

DATA DRIVEN APPROACH TO SHAPING COMMUNITY OUTREACH AND ENGAGEMENT AT NCI-DESIGNATED CANCER CENTER

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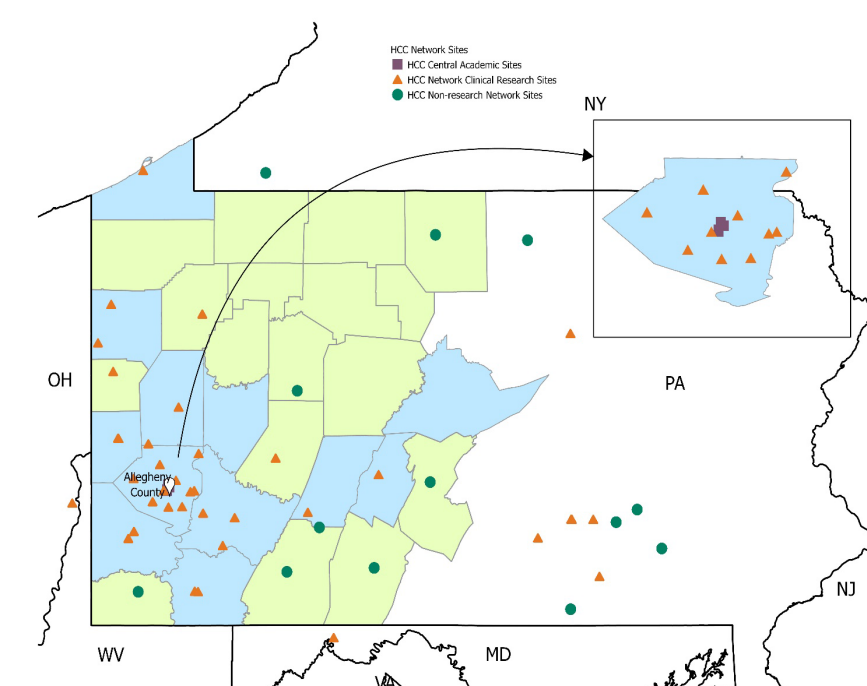
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BACKGROUND

- Most National Cancer Institute (NCI)-Designated Comprehensive Cancer Centers (CCC) have tasked their Office of Community Outreach and Engagement (COE)¹
 - To assess and monitor the cancer burden in their catchment area;
 - Address disparities and inequities in cancer by facilitating cancer outreach activities including education and screening; and
 - Support research that prioritizes community needs
- However, the process is still new with no standardized guidelines on how to use catchment area data to inform COE activities²

PURPOSE

- At UPMC Hillman Cancer Center (Figure 1), Pittsburgh, Pennsylvania (PA), we used catchment area data-driven approach to re-structure the office of COE towards a more community-engaged program
- We present **selected** key actions taken by COE team and subsequent outcomes in the last 2 years



- 29 counties (of 67) in PA
- ~4 Million (30% of PA) population
- 8% minority populations
- 13.1% below poverty line
- 11% uninsured

Figure 1. UPMC Hillman Cancer Center Catchment Area

ACTIONS TAKEN

- Catchment area data analyzed in context of population demographics, social determinants of health, geographical and cultural environment
- Identified priority cancers and regions of cancer health disparities within catchment area (Breast, Cervical, Colorectal, Lung, Prostate)
- Developed strategic goals and metrics for each of the three COE programs based on Pennsylvania Cancer Control Plan 2023-2033
 - Outreach and Education
 - Cancer prevention and early detection
 - Evaluation and research

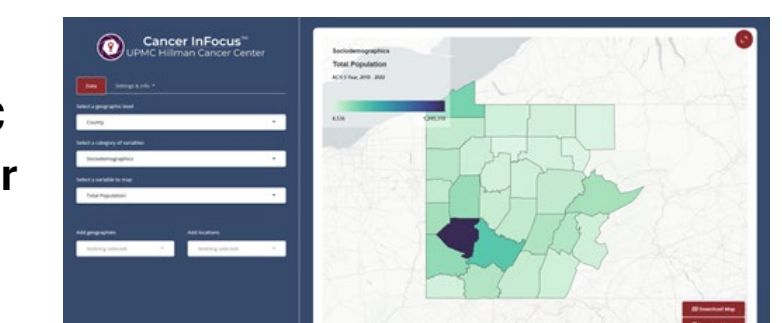
OUTCOMES

- Established catchment area-representative Community Advisory Board in 2023-2024
- Program #1 (Outreach and Education) (Figure 2)
 - Cancer burden data informed mailing distribution list across 29 counties (newsletters, flyers)
 - Expanded school program **Healthy Choices for Students (HCFS)** from 3 to 9 counties
- Program #2 (Cancer Prevention and Early Detection) (Figure 3)
 - Implemented a model community health worker program for lung cancer screening in selected priority areas including urban, semi-urban and rural area (CHWs =3)
 - Increased partnerships with community-based clinics and organizations within catchment area from 6 to 14 counties

OUTCOMES Contd.

- Program #3 (Evaluation and Research)
 - Facilitated pilot studies that prioritize catchment area-relevant research
 - 15 catchment area-relevant pilot studies funded in 2023 (n=7) and 2024 (n= 8)
 - Design, sampling and implementation of cancer-focused community needs assessment
 - Informed by population demographics cancer burden
 - Oversampling for minority and rural populations
 - Implementation of Cancer InFocus Data visualization tool for UPMC HCC

Figure 4. UPMC Hillman Cancer InFocus



IMPACT

- Critical assessment of catchment area data instrumental in strategic planning and implementation of COE activities
- Infrastructure expansion
- Targeted outreach and screening activities in priority areas

REFERENCES

- Paskett ED, Hiatt RA. (2018) doi: 10.1158/1055-9965.EPI-17-1050. PMID: 29716925.
- Stanley, N. B., Burus, T., et al., (2024). <https://doi.org/10.1080/28322134.2024.2416192>

ACKNOWLEDGEMENT

- Research reported in this publication was supported by the National Cancer Institute of the National Institutes of Health under Award Number P30CA047904.

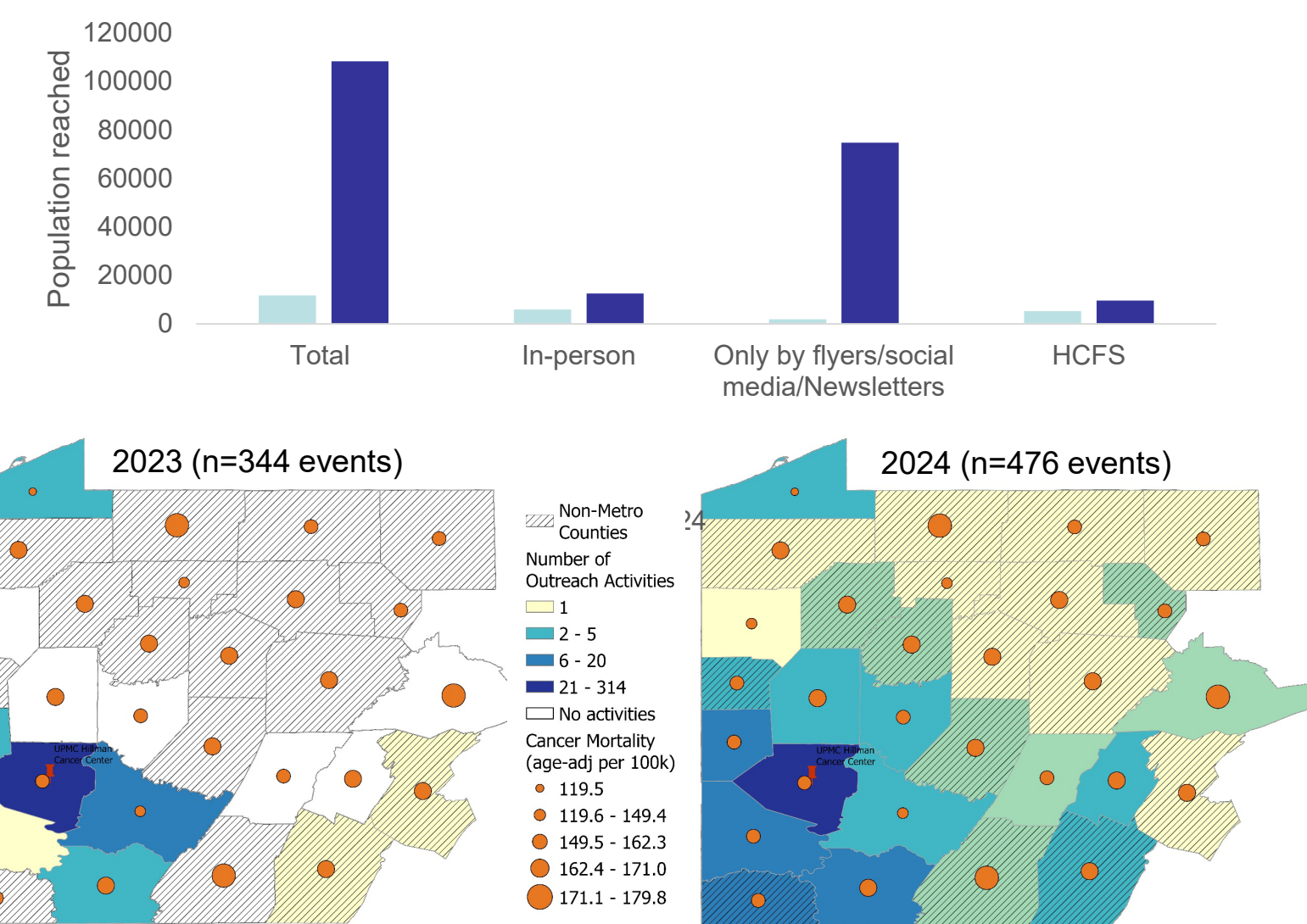
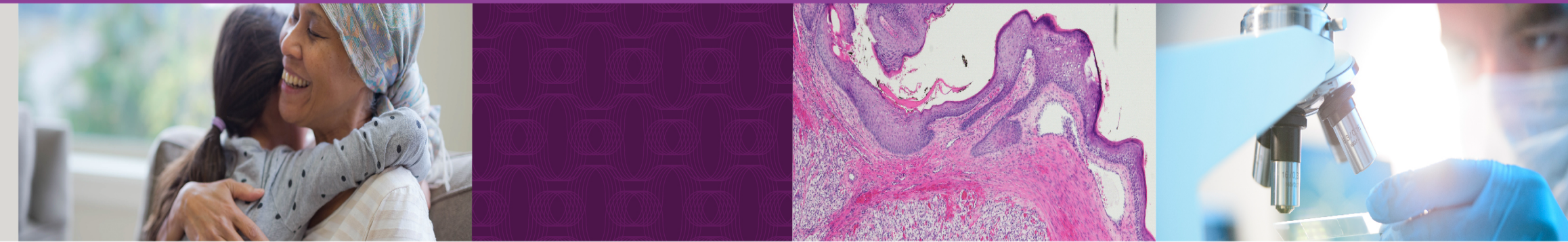


Figure 2. Outreach and Education (2023-2024) Data

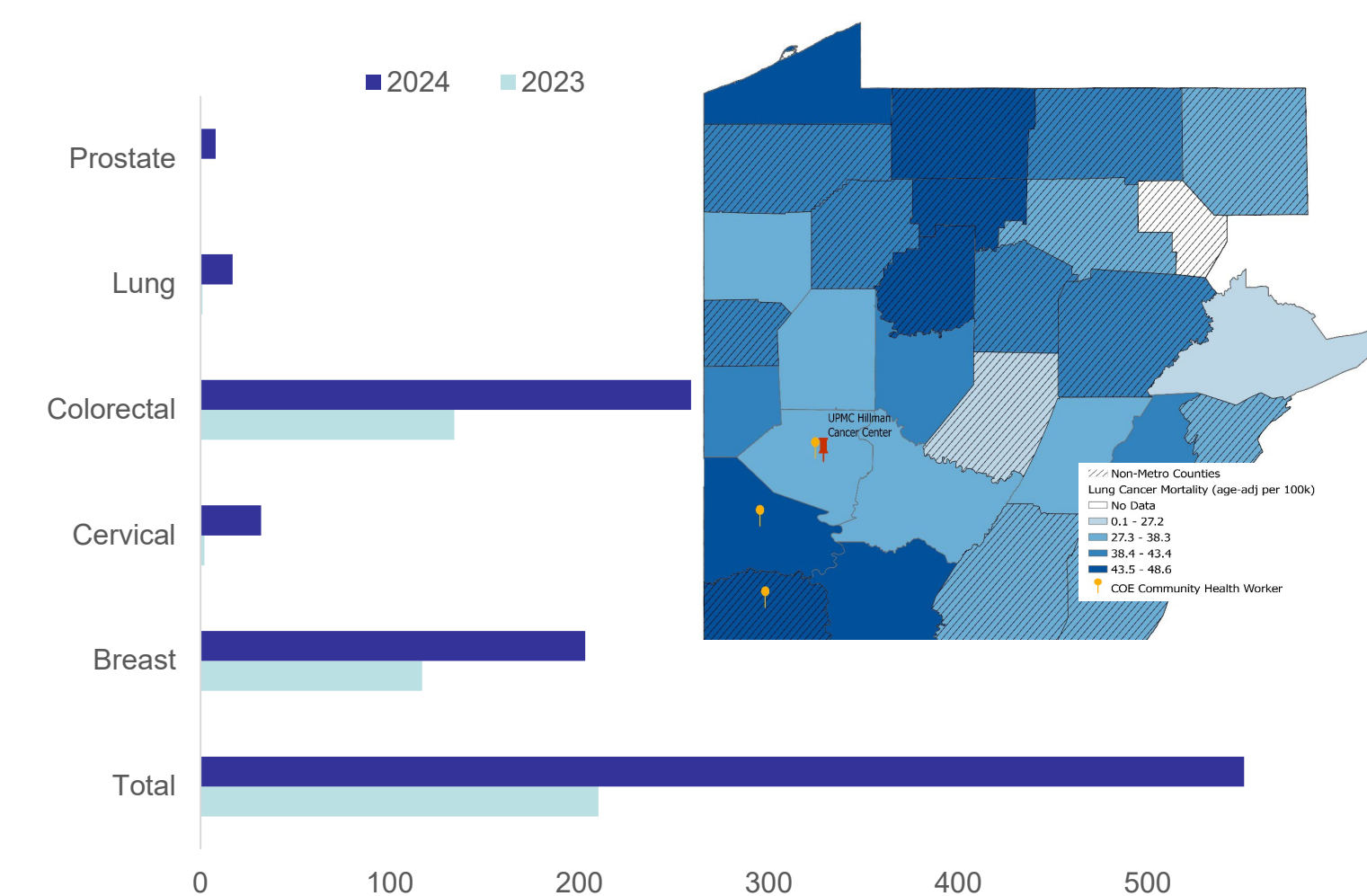


Figure 3a. People Navigated for Screening and Preventive Services; 3b. Map of Lung cancer mortality rates and CHW locations