

NCCCP DISPARITIES VISION DASHBOARD 2010-2012

The NCI, through public/private partnerships with NCCCP site community hospital-based cancer centers, will expand state-of-the-art cancer care and research to populations experiencing healthcare disparities (those with an excess burden from cancer) across the continuum, from prevention and screening through treatment, follow-up and end of life care.

DEFINITION OF DISPARITIES

Health Disparities: "Different public and private agencies have different definitions of a 'health disparity' for their own program-related purposes; however, these definitions tend to have several commonalities. In general, health disparities are defined as significant differences between one population and another. The Minority Health and Health Disparities Research and Education Act of 2000, which authorizes several HHS programs, describes these disparities as differences in "the overall rate of disease incidence, prevalence, morbidity, mortality or survival rates." The Institute of Medicine publication, "Unequal Treatment" highlights inequities related to access and treatment as major factors in defining disparities.

For the NCCCP, we define the populations affected by health disparities to include racial and ethnic minorities, and other underserved populations: residents of rural areas, women, children, the elderly, persons with disabilities, the uninsured, underinsured and those who are socioeconomically disadvantaged.

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Overall Disparities requirement

All patients screened and diagnosed with cancer by sites are offered treatment – policies in place with annual confirmation
All sites required to implement race and ethnicity tracking using OMB categories

Cross-cutting priority initiatives

Support underserved accrual to clinical trials
Support improved linkages between outreach, treatment, and survivorship navigation with a focus on underserved populations

Consolidated disparities metrics from sites by area of focus (OMB categories to be used for race and ethnicity metrics unless otherwise noted)

| Clinical Trials | Biospecimens | Information technology | Quality of Care | Survivorship | Disparities |
|--|---|--|--|--|--|
| <ul style="list-style-type: none"> % change underserved patient accrual | <ul style="list-style-type: none"> % sites with policies for special handling of specimens for specific populations (e.g., Native Americans) | <ul style="list-style-type: none"> % of sites increasing the data systems where race/ethnicity using OMB categories is collected % of sites that implement data fields and data collection methods to track rural patients | <ul style="list-style-type: none"> CoC RQRS performance metrics using OMB categories (2007 sites) ACS/RQRS Project metrics using OMB categories/rural (2007 sites) % patients unable to afford genetic testing (2010 sites) | <ul style="list-style-type: none"> % of sites that offer Survivorship Care Plans in a language other than English | <ul style="list-style-type: none"> % change # of partnerships focused on underserved % change # of screening events % change # of patients screened for cancer % change # patients navigated |

Key Disparities Activities/Projects

| Clinical Trials | Biospecimens | Information technology | Quality of Care | Survivorship | Disparities |
|---|--|--|---|--|--|
| <ul style="list-style-type: none"> Participate in underserved accrual working group Support CT Navigation project Participate in the Clinical Trials Minority/Rural Matrix (SWOT) analysis | <ul style="list-style-type: none"> Adopt biospecimen handling policies to address cultural and religious considerations Increase culturally-appropriate community/patient education on tissue donation | <ul style="list-style-type: none"> Work with IT vendors as opportunities arise on standardization of race, ethnicity, & rural data fields Provide IT support for outreach strategies to disparate populations (i.e., tracking patient follow-up) | <ul style="list-style-type: none"> Use RQRS data on underserved for program improvement (2007 sites) ACS project to recruit racial & ethnic minority & rural patients (2007 sites) Support Genetics Testing Project (2010 sites) | <ul style="list-style-type: none"> Explore ways to capture OMB or rural categories for hospice referrals and psychosocial screening | <ul style="list-style-type: none"> Identify barriers to care coordination for underserved patients Identify ways to implement rural definition & rural strategies Implement one evidence-based intervention for disparities in any pillar |