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INTRODUCTION

We are pleased to share the following results from our 2019-2022 Community Health Needs Assessment Implementation Strategy.

As part of the Temple University Health System, Fox Chase Cancer Center remains an integral part of its community delivering a strong benefit for the surrounding catchment area and beyond. Fox Chase was one of the first cancer centers designated by the National Cancer Institute as comprehensive, the highest possible designation from the agency that sets national standards for cancer care and research. More than 100 years later, it is still going strong, and its performance in fiscal year 2021 was no exception despite the continuing COVID-19 pandemic. Although COVID-19 limited our ability to hold in-person educational sessions and support groups, we did conduct programs virtually and were able to conduct cancer screenings via the Mobile Screening Unit at a limited capacity.

Fox Chase Cancer Center is deeply committed to its community. Specific to the goals of our 2019-2022 Community Health Needs Assessment Implementation Strategy, we accomplished the following during FY21:

- To improve cancer screening and navigation:
  - Conducted 70 screening events and provided breast cancer screenings to 765 women via the Mobile Screening Unit
  - No cost mammograms were provided to 177 uninsured women
  - 73 patients were provided navigation services (appointment reminders, transportation services, accompanying to appointments)

- Our Office of Community Outreach conducted bilingual outreach to 876 people through 55 virtual educational sessions. Most health fairs and other large events were cancelled during FY21 due to COVID-19, but Fox Chase was able to participate in two outreach events this year and reached an additional 200 people with cancer information. These programs are designed to help patients become more active in their healthcare by gaining a stronger understanding of cancer, risk factors and screening guidelines.

- Fox Chase Cancer Center continued promotion of the employee screening program. During this fiscal year, 435 employees received breast cancer screening, 17 employees received colorectal cancer screening, and 3 employees received lung cancer screening.

- The community tobacco treatment program offered two free sessions; 7 people completed the program and six of the seven participants (86%) decreased the number of cigarettes they smoked.

- Fox Chase Cancer Center launched the Caregiver Network in February 2020 to provide caregiver support. Since its launch, sixteen volunteers were trained and continue to be matched with new caregivers.

- To prevent prescription drug abuse, Fox Chase Cancer Center continued the work of the Opioid Stewardship Committee to monitor the safe use of these agents as part of an overall treatment plan. The monitoring through patient records was accompanied by enhanced education, printed inserts and revamped discharge instructions.
PLAN TO IMPROVE CANCER SCREENING, NAVIGATION & EDUCATION

Strategy Team Leads: Director of Community Cancer Screening, Office of Community Outreach, FCCC - Linda Hammell and Program Manager, Office of Community Outreach, FCCC - Allison Zambon, MHS, MCHES

Priority: Enhance access to health care through cancer screening, community navigation, health education, health literacy and Spanish education materials.

1. Cancer Screening and Navigation

Summary of the Methods/Tactics Implemented: Our Community Screening Program currently provides breast cancer screening in the community. The program has been in existence for 30 years and provides access to life-saving screenings. Most of the community-based screenings are held on our Mobile Screening Unit (MSU). The MSU is considered a best practice by the U.S. Department of Health and Human Services’ Community Preventive Services Task Force, eliminating structural barriers or obstacles that make it difficult for people to access cancer screenings.

Through our network partners, we screen at both corporate and community settings. In the corporate setting, the MSU is provided as a worksite wellness program and provides a convenient way to obtain screening for individuals that likely have health insurance. Within the community, the MSU works to ensure equal access to care among the medically underserved audiences that may have many barriers to obtaining proper healthcare including a lack of health insurance. Among both community and corporate partners, we have found that many women return to our mobile screening unit annually for their mammogram and many are likely to choose Fox Chase Cancer Center (FCCC) should they need follow-up diagnostic services or breast cancer treatment.

Starting in 2010, patient navigators with extensive experience working in the community and with our community partners have worked closely with patients who have inconclusive or abnormal screening results and/or who have financial or other issues (e.g. language barriers) to ensure that these individuals are able to access follow-up services as needed.

Goal: To address health insurance issues and lack of access to care, we will enhance access throughout the community to preventive cancer screening and programs and will provide navigation services to those patients that need follow-up services or have financial, language, or other barriers.

Outcomes: During FY21, we conducted 70 screening events and provided breast cancer screenings to 765 women via the Mobile Screening Program. We provided no-cost mammograms to 177 uninsured women.

Navigation services, including appointment reminders, transportation services, and accompanying patients through Fox Chase to their follow-up appointments, were provided to 73 patients. These patients are very thankful for the services received and have told our patient navigator that they are grateful for our help and glad that we have a program that allows the uninsured to screen.
Conclusions: This program has been successful in screening both community and corporate partners.

Next Steps: We intend to continue screening patients at both community and corporate partners during FY22.

FY21 Metrics Achieved by %

**Community Screening Sites**

N = 70

- Corporate: 7%
- Community: 29%
- Physician Practices: 64%

2. **Cancer Education**

**Summary of the Methods/Tactics Implemented**: Cancer education is a key component of the mission of a National Cancer Institute-designated Comprehensive Cancer Center, such as FCCC. By addressing educational needs throughout the community, we can better serve the health needs of those in our service area, including non-English speakers who may otherwise not receive or seek out cancer-related information and resources.

Our **Community Speakers Bureau** provides free, bilingual cancer education on breast, cervical, colorectal, liver, lung, ovarian, prostate, and skin cancers, as well as clinical trials. All the sessions are based on scientific-evidence and include a pre/posttest to evaluate increases in knowledge, changes in attitudes and likelihood to screen and/or participate in research. These one-hour education sessions are delivered through new or existing partners. Sessions are conducted in English and Spanish by seasoned health educators. Education sessions are also provided by the...
Office of Community Outreach on non-speaker’s bureau topics, such as Cancer 101. We also develop educational materials, written in plain language, on various cancer topics.

**Goal:** To deliver evidence-based cancer education and resources to address the regional cancer burden.

**Outcomes:** Our Office of Community Outreach (OCO) reached 876 people through 55 virtual education sessions. Pre/posttests were completed by 124 individuals. Most health fairs and other large events were cancelled during FY21 due to COVID-19, but Fox Chase was able to participate in two outreach events this year and reached an additional 200 people with cancer information. This totaled 1,076 people reached during FY21. OCO presentations are designed to increase awareness of cancer and its symptoms, the role of healthy lifestyle behaviors and the importance of research. For example, among the 18 participants in colorectal cancer presentations, the percent of people that correctly stated that having blood in the stool is a symptom of colorectal cancer rose from 7% pre-test to 94% post-test. Additionally, when asked about their intent to get screened for colorectal cancer, 15% were very or somewhat likely to get a screened in the future on the pre-test compared to 54% on the post-test.

During FY21, OCO developed plain language materials on breast density in English and Spanish.

**Conclusions:** Evaluation results show that increases in knowledge (example below), changes in attitudes, and greater likelihood to screen occur following our education sessions. When educated and asked about the likelihood of participating in research opportunities we have also recorded increases.

**Next Steps:** We intend to continue our education goals and conduct *Community Speakers Bureau* sessions in FY22. We have had to temporarily halt in-person services due to the COVID-19 pandemic, but we are planning to continue conducting our Speakers Bureau sessions virtually during this fiscal year. We are also planning to participate in several health fairs, as they are permitted, where we can reach large audiences with cancer information.

During FY22, OCO is also planning to develop plain language materials on head and neck cancer.
Example from Colorectal Cancer Education Session

Question: Having blood in the stool is a symptom, or sign of cancer. (Answer: True)

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PLAN TO REDUCE CHRONIC DISEASE THROUGH CANCER PREVENTION

Strategy Team Leads: Chief Medical Officer, FCCC - James Helstrom, MD, MBA and Senior Director, Office of Community Outreach, FCCC - Evelyn González, MA

Goals of the Strategy: To deliver evidence-based cancer screening, smoking cessation services, and obesity education.

Summary of the Methods/Tactics Implemented: Chronic disease prevention was repeatedly mentioned as a need among the community in our Community Health Needs Assessment (CHNA). Specific conditions prioritized in the CHNA were cancer, heart disease, diabetes, obesity. As a cancer center, Fox Chase Cancer Center (FCCC) does not directly treat heart disease and diabetes, and therefore will focus their chronic disease efforts on cancer prevention and obesity as it relates to cancer risk. Cancer screening will be conducted through our Community Cancer Screening program as mentioned in the access to care plan. In addition, FCCC established a worksite wellness program to ensure employees are able to access all age-appropriate cancer screenings. FCCC employs approximately 2,400 people and about 53% of employees live in the defined target community for our CHNA. Employees are one of FCCC’s most effective communicators and are encouraged to spread the word to friends and family members about the importance of screening. In addition, it has been found that modifiable health risks that lead to disease can be decreased through workplace-sponsored health promotion and disease prevention programs. An employee portal was developed to capture our efforts. Additionally, cancer education sessions were conducted to educate staff on risk factors and current screening guidelines.

In order to address the lung cancer burden, we continued to develop and build on our Community Tobacco Treatment Program. This program was held virtually this year and was open to patients, family members, staff, and other community members at no charge.

Information on obesity as a risk factor for cancer was added to all speaker’s bureau presentations. Patients that are overweight or obese had access to nutrition services. Wellness initiatives, such as an onsite discounted Weight Watchers program, were also available to FCCC employees.

Outcomes: The focus of the employee screening/wellness program this fiscal year was on education for head and neck cancer as well as continued promotion of the availability of mammography, lung screening, and colorectal screening for employees, even during the COVID-19 pandemic. Posters and e-news articles were used to continue program promotion during the pandemic. During this fiscal year, 435 employees received breast cancer screening, 17 employees received colorectal cancer screening, and 3 employees received lung cancer screening. The
number of employees receiving mammograms was unchanged from FY20. The numbers for colorectal and lung cancer screening were slightly lower. These numbers are to be expected with the ongoing pandemic and the effect it has had on decreasing cancer screenings throughout the country.

While an employee screening day for head and neck cancer had to be cancelled due to COVID, virtual education sessions on these cancers were presented to provide staff with an overview of risk factors and screening guidelines. Nurse navigators from the head and neck program presented information and answered questions from the audience. The Office of Community Outreach supported this effort and conducted a pre/post-test at all sessions to determine if there was a change in knowledge. There were two sessions on head and neck cancer with a total of 30 attendees. According to the pre/post-tests, the presentation increased respondents’ knowledge about head and neck cancer. For example, when asked about how likely they were to notice the signs of head and neck cancer, 45% were very or somewhat likely to notice on the pre-test compared to 93% on the post-test.

One of our additional objectives was to address the lung cancer burden through our Community Tobacco Treatment Program. Two 5-week virtual sessions of this program were implemented in FY21. Seven people completed the program and six of the seven participants (86%) decreased the number of cigarettes they smoked.

Conclusions: We have been successful in continuing to implement our employee wellness/screening initiative and also the Community Tobacco Treatment Program.

Next Steps: We intend to continue our employee wellness/screening initiative. In FY22, we will add gynecological screening to the initiative. Currently, promotional and educational materials are being developed. Education will be conducted on cervical cancer in FY22. We will also continue to promote the screenings available to employees, with an emphasis on mammography in October during breast cancer awareness month, lung cancer screening in November for lung cancer awareness month, and colorectal cancer screening in March for that awareness month.

Due to the ongoing COVID-19 pandemic, planning is underway to run the Community Tobacco Treatment Program as a virtual program again in FY22. We plan to offer the program in this format at least once during FY22.
STRATEGY TEAM LEAD: Project Manager, Resource & Education Center, FCCC - Nina F. Galpern, MS

GOAL OF THE STRATEGY: To address mental health concerns among caregivers through in-person support groups and a telephone-based patient to patient network.

SUMMARY OF THE METHODS/TACTICS IMPLEMENTED: The Community Health Needs Assessment (CHNA) identified caregiver burnout as a mental health issue in our community. In response to this identified need, we established a Caregiver Network modeled after our Patient to Patient Network, this program is a telephone-based support program that connects trained caregivers to new caregivers. The extension of the program will allow caregivers to undergo volunteer training and then be matched with other caregivers for telephone support. In addition to our current caregiver support group, other support groups have been opened to the community that may need additional assistance supporting their loved one through cancer.

OUTCOMES: The new Caregiver Network was launched in February 2020. Since its launch, sixteen volunteers applied and were interviewed to participate. Twelve of these applicants were trained to be matched with a participant. There were 11 caregivers that requested to be matched with volunteers. One of the caregivers completed an evaluation survey and indicated that they were somewhat satisfied with program, the volunteer was somewhat helpful, and they would recommend the program to others.

Since early March 2020, all in-person support groups had to be halted due to the COVID-19 pandemic. Several support groups started back up in a virtual manner, and approximately 21 community members/caregivers have attended these support groups. The caregiver focused support group has not been running since February 2020.

CONCLUSIONS: The launch of the Caregiver Network is providing an important form of support for caregivers. In addition, we have been successful in opening support groups to caregivers and the community. Due to COVID-19 restrictions, these programs have been virtual.

NEXT STEPS: We will continue to enhance our caregiver programs for FY22.
PLAN TO PREVENT PRESCRIPTION DRUG ABUSE

Strategy Team Lead: Chief Medical Officer, FCCC - James Helstrom, MD, MBA

Goal of the Strategy: To address the opioid crisis by educating patients and family members about proper usage of opioids in cancer care.

Summary of the Methods/Tactics Implemented: The Community Health Needs Assessment (CHNA) identified substance use as a top community issue. To meet this need, Fox Chase Cancer Center (FCCC) established a hospital-wide education campaign to educate patients and family members about the use of opioids in cancer care. With this new initiative, patients receive education via video and written materials about the proper use of opioids. In addition, providers are prescribing less opioids in an effort to reduce the quantity these medicines are prescribed to opioid naïve surgical patients. The program also educates and informs patients that they can return unwanted/unfinished prescriptions to the FCCC outpatient pharmacy when they come for follow-up appointments.

Outcomes:
During this fiscal year, the Opioid Stewardship Committee maintained processes and triggers within EPIC to support identifying and tracking patients after surgery. These process include:

- Updated opioid prescription wallet cards showing recommended quantity and distributed to physicians
- Planning a risk assessment tool to screen for opioid dependent patients and at-risk patients
- Maintained a Prescription Drug Monitoring Program (PDMP) website context in EPIC to facilitate provider access and use of the PDMP website.
- Converted chart abstraction process to EPIC instead of manual process.
- Tracked patients scheduled for elective surgeries going through our Pre-Anesthesia Testing (PAT) Department as opioid naïve vs chronic/ current use to help facilitate appropriate prescription amounts.
- Provided a safe disposal site for patients with excess opioids to limit the number of pills available for diversion.
- Maintained the Opioid Initiative Summary monthly dashboard tracking compliance in alignment to the prescription guidelines. This data has demonstrated adherence to prescribing guidelines and reduced quantity of opioids prescribed to patients.

The Committee also educated patients of the potential risks and appropriate use of pain control medication. Patient education materials include:

- Patient education video that is played during pre-operative testing. The use of this video was limited this fiscal year due to the COVID-19 pandemic. Initially surgeries were put on hold. When they resumed, FCCC was unable to have patients share an iPad to watch the video for sanitary purposes. The program has recently implemented the ability for patients to scan a QR code, watch the video on their device, and then take an evaluation. This will improve usage of the video in the next fiscal year.
- Opioid education/ pain control insert in the surgical booklet that is distributed to all inpatient surgical patients.
- Revamped outpatient discharge instructions to include clear plans for pain management and use of non-opioid analgesia.
“The American College of Surgeons (ACS) Pain after Surgery” booklet was being distributed in all clinics and waiting areas, however this was halted due to COVID. Recently, FCCC has been able to display materials in waiting areas again and these materials will be put back out.

Considering implementing patient education materials that have been developed and used at Temple

Conclusions: We were able to successfully complete many aspects of the program, while some are still on-going. The Opioid Initiative Summary monthly dashboard has been in place since Sept 2019 and monitors compliance of screening patients, compliance to the recommended dosages, and refills prescribed. The patient education video was temporarily halted, but is resuming use by allowing patients to view the video on their own devices. Views and survey responses are being tracked on a monthly basis. The opioid education insert and ACS booklets are available for inpatients and outpatients in the surgery department. The PDMP context has been created in EPIC and the PAT staff has been documenting a patient’s opioid exposure at the time of the PAT appointment in their EPIC note since June 2019. A safe disposal box for any excess medication has been installed in our outpatient pharmacy.

Next Steps: We will continue to enhance our opioid prevention programs for FY22. We will continue to track compliance for naïve patients and move to develop processes for exposed patients using a similar process approach and dashboard for tracking compliance.