



Dana-Farber
Cancer Institute

FY'19 COMMUNITY BENEFITS REPORT

August 7th, 2020

Submitted to AG: 8/7/2020
Approved by AG: 12/21/2020

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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 Community Benefits External Advisory Committee.

Dana-Farber Cancer Institute's 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 External 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 Community Benefits External Advisory Committee and plays a key leadership role as the co-convenor 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.

Boston CHNA/CHIP Collaborative: Dana-Farber is a founding member of the Boston CHNA/CHIP Collaborative, a large multi-sector effort launched in September 2018 to conduct the first citywide Community Health Needs Assessment and Implementation Plan (CHNA/CHIP). Dana-Farber also co-chairs the Community Engagement Work Group in collaboration with BPHC.

Cancer Community Health Needs Assessment (CHNA) Partners: Dana-Farber worked closely with Boston Medical Center (BMC) in 2019 to develop a cancer-specific CHNA report that provides a deeper analysis of the needs and experiences of cancer patients, survivors, and caregivers across the cancer continuum. Dana-Farber also worked closely with BMC, Enhance Asian Community on Health (EACH), BPHC, and Whittier Street Health Center (WSHC) to implement community engagement efforts for the Cancer CHNA Report.

Union Capital Boston (UCB): Dana-Farber is actively involved in a partnership initiative with UCB focused on promoting cancer prevention and survivorship and strengthening the work of Dana-Farber's Community Benefits Office. Dana-Farber also worked closely with UCB to carry out focus groups with cancer patients, survivors, and caregivers for Dana-Farber's Cancer CHNA.

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.

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 partner with the Massachusetts Coalition for HPV and Related Cancer Awareness and Team Maureen to identify opportunities for greatest impact in increasing statewide vaccination rates and knowledge around HPV-related cancers. Dana-Farber also continues to play an active role in supporting the annual HPV-Related Cancer Summit, which convened approximately 54 medical and dental providers, public health professionals, policymakers, and advocates in FY19 to disseminate the latest research and best practices.

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. 2020-2023 COMMUNITY HEALTH NEEDS ASSESSMENT & IMPLEMENTATION PLAN

In 2019, Dana-Farber’s Board of Trustees approved the 2020-2023 Cancer-Focused Community Health Needs Assessment (CHNA) 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.

Dana-Farber’s 2020-2023 Cancer CHNA builds off previous efforts to gain a greater understanding of the health issues facing Boston residents across the continuum of cancer care, with a focus on the City of Boston and Dana-Farber’s priority neighborhoods for Community Benefits work – Dorchester, Roxbury, Mission Hill, Jamaica Plain, and Mattapan. The Cancer CHNA integrates key findings from the citywide CHNA and delves more deeply into the needs and experiences of cancer patients, survivors, and caregivers throughout the cancer continuum, exploring behaviors and health outcomes around prevention, screening, treatment, 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 its initiatives and strengthen collaborative partnerships in Dana-Farber’s surrounding communities and satellite locations.

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:** Cancer continues to be the leading cause of death in Boston and Massachusetts. Breast and prostate cancers are diagnosed most frequently, and mortality rates for these diseases have not improved. The CHNA findings indicate that Black men in Boston continue to experience the highest rates of overall cancer mortality and premature cancer mortality (death before age 65). Moreover, Black men under age 65 die from almost all cancers included in the CHNA at significantly higher rates than White men. Similar to the 2016 CHNA, compared to White men, Black men have more than double the rate of death from prostate cancer as well as dying from prostate cancer before age 65. The data also reflects that Black women under age 65 are significantly more likely to die from all cancers combined compared to White women. There are also significant disparities in cancer mortality across Boston neighborhoods, including Hyde Park, Dorchester, East Boston, and Fenway, warranting further investigation. Additional disparities are also seen across other groups:
 - The incidence of all cancers has increased significantly among Asian and Black women over time.

- Breast cancer incidence rates have risen significantly among Asian women over time.
 - Asian men have significantly higher liver cancer incidence and premature (<65 years) liver cancer mortality rates compared to White men.
 - Significant disparities in cancer screening and risk behaviors exist among select subgroups, including immigrant, low-income and unemployed residents.
- 2) **Access Barriers:** Across the continuum of cancer care, barriers to accessing cancer services include confusion about screening guidelines, cost of treatment, maintaining employment, transportation, and limited opportunities to participate in clinical trials. Numerous cancer patients and survivors remarked that having cancer had depleted their resources. Cost challenges are compounded by the fact that cancer patients may be unable to work full time (or at all) during or even after treatment. Language barriers and lack of cultural competency among providers as well as institutional racism were also mentioned as challenges for patients of color and immigrants. The CHNA findings also underscore the need for greater engagement of primary care providers and assistance navigating the cancer care system from screening through survivorship.
 - 3) **Cancer Survivorship:** Cancer survivors experienced a significant drop-off in support following treatment and expressed a need for more post-treatment support for issues such as managing medication needs and long-term side effects, feelings of isolation, fear of cancer recurrence, rejoining the workforce, and “normalizing” life after cancer. In addition, focus group participants emphasized the importance of cancer-specific support groups and expressed the need for more groups in different languages serving different populations, as well as support groups facilitated by cancer survivors and people of color.
 - 4) **Social 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. When Boston CHNA respondents were asked to identify the top most important concerns in their neighborhood that shape their community’s health, housing quality or affordability and alcohol/drug abuse emerged as the top priorities, followed by mental health and community violence. In addition to poverty and high housing costs that force individuals to prioritize their spending, a lack of affordable physical activity opportunities and access to nutritious food were described as barriers to healthy living. Lower income neighborhoods were described as having fewer affordable gyms, grocery stores, and more fast food and convenience stores compared to more affluent areas.
 - 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. Boston CHNA participants also noted proximity of health care services and educational institutions, diversity and multiculturalism, and engaged residents as key strengths that can be leveraged in future efforts.

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 24 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. Dana-Farber continues to develop new clinical partnerships with community-based organizations serving diverse racial/ethnic populations, such as the Latino Health Insurance Program, to increase the number of Latina, Asian, and other racial/ethnic minority patients screened on the van.

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. 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 third 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. In addition to educational outreach activities, LHA trainees also provide survivor testimonies in the community, serve on community advisory boards, and participate in evaluation and needs assessment activities.

FY19 HIGHLIGHTS

- In FY19, 1,086 individuals received breast health education on the DFMV or at a community outreach event.
- The breast health educator staffed 21 van days, 13 health fairs, 6 workshops, and 12 other partnership events.
- 16 women were referred for screening mammograms as a result of community outreach and education efforts.
- A total of 61 community members have been trained as LHAs since the start of the program. LHAs participated in a total of 9 community education and outreach events with the breast health educator in FY19.
- In FY19, DFCI partnered with Enhance Asian Community on Health (EACH) to train 7 bilingual Chinese and Cantonese-speaking peer health promoters. DFCI also partnered with EACH to conduct a focus group with Chinese-speaking cancer patients and their caregivers as part of the data collection process for DFCI's Cancer CHNA.

FY19 VAN HIGHLIGHTS

- **Patient Volume:** In FY19, Dana-Farber's Mammography Van provided 1,752 mammograms. Since program inception in April 2002, Dana-Farber's Mammography Van has provided more than 48,000 mammograms to more than 21,000 unique patients.
- **Race/Ethnicity:** The largest racial and ethnic groups seen on the van in FY19 were Black and White women. Of all van patients with complete self-reported race/ethnicity data available (69.13%), 19.49% self-identified as being Black, 11.2% as White, 17.26% as Other, 10.06% as Hispanic/Latino, and 3.94% as Asian.
- **Primary Language:** Over the past year, 50.2% of van patients spoke a first language other than English. In FY19, Dana-Farber's Mammography Van patients self-reported a total of 26 different languages. The top five primary languages after English (48.2%) were Spanish (30.6%), Portuguese Creole (10.1%), Portuguese (3.7%), Vietnamese (1.5%), and Haitian Creole (1.4%).
- **Boston Residence:** 47.6% of van patients hail from Boston and 51.9% from the rest of Massachusetts. The Boston neighborhoods represented include Dorchester, Mattapan, Roxbury, Allston, and Jamaica Plain.

- **Breast Cancer Diagnoses:** 157 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, three women are diagnosed with breast cancer (0.32% diagnosed).
- **Re- screening Rates:** 62.1% of patients screened on the van were returnees from prior years; 27.4% of van patients returned for re-screening in a “timely” manner (10-18 months from last screen).
- **Baseline Mammograms:** 11.2% of van patients served this year had their baseline (first-ever) mammograms on the van.
- **Follow-Up Rate:** 272 patients (15.53%) 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 67.4% publicly insured (Medicare, MassHealth, Health Safety Net, etc.) and 32.6% 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.

FY19 MAMMOGRAPHY SUITE HIGHLIGHTS

- **Patient Volume:** In FY19 the mammography suite provided 618 mammograms to women. Since program inception in October 2013, the mammography suite has provided more than 4,200 mammograms to more than 2,200 unique patients.
- **Breast Cancer Diagnoses:** For every 1,000 mammograms conducted at the suite, approximately three women are diagnosed with breast cancer (0.31%) Thirteen breast cancer diagnoses have been confirmed for patients originally screened at the mammography suite since program inception.
- **Re-screening rates:** 68.9% of patients screened at the suite were returnees from prior years; 41.7% of suite patients returned for re-screening within 10-18 months from the last screening appointment.
- **Baseline Mammograms:** 11.2% of suite patients served this year received their baseline (first ever) mammogram at the suite.
- **Follow-up Rate:** 15.53%, or 96 patients screened at the suite this past year received a recommendation for follow-up.

2. 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
- Boston Construction Union-Skanska
- YMCA Roxbury
- United States Postal Service
- Madison Park Housing Development
- Boston, Waltham, and Dedham Fire Departments

Skin Cancer Screening:

Free skin cancer screenings are provided aboard the Blum Van along with ten 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. Additionally, Community Benefits staff launched a program evaluation initiative to assess the impact of sun safety education on hat and sunscreen use, enrolling 331 program participants. Data is currently being analyzed and will be used to strengthen the Sun Safety curriculum.

FY19 HIGHLIGHTS

- In FY19, a total of 28 Sun Safety education and/or screening events were held.

- 1,659 community members were reached through education and screening events, with an average of 59 participants per event.
- 685 participants were screened by a dermatologist and 131 people were referred for follow-up appointments.
- 63 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.

3. 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. In FY19, a quality improvement project was also conducted to identify factors that facilitate successful outcomes for Tobacco Treatment Program participants.

FY19 HIGHLIGHTS

- In FY19, the Tobacco Treatment Program received 180 referrals and provided a total of 128 individual tobacco cessation counseling sessions to 45 patients.
- 39 participants were able to reduce their total number of cigarettes smoked per day, and 12 of these reported being able to quit completely.
- In FY19, a quality improvement project was conducted which showed that individuals who attended more counseling sessions, who did not have a smoking partner, and who were not allowed to smoke in their homes had more success quitting or reducing their tobacco usage compared to others.

4. Community Outreach and Partnerships

Dana-Farber's Community Benefits work is conducted through collaborations with internal departments and numerous community partners, including the Boston Public Health Commission, 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.

FY19 HIGHLIGHTS

- In FY19, a total of 3,354 individuals were reached overall through 146 community education, outreach and screening events.
- Implemented 3-year partnership initiative to strengthen Madison Park Development Corporation's (MPDC) health equity and wellness agenda.
 - Engaged over 315 residents in educational trainings, workshops, and outreach events.
 - Engaged approximately 130 residents in healthy cooking and physical activity classes led by Daily Table and MPDC's Dewitt Center.

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, two 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 physician or PA 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 and this year's Oral Health Summit.

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. Our clinician has seen a host of survivorship patients this year in collaboration with the primary care team.

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 428 patients have consented to enroll in the cohort since 2012, representing nearly 90% of all patients informed of the study to date (n =482). 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, 22% 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 disparity 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.

FY19 HIGHLIGHTS

- Since the program's inception, the program has seen 557 patients as new consults and 440 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 FY19, 62 new patient consults and 11 follow-up visits were performed.
- In FY19, the median number of days from initial appointment to diagnostic resolution for patients seen at the WSHC clinic was 7.1 days for patients with a cancer diagnosis, which far 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 FY19, doctors from BWH's Department of Dentistry and Oral Medicine and clinicians from the CCEP collaborated with the dental team to host the first Oral Health Summit at WSHC. This summit was advertised widely and focused on the relationship between oral cancers and HPV as well

as lung cancer screening and tobacco cessation as well as the relationship between oral health and cardiac disease.

- 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 fifth year. Patients screened for lung cancer are automatically connected to Dana-Farber’s tobacco treatment program to encourage smoking cessation. Now that low-dose chest CTs are covered by insurance, our patients are receiving the scans at Faulkner Hospital (FH).
- Culturally and linguistically appropriate tobacco education groups are held on a regular basis at the Dimock Street Acute Detox Program for new patients working towards sobriety. The session focuses on tobacco education, electronic cigarette use, and information regarding smoking cessation and lung cancer screening programs.
- **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 2019 symposium featured a keynote by Dr. Carol L. Brown, MD, FACS, entitled “Cancer Health Equity in Clinical Research: Reaching Underserved Populations.” Dr. Brown’s work focuses on the reduction and elimination of cancer health disparities experienced by medically underserved populations and promoting public policy to increase awareness, improve care, and increase research funding for gynecologic and other cancers, both locally and nationally.

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 have completed the intervention implementation phase and are now in the follow-up data collection phase. We are repeating surveys and safety and ergonomic walk-throughs from the baseline data collection in both intervention and control sites to compare the results. Additionally, we are conducting qualitative interviews and focus groups with the intervention sites to better understand facilitators and barriers to intervention implementation and explain findings we find from the quantitative data. We continue to collaborate with our industry partner, Sodexo, LLC, and will share final results from our data analysis with them. 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. We are currently in the fourth year of this project and have accomplished the following:

- Twenty-three students have participated in Outreach Core paid summer internships, and ten students continued for year-long internships.
- We conducted three capacity building trainings in Greater Boston and Greater Lawrence that have supported forty CBO staff in finding, using and evaluating evidence-based programs.
- We launched a mini-grant initiative in July 2019 to provide education to community leaders on Biobanking outreach and to support leaders in delivering their educational outreach on the topic of Biobanking. We have trained fourteen individuals/organizations representing Community Based and Faith based organizations, who will each conduct an outreach session in Greater Lawrence and Greater Boston. Through this initiative, we expect to reach at least 140 community members by the end of January 2020.
- The study launched a series of Science Cafés with partnering communities to connect researchers and community members around issues related to cancer disparities, social justice, and community action. These cafés offer the opportunity to build connections between community members and researchers and are likely to have more impact if they are grounded within an existing network, e.g., a group of churches, a school, a community center, etc. We have held four Science Cafes between March and November 2019 with Community and Faith based organizations in Boston, the Brazilian Community, and with Boston CBOs, Boston FBOs, Brazilian CBOs, and Lawrence.
- The study team has provided educational outreach to underserved communities as part of the NCI National Outreach Network (NON) Screen to Save (S2S) Program. Approximately 190 individuals ages 50-75 have received the NCI NON Screen to Save (S2S) outreach education program. The curriculum has been translated into Spanish and Portuguese so that it is accessible to all of the communities served by this project.

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) and a Dana-Farber/Harvard Cancer Center Pilot Nodal Award through November 2019. This mixed methods pilot study aimed to understand how to improve cervical cancer screening and help women who are experiencing homelessness get screened. We explored the feasibility and acceptability of HPV self-sampling as a primary screening method for homeless women and completed enrollment for the pilot study in 2019. Interviews with 18 patients and 11 health care providers at Boston Health Care for the Homeless Program (BHCHP) sites identified barriers and facilitators to cervical cancer screening and informed the design of a self-sampling pilot test. We enrolled 22 women in the pilot study and found the self-swab was acceptable, easy to use, and preferred over traditional speculum exam. 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 are 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 potential that using smartphones and EMAs has in tobacco use and tobacco message exposure research. Preliminary analysis shows that participants in Massachusetts mostly encountered pro-tobacco messages through store signs or displays, and anti-tobacco messages predominantly through television. Using mobility data obtained from smartphone apps, participants visited a relatively small number of tobacco retail outlets in Roxbury and Methuen. Also, clusters of statistically significant self-reported smoking behaviors were found in areas such as Dorchester Center, Roxbury Crossing, and Lawrence. Public health officials could take advantage of smartphone data collection capabilities to implement targeted tobacco control efforts in strategic locations to reach underserved communities.

D. NCI Sponsored Health Disparities Activities

The Dana-Farber/Harvard Cancer Center (DF/HCC) is engaged in community engagement within the DF/HCC catchment area (i.e. the entire state of 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 connects across all seven DF/HCC member institutions to advance DF/HCC's commitment to reducing cancer disparities. 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 has experienced the following developments:

- **The Faith Based Cancer Disparities Network**, consisting of 10 predominately Black churches in the Greater Boston area representing over 12,000 congregants, continues to meet monthly to plan and implement health-related programming. The Network serves as a conduit to raise awareness and solutions to address the social determinants of health and cancer related disparities. Throughout 2019, health ministries offered educational programs on breast cancer awareness, cardiovascular disease and stroke, men's health, flu clinics, cancer survivorship, and other men's health topics, including prostate health and biobanking.
- Seventeen new cancer survivors joined the **Faces of Faith** photo exhibit, which continues to shed light on the importance of demystifying cancer. The award-winning exhibit now includes over 70 cancer survivors. The 7th annual Faces of Faith Unveil event was hosted at the Dewitt Community Center in Roxbury on October 23rd in partnership with Alpha Kappa Alpha Sorority and the Boston Breast Cancer Equity Coalition, engaging over 100 individuals. The exhibit gained additional traction by being displayed at the following locations throughout the City of Boston:
 - Beth Israel Deaconess Medical Center
 - Boston City Hall
 - Ebenezer Baptist Church
 - Greater Love Tabernacle Church
 - Additionally, five congregations participated in Worship in Pink, a breast cancer awareness program.
- In recognition of National Minority Cancer Awareness, the 7th annual Cancer Disparities Research Symposium was held on April 24th in collaboration with the Cancer Care Equity Program. Over 100 individuals registered to attend. Additional community programming for National Minority Cancer Awareness focused on precision medicine, cancer prevention and risk reduction. 11 community events were held, attended by approximately 286 attendees.

- For the second year, Dana-Farber/Harvard Cancer partnered with the Boston Public Health Commission to plan, “Healing Power: A Cancer Survivorship Celebration. The program held on June 15th included a Saturday afternoon featuring a variety of integrative modalities including expressive arts therapy, yoga, gardening, guided meditation, drumming, Reiki and therapeutic massages. Over 60 attendees participated.
- 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, guest speakers offered expertise in the following areas: “Navigating Trauma through Oncology Care,” “The Impact of Accountable Care Organizations,” and “Navigating the Homeless.” Each meeting concluded with a case presentation which highlighted the role of patient navigators advocating complex patient cases to ensure comprehensive and effective service delivery. Lastly, through a collective process, the PNN webpage was also launched on the DF/HCC website.
- **Foster Diversity in Cancer Research:** The IECD has been successful in creating pipeline programs to support the engagement and education of under-represented students interested in cancer-related research. Since the program’s inception in 2002, the IECD has engaged and placed over 500 students across the DF/HCC institutions in basic, clinical, nursing and population science. The Continuing Umbrella of Research Experiences (CURE) offers three distinct programs –
 - The **Young Empowered Scientists for ContinUed Research Engagement** – NCI - R25 (YES FOR CURE): A 3-year training initiative for high school and college students including mentored and independent portions
 - The **Summer Program to Advance Research Careers (SPARC)** NCI - R25: A 12-week, mentored summer research program for University of Massachusetts Boston undergraduates and three community college students in cancer or cancer disparities research
 - **CURE- Summer only:** A 12-week, mentored summer research program 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 served since 2002:
 - 72% have completed college
 - 31% have completed graduate, medical or professional school degrees
 - 95% completed or currently enrolled in post-secondary education
 - 98% graduated with STEM or health science degrees
 - 61% are working in a science related field, 15% in a health disparities-related field, and 25% 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 FY 19, 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 were offered to entry-level and front-line staff positioned for career advancement opportunities. These workshops are designed to enhance professionalism, personal development, and career growth. Topics included writing SMART goals, personal branding, change management, and personal finance. Nearly 30 individuals participated in this program.
- **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., YWCA, Color Media and Conexion. Staff are invited and encouraged to attend these forums as an opportunity to learn and develop 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. Since the launch in 2018, enrollment increased by almost 400% in FY19.
- **Pharmacy Pipeline Program:** Dana-Farber hosted 6 JVS Pharmacy Tech interns. Within 2 months of program completion 66% of those eligible for hire were offered full-time positions.

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.

Student Training Programs: 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, colleges and universities. During Academic Year 2018-2019, 22 students participated in a college and career readiness training program. An additional 40

students were enrolled in the 2019 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 12 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, and Bottom Line.

In 2019, Dana-Farber launched an Administrative Internship Program for undergraduate rising senior and graduate students to increase the talent pipeline for management level positions and attract talent that adds to the Institute's diversity initiatives. The 10-week summer program engaged 8 interns in project work, professional development, and mentorship around the hospital working alongside executive leaders.

In total, we served 61 High School Students of which 95% are URM, 8 College Students of which 100% are URM and 88% are STEM or health sciences majors, and 8 Graduate Administrative Interns of which 63% are URM.

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.
- 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

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 GYN Patient Navigator supports patients seen at the BWH Pap Smear Evaluation Center (PSEC), serving approximately 406 patients this past fiscal year. This past year the Patient Navigator also enrolled more than 102 new patients in the Patient Gateway portal to provide direct access to test results and facilitate communication between patients and providers. The Navigator also provided follow-up calls to remind patients about upcoming appointments and assess potential barriers, reducing the no-show rate from 15% to 10%. The results of an electronic tablet-based education module to increase patient knowledge of HPV-associated cancers was also published in FY19.

Support Groups for Adults:

- Prostate Cancer Support Group and Workshops
- Circulo de Vida (Circle of Life) Support Group in Spanish for Women with Cancer
- 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
- 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)
- 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
 - Genetics
- Step 1: Insomnia After Cancer Treatment
- Managing your Finances during Cancer Treatment
- Resource Specialist Office Hours in Blum Resource Center daily
- Hope bags for patients and Care bags for Caregivers
- 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
- Recreational Resources Program
- One-to-One Telephone Peer Support Program
- Rounding Packets distributed at Dana-Farber Inpatient Hospital and on the outpatient Yawkey floors.

VI. COMMUNITY BENEFITS EXPENDITURES
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FY'19 Community Benefits Expenditures

Community Benefits*	
Direct Expenditures	\$5,150,030
Determination of Need	\$0
Associated Expenditures	\$0
Employee Volunteerism	\$0
Other Leverage Resources	\$3,012,822
Total Community Benefit	\$8,162,852
Total Net Charity Care (includes HSN assessment, HSD denied Claims, Free/Discounted Care)	\$25,514,162
Corporate Sponsorships	\$335,875
Total Expenditures	\$34,012,889

The total cost of Unreimbursed Medicare and Medicaid Services: \$72,337,124

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. In FY19, Dana-Farber concluded its 2016-2019 Community Health Needs Assessment (CHNA) and Implementation Plan cycle and simultaneously conducted its 2020-2023 CHNA and Implementation 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 FY20-23 Implementation Plan, with an emphasis on the following activities:

- Dana-Farber will continue to fully implement the approved Determination of Need Community Health Initiative (CHI) Plan and leverage community investment opportunities to ensure comprehensive access to cancer care and mitigate health-related social needs that impact care, such as housing stabilization initiatives to prevent homelessness among patients undergoing cancer treatment.
- Dana-Farber will continue to partner with the Boston CHNA/CHIP Collaborative to implement citywide efforts that address the social determinants of health and other priorities for collaborative action.
- Dana-Farber will continue to sustain efforts that 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 implement a full redesign of mammography and breast health education services provided in the community to increase breast cancer early detection rates among medically underserved populations in Boston.

VIII. REVIEW/EVALUATION OF COMMUNITY BENEFITS PLAN

Dana-Farber's Community Benefits staff continues to work on a robust program evaluation process, guided by the Senior Program Evaluator. Community Benefits staff review quantitative and qualitative data quarterly regarding process implementation of Community Benefits programs with a quality improvement lens. Additional data collection and analysis is being conducted to better assess the impact of Dana-Farber's Community Benefits work, strengthen outcome measures, and improve Dana-Farber's Community Benefits programs.

Name / Address of Hospital:

Dana-Farber Cancer Institute
450 Brookline Avenue, BP 111
Boston, MA 02215-5450

Name of Hospital Employee Primarily Responsible for Community Benefit Planning:

Anne L. Levine, Vice President of External Affairs
Magnolia Contreras, Director of Community Benefits
Dana-Farber Cancer Institute
450 Brookline Avenue, 10BP, 1st floor
Boston, MA 02215-5450
617-632-4433