

community-based, not-for-profit



Shelby Decosta, President, UCSF Health Affiliates Network & Chief Strategy Officer, UCSF Health and Mike Thomas, Executive Vice President & Chief Transformation Officer, John Muir Health, at the 2020 Legacy Brunch presenting the future Cancer and Outpatient Specialty Center.

## BRIEFINGS

# Together We Can

## CONQUER CANCER—CLOSE TO HOME

Make-ready work for the construction of a world-class Cancer and Outpatient Specialty Center located on the Walnut Creek campus began on October 13, 2020. The Center will offer comprehensive services including radiation-oncology treatments, an infusion center, access to clinical trials, genetic counseling, nurse navigators, support services, and additional diagnostic and treatment services in a patient-centered environment.

Building upon John Muir Health's already strong partnership with UCSF Health, including a joint venture Cancer Outpatient Center in Berkeley, this new collaboration reflects a growing demand for cancer care in Contra Costa County.



“The treatment of cancer is complex and unique to every patient. This level of complexity requires a team-based approach with physicians, nurses, nurse navigators and other health care professionals collaborating to provide expert care from diagnosis through treatment and beyond,” says Cal Knight, President and Chief Executive Officer at John Muir Health. “UCSF will augment the outstanding cancer care that John Muir Health physicians and staff already provide and, together, we will offer state-of-the-art services in a healing environment, close to home, where the support of friends and family can assist our patients in the healing process.”

## LEADERSHIP MESSAGE



**Michael Monaldo**  
VICE PRESIDENT, FACILITIES  
DEVELOPMENT AND  
CORPORATE REAL ESTATE

Despite unprecedented challenges with a once-in-a-100 year pandemic, we are making significant progress in the building of a state-of-the-art, world-class Cancer and Outpatient Specialty Center on our Walnut Creek campus. This includes the demolition of two buildings (Tuolumne and 177 La Casa Via), opening a new employee parking lot, and completing other make-ready work that will allow us to begin construction this fall.

The UCSF-John Muir Health Cancer Center will serve as a hub for our network of cancer care sites throughout the East Bay including Berkeley, Brentwood, and San Ramon. The 155,000 square-foot center will offer patients the most advanced screening, treatment, prevention, survivorship services, research and clinical trials available. We expect to have construction completed in late 2023 and open to our first patients in early 2024.

Floor plans and site layouts, including a virtual walkthrough, will be available in the coming months and I look forward to sharing them with you at that time. In the meantime, know that we've been working diligently to build the very best, patient-centered cancer center in the country.

I'd like to thank our dedicated Facilities Development and Real Estate team and our partners, including John Muir Health and UCSF Physicians and staff, for their contributions and countless hours spent helping to bring this incredible resource to our community. And, as always, thank you for your continued and generous support of the programs and services of John Muir Health. Together, we can make a difference.



Follow the QR Code using  
your smart phone camera to  
learn more about the joint  
UCSF—John Muir Health  
Cancer Network.

## JOHN MUIR HEALTH FOUNDATION BOARD OF DIRECTORS

Beverly A. Jones, R.N.  
**CHAIR**

Richard M. Del Monte  
**VICE CHAIR**

Mark W. Flower  
**SECRETARY/TREASURER**

F. Ryan Anderson, M.D.  
**CHAIR, GOVERNANCE AND  
NOMINATING COMMITTEE**

Guy R. Henshaw  
**CHAIR, ADVISORY COUNCIL**

Lisa Foust  
**SENIOR VICE PRESIDENT,  
CHIEF PEOPLE OFFICER, JMH,  
INTERIM PRESIDENT, JMHF**

Calvin K. Knight  
**PRESIDENT AND CEO,  
JOHN MUIR HEALTH**

Rebecca Queen  
**PRESIDENT, JMH  
WALNUT CREEK AUXILIARY**

Shonna Jolicoeur  
**PRESIDENT, JMH CONCORD  
VOLUNTEERS**

Thomas Dowd  
**OFFICER-AT-LARGE**

Paul R. Gray  
**OFFICER-AT-LARGE**

Doug Lange, M.D.  
**OFFICER-AT-LARGE**

Matthew D. Beinke  
Richard (Dick) Harris  
Harry W. Kellogg  
Kenneth L. Meehan  
Margaret S. Murphy  
Margaret M. Simor, R.N., M.S.N.  
Elliot D. Stein

Jean Hofmann  
Margery B. Sterns  
**HONORARY DIRECTORS**

## ADVISORY COUNCIL

Guy R. Henshaw  
**CHAIR**

J. Kendall Anderson  
Ronald J. Banducci  
Michelle J. Bartel  
Stephen P. Beinke  
Linda Best  
David Birdsall, M.D.  
Chuck Bloch  
Angela M. Coffee  
George Counelis, M.D.  
William F. (Rick) Cronk  
Frederick L. (Rick) Davenport,  
CLU, CHFC  
Sally L. Davis, M.D., FACC  
William H. (Hank) Delevati

Nourollah G. (Nouri) Ghorbani, M.D.  
David L. Goldsmith  
Peter D. Gruebele  
Calvin (Cal) K. Knight  
Michael L. Levine, M.D.  
Robert S. Lowitz, M.D.  
James V. Mitchell  
Ronald E. Nunn  
Irving M. Pike, M.D.  
S. Donley (Don) Ritchey  
Thomas G. Rundall, Ph.D.  
John C. Sayres  
Gerald D. (Jerry) Stroffolino  
Jack E. Thompson  
Ken Wienholz  
Vivian W. Wing, M.D.  
David D. Woodworth

## Accredited Program, Life Saving Equipment Actualized Through Donor Support

The lifetime risk of developing colon or rectal cancer (colorectal cancer) is about 1 in 23 (4.3%) for men and 1 in 25 (4.0%) for women. It is the third leading cause of cancer-related deaths in men and women in the United States and the second most common cause of cancer when men and women are combined. (American Cancer Society)

John Muir Health's Concord and Walnut Creek Medical Centers, are staffed by board-certified colon and rectal surgeons who collectively have more than three quarters of a century of experience. And, we are the nation's first health system to earn a 3-year accreditation from the National Accreditation Program for Rectal Cancer (NAPRC), a program launched in 2017 and administered by the American College of Surgeons.

Samuel Oommen, M.D., FACS, Colorectal Surgeon, and Medical Director of the Gastrointestinal Oncology Program, pioneered the process for accreditation at John Muir Health. "This accreditation demonstrates to patients that we have an innovative program that is at the forefront of rectal cancer care by following rigorous standards and best practices," says Dr. Oommen. "Achieving this designation is a recognition of the work done by a dedicated multidisciplinary team providing high quality, patient-centered care to provide superior oncological outcomes while preserving quality of life," Dr. Oommen adds.



Dr. Piyush Aggarwal at the da Vinci Xi and Dr. Samuel Oommen.

A recent rectal cancer patient says "the moment I found out I had cancer was very frightening. I am married, work full-time, and have two very young children. I experienced difficult emotions, but knew I would be in good hands at John Muir Health, and with Dr. Aggarwal by my side."

Piyush Aggarwal, M.D., Colorectal Surgeon, performed the patient's surgery using the donor-funded, state-of-the-art Robot-Assisted Surgery System, da Vinci™ (read more about the benefits of the da Vinci™ on pages 3-4). "The surgery went very well and we are extremely pleased with the outcome," says Dr. Aggarwal.

*Dr. Aggarwal and the team of highly competent physicians, nurses, and nurse navigators were absolutely phenomenal and will always be an important part of my life—they were so welcoming and knowledgeable, putting me at ease from the moment I met them.*



# A Deeper Look at Robotic-Assisted Surgery at John Muir Health

Q & A WITH WILSON TSAI, M.D.

## Q: What is Robotic-Assisted surgery?

Robotic-Assisted surgery is simply surgery, only with the benefits of much smaller incisions, more precise and less traumatic dissection, improved vision for the surgeon, and maximum improvements in overall patient results.

Contrary to what the name suggests, the surgeon is still performing every part of the surgery. However, instead of holding instruments in his/her hands, he/she is controlling the instruments that are now robotic.

The robotic instruments are further enhanced with multiple degrees of motion and articulation that help improve the finesse and accuracy of the dissection which, in turn, means less trauma to the tissues. All of these enhancements result in direct improvements to the patients' postoperative pain levels, lengths of stay in the hospital, completeness in cancer resection, and return to work.

## Q: How does Robotic-Assisted surgery work?

The surgeon is still controlling the entire surgery. However, rather than standing at the table for hours at a time, he/she is sitting at a console away from the operating table controlling the robot which has four arms with interchangeable instruments at the end of each arm. The robot is equipped with superior optics so the surgeon can view the procedure with high definition optics which are displayed in the three dimensional perspective which augments accuracy in the dissection of the anatomy.

Furthermore, the instruments have precise movements. The improvement in ergonomics potentially leads to decreased surgeon fatigue, eye strain, and fewer neck and back injuries, and these benefits are directly translated to the patient overall.

## Q: What conditions can be treated with Robotic-Assisted surgery?

Almost all surgeries that have previously been performed laparoscopically can be performed robotically. Furthermore, due to the improvements in articulation and optics, many more complex cases can be performed robotically.

In thoracic surgery, robotic surgery is used in complex anti-reflux surgery, lung cancer resection, esophageal cancer resection, tracheal surgery, tumors around the heart, and chest cavity and chest wall resections.

## Q: What are the benefits of Robotic-Assisted surgery?

At John Muir Health, we have reduced patient length of stay in the hospital, decreased patient pain, decreased blood transfusion rates, decreased readmissions, and improved patient satisfaction. Furthermore, we have demonstrated an improvement in completeness of cancer surgery resections with improved accuracy in staging.

*With this state-of-the-art equipment, we can decrease the timeline from confirmation of cancer to staging, and ultimately, reduce treatment of lung cancer from what used to be 2 months down to about 2 hours. This streamlined approach will improve the survival rate for lung cancer in our patients.*

**Q: How important is Robotic-Assisted surgery in curing cancer?**

Robotic-Assisted surgery is ultimately another tool in the surgeon's toolbox when it comes to curing cancer. The robotic platform allows surgeons to access areas of the anatomy which may not have been possible with conventional laparoscopic or thoracoscopic approaches, which would force surgeons to do the surgery as open cases.

**Q: What is the future of Robotic-Assisted surgery at John Muir Health?**

The future of robotic surgery is in the development of other novel approaches for cancer treatment. Currently, John Muir Health is one of the pioneers for robotic bronchoscopy which allows us to detect, biopsy, and stage cancers much more accurately and efficiently than before. We can decrease the timeline from confirmation of cancer to staging, and ultimately, to reduce the treatment of lung cancers from what used to be 2 months down to about 2 hours. This streamlined approach will improve the survival rate for lung cancer in our patients.

Dr. Wilson Tsai with the da Vinci® Xi™ Surgical System





## LEAVE YOUR LEGACY

# DAFs...A Modern Way of Giving

Over the last several years, Donor Advised Funds (DAFs), have seen a meteoric rise in popularity among donors wishing to make gifts to charity. Currently, there are now more than 870,000 DAFs in this country. In 2019 alone, more than \$23 billion was donated into these giving vehicles, and these funds hold more than \$140 billion in assets, according to the National Philanthropic Trust.

This rise in popularity is in large part due to a change in tax law under the Tax Cut and Jobs Act of 2017 that nearly doubled the standard deduction. According to the Tax Policy Center, as a result of this change, those itemizing their deductions on their tax return were estimated to have dropped from 30% to 10%. The concern over the future of the charitable deduction and the increased standard deduction created an incentive for donors to stockpile their deductions in their newfound charitable piggy banks—their DAFs.

Aside from the tax incentives and tax-free growth of the assets within this giving vehicle, there are many attractive features for establishing a DAF. Since a donor makes the recommendation for grants over time to charitable organizations, such as grants to the John Muir Health Foundation, one question commonly asked is, ***“How long will the DAF last?”*** The answer is—***it’s up to you.***

One little-known fact about these vehicles is that any undesignated funds within the DAF during your lifetime can be designated through your estate plan, very similar to the beneficiary designation you make through your retirement plan. Thus, a DAF can be used to further your family’s legacy of giving through a bequest.

Or, if you want to establish a family tradition of philanthropy, you can name someone to take over your role of advising on investments and grants after your death. Simply check-in with the sponsoring organization of your DAF to make sure this is possible.

Although the John Muir Health Foundation is not currently a sponsoring organization, the Office of Legacy Giving can assist you, along with your advisors, in determining if establishing a DAF is the right move for you, your family, and your philanthropic legacy.

## LEGACY BRUNCH—TRANSFORMING THE PATIENT EXPERIENCE THROUGH TEAMWORK

Just before the pandemic took hold of our community, we enjoyed the face-to-face company of our legacy and longtime loyal donors at the Annual Legacy Brunch, held in the Main Lobby at John Muir Health, Walnut Creek Medical Center.

The 2020 event celebrated the value of teamwork and highlighted the John Muir Health/UCSF Cancer Network, featuring guest speakers Mike Thomas, Executive Vice President & Chief Transformation Officer, John Muir Health, and Shelby Decosta, President, UCSF Health Affiliates Network & Chief Strategy Officer, UCSF Health.

## LEGACY VIRTUAL TOWN HALL—COVID-19 STATE OF AFFAIRS

A virtual town hall event took place on October 8, 2020 in which John Muir Health leaders provided a current state of affairs regarding the COVID-19 pandemic. Zoom viewers were treated to presentations highlighting the effects of the pandemic on patients and our community, especially underserved communities.

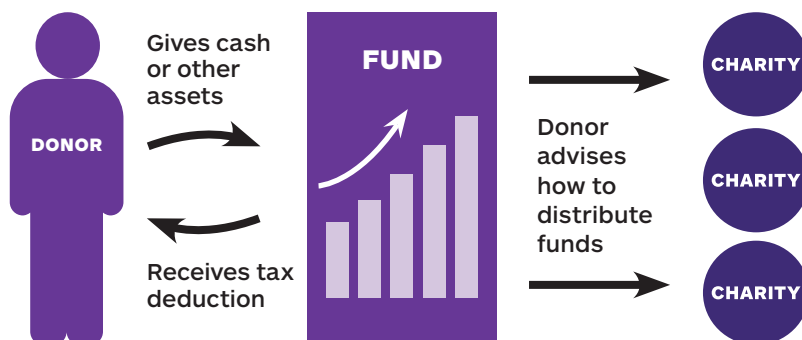


Simply put, a donor-advised fund or DAF is a giving vehicle established at a public charity, called the sponsoring organization. It allows donors to make a charitable contribution, receive an immediate tax deduction, and then recommend grants from the fund over time.



Legacy donors,  
Seymour J. Lapporte, Ph.D.  
and Daniel Lapporte.

## What is a Donor Advised Fund?



Please contact us if you would like any additional information on this wonderful giving vehicle.

### Mike Crvarich

VP, OFFICE OF LEGACY GIVING

925-941-2120

michael.crvarich@givehealthjmh.org

### Mary Sherman

PROGRAM MANAGER, OFFICE OF LEGACY GIVING

925-941-2134

mary.sherman@givehealthjmh.org



## Create Your Own Legacy of Giving

Charitable estate planning can be financially beneficial for families and individuals of various ages and income levels.

Find out what planning a legacy gift to John Muir Health can do for you and your loved ones—now and in the future.

### Gifts John Muir Health Can Use Today

- Appreciated Securities
- Real Estate
- Donor Advised Funds (DAF)

### Gifts That Can Pay You Income

- Charitable Gift Annuity
- Charitable Remainder Trust

### Gifts That Take Effect After Your Lifetime

- Bequest
- Retained Life Estate
- Charitable Beneficiary Designations
  - Life Insurance
  - Retirement Plan



community-based, not-for-profit

1400 Treat Boulevard  
Walnut Creek, CA 94597-2142

NONPROFIT ORG.  
U.S. POSTAGE  
**PAID**  
JOHN MUIR  
HEALTH  
FOUNDATION

## WHY WE GIVE

# Decades of Dedication

Ken and Tamera know John Muir Health better than most. Ken started his 36-year tenure at John Muir Memorial Hospital in 1974, became its administrator four years later, and was named President and CEO of John Muir Health after the merger of John Muir and Concord's Mt. Diablo Medical Center. Under his leadership, John Muir Health became the world-class health system it is today.

Fast-forward to 2021 and both Ken and Tamera are still deeply immersed in the John Muir Health community. Ken has served on the Foundation Board in various capacities and received the highest honor bestowed by the Foundation, the Award of Distinction, in 2010. Tamera is a member of the Women's Philanthropic Circle, a group whose lifetime membership giving has provided \$1 million for the programs and services of John Muir Health.

Ken and Tamera stepped forward and made one of the very first gifts to the new Cancer Center. "We are so proud of John Muir Health and proud



to be a part of its growth and vision. The Cancer Center will enhance the vision of JMH as a Center of Excellence and as a Regional Referral Center. This Center will attract outstanding physicians specializing in cancer care and provide the latest technology for the treatment and prevention of cancer."

***We are grateful for being part of the John Muir Health Family and to be able to provide financial support for the Cancer Center.***

**—Tamera and Ken Anderson**