



MASSACHUSETTS
GENERAL HOSPITAL

**CENTER FOR COMMUNITY
HEALTH IMPROVEMENT**

National Cancer Policy Forum

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Special Thanks to:

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Chelsea, MA

- 2 miles north of Boston –
- 2 square miles
- 37,000+ population
- 62% Latino
- 23% living in poverty (48% of children)







Gateway City

- Central America
- Nepal
- Bosnia
- Somalia
- Afghanistan
- Iraq
- Syria
- Northern, & Western Africa



MGH Mission Statement

Guided by the needs of our patients and their families, we aim to deliver the very best health care in a safe, compassionate environment; to advance that care through innovative research and education; and to improve the health and well-being of the diverse communities we serve.



Community Health Team

45 community health workers

25 countries / 21 languages

Access to hospital services

Managing chronic diseases

Medication adherence

Navigate patients to appointments (specialty, cancer, etc.)

Community resources

Patients with:

- History of trauma
- Extreme poverty
- Isolation
- Low literacy
- Language barriers
- Social determinants of health

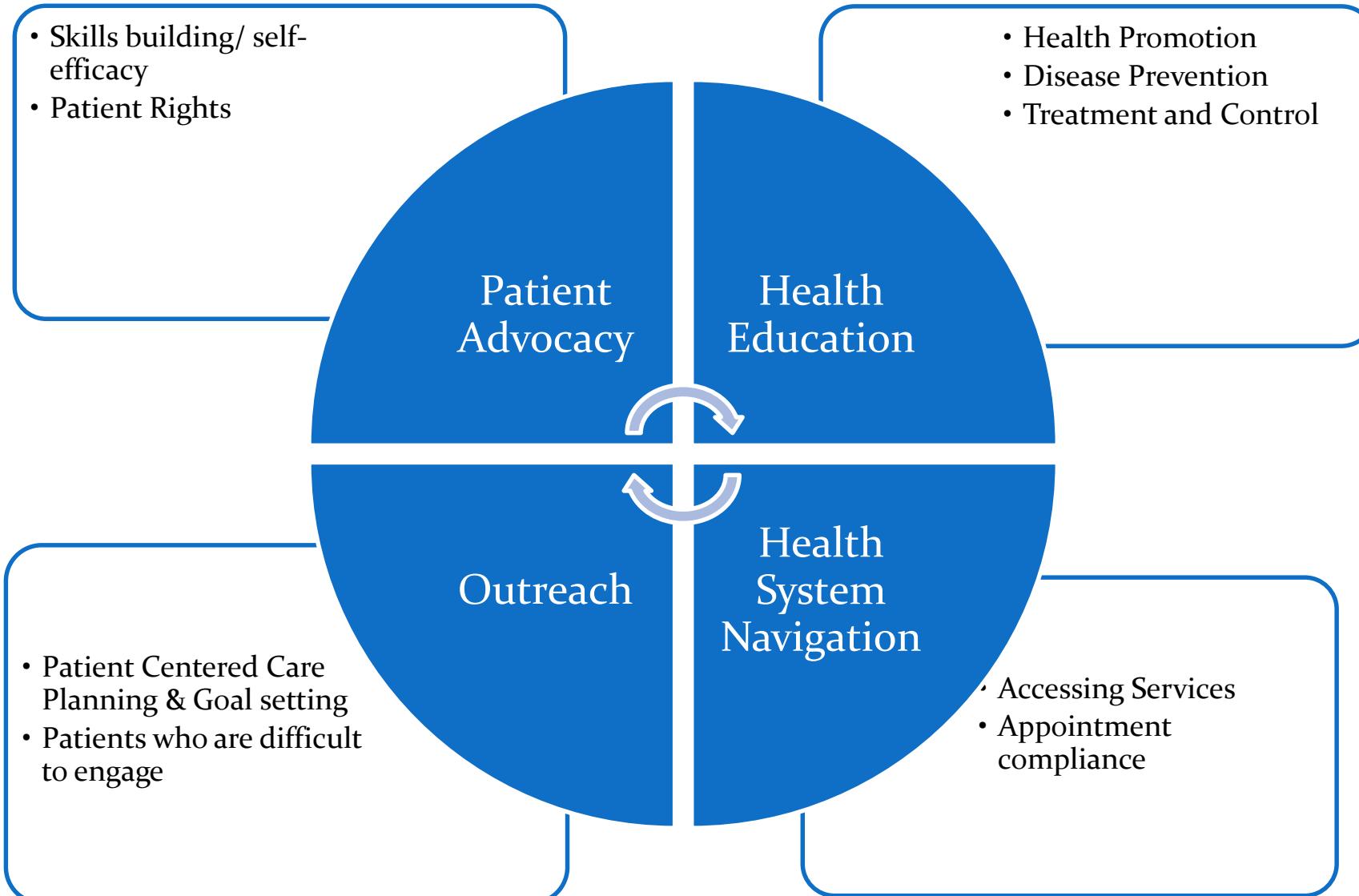


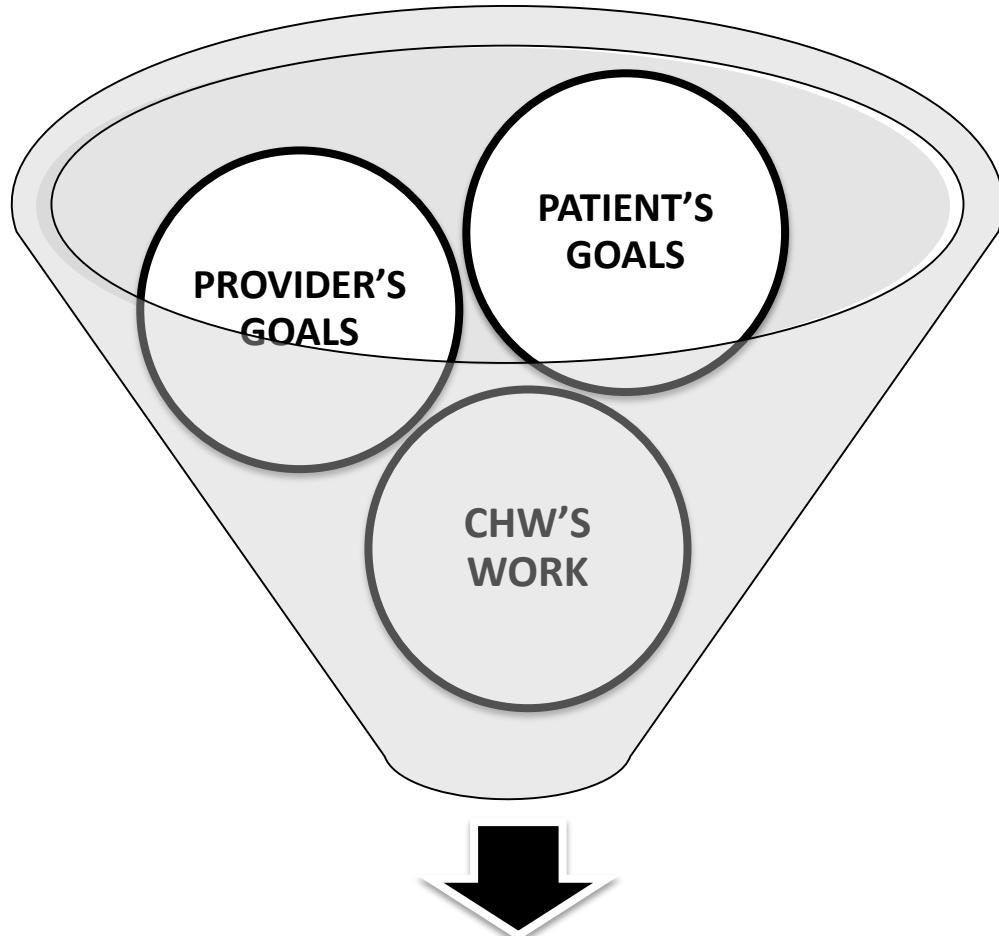
CHWs – Shared Life Experience

* Cultural Affinity Dyads

- Cultural Mediation
- Culturally Appropriate Health Education
- Care Coordination
- Case Management
- System Navigation
- Providing Coaching and Social Support
- Advocating
- Providing Direct Services
- Building Capacity







**Patient Self Efficacy and Confidence in
Managing Own Health**

Patient Navigation at Chelsea

- Navigator explores a patient's individual barriers and tailors the interventions to them
 - education, motivation, reminder calls, scheduling, interpreting, helping with transportation and insurance issues
- Since 2001, over 16,000 vulnerable patients "navigated" to cancer screening and follow-up care (breast, cervical and colorectal)



Avon Breast Program

- Started in 2001
- 92% of patients referred for abnormal follow up arrived for 1st appt. within 60 days or less
- “One stop shopping”
- 2912 patients served -
 - ❖ including 173 diagnosed with breast cancer



Colorectal Program

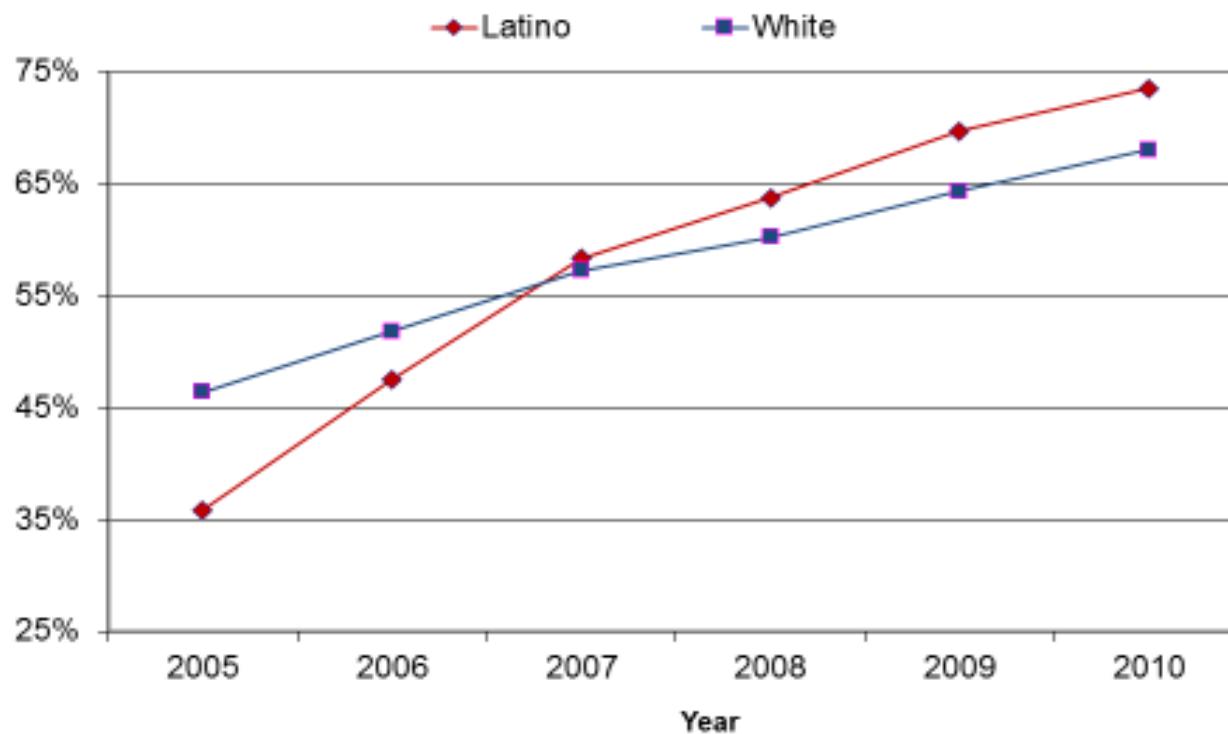
MGH CRC Screening Rates

- In 2005 quality assessment data at MGH primary care practices showed disparities in CRC screening between Latino and White patients
 - Latino 41.1% compared to White 62.1%
 - MGH Chelsea HealthCare Center had the lowest CRC screening rates (35% for Latino patients)
- In 2007 the Colorectal Cancer Screening Program (CRCS) was implemented
 - Through March 2015, 1075 patients have completed colonoscopies
 - Since 2011, 596 polyps have been removed
 - In the past year, 137 colonoscopies were completed and 132 polyps were removed (45 adenomas)

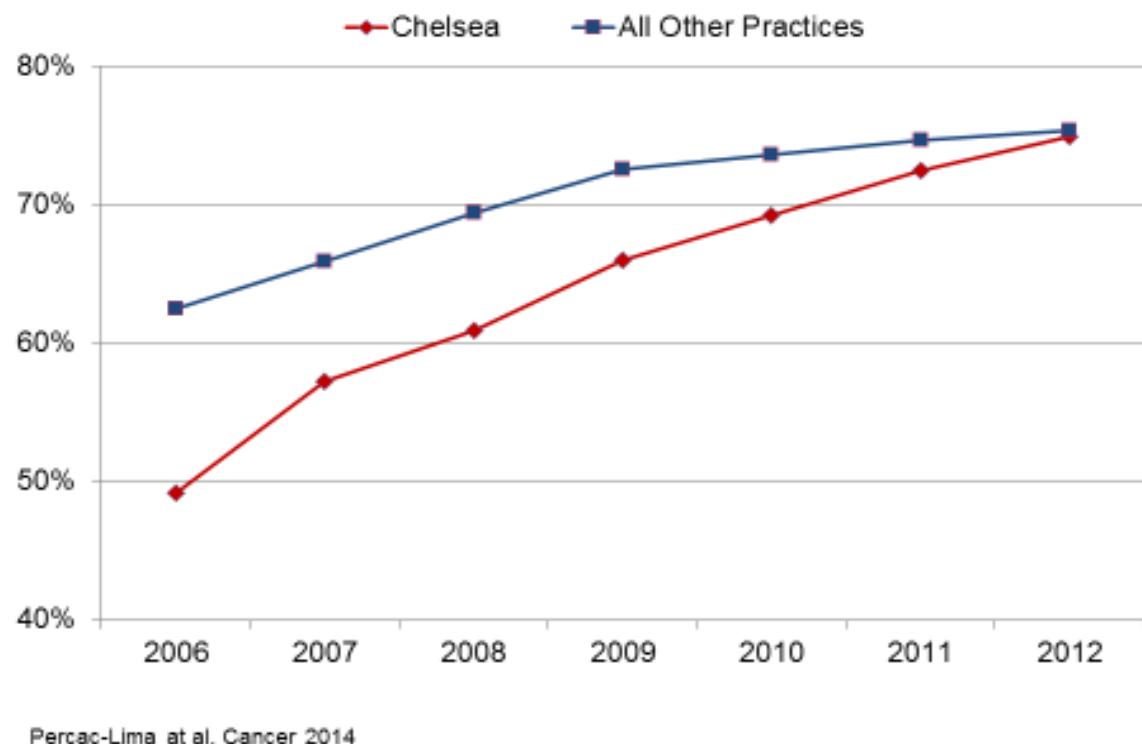
Common Barriers to Care

- Language
- Transportation
- Low Literacy
- Lack of Social/Family Support
- Inability to Take Time Off Work
- Fear
- Lack of Understanding of Importance of Screening
- Different Cultural Beliefs Around Cancer

Colorectal cancer screening rates in Latino patients are now higher than in White patients



Colorectal cancer screening rates at Chelsea are now equal to other practices at MGH





Refugee Screening Project

Komen Breast Program

- The goal of the Komen breast program is to improve breast cancer care in women refugees from:
 - Somalia
 - Bosnia
 - Arabic speaking women from the Middle East and Africa



Methods

All women who self-identified as speaking Arabic, Somali or Serbo-Croatian (Bosnian) and eligible for breast cancer screening were enrolled in a patient navigator program starting in April 2009



Intervention

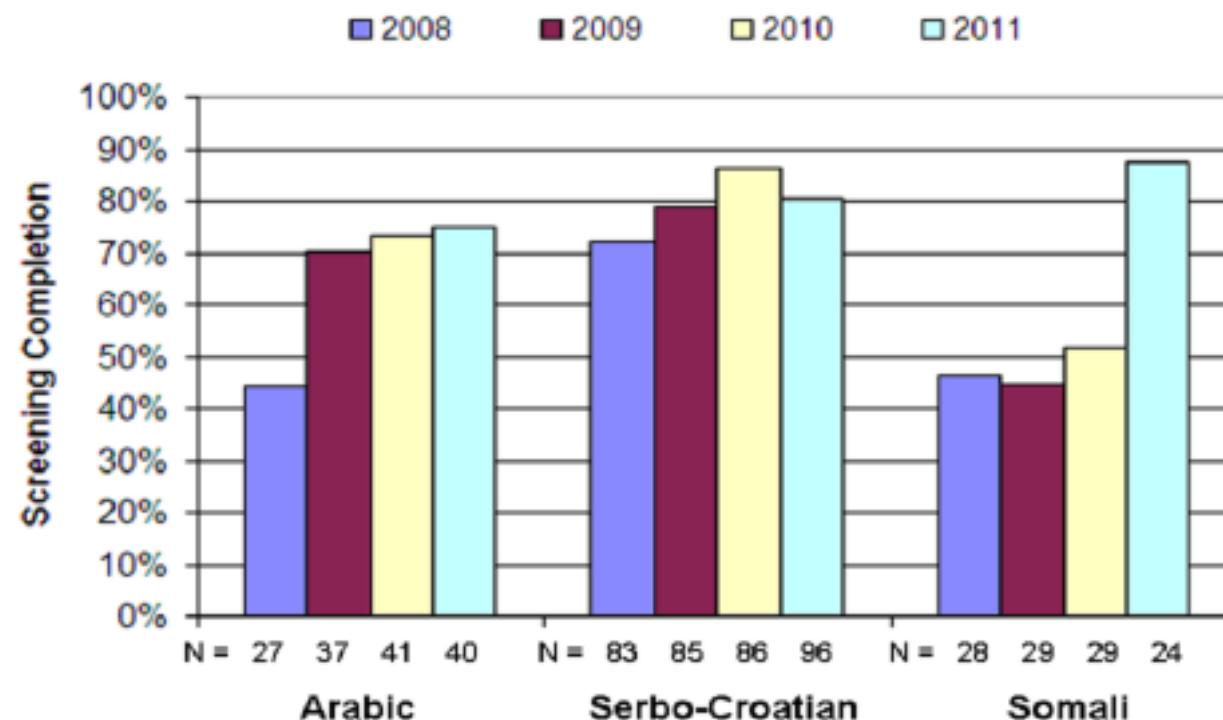
- Culturally-tailored patient navigator program and materials
- Women from the same community who spoke the same language as the patients they served



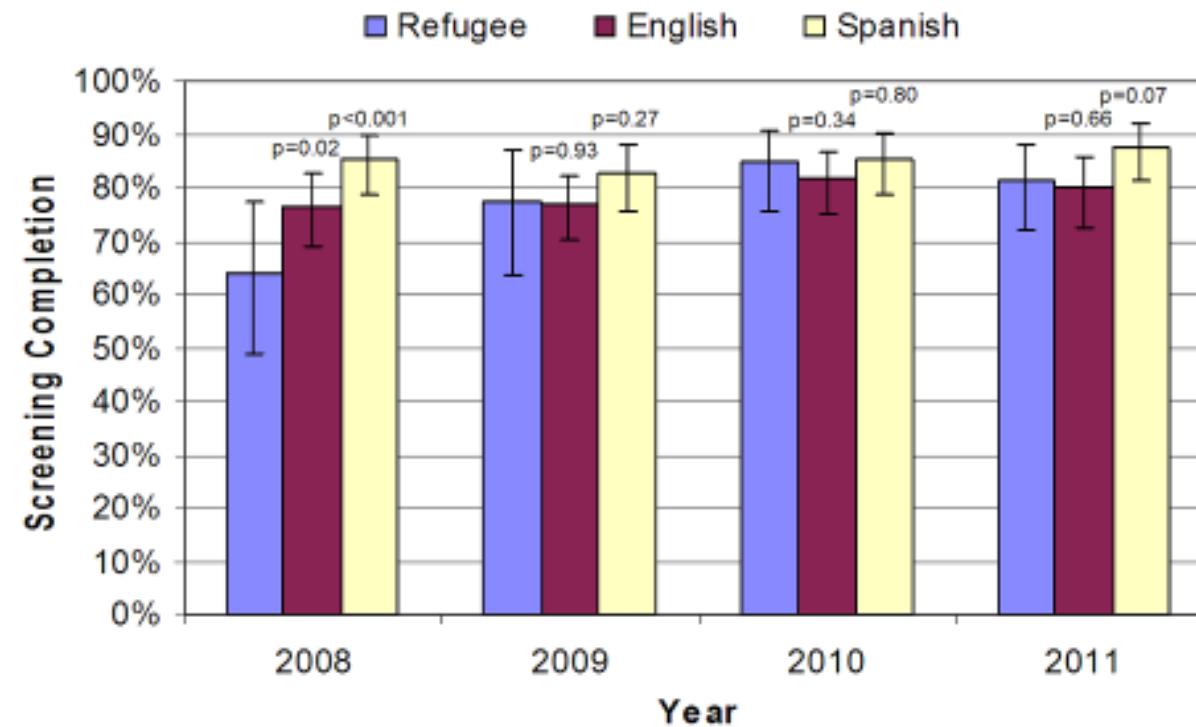
Intervention

- Letter to patient introducing the program with breast cancer screening educational material in native language
- Navigator approaches patients at health center visits or calls them at home
- Navigator explores patient's individual barriers and tailors interventions to them
 - Education, motivation, reminder calls, scheduling, interpreting, helping with transportation and insurance issues
- Education sessions in the community

Mammography Screening %



Results – Adjusted Screening %



Limitations/Challenges

- Finding/keeping patient navigators
- Three different ethnic groups
- Migrant populations
- Immigrants vs. Refugees





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Thank you

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