



**Springfield Cancer Center
148 West North Street
Springfield OH 45504**

The TrueBeam radiotherapy system is a linear accelerator that provides state of the art image guided radiation treatments. It allows us to treat patients with cutting edge modalities such as intensity modulated radiation therapy (IMRT), volumetric modulated arc therapy (VMAT), stereotactic body radiotherapy (SBRT), and stereotactic radiosurgery (SRS) via HyperArc. The modalities provided by this machine and Varian software included would allow our center to have the ability to treat practically any cancer anywhere in the body i.e. lungs, breasts, head and neck, brain, pelvis, and abdomen.

HyperArc is one of Varian's latest technologies that provides the ability to accurately and efficiently treat both primary brain tumors and secondary brain tumors (metastases). Our current machine does not allow for SRS treatment of brain tumors (precise tumor treatment rather than treating the entire brain). Currently when patients present to clinic that are deemed a candidate for brain SRS, we have to refer them to a facility that has linear accelerator based SRS or a GammaKnife – meaning they cannot be treated locally at home and have to travel usually over an hour to receive the care they need. The TrueBeam with HyperArc would allow us to treat those patients rather than send them away.

HyperSight is another technological advancement by Varian that provides cone beam CT (CBCT) imaging with larger images, better contrast, and faster image acquisition. Image guidance via CBCT allows us to make sure patient tumor volumes are being treated accurately and normal tissues are being spared. This software would provide our center with much better image quality as well as precision and speed compared to what we are using now.

Overall, the TrueBeam radiotherapy system integrated with Aria, Eclipse, HyperArc, and HyperSight provides our cancer center the ability to deliver the most cutting edge cancer treatments to our rural community. Our current clinical setup involves Pinnacle (3rd party Treatment Planning System) and Mosaik (Elekta), requires roughly 16 steps to create a plan. Contour and plan the appropriate treatment for the patient, print off the plan after Physician Approval, import the plan into record and verify (Mosaik), promote the plan in Mosaik, and then QA. It is important to note that Pinnacle does not always send over the correct DICOM information into Mosaik and requires many "fail safes" to be in place in order to catch these errors. With having all Varian software and hardware everything is integrated and a 16-step process from patient Sim time, to creating the plan, to importing it into Record and Verify, to actual treatment takes all in all around 7 steps. Reducing the Sim to treat time, which is roughly about 8 days now, to 4 if not less. We would not have to send patients out over an hour away to deliver the most technological advanced modalities such as SBRT and SRS.

Dr. Joshua Martin
Radiation Oncologist

A handwritten signature in black ink, appearing to be "J. Martin", written in a cursive style.

Phone: 937.323.5001 Fax: 937.323.5495



GALA OF HOPE
FOUNDATION
Sending Cancer Into The Sunset.

November 3, 2023

Mr. Adam Groshans, President
Mercy Health-Springfield
100 Medical Center Drive
Springfield, OH 45504

Dear Adam:

Gala of Hope Foundation is privileged to partner with Mercy Health as it continues to be recognized as an anchor of medical care in the communities you serve. We have appreciated the success of the lung cancer initiative we began with your Springfield Cancer Center in 2020 to better answer the challenge of lung cancer through better screening and treatment. It is also our hope that through excellent care, not only will patients be better served, but also that the most qualified clinicians will be attracted to serve these patients, along with cutting edge technologies that help provide the highest level of precision care.

We know that among the most advanced technologies in cancer treatment are the newest linear accelerators. Therefore, we strongly endorse and encourage serious consideration of the funding request that Mercy Health-Springfield Cancer Center is submitting through the State Capital Budget process for a state-of-the art linear accelerator.

Every, many across in Ohio, especially the west central region, are impacted by a cancer diagnosis. Everyone has a cancer story, whether firsthand or among their family, friends and colleagues. Gala of Hope Foundation is a nonprofit that supports cancer patients, cancer treatment and local cancer research in our ultimate vision to send cancer into the sunset in the Dayton-Springfield region.

We are confident that this new linear accelerator, if funded, will be acquired and deployed sooner with this public support, and that Mercy Health- Springfield Cancer Center's commitment and capacity to sustain and grow their cancer care will allow for immediate results. This will make for its optimal use to care for cancer patients, recruit new specialist clinicians, and build the region's capacity to care for cancer patients with accessibility and the highest level of clinical excellence.

We are pleased to give our endorsement of Mercy Health's funding request and encourage the most serious consideration of this request.

Sincerely,



Jeff Brock
Executive Director

Gala of Hope Foundation is a tax-exempt, nonprofit organization as described in section 501(c) (3) of the IRS Code for 1984, as amended. Our tax identification number is 46-4277044.

Gala of Hope Foundation, 3500 Pentagon Blvd. Suite 500, Beavercreek, OH 45431



Health Commissioner
Charles A. Patterson, RS, MBA

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health@ccchd.com

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529 East Home Road
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Phone: (937) 390-5600
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2685 East High Street
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New Carlisle: (937) 845-2349

March 16, 2023

Mr. Adam Groshans, President
Mercy Health Springfield
100 Medical Center Drive
Springfield, OH 45504

Dear Adam:

The Clark County Combined Health District is pleased to offer our endorsement and support of the Congressionally Directed Spending Request submitted to Senator Sherrod Brown by the Springfield Cancer Center. I am aware that the project proposes funding to replace the existing linear accelerator for cancer treatment.

Mercy Health is valued as a major force in providing access to medical care, serving as an anchor of employment, and improving community health beyond the walls of its hospital. They are a critical partner who stewards their resources and sustains a focus to address the social determinants of health in our community. We consider cancer care to be a pivotal and growing need in our community, especially where patient outcomes can be optimized by seeking their treatment as close as possible to their home community. We are aware that upgrading this vital technology can demonstrably impact and improve individual patient health outcomes as well as institutional and systemic costs. **Cancer is the second leading cause of death in Clark County after heart disease.**

Our agency works with Mercy Health to address gaps in access to care and healthcare infrastructure as well as to reduce the health impact of these gaps across our region. Because of this sustained relationship, we endorse Mercy Health's request for funding through the earmark process to expand important clinical infrastructure embedded in our community. We recognize the role of the Springfield Cancer Center in providing cancer care; applaud its affiliation with The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and –+9 support the replacement of this critical technology – a replacement linear accelerator. As technology evolves, it is vital to keep pace with the most up to date evolution of devices and equipment and the software that supports them, on which clinicians are trained and through which they deliver optimum quality care.

The application of the Mercy Health Springfield Cancer Center carries my personal support as well as our Health District's support. We value Mercy Health's role as the primary anchor of acute and outpatient clinical care. We encourage serious consideration of the proposed funding.

Sincerely,

Charles Patterson, REHS, MBA
Health Commissioner



OFFICE OF THE CITY MANAGER

March 16, 2023

Mr. Adam Groshans, President
Mercy Health Springfield
100 Medical Center Drive
Springfield, OH 45504

Dear Adam:

As the City Manager for Springfield, Ohio, I am pleased to offer my endorsement and support of the Congressionally Directed Spending Request submitted to Senator Sherrrod Brown by the Springfield Cancer Center. I am aware that the project proposes funding to replace the existing linear accelerator for cancer treatment.

Mercy Health is valued as a major force in providing access to medical care, serving as an anchor of employment, and improving community health well beyond the walls of its hospital. As a critical and primary provider of healthcare in our community, your efforts to expand services and provide advanced care for all is valued. Your focus to address clinical, infrastructure, demographic and socioeconomic factors that impact health costs and outcomes are applauded. Cancer care is a pivotal and growing need in our community, especially where patient outcomes can be optimized by seeking their treatment as close as possible to their home community. I am aware that upgrading this vital technology can demonstrably impact and improve individual patient health outcomes.

As the only provider of cancer treatment in a two-county area along with its affiliation with The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital, the Springfield Cancer Center is uniquely positioned to add this linear accelerator. As technology advances and patient needs increase, it is vital to keep pace with the most up to date evolution of devices, equipment, and the software that supports them, on which clinicians are trained and through which they deliver optimum quality care.

The application of the Mercy Health Springfield Cancer Center has my support. Mercy Health is valued as an anchor of acute and outpatient clinical care and I encourage serious consideration of the proposed funding.

Sincerely,

Bryan Heck
City Manager
Springfield, Ohio

The James

The Ohio State University
Comprehensive Cancer Center –
Arthur G. James Cancer Hospital and
Richard J. Solove Research Institute



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

460 W. 10th Avenue
Columbus, OH 43210-1240

(614) 685-9453 Phone
cancer.osu.edu

March 16, 2023

Mr. Adam Groshans, President
Mercy Health Springfield
100 Medical Center Drive
Springfield, OH 45504

Dear Mr. Groshans:

The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital supports the proposal to seek funding through a Congressionally Directed Spending Request to replace the older technology of the existing linear accelerator at the Springfield Cancer Center, an affiliate of The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital. This technology is the gold standard of cancer care infrastructure and is critical to physician recruitment and retention in the region.

Radiation therapy is a common treatment in cancer care. It uses high-energy particles or waves, to destroy or damage cancer cells, emitted from a device called a linear accelerator. A linear accelerator delivers a highly focused, intense dose of radiation to conform to a tumor's shape and destroy cancer cells, while limiting the dose to the surrounding organs and sparing healthy tissues. Most treatments are done in short outpatient visits of 30 minutes to one hour, requiring no hospitalization.

As technology evolves, it is vital for Mercy Health Springfield Cancer Center to keep pace with the most up to date evolution of cancer treatment's precision technologies on which clinicians are trained and through which they deliver optimum quality care. A state-of-the-art linear accelerator reduces the number of daily treatments, which may facilitate shorter courses of treatment due to precise and efficient targeting of the malignancy. This will increase the success in treating early-stage cancers. Delivering these treatments in the patients' community in a familiar community-based setting at the Springfield Cancer Center will optimize patient outcomes and quality of life.

We support the most serious consideration of Mercy Health's funding request and look forward to patients receiving precision treatments with of replacement of the linear accelerator.

Sincerely,

Kris Kipp, MSN, RN
Executive Director, Clinical Services
The Ohio State University
James Cancer Hospital and Solove Research Institute



A Comprehensive Cancer
Center Designated by the
National Cancer Institute

Ohio State is a Comprehensive Cancer Center designated by the National Cancer Institute.

Clark County Cancer Profile



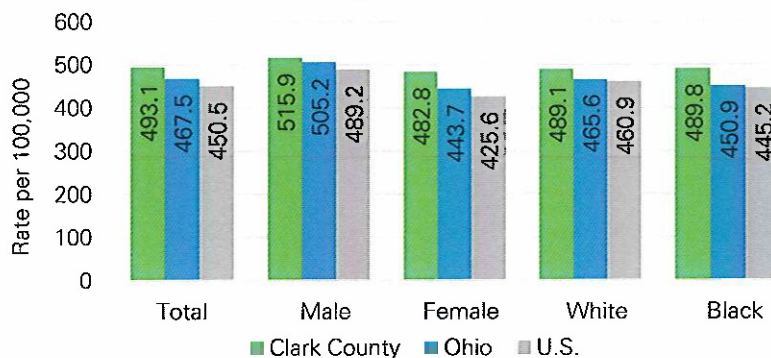
Introduction

Approximately four out of 10 Ohioans will be diagnosed with cancer at some point during their lifetime. Cancer is the second leading cause of death, accounting for nearly one in four deaths in Ohio and the United States. This report provides an overview of cancer in Clark County, Ohio, including data on cancer incidence (new cases) and mortality (deaths), Ohio and U.S. comparisons, trends, early detection, and risk factors. Cancer disparities may be associated with lifestyle factors, lack of access to healthcare, later stage at diagnosis, inadequate treatment, or other risk factors that could be addressed through cancer prevention, early detection, and control initiatives. This information can be used to increase awareness about the burden of cancer in Clark County and to develop targeted cancer programs in the community.

Incidence and Mortality

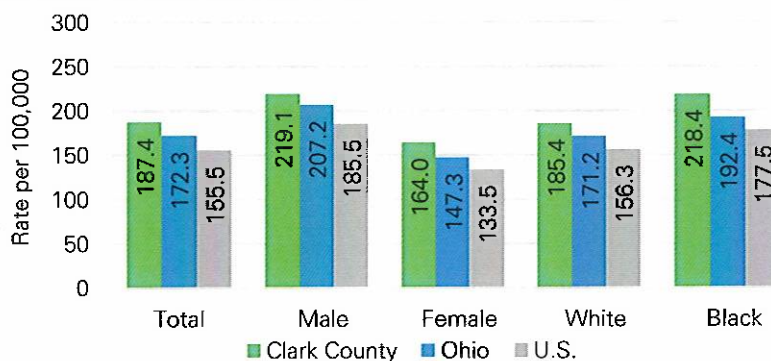
- An average of 885 new invasive cancer cases and 350 deaths occurred each year among Clark County residents in 2014-2018.
- In 2014-2018, the cancer incidence rate for all sites/types combined in Clark County was 493.1 per 100,000 residents, compared with the Ohio rate of 467.5 per 100,000 and the U.S. rate of 450.5 per 100,000.
- The 2014-2018 cancer mortality rate in Clark County was 187.4 per 100,000 residents, compared with the Ohio rate of 172.3 per 100,000 and the U.S. rate of 155.5 per 100,000.
- Cancer incidence and mortality rates among males were higher than the rates among females in Clark County, Ohio, and the United States in 2014-2018.
- White people had higher cancer incidence rates than Black people in Ohio and the United States, while Black people had higher cancer mortality rates than white people in Clark County, Ohio, and the United States.

Figure 1. Average Annual Age-Adjusted Cancer Incidence Rates by Sex and Race in Clark County, Ohio, and the United States, 2014-2018



Source: Ohio Cancer Incidence Surveillance System, Ohio Department of Health, 2021; Surveillance, Epidemiology, and End Results Program, National Cancer Institute, 2021. Rates are per 100,000 people and age-adjusted to the 2000 U.S. standard population.

Figure 2. Average Annual Age-Adjusted Cancer Mortality Rates by Sex and Race in Clark County, Ohio, and the United States, 2014-2018



Source: Bureau of Vital Statistics, Ohio Department of Health, 2021; Surveillance, Epidemiology, and End Results Program, National Cancer Institute, 2021. Rates are per 100,000 people and age-adjusted to the 2000 U.S. standard population.

Champaign County Cancer Profile



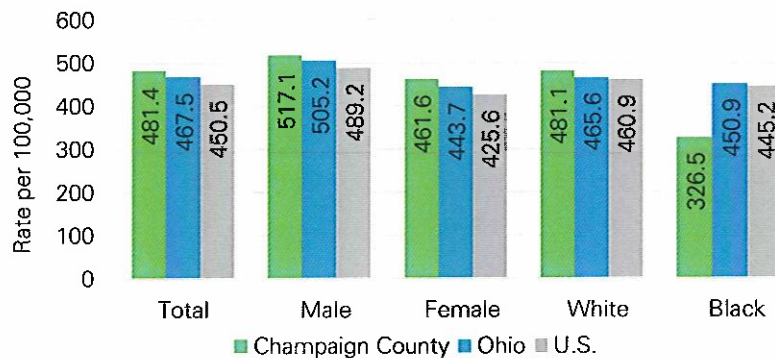
Introduction

Approximately four out of 10 Ohioans will be diagnosed with cancer at some point during their lifetime. Cancer is the second leading cause of death, accounting for nearly one in four deaths in Ohio and the United States. This report provides an overview of cancer in Champaign County, Ohio, including data on cancer incidence (new cases) and mortality (deaths), Ohio and U.S. comparisons, trends, early detection, and risk factors. Cancer disparities may be associated with lifestyle factors, lack of access to healthcare, later stage at diagnosis, inadequate treatment, or other risk factors that could be addressed through cancer prevention, early detection, and control initiatives. This information can be used to increase awareness about the burden of cancer in Champaign County and to develop targeted cancer programs in the community.

Incidence and Mortality

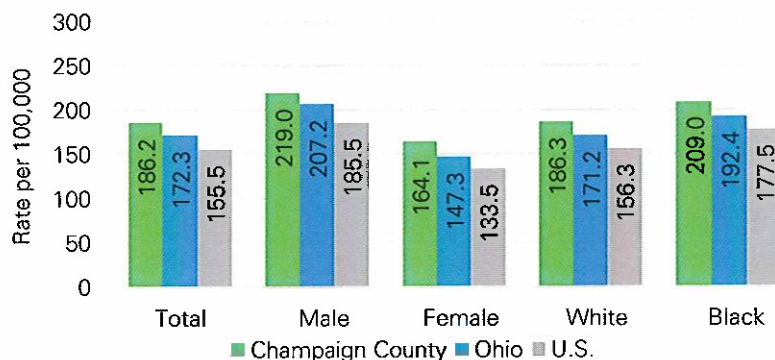
- An average of 245 new invasive cancer cases and 96 deaths occurred each year among Champaign County residents in 2014-2018.
- In 2014-2018, the cancer incidence rate for all sites/types combined in Champaign County was 481.4 per 100,000 residents, compared with the Ohio rate of 467.5 per 100,000 and the U.S. rate of 450.5 per 100,000.
- The 2014-2018 cancer mortality rate in Champaign County was 186.2 per 100,000 residents, compared with the Ohio rate of 172.3 per 100,000 and the U.S. rate of 155.5 per 100,000.
- Cancer incidence and mortality rates among males were higher than the rates among females in Champaign County, Ohio, and the United States in 2014-2018.
- White people had higher cancer incidence rates than Black people, while Black people had higher cancer mortality rates than white people in Champaign County, Ohio, and the United States.

Figure 1. Average Annual Age-Adjusted Cancer Incidence Rates by Sex and Race in Champaign County, Ohio, and the United States, 2014-2018



Source: Ohio Cancer Incidence Surveillance System, Ohio Department of Health, 2021; Surveillance, Epidemiology, and End Results Program, National Cancer Institute, 2021. Rates are per 100,000 people and age-adjusted to the 2000 U.S. standard population.

Figure 2. Average Annual Age-Adjusted Cancer Mortality Rates by Sex and Race in Champaign County, Ohio, and the United States, 2014-2018



Source: Bureau of Vital Statistics, Ohio Department of Health, 2021; Surveillance, Epidemiology, and End Results Program, National Cancer Institute, 2021. Rates are per 100,000 people and age-adjusted to the 2000 U.S. standard population.

Project name, a general description of the overall project, and a specific description of the purposes or specific portion(s) of the overall project for which state capital dollars would be used:

Project Name: Advanced Radiation Therapy in Clark County, Ohio

More than half of all people with cancer receive radiation as part of their treatment. In 2022, Springfield Regional Medical Center, treated 303 patients with external beam radiation therapy, 188 needed advance imaging such as Cone Beam CT which is 62% of the total volume or 3,812 treatments out of 6,068. The current equipment is 13 years old. The new styles of radiation therapy of the Varian Truebeam will allow us to expand patient care and quality of life. Plus provides access to Stereotactic Radio Surgery brain treatments, which currently, patients need to drive an hour or more to receive.

Physical location and address of the project (city/village/township and county):

Mercy Health – Springfield Regional Medical Center
100 Medical Center Drive
Springfield, OH 45504

Mercy Health – Springfield Cancer Center
148 West North Street
Springfield, OH 45504

Project will impact Clark County and Champaign County.

Amount of request:

FUNDING REQ - \$5,306,526

TOTAL COST - \$7,975,169

<i>Item</i>	<i>Amount</i>	<i>Funding Source</i>
TruBeam Radiotherapy System (linear accelerator)	\$5,306,526	CDS
TruBeam 5-year point of sale service agreement	\$1,671,400	SRMC
Vault construction/renovations	\$ 997,243	SRMC
Total	\$7,975,169	

Purchase negotiations have begun, and a letter of commitment has been signed to immediately begin purchase, construction, installation process. Internal capital request and approval is complete, operations budget has been approved, internal funds for service agreement, capital improvements have been reserved. A sustainability plan has been thought out. Staff positions are part of operations and will remain in operations after funding has ended. Operations of equipment include service agreements and will be part of the ongoing operations budget.

SRMC does not have the financial sources to complete the entire project. Since the beginning of the pandemic, there has been a loss of financial resources, staffing, and being affected by supply chain shortages and delays. Increase of expenses and lower patient volumes have also affected the ability to make capital commitments. However, with assistance in purchasing of the equipment, SRMC has reserved funds for vault construction, 5-year service agreement, and staffing including two new Radiation Therapists and increased contracting costs to provide ample care to the community.

Any additional relevant information that the requesting organization believes would be of assistance in evaluating the project's value and eligibility to receive state capital funding:

The communities served include:

- Clark County, population 138,333, a total land area of 403 square miles with 15% of the population live below the poverty line. Per the Ohio Department of Health, “an average of 885 new invasive cancer cases and 350 deaths occurred each year among Clark County residents in 2014-2018 and the cancer incidence rate for all sites/types combined in Clark County was 493.1 per 100,000 residents, compared with the Ohio rate of 467.5 per 100,000 and the U.S. rate of 450.5 per 100,000.”
- Champaign County a rural county with a population of 38,861, a total land area of 428.43 square miles, with 10.6% of the population live below the poverty line. Per the Ohio Department of Health, “an average of 245 new invasive cancer cases and 96 deaths occurred each year among Champaign County residents in 2014-2018 and the cancer incidence rate for all sites/types combined in Champaign County was 481.4 per 100,000 residents, compared with the Ohio rate of 467.5 per 100,000 and the U.S. rate of 450.5 per 100,000.”

The Springfield, Ohio community is characterized by high rates of poverty and continued economic distress. Between 1999 and 2014, median household incomes in Springfield declined by almost 27%, the largest decline of any metropolitan area in the United States (Pew Research Center, 2016). This economic decline figures into the community's diminished health capacity and the reduced availability of health services. Mercy Health challenges this capacity by providing specific interventions and improving health care delivery including a full range of cancer treatment and support services. The cancer care team includes nationally certified radiation therapists, certified dosimetrists, physicists, oncology nurses, and board-certified doctors, all working together to design precise and highly specialized treatment plans for each patient diagnosed with cancer.

Mercy Health has been committed to the communities it serves for nearly two centuries. This long-standing commitment has evolved intentionally, based on our communities' most pressing health needs. This ensures our resources for outreach, prevention, education, and wellness are directed toward opportunities where the greatest impact can be realized. Mercy Health aims to serve our patients and each other in ways that reflect our mission and core values. Our mission is to extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved. Our values are human dignity, integrity, compassion, stewardship, and service. Each year there are millions of dollars in community benefits. The real value of this contribution lies not in dollars, but in the commitment of the staff members, physicians, volunteers, board members and other community leaders who work on behalf of the organization, the people who bring our mission and values to life.

Social determinants of health (SDOH) are those conditions in the social, economic, and physical environments that affect health and quality of life. SDOH include racial inequity, systemic inequality, cultural bias, access to care, transportation, housing, meeting daily needs, quality of life, ACEs, lack of insurance, cost of healthcare and other related matters. The current state of the local community has been affected by the Social Determinants of Health barriers to care and has led to more cancer diagnosis and less access to care as well as the ability to pay for care. This funding will benefit those focus groups that face these barriers and allow access to quality health care.

Description of how the project's support will benefit the general public and how often the public will be able to gain access to the facilities or services provided by the community project funds:

As the largest health service provider in Clark and Champaign counties, Mercy Health - Springfield Regional Medical Center works to catalyze and implement better health solutions and to improve the quality of health care, often through creative and expansive approaches that are delivered in both clinical care sites and non-traditional, community settings. Mercy Health operates 49 facilities within the Springfield metropolitan area that form a network of conveniently accessible points of care for area residents. Springfield Regional Medical Center (SRMC), a 475,000-square-foot, 254-bed tertiary care facility that is the only full-service hospital and singular health access point for emergency medical services for the residents of the Clark County and surrounding area. Individuals who are not established with a primary care provider or who report other health access challenges will frequently utilize the SRMC Emergency Department for non-emergent care.

SRMC is sponsored by the Sisters of Mercy and Mercy Health. The Mission is to extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved. At all levels of the organization, Mercy Health works to reduce health disparities, promote community wellness, and improve access to care.

As an essential health service provider, SRMC works to catalyze and implement better health solutions and to improve the quality of health care, often through creative and expansive approaches that are delivered in non-traditional, community settings. This includes experience in integrating and transforming knowledge about individuals and groups of people into specific standards, policies, and best practices that create clinical care settings in which the quality of the services produced results in improved health outcomes that shift the paradigm of health from one that is strictly reactive to one that is proactive and preventative.

The project reduces barriers to accessible healthcare. Clark County is considered a medically underserved areas by HHS, HRSA which is defined as geographic areas and populations with a lack of access to primary care services because of economic or other barriers to health care. Champaign County is considered rural by HRSA and face health disparities that can be economic, geographic, and other factors.

SRMC does not use income to determine eligibility for healthcare services. However, lower income is associated with poorer health. According to the 2020 census information the median income in Clark County is \$54,869 and the median income in Champaign County is \$62,865.

Positive outcomes include:

- Shorter course of treatment - for some, it will reduce from 5-7 weeks to 1-3 days.
- Daily treatment times reduced by as much as 70%.
- Increased success treating early-stage cancers with the new technology.
- Treatment within patient's own community.

Within the project period, purchase, installation, start-up will be completed and will serve as the performance indicators. After the project period, increase in patient treatment and decrease of treatment time will be tracked.