

**Seattle
Cancer Care
Alliance**
Fred Hutch · Seattle Children's · UW Medicine

Community Benefit Strategic Implementation Plan

2016–2019



Better together.

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Introduction

Seattle Cancer Care Alliance (SCCA) brings together the leading research teams and cancer specialists of Fred Hutchinson Cancer Research Center, Seattle Children’s Hospital, and University of Washington Medicine to translate scientific discovery into the prevention, treatment, and cure of cancer. We transform groundbreaking research ideas into lifesaving realities for cancer patients, improving the standard of care regionally and beyond.

SCCA has a broad and growing reach. We provide care directly in the Seattle area; engage in strategic partnerships throughout the Pacific Northwest region; and serve as a national and international center of excellence, drawing patients from all over the world and disseminating research that advances the standard of cancer care globally. For the purposes of our community benefit work, SCCA defines our community as including individuals living in King, Pierce, and Snohomish Counties in Washington State.

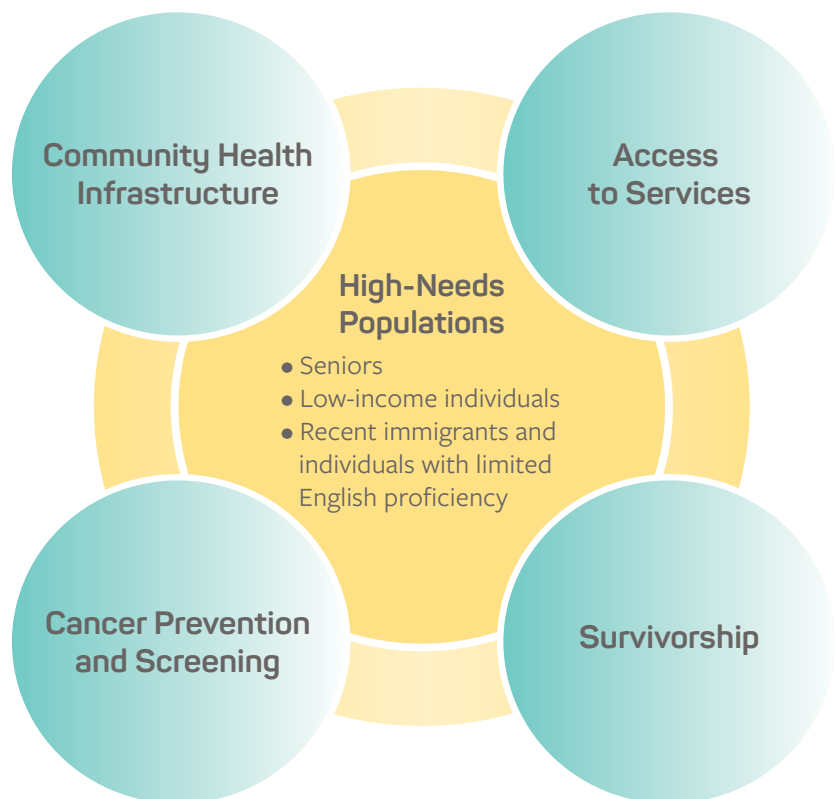
As a nonprofit, mission-driven organization, SCCA takes seriously our commitment to the community we serve. Our mission unites the drive to improve cancer care and outcomes for patients and their families with the power of clinical research. The work we do in the community is an extension of this mission.

In June 2016, SCCA completed a Community Health Needs Assessment (CHNA), which identified six major cancer-related health needs in our population, based on feedback from community stakeholders as well as review of relevant cancer-related health data. The six key needs identified were: **cancer prevention, cancer screening, access to services, high-needs populations, survivorship, and structural community health issues**. We plan to address all the needs identified, but for the purposes of our implementation plan, we have regrouped the needs to more accurately describe how we will approach the work. We will focus on four main priority areas from 2016 through 2019:

- Community Health Infrastructure
- Cancer Prevention and Screening
- Access to Services
- Survivorship

We intend to focus on the special populations identified in the needs assessment—seniors, low-income individuals, and recent immigrants or those with limited English proficiency—across all four of the priority areas identified.

We welcome collaboration with our community on this important work. Please direct comments or questions to Madeline Grant at mgrant@seattlecca.org.



Priority 1: Community Health Infrastructure

In order for SCCA to effectively execute its community benefit priorities, our program must operate with a strong foundation, including robust structures, processes, and collaboration to support the work; better data to help target outreach interventions; and strong participation in efforts to advance the field of knowledge of cancer care.

Goal: Improve the systems and structures that support SCCA's community benefit priorities to facilitate their success.

Objective 1.1: Focus resources strategically and sustainably to enhance the ability to meet and meaningfully address current and emerging community health needs.

Tactics

- 1.1.1: Develop, formalize, and share internal structures and processes to make visible the SCCA investment in our community and in our world.
- 1.1.2: Develop and execute an internal and an external communication plan to support community benefit work.
- 1.1.3: Establish regular engagement with community stakeholders to improve joint cancer prevention and treatment efforts in our community.

Outcome Indicators

- Internal SCCA community benefit advisory team chartered (Y/N)
- SCCA community benefit represented in strategic and budget planning (Y/N)
- Review current community benefit reporting processes and implement recommendations for increased efficiency (Y/N)
- External and internal communications plan developed and executed (Y/N)
- Number of community stakeholders actively engaged with SCCA on implementation strategy

Potential Partners

- Internal leaders connected to community benefit work
- Stakeholder groups, including those consulted as part of CHNA process

Objective 1.2: Enhance our ability to analyze data at a granular level to better understand the burden of cancer in our community, including greater segmentation by race, ethnicity, income, recent immigrant status, language, and other social determinants.

Tactics

- 1.2.1: Report SCCA-specific data to state and national registries to further advance the proliferation of quality data for cancer care, ultimately driving benchmarking and improvement.
- 1.2.2: Create reporting capabilities to better assess the equitability of care provided based on race, ethnicity, gender, and income.
- 1.2.3: Undertake a landscape study to assess existing demographic and health information on low-income, minority, and medically underserved populations and subpopulations in our community, focusing on income, racial/ethnic subpopulations, and native language. Identify gaps in information and recommend ways to collect this information to better target cancer-related community health interventions.
- 1.2.4: Work with community organizations to test alternate methods of gathering cancer-related health data for subpopulations in our community.

Outcome Indicators

- Number of state and national registries we report data to
- Number of social determinants tracked and reported on for internal data
- Landscape study completed (Y/N)
- Community data collection partnership implemented (Y/N)

Potential Partners

- Washington State Department of Health
- American Cancer Society
- Center for International Blood and Marrow Transplant Research

Objective 1.3: Improve the knowledge of cancer in potential and existing medical and allied health professionals.

Tactics

- 1.3.1: Participate in physician and allied health professional education programs.
- 1.3.2: Further scientific knowledge of cancer through development of white papers, conference presentations, and classes.

Outcome Indicators

- Number of staff hours dedicated to professional training programs
- Number of professional training programs participated in
- Professional staff hours dedicated to publishing and presenting research

Potential Partners

- UW Fellows
- Puget Sound Oncology Nursing Society
- Seattle Nursing Research Consortium
- American Society for Blood and Marrow Transplantation
- Seattle University School of Nursing
- Seattle Cancer Care Alliance Network
- Guam Memorial Hospital

Priority 2: Cancer Prevention and Screening

SCCA has long sought to reduce cancer incidence and mortality through work to encourage prevention and screening in our community. Our CHNA reemphasized the importance of this work. Over the period of our implementation plan, we seek to build on better data and a deeper understanding of the needs of our community to more effectively target our populations in need of education and outreach on healthy lifestyles, cancer prevention, and cancer screening. We also seek to expand the number of individuals receiving recommended mammograms and lung cancer screenings by directly providing these services to individuals in need.

Goal: Promote healthy lifestyles and regular cancer screenings to decrease the prevalence and severity of cancer.

Objective 2.1: Educate members of our community on the importance of healthy lifestyles and recommended screenings to reduce cancer risk.

Tactics

- 2.1.1: Educate target populations in our community about ways to prevent cancer or identify it early, including good nutrition; responsible use of alcohol; tobacco cessation; HPV vaccination; and recommended screenings for breast, colorectal, cervical, lung cancer, and prostate cancer.
- 2.1.2: Using data gathered in 1.2.3, identify at least one additional opportunity to educate new subpopulation with targeted outreach.
- 2.1.3: Encourage cancer prevention and screening in target populations through advertising.

Outcome Indicators

- Number of community health events participated in
- Number of staff hours spent on community education
- Number of additional event(s) identified and participated in
- Advertising plan established and implementation begun (Y/N)

Potential Partners

- American Cancer Society Cancer Action Network
- Mercy House
- Seattle King County

Objective 2.2: Reduce the rate of tobacco use in our community.

Tactics

- 2.2.1: Provide tobacco counseling and education of cancer risks for target populations.
- 2.2.2: Educate medical and support service providers about screening for tobacco use and tobacco cessation.
- 2.2.3: Advocate for stronger anti-tobacco regulations, including raising the smoking age to 21 in Washington State.

Outcome Indicators

- Number of tobacco cessation interventions delivered to SCCA patients and caregivers
- Number of presentations at counseling and educational events given annually
- Number of meetings and public communications in support of legislation to increase smoking age
- Passage of legislation to increase smoking age (Y/N)

Potential Partners

- American Cancer Society Cancer Action Network

Objective 2.3: Decrease the incidence, morbidity, and mortality rate of cancer by improving the overall health of community members.

Tactics

- 2.3.1: Provide nutrition counseling and guidance to patients and community members.
- 2.3.2: Conduct cancer and sexuality workshops.
- 2.3.3: Assess feasibility of a holistic approach to educating patients and community members on healthy living issues.

Outcome Indicators

- Number of sexuality workshops per year at Shine, SCCA's cancer specialty store
- Number of nutrition classes offered
- Assessment completed (Y/N)

Potential Partners

- N/A

Objective 2.4: Increase the number of community members who receive recommended breast cancer screening, especially the underserved.

Tactics

2.4.1: Deliver mammography screenings in community settings via the mammography van.

2.4.2: Deliver comprehensive education and outreach to community members on breast health and screening guidelines in multiple languages.

2.4.3: Invest in an additional mammography van.

Outcome Indicators

- Number of mammograms delivered in underserved community settings per month
- Number of underserved community settings mammography van visited per month
- Number of brochures distributed per year
- Number of languages brochures are translated into
- Number of mammography vans

Potential Partners

- Washington State Breast, Cervical and Colon Health Program (BCCHP)
- Safeway
- National Breast Cancer Foundation

Objective 2.5: Increase the number of community members who receive recommended lung cancer screening, especially the underserved.

Tactics

2.5.1: Perform early lung cancer detection through low-dose CT scans in qualified patients.

2.5.2: Educate and train community providers on lung cancer screening.

2.5.3: Educate individuals about lung cancer screenings in community settings (see 2.1.1).

Outcome Indicators

- Number of new patients screened in Lung Cancer Early Detection and Prevention Clinic per year
- Number of return patients who complete screening in Lung Cancer Early Detection and Prevention Clinic per year
- Number of providers trained
- Number of brochures distributed per year

Potential Partners

- University of Washington Medical Center

Priority 3: Access to Services

The benefit of the advancements in cancer care driven by SCCA and other similar institutions is not shared equally among all groups. These health disparities are due in part to barriers to access, including lack of insurance coverage; non-financial barriers to access, such as low medical literacy; and even seemingly simple barriers, such as lack of access to reliable transportation. As part of our implementation plan, we will seek to minimize these barriers to access for target populations.

Goal: Improve access to high-quality cancer care, including clinical trials, along the cancer care continuum, from prevention and screening through survivorship.

Objective 3.1: Reduce insurance barriers to care.

Tactics

- 3.1.1: Offer resources to patients, including counseling services and information, to help them obtain insurance coverage.
- 3.1.2: Work with King County Department of Public Health to fast-track eligible individuals into Medicaid program.
- 3.1.3: Advocate for state and federal policy changes to improve patient access to high-quality cancer care.

Outcome Indicators

- Number of full-time financial counselors employed at SCCA
- Offer fast-track Medicaid enrollment to individuals who qualify through the Breast, Cervical & Colon Health Program partnership (Y/N)
- Number of conversations with policymakers about access

Potential Partners

- Washington State BCCHP
- Public Health - Seattle & King County
- American Cancer Society Cancer Action Network
- Alliance of Dedicated Cancer Centers

Objective 3.2: Reduce non-financial barriers, such as cultural, language, and health literacy barriers, to the continuum of cancer care.

Tactics

- 3.2.1: Assess internally where SCCA currently uses interpreters and translated documents, compare to target population needs as identified in 1.2.3, and make and implement recommendations.
- 3.2.2: Provide cultural sensitivity training for staff.

Outcome Indicators

- Internal assessment completed (Y/N)
- Assessment recommendations implemented (Y/N)
- Percentage of staff who have completed required cultural sensitivity training

Potential Partners

- N/A

Objective 3.3: Improve understanding of, and access to, clinical trials for historically underserved populations.

Tactics

- 3.3.1: Educate patients on the value of clinical trials in community settings.
- 3.3.2: Using information gathered from 1.2.3, increase outreach to limited-English-proficiency communities by expanding use of translators and translated documents in clinical trials.
- 3.3.3: Investigate opportunities to offset non-medical costs associated with clinical trials for target populations.
- 3.3.4: Investigate opportunities to provide information about the availability and benefits of clinical trials, with the goal of enrolling more low-income, minority, and limited-English-proficiency patients.
- 3.3.5: Cover non-reimbursed clinical services associated with research trials.

Outcome Indicators

- Number of locations where clinical trials brochure is made available
- Number of additional languages resources are translated into
- Analysis and recommendations completed (Y/N)
- Dollar value of non-reimbursed services

Potential Partners

- EvergreenHealth
- Northwest Hospital & Medical Center
- American Cancer Society

Objective 3.4: Reduce the burden of transportation barriers for patients in financial need.

Tactics

3.4.1: Provide travel vouchers and transportation assistance to patients and families in need.

Outcome Indicators

- Voucher spending
- UW/SCCA/Children's shuttle spending
- Pete Gross/SCCA House shuttle spending

Potential Partners

- University of Washington Shuttle Service

Priority 4: Survivorship

As cancer mortality rates improve and more members of our community survive and live with cancer or a history of cancer, we recognize the need to address issues related to survivorship and to improve resources for this population. Many cancer survivors struggle with physical and emotional changes that occur during and after cancer treatment, and some face sexual health impacts due to treatment side effects. Some cancer survivors would benefit from connection to mental health services and support to address these and other challenges survivors face, such as fear of recurrence. Additionally, cancer survivors often have different screening and follow-up recommendations from the general population, and it is critical to integrate survivors back into their previous medical home and ensure their primary care physician is aware of the survivor's cancer history and health needs. These care transitions can be especially challenging for survivors who traveled long distances for their cancer care and for primary care physicians whose patient population does not have a high incidence of cancer. Survivorship services can help address these needs.

Goal: Improve the quality of life of cancer survivors.

Objective 4.1: Make high-quality survivorship services available for SCCA patients and community members.

Tactics

4.1.1: Host survivorship clinic for patients and community members, and grow the number of patients served.

Outcome Indicators

- Number of individuals served in survivorship clinic

Potential Partners

- Fred Hutchinson Cancer Research Center
- Seattle Children's

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