Community Outreach and Engagement
Huntsman Cancer Institute

Catchment Area
Huntsman Cancer Institute’s (HCI) catchment area encompasses five states in the Mountain West (Idaho, Montana, Nevada, Utah, and Wyoming), a 524,000 square mile region covering 17 percent of the continental U.S. landmass. The population of the Mountain West is nearly 10,000,000 people, with Utah, Idaho, and Nevada all ranked among the top-five fastest growing states in the 2020 U.S. Census. Of the 169 counties in this region, 158 are rural (< 100 people per square mile), covering 97 percent of the landmass. Over 96 percent of HCI’s cancer patients and 95 percent of our patients accrued to interventional treatment trials live in the Mountain West. HCI is the only NCI-designated cancer center in the Mountain West. This project supported partners in Montana.

Public Health Focus
An estimated 1.8 million new cases of cancer are diagnosed in the United States each year, and there are close to 17 million survivors living today.¹ Cancer survivorship begins at the time of diagnosis, and requires survivors to adjust to an array of new physical, emotional, social, and economic issues. A critical piece for improving the health and quality of life among cancer survivors is advancing primary care provider and care team knowledge around survivorship, while also removing barriers to access care and support services.

Montana is the fifth most rural state in the United States,² and in 2020, Montana’s Department of Public Health and Human Services received funding to examine interventions, education, and practices to support cancer survivors throughout the state. Data for Montana³,⁴ include:

- 6,000 plus new cancer cases diagnosed annually
- 81,000 adults are cancer survivors
- Survivors report poor health two times more frequently than do adults with no cancer history
- 71 percent of survivors completing cancer treatment get the majority of health care from a primary care provider
At a Glance
This Research-Practice-Partnership (RPP) focused on supporting partners across Montana in addressing rural cancer survivorship. The project utilized the Healthy People 2020 MAP-IT framework to develop, create, implement, and evaluate provider and care team education, and survivorship navigation resources and trainings.

Collaborators
Partners on the project included:

- The Center for Health Outcomes and Population Equity (HOPE) and the Cancer Control and Population Science (CCPS) Research Program at Huntsman Cancer Institute. The Center for HOPE brings communities and researchers together to create long-term solutions to prevent cancer and improve health among underserved populations. The CCPS is a comprehensive basic and applied research program that spans the cancer control continuum from etiology, primary prevention, screening, and early detection to continuing care, survivorship, and end-of-life care.

- The Cancer Control Program in the Montana Department of Public Health and Human Services (DPHHS). DPHHS focuses on improving and protecting the health, well-being, and self-reliance of all Montanans. The Cancer Control Program supports prevention, screening, access, and additional support services.

- The Montana Primary Care Association is a nonprofit organization dedicated to improving high-quality, community-based, affordable primary health care in Montana and is the state’s federally designated primary care association.

- OneHealth is a Federally Qualified Health Center in Montana.

OneHealth Overview
- 8 clinic sites
- 5 sites considered very rural
- 9,000 plus patients served annually
- 25 percent of patients are American Indian/Alaska Native

The rural cancer survivorship project is a tangible step to providing much-needed resources to our cancer survivors in small rural towns: those who live 100 miles or more from their doctors, are home-bound patients, and those who suffer in silence, not realizing they can take steps to ease the physical and mental symptoms of cancer and treatment.

—Melanie Frame, OneHealth
Approach

The Center for HOPE has created strong, sustainable partnerships in Utah by committing to the RPP model, which has several key features including shared goals and mutual benefit, mutual respect of expertise, and shared resources and data.

This project provided an opportunity to work with partners in Montana on a rural survivorship project. It utilized the RPP model, and Healthy People 2020’s MAP-IT framework. The project Mobilized partners and a project team; Assessed baseline data, needs and assets; Planned and created provider and care team education sessions and survivorship navigation resources; Implemented curriculum for provider and care team education sessions, and assessment and evaluation plans; and Tracked on-going partner and participant feedback and evaluations.

Six telementoring ECHO sessions provided provider and care team education. The topics included:

- **COVID-19 risks and precautions for cancer survivors**
- **Social and emotional challenges for cancer survivors, and pharmacological treatments**
- **Survivorship care plans and communication between oncologists and primary care providers**
- **Transfer and management of data between oncologists and primary care providers**
- **Young and adolescent cancer survivors**
- **Social and emotional challenges for cancer survivors and caregivers, and community resources to help Montana residents**

Five webinar shorts (30 minutes) provided additional provider and care team education in a shortened format. Topics included:

- **Addressing needs missed during COVID-19**
- **Financial toxicity and cancer**
- **Tobacco and alcohol use and treatment among cancer survivors**
- **Suicidality among cancer survivors**
- **Integrative and complementary health**
- **Nutrition and physical activity among cancer survivors**

Additionally, the project team identified service gaps impacting cancer survivors located in rural areas. To close these gaps, resource and training guides were developed for Community Health Advocates (CHA) at OneHealth to support CHAs’ work to connect and support survivors. As part of this, the project team worked with the OneHealth CHAs to begin implementing processes to record interactions with survivors as well as to connect them to resources using Montana’s state CONNECT referral system.

Implementation Guidance

**Implementation Tip**
Access to accurate electronic data is necessary to identify cancer survivors.

**Implementation Tip**
Establishing processes to identify survivors, engage with survivors to learn more about their barriers and needs, and record survivor interactions in electronic health
records and other databases is important as Community Health Advocates and other staff may turnover.

**Implementation Tip**
Aligning partner goals is key to sustained commitment for continued survivorship support, and future partnership opportunities.

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**References**
1. NIH
2. 2010 U.S. Census Bureau
3. Montana Cancer Registry
4. 2020 Montana BRFSS
5. 2020 HRSA

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**Find Out More**
Community Outreach and Education (COE) at HCI monitors Utah’s cancer needs, coordinates research relevant to the Mountain West catchment area, engages and informs the community, and informs cancer clinical services, research, and policy. COE consists of 14.5 full-time employees who work in outreach, patient education and navigation, and community-engaged research. Examples of our COE activities include a 33-member community advisory board, policy and advocacy, community health and screening events, statewide coalition support and leadership, health promotion, community presentations, patient navigation and community engaged research. Visit our website: [https://healthcare.utah.edu/huntsmancancerinstitute/about-us/community-outreach.php](https://healthcare.utah.edu/huntsmancancerinstitute/about-us/community-outreach.php)

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**COE activities across the translational research continuum**
National Cancer Institute (NCI)-designated cancer centers’ COE efforts should span all cancer center programs, including basic, clinical, translational, and population research. In FY20, NCI issued a call for Cancer Center Administrative Supplements to support COE activities that focus on either basic science or the translation of evidence-based interventions into community practice. The long-term goal of the supplement initiative is to build capacity for cancer centers’ COE programs to adapt and implement evidence-based programs and successfully collaborate with cancer center investigators across research programs and in partnership with community members. To learn more, visit us at: [https://cancercontrol.cancer.gov/research-emphasis/coe](https://cancercontrol.cancer.gov/research-emphasis/coe)