



THE HOSPITAL OF FOX CHASE CANCER CENTER

Community Health Needs
Implementation Strategy

FY15 Progress Report

T TEMPLE HEALTH

Community Benefit Implementation Plan
The Hospital of Fox Chase Cancer Center
Summary of Progress for the Period July 1, 2014 through June 30, 2015

Based on its Community Health Needs Assessment of April 2013, the Hospital of Fox Chase Cancer Center established the following priority areas to improve the health of its communities: (1) develop a system-wide approach to enhance coordination and participation in research initiatives of Temple Health; (2) enhance access to evidence-based cancer prevention and cancer care; and (3) strengthen practices for providing culturally competent care. Summarized below are the outcomes we achieved in these areas.

- I. Develop a system-wide approach to enhance coordination and participation in research initiatives of Temple Health, including its medical school and health system affiliates. In furtherance of this goal, we achieved the following outcomes:
 - a. Developed a process to identify cancer research throughout the Temple University Health System (TUHS) to enhance collaboration, specifically related to health disparities. This included development of an assessment tool and data collection procedures.
 - b. Funded seven (7) collaborative projects focused on improving the community's health.
 - c. Developed a summary of data collected and shared with the community advisory, and multiple departments within TUHS.

- II. Enhance access to evidence-based cancer prevention and cancer care. In furtherance of this goal, we achieved the following outcomes:
 - a. Partnered with 78 community organizations and corporate partners to provide breast cancer screening to women, regardless of their ability to pay. 33 of these partners were community sites.
 - b. Reached 3,254 women in the region with breast cancer screening (mammograms) through our Mobile Screening Unit (MSU); 1,063 of these women were screened at community sites.
 - c. 175 women required follow-up and 85 needed navigation (i.e. medical interpreters, transportation).
 - d. Three women were diagnosed and treated for breast cancer through our Mobile Screening Unit program.
 - e. Provided 59 free, bilingual (English and Spanish) cancer education programs to community organizations.
 - f. Reached 3,438 persons with cancer education and information.

- III. Strengthen practices for providing culturally competent care. In furtherance of this goal, we achieved the following outcomes:
- a. In collaboration with the Temple University Office of Cultural and Linguistic Services, presented our Cultural Competency Symposium to over 130 staff and physicians of Temple Health, concentrating on health disparities among African Americans.
 - b. Provided a brochure to participants on cultural issues of this population.
 - c. Conduct assessment surveys with staff about the use of interpreters for our limited English proficient patients and the hard of hearing/deaf patients.
 - d. Conduct medical records reviews of documentation about the use of interpreters.
 - e. Obtained additional equipment for the hard of hearing patients.
 - f. 15 physicians were tested and approved, via an independent vendor, to speak with patients in a language other than English.
 - g. Provided staff training regarding data collection practices to capture race, ethnicity, and preferred language of patient(s).
 - h. Utilization of language line increased by 66.7% compared to prior 12-month period.

Community Benefit Implementation Plan – Progress Report
AOH – Fox Chase Cancer Center (FCCC)
July 1, 2014 – June 30, 2015

Priority Area #1: Develop a system-wide approach to enhance coordination and participation in Temple University Health System (TUHS) research. (Carolyn Fang, Ph.D)			
Goal	Action Item	Progress	Outcomes
<p>Identify and track clinical and population-based cancer research and its contributing risk factors across TUHS to identify opportunities for collaboration and approaches to increase patient and community participation.</p> <hr/> <p>Objectives</p> <ul style="list-style-type: none"> ▪ Assess the number of advisories that include community members. ▪ Identify areas for potential collaboration amongst TUHS entities. ▪ Identify opportunities and strategies for community engagement and/or participation. 	Assemble Implementation Team and meeting(s).	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	Team was assembled. Three in-person meetings were held throughout the year, along with 6 conference calls. Procedures were finalized in team meetings and calls.
	Develop an assessment tool to capture clinical and population-based research within the TUHS.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	A tool has been developed and shared with the team. Initial studies secured by TUHS and FCCC. Data entry process is ongoing as new studies are added.
	Develop a plan that outlines the data collection process and procedures.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	Data collection procedures utilize newly implemented software programs (OnCore) for capturing clinical and population-based research.
	Establish a monitoring schedule to update research portfolio.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	<p>Research portfolio will be updated once a year utilizing the procedures described above.</p> <p>Note: As noted in the attached synopses, a total of seven (7) new collaborations between the institutions were established. All of the projects address disparate populations (African Americans, Hispanics, Asians)</p>
	Provide a synopsis of data collected to share with community advisory and implementation team for input and feedback.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	Synopsis has been completed and refined based upon comments received.
	Share the synopsis and recommendations for community engagement to researchers.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	This is an ongoing activity as we continue to meet with diverse groups and entities across AOH-FCCC, TUHS, and community organizations to share information and obtain input.
Priority #2: To enhance access to evidence-based cancer prevention and cancer care. (Evelyn González)			
Goal	Action Item	Progress	Outcomes
Enhance access through education, screening, navigation, behavioral and translational research, and best practices for	Disseminate Speakers Bureau brochure via first-class mail, FCCC website, publications via tailored media (newsprint or radio), and participation at outreach events.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	<p>Education: Speaker’s bureau yielded 59 cancer education sessions reaching 2,228 individuals. Additional outreach was conducted via health fairs and/or health expos reaching an additional 1,200. Total reached with education and outreach for FY 15 is 3,428.</p> <p>Note: Pre/Post evaluation surveys indicate statistically significant</p>

<p>community engagement.</p> <hr/> <p>Objectives</p> <ul style="list-style-type: none"> ▪ To provide bilingual cancer education sessions to 2,000 individuals in the community through the community Speakers Bureau within the target region. ▪ To provide cancer screening via the mobile unit with at least 25% held in community settings. ▪ Establish a standardized community navigation process for mobile cancer screening program to facilitate access to care. 	<p>Cancer screening efforts will continue with partnerships currently developed to provide annual screening dates.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>increases in knowledge of cancer, cancer screening and intent to participate in cancer screening. Example attached.</p> <p>Screening: Access to breast cancer screening is provided via the Fox Chase Cancer Center Mobile Screening Unit (MSU) in partnership with Flyers Wives. Screenings are offered at corporate settings via worksite wellness programs and in community settings. During the 12-month reporting period, 36% of breast cancer screenings were conducted in community settings, surpassing the goal of 25%. A total of 3254 women were screened via MSU, 1,063 were community women; two (2) community women (1 corporate) were diagnosed with breast cancer and navigated into treatment.</p> <p>Note: MSU benchmarking chart compares programming across</p>
	<p>Identify new community sites to explore partnerships for both screening and educational programs.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>The total number of screenings partners is 78. This includes both corporate and community sites. Of these, 33 are community sites and represents 42% of our screenings, far exceeding our goal of 25%.</p>
	<p>Monthly navigation team meetings.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>Access to Care: Community women screened on the mobile screening unit who require additional services will be navigated into care. During the 12-month period, 175 women required additional follow up, 85 required navigation, two were diagnosed with breast cancer .</p>
	<p>Communicate FCCC's annual community benefit activities and level of support to stakeholders.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>The final community benefit report has been submitted to senior leadership for presentation to Board of Directors. A final version will be posted to the website.</p>

Priority Area #3: Strengthen practices for providing culturally competent care. (Evelyn González, Angel Pagan, Eileen Sosna)

Goal	Action Item	Progress	Outcomes
<p>To educate staff and physicians about the diversity of the clients/patients we serve.</p>	<p>Participate on conference planning committee.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>Staff from all TUHS entities participated in weekly conference calls leading to the April 24, 2015 Symposium.</p>
<p>To provide high quality safe care to patients with language needs, including the deaf and hard of hearing.</p>	<p>Identify opportunities for FCCC faculty and services.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>FCCC staff assisted with the program developed. The faculty from Fox Chase Cancer Center has participated in the past two symposiums. This year Temple University Health System faculty and outside speakers filled the speaking engagements.</p>
<p>Strengthen practices for</p>	<p>Promote event internally to FCCC staff.</p>	<p><input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed</p>	<p>Promotion of the symposium was achieved via the daily electronic bulletin received by all staff at Fox Chase Cancer Center.</p> <p>This objective was completed. Over 130 staff members from all Temple Health entities participated in the April 24, 2015. This</p>

<p>providing culturally competent care.</p> <hr/> <p>Objectives</p> <ul style="list-style-type: none"> ▪ Participate in planning a system-wide conference focused on cultural competency. ▪ Conduct a one day conference for TUHS staff, focused on increasing staff’s cultural competency. Follow-up survey will measure adoption of strategies presented at conference. ▪ Provide two opportunities for partner organizations to contribute to the learning experience i.e. in-service training(s) ▪ Enhance and/or streamline language services to facilitate access to care by non-English or limited English proficient patients, and deaf and hearing impaired patients as mandated by the DHHS National Standards for culturally and Linguistically Appropriate Services in Health Care and by Joint Commission on Accreditation of Healthcare Organizations (JCAHO). ▪ Assess and provide recommendations to improve patient access and navigation to services. 			<p>year the Symposium provided information to participants on Health Disparities Among African Americans.</p> <p>The program included a Keynote Speaker, Alliric Willis, MD (TUHS) who addressed - Health Disparities, Cultural Competency and Implications for Quality Care. The program also included morning and afternoon breakout sessions, a presentation on the Gift of Life Program, which was followed by a panel of presenters that included community members.</p> <p>The morning and afternoon breakout sessions included:</p> <ol style="list-style-type: none"> 1. <i>Alzheimer’s Disease and Other Types of Dementia within the African American Community</i> Natalia Ortiz, MD Chief CL Psychiatry 2. <i>Nutrition & Diabetes within the African American Community</i> Ruth Christner, RD, LDN Casey McKinney, RD, LDN, CDE William Stallings Jr., MS, RC, CSSD, LDN 3. <i>The Challenges of Working with African American Patients who are Deaf and Hard of Hearing</i> Lesia Richman, President of The Communication Connection 4. <i>Achieving Cultural Competency in HealthCare, and its Impact on Healthcare Delivery to African American Patients</i> Deborah Crabbe, MD Associate Professor / Clinical Scholar (TUHS)
	Identify and secure a partner organization to deliver an in-service training.	<input type="checkbox"/> Not started <input checked="" type="checkbox"/> In progress <input type="checkbox"/> Completed	An invitation has been extended to a partner organization to provide an in-service to our staff regarding the needs of the LGBTQ community.
	Collaborate with TUHS Cultural and Linguistic Services to implement a standardized language access program.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	<p>Our focus last year was to increase the availability of equipment and to train staff on language access guidelines and policies. This year our efforts focused expanding physician workforce participation in credentialing for those who speak a 2nd language.</p> <p>Note: Nineteen physicians applied 80% have been credentialed.</p> <p>Other efforts to strengthen our language services at Fox Chase includes a data collection training for front-line staff. This skill-</p>

			building training will enhance staff's ability to collect race, ethnicity and preferred language of the patient. This effort will enable us to track patient language needs and to develop a tickler system to alert clinics, prior to appointment of the patient's language needs.
	Develop recommendations that address access and navigation issues.	<input type="checkbox"/> Not started <input checked="" type="checkbox"/> In progress <input type="checkbox"/> Completed	Access to language services – Our team has been working on a quality improvement plan to streamline language services. This includes documenting a patient's language needs when scheduling an appointment, requesting a certified medical interpreter, monitoring and making any necessary adjustment.
	Prioritize recommendations and associated budgets to be presented to appropriate leadership.	<input type="checkbox"/> Not started <input checked="" type="checkbox"/> In progress <input type="checkbox"/> Completed	The current recommendation is to streamline the intake process to collect race, ethnicity and language preferences. This effort includes staff training and computer system modifications.
	Evaluate impact of any changes implemented.	<input type="checkbox"/> Not started <input type="checkbox"/> In progress <input checked="" type="checkbox"/> Completed	Utilization of the language line increased over the prior 12-month period by 65.9%. The increase in utilization is attributed to an increased effort to (a) new employee orientation; (b) staff in-service training, (c) visibility of language line telephone number in examination rooms.