How is the National Cancer Institute evolving its Cancer Information Services (CIS) program to meet the changing educational needs of patients with cancer? You’ll learn how the CIS was set up to reach the broadest audience in the most economical manner, educating multiple sites of care and diverse patient populations. Come prepared to share your own experience—speakers will leave time for you to share your toughest, strangest, and most amusing patient questions.

Content Area: Administration  
Content Level: Intermediate  

Coordinator/Speaker:
Maria Grabowski, RN, MSN, OCN®  
Program Manager Education and Community Outreach  
UT Southwestern  
Dallas, TX  
fourmgs@gmail.com  

Full Disclosure: 
Nothing to Disclose  

Speaker:
Paula Anderson, RN, MN, OCN®  
Clinical Research Manager  
UTSW/Moncrief Cancer Institute  
Fort Worth, TX  
paula.anderson@moncrief.com  

Full Disclosure: 
Nothing to Disclose  

Susan Daron, BSN, RN, OCN®  
University of Michigan Comprehensive Care Center, Cancer AnswerLine  
Ann Arbor, MI  
sdaron@umich.edu  

Full Disclosure: 
Nothing to Disclose  

Objectives:  
At the end of this session, participants will be able to:  
1. Discuss key components of a Cancer Information Service.  
2. Identify the most effective approaches to educating the broadest audience.  

Content Outline:  
I. Cancer AnswerLine  
   A. U-M Cancer AnswerLine  
      1. Mission  
      2. Objectives  
      3. Historical  
   B. Program overview  
      1. Policy  
      2. Documentation  
      3. Staffing  
      4. Relationships  
      5. Marketing  
   C. Metrics—measuring impact and demonstrating value  
      1. Tools  
   D. Using innovative communication tactics to reach and educate the cancer community  
      1. Social media, web, and VoIP telephony  
   E. Successes, challenges, and opportunity  
II. Cancer Information Service  
   A. Cancer Answer Line  
      1. Mission/objectives  
      2. Successes  
      3. Challenges  
   B. Patient education  
      1. Print material  
      2. Web-based teaching  
      3. Technology at the bedside and outpatient setting  
   C. Cancer screenings—prevention and early detection  
      1. Smoking cessation  
      2. Low dose CT lung cancer screening  
      3. Mammography van  
      4. Community outreach  
         a. Health fairs  
         b. Run/walks  
III. Integrating cancer information within communities  
   A. Population research grants  
   B. Underserved and underinsured in safety-net systems  
      1. Colon cancer screenings  
      2. Cancer survivorship services  
   C. Rural populations  
      1. Identifying the message  
      2. Breast cancer screening  
   D. Using tele medicine to improve outcomes  
IV. Demonstrations and interactive teaching AM
Bibliography:


NCI Cancer Information Service at http://www.cancer.gov/aboutn-ci/cis/page1

NCI web link on community interventions and research resources at http://rtips.cancer.gov/rtips/index.do


Patient and Community Education: Make your Impact!
Achieving NCI Goals With a Technology-Driven Cancer Information Service

Maria Grabowski, MSN, RN, OCN
Simmons Cancer Center, UT Southwestern, Dallas, TX
Susan Daron, BSN, RN, OCN
University of Michigan, Ann Arbor, MI
Paula Anderson, MN, RN, OCN
Moncrief Cancer Institute, Fort Worth, TX

Objectives
• Describe Cancer Information Service
  – Key components
  – cost-effective implementation strategies
  – technology driven approaches
  – evidenced-based approaches
• Discuss methods of engaging geographically isolated and underserved populations to
  – provide ongoing cancer screening
  – patient navigation
  – survivorship care

Susan Daron, BSN, RN, OCN
University of Michigan, Ann Arbor, MI

Cancer Answer Line

Mission statement - Cancer Answer Line provides the Cancer Community knowledge to empower, hope and compassion to heal, and a commitment to facilitating the ideal patient experience.

Link to YouTube video of Cancer Answer Line – what we do in the nurses own words.
http://www.youtube.com/watch?feature=player_embedded&v=6nNghVFOfLo

University of Michigan Cancer Answer Line Objectives
• Branded as a Cancer Information Service - “Get Cancer Information from a Cancer Nurse”
• Oncology nurses provide free, confidential, personalized answers to phone calls/emails about cancer prevention, diagnosis, treatment, support, and access to clinical research.
• Assist in meeting NCI goals: community and minority outreach, public education, and cancer clinical research patient enrollment

University of Michigan Cancer Answer Line History
• Created in 1995 to be a “virtual front door” for our NCI and NCCN designated Comprehensive Cancer Center
• Started with 3 oncology nurses (both full and part time) and now 19 years later has 4 nurses (both full and part time)
• Has had over 21,000 interactions via phone and email in the past three years
• Developed partnerships internally and externally to promote our service and expand its reach beyond U of M
University of Michigan Cancer Answer Line Program Overview - Policy
- Disclaimer presented prior to each call and email to let our customers know what we can and cannot provide as nurses
- No personal opinions allowed - the information we provide is fact-based
- Customer Service Training and Quality coaching – how we “facilitate the ideal patient experience”

University of Michigan Cancer Answer Line Program Overview - Sources of Information
- Must be current, evidenced-based, reputable sources from within the United States
- Examples include: American Cancer Society, National Cancer Institute, ASCO, ONS, Medline, Pub Med, National Institutes of Health, Centers for Disease Control and Prevention, any NCI/NCCN Cancer Center.
- Access to a shared drive with common questions and inquiries (updated with each use and annually)

University of Michigan Cancer Answer Line Program Overview - Staffing
- Available by phone and email Monday-Friday 8am-5:00pm EST
- 3.5 FTE Oncology Nurses (3 with OCN and 2 with CBCN credentials)
- Remote agents who have the equipment and ability to work from home
- Self-directed work team with a business manager and lead nurse

University of Michigan Cancer Answer Line Program Overview - Documentation
- All phone and email interactions are documented
- Previously used McKesson CareEnhance documentation software
- Our department software developers created a new streamlined and more efficient system to replace McKesson.
- Our software allows us to track all interactions by demographics, race, type of cancer, reason for inquiry etc.
- This allows us to capture data and see who our customer is and how to better target our marketing strategies

University of Michigan Cancer Answer Line Program Overview - Telephone
- Phone system is Interaction Client - a voice over IP which routes calls from our toll free number to our department.
- Allows us to work remotely
- Records calls for quality training, data capture, and reporting
- Calls rotate to allow a fair and even workload

University of Michigan Cancer Answer Line Program Overview - Meeting efficiency and productivity standards is required
<table>
<thead>
<tr>
<th>% Abandoned</th>
<th>% Answered</th>
<th>Service Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMHS Targets</td>
<td>5%</td>
<td>95%</td>
</tr>
<tr>
<td>CC Answer Line</td>
<td>3.74%</td>
<td>96.26%</td>
</tr>
</tbody>
</table>
*% abandoned = % of calls where caller hung up while waiting in call queue
* % answered= % of calls that were offered and actually handled by the nurse
* Service level= % of calls answered in less than 30 seconds
University of Michigan Cancer Answer Line Program Overview - Relationships

Mutual partnerships – “it’s not what you know but who you know”
- Internal (within U of M) – Clinical trials office, Office of Community Outreach, Speaker’s Bureau, Patient and Family Support Services, Patient Education Resource Center, Cancer Center New Patient Coordinators, Physician and Consumer Call Center, Physician Liaisons
- External - National Cancer Institute, National Comprehensive Cancer Network, American Cancer Society and the Cancer Support Community of Southeast Michigan help expand our reach outside U of M

University of Michigan Cancer Answer Line Program Overview - Marketing

- We are a part of Public Relations and Marketing Communications for U of M Hospital
- Dual purpose here - market our Cancer Center while providing free cancer education to our community
- First and foremost we are nurses but we are also salespeople!
- All cancer related press and media releases originate in our Department and we are the point of contact
- Our Answer Line has been marketed via print brochures, web ads, billboards, radio, and in-person at cancer outreach events

University of Michigan Cancer Answer Line Program Overview - Communication

We use innovative communication tactics to reach and educate the cancer community through social media, and the web:
- Monthly Blogs on MCancerTalk
- Google digital search
- Twitter
- Cancer Center Facebook page
- Visibility on UMCC webpages, banner ads on Curetoday.com, NCCN.com
- Cancer Answer Line Website

University of Michigan Cancer Answer Line - Successes

Objective - Capturing our interactions and translating it to hard data.
- “In God we trust, all others, bring data” – W. Edwards Deming
- Data and numbers drive budgets

University of Michigan Cancer Answer Line - Challenges

- Our job is in part tied to our institution’s NCI Core grant renewal
- People contact us with questions about other topics besides cancer
- This is a non-direct patient care role in a non-nursing department
- National and local competition
- Will the phone call become a thing of the past?
University of Michigan Cancer Answer Line - Opportunity

- Using technology to expand our communication – tweeting, responding to texts, or instant chat
- Information Age – people no longer accept the doctor’s word as law, they seek out their own information and generate their own questions and challenge the standard
- Nurses are in demand and there is a projected nursing shortage as the baby boomer nurses retire
- Reinventing ourselves – a must for anyone who wants to remain competitive
- Creating new partnerships - hospital are doing this as a way to survive so why not us?

Maria Grabowski, MSN, RN, OCN
Simmons Cancer Center, UT Southwestern, Dallas, TX

Cancer Information Service

NCI: What is the Cancer Information Service?
(http://www.cancer.gov/aboutnci/cis/page1)

- "The National Cancer Institute's (NCI's) Cancer Information Service (CIS)...an essential part of NCI's mission...provide accurate, up-to-date, ...information easy to understand...personalized"
- cancer research and clinical trials
- cancer prevention
- risk factors
- symptoms
- early detection
- diagnosis
- treatment
- living with cancer
- quitting smoking

Cancer Information Service: Mission

- Support NCI Status
- Ensure patients and communities value research
  - Understand & translate for better health
- Apply cancer research to current practice
  - prevention through survivorship
- Provides information from multiple sites
  - Reaches disparate regions and ethnic groups throughout Texas and world

Development Steps

1. Business plan
2. S.W.A.T. analysis
3. Financial and administrative support plan
4. Space solution
5. Marketing
   - Campus
   - Community
6. Evaluation

Marketing

- Spreading the word -Marketing is critical
- Media
  - Local Radio
  - Print materials
  - Web
- Search Engine Marketing campaign
  - Includes pay-per-click ads: Google, Yahoo, Bing banner ads
  - Keywords and category clicks
- Mobile devices and tablet traffic
  - Growing mobile use
  - Some ads specifically targeted to mobile users
  - “Click on the phone number”
Marketing Tactics
1. Increased presence on simmonscancercenter.org
2. Search Engine Marketing Campaign

Most Effective Ad Lines
• “Ask Us About Symptoms”
• “Early Detection Can Save Lives”
• “Get Answers, Call Or Email Today!”

Cancer Answer Line
1-888-980-6050
canceranswerline@utsouthwestern.edu

Programs
• Cancer Answer Line
• Speakers Bureau
• Early Detection Cancer Screening
• Community Outreach Events
• Smoking Cessation Program

Cancer Screenings: Prevention, Early Detection
• Smoking Cessation - Lung CA prevention
  – EMR – Meaningful Use
  • Care Mark, China, E Cigarettes
• Lung Cancer CT Screening –
  • At-risk significant smoking history
  • no insurance reimbursement –funding sources -Affordable Care Act
• Mammography Van
• Skin Cancer Screening via Van
• Cervical Cancer Awareness – HPV
• Prostate/Testicular/Colon/ENT

Patient Education
• Patient Education
• Print
• Web based teaching
• Technology at the Bedside and Out-Patient setting
• Community Outreach
  – Health Fairs
  – Run Walks
  – Community Outreach builds Institutional presence
  • 1:1 interactions

Speakers Bureau
• Cancer Answer Line
  – Individualized nursing care and education
  – Tailored information
  – Primary vehicle linking campuses and outlying facilities
  – Staffed by OCN RN’s
  – Links to community resources
  – For patients or non-patients
• Speakers Bureau
  – Supports community groups through interactions with expert professionals.
Cancer Information Service: 
Secrets of Success

- Constant refinement of methods and materials
- Uses technology when needed for patient access
- Opportunities
  - Deliver educational services
  - Use cost effective tools
  - Reach the broadest audience
  - Support NCI goals

- Planning and Implementation
- Administrative support
- Financial support
- Creativity
- Flexibility
- Evaluation and Responsiveness - track
- Understand institutional goals & focus

Cancer Information Service: 
Linking Services

- Campus Links
- Campus to Satellite Links
- Satellite to Rural Links
  - Technology-Based
  - Telephone referral
  - E-mail
  - Web sites
  - Internet Chat is also under evaluation

Paula Anderson RN,MN,OCN
UTSW/Moncrief Cancer Institute
Fort Worth, TX

Integrating Cancer Information within Communities

Community Engagement

- Know Your Mission
- Understand Your Message
- Initiate Collaborations at All Levels
- Bring Institutional Strengths
- Evaluate Barriers and Solutions
- Never Burn A Bridge

Process for Progressive Population Engagement

- Methods Used for Initiating Projects
- Sequencing Evidence-Based Programs
- Layering Successes
- Bumps and Bruises
- Learning Lessons and Moving Forward

Outreach in Underserved and Rural Communities

- Identify Local, State & Federal Funding
- Look Under Every Rock for $$$$$$
- Build Contacts with Layers of Leaders
- Focus on the Common Patient Goal
- Reach Beyond Your Comfort Zone
- Send in the Right Person
- State of Texas—254 Counties
Funding Opportunities
Leverage All Internal & External Resources
- Funding Comes in Various Shapes/Sizes
- Local
- State
- Foundation
- Federal

Local Funding
- Komen Race for the Cure®—2 Affiliates
- Breast Cancer Awareness Fund-Raiser
- High School—Yearly Gift
- Philanthropy-(Community Foundation of Texas)
- Giving Day

State Funding
- Cancer Prevention & Research Institute of Texas (CPRIT)
  - Two Broad Categories of Funding
  - Focus on Prevention
  - Align with Evidence-Based Guidelines
  - Committed to Underserved/Uninsured
  - Incorporate Patient Education in All Studies

Underserved Focus
- Breast Screening & Patient Navigation
- Colon Cancer Screening Programs for Uninsured
- Fort Worth Program for Community Survivorship (ProComS)
  - Started 5 counties, now 17 counties
  - RCT proved concept expansion to 10,000
  - Open all survivors for multi-disciplinary services

Rural Focus
- PCP Education in Rural Areas with Cancer Clusters
- Genetic Screening in DFW & Rural Uninsured using Telemedicine
- DVD/CME Reinforcing USPTF Guidelines
- Funding High Risk Patients for HBOC & Lynch Syndrome

Federal Funding
- Breast and Cervical Cancer Screening Provider (BCCS)—honed the process
- NCI/NCATS Grant—collaborative research
- DSRIP Funding—covering 9 counties mobile survivorship services
Lessons Learned

• Leverage All Funders to Maximize Impact
• Be Exemplary at What You Offer
• What Looks Impossible—may not be!

Demonstration of Interactive Teaching

Rural Genetic Services Using Tele-Consultation

• Genetic Counseling by Telemedicine
  – Genetics Department Linda Robinson
• Innovator Award 2013
  – Association of Community Cancer Centers
• Links academic center to rural homes

Contact Information

• Maria Grabowski
  – Maria.grabowski@utsouthwestern.edu
  – 214-648-4968
• Susan Daron
  – sdaron@med.umich.edu
• Paula Anderson
  – Paula.Anderson@moncrief.com
  – 817-288-9859

Objectives - Review

• Describe Cancer Information Service
  – Key components
  – cost-effective implementation strategies
  – technology driven approaches
  – evidenced-based approaches
• Discuss methods of engaging geographically isolated and underserved populations to
  – provide ongoing cancer screening
  – patient navigation
  – survivorship care

Conclusion

• Cancer patient education – Critical
• Cancer patient MET education – Critical FOR US
• Cancer patient education - requires Critical Creativity