



**FY'18 COMMUNITY BENEFITS REPORT**

**March 29<sup>th</sup>, 2019**

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**DANA-FARBER CANCER INSTITUTE**

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## I. ABOUT DANA-FARBER CANCER INSTITUTE

Since its founding in 1947, Dana-Farber Cancer Institute (Dana-Farber) has been committed to providing those afflicted with cancer with the best treatment available while simultaneously developing tomorrow's cures through cutting-edge research. The Institute's mission is to provide expert, compassionate care to children and adults while advancing the understanding, diagnosis, treatment, cure, and prevention of cancer and related diseases.

Dana-Farber is internationally renowned for its blending of research and clinical excellence, bringing novel therapies that prove beneficial and safe in the laboratory setting into clinical use as rapidly as possible for our patients. As an affiliate of Harvard Medical School and a Comprehensive Cancer Center designated by the National Cancer Institute, the Institute provides training for new generations of physicians and scientists, designs programs that promote public health particularly among high-risk and underserved populations and disseminates innovative patient therapies and scientific discoveries to our target community across the United States and throughout the world.

Notably, Dana-Farber embraces the "total patient care" philosophy of its founder, Dr. Sidney Farber, ensuring that patients' psychological, family, and spiritual needs, as well as their medical needs, are met before, during, and after treatment. Its equal commitment to research and patient care is unique among cancer institutions, and this 50-50 balance results in extraordinary partnerships between laboratory scientists and clinicians. Reinforcing this exceptional model, Dana-Farber has been ranked the #1 cancer hospital in New England by *U.S. News and World Report* for 17 consecutive years and is the only cancer center in the country ranked in the top 4 for both adult and pediatric cancer programs.

In addition to providing expert clinical care, Dana-Farber is committed to educating the community and raising awareness about the importance of cancer prevention, outreach, screening, early detection, and clinical trials. To this end, Dana-Farber's Community Benefits Office provides education and screening for breast, cervical, and skin cancer throughout the greater Boston area; offers a variety of support services and resources to reduce access barriers to healthcare; and conducts a broad scope of evidence-based programs through its collaborative work in local, low-income neighborhoods throughout greater Boston.

## **II. COMMUNITY BENEFITS MISSION STATEMENT**

In 1995, the Dana-Farber Cancer Institute Board of Trustees formally adopted a Community Benefits Mission Statement. This mission statement affirms the Institute's commitment to support community-based programs, participate in outreach activities aimed at the reduction of cancer incidence, morbidity and mortality, and conduct community-based research.

Dana-Farber Cancer Institute's community outreach mission contributes to the Institute's goal of advancing the understanding, diagnosis, care, treatment, cure, and prevention of cancer and related diseases by:

- Ensuring that patients from diverse backgrounds receive equitable cancer care and treatment, including but not limited to, education about the importance of clinical trials participation.
- Establishing quantifiable, evidence-based, and sustainable programs in cancer prevention focusing on at-risk, underserved and diverse populations.
- Providing expertise in cancer care to city and state health departments, community-based agencies and health care providers.

Updated: July 2009

Revised: January 1996

Approved: September 1995

### III. COMMUNITY BENEFITS PLANNING MECHANISMS

The Dana-Farber Cancer Institute's **Board of Trustees Community Programs Committee** oversees the development and implementation of Dana-Farber's Community Benefits Plan. In their oversight capacity, Committee members provide the hospital's Community Benefits staff with guidance and leadership around program initiatives and monitor the completion of the Community Health Needs Assessment ("CHNA") and Community Health Implementation Plan ("CHIP"). Additionally, the Committee provides oversight to the hospital's DoN Advisory Committee.

**Dana-Farber Cancer Institute's Determination of Need (DoN) Advisory Committee** (formerly the Community Benefits External Advisory Committee) was established in 1997 and consists of representatives from various constituencies who share DFCI's commitment to reducing disparities in cancer care, education, treatment and the social determinants of health. The DoN Advisory Committee is responsible for overseeing the development and implementation of specific Community Benefits initiatives, including all Community Health Initiatives ("CHI") associated with Notices of Determination of Need, as well as other specific Community Benefits programs.

The **Dana-Farber Community Benefits Internal Advisory Committee** provides input and shares responsibility for the implementation of key initiatives in the overall Community Benefits Plan.

Dana-Farber Community Benefits staff also participate in community outreach and planning activities with the following organizations:

**Massachusetts Department of Public Health (MDPH):** Through ongoing partnerships with MDPH's Chronic Disease Prevention and Control Unit, programs in colorectal, prostate, skin and women's cancers have been established with MDPH and other community agencies across the Commonwealth.

**Massachusetts Comprehensive Cancer Prevention and Control Network (MCCPCN):** Dana-Farber continues its leadership role as a member of the MCCPCN and has continued to identify cancer control priorities and opportunities for greatest impact in addressing cancer incidence, morbidity, mortality and survivorship.

**Boston Public Health Commission (BPHC):** Dana-Farber works closely with the BPHC to implement and sustain initiatives that address the need for cancer prevention education, screening services, and survivorship education. BPHC is also an active member of Dana-Farber's DoN Advisory Committee and plays a key leadership role as the co-convener of the Boston Breast Cancer Equity Coalition.

**The Conference of Boston Teaching Hospitals (COBTH):** Dana-Farber is an active member of COBTH, a coalition of thirteen Boston-area teaching hospitals who collaborate on community outreach and planning activities. Through the shared efforts of the COBTH Community Benefits Committee, a series of neighborhood-level meetings and focus groups were held as part of Dana-

Farber's 2016-2019 Community Health Needs Assessment (CHNA) process. Dana-Farber also serves on the Steering Committee for the Boston CHNA/CHIP Collaborative and co-chairs the Community Engagement Work Group in collaboration with BPHC. This group was launched by COBTH in September 2018 and will conduct the first citywide needs assessment and improvement plan for FY2019 – FY2022.

**Boston Breast Cancer Equity Coalition:** Launched in 2014, this cross-sector coalition seeks to eliminate the differences in breast cancer care and outcomes by promoting equity and excellence in care among women of all racial/ethnic groups in the City of Boston.

**Boston Alliance for Community Health (BACH):** As a steering committee member of BACH, Dana-Farber continues to work alongside fellow health care institutions, neighborhood coalitions and community development corporations to address the racial and ethnic disparities in health that exist in Boston and throughout the region.

**Madison Park Development Corporation (MPDC):** Dana-Farber has a longstanding history of collaboration with MPDC and continues to partner with MPDC to support health equity and wellness initiatives, including providing health and wellness programming to MPDC residents.

**Massachusetts Coalition for HPV and Related Cancer Awareness:** Dana-Farber continues to serve on the steering committee of the Coalition, with the goal of increasing HPV knowledge and vaccination rates to reach the Healthy People 2020 goal of 80% vaccination among eligible youth regardless of race/ethnicity or socioeconomic status.

**Boston Public Schools Health and Wellness Department:** Dana-Farber partnered with Boston Public Schools to provide education about HPV and cancer prevention to youth, parents, and clinical staff.

**Tobacco Free Mass Coalition:** As a member of the Tobacco Free Mass Coalition, Dana-Farber supports the development of policies that aim to reduce youth access to tobacco, prevent nicotine addiction, and increase tobacco control funding.

**Dana-Farber's Center for Community-Based Research (CCBR):** CCBR conducts cancer prevention research with the goal of developing effective intervention strategies to reduce the risk of cancer. CCBR works extensively with neighborhood health centers, low-income housing, faith-based organizations, health departments and community-based organizations.

**Dana-Farber/Harvard Cancer Center (DF/HCC):** Dana-Farber and the DF/HCC continue to collaborate and develop programming in a variety of areas aimed at reducing the unequal burden of cancer in partnership with the Faith-Based Cancer Disparities Network and other community-based organizations. Early in its history, the consortium created the Initiative to Eliminate Cancer Disparities (IECD) to maximize the acceptance and desirability of cancer research in communities that have traditionally experienced significant disparities in cancer care. The DF/HCC IECD is also the convener of the Patient Navigator Network (PNN).

**Prostate Health Education Network (PHEN):** Dana-Farber and PHEN partner on education, outreach and advocacy efforts and together sustain a prostate cancer support group for men of color that meets monthly at Dana-Farber.

To ensure **ADA compliance**, the Community Benefits Office is committed to providing access to all individuals interested in attending cancer education programs and makes every reasonable effort to accommodate all participants.

#### **IV. 2016-2019 COMMUNITY HEALTH NEEDS ASSESSMENT & IMPLEMENTATION PLAN**

In 2016, Dana-Farber's Board of Trustees approved the 2016-2019 Community Health Needs Assessment and Implementation Plan to ensure that our collective efforts have the maximum possible impact within the Institute's priority neighborhoods. Dana-Farber's Community Benefits Office retained Health Resources in Action (HRiA), a non-profit public health consultancy organization in Boston, to undertake a comprehensive assessment of the health needs within our priority communities, including how those needs are currently being addressed and where there are opportunities to address these needs in the future.

The 2016 CHNA builds off previous efforts to gain a greater understanding of the health issues facing Boston residents across the cancer spectrum in the neighborhoods of Dorchester, Roxbury, Mission Hill, Jamaica Plain, and Mattapan. In addition to identifying broad health issues facing residents, the 2016 CHNA delves into behaviors and health outcomes across the cancer continuum of care, exploring behaviors and health outcomes around prevention, screening, treatment/health care utilization, and survivorship using social determinants of health and health equity frameworks.

This effort not only complies with the IRS CHNA requirement under the Internal Revenue Code Section 501 (r) (3) (A) (iii) and the Massachusetts Attorney General's mandates for conducting community health needs assessments but aligns with Dana-Farber's approach of utilizing data to inform the development of its initiatives and strengthen collaborative partnerships.

The CHNA findings have validated the current community outreach work that Dana-Farber has undertaken as well as helped guide the focus of future initiatives. The following list highlights Dana-Farber's prioritized areas of focus in addressing the identified community health needs.

- 1) **Cancer Burden:** There is a disproportionately greater cancer incidence and mortality in our priority neighborhoods, particularly among racially/ethnically diverse populations. Specifically, the CHNA findings reflect a disparity in cancer mortality between Black and White residents in the City of Boston. For example, Black women in Boston experienced a 23% higher breast cancer mortality compared to White women between 2001-2012, despite a lower incidence rate among Black women. During the same period, the data also reflects that Black women were more likely to die at a younger age from breast cancer compared to White women. Similar patterns persist for other major cancers such as prostate cancer, with the mortality rate for Black men in Boston being nearly three times the mortality rate of White men. However, the data show that cancer screening rates are high in many of Dana-Farber's priority neighborhoods, even among racial/ethnic groups that have higher mortality rates. The broader cancer literature indicates that the disparity in mortality can likely be attributed to a multitude of factors including the fact that Blacks are more likely to have co-morbid conditions that complicate cancer treatment, are diagnosed at later or at more invasive stages of disease, and/or face disproportionate barriers to care due to lower socioeconomic status, discrimination, or cultural factors.



- 2) **Access Barriers:** Residents of Dana-Farber’s priority communities deal with significant challenges beyond coverage when encountering health care systems. 2016 CHNA participants stated that while most community members have access to health insurance, many do not understand the details of coverage, deductibles, provider network participation, and cost-sharing. In addition, residents reported confusion about changes to cancer screening guidelines, specifically in prostate and breast cancer screening. Considered through a health equity lens, these challenges are associated with a higher risk in cancer incidence and mortality among communities of color. Patient navigator programs and social workers were identified by residents as key resources that are vital to connecting patients to resources and providing support throughout the cancer journey.
- 3) **Cancer Survivorship:** Cancer survivors were generally optimistic about their health and future and were eager to be engaged in future community efforts around survivorship, but also acknowledged that there continue to be many challenges facing cancer survivors. For example, participants articulated a clear need for additional support services for cancer survivors and their families, particularly survivor-specific services in languages other than English. Residents specifically reported a need for more information on preventing cancer recurrence and rejoining the workforce after cancer treatment. In addition, the findings underscore the importance of better understanding the needs of cancer survivors from medically underserved communities, with the recognition that the survivorship model may be different for members of vulnerable communities.
- 4) **Community Perceptions of Cancer:** When prompted, community members expressed significant fear surrounding the risk of cancer diagnosis, but also acknowledged the broader context of social issues that create more pressing day-to-day concerns. The CHNA findings reflect that community residents share common experiences of hardship, including poverty, unemployment, and violence and often perceive a strong correlation between cancer and death rather than survivorship.
- 5) **Community Strengths:** While residents living in Dana-Farber’s priority neighborhoods face significant socioeconomic challenges, these communities possess numerous assets and strengths including strong neighborhood cohesion, faith-based networks, diversity, community resilience, and numerous community-based organizations/resources.
- 6) **Social and Environmental Determinants of Health & Primary Prevention:** Dana-Farber’s priority neighborhoods are dealing disproportionately with challenging situations related to the upstream social and economic factors that impact health such as limited employment opportunities, substance abuse and opioid addiction, lack of affordable housing, and community violence, among others. Obesity and concerns related to maintaining a healthy lifestyle also emerged as key challenges, particularly among Black and Latino residents. Smoke-free policy initiatives were mentioned as an effort to improve environmental conditions, but according to participants, secondhand smoke is still a major problem in their communities. Dana-Farber will continue to partner with community organizations to address broader issues that go beyond cancer care, such as those related to healthy eating and physical activity, community strengths, and the social determinants of health.

## V. COMMUNITY BENEFITS PROGRAMS

### A. Education, Outreach, Screening and Advocacy

Community outreach at Dana-Farber focuses on increasing awareness about the importance of cancer prevention, outreach, screening, early detection and clinical trials education. Examples of prevention programs are:

#### 1. Dana-Farber's Mammography Van (DFMV)

Dana-Farber's Mammography Van was launched as a joint venture between the City of Boston and Dana-Farber in April 2002. The DFMV continues to be the only mobile mammography program in the Commonwealth of Massachusetts. It provides digital screening mammograms and breast health education to women 40 years of age and older. Ultimately, it aims to decrease breast cancer morbidity and mortality among medically underserved women and increase survival rates for those diagnosed with breast cancer.

Priority populations include women who are low-income, elderly, immigrants, non-English speaking, people of color, and other minority backgrounds. Priority neighborhoods in Boston include Roxbury, Jamaica Plain, Dorchester and Mission Hill. In partnership with 22 community-based organizations and neighborhood health centers, such as The Dimock Center and Charles River Community Health, the Van is on the road three days per week year-round.

Offering digital screening mammograms on the van provides an entry point into the larger health care system. Women who lack a primary care provider are referred to one of our partner neighborhood health centers for assistance in acquiring health services, including health insurance enrollment and an appointment with a primary care provider, as well as a referral for follow-up care if an abnormality is identified. The DFMV provides an effective way for women to continually monitor their breast health and to stay connected to the health care system at large.

**Breast Health Education and Outreach:** Individual education at mammography screening sites has been shown to improve adherence to annual screening. To that end, the DFMV Program employs a bi-lingual (English and Spanish) breast health educator who is available on site to provide information and answer questions about early detection, healthy lifestyle choices to reduce cancer risk, and timely follow-up. Additionally, the educator helps to increase awareness of the DFMV in the community by working with current and potential community partners to provide residents with breast health information and mammography referrals at health fairs and educational workshops. In addition, the educator oversees the text messaging appointment reminder system that seeks to reduce the no-show rate of DFMV patients and is an active member of the Boston Breast Cancer Equity Coalition and Cancer Advisory Group of the Boston Public Health Commission.

To increase the reach and effectiveness of the Breast Health Education and Outreach Program, a lay breast health advisor (LHA) curriculum and training program was piloted in FY17 and continues in its second year of implementation. Through this program, community members are trained by the breast health educator as LHAs, with a focus on breast cancer, screening

guidelines, and health promotion and outreach strategies. LHAs are engaged through continuous learning opportunities and invitations to participate in community outreach activities with the breast health educator. Since many LHAs reside in our priority neighborhoods, they also help the Community Benefits Office to identify communities and organizations that would benefit from our programs.

### **FY18 HIGHLIGHTS**

- In FY18, 1,066 individuals received breast health education on the DFMV or at a community outreach event.
- The breast health educator staffed 29 van days, 11 health fairs, 8 workshops, and 4 other partnership events.
- 20 women were referred for screening mammograms as a result of community outreach and education efforts.
- A total of 54 community members have been trained as LHAs since the start of the program. In FY18, LHAs participated in a total of 12 community education and outreach events with the breast health educator.

### **FY18 VAN HIGHLIGHTS**

- **Patient Volume:** In FY18, Dana-Farber’s Mammography Van provided 1,677 mammograms. Since program inception in April 2002, Dana-Farber’s Mammography Van has provided more than 47,000 mammograms to more than 20,000 unique patients.
- **Race/Ethnicity:** The largest racial and ethnic groups seen on the van in FY18 were Black and White women. Of all van patients with complete self-reported race/ethnicity data available (72.84%), 22.14% self-identified as being Black, 21.65% as White, 14.26% as Other, 10.2% as Hispanic/Latino, and 4.24% as Asian.
- **Primary Language:** Over the past year, 50.9% of van patients spoke a first language other than English. In FY18, Dana-Farber’s Mammography Van patients self-reported a total of 26 different languages. The top five primary languages after English (49.1%) were Spanish (26.8%), Portuguese Creole (9.8%), Portuguese (3.5%), Vietnamese (2.0%), and Haitian Creole (1.6%).
- **Boston Residence:** 43.12% of van patients hail from Boston and 56.88% from the rest of Massachusetts. The Boston neighborhoods represented include Dorchester, Mattapan, Roxbury, Allston, and Jamaica Plain.
- **Breast Cancer Diagnoses:** 148 breast cancer diagnoses have been confirmed for patients originally screened on Dana-Farber’s Mammography Van since the program’s inception. For every 1,000 mammograms conducted on the van, approximately three women are diagnosed with breast cancer (0.3% diagnosed).
- **Re- screening Rates:** 59.4% of patients screened on the van were returnees from prior years; 27.0% of van patients returned for re-screening in a “timely” manner (10-18 months from last screen).
- **Baseline Mammograms:** 11.3% of van patients served this year had their baseline (first-ever) mammograms on the van.
- **Follow-Up Rate:** 214 patients (12.76%) screened on the van in the past year received a recommendation for follow-up.

- **Insurance Status:** Over the past year, the insurance status of van patients was 70.5% publicly insured (Medicare, MassHealth, Health Safety Net, etc.) and 29.4% privately insured.

**Dana-Farber Cancer Institute at Whittier Street Health Center Mammography Suite:**

Building on their shared commitment to caring for community residents, Dana-Farber opened a mammography suite within the Whittier Street Health Center, located in Boston's Roxbury neighborhood in 2013. Open to all residents, the mammography suite, which is situated on the clinic's first floor, is staffed with skilled, registered mammography technologists and additional members of the care team focused on reducing health care disparities. The suite uses digital mammography imaging, which is interpreted by board-certified radiologists with extensive experience in mammography.

**FY18 MAMMOGRAPHY SUITE HIGHLIGHTS**

- **Patient Volume:** In FY18 the mammography suite provided 623 mammograms to women. Since program inception in October 2013, the mammography suite has provided more than 3,500 mammograms to more than 2,000 unique patients.
- **Breast Cancer Diagnoses:** For every 1,000 mammograms conducted at the suite, approximately three women are diagnosed with breast cancer (0.36%) Thirteen breast cancer diagnoses have been confirmed for patients originally screened at the mammography suite since program inception.
- **Re-screening rates:** 62.7% of patients screened at the suite were returnees from prior years; 36.3% of suite patients returned for re-screening within 10-18 months from the last screening appointment.
- **Baseline Mammograms:** 9.6% of suite patients served this year received their baseline (first ever) mammogram at the suite.
- **Follow-up Rate:** 13.96%, or 87 patients screened at the suite this past year received a recommendation for follow-up.

## **2. HPV and Associated Cancers Outreach Program**

The HPV and Associated Cancers Outreach Program continues to focus on increasing awareness about the importance of HPV vaccination to improve rates of HPV vaccination in Massachusetts. Dana-Farber's HPV and Cancer Prevention Curriculum provides medically accurate and culturally sensitive information that youth and parents need to make informed health decisions regarding the HPV vaccine. The educational curriculum is delivered by Dana-Farber Community Benefits and Pediatric Oncology staff to youth, parents of vaccine-eligible youth, and a variety of health professionals in a workshop format. The curriculum has been evaluated by Dana-Farber's Center for Community-Based Research and is proven to increase knowledge about HPV and cancer prevention, intentions to vaccinate against HPV, and confidence in communicating about the topic.

In FY18, Dana-Farber partnered with Boston Public Schools' (BPS) Health and Wellness Department and Peer Health Exchange (PHE) to provide education about HPV and cancer prevention to students, parents, and clinical staff. During FY18, Community Benefits staff worked with BPS and PHE to integrate and deliver educational workshops to students at multiple Boston Public Schools. Outreach was also provided at a Parent University Workshop hosted by BPS and the Boston Teacher's Union School Health Fair. Community Benefits staff also provided education about HPV and cancer prevention at a Professional Development Session for school-based nurses.

During FY18, outreach and education around HPV and cancer prevention was also conducted at health fairs and conferences, including the 5<sup>th</sup> Annual HPV-Related Cancer Summit, titled Moving the Needle: A Coalition in Action from Bench to Bedside. The Summit was hosted at Dana-Farber in collaboration with the Massachusetts Coalition for HPV-Related Cancer Awareness. The goal of these dissemination efforts was to increase awareness among clinicians, researchers, and other public health professionals about the efforts being made to increase vaccination.

### **FY18 HIGHLIGHTS**

- 416 students were educated about HPV and cancer prevention through educational workshops.
- 39 adults received education about HPV and cancer prevention at community outreach events.
- 18 school-based nurses were educated about HPV and cancer prevention at a Professional Development Session for school-based providers at Boston Public Schools.
- The 5<sup>th</sup> Annual HPV-Related Cancer Summit drew approximately 82 medical and dental providers, public health professionals, policymakers, and advocates. Over half of those in attendance were nurse practitioners.

### **3. Sun Safety Education and Screening Program**

The Sun Safety Education and Screening Program is a comprehensive initiative that provides free skin cancer prevention education and screening to community residents and those at highest risk for skin cancer. The purpose of this program is to reduce the incidence and prevalence of skin cancer, one of the most common forms of cancer. The American Academy of Dermatology estimates that one in five Americans will develop skin cancer in their lifetime.

#### **Sun Safety Education:**

The program utilizes an evidence-based curriculum developed by the Dana-Farber Center for Community-Based Research, which includes an informative quiz and biometric demonstrations of skin damage resulting from unprotected sun exposure. Some of our partners this past year included:

- IMPACT Melanoma (Melanoma Foundation of New England)
- Judge Baker Children's Center
- United States Postal Service
- Waltham High School
- Inquilinos Boricuas en Acción
- Salem State University
- Massachusetts Department of Conservation and Recreation

#### **Skin Cancer Screening:**

Free skin cancer screenings are provided aboard the Blum Van along with nine board-certified dermatologists from the Brigham and Women's Hospital Dermatology Department. The Blum van is a 39-foot mobile clinic which contains a 15-person classroom and an exam room for screenings and private consultations. When clinically appropriate, dermatologists make biopsy recommendations related to presumptive diagnosis of different skin cancers, including basal cell carcinoma, squamous cell carcinoma, and melanoma. Sun safety program staff emphasizes the importance of additional follow-up for suspected abnormalities and spots of concern. Participants seen aboard the Blum Van are prioritized when scheduling an appointment at Brigham and Women's Hospital dermatology department.

During the summer, the Skin Cancer Screening Program provided services at five local beaches: Nantasket Beach, Carson Beach, Revere Beach, Nahant Beach, and Wollaston Beach. The target population at these events includes beach goers, lifeguards, outdoor parks and recreation workers, and community residents.

#### **FY18 HIGHLIGHTS**

- In FY18, a total of 24 Sun Safety education and/or screening events were held.
- 1,417 community members were reached through education and screening events, with an average of 59 participants per event.

- 750 participants were screened by a dermatologist and 145 people were referred for follow-up appointments.
- 71 participants were referred for a biopsy. The majority of biopsy recommendations were due to a presumptive diagnosis of basal cell carcinoma, squamous cell carcinoma or melanoma.

#### **4. Tobacco Treatment Program at Whittier Street Health Center**

Smoking is the most preventable cause of death and disease in the United States and is responsible for 480,000 deaths each year. The Tobacco Treatment Program provides individual tobacco treatment counseling to patients of Whittier Street Health Center (WSHC) in Roxbury, a diverse and medically complex patient population which includes many patients living with poverty, mental health issues, substance abuse, and multiple chronic illnesses. The program aims to reduce the risk of many cancers associated with tobacco use, including lung, mouth, throat, bladder, pancreas, cervix, and colon cancers.

Through Dana-Farber's partnership with WSHC, patients are referred by their primary care provider to the Tobacco Treatment Program, which provides support to patients in their tobacco treatment efforts as well as assisting them in reducing their exposures to smoking environments (e.g. second or third-hand smoke). Upon receipt of each referral, the tobacco treatment counselor attempts to contact the patient to offer tobacco cessation support. Patients who elect to participate in the program receive individual counseling, which can be provided in English or Spanish. Patients participating in the program receive information regarding the harms of tobacco use, the benefits of quitting, and the health impacts linked to tobacco use and cancers. The tobacco treatment counselor also provides follow-up support to patients who are ready to pursue tobacco cessation treatment and communicates with referring providers to request prescriptions for nicotine replacement therapy and other tobacco cessation medications. The tobacco treatment counselor and WSHC staff also collaborate to provide group education sessions on tobacco use to encourage participants to talk to their health care provider about quitting.

#### **FY18 HIGHLIGHTS**

- In FY18, the Tobacco Treatment Program received 306 referrals and provided a total of 172 individual tobacco cessation counseling sessions to 56 patients.
- 45 participants were able to reduce their total number of cigarettes smoked per day, and 19 of these reported being able to quit completely.



## **Community Outreach and Partnerships**

Dana-Farber's Community Benefits work is conducted through collaboration with internal departments and numerous community partners, including Boston Public Schools, community health centers, Madison Park Development Corporation, and other community-serving agencies. Through this collaborative approach, Dana-Farber provides community outreach and education about cancer prevention, screening, early detection and survivorship to residents in Boston's surrounding neighborhoods, reaching high-risk and medically underserved individuals in our communities.

Dana-Farber also works closely with community partners to address broader issues that go beyond the cancer continuum, such as healthy eating and physical activity, through collaboration on partnership initiatives. For example, Dana-Farber provides health and wellness programming to residents of Madison Park Development Corporation and supports MPDC's health equity and wellness initiatives.

### **FY18 HIGHLIGHTS**

- In FY18, a total of 3,254 individuals were reached overall through 147 community education, outreach and screening events.
- DFCI implemented Year 2 of 3-year partnership with Madison Park Development Corporation (MPDC) and piloted breast health education at Roxbury Tenants of Harvard in collaboration with Asian Women for Health.
- Collaborated on a total of 8 partnership events at MPDC, including 4 community workshops and 4 outreach events/health fairs, reaching over 144 residents.
- Piloted healthy cooking demonstrations at MPDC in collaboration with Daily Table, Community Servings, and the American Heart Association.

## **B. Cancer Care Equity Program**

The Cancer Care Equity Program (CCEP) was established in January 2012 to act as a bridge between research and outreach efforts addressing cancer disparities at Dana-Farber. The CCEP aims to broaden access to vulnerable patient populations and join our community partners in the quest for equitable care across the spectrum of cancer-related disease. To this end, the role of the CCEP is to:

- Improve local outcomes via clinical access to the spectrum of preventive medicine, treatment, and access to clinical trials for medically underserved populations;
- Unite disparities-related research across Dana-Farber;
- Initiate and facilitate research in cancer disparities;
- Support established outreach and educational programs.

### **Objectives of the CCEP Clinical Outreach Program**

**Decrease wait times for diagnosis and treatment of cancer for vulnerable patient populations:** Through Dana-Farber's Community Cancer Care Clinic, three Medical Oncology clinicians, a geneticist, a genetic counselor, and a program nurse navigator provide consultations in collaboration with primary care physicians at Whittier Street Health Center (WSHC) in Roxbury, MA. The physicians attend clinic at WSHC, perform consultations, and aid in diagnosis and work-up of suspected oncologic issues. Patients diagnosed with cancer are referred to Dana-Farber for potential treatment and diagnostic procedures. Imaging is performed at Dana-Farber and Brigham and Women's Hospital (DF/BWH), and patient navigation services are provided to each patient to ensure seamless coordination of care.

**Increase awareness and knowledge of cancer prevention and treatment within vulnerable communities:** In collaboration with WSHC's outreach team, Dana-Farber staff provides educational lectures to patients, staff, and the community at large. These lectures focus on prevention, treatment, survivorship, and clinical trials. Our staff also participates in lectures for other WSHC programs such as the Men's Health and Women's Health Programs.

**Foster trust with providers and patients from vulnerable communities:** Dana-Farber has had a long-standing relationship with WSHC and has established survivorship clinics and cancer prevention-related outreach programs. By directly involving and encouraging patient-centered collaborations between oncologists and primary care clinicians, Dana-Farber Community Cancer Care is establishing trust and a high level of comfort that reflects a commitment to treatment equity.

**Create a research cohort of patients referred via the WSHC outreach program for observational and interventional studies:** All patients evaluated as part of the CCEP have the option of enrolling in a research cohort focused on the WSHC clinic. This allows for observational studies examining disease presentation and treatment responses, as well as qualitative and interventional studies. The formation of this unique research cohort is an important part of the clinical program and provides an opportunity to bring together investigators

across Dana-Farber who share an interest in disparities. Clinical trial investigators, community-based researchers, and laboratory-based researchers are encouraged to consult the CCEP for questions about this research cohort. A total of 386 patients have consented to enroll in the cohort since 2012, representing nearly 90% of all patients informed of the study to date (n =432). A subset of these patients also enrolled in a separate Dana-Farber study that examined patient/caregiver and provider preferences to improve symptom management and quality of life among cancer patients.

**Increase enrollment in clinical trials:** Education regarding the concept of clinical trials is provided to all patients seen at Dana-Farber through the CCEP program. By increasing access to Dana-Farber and improving relationships with the community and providers, the program is designed to remove some of the structural barriers to clinical trial enrollment for vulnerable patient populations. The program also evaluates barriers to clinical trial entry and work is being done to differentiate systems-level barriers from patient-level barriers. Since 2012, 23% of WSHC patients with cancer diagnoses have been enrolled in clinical trials at Dana-Farber.

**Create a model for addressing the health disparities gap in cancer care:** A key objective for the CCEP is to create a national model for addressing health disparities gaps in cancer care. One of the program's goals is to develop a support program to aid organizations who wish to develop similar programs once improvement in outcomes for patients can be demonstrated.

## FY18 HIGHLIGHTS

- Since the program's inception, the program has seen 508 patients as new consults and 384 patients in follow-up visits. These patients have a wide range of diagnoses and have been referred to disease centers and specialty clinics within the Dana-Farber and Brigham & Women's Hospital (BWH).
- In FY18, 42 new patient consults and 15 follow-up visits were performed.
- In FY18, the median number of days from initial appointment to diagnostic resolution for patients seen at the WSHC clinic was 13 days for patients with a cancer diagnosis, which exceeds the goal of 21 days to resolution set at the program's launch.
- To date, the highest volume of referrals from WSHC's primary care providers are patients with a family history of cancer. An oncology geneticist and genetic counselor provide special genetic evaluation clinics every three months with immediate, on-site genetic testing if warranted.
- Dana-Farber continues to partner with Whittier Street Health Center's dental department to evaluate patients with suspicious lesions or other concerning dental issues. In FY18, doctors from BWH's Department of Dentistry and Oral Medicine also educated the dental team on the link between HPV infections and head and neck cancers as well as related screening approaches.
- The lung cancer screening program that was started in 2014 at Whittier Street Health Center to provide free low-dose chest CT scans for patients who are at greater risk for lung cancer continues in its fourth year. Patients screened for lung cancer are automatically connected to Dana-Farber's tobacco treatment program to encourage smoking cessation.
- The Community Health Educator (CHE) provided 72 culturally and linguistically appropriate community tobacco education workshops, 70 of which were provided to substance and

alcohol use patients in acute treatment and sober living facilities. Additionally, the CHE participated in two health fairs and three community meetings for affordable housing residents. The total number of participants reached by all outreach activities totaled over 1,250.

- **Dana-Farber Health Equity Reporting:** The CCEP is responsible for producing regular health equity reports of under-represented patients in adult and pediatric inpatient/outpatient oncology services at Dana-Farber, including clinical trials. The database was developed to link the established data systems at Dana-Farber and allow for one consistent report that includes data on race/ethnicity, language, and educational level.
- **CCEP/IECD Cancer Disparities Research Symposium:** In collaboration with the DF/HCC Initiative to Eliminate Cancer Disparities (IECD), the CCEP has continued hosting an annual Cancer Disparities Research Symposium. The 2018 symposium featured a keynote by Dr. Mack Roach, III, MD, FACR, FASTRO, entitled “Prostate Cancer Therapy: Implications in Vulnerable Communities.” Dr. Roach has been involved in pioneering work around the use of hormonal therapy, the implementation of new imaging modalities, PCa risk group stratification, and the role of pelvic nodal radiation.

## C. Center for Community-Based Research

Dana-Farber's Center for Community-Based Research (CCBR) conducts research aimed at cancer prevention and control, with a particular emphasis on the development, evaluation, and dissemination of effective interventions designed to modify behaviors, policies, and practices to reduce cancer risk. CCBR's public health approaches are an important complement to the clinical and basic research being conducted at Dana-Farber. This research program has a special focus on reducing racial/ethnic and socio-economic disparities across the cancer control continuum, from prevention to survivorship. CCBR interventions are evaluated in randomized controlled studies, with the intent that the tested models will ultimately be applied broadly through community and health organizations nationally.

CCBR faculty also focuses on research projects aimed at understanding health communication processes that contribute to reducing the burden of cancer across the cancer control continuum. Research projects focus on understanding the impact of mass-mediated and interpersonal communication on cancer prevention and control outcomes, patient-provider communication and active information seeking among cancer survivors; direct-to-consumer advertising of cancer treatments; emerging health information technology; and advertising of novel tobacco products. This research has elucidated associations between different forms of health communication and important population health outcomes, including surveillance adherence, preventive behaviors, and patient-reported measures of quality of life. These findings help guide future innovations in health communication interventions for cancer prevention and control.

### CURRENT RESEARCH PROJECTS

**Sodexo Project: Improving and protecting the health and well-being of low-wage workers** (Sorensen, 2016-2020): The objective of this project is to develop and test feasible intervention methods to modify the work organization and support reduced risk of musculoskeletal disorders and other outcomes critical to worker health, safety, and wellbeing among one group of low-wage workers: food service employees. We are in the intervention implementation phase. The intervention was informed by formative qualitative research conducted in the Greater Boston Area. We continue to collaborate with our industry partner, Sodexo, LLC, which has committed to making policy changes and supporting improvements in manager practices in concert with this study. By demonstrating feasibility and potential benefits of modifications in the work organization we can contribute to improved uptake of these policies and practices.

**Outreach to Address Cancer Disparities: Engaging Community Partners and Leveraging Evidence** (Viswanath and Ramanadhan 2016-2021): Outreach is an important component of a U54 partnership, and the efforts to translate the products of research for community benefit in a systematic manner will yield fruit over the long-term for cancer prevention and cancer disparities. The UMass Boston and Dana-Farber/Harvard Cancer Center U54 Partnership aims to (1) develop a Community Advisory Board (CAB) that includes representatives from community based organizations (CBOs) and faith-based organizations (FBOs) from communities in Greater Boston and Lawrence, MA; (2) conduct a needs assessment to assess interest in and capacity for disparities-focused cancer control activities; (3) build capacity among UMass Boston students to participate in outreach and community-based research efforts focused on cancer control; (4)

build capacity among CBO and FBO staff members to (a) use evidence-based programs (EBPs) for cancer prevention (b) conduct outreach to promote the National Cancer Institute National Outreach Network biobanking/biospecimens program, and (c) conduct outreach to promote HPV vaccination; and (5) develop and disseminate products that will synthesize and summarize the results from the U54 research projects to inform the activities of community partners working to address cancer disparities.

**Allies for Health: Adaptation of an evidence-based HPV prevention program for community- and faith-based organizations serving low socioeconomic status and racial/ethnic minority populations** (Ramanadhan 2017-2019). The purpose of this project is to develop and test a community-clinical partnership model to deliver Human Papilloma Virus (HPV) vaccination to adolescents aged 12-14, who are in the target age range, but have missed the recommended pediatric appointment to receive it. The innovation is to deliver HPV outreach and accompanying vaccination opportunities in settings that underserved adolescents and their caregivers access naturally and easily. The other innovation is to utilize non-physician staff, thereby shifting the task to less highly credentialed staff, a process known as task-shifting.

**Improving HPV testing and triage for cervical cancer in underserved women** (Viswanath and Kohler 2017-2019). The goal of the study is to determine the feasibility and acceptability of self-sampling instead of a traditional speculum exam for cervical cancer screening among homeless women in Boston. This pilot project is being conducted through a partnership with Boston Health Care for the Homeless Program (BHCHP). In addition to evaluating homeless women's acceptability of self-sampling, we are also assessing provider perspectives on the implications of implementing this new technology through shelter outreach programs and clinics serving socially vulnerable populations. This work is funded by a Dana-Farber/Harvard Cancer Center Pilot Nodal Award through February 2019. Our findings will inform clinical practice changes to be evaluated across the 60 Boston Health Care for the Homeless clinics.

**Project SNAP: Smartphone App for Public Health** (Viswanath 2015-2017): The objective of this project was to understand everyday exposure to tobacco messaging and the role smartphones may play in collecting rich data from participants, particularly low socioeconomic (SEP) population groups. Most studies that measure exposure to tobacco messages rely on information provided from participants that is reported days or weeks after they saw a message. This time gap may lead to inaccurate reporting such as forgotten details about message content or how often the message was seen. This study used Ecological Momentary Assessments (EMAs), or surveys sent frequently through the participants' phones, that can be answered in real-time as a message is seen. The use of EMAs greatly shortens the time between seeing a message and reporting it, which provides better, more accurate data. The study demonstrated the huge potential that using smartphones and EMAs has in tobacco use and tobacco message exposure research. Analyses are currently being planned to fully explore the information gathered from this project. Future studies could be scaled to address the problem of tobacco use among low SEP population groups.

**Project MassHINTS: The Massachusetts Catchment Area Supplement to the Health Information National Trends Survey** (Viswanath 2016-2017) Funded by a grant from the National Cancer Institute (NCI/NIH), the objective of this study was to expand the focus of the

Health Information National Trends Survey (HINTS) by collecting data relevant to cancer control from individuals across the state of Massachusetts. HINTS is a significant vehicle of national health communication surveillance, documenting the cancer communication behaviors of the American public and providing valuable data to inform cancer control. However, NCI has acknowledged the need for detailed data within particular catchment areas in order to inform both the cancer control efforts for regional or local cancer centers and to capture valuable information on the cancer communication and screening behaviors of different population subgroups. Responding to this, we conducted a two-pronged study combining internet-based (1,013 individuals) and community-based (498 individuals) samples drawn from the state of MA. The community-based sample focused on priority groups: African Americans, Latinos, low socioeconomic position (low SEP), blue collar workers and the homeless community, and was conducted through in-person interviews. The study indicated several differences across samples, with the community-based sample having a higher percentage of low SEP, low education, African Americans, and Latinos compared to the online sample. Differences were also noted in the cancer related behaviors of the samples, with the community-based sample having higher rates of smoking, particularly within those who were from the homeless community or made less than \$20,000 per year. Fewer community-based subgroups were current with cancer screenings, and more showed more indication of potential communication inequalities (in terms of accessing, processing and acting upon health information) compared to statewide estimates.

## D. NCI Sponsored Health Disparities Activities

**The Dana-Farber/Harvard Cancer Center (DF/HCC)** unites the cancer research efforts of all seven DF/HCC member institutions to advance DF/HCC's commitment to reducing cancer disparities in Massachusetts. Early in its history, the consortium decided that it could play a pivotal role in cancer outreach and, to that end, created the Initiative to Eliminate Cancer Disparities (IECD). The IECD has many facets, but one primary goal — to eliminate racial, ethnic, and socioeconomic disparities in cancer prevention, outcomes, care, and survivorship. IECD focuses on four key programmatic areas: a) community engagement, b) minority student training, recruitment, and faculty development in cancer-related science and its clinical application, c) increasing minority enrollment in cancer clinical trials, and d) enhancing cultural competency throughout DF/HCC institutions and membership.

During the past year, the IECD experienced the following developments:

- **The Faith Based Cancer Disparities Network** continues to meet on a regular basis to identify and address health-related concerns pertinent to their congregations and the communities they serve. Experts from a variety of community-based organizations partnered with Network churches to offer a variety of awareness programs related to cardiovascular disease, breast health, healthy eating, genetic testing and stress management. Educating communities in key risk and prevention factors associated with cancer has also led to enhanced awareness around other chronic diseases.
- Fifteen new cancer survivors joined the **Faces of Faith** photo exhibit. The award-winning exhibit now includes over 60 cancer survivors. The 6<sup>th</sup> annual Faces of Faith Unveil event was hosted at Roxbury Community College on November 8<sup>th</sup>. The exhibit was also displayed at:
  - Beth Israel Deaconess Medical Center
  - Ebenezer Baptist Church
  - Greater Love Tabernacle Church
  - Bethel African Methodist Episcopal Church
  - Codman Square Health Center
  - Faith Christian Church
  - Charles Street African Methodist Episcopal Church
  - Katharine Drexel Parish
- In recognition of **National Minority Cancer Awareness**, the 6<sup>th</sup> annual Cancer Disparities Research Symposium was held on April 6<sup>th</sup> in collaboration with the Cancer Care Equity Program. Additional community programming provided for National Minority Cancer Awareness included the following talks, which focused on cancer early detection, prevention and risk reduction:
  - “Stress Management” – Freedom House Goldennairres
  - “Colorectal Cancer Decision Making” – St. Katharine Drexel Parish
  - “Prostate Health and Relationship Health: A Guide to Healthy Relationships in All Aspects of Life” – Elder Health Disparities Coalition
  - “What Does Salt Have to Do with It?” – Roxbury YMCA Seniors on the Move



- “Breast Cancer in Boston” – Mattapan Community Health Center
- DF/HCC partnered with the Boston Public Health Commission (BPHC) to co-host a community event entitled, “Healing Power: A Cancer Survivorship Celebration” at the Dorchester Sustainability Guild. This event featured the DF/HCC Faces of Faith exhibit, the release of Boston Public Health Commission’s 2018 Cancer Report, and a special viewing of the “There is Life” video produced by BPHC for the Pink and Black Education and Support Network. The event also offered interactive healing experiences including yoga, guided meditation, drumming, Reiki and therapeutic massages. A variety of healthy food samples, herbalism, and much more was provided. Over 80 people participated with 30% of the attendees being cancer survivors.
- The **Patient Navigation Network** (PNN), formed in 2007, brings together oncology patient navigators to engage in training, networking and peer to peer support. The PNN continues to meet on a quarterly basis to discuss barriers and solutions to ensure quality and effective integration of navigation services. During the past year, the Network shared practices on the various models of patient navigation and contributed to data collection efforts associated with a Translating Research into Practice grant in collaboration with the Boston Breast Cancer Equity Coalition. In 2018, two patient navigators received the Dana-Farber/Harvard Cancer Center Patient Navigation Travel Award to attend the Regional and National American Association of Oncology Navigator Conference.
- **Foster Diversity in Cancer Research:** The IECD has been successful in creating pipeline programs to support the engagement and education of underrepresented students interested in cancer-related research. Since the program’s inception sixteen years ago, IECD has engaged and placed over 400 students across the DF/HCC institutions in basic, clinical, nursing and population science. In 2018, the IECD was tasked with implementing two NCI R25 grants:
  - The **Young Empowered Scientists for ContinUed Research Engagement (YES FOR CURE)**: A 3-year training initiative for high school and college students, including both mentored and independent portions.
  - The **Summer Program to Advance Research Careers (SPARC)**: A 12-week, mentored summer research program for University of Massachusetts Boston undergraduates and three community college students in cancer or cancer disparities research.
- The DF/HCC Student Research Program has continued to show promising results for those served by the program over the past 17 years. According to the annual survey of students completed in 2018 (71% response):
  - 72% have completed college
  - 23% have completed graduate school
  - 95% completed or currently enrolled in post-secondary education
  - 83% graduated with STEM or health science degrees
  - 66% are working in a science related field, 15% in a health disparities-related field, and 22% are working in a cancer-related field

## E. Workforce and Community Development

**Dana-Farber Cancer Institute's Office of Workforce Development** works in partnership with other DFCI departments to support pathways to clinical, research and healthcare administration careers. In collaboration with other Dana-Farber departments, the Office of Workforce Development connects underrepresented and underserved adults and youth to learning experiences and provides intensive and comprehensive opportunities for educational employment and mentoring.

In FY18 Dana-Farber continued to build upon relationships with various community agencies, schools, and associations resulting in greater access and a more diverse pool of candidates from Boston neighborhoods. Programs serving our incumbent workers included:

- **Lunch and Learn sessions:** Professional development workshops are offered to front-line staff. These workshops are designed to enhance professionalism, personal development, and career growth.
- **College and Career Coaching Services:** Incumbent staff members looking to advance their careers at Dana-Farber have access to college and career coaching services. Staff can meet with a coach, develop an action plan, and learn about the tools and resources available to help them achieve academic and career goals.
- **Leadership Forums:** Dana-Farber sponsors several educational leadership forums throughout the year hosted by the Partnership, Inc. and Color Media. Staff are invited and encouraged to attend these forums as an opportunity to learn, develop their leadership skills, and position themselves for career advancement.
- **Online Degree Program:** Dana-Farber launched an online degree program in partnership with the Southern New Hampshire University's College for America. The accredited online program is competency-based and affords staff the opportunity to obtain their degree at an affordable price. Program participants can utilize tuition reimbursement benefits.
- **Impact Snapshot:** According to a historical review of incumbent staff who have benefited from services provided through the Office of Workforce Development since 2012 (39% response rate), the following findings were noted:
  - Over a third of respondents have been promoted to a higher position at DFCI.
  - 80% of respondents reported achieving their academic and career goals.
  - 79% felt that the Workforce Development services were extremely important in achieving their goals.

**Community and Educational Partnerships:** Dana-Farber continues to partner with YMCA Training Inc. and other community-based pre-employment training programs to identify unemployed and underemployed skilled adults in the community. The program includes a combination of on-the-job training, classroom learning, career counseling, and other skill building activities. Several participants have transitioned into full-time employment at Dana-Farber.

To encourage underrepresented students of color to explore and pursue careers in health and science, Dana-Farber maintains educational partnerships with Boston area high schools and

colleges. During Academic Year 2017-2018, 22 students participated in a college and career readiness training program. An additional 40 students were enrolled in the 2018 Summer jobs program at Dana-Farber. Eligible students either attended or graduated from Boston Public Schools. During the 7-week summer program, students interned 30-hours per week and participated in college tours and career readiness workshops.

Dana-Farber actively participates in school-to-career programs with the Boston Private Industry Council (PIC). One program includes Groundhog Job Shadow Day, where 13 high school students shadowed Dana-Farber employees learning about careers in healthcare and specific job responsibilities, as well as the skills and training needed for the position.

Dana-Farber staff also participates in school-based events including Fenway High School's annual career fair, where staff lend their expertise in mock interviews and career panels. Other school and community partner programs in which Dana-Farber engages Boston's high school population include: Sociedad Latina's Health Careers for Youth internship program, the Youth Enrichment Services Career Exploration Program, Bottom Line, YWCA's InIt Program, and the Gateway program at the John D. O'Bryant School of Math and Science.

- **Impact Snapshot:** In 2018, the Office of Workforce Development administered its annual survey to students who participated in both the summer and academic-year internship with a response rate of 50%. 33% of participants were employed by Dana-Farber. Findings included the following:
  - 64% majored in health, science, or medical-related field in college.
  - 66% are employed in health, science, or medical-related field.
  - 93% found the Workforce Development Student Training Program to be influential to their decision to pursue a career in health, science, or medical-related field.

#### **E1. Community Development/City of Boston Support:**

- Dana-Farber continues to provide a limited number of low-cost rooms that serve as a home away from home for pediatric oncology patients and their families. Additional lodging support is provided through the American Cancer Society Hope Lodge.
- The Caps for Kids program provides handmade hats, scarves, mittens, and more for local children each year, thanks to donations from the Dana-Farber community. Since 1999, staff, patients, friends, and family members have contributed more than 100,000 hand-knit and crocheted items.
- Dana-Farber continues to make payments in lieu of taxes (PILOT) to the City of Boston to support important services that benefit the community.
- Dana-Farber supports local community development efforts, such as affordable housing and neighborhood revitalization, through contributions to qualifying community partners under the state's Community Investment Tax Credit Program.

## **F. Patients and Family Programs and Services**

Dana-Farber offers a variety of services to patients, families, and the wider community to help address the challenges that accompany a cancer diagnosis. These include:

### **Dana-Farber/Brigham & Women's Cancer Center Patient Navigator Program**

The Breast and GYN Patient Navigators help patients make their way through the healthcare system by providing streamlined access and identifying resources for patients with abnormal findings, patients at increased risk of developing cancer, or patients diagnosed with cancer. The Patient Navigators are bilingual in Spanish and available to work with any patient in the program's target population whose socioeconomic status or limited English proficiency may be a potential barrier to screening or follow-up care. The Breast Patient Navigator is available to support patients at the BWH Comprehensive Breast Health Center and Dana-Farber/Brigham and Women's Cancer Center, serving approximately 284 patients in the past fiscal year. The GYN Patient Navigator is available to support patients seen at the BWH Pap Smear Evaluation Center (PSEC), serving approximately 651 patients this past fiscal year. The total number of patients supported by patient navigation in FY18 was approximately 935 patients.

### **Support Groups for Adults:**

- Bereavement Support Group and Seminar: When Grief is New
- Brain Tumor Support Group
- Cancer Care Management 101
- Carcinoid and Neuroendocrine Tumor Seminar and Support Group Series
- Caregivers Support Group and Workshops
- Circulo de Vida (Circle of Life) Support Group in Spanish for Women with Cancer
- Facing Forward after Breast Cancer Treatment
- Family Connections Program: supportive resources, information, and events for parents with cancer and their children
- Gynecologic Cancer Support Group
- Inflammatory Breast Cancer Support Group
- Light One Little Candle: Connecting through Reading. Free children's books for parents with cancer
- Living with Cancer Support Group
- Look Good, Feel Better (sponsored by the American Cancer Society)
- Lung Cancer Support Group
- Lymphoma Support Group
- Melanoma Support Group and Special Events, in collaboration with the Massachusetts Melanoma Foundation
- Metastatic Breast Cancer Support Group
- Multiple Myeloma Education and Discussion Group
- One to One: Connecting with Someone Who's Been There (Peer Support)
- Prostate Cancer Support Group and Workshops
- Sarcoma Support Group
- Telephone Support Group for Young Women with Breast Cancer

- Waldenstrom's Macroglobulemia Support Group
- Young Adult Support Group

**Blum Resource Center and Shapiro Center for Patients and Families:**

- Spirituality and Cancer Workshop Series
- Nutrition and Cancer: Separating Facts from Fiction
- Advocacy 101
- Caregivers' Coffee Hour: Facilitated Discussion by One-to-One Caregiver Mentor
- Navigating Resources for Spanish-Speaking Family Members:
  - Hispanic Heritage Month Event
  - Nutrition
- Community Servings: Food is Medicine Workshop
- Step 1: Insomnia After Cancer Treatment
- Managing your Finances during Cancer Treatment
- Sock Design Workshop with Resilience Gives
- Resource Specialist Office Hours in Blum Resource Center
- Resource Center Pilot Pop-Up
- iPads on lend for patients to access the internet and apps
- Complimentary magazines, newspapers and books
- Information about accommodations and lodging
- Maps of the MBTA and Boston area
- Community Recreational Resources Program
- One-to-One Peer Support Program

**Dana-Farber/Boston Children's Hospital Cancer Center Pediatric Programs**

Dana-Farber/Boston Children's Hospital's integrated pediatric oncology program offers a variety of programs and support services for pediatric patients and their families, including a pediatric resource program, multiple support groups and events, and specialized clinical support services, including a Pediatric Brain Tumor Survivorship Clinic.

**Pediatric Support Services and Resources:**

- Hospital to Home Nurse Program
- School Liaison Program
- Back to School Program
- Integrative Therapies-Zakim Center
- Blum Pediatric Resource Room
- Home Hydration Program
- Pediatric Resource Program
- Family Bereavement Support Group
- Brain Tumor Support Group
- Sibling Program
- Just for Teens Program
- Pediatric Brain Tumor Survivorship Clinic
- Telephone Support Group for Parents

<b>VI. COMMUNITY BENEFITS EXPENDITURES</b>
--------------------------------------------

**FY'18 Community Benefits Expenditures**

<b>Community Benefits*</b>	
Direct Expenditures	\$4,032,704
Determination of Need	\$ 76,300
Associated Expenditures	0
Employee Volunteerism	0
Other Leverage Resources	\$3,006,187
 Total Community Benefit	 \$7,115,191
 Total Net Charity Care (includes HSN assessment, HSD denied Claims, Free/Discounted Care)	  \$12,820,764
Corporate Sponsorships	\$326,555
<b>Total Expenditures</b>	<b>\$20,262,510</b>

The total cost of Unreimbursed Medicare and Medicaid Services: \$ 63,573,418

## VII. FUTURE INITIATIVES

Dana-Farber is dedicated to addressing cancer-related disparities in Boston and across the state using evidence-based strategies that address the social determinants of health. Dana-Farber is concluding the 2016-2019 Community Health Needs Assessment and Implementation Plan (CHNA/CHIP) process and is simultaneously developing the third triennial assessment and improvement plan which will inform Community Benefits strategies and initiatives over the next three years. Dana-Farber's Community Benefits Department will continue to sustain and enhance existing programs that provide education and screening to Boston-area residents and implement strategies outlined in the FY19 – FY22 Implementation Plan, with an emphasis on the following activities:

- Dana-Farber will continue to collect data using the department-wide Redcap database. Reports of this participant feedback data will be shared regularly with stakeholders to monitor program metrics and feedback. Secondary data analyses will be conducted to better understand the reach of our programs and to explore improvement opportunities. In addition, Dana-Farber will expand the evaluation of Community Benefits programs by beginning to assess the impact of select programs. Overall, the evaluation will be used to track progress, guide program decisions, identify challenges and inform strategies for quality improvement.
- Dana-Farber will continue efforts to streamline the diagnosis and treatment of breast, gynecologic, and skin cancers to shorten time to resolution and reduce cancer-related disparities among vulnerable patient populations.
- Dana-Farber will continue to participate actively in city and statewide efforts which address the social determinants of health on a systems level.
- Dana-Farber will play an active role in conducting the first citywide community health needs assessment and improvement plan through the Boston CHNA/CHIP Collaborative.
- Dana-Farber will implement the recently approved Determination of Need Community Health Initiative (CHI) Plan.

## VIII. REVIEW/EVALUATION OF COMMUNITY BENEFITS PLAN

Dana Farber recently hired a Senior Program Evaluator for the Community Benefits Department. In the coming year she will guide the effort to strengthen the overall evaluation approach for the Community Benefits program in consideration of all activities. This process will include updating the logic model, establishing short and long-term goals and selecting data indicators to track progress toward those goals. The evaluation activities will expand to include more data collection for explicit impact studies and secondary data analyses to better understand program successes and to identify improvement strategies.

**Name / Address of Hospital:**

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**Name of Hospital Employee Primarily Responsible for Community Benefit Planning:**

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