

We'll start in just a few moments! While you wait, share in the chat:

What is the first word or phrase that comes to mind when you see “health equity in cancer care.”

*Experiencing technology issues? Contact Skylar Rea in the chat or at [ReaSky@advisory.com](mailto:ReaSky@advisory.com)*



# Innovation Showcase: Promoting equity in cancer care

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A cross-industry event  
Sponsored by Pfizer



# WELCOME REMARKS

# Refocusing on the ambition for cancer care

## *Ideal characteristics of cancer care*



Affordable



Personalized



Equitable

# Health equity must be integrated into oncology strategy

## Select reasons to make health equity a strategic priority

- Growing cancer program accountability for **outcomes and costs** under risk-based payment models
- Existing disparities in patient experience may impact ability to **attract and retain cancer patients**
- Many oncology **accreditation programs**<sup>1</sup> have standards related to addressing health disparities



## Dimensions of a cancer program health equity strategy



Governance



Goals



Data collection



Data analysis



Staff training



Holistic care



Workforce diversity, equity, and inclusion



Social needs and community outreach

1. E.g., Commission on Cancer (CoC), National Cancer Institute (NCI).

Source: "Maturity Model for Reducing Health Disparities," Advisory Board.

# Today's presenters who will share their experiences

## PRESENTERS

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**Linda Burhansstipanov, DrPH, MSPH**  
Native American Cancer Initiatives

**Prado Antolino, MA, CT/CI**  
**Steven Gerst, MSN, RN-BC**  
Moffitt Cancer Center

**Ryan Nguyen, DO**  
University of Illinois Cancer Center

**Vikas Mehta, MD, MPH, FACS**  
Montefiore Medical Center

**Kathryn Schmitz, PhD, MPH**  
Penn State Cancer Institute

**Holly Spinks, BSN, RN, CCM, CHWC,  
CNC, ACC**  
Jasper Health

**Elisa Soulier, MBA**  
Castell, An Intermountain Healthcare  
Company

**Caleb Levell, MA**  
American Cancer Society

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# Rules of the road

## Presenters



When it's your turn, unmute yourself, turn your video on, and **introduce yourself**



Present your innovation's description and impact for **5 minutes**



**Answer questions** from audience during 5-minute Q&A

## Attendees



Keep your mic **muted** throughout the presentation



Type your questions and comments **into the chat** on the right



Use the **reactions** to engage with presenters and peers in the chat



# Promoting culturally sensitive care



# Leveraging cultural navigators at Native American Cancer Initiatives, Inc.

Native American Cancer Initiatives, Inc. (NACI) is a small, minority (American Indian), woman-owned business



## Challenge

- Disparities exist within American Indian / Alaska Native (AI/AN) communities throughout the cancer continuum (outreach through end-of-life)
- AI community members encounter an average of 5+ barriers to accessing cancer care
- Barriers require individual solutions
- Patient navigators (PN) want easier-to-use tools to support underserved patients



## Innovation

- Cultural navigators ("Native Sisters" & "Brothers")
- Native Patient Navigators' Trainings
- Tool based on PN experiences with American Indians
- Integrated into tablet software, NACI Care™
- **Next Steps:** Future needs
  - Dept Labor Code for Patient Navigation
  - Consistent funding (contracts, not grants)
  - Public health infrastructure within Indigenous programs
  - Easy-to-use PN evaluation tools
  - Help on how to market the tool

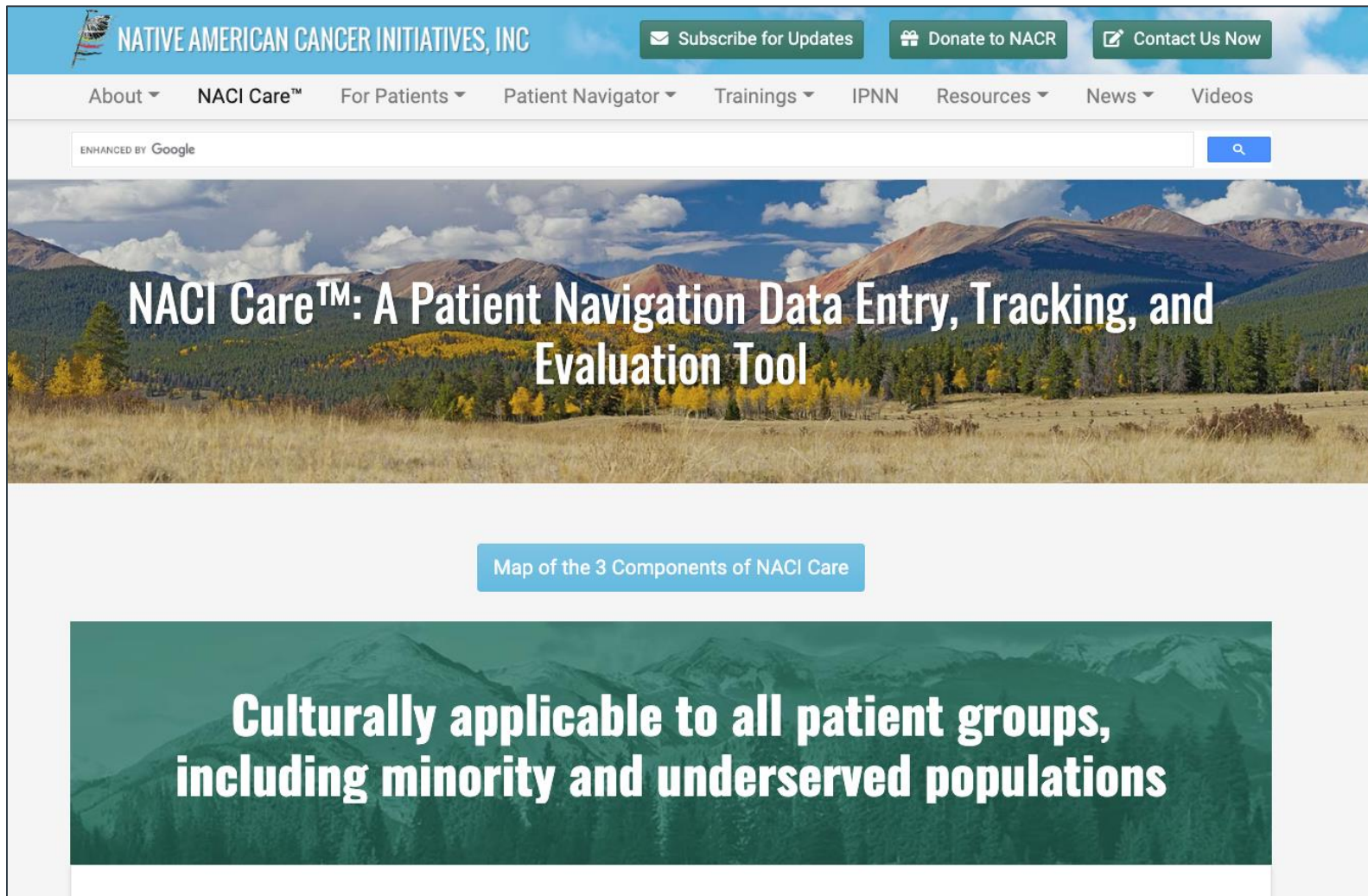


## Impact

- Tool evolved to serve under-served navigation programs beyond AI population
- NACI Care™ tracks & evaluates individual efficiency of each Native Sister and Brother & overall program
- Apple iPad collects data online & offline
- Easily tailored / customized reports
- 33 of the 35 metrics<sup>1</sup> included

1. Metrics recommended by organizations such as Academy of Oncology Nurse and Patient Navigators (AONN+), Oncology Nursing Society, Commission on Cancer, and more.

# NACI Care website and patient quotes



Enrolled patient quotes:

*“I was afraid of the all of the white coats and those people telling me what to do. **Native Sister listened to me and helped me find the path back to balance and hope and happiness.**”*

*“**[I]** had to cherish the lessons cancer was gifting me...**[I]** needed to get back in balance while coping with cancer and cancer treatments...Native Brother was amazing in helping me through this journey”*

1. <https://natamcancer.org/NACI-Care>

Source: Native American Cancer Initiatives, Inc. (NACI), Pine, CO

# Implementing bilingual (EN-ES) discharge summaries at Moffitt Cancer Center

Based in Tampa, Florida, an NCI-designated Comprehensive Cancer Center committed to contributing to the prevention and cure of cancer



## Challenge

- Language access is critical to delivering culturally sensitive care to cancer patients
- Current workflows to translate discharge summaries lead to delayed discharge for non-English speaking patients



## Innovation

- Implementation of auto-text features within the patient's discharge summary
- Bilingual summaries automatically drop in patient's chart and portal
- **Next Steps:** Continue to optimize the process based on future challenges or Cerner upgrades



## Impact

- Reduction of clicks and steps for the nursing staff, reducing clinician burnout
- Availability of bilingual summaries in the EHR
- Expedited patient access of summaries in their portal
- Open the door to multilingual capabilities for discharge summaries



# Example of the auto-text feature in a discharge summary

## **Discharge Disposition**

Discharge - Ordered

-- 03/08/22 17:33:00 EST, Discharge Method: Wheelchair Discharge To: Discharged Home/Self Care

## **Informe de alta**

Solicitud de alta: 8 de marzo de 2022

Alta a: Casa con autocuidados

Método del alta hospitalaria: En silla de ruedas .

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## **Advance Directive**

Advance Directives such as living will and choice of healthcare surrogate are legal documents that can help to honor your goals and preferences. If you would like to create or revise your Advance Directive, contact Social Work office at 813-745-8407.

## **Voluntades anticipadas**

Las voluntades anticipadas, tales como el testamento vital y la designación del suplente para casos de atención médica, constituyen documentos legales que pueden ser útiles para que se respeten sus objetivos y preferencias. Si usted desea redactar o actualizar las voluntades anticipadas, llame a la oficina de Trabajo Social al (813) 745-8407.

Source: Moffitt Cancer Center, Tampa, Florida.

# Developing culturally sensitive clinical trial participation at University of Illinois at Chicago

Joint venture among two hospital systems and five community partners in Chicago, IL



## Challenge

- Black women are consistently underrepresented in breast cancer trials
- Need to identify systemic, multi-level barriers to equitable clinical trial representation using a community-based participatory research approach



## Innovation

- Interview breast cancer survivors, current patients, community organizations, and providers on perceptions of Black women participation in clinical trials
- **Next Steps:** Themes from interviews and focus groups will be developed into a culturally sensitive media intervention



## Impact

- The culturally sensitive media intervention will be piloted at UIC and Mount Sinai Hospital to determine the impact on Black women's enrollment in breast cancer clinical trials
- A similar approach by our research team found an increase in genetic counseling appointments from 50% to 70% following viewing of a culturally sensitive media intervention

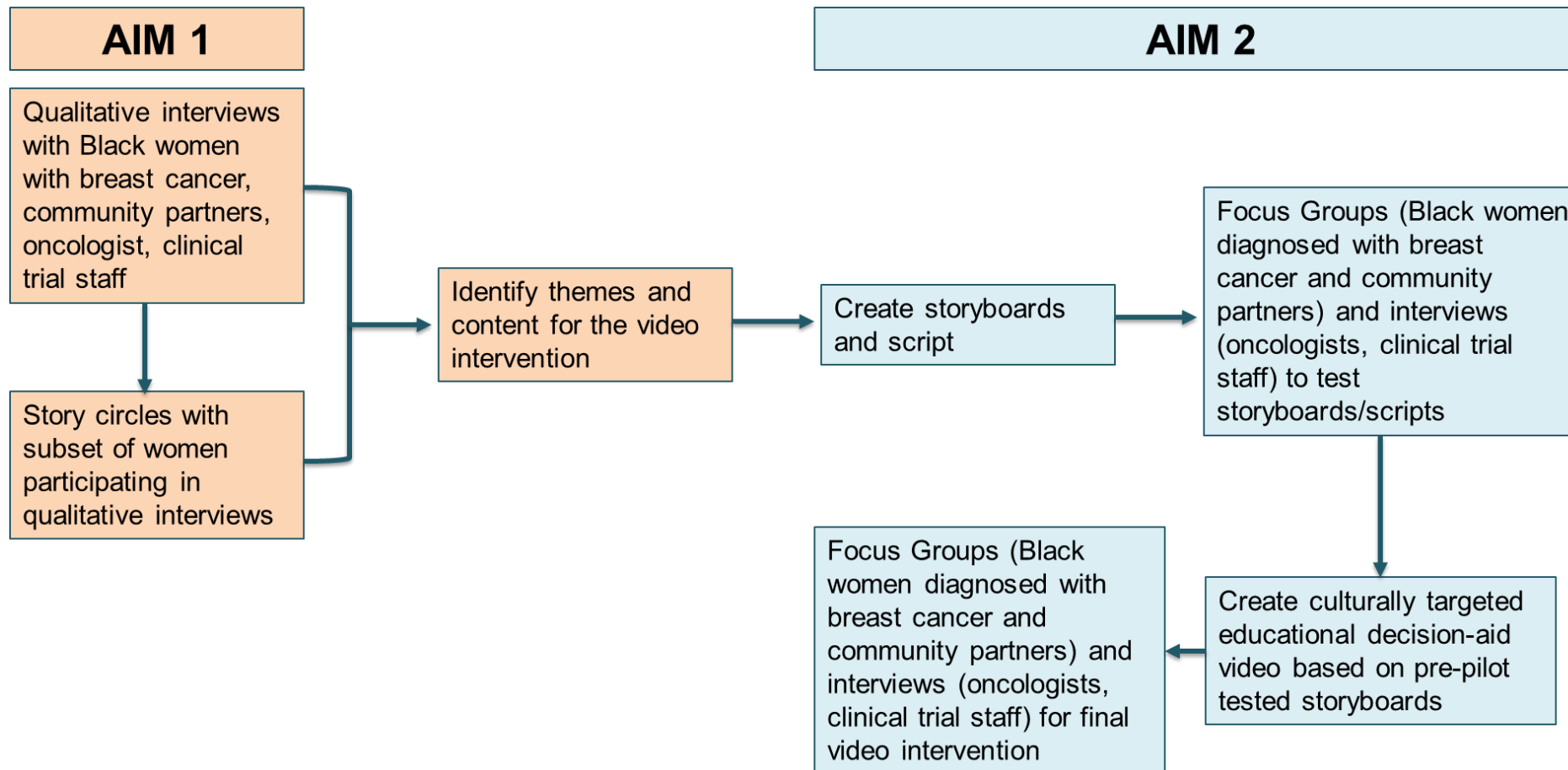
PARTNERS:



Presented by Ryan Nguyen, DO.

# Culturally sensitive narrative intervention to promote participation in clinical trials

Using education and technology to bridge enrollment disparities



Source: UIC, Chicago, IL.

QUICK POLL

My organization has targeted programs or interventions to address the cancer needs of:

- A. People of color
- B. Women
- C. LGBTQ+ people
- D. Veterans
- E. Other (please share in chat)
- F. We don't have any targeted programs for underserved populations



# Implementing technology-enabled navigation



# Improving timeliness of oncology care at Montefiore Medical Center

10-member hospitals serving patients across the Bronx, Westchester and the Hudson Valley in New York



## Challenge

- Disparities exist by race and socioeconomic status in timeliness and adherence to cancer treatment
- In a retrospective study of head and neck cancer patients treated at MMC, ~20% experienced:
  - Delay of > 60 days for time to treatment (TTI)
  - ~2x risk of mortality and recurrence
  - ~2x risk of experiencing delay: African American, Medicaid, diagnosis at another institution



## Innovation

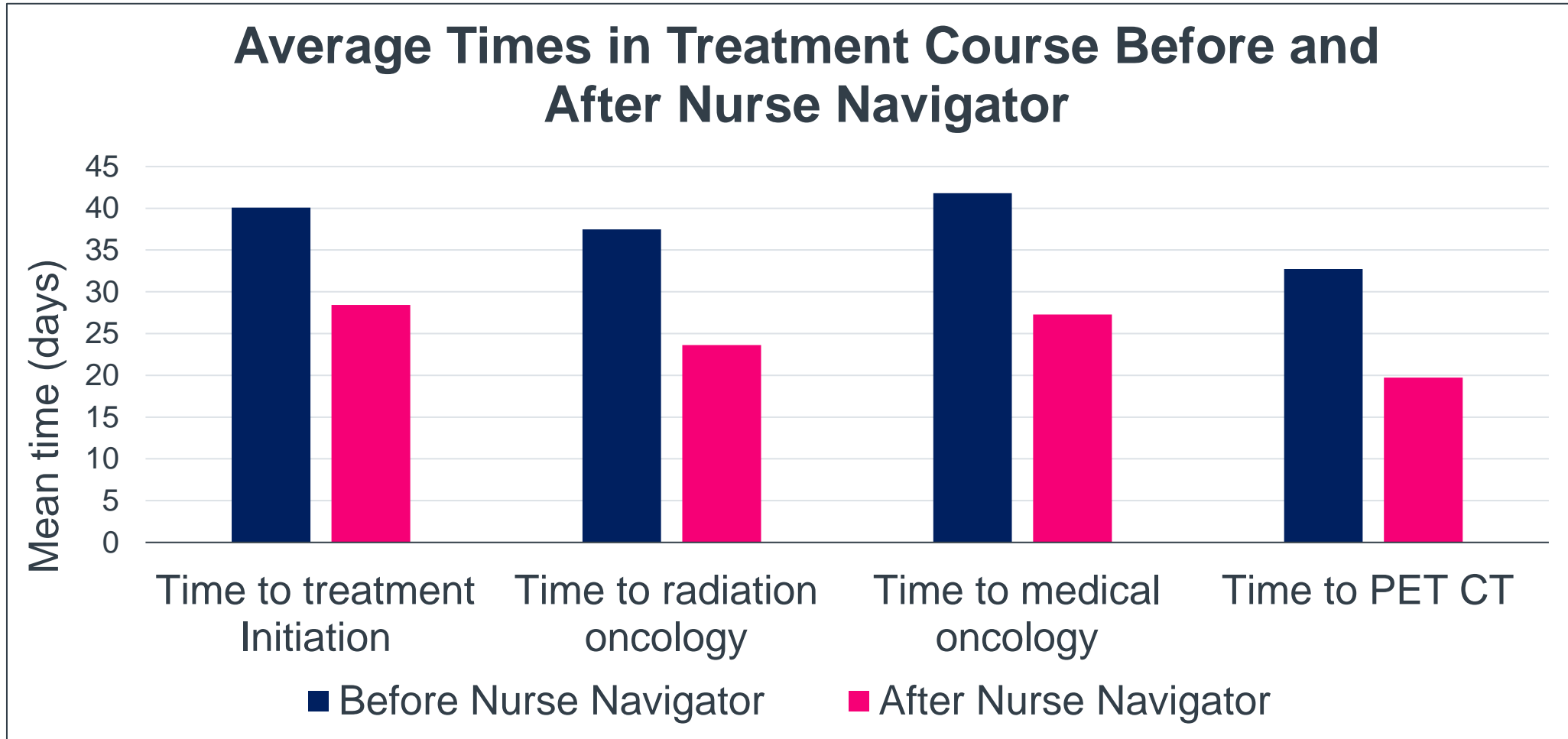
- Developed EHR-based navigation portal for oncology nurse navigators to decrease TTI and improve care efficiency
- Created dashboard to track timelines of care in real-time and identify areas for performance improvement
- **Next Steps:** Expand navigation services to other cancer teams and further investigate "bottlenecks" in TTI



## Impact

- Decreased TTI from a mean 40.1 days vs 28.4 days
- Number of patients who experienced TTI>60 days was reduced 14% to 1.9%
- OR 0.26 (p=0.02) for experiencing a clinically impactful delay in care with a navigator
- Proof of concept for expansion to other teams

# H&N Navigation Study Results



Source: Montefiore Medical Center, Bronx, NY

## Addressing holistic care needs with Nurse AMIE at Penn State Cancer Institute

AMIE: Addressing Malignancies In Everyday life - A tablet based supportive care platform to address health equity



### Challenge

- Patients' often leave cancer care visits with unmet psychosocial needs and symptoms
- Patients want support without additional appointments and travel
- This challenge is exacerbated for rural and underserved patients



### Innovation

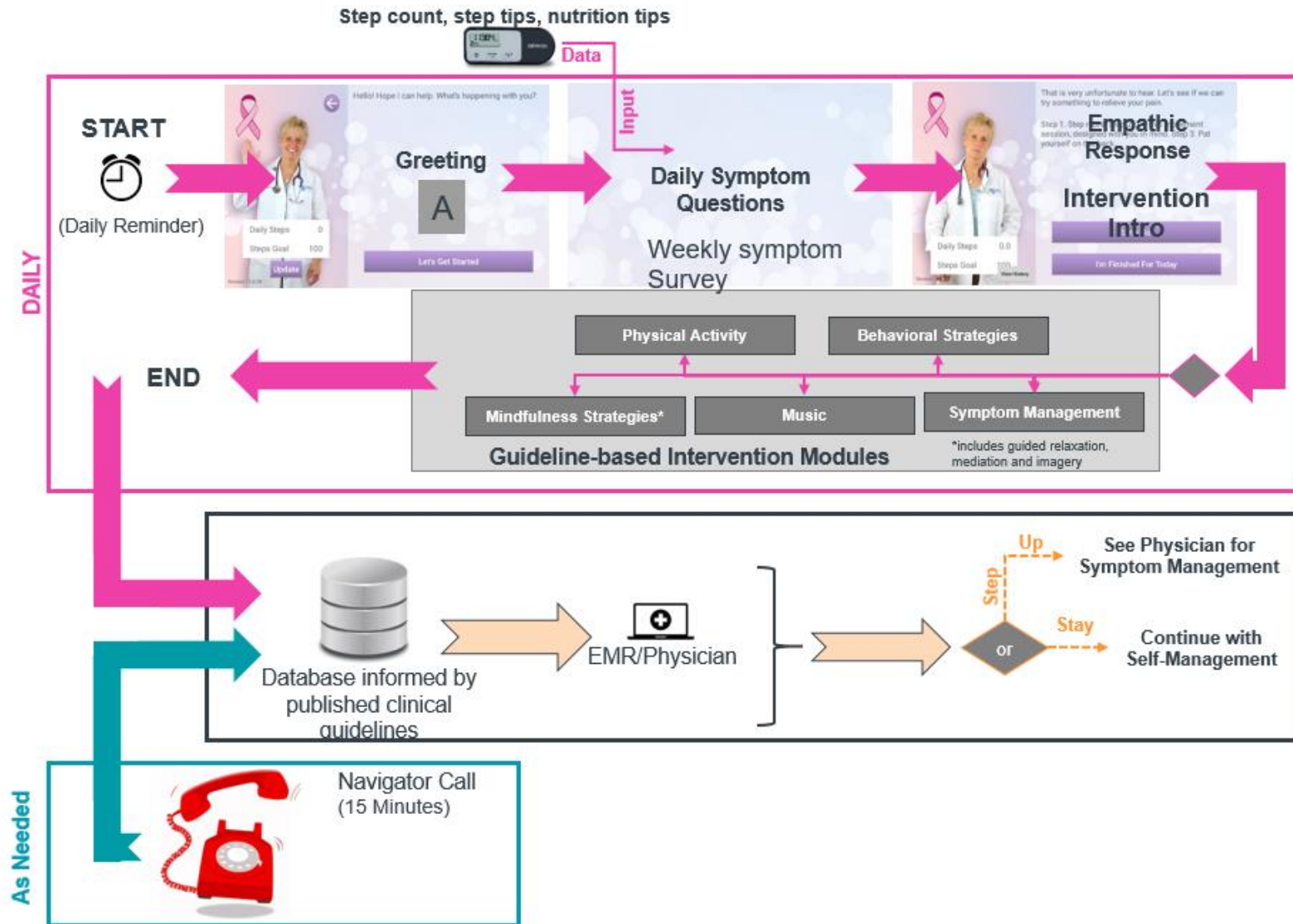
- Tablet based supportive care platform
  - Embeds personification
  - Asks symptom questions daily
  - Evidence based, guideline concordant self care interventions
- **Next Steps:** Currently testing Nurse AMIE in 344 RURAL advance cancer patients



### Impact

- Metastatic breast cancer patients in 3 pilot studies report high levels of engagement and satisfaction with the platform
- 83% of time patients report liking the interventions offered
- >68% of patients and providers report high acceptability of the tablet
- 49% of patients adhere to daily log-ins
- Pilot studies suggest a strong inverse relationship between self-reported step counts and symptoms

# Nurse AMIE user flowchart



Source: Penn State Cancer Institute, Hershey, PA.

## Navigating the complexities of cancer care at Jasper Health

Delivering better, more empathetic care through personalized, insights-driven guidance



### Challenge

- High treatment costs present financial barriers to care for patients
- Navigating the complexities of cancer care causes high levels of stress and anxiety for patients and their caregivers



### Innovation

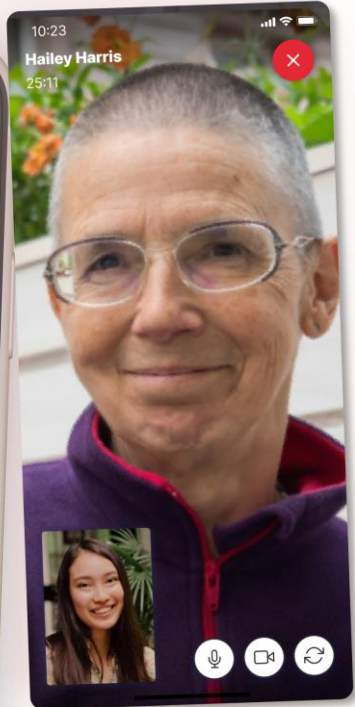
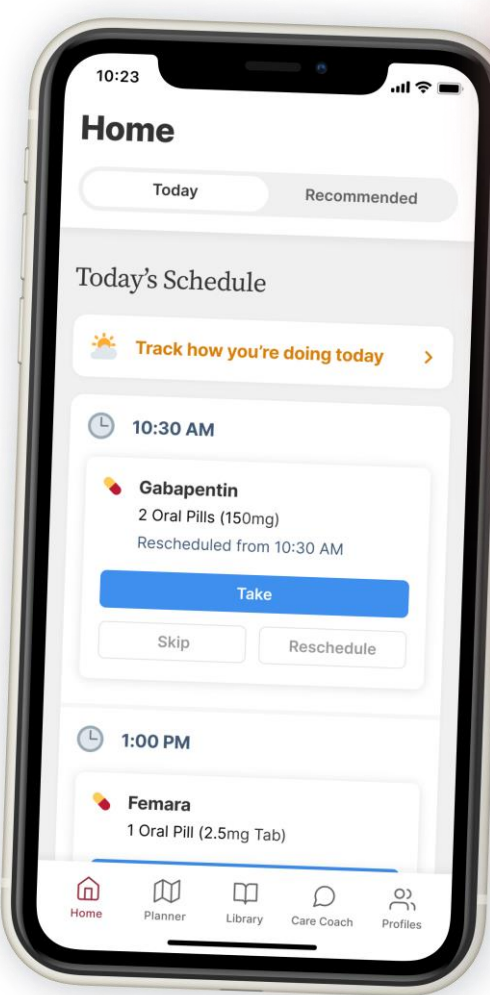
- Triage dashboard uses ePRO data and biometric data to risk stratify and prioritize patient interventions
- Patients and care coach team create shared actions plans to address psychosocial needs, sleep, physical activity, and financial needs
- **Next Steps:** Reaching more patients through partnerships and non-profit cancer organizations



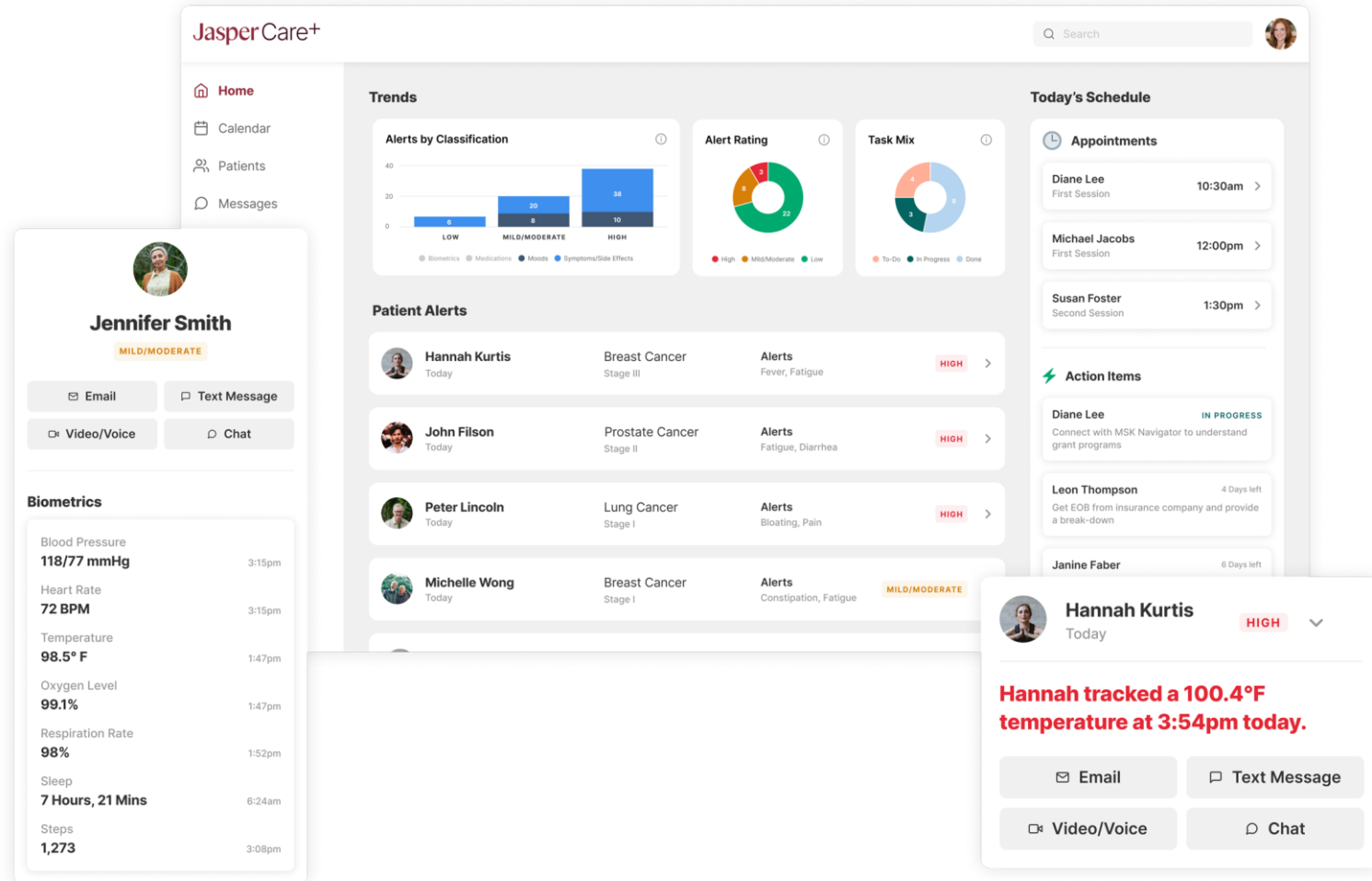
### Impact

- Over 13,500 members served on our platform today
- 68% of members report having less stress/anxiety
- 78% of members report better medication adherence
- 93% of members find it easier to track appointments

# Jasper Health's member solution and clinician dashboard



"Chris" found Jasper Health via a Facebook advertisement. She connected with a Jasper Care Coach and explained she was suffering from stage 3 breast cancer, living in her car, and uninsured. Our Care Coach connected her to Medicaid (which she was eligible for), resources to improve her living situation, and implemented regular coaching sessions to provide psychosocial support.



1. Patient names and data depicted on this slide are fictional and meant to illustrate the platform.

Source: Jasper Health, Boise, ID.

QUICK POLL

At which point(s) in the cancer patient journey is your organization using technology to address disparities?

- A. Screening
- B. Diagnosis
- C. Treatment
- D. Survivorship
- E. Other (type in chat)
- F. We're not currently using technology to address disparities



# Addressing the social determinants of health



# Addressing food insecurity at Intermountain Healthcare

Not-for-profit system of health services, medical group, and health plan (SelectHealth), and 33 hospitals



## Challenge

- Access, cost, and transportation issues can limit patients' access to nutritious food
- Nutritious food is essential to cancer prevention, healing and holistic recovery
- Food insecurity can impact both patients and their caregivers



## Innovation

- Partnered with Green Urban Lunch Box (GULB) to deliver on-site farmers markets at no cost to patients at 4 cancer centers
- Secured funding through our hospital foundations
- Added registered dietitians on site for real time education
- **Next Steps:** Use data analytics to add rigor to scoping, targeting, and assessment of future food insecurity initiatives



## Impact

- 30-50 patients attended each market
- 9,590 total pounds of produce delivered in 2019
- Cost of produce at each market: \$300-\$700
- Intermountain Nutrition Services launched CSA boxes for caregivers (employees)
- Intermountain Community Health made charitable donation in 2020 for GULB to donate 10,389 pounds of produce to the Utah Food Bank
- Scaled from 2 markets at 1 location to 42 markets across 4 sites in two years

# Mobile farmers market promotion and images



**Mobile Farmers Market**  
For cancer patients and their loved ones.  
Enjoy locally-grown fruits and vegetables at no cost!\*

Intermountain Cancer Services, with support of Intermountain Foundation, is proud to partner with The Green Urban Lunch Box this summer to provide tasty fruits and vegetables at no cost to our cancer patients and their loved ones. Registered Dietitians will also be available at select markets to offer tips and recipes to help you on your healing journey.



**Intermountain Cancer Centers**



**The Green Urban Lunch Box**

<p><b>Intermountain Medical Center</b></p> <p>Bldg. 3 Lobby 5121 S. Cottonwood St. Murray, UT 84107 801-507-3900</p>	<p><b>Utah Valley Cancer Center</b></p> <p>Sorenson Tower, 1st Floor (Radiation Oncology) 395 W. Bulldog Blvd. Provo, UT 84604 801-357-7575</p>	<p><b>LDS Hospital</b></p> <p>7th Floor West 7 Conf. Room 305 Ave. C Street Salt Lake City, UT 84143 801-408-1819</p>	<p><b>McKay-Dee Cancer Center</b></p> <p>Suite 1670 4403 Harrison Blvd. Ogden, UT 84403 801-387-7150</p>
<p><b>THURSDAYS</b> July 25 – Oct. 10 2 – 4 p.m.</p>	<p><b>EVERY OTHER MONDAY</b> July 22 – Oct. 14 2 – 4 p.m. <small>(No market on Labor Day)</small></p>	<p><b>FRIDAYS</b> July 26 – Oct. 11 1 – 3 p.m.</p>	<p><b>WEDNESDAYS</b> July 31 – Oct. 16 2 – 4 p.m.</p>

\*Supplies are limited. First come first served.



Source: Intermountain Healthcare Salt Lake City, Utah.

QUICK POLL

Which of the following social determinants of health is your organization currently targeting?

- A. Food insecurity
- B. Housing
- C. Transportation
- D. Health literacy
- E. Other (please share in chat)
- F. We're not currently targeting any social determinants of health



# Advancing equitable cancer screening

# Advancing equitable cancer screening at the American Cancer Society

The ACS National Consortium collectively addresses the pandemic's detrimental impact on cancer screening and care



## Challenge

- Cancer affects everyone, but it doesn't affect everyone equally
- The Covid-19 pandemic has compounded health inequities in cancer screening and care
- These inequities reflect long-standing disparities in health quality and health outcomes for underrepresented communities



## Innovation

- The consortium expects to catalyze change by identifying and accelerating sensible, but bold, cancer screening and care activities
- Hosted 829 participants virtually across 3 public forums to identify 10 critical barriers in screening and care
- Engaged 27 leading organizations to create 9 consensus recommendations to improve cancer outcomes nationwide
- **Next Steps:** Disseminate, Implement, Evaluate



## Impact

- 92% of member respondents were satisfied with efforts to improve collaboration across member orgs
- 91% of attendees reported learning something new and valuable during the Consortium's Issue Hub events
- 64% of members interviewed acknowledged the health equity efforts of the consortium
- 93% of members felt more informed on strategies they could use to recover and advance cancer screening during the Covid-19 pandemic

Presented by: Caleb LevelL.

# Health equity in focus around the ACS

The consortium was one component of a multi-faceted, multi-sector nationwide initiative to spotlight and alleviate barriers to care in the wake of Covid-19



Source: American Cancer Society, Atlanta, Georgia.

# Thank you so much!



# Jasper



Montefiore Einstein  
Cancer Center

Montefiore



# Nurse AMIE



CHAT IN

What's **one action or idea** you plan to bring back to your organization from today's showcase?



# Thank you!

Please take 2 minutes to provide your feedback on this event.



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