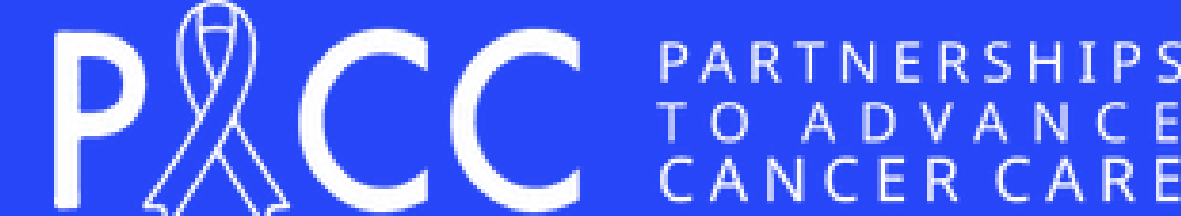


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## Background

**Project Purpose:** Increase access to and delivery of high quality cancer care for low income and racial and ethnic minority populations in Monterey County, California.

According to county-wide estimates, prior to program launch among low-income and racial and ethnic minority patients:

- 82.7 average days from diagnosis to treatment initiation
- 62% completed cancer treatment
- 15% received clinical trial education

## Project Design / Methods

- Participants in the program are English and Spanish-speaking newly diagnosed or diagnosed with recurrent cancers, ≥ 18 years of age, and receiving care at Pacific Cancer Care (PCC)
- **Community Health Worker (CHW) Navigators assist patients with:**
  - Establishing goals of care and learning about advance care planning
  - Learning about precision medicine therapies
  - Screening for health-related social needs such as food, housing, and mental health assistance resources



- **ACS Core Metrics Collected:** demographics, % treatment adherence (completion), no-show rate, days from diagnosis to treatment, and % who received clinical trials education
- Qualitative interviews

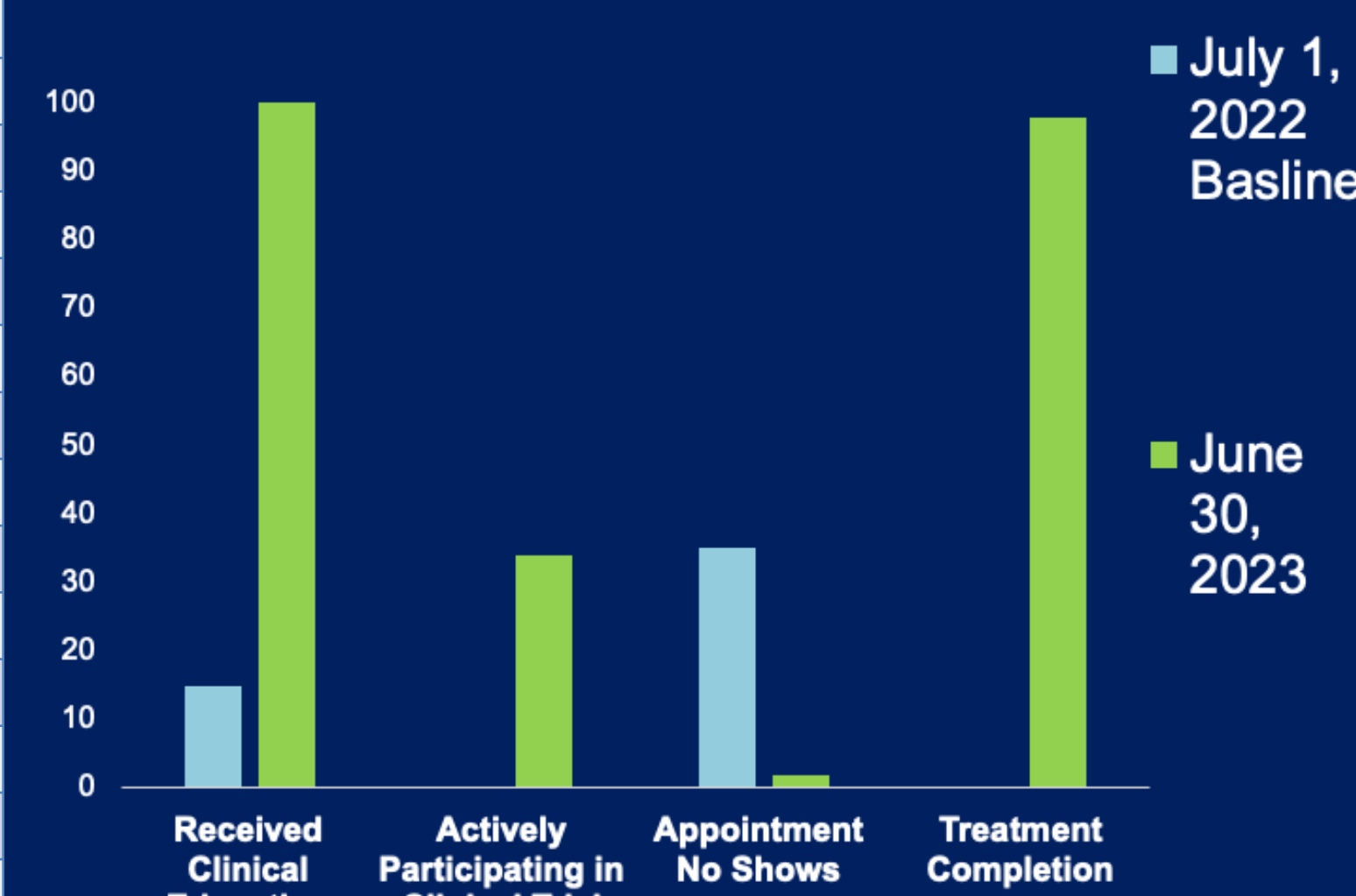
## Interim Results

DEMOGRAPHIC INFORMATION (July 2022 - April 2024)	
Age, years (N=164)	60.88 ± 14.55
Gender* (N=164)	
Female	95 (57.9)
Male	68 (41.5)
Missing	1 (0.6)
Ethnicity (N=164)	
Hispanic or Latino/a/x	104 (63.4)
Not Hispanic or Latino/a/x	59 (36.0)
Missing	1 (0.6)
Race (N=164)	N (%)
American Indian / Alaska Native	2 (1.2)
Asian/Pacific Islander	12 (7.3)
Black / African American	2 (1.2)
Other^	60 (36.6)
White	60 (36.6)
Two or More Races	12 (7.3)
Prefer not to Answer	12 (7.3)
Missing	3 (1.8)
Insurance type (N=164) (select all that apply)	
Private	72 (29.0)
Medicare	56 (22.6)
Medicaid	63 (25.6)
Medicare + Medicaid	13 (5.2)
Other	6 (2.4)
Uninsured	1 (0.4)
Missing	0 (0.0)
Primary Diagnosis (N=164)	N (%)
GI	52 (31.7)
Thoracic	7 (4.3)
GU	23 (14.0)
Breast	39 (23.8)
Heme	12 (7.3)
Head/Neck	4 (2.4)
Other	24 (14.6)
Missing	3 (1.8)

Average Days for Diagnosis to Treatment:



Patient Education and Access to Clinical Trials, Appointment Adherence, and Treatment Completion by Time



**Conclusion:** The CHW Navigator program improves precision medicine knowledge, treatment adherence, clinical trials access, and screening for and referral to community resources for health-related social needs.



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## Innovation

- Integrated Community Health Workers into cancer care delivery with a specific focus on precision cancer care, clinical trials, and health-related social needs. This study ensured culturally and linguistically appropriate introductions of these topics.
- Community Health Worker navigators worked directly with the care team to create patient-friendly handouts, infographics, and animated educational videos shown at center.
- Created food security interventions, specifically with Vouchers 4 Veggies to supplement food assistance programs.

## Implications for Sustainable Practice

- **Impactful Domains:** This project is making a significant impact on the domains of organization context and capacity, workflow integration, and outcomes and effectiveness.
- **Supporting Evidence:** Interviews with staff and patients guided by the Consolidated Framework for Implementation Research and surveys with patients will demonstrate impact.
- **Challenges:** CHW Navigator turnover, consistent scope of work and funding stability for navigator services.
- **Addressing Challenges:** To address these challenges, we are making navigator profiles in the EHR and exploring opportunities to seek MediCal reimbursement for navigator services.

## Next steps:

Expand the program by training >150 Community Health Worker navigators throughout Monterey County regarding precision medicine, goals of care, and advanced care planning.

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