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Grassroots Community Fundraising and Advocacy to Reduce Breast Cancer Mortality in Ohio Through Patient Navigation and Safety-Net Programs

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GRASSROOTS COMMUNITY FUNDRAISING AND ADVOCACY TO REDUCE BREAST CANCER MORTALITY IN OHIO THROUGH PATIENT NAVIGATION AND SAFETY-NET PROGRAMS

Julie McMahon, Susan G. Komen Columbus, October 7, 2016

Abstract

Ohio has the third highest breast cancer mortality rate of any state in the U.S. In 2016, 1,700 women will die from breast cancer in Ohio. When diagnosed at early stages, survival and quality of life are improved. Barriers to care like finances, health literacy, insurance coverage, fear and transportation contribute to late-stage diagnoses. A community needs assessment of 30 counties in central and southeast Ohio was conducted to inventory all health system assets, healthy policy impacts, and collect qualitative data to identify local barriers and solutions to reduce mortality. Results were used to develop a multi-level approach to reduce mortality. On an individual level, navigation systems to educate and link patients to screening and follow-up are being implemented. On a policy level, grassroots advocacy work has resulted in proposed legislation to adapt an existing state safety-net program to better address the post- Affordable Care Act needs of Ohio's breast cancer patients. Together, the adjustment safety net programs to current needs and the innovation of patient navigation as a model to address the needs of the community will work to reduce mortality in the state.

Program Goals

- Reduce breast cancer mortality (the number of breast cancer deaths) in Komen Columbus' 30 county service area
 - Identify factors contributing to Ohio's breast cancer mortality rate (3rd highest in the United State)
 - Develop multi-level approach to address contributing factors to breast cancer deaths

2015 Community Profile

- Quantitative Analysis identified target communities with poor breast health outcomes
- Health systems analysis inventoried assets in each community and gaps in services
- Policy analysis identified opportunities and weaknesses in local public policy
- Qualitative data assessed needs and gaps as reported by the community and key stakeholders

Through the Community Profile process, some persistent issues were noted, while many new barriers have also emerged along with healthcare reform. Our work with the community to identify these needs will allow us to adjust programs and strategies to adapt, in real-time, to the needs of those we serve.

Health Literacy

- Many unaware or screening not recommended to them according to guidelines
- Difficult to navigate or enter health system
- Little to no awareness of existing resources for screening, follow-up, treatment and survivorship needs
- Fear about screening or follow-up, denial, myths persist

Accessibility

- Competing demands and stressors interfere with making preventive health a priority
- Financial barriers for uninsured to be screened
- Financial barriers for insured to get follow-up as appropriate
- Long distance to hospital or treatment facility
- Work, family, and other commitments make it hard to find time

Quality of Care

- Patients don't feel empowered; unsure what to ask or whom to ask for help
- Difficult to navigate health system
- Opportunities to improve system reminders, communication, follow-up, patient education and process

Population Group	Female Population-Annual Average	Incidence Rates and Trends				Death Rates and Trends				Late-Stage Rates and Trends			
		Cases (Annual Average)	Age-adjusted Rate/100,000	Trend (Annual Percent Change)	# of Deaths (Annual Average)	Age-adjusted Rate/100,000	Trend (Annual Percent Change)	# of New Cases (Annual Average)	Age-adjusted Rate/100,000	# of New Cases (Annual Average)	Age-adjusted Rate/100,000	# of New Cases (Annual Average)	Age-adjusted Rate/100,000
US	154,540,194	198,602	122.1	-0.2%	40,736	22.6	-1.9%	70,218	43.7	-1.2%			
Komen Columbus Service Area (30 counties)	1,442,796	1,895	122.3	-0.1%	412	25.7	NA	689	44.8	1.1%			
White	1,239,201	1,708	122.5	0.1%	367	25.1	NA	608	44.1	1.9%			
Black/African-American	163,959	155	119.4	-2.1%	43	33.4	NA	71	54.1	-5.1%			
AIAN	5,522	SN	SN	SN	SN	SN	SN	SN	SN	SN			
API	34,115	15	63	9.7%	SN	SN	SN	4	17.1	7.7%			
Non-Hispanic/Latina	1,409,295	1,887	123.1	-0.1%	411	25.8	NA	687	45.1	1.1%			
Hispanic/Latina	33,501	7	53.3	1.6%	SN	SN	SN	SN	SN	SN			

Aggregated data (cumulative numbers and average rates and percentages) from Quantitative Data Report (Susan G. Komen, 2014)

2015-2020 Mission Action Plan

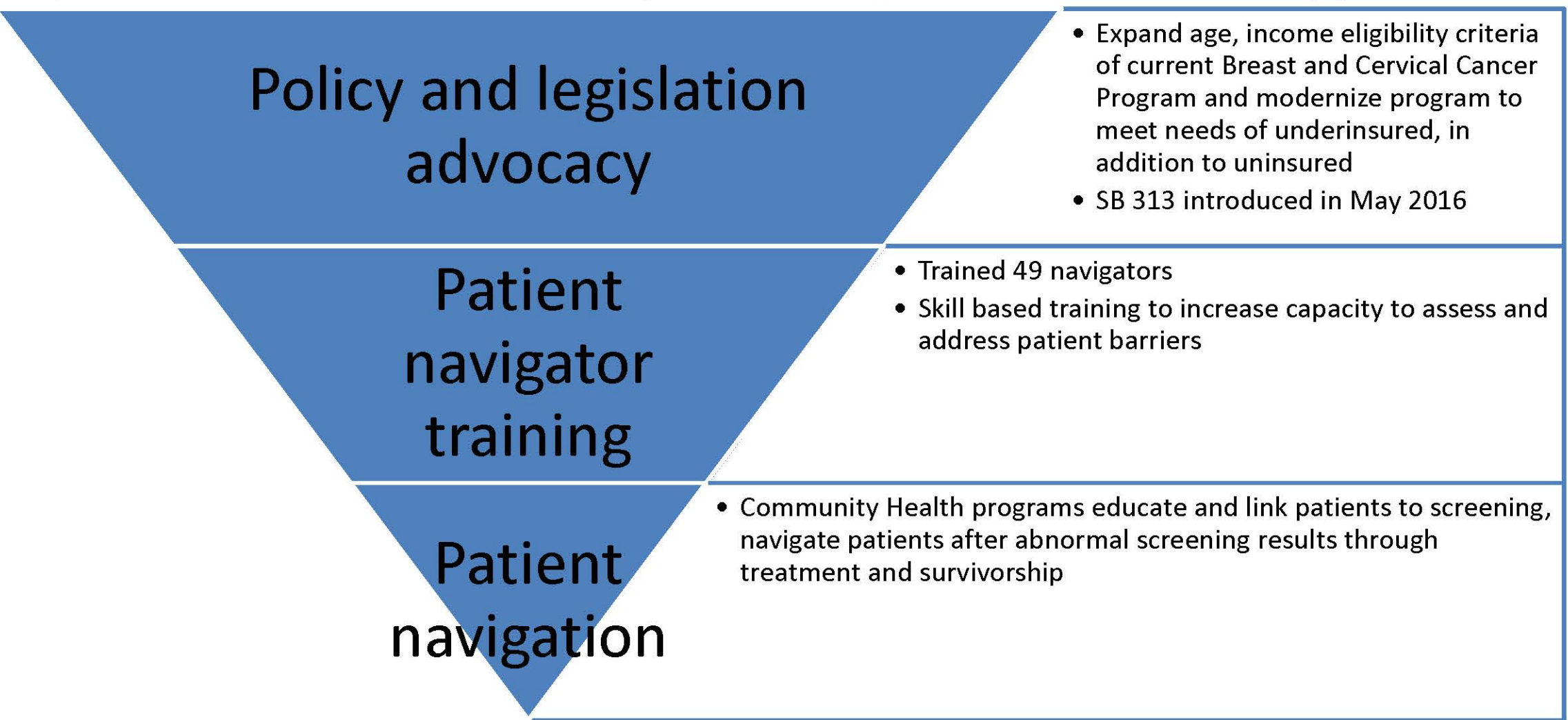
Drawing directly from the findings of the community-le d profile, a mission action plan was developed to direct all community fundraising towards a specific plan to reduce breast cancer mortality.

- Culturally competent education, reduce informational and cultural barriers
- Increase number of women entering and moving through continuum of care
- Reduce financial barriers
- Reduce physical and logistical barriers
- Increase mobile mammography
- Empower patient communication and advocacy
- Increase access to genetic counseling
- Improve survivorship quality of life
- Increase metastatic breast cancer awareness
- Support Ohio Breast and Cervical Cancer Program



Multi-level Approach

Patient navigation is an opportunity for both individual and system level approaches to assess and resolve barriers to entering or progressing through the breast health continuum of care. The model incorporates safety-net services, but also the flexibility to address other barriers outside of insurance coverage, like transportation, out of pocket costs, childcare, patient health literacy and more, allowing it to achieve all aspects of the mission action plan through one, multi-level approach.



Model Programs

Listed below are four pilot programs utilizing the Pathways model, a model which create a pathway to breast health for all women, despite any level of barriers to care. Lay and clinical navigators assess a woman for barriers, address those barriers (transportation, finances, insurance, appointment times, etc) and navigate the woman to appropriate screening, and if necessary resolution of any abnormal test results. In addition to these programs designed to maximize impact in innovative ways, 17 other programs are currently implementing pieces of this model.



- The TLC4Me program at Heart of Ohio Family Health Centers, two clinics in underserved areas of Columbus, focuses on educating and linking women to screening and identifying and eliminating barriers. The program has trained community health workers and navigators who will connect over 600 at-risk women to resources.
- Pink Pathways Program: Aims to connect 500 Latina and African American women to already existing screening services and our own Latina screening days through community educational programs and a telephone hotline service dedicated to linking women to breast cancer screening services.
- Ohio State University Sister Screen Saver Program: The program targets women who are likely to suffer disparities in breast cancer access especially African-American women, those who are uninsured/under-insured, with low income and/or Limited English Proficient. Key activities include outreach, education, mobile mammography and screening navigation.
- Ohio State University Wayfinder Program: Supports a breast health navigator at the Stefanie Spielman Comprehensive Breast Center to link women to appropriate care at any point in the breast cancer continuum—after an abnormal breast exam, abnormal screening, when coming in for a second opinion, diagnostic services, during treatment, up to the delivery of a survivorship care plan. The BHN's will be trained in cultural competency, health literacy, and barriers counselling. They will provide appointment reminders, make referrals to financial counseling, and link patients with community and internal resources.