MD  S  A
Elhui Estey, MD  S
Jesse R. Fann, MD, MPH  S
Alessandro Fichera, MD  S  A
Dermot R. Fitzgibbon, MD  S  A
Michele B. Frank, MD  S  A
Neal Futran, MD, DMD  S  A
V.K. Gadi, MD, PhD  S
Barbara A. Goff, MD  S  A
Ajay K. Gopal, MD  S

Carlo A Pellegrini, MD  S  A
Steven A. Pergam, MD, MPH  S
Paul S. Pottinger, MD  S
Oliver W. Press, MD, PhD  S
Collin C. Pritchard, MD, PhD  S
Jason K. Rockhill, MD, PhD  S
Kenneth J. Russell, MD  S  A
Hakim Said, MD  S
Michael D. Saunders, MD  S  A
Daniel L. Silbergeld, MD  S
Mika N. Sinanan, MD, PhD  S  A
F. Marc Stewart, MD  S
John A. Thompson, MD  S
Renata R. Urban, MD  S
Hubert J. Vesselle, MD, PhD  S
Ernest A Weymuller, MD  S
Douglas Wood, MD  S
Jonathan L. Wright, MD, MS, FACS  S  A
Raymond S. W. Yeung, MD  S

= Newsweek
= Seattle magazine
= Seattle Met magazine
Seattle Cancer Care Alliance is a proud citizen of the Northwest. Our approach to the fight against cancer reflects the values of community, collaboration, and creativity that are so prevalent in our region. And our global impact is the direct result of the abiding commitment that members of our community have to the health and well-being of people around the world.

We treasure the many people in the Puget Sound area who volunteer their time to help our patients and staff and provide critical funds for the vital work we do on behalf of our patients and their families.

We respect the government officials and legislators of our region who are forward-thinking when it comes to matters of science and technology and outstanding collaborators with SCCA on behalf of our patients.

And we value the many opportunities we have through our partners and outreach programs that allow us to provide vital education and cancer screening to underserved communities who may not otherwise have access to these services. By reaching out to the underserved, creating compelling education programs, and sponsoring of community events that promote health and wellness, we demonstrate our commitment to being Better Together.
As a nonprofit, mission-driven organization, SCCA takes seriously our commitment to the communities we serve. Our mission unites the drive to improve cancer care and outcomes for patients and their families with the power of clinical research. The work we do in the community is an extension of this mission.

In 2015, SCCA devoted more than 11% of our operational costs, or over $50 million, to benefit the community. Much of this entailed extending our high-quality clinical services to those who otherwise could not afford them.

Of these funds, we spent over $30 million subsidizing care for individuals who could not afford it and offering needed services at a financial loss. We also spent over $5 million in community health improvement services, including tobacco cessation counseling, education to screen construction workers in Western Washington at high risk of lung cancer, mammography screenings for underserved populations, and development and dissemination of educational materials about recommended cancer screenings.

In addition to using our clinical expertise to improve health outcomes in the community, we invest significantly in research and education activities that benefit not just our patients, but the community as a whole.

In 2015, we spent over $4.5 million to educate health professionals on the latest best practices in cancer care, and we spent nearly $9 million on cutting-edge research that improves treatment and prognosis not just for SCCA’s patients, but those suffering from cancer regionally and globally.

### Giving back in our communities

#### Community benefit allocations

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providing uncompensated care and subsidized health services</td>
<td>$31,233,521</td>
<td>62%</td>
</tr>
<tr>
<td>Community health improvement services and community benefit operations</td>
<td>$5,228,208</td>
<td>10%</td>
</tr>
<tr>
<td>Health professions education</td>
<td>$4,528,880</td>
<td>9%</td>
</tr>
<tr>
<td>Research by Alliance partners</td>
<td>$8,677,064</td>
<td>17%</td>
</tr>
<tr>
<td>Cash and in-kind contributions for community benefit</td>
<td>$894,558</td>
<td>2%</td>
</tr>
<tr>
<td>Total</td>
<td>$50,561,231</td>
<td></td>
</tr>
</tbody>
</table>

In 2015, more than 5,000 mammograms were provided via the SCCA Mammogram Van. Many of these were provided free of charge to uninsured individuals.

### SCCA nurses, pharmacist travel to Guam to share best practices

Three SCCA nurses and one pharmacist travelled to Guam in August to share best practices at a two-day conference on cancer care. The conference drew more than 60 nurses from Guam Memorial Hospital for sessions that addressed ways to enhance, support, and advocate for patients and their care needs.

Nurse Managers Robert “Bob” Chapman and Terri Cunningham, Clinical Nursing Specialist Phuong Huynh, and Rick LaFrance, pharmacist, attended on behalf of SCCA.

“We reviewed how cancer develops, chemotherapy, and the various type of treatment drugs that nurses administer to patients in line with safety and effectiveness guidelines,” Terri said. “We also spent time talking about the side effects of cancer treatment to support local nurses and the time they spend helping patients with their side-effect management.”

“This experience helps every nurse in Guam be better prepared in the future to support the needs of patients living with cancer, and their families,” said Chapman, who helped build and bring the conference to Guam.

“Our goal was for this exchange of information and collaborative learning experience to make a difference in the lives of patients in a very real and tangible way; we’re proud of all that was accomplished in two short days.”

Left to right: Terri Cunningham, Bob Chapman, Phuong Huynh, and Rick LaFrance.

In 2015, more than 5,000 mammograms were provided via the SCCA Mammogram Van. Many of these were provided free of charge to uninsured individuals.
SCCA is grateful for organizations and members of our community who organized events and designated sales in 2015 to benefit cancer research, the Family Assistance Fund, patient housing, supportive care offerings, and the Mammogram Van. These efforts raised $195,000 to support the pursuit of better, longer, richer lives for our patients. On behalf of our patients and families, thank you!

Organizations and individuals who donated to SCCA in 2015

Achtuning,
Port Townsend Cruise
Amy K. Larson STRONG,
Amy K. Larson Cancer Benefit
Bob Miller Foundation,
Annual Memorial Bike Ride
Brian and Kim Tracy,
Be Positive T-Shirt Sale
Compendium,
Live Inspired Fundraiser
Dr. Susan Kim and Sasha Williams,
Run Sasha Run
Dragonfish Asian Café,
Sip for a Cause
Neighborhood Grills,
Cinco de Mayo Marathon
Neighborhood Grills,
Be Positive T-Shirt Sale
Compendium,
Live Inspired Fundraiser
Dr. Susan Kim and Sasha Williams,
Run Sasha Run
Glassybaby,
Nurses Week Sale
Goodness

Family Assistance Fund

The SCCA Family Assistance Fund helps families facing financial hardships caused by the disruption of cancer treatment. For many, this support makes it possible to come to Seattle and seek their treatment. Assistance includes one-time amounts to cover parking or lunch through a “petty cash” system. A formal application process supports more substantial coverage for ongoing expenses through the Fund.

On average, SCCA receives 15-20 applications a month for the Fund, providing grants to all but a few requestors. More than 75% of funds support housing coverage at SCCA House or Pete Gross House, with groceries and food as the next greatest area of need. Requests continue to rise each year.

The time and money our community invests in us has a direct effect on how we diagnose, treat, and cure cancer.

Wings of Karen Bra Dash

Wings of Karen is a community-based organization dedicated to funding breast cancer research in the Pacific Northwest. It is named after founder Kristi Blair’s mother, Karen Denmark, who passed away in 2007 after a battle with breast cancer. Blair started the nonprofit in 2012, shortly after her own 2011 breast cancer diagnosis. The organization maintains a goal to fund the study of all aspects of breast cancer, including, but not limited to, prevention, detection, and treatment. Each September, Wings of Karen produces an annual 5K Bra Dash and contributes over 95% of funds raised to support UW Medicine and Fred Hutch breast cancer research and clinical programs led by SCCA. In 2015, Wings of Karen raised more than $140,000 to support breast cancer research.

Swimming for a Cause: Seattle Swim Across America

Seattle-area swimmers joined Olympic medalists at the seventh annual Seattle Swim Across America “Open Water Swim” in September. Swim Across America is a nonprofit organization dedicated to raising money for cancer research, prevention, and treatment through swimming-related events across the U.S. SCCA is the exclusive beneficiary organization of the Seattle event, which raised more than $276,000 in 2015.

The event drew more than 500 participants of all ages: Olympic medalists including Mary Wayte, Rick Colella, Margaret Hoezler, Emily Silver, Dana Kirk, Wendy Boglioli and Jeff Float. Canadian Olympian Chris Chalmers made a special appearance.

Since 2009, more than $1.5 million has been raised by Seattle Swim Across America. Funds support pancreatic cancer research and the SCCA Swim Across America Cellular Therapy Lab, which provides cell processing for immunotherapy and other types of breakthrough cancer treatment for patients receiving transplantation at SCCA.
SCCA’s community service programs are not just a gesture of our appreciation—they are an investment in the people who make our work possible.

Organizations sponsored by SCCA in 2015

American Lung Association  
American Society of Clinical Oncology  
American Society of Pediatric Hematology & Oncology  
Cancer for College  
Cancer Lifeline  
Fred Hutch Gala  
Gilda’s Club Seattle  
International Society for Cellular Therapy  
Olympic Medical Center  
Melanoma Research Foundation  
Mercer Island Rotary Club Foundation  
Northwest Sarcoma Foundation  
Pancreatic Cancer Action Network (PanCAN)  
SeaMar  
Tri-Cities Cancer Center

Better Together means there is a role for everybody.

Sailing for a cause: the Pink Boat Regatta

The Pink Boat Regatta is a national organization that sponsors sailing regattas throughout the United States. SCCA was the exclusive sponsor of events that took place in September and raised more than $76,000 for breast cancer research and treatment.

Seattle events included a dinner aboard the Virginia V—attended by more than 100 people and featuring Dr. Mary-Claire King from the University of Washington as the keynote speaker. More than 50 yachts set sail the next day on Shilshole Bay as part of the Open Water Sailing Competition.

“We know this organization helps so many women who have been diagnosed with breast cancer...while supporting the research that makes treatment options viable,” said Dr. Julie Gralow, the event co-chair and a medical oncologist who specializes in treating women with breast cancer at SCCA.

“We are so grateful for the support of Seattle Cancer Care Alliance to produce the Pink Boat Regatta in 2015 in support of breast cancer researchers and the people who are so valiantly battling breast cancer,” said Ashley Bell, president of the Pink Boat Regatta organization.

SCCA hosts WA Healthcare Diversity Summit

As a large Seattle employer and health care provider, SCCA is committed to ensuring consistent treatment and care standards for all patients representing culturally diverse backgrounds.

In October 2015, SCCA, in partnership with the Washington Diversity Council, hosted the inaugural Healthcare Diversity Summit on South Lake Union to engage the state’s health care community in a conversation about diversity, leadership, and treatment best practices.

More than 100 attendees from health organizations throughout the region attended the event, which quickly sold out. The half-day event began with a networking session followed by a speech from Paul G. Ramsey, M.D., chief executive officer of UW Medicine, executive vice president for medical affairs, and Dean of the School of Medicine at the University of Washington.

Debby Gentzen, vice president and chief strategy officer, moderated a panel discussion about diversity in health care and administering patient care.

SCCA’s DAISY Award legacy

who cared for Patrick during the last weeks of his life. Patrick died at the age of 33 in late 1999 from complications of idiopathic thrombocytopenic purpura (ITP), a disease that attacks the immune system.

The care Patrick and his family received from nurses while he was ill inspired this unique means of thanking nurses for making a profound difference in the lives of patients and their families.

“When Patrick was critically ill, our family experienced firsthand the remarkable skill and care nurses provide patients every day and night,” said Bonnie Barnes, president and co-founder of the DAISY Foundation. “Yet these unsung heroes are seldom recognized for the superhuman work they do. The kind of work the nurses at SCCA are called on to do every day epitomizes the purpose of the DAISY Award.”

Today, one SCCA nurse is selected to receive the DAISY Award each month. At a presentation in front of the nurse’s colleagues, patients, and visitors, the honoree receives a certificate commending her or him for being an “Extraordinary Nurse.” The certificate reads: “In deep appreciation for all you do, who you are, and the incredibly meaningful difference you make in the lives of so many people.” The honoree also receives a symbolic “Healer’s Touch” sculpture, hand-carved by artists of the Shona tribe in Africa.

“Nurses are heroes every day,” said Angelique Richard, chief nursing executive. “It’s important that our nurses know their work is highly valued, and the DAISY Foundation provides a way for us to do that.”

Sitting for a cause: the Pink Boat Regatta

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SCCA’s DAISY Award legacy

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2015 Cancer Care Champions

We are humbled by each of the people and organizations who support our mission, and we hold a special place in our hearts (and annual report) for those who have personally invested at least $1,000 in SCCA’s programs and services. As we offer our gratitude to these Cancer Care Champions, we invite you to join their ranks. Please contact champions@seattlecca.org or call us at (206) 288-2070.

$250,000–$499,999
The Safeway Foundation*

$100,000 – $249,999
The Kaphan Foundation
Dorothy Smith Estate
Swim Across America*

$50,000–$99,999
Muckleshoot Indian Tribe*

$25,000–$49,999
Clifford Douglass Estate
Microsoft*
Wings of Karen

$10,000–$24,999
Carl and Renee Behnke*
Michael and Judith Crutcher*
glassybaby*
Gorilla FC - Life is a Beach Event
Hoosier Cancer Research Network, Inc.
Jacobs Johnson Foundation*
Scott and Charleen Lundberg
Mrs. Anna M Names
Mark Stanisch Estate
QAD, Inc
Kurt and Kylee Shintaffer
Sterling Realty Organization*

Karen and Robert Bakemeier*
Mr. Ronald Lee Bell
Janice A. and Robert L. Gerth
Hop Jacks
Kidder Mathews*
Frances Paulsen Estate
Safety Shirtz
Gene and Sarah Simpson
Smith Brothers Farm
Pat and Leslie Sweeney
Toyota Dealer Match Program
Michael and Pauline Traino
Mr. Barry Willis

$1,000–$4,999
Academy of Nutrition and Dietetics
Accenture
Dave and Kim Ackerson*
Achtuning.com*
Aerojet*
ALFA
Loren Alhadeff
Mr. and Mrs. Grant B. Anderson*
Dr. Fred and Dita Appelbaum*
George W. Bacon*
Richard E. Berger, MD, and Deborah M. Berger
Berkshire Partners LLC
Kathy and Steve Berman*
In honor of Virginia Beugless and Thomas Poe
Amy Bohutinsky
Bill and Toni Boyd*
In Memory of Diane K. Bridges
David C. Brown*
Dr. S. Lori Brown*
Mr. Russell Burns
Dr. David Byrd*
Kathleen M. Cannon
Carter Subaru Shoreline
Ross and Julia Case*

$5,000–$9,999
Bob Miller Foundation*
Mr. and Mrs. Ralph and Bea Gilfillen*

$2,000–$4,999
Berkshire Partners LLC

$1,000–$2,999
Academy of Nutrition and Dietetics

$500–$999
Academy of Nutrition and Dietetics

$100–$499
Academy of Nutrition and Dietetics

$50–$99
Academy of Nutrition and Dietetics


*Inaugural Cancer Care Champions

Celgene Corporation
Mike and Karen Chadduck
Michael Cheng
Compendium*
Philip and Marjorie Compton
Dr. Shannon Corbin and
Mr. Jonathan Tingstad*
Mrs. Lydia H. Dane
Howard and Sarah Date*
Ms. Michelle Davis
Ms. Colleen M. Del Monte
The Delman Family*
Ms. Michelle Desmond
The Diamond Family
Ms. Joan Dillon
Kathleen Shannon Dorcy
James Dorment
Dragonfish Asian Cafe
The Eberwein Family

Dorothy H. Ghaly
Mr. and Mrs. Ralph and Bea Gilfillen*
Kari Glover and Thad Alston
Lyn and Jerry Grinstein
Mark Groudine and
Cynthia Putnam*
Mark and Dana Hagenbaugh*
Ms. Jessica M. Harlow
Hanson Bridgett: LLP
Mr. Jerry Hardie
Mrs. Sharon Hardie
The Larry J. Harle Family Charitable Fund
Healthcare Management Services
Mr. and Mrs. Thomas F. Herche
In Memory of Jordan Michael Hill
Norm and Carla Hubbard*
The Jagels Family*

Bonnie Fox
Walter and Wilma Laity*
Mr. and Mrs. Kenneth D. Lawson*
Tom and Janet Leeds*
LeRoss Family Foundation*
Janet Levering and Will Poole
Mr. and Mrs. Randolph M. Lindbald
Mr. and Mrs. Harry A. Linker*
Kristine A. Logan*
Svetlana Loksh
The Lookout Foundation, Inc.*
Low Pressure Promotions LLC*
Mr. and Mrs. Jeffrey A. Lubetkin*
The Mackay Family
Mr. Murdock MacPherson*
Mr. and Mrs. Joseph A. Magnano
James and Lisa Magrussen
Mr. Robert E. Marks
Better Together begins with you

Please help us bring SCCA’s lifesaving advances to patients

Your generous support of SCCA will be put to work immediately where it can do the most good in the fight against cancer:

- Advancing SCCA’s breakthrough clinical studies.
- Helping provide supportive care services to our patients and families.
- Providing a home away from home at the SCCA House.
- Sustaining our work to promote cancer prevention and survivorship.
- Reaching more patients in underserved communities.

There are many ways to support SCCA through donations, bequests, stock transfers, holding or sponsoring a fundraising event, and more. Many gifts are made as a memorial or tribute to a loved one, doctor, nurse, or other caregiver.

But donations are not the only way to help. Our volunteers are an essential part of our commitment to the well-being of our patients.

To learn more about giving, volunteer opportunities, and participating in SCCA community events, please visit our website at www.seattlecca.org/donate or contact us at (877) 308-3117.
Financial leadership

We are made better by the institutions and individuals that support SCCA, because they want more than good stewardship from us. They are investing in a new future, and they expect a high return on that investment.

SCCA has always had a deep commitment to responsible management of our financial, intellectual, human, and scientific resources. More importantly, we are determined to strategically invest those resources where they have the best hope of making the greatest difference in the fight against cancer.

Breakthroughs at SCCA have changed grant-making priorities at the National Institutes of Health. Our cross-disciplined, collaborative approach has become the new gold standard of how the war against cancer is being waged in medical institutions around the world. Our work does not just create progress—it is a catalyst for furthering progress.
## Financials

### Statement of Operations

<table>
<thead>
<tr>
<th>Fiscal Year (in thousands)</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Revenue</td>
<td>$ 435,228</td>
<td>$ 475,921</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>408,155</td>
<td>441,517</td>
</tr>
<tr>
<td>Income from Operations</td>
<td>27,073</td>
<td>34,404</td>
</tr>
<tr>
<td>Non-Operating Income &lt;Expense&gt;</td>
<td>7,689</td>
<td>(17,185)</td>
</tr>
<tr>
<td>Net Income</td>
<td>$ 34,762</td>
<td>$ 17,219</td>
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</table>

### Balance Sheet

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Assets</td>
<td>$ 345,655</td>
<td>$ 367,908</td>
</tr>
<tr>
<td>Assets Whose Use is Limited</td>
<td>9,767</td>
<td>2,800</td>
</tr>
<tr>
<td>Property, Plant, and Equipment, Net</td>
<td>109,085</td>
<td>124,938</td>
</tr>
<tr>
<td>Other Assets</td>
<td>24,392</td>
<td>28,145</td>
</tr>
<tr>
<td>Total Assets</td>
<td>$ 488,899</td>
<td>$ 523,791</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td>$ 71,055</td>
<td>$ 75,733</td>
</tr>
<tr>
<td>Long-term Liabilities</td>
<td>99,653</td>
<td>112,236</td>
</tr>
<tr>
<td>Net Assets</td>
<td>318,191</td>
<td>335,822</td>
</tr>
<tr>
<td>Total Liabilities and Net Assets</td>
<td>$ 488,899</td>
<td>$ 523,791</td>
</tr>
</tbody>
</table>

### Key Statistics:

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Treatment Episode</td>
<td>6,584</td>
<td>7,065</td>
</tr>
<tr>
<td>Patient Visits</td>
<td>77,177</td>
<td>76,604</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Margin</td>
<td>6.2%</td>
<td>7.2%</td>
</tr>
</tbody>
</table>

### Operating Expenses

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Compensation</td>
<td>25%</td>
</tr>
<tr>
<td>Purchased Services</td>
<td>32%</td>
</tr>
<tr>
<td>Supplies</td>
<td>30%</td>
</tr>
<tr>
<td>Depreciation, Amortization, &amp; Interest Expense</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>8%</td>
</tr>
</tbody>
</table>

### Revenues

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Patient Service Revenue</td>
<td>98%</td>
</tr>
<tr>
<td>Other Operating Revenue</td>
<td>6%</td>
</tr>
<tr>
<td>Non-Operating Income &lt;Expense&gt;</td>
<td>&lt;4%</td>
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## Governance

### Meet Our Leadership Team

SCCA is a 501(c)(3) tax-exempt, nonprofit corporation governed by an 18-member board of directors. Our partners—Fred Hutch, Seattle Children’s, and UW Medicine—each appoint six directors; at least four of the six are community representatives.

#### SCCA Executive Management Team

- **Fred Appelbaum, MD**, Executive Director and President
- **Norm Hubbard**, Executive Vice President
- **David Ackerson**, Chief Information Officer and Vice President
- **Debby Gentzen**, Chief Strategy Officer and Vice President
- **Barbara Jagels, RN, MHA**, Chief Quality Officer and Vice President of Quality, Safety & Value
- **Angélique Richard, PhD, RN**, Chief Nurse Executive and Vice President of Clinical Operations
- **F. Marc Stewart, MD**, Medical Director and Vice President
- **Jonathan Tingstad**, Chief Financial Officer and Vice President
It is understandable that large payment systems and funding sources are often better suited to scale what has already been proven effective, rather than to help fund the kind of research and development that is looking just over the horizon.

So it is no surprise that our ability to integrate and innovate can sometimes be restrained by how funding is structured and how success is measured. We have worked to expand our concept of what we mean by “better together” to include elected officials, government institutions, insurance providers, and other leaders in the fight against cancer—working with them to explore the viability of new approaches to care and fund new sources of innovation.

SCCA is working with local, federal, and state policymakers to create new funding paradigms, and with other health care leaders to pioneer new public/private partnerships to invest in innovation, so that structural and funding models never get in the way of progress.

We are seeing some promising signs of additional public support for research that could ultimately benefit cancer patients. Federally, Congress recently passed legislation that increased funding for the National Institutes of Health (NIH), which is a primary funder of the research that SCCA carries out in partnership with Fred Hutch. The NIH received a $2 billion, or roughly 6.5% increase in its FY 2016 appropriations—the biggest increase since the doubling of NIH’s budget during fiscal years 1999–2003.

In Washington state, legislators created a cancer research endowment fund, known as the CARE Fund—a public/private partnership that brings new funding to invest in cancer research. We anticipate this will help catalyze much needed additional investment in curing cancer.

In addition to an increased focus on research, we have also seen broader health insurance coverage, which has removed barriers to access for needed preventive and cancer treatment services. Following passage of the Affordable Care Act, the establishment of a new State Exchange, an expanded Medicaid program, and new private insurance requirements, the number of those in Washington state without access to these important services has decreased dramatically. Between 2013 and 2014 alone, the percentage of Washingtonians without health insurance coverage dropped from 14% to 9%—a 5% decrease.

SCCA hopes to see the number of individuals with insurance continue to grow over time. And because we believe we offer the best cancer care in the region, we will continue to work to serve as many individuals and families as we can.
We act with a sense of purpose, a clear vision and strong values.

Together, each of us has a unique role to play in helping SCCA live up to our commitment:

- To provide state-of-the-art, patient- and family-centered care
- To support the conduct of cancer clinical research and education
- To enhance access to improved cancer interventions and advance the standard of cancer care regionally and beyond

If each of us does our part in advancing that purpose, we will ensure that the vision of SCCA is not only audacious, but also entirely achievable:

Lead the world in translating scientific discovery into the prevention, diagnosis, treatment, and cure of cancer.

Our success hinges on whether or not we agree to conduct ourselves in accordance with a set of core values—operating principles—in everything we do. Together.

We are patient-centered
Everything we do must be linked in some way to our ability to deliver better outcomes for our patients. Nothing else is more important, and any choice that could lead us astray from that focus is not a choice at all. We approach everything we do with energy, conviction, and a constant striving, because we know how profoundly important our work is to the lives of the patients we serve.

We are innovative
The entire existence of SCCA is the result of a truly innovative approach to fighting cancer. Each of us—regardless of the role we play—is here because we have the chance to push the boundaries of conventional wisdom in that fight. We will nurture an environment that fosters unconventional thinking, a passion for discovery, and the open-mindedness to invite discovery from unexpected places.

We are respectful
Everyone—most of all our patients and their families—is here because they believe in the potential of what we can do together. There are no ulterior motives. Every person and every job plays a role in our patient’s well-being. Each of us will model the highest possible standard in respect and compassion for our patients, their families, and the uncommon collection of uncommon people who serve them in so many different and important ways.

We are collaborative
Our ability to be better together hinges on cultivating a culture of teamwork that is not only unusual, but unprecedented. Not just among the many different people of SCCA, but among our patients as well. We understand that asking for and offering advice and help in how to do better is not just a right, but among our most important responsibilities.

We are agile
We cannot just be comfortable with change; we must embrace it as proof that we are making progress. The speed of our progress is entirely linked to how well we integrate new ideas into our research, our teaching, and our clinical work. We will be known for our ability to adapt to new approaches and practices, because we know the difference between change required for progress and a circular adventure in change for change’s sake.

We are responsible
Our work affects many dimensions of our patients’ lives. While our focus is on their health, we must also be conscious of the impact cancer care can have to our patient’s financial security, their emotional well-being, and the environment we all share. Because our work is centered on people’s well-being, we approach it with the highest level of ethical, fiduciary, and environmental responsibility.