

2016-2019
University of Miami Hospitals and Clinics
Sylvester Comprehensive Cancer Center
Implementation Strategy



May 30, 2017

Steering Committee Members

Erin Kobetz PhD, MPH

Associate Director for Cancer Control, Sylvester Comprehensive Cancer Center
Senior Associate Dean for Health Disparities University of Miami Miller School of
Medicine

Dorothy Parker MHS

Director, Research Support, Jay Weiss Center - Sylvester Comprehensive
Cancer

Elizabeth Smith DNP, RN

Chief Nursing Officer – Sylvester/UMHC and Lennar Foundation Medical Center

Jerry Goodwin, MD

Chief Medical Officer Sylvester/UMHC

Gustavo Fernandez, MD

Chief Medical Officer Lennar Foundation Medical Center

Christina Pozo-Kadermen, Ph.D

Director, Clinical Operations, Oncology Supportive Care Services

Table of Contents

Table of Contents	2
I. Executive Summary.....	3
Introduction	3
How the Implementation Strategy was Developed.....	3
II. Identified Community Health Needs	4
Health Needs Identified	4
III. Addressing Health Needs.....	5
Cancer Incidence, Mortality, and Screening	5
Availability of Primary Care and Prevention.....	6
Access to Care	7
Healthy Lifestyles: Exercise and Nutrition.....	8
Chronic Disease Management	9
IV. Significant Health Needs Not Addressed	10
V. Conclusion.....	10

I. Executive Summary

Introduction

University of Miami Hospital & Clinics (UMHC) serves as the hospital base for Sylvester Comprehensive Cancer Center, part of the University of Miami Health System (UMHS). With 425,000 square feet, the facility contains 40 inpatient beds, with 19 specialized Stem Cell Transplant bed and 7 ICU-capable beds.

The hospital's cancer care facilities include more than 100 chemotherapy chairs, radiation oncology, psycho-social/integrative medicine, 3-D digital mammography and pediatric oncology. As the main comprehensive treatment unit of Sylvester, 57,000 chemotherapy infusions are provided each year and more than 28,000 radiation oncology procedures.

A variety of illnesses are treated at UMHC's multidisciplinary clinics, such as interventional radiology, Crohn's and colitis, spine care, pain treatment, a wheelchair clinic and radiologic imaging.

How the Implementation Strategy was Developed

The implementation strategy was developed after the comprehensive community health needs assessment (CHNA) was completed. Please refer to the complete CHNA for the full report. Strategies and action plans were developed based on a consensus among steering committee members after input from each of the respective disciplines.

UMHC has developed specific action plans to address the priority health needs of the community served, as identified in the CHNA, as follows:

1. Cancer Incidence, Mortality, and Screening
2. Availability of Primary Care and Prevention
3. Access to care
4. Healthy Lifestyles: Exercise and Nutrition
5. Chronic Disease Management

II. Identified Community Health Needs

Health Needs Identified

The health needs that have been identified in the CHNA as the top priority health needs are as follows:

- 1. Cancer Incidence, Mortality, and Screening.** In 2014, the incidence of all cancers for Miami-Dade County was 400.5 new cases per 100,000 population. The incidence was particularly pronounced in the non-Hispanic black community, which had an incidence of 523.6 per 100,000 population, compared to the Hispanic and non-Hispanic white population, which had incidences of 372.5 per 100,000 and 382.5 per 100,000 respectively. Prostate cancer is the leading form of cancer incidence in Miami-Dade County. Breast cancer has the second highest incidence per 100,000, followed by lung and bronchus and colorectal.

The percent of eligible citizens receiving proper cancer screening varies across four primary tests. The most frequently-administered test was the prostate-specific antigen test, which was given to 69.5% of the male population over 50. This test was followed by mammography with 64.2%, Pap tests with 53.8%, and colon screening with only 16.9% of the population over 50 being properly screened.

- 2. Availability of Primary Care and Prevention.** The nationwide shortage of primary care providers is projected to worsen as our population ages, as fewer medical students choose to practice primary care and access to health insurance coverage increases under the Affordable Care Act. Further exacerbating the shortage are the low rates of reimbursement to providers accepting Medicaid, the national health program for low-income individuals and families. Because the current Medicaid reimbursement rates are low, many providers are unwilling to accept new patients. As a result, Medicaid enrollees and the uninsured often turn to the safety net and charity care for the primary care they need.
- 3. Access to Care.** The interdependence of health outcomes, insurance coverage and ability to obtain appropriate care is widely recognized, but affordability and the lack of employer offerings are major barriers to accessing care. Consistent utilization of health care resources within a community has a direct influence on better health outcomes for men, women and children relative to morbidity and mortality rates for chronic disease and regular maintenance of dental health. Individuals have difficulty accessing care when they cannot obtain information on community resources.

- 4. Healthy Lifestyles: Exercise and Nutrition.** A strong correlation exists between chronic disease and illness and lifestyle. Physical activity and healthful nutrition are key factors in preventing and controlling chronic disease conditions including cardiovascular disease, diabetes, some cancers and obesity.

In 2013, 19% of adults in Miami-Dade County ate five or more servings of fruits and vegetables per day. This percentage has steadily dropped since 2002.

In 2013, 23.8% of adults in Miami-Dade County were obese, which marked a decrease from the 29.3% of county residents who were obese in 2010.

In 2013, 63.6% of Miami Dade-County residents were overweight or obese. This figure represents a decrease in prevalence of overweight/obesity from 2010.

In 2013, 32.7% of Miami-Dade County residents did not participate in any physical leisure-time activities during the past month. This figure represents a decrease in sedentary activity from 2007.

- 5. Chronic Disease Management.** Chronic diseases can often be controlled, but rarely cured. They include conditions such as heart disease and stroke, cancer, diabetes, arthritis, Alzheimer's, back problems, asthma, obesity, allergy and chronic depression. Chronic diseases are the leading cause of death and disability, worldwide. In 2014, the leading cause of death in UMHC's top five (5) primary service areas was heart disease, followed by malignant neoplasms, chronic lower respiratory diseases, cerebrovascular diseases, and diabetes.

III. Addressing Health Needs

1. Cancer Incidence, Mortality, and Screening

UMHC intends to undertake the following initiatives in order to address the significant health need identified relating to cancer incidence, mortality, and screening.

	Actions Intended to be Taken	Anticipated Impact of Those Actions	Resources to be Committed	Planned Collaboration
1	A van has been purchase that will have educational material, resource directors, and a room in which certain screening tests can be conducted. Material and staff will be multi-lingual (Spanish, Haitian Creole). The van will go to neighborhoods documented to have high cancer rates.	Access to cancer information and screening in neighborhoods	Purchase of van Staff Supplies	Community organizations

	Actions Intended to be Taken	Anticipated Impact of Those Actions	Resources to be Committed	Planned Collaboration
2	SCAN360 - an online interactive portal that displays county-level cancer rates and sociodemographic data will be launched. It will also display location of outreach activities, community partners, and cancer resources.	The displays will highlight catchment area communities in greatest need of interventions to reduce incidence and mortality. Location of van will be informed by gaps and needs. Changes in rates will be tracked over time. Will be used by researchers and the public	Programming and computer resources	UM School of Communication Community partners
3	Pilot grants will continue to be awarded to community-based organizations for projects that aim to reduce cancer rates through education and/or screening.	Fiscal Year 2017-2018: X grants will be awarded. Nine were awarded since July 2015.	Funds from Sylvester.	Community partners
4	Analysis of cancer incidence and mortality data to inform interventions and track changes. Continue to acquire data files from Florida Cancer Data System and the Florida Office of Vital Statistics (requires application/approval and DOH IRB review for both)	Identify disparities Pilot data for grants/research projects Use in SCAN360	Purchase of annual data file (\$1,000) and payment of IRB fees (\$x) Staff for programming and analysis	Florida Dept. of Health Florida Cancer Data System Office of Vital Statistics Community partners
5	Screening at health DOCS fairs	Access to health screenings, education and referrals in community settings in Miami-Dade, Broward and Monroe Counties	DOCS budget?	UM Miller School of Medicine Division of Community Service (DOCS)

:

2. Availability of Primary Care and Prevention

UMHC intends to undertake the following initiatives in order to address the significant health need identified relating to the availability of primary care and prevention.

	Actions Intended to be Taken	Anticipated Impact of Actions	Resources to be Committed	Planned Collaboration
1	Continue tobacco cessation classes for patients, employees and the community	Reduced rate of smoking among adults	Staff (salaries) and continued funding from Area Health Education Centers State of Florida?)	UM AHEC Jackson UM Gables campus
2	Promote cancer screening and prevention among employees, and community	Offer free FIT tests to eligible employees and spouses/partners (other tests in future??)	Staff for follow-up	Polymedco (free FIT kits) Dept. of Pathology
3	NPs providing Urgent Care at 11 Walgreens from Dade to Palm Beach County	NPs providing Urgent Care at 11 Walgreens from Dade to Palm Beach County	Staff salaries	Family Medicine – Dr. Falcone leading this effort
4	Patient and Community education seminar related to financial resources and availability	Patients and Community will be educated by financial experts(ie representatives from Medicare/Medicaid, ACS, and copay foundation)	Staff, space and time	Cancer Support Services Department and Community Partners

3. Access to Care

UMHC intends to undertake the following initiatives in order to address the significant health need identified relating to access to care.

	Actions Intended to be Taken	Anticipated Impact of Actions	Resources to be Committed	Planned Collaboration
1	NPs providing Urgent Care at 11 Walgreens from Dade to Palm Beach County	Improve outcome and access	Staff salaries	Family Medicine – Dr. Falcone leading this effort
2	Partnering with JMH Primary Care Center			Dr. Falcone leading this effort.
3	Patient losing their insurance	Social Services assist with other financial options	Staff salaries	Cancer Support Services Department – L. Merheb
4	Expansion of Satellites and its Services	Improves access closer to patients' home	Staff Finance Facility	Multidiscipline

4. Healthy Lifestyles: Exercise and Nutrition

UMHC intends to undertake the following initiatives in order to address the significant health need identified relating to healthy lifestyles and exercise and nutrition.

	Actions Intended to be Taken	Anticipated Impact of Actions	Resources to be Committed	Planned Collaboration
1	Sylvester's Integrative Medicine program and Patient Services departments offer support groups, seminars and workshops on stress management, nutrition, exercise, Lobdell Wellness series. etc.	Patients and caregivers who participate learn effective methods for improving their lifestyle	Staff/salaries External sponsorship of programs, e.g., Lobdell Wellness Series	Cancer Support Services Sylvester Integrative Medicine Program Community partners (e.g., Gilda's Club)

5. Chronic Disease Management

UMHC intends to undertake the following initiatives in order to address the significant health need identified relating to chronic disease management.

	Actions Intended to be Taken	Anticipated Impact of Actions	Resources to be Committed	Planned Collaboration
1	Use UChart to track chronic disease management??		Staff for data analysis	Other departments at Miller School of Medicine and UHealth

IV. Significant Health Needs Not Addressed

As described in detail in the CHNA, five significant health needs were identified during the CHNA process – cancer incidence, mortality, and screening; availability of primary care and prevention; access to care; healthy lifestyles: nutrition and exercise; and chronic disease management.

UMHC has elected to address each of the five significant health needs in this Implementation Strategy.

V. Conclusion

Comments regarding the Community Health Needs Assessment and/or Implementation Strategy can be submitted to UMHC by contacting Administration at e.smith12@med.miami.edu, or by mail to University of Miami Hospital and Clinics 1475 NW 12th Avenue, Room C046, Miami, Florida 33136