2013-2015
Community Health Needs Assessment and Community Service Plan
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Memorial Sloan-Kettering Cancer Center’s mission is to lead in the prevention, diagnosis, treatment, and cure of cancer and associated diseases through programs of excellence in research, education, outreach, and cost-effective patient care.

As one of the nation’s premier cancer centers, Memorial Sloan-Kettering (MSK) is one of only 41 institutions in the United States to have been designated a Comprehensive Cancer Center by the National Cancer Institute. We support numerous initiatives to benefit our community of patients, caregivers, and their families, as well as neighborhood residents.
Community Health Needs and Program Planning

Our mission drives MSK’s local community initiatives, which seek to improve access to cancer information, prevention, care, and research. In addition, MSK’s clinical and basic research efforts and education and training programs benefit the worldwide community through the advancement of cancer care and treatment.

As a cancer specialty hospital, we assess the cancer-related health needs present in the community to determine whether and how MSK can help to meet these needs. Drawing from cancer incidence and prevalence rates, morbidity and mortality data, patient and program satisfaction surveys, and direct community input via our online and other communication channels, we develop outreach initiatives and programs in response to cancer-related needs in the community, with special focus on reducing the impact of cancer health disparities among minority and medically underserved populations.

The Community We Serve

MSK’s main campus is located in mid-Manhattan with additional outpatient treatment centers in Long Island, Westchester County, and northern New Jersey. Our primary catchment area encompasses 23 counties across the five boroughs of New York City, Long Island, southern New York State, northern New Jersey, and southwestern Connecticut.

A total of 130,949 patients were seen at MSK facilities in 2012, including 119,675 patients (91.4 percent) from the tri-state area (NY, NJ, CT); 9,874 patients (7.5 percent) from other parts of the United States; and 1,400 patients (1.1 percent) from other countries. These patients accounted for 24,598 admissions to our hospital and 541,474 outpatient visits at our combined facilities in Manhattan and the region.

Assessing Our Community’s Health Needs

To better understand the cancer-related health concerns of our community, we collected data from several sources. From January to April 2013, we conducted an online survey of community members, patients, health-care consumers and consumer advocates, nonprofit and community-based organizations, and healthcare providers to gather primary input on the need for cancer care and treatment services in the community. We received nearly 1,500 completed survey responses as a result of our outreach efforts.

Needs Assessment Survey Outreach

- Community Matters newsletter mailed to 60,000+ residents of Manhattan
- Electronic delivery to subscribers of newsletters published by Community Board 8 and Council Member Jessica Lappin (which reach our immediate neighborhood)
- E-mail to 330,000+ subscribers of MSK’s fundraising publication Developments and to 36,000+ subscribers of MSK’s monthly electronic newsletter
- E-mail to an acquired list of 30,000+ individuals in New York City’s outer boroughs, Long Island, and New Jersey
- E-mail to MSK organizational contacts
- Banner advertisement on MSK’s Patient Portal and its online community Connections
- Facebook post to MSK’s 21,000+ friends
- Twitter post to MSK’s 10,000+ followers
- Hard copies of survey available at community events and by mail upon request

We also gathered data from scholarly journals, cancer statistics, research findings, and media coverage for additional input on our community’s cancer-related health needs. Our sources included the American Cancer Society’s 2011 Cancer Facts & Figures, the New York State 2011-2016 Comprehensive Cancer Control Plan, Health and Human Services’ report Leading Health Indicators for Healthy People 2020, and United States Census data, among others.
**Addressing Identified Health Needs**

MSK supports a network of service and outreach programs to address community health issues and serve the specific needs of people at risk for and suffering from cancer in our service area. The institution’s Community Outreach Committee – composed of representatives from more than ten departments within the hospital – meets monthly to coordinate outreach activities, identify and address service gaps, and maximize the efficient use of resources and materials. In addition, an institution-wide Needs Assessment Committee was formed to coordinate the 2013 needs assessment process and adopt an implementation plan.

Key findings from our community health needs assessment* indicate that:

- cancer is the second most common cause of death in the United States
- most Americans do not meet the recommended cancer screening goals for most cancers
- only 54 percent of people over age 65 in our community get appropriate screening for cancer
- the cancer population in MSK’s catchment area is diverse in terms of race, ethnicity, gender, and age
- the cancer types with the highest incidence in the region are similar to those seen throughout the United States, and include cancers of the breast, lung, prostate, and colon
- financial and psychosocial support concerns are significant issues for patients, caregivers, and community members

Based on the results of the community health needs assessment, MSK’s Community Outreach Committee and the Needs Assessment Committee identified and prioritized by consensus issues that MSK can help to address:

- improve understanding of cancer care among community members
- increase cancer screening as recommended, particularly among people over age 65
- improve access to cancer care among minority and underserved populations
- help overcome financial barriers to cancer care by establishing agreements with additional insurance carriers and reducing the misconception that MSK does not accept insurance
- raise awareness of MSK’s clinical advantage in the community through advertising and participation at community events
- improve outreach and communication efforts to educate community clinicians and organizations about cancer services offered at MSK and facilitate reciprocal referrals
- offer more psychosocial support services for patients during treatment (such as access to peer mentors and individual counseling)
- improve communication of patient support services in ways that effectively reach patients

One area that requires further exploration is assessing local physicians’ understanding of cancer care services available in the community and their referral practices. MSK’s clinical data confirm that initial treatment by cancer specialists improves patient outcomes. However, a significant number of survey respondents expressed a perception that primary care and referring doctors are not familiar with or connected to cancer specialty care.
available in the community. We are pursuing several strategies to improve communication with and understanding of primary care and referring doctors’ concerns. The committees also recognized that MSK is limited in its ability to address certain needs identified in the assessment because they are subject to New York City market conditions and external agency control:

- facilitate affordable, patient-friendly, and convenient public transportation to our facilities from regional locations and the outer boroughs
- identify additional affordable housing for patients and their families near our main campus during treatment

Within these constraints, MSK provides transportation and housing assistance to patients and their families on an as-needed basis. MSK’s Social Work department provides referrals to discounted hotel rooms or other lodging options to patients upon request. Limited philanthropic funds are available for eligible patients who meet criteria. To assist with transportation, MSK operates several jitneys to transport patients between sites and negotiates reduced parking fees at garages near our sites. Our staff also helps our patients to complete a New York City Access-a-Ride program application for transportation assistance for medically eligible patients. Eligible patients in need also have access to Metro Cards to cover bus and subway fare, philanthropic funds for transportation, and referrals to community-based organizations that offer funds towards patient out-of-pocket costs. Many travel, parking, and accommodation resources are listed on our website at www.mskcc.org/cancer-care/hospital-information.

**Collaboration and Partnership with Community Groups**

MSK staff members consistently **collaborate with a wide range of organizations** in order to better understand the broad interests and health needs of the community identified within our service area. These groups include:

- Arab American Community Task Force
- Center to Reduce Cancer Disparities, National Cancer Institute
- Certification Commission for Health Care Interpreters
- Community Health Worker Network of NYC
- Health Literacy Resource Center, Literacy Assistance Center
- Language Advisory Committee, New York Immigrant Coalition and New York Lawyers in the Public Interest
- Leukemia & Lymphoma Society
- Long Term Care and Immigrants, New York Immigration Coalition and New York Lawyers in the Public Interest
- Mayor’s Interagency Task Force on Language Access
- Mexican Consulate Coalition
- National Council on Interpreting in Health Care
- New York City C5 Colorectal Cancer Initiative Steering Committee
- New York City Cancer Health Literacy Task Force, American Cancer Society
- New York Language Assistance Working Group
- New York State National Minority Health Council
- Program Advisory Committee, The Brooklyn Center for Health Disparities, SUNY Downstate School of Medicine
- Smokeless Tobacco Working Group, National Cancer Institute
- South Asian Council on Social Services
- Solving Kids Cancer Inc.

Community health needs, including barriers or gaps in service, are reviewed and assessed during regular meetings with these organizational contacts, MSK’s Commu-
nity Outreach Committee, and other MSK committees. Input from these internal and external groups is regularly incorporated into MSK’s community service strategic planning process, both on a departmental and an institutional level.

Integration with Broader Public Health Goals

The New York State Department of Health has identified critical health priorities facing New York residents that the state would like hospitals and other health providers to address between 2013 and 2017. MSK’s community programs and services respond directly to the state’s Prevention Agenda priorities to “Prevent Chronic Diseases” and to “Promote a Healthy and Safe Environment.” As well, the New York City Department of Health follows a comprehensive strategy to address the leading causes of preventable illness and death. MSK’s community services correlate with three Take Care New York priority areas – “Tobacco-Free Living,” “Prevent & Treat Cancer,” and “Healthy Indoor & Outdoor Air.”

Our community service efforts also complement the United States Department of Health and Human Services Healthy People 2020 objectives, which include reducing the overall cancer death rate and death from specific cancer types; increasing the proportion of cancer survivors who are living five years or longer after diagnosis; improving the mental and physical health-related quality of life of cancer survivors; increasing the proportion of adults who receive a cervical and breast cancer screening and/or a colorectal cancer screening based on the most recent guidelines; increasing the proportion of men who have discussed with their healthcare provider whether or not to have a prostate-specific antigen (PSA) test to screen for prostate cancer; and increasing the proportion of people who participate in behaviors that reduce their exposure to harmful ultraviolet irradiation and avoid sunburn.

With more than 12,000 employees residing in the NYC area, MSK is also proud to sponsor numerous health and wellness initiatives that benefit our sizeable employee community. MSK staff members and their immediate family members have access to discounted nutrition and weight management programs, exercise and fitness resources, tobacco cessation counseling, cancer screening, cancer treatment, integrative medicine services, a cancer survivorship program, and stress management resources.

Community Healthcare Resources

A host of healthcare options are available to residents of the New York City metropolitan area, with high-quality public and private hospitals supplemented by a network of health centers and clinics. Many healthcare providers in the New York City area target services to minority and underserved populations in a culturally appropriate, linguistically diverse fashion. MSK is an active member of citywide, statewide, and national coalitions to foster and maintain an efficient and comprehensive healthcare marketplace for community residents.

Evaluation and Communication of Community Programs

MSK’s community programs, collaborative projects, and public education activities are administered through several departments in the institution with coordination from the institution’s Community Outreach Committee. Each department evaluates individual program effectiveness and the Committee evaluates the overall effectiveness of MSK’s outreach initiatives. In order to refine our efforts, we measure and assess community services by tracking program participation rates, conducting participant interviews, and administering participant surveys.

Our community programs are publicized via direct mail to more than 60,000 area residents, in addition to fliers, calendar listings, e-mail communications, telephone information lines, public service announcements, and advertising. Community members who wish to provide input on our community programs may do so by calling the community information line at 212-639-3199; sending an e-mail to communityaffairs@mskcc.org; completing one of the surveys distributed at public events; or contacting a staff member directly.
screening and prevention, “cancer education and outreach,” and “access to care,” which are included in this community health needs assessment and community service plan.

screening and prevention

MSK subsidizes numerous prevention, screening, and wellness activities. These efforts aim to help the community access appropriate cancer screening and make lifestyle changes that can significantly lower a person’s risk of developing cancer, and to reduce the institution’s impact on the environment.

free cancer screenings

Since 1985, MSK has offered free annual screenings for head and neck cancer and skin cancer to promote the message that early detection and regular screenings can improve treatment outcomes. Healthy eating tips and tobacco cessation education are presented to individuals participating in the free head and neck cancer screening events. Approximately 700 people received free cancer screenings in 2012 as a service of our facilities in Brooklyn, Manhattan, Hauppauge, and Basking Ridge, New Jersey.

Tobacco Cessation Services for Patients, Family Members, and the Community

MSK’s Tobacco Cessation Program addresses the unique needs of each individual, taking into account a patient’s readiness to quit smoking as well as treatment preferences and goals. Participants receive behavioral counseling — to build motivation and coping skills to manage urges to smoke — and support in the use of tobacco cessation medications. Services are offered in person and via telephone and are supplemented with educational print materials. Approximately 1,750 patients and family members are treated annually for tobacco dependence.

All staff members of the Tobacco Cessation Program are involved in ongoing research and quality-improvement projects. One example is Queens Quits, a training and program evaluation activity that is funded by the New York State Department of Health’s Tobacco Control Program. Through this program, MSK collaborates with Queens Cancer Center to offer technical assistance and training to primary care physicians in Queens to treat tobacco dependence. In an effort funded by the National Institute of Drug Abuse, the Tobacco Cessation Program has partnered with a small business computer software company to develop an interactive video game to prevent smoking relapse following hospitalization — a high priority for tobacco-dependent cancer patients and other ill smokers.

The Tobacco Cessation Program also reaches key underserved populations through collaborations with community organizations and primary care providers serving diverse populations with high rates of tobacco use. For example, in an effort funded by the National Cancer Institute, the Tobacco Cessation Program has partnered with the New York University College of Dentistry to test new dissemination and implementation strategies designed to improve the treatment of tobacco dependence in 18 federally qualified health centers in New York City that provide dental care to low income smokers.

The Tobacco Cessation Program continues to collaborate with The City College of New York’s Sophie Davis School of Biomedical Education, the Ralph Lauren Center for Cancer Care and Prevention, and the Harold
P. Freeman Patient Navigation Training Institute to train patient navigators to help smokers gain access to existing community-based cessation services.

Another example of an academic-community partnership focused on tobacco cessation is the Tobacco Cessation Program’s collaboration with the Gay Men’s Health Crisis and the Sophie Davis School of Biomedical Education. The Program has identified gaps in service delivery and developed novel approaches to tobacco prevention and cessation among sexual minorities, including lesbian, gay, bisexual, and transgender individuals, with a special focus on those living with HIV/AIDS. The Program also provides community education and supports a wide range of community-based health fairs and cancer screening outreach initiatives.

Finally, the Tobacco Cessation Program is involved in an ongoing collaboration with the South Asian Council for Social Services and the Immigrant Health and Cancer Disparities Service focused on understanding the health perceptions of South Asian immigrant adults who use gutka, a type of smokeless tobacco associated with an elevated risk of oral cancer. This project will guide future efforts to develop and evaluate culturally sensitive efforts to prevent and reduce gutka use.

Observerships and education offered to students and healthcare professionals extend the Tobacco Cessation Program’s reach well beyond the boundaries of the hospital. Educational forums on preventing weight gain following cessation, pharmacotherapy, and the unknown risks of novel tobacco products were offered in worksite settings. A number of MSK’s medical staff serve on New York State and national committees focused on tobacco-control policy, research, and treatment. In addition, the program continues to provide technical assistance to other National Cancer Institute–designated Comprehensive Cancer Centers across the country that are interested in establishing tobacco cessation clinical services. Along these lines, the program recently received a grant to disseminate and implement tobacco treatment guidelines in community oncology care settings.

**Contributing to a Healthy Environment**

MSK continues to identify and implement initiatives to reduce our energy consumption and the amount of waste we produce in order to benefit our neighbors and the environment. We are one of 11 healthcare systems in New York City to participate in the Mayor’s Carbon Challenge to reduce carbon emissions by 30 percent by 2019, and we continue to invest in energy efficiency and conservation measures. These include lighting upgrades, such as the installation of energy-saving light bulbs in our parking garage, and the installation of a system to reduce energy consumption in operating rooms during off-hours. In 2012, we began the expansion of our recycling program to include more types of plastic. We also continued to compost unused food supplies from our cafeteria and to collect used fryer oil for reprocessing into biodiesel fuel through the Doe Fund.

Our material donations program has also expanded. Last year we sent over five tons of surplus equipment to hospitals in need through our partnership with the Afya Foundation, which awarded MSK a visionary award in recognition of our program.

In addition, we continue to encourage staff to use mass transportation, carpooling, and bicycles in order to alleviate traffic congestion. In 2012, we initiated a network of local hospitals who similarly embrace green initiatives to share best practices and identify potential opportunities for collaboration within the community. Our institutional green initiatives were recognized with a 2013 Partner for Change with Distinction award from nonprofit organization Practice Greenhealth.
New Initiatives to Support Screening and Prevention

In 2013, MSK initiated the Lung Cancer Screening Program, which provides low-dose computed tomography (CT) screening for longtime smokers between the ages of 55 and 74. Eligible individuals receive an initial CT scan, then follow-up scans one and two years later. The scans are interpreted by MSK radiologists who are specialized in reading lung CT scans. If an abnormality is detected, MSK physicians can use minimally invasive techniques to take a biopsy and, if cancer is detected, expertly treat the disease.

To help people determine whether screening will benefit them, MSK has developed a lung cancer screening decision tool that is completely free and confidential. The online questionnaire is accessible at www.mskcc.org/lungscreening.

Supporting healthy behavior change for our community of patients, employees, and others is critically important to MSK. We recently partnered with the NYC Department of Health and Mental Hygiene’s Healthy Hospital Food Initiative (HHFI), which addresses four specific areas: beverage vending, food vending, patient meals, and cafeteria meals. In 2012 we received the HHFI’s Silver Star award in recognition of successful implementation of the initiative’s standards for patient meals and beverage and food vending machines that promote a healthier food environment.

Each vending machine at MSK’s campus in Manhattan now offers no more than two slots with high-calorie beverages, which must be 12 ounces or less and placed toward the bottom of the machine, and at least two slots with water placed at eye level. In addition, all of the snacks offered in our vending machines are now less than 200 calories per package, and low in sugar, sodium, and fat content.

We are currently making remarkable progress with our cafeteria meals standards. Some specific changes we have made in our cafeteria include offering more whole grain options, adding healthy value meals, and providing fresh fruits at various stations in the cafeteria. Our WisePick meal is lower in sodium and fat, and includes a lean protein, whole grain, and vegetable. We also repositioned higher-calorie, higher-fat snack foods away from the cafeteria entrance and checkout line.

CANCER EDUCATION AND OUTREACH

MSK sponsors or participates in numerous programs and educational initiatives to help the community to better understand and manage cancer. Highlights of activities in 2012 include the following.

Educational Events

We sponsor a free series of talks for the community called CancerSmart that provides information about the latest developments in cancer treatment, research, and patient support. Programs are archived for viewing on our CancerSmart website, www.cancersmart.org. In 2012, approximately 475 people attended four talks.

In celebration of Breast Cancer Awareness Month, Memorial Sloan-Kettering sponsored a Breast Cancer Awareness Fair open to the public in October. Representatives from a variety of departments provided information and educational materials on cancer prevention, screening, and treatment.

MSK hosted four educational survivorship celebrations in observance of National Cancer Survivors Day. Approximately 400 people attended the event held in Manhattan; 1,050 attended the event on Long Island; 375 attended the event in New Jersey; and 275 attended the event in Westchester, NY.

In November 2012, our seventh annual student-teacher seminar was held with leading Memorial Sloan-Kettering researchers who highlighted current “hot topics” in cancer research, explaining how the latest developments in genetics, chemistry, and other areas of science contribute to better cancer treatments. Approximately 85 people attended in person and 214 via webinar.

MSK’s Regional Care Network hosted or participated in a wide range of community outreach programs and educational events. Several thousand people were reached through these efforts in 2012. Topics covered included Ovarian Cancer: Know the Signs and Symp-
toms; Osteoporosis and Cancer; Newest Trends in Breast Cancer Treatment; Skin Cancer Awareness; Advances in the Diagnosis and Treatment of Lung Cancer; Update on Blood Cancers; Women’s Health; Head and Neck Cancers; Common Sexual Health Issues for Men with Cancer; Physical Fitness: Reducing Risk in Cancer Survivors; What Should I Eat? Nutrition Following Cancer Treatment; and Managing Side Effects of Radiation Therapy. Many of the educational programs were presented in collaboration with community-based organizations, colleges, and hospitals, such as the Shinnecock Reservation, Molloy College, Bernards Township Department of Health, and Phelps Memorial Hospital.

Educational Resources
MSK’s newsletter, Bridges: Connecting Cancer Survivors, is a forum for patients and their families to share experiences, gain insight about coping with challenges that arise after cancer treatment, and learn about valuable resources available for them. Bridges is available online at www.mskcc.org/bridges and 7,000 print copies are disseminated each quarter as a free resource.

MSK’s website has more than 12,000 pages devoted to patient care, research, and education. The majority of these pages contain information about advances in research and treatment that will benefit people with cancer, now and in the future. Our website receives more than 4 million unique visitors each year who are seeking information and guidance related to cancer and our experts, programs, and services.

The About Herbs, Botanicals, and Other Products database – an online consumer health library maintained by the Integrative Medicine Service on MSK’s website – is available free of charge and provides a wealth of evidence-based information about herbs, botanicals, supplements, and other products. In 2012, there were over 1.6 million views of the database’s pages by more than 650,000 unique visitors. The service also developed and launched an About Herbs app for smart devices in September 2012. As of the end of the year, the app was downloaded 50,000 times.

Researchers at MSK have pioneered the use of prediction tools known as nomograms to help patients and physicians make important treatment decisions. These free online tools are based on information from thousands of people with cancer. They can be used to predict treatment outcomes for more than a dozen types of cancer, or assess risk based on specific characteristics of a patient and his or her disease.

In addition to the traditional methods of online community education and outreach, MSK has become increasingly involved in the use of web- and social-media-based methods for outreach, education, and training. In the last two years MSK has substantially redesigned its website to provide a broader range of educational and informational tools to the community. Information and dialogue are now provided through Facebook, YouTube, and Twitter, and more than 4,000 hours of video content is available on the MSK website.

Educational Services
MSK’s Resources for Life After Cancer (RLAC) offers the largest and most comprehensive programming for adult cancer survivors in the New York City area. RLAC provides current and up-to-date information for cancer survivors and their families on insurance and legal issues, quality-of-life programming for optimal symptom management, and a selection of diagnosis-specific groups online and in person that are co-led by social workers, nurses, and physical therapists. RLAC also
offers programs for specific populations such as men, women, young adults, and adult survivors of childhood cancers. All programs are free and open to the community. In 2012, RLAC provided 141 programs for cancer survivors and their families.

MSK’s Integrative Medicine Service provides free clinical services for our hospital’s inpatients. During 2012, we provided 8,587 inpatient therapies, which included music therapy, touch therapy, acupuncture, yoga and yogic breathing, meditation and guided imagery, karate, and dance.

Outpatient integrative medicine consultations are offered to anyone in the community free of charge. These consultations help advise clients on the various integrative medicine therapies we offer at our outpatient facility and which of these therapies might help address their specific needs. There were 332 consultations provided in 2012. Integrative medicine services are available to outpatients and members of the community on a fee-for-service basis.

Integrative Medicine’s Touch Therapy for Caregivers is a course offered free of charge to inpatients and their family members once per month. A video of the course is available for free on our website. In addition, Nutrition and Cancer Basics classes are also offered once every other month free of charge to anyone in the community.

New Education and Outreach Initiatives
In addition to continuing our regular educational programs and services for both internal and external audiences, we plan to offer several new educational and outreach initiatives over the next three years. For example, we are revamping patient education materials with the goal of making them available online and as handouts at community events. We also look forward to advancing our efforts to provide targeted outreach to the lesbian, gay, bisexual, and transgender (LGBT) community.

MSK is one of a select group of healthcare facilities nationwide to be named a leader in LGBT healthcare equality in the 2013 Healthcare Equality Index (HEI). The HEI is an annual survey conducted by the Human Rights Campaign Foundation, the educational arm of the country’s largest LGBT organization. Facilities awarded this distinction must meet key criteria for equitable care, including non-discrimination policies for LGBT patients and employees, a guarantee of equal visitation for same-sex partners and parents, and LGBT health education for hospital leadership staff.

ACCESS TO CARE
MSK’s singular focus is to support a high standard of care for people with cancer through state-of-the-art patient care and clinical research, including targeted services for minority and medically underserved populations. In order to support access to quality care throughout the world, our training programs prepare the next generation of physicians, scientists, and other healthcare professionals for leadership roles in the life sciences and medicine. Examples of initiatives to expand access to care include the following.

Insurance Advocacy
In order to provide access to the cancer care offered by MSK to as many patients as possible, we continue to pursue relationships with all of the major health plans. With the recent addition of the Health Insurance Plan of NY as a contracted payer, we now have relationships with all of the major national and local commercial health plans. We also have contracts with most of the national transplant and specialty networks that serve cancer patients who need a bone marrow transplant.

We have enhanced our outreach efforts to increase patient access to MSK by engaging in a proactive program to expand access to socioeconomically disadvantaged patients. As a result of those efforts, MSK is now the fourth leading provider of Medicaid cancer services in New York State.

We are endeavoring to develop relationships with our area Medicaid Managed Care plans to ensure continued access for Medicaid beneficiaries. To that end, we have been working with the Department of Health to develop a demonstration project to provide cancer patients with Medicaid access to an NCI-designated Comprehensive Cancer Center. Recently, we have been successful
in negotiating contracts with two major local Medicaid Managed Care plans. We are also reaching out to all of the local health plans on the New York health insurance exchange that do not currently contract with MSK in order to help their members access our services.

**Financial Assistance Program**

MSK is committed to providing financial assistance to uninsured and underinsured patients in need. Our Financial Assistance Program helps uninsured and underinsured patients who cannot get publicly available health insurance or cannot afford to pay for their medical care. It is the intention of the hospital to offer financial assistance to our most medically and financially needy patients.

Each application for assistance is handled confidentially and requires the cooperation of the applicant. Hospital and physician fees can be reduced for patients who qualify to pay an out-of-pocket amount. Fees can be totally forgiven if it is determined that a patient cannot afford to pay any amount, in which case the amount that insurance pays for insured patients will be accepted as payment in full. Aid is given based on the patient’s household income and family size.

In order to help a broad range of patients, our income eligibility guideline for free care is 500 percent of the federal poverty level — well above the required level of 300 percent of the federal poverty level. A patient may also qualify for assistance even if his or her income is greater than the upper limit. We understand each patient has a unique financial situation and encourage patients to contact our Patient Financial Services Department for assistance.

The Financial Assistance Program utilizes several strategies to increase patient awareness of the program. These efforts include placement of program brochures in all patient registration areas; mailed notification inserts in each patient’s first bill; and ongoing training for billing department staff on communicating financial assistance services. In 2012 there were 1,163 patients who applied for financial assistance, with 48 percent of cases resulting in no charges to the patient and 20 percent resulting in reduced charges. Patients and family members may contact the Financial Assistance Program at 212-639-3810 to learn more.

**Clinical Research Program**

MSK conducts one of the largest cancer clinical research programs in the world. Clinical research at MSK combines the efforts of laboratory and clinical investigators in various disciplines and departments to improve the prevention, diagnosis, and treatment of cancer. At MSK, patients and researchers are typically involved in more than 1,000 clinical research studies at any given time, and nearly 70% of them are therapeutic interventional clinical trials.

Current efforts are focused on streamlining our clinical research program, which will allow additional patients to participate in more trials, and also bring novel compounds and therapies to those who can benefit from them in a timely manner.

**Programs to Reach Diverse Populations**

MSK’s Partnership for Community Outreach Program (PCOP), a collaborative effort with The City College of New York, works to establish, strengthen, and sustain relationships with key segments of the community in order to define and address priorities and concerns about cancer health disparities. PCOP provided interactive presentations on colon cancer screening at ten senior centers in Harlem and Upper Manhattan for a total of 115 seniors in 2012. PCOP also participated in Harlem Week 2012, a well-attended annual event, to distribute cancer prevention and screening information to residents of the Harlem community.

In addition, MSK’s Survivorship Initiative, with support from LIVESTRONG, partners with the Queens Cancer Center to expand survivorship services to underserved populations. The Survivorship Initiative addresses the physical, psychological, and information needs of patients who have completed treatment and conducts research to benefit survivors nationwide. The program is dedicated to helping cancer survivors live their lives to the fullest after treatment and offers comprehen-
sive follow-up care for many MSK patients.

The Survivorship Initiative also provides consultations for other cancer centers, health systems, and hospitals interested in developing their own survivorship programs. In 2012, MSK Survivorship Initiative experts met with representatives from 29 institutions worldwide to help them learn more about MSK’s program, in addition to helping numerous organizations throughout MSK’s service area.

**Breast Examination Center of Harlem**

MSK continues to staff and operate the Breast Examination Center of Harlem. The Breast Examination Center of Harlem (BECH) provides breast and cervical cancer screening examinations, counseling, and patient follow-up services to uninsured women at no out-of-pocket cost. In 2012 more than 4,000 patients accessed services at BECH.

In 2012, BECH referred 105 uninsured women for routine or diagnostic colonoscopy at no cost. Uninsured women who came to BECH for cancer screening services were also provided with referrals to smoking cessation programs and literature to help them quit smoking.

BECH staff also provides education and outreach activities in the Harlem and surrounding communities to increase awareness about cancer screening services, prevention, treatment, and research. All events are free to the public. In 2012, outreach activities included participation in 72 community health fairs, cancer information sessions, and seminars throughout New York City. For example:

- BECH collaborated with the women’s group at St. Luke’s Episcopal Church’s during their annual health forum. As a result of this month-long outreach effort, 45 women received information about cancer prevention and wellness and the services that BECH offers.
- BECH collaborated with community partners on the 22nd annual Living with Cancer Conference for cancer survivors and their caregivers.
- In partnership with MSK’s Office of Diversity Programs, BECH coordinated three community education seminars at the Brooklyn Tabernacle of New York on cancer screening, nutrition, patient communication and resources, and the financial aspects of cancer care.
- BECH collaborated with community partners to host a conference called *Spring into Health* during Minority Cancer Awareness Week in April. The program included presentations on breast cancer screening, colorectal cancer screening, and nutrition. Approximately 60 people attended.
- Six second-year physician residents from New York Hospital were trained in GYN services by BECH’s Nurse Practitioner Coordinator.
- BECH hosted a delegation from the All China Women Federation and a group of health professionals from Syria to share expertise in running a successful screening program for minority and economically disadvantaged women.

**Ralph Lauren Center for Cancer Care and Prevention**

MSK has also endeavored to improve support of outpatient populations who are historically underrepresented. In addition to collaborative activities with Queens Cancer Center, which serves a mixed Hispanic/Latino and African-American population, and SUNY Downstate, which
serves a predominantly African-American population, MSK took over sole ownership and management of the Ralph Lauren Center for Cancer Care and Prevention in East Harlem in 2011. The Ralph Lauren Center provides high-quality cancer screening and treatment services to the medically underserved, with the goal of eliminating barriers to care and reducing health disparities. The facility conducted 11,217 patient visits in 2012. Sixteen percent of these visits provided care to uninsured patients and 57 percent to patients on Medicaid.

In addition to its clinical services, the Ralph Lauren Center provides culturally appropriate navigation, and psychosocial, rehabilitative, and palliative care. Financial navigators provide financial counseling and assistance with accessing health insurance and charitable funding available for patient care needs. Patient navigators help underserved patients and family members to access services and overcome barriers to care.

In 2012, the Ralph Lauren Center expanded its navigation efforts to include nurse navigators who assist patients from the time of diagnosis to completion of treatment and beyond. Nurse navigators meet with each patient, providing much-needed education, referrals, and support with the goal of reducing hospitalizations, increasing treatment compliance and completion, and enhancing quality-of-life and survivorship.

The Ralph Lauren Center fills the gap in access to cancer treatment that disadvantaged patients experience following a diagnosis. In 2012, cancer treatment services doubled in volume at the Ralph Lauren Center. The center also expanded its breast, gastroenterology, and gynecology services to accommodate higher patient volumes.

In addition to receiving a grant from the New York City Council to provide colonoscopy screening for uninsured patients, the Ralph Lauren Center was awarded Article 6 designation by New York State as a healthcare facility focused on education, prevention, and outreach. The site effectively reached out to over 10,000 individuals, 300 physicians, and 100 community health centers. The Ralph Lauren Center established partnerships with FEGS Health & Human Services System, the American Society of Clinical Oncology (ASCO), and 1199 SEIU Unit-ed Healthcare Workers East in further pursuit of reaching underserved populations.

Dr. Gina Villani, CEO and Medical Director of the Ralph Lauren Center, was chosen as the Chairman Elect for ASCO’s Health Disparities Committee and serves on ASCO’s Governmental Relations Committee and Cancer Prevention Committee in order to inform policy reform and advocate for the underserved.

Moving forward, the Ralph Lauren Center will work to increase utilization of its services, improve patient compliance with cancer treatments, and continue advocacy concerning payment reform and improved care delivery models for the underserved. Over the next several years we expect to significantly enhance our ability to serve the community of East Harlem and enroll patients in clinical trials at this facility.

**Targeted Outreach to Immigrant Groups**

MSK’s Immigrant Health and Cancer Disparities Service (IHCD) works to identify the causes of health and cancer disparities among underserved immigrant populations and to develop solutions to alleviate them. Several major outreach initiatives administered by the IHCD to address immigrant health and disparities are:

- The Arab Health Initiative provides patient education in Arabic, helps patients to access healthcare services, and conducts research to improve health outcomes among Arab Americans. Its premier service, the Arab American Breast Cancer Education and Referral (AMBER), provides education and coordinates breast cancer screening for Arab American women in New York City in ways that are culturally and linguistically appropriate. In 2012, AMBER educated approximately 1450 women and 100 teens, coordinated screening for over 400 patients, and provided 20 cancer patients with navigation and support services to help them overcome barriers to treatment.
- The primary aim of the Integrated Cancer Care Access Network (ICCAN) is to address social and economic concerns that affect the health of economically and medically underserved immigrant cancer patients in order to improve treatment outcomes.
Multilingual facilitators meet with patients at 11 different hospitals throughout New York to address patients’ psychosocial and socioeconomic needs by connecting them with insurance, transportation, food and nutrition, legal, financial, and psychosocial support resources. The program, which has relationships with more than 300 community-based organizations, helped more than 850 patients in 2012.

- Food to Overcome Outcomes Disparities (FOOD) is working to improve access to nutritious foods among immigrants and minorities with cancer and other chronic illnesses to help them complete medical treatment. FOOD maintains several pantries in Manhattan, Bronx, Queens, and Brooklyn, serving more than 350 patients and their families, and distributing more than 1,500 bags of nourishing food in 2012.

- The Health Fair Program offers an important gateway to the healthcare system for many medically underserved people. Our health fairs provide thousands of immigrants and other medically underserved individuals with free health screening services, health counseling, and referrals to primary care providers who can help prevent and manage chronic diseases such as diabetes, high blood pressure, high cholesterol, and dental disease. In 2012, we conducted a total of ten community health fairs around the city and provided services to nearly 450 community members.

- The South Asian Health Initiative (SAHI) is a partnership of community and faith-based organizations, public health practitioners, healthcare providers, researchers, and advocates organized in response to the growing number of South Asian immigrants in the United States and their particular health needs. SAHI facilitates the delivery of culturally and linguistically sensitive health services to the large and growing South Asian community living in the United States. SAHI is co-directed by the South Asian Council for Social Services.

- The Taxi Network contributes to research, prevention efforts, and interventions addressing health issues among the NYC taxi driver community. There are over 230,000 taxi drivers in the United States and nearly 50,000 are in New York City. Taxi drivers are at great risk for poor health, with increased risk for cancer and cardiovascular disease due to stress, diet, sedentary lifestyle, environmental exposures, poor healthcare access, and safety concerns. The Taxi Network assesses the health needs of this community and taps into the many assets of the New York City taxi driver community to work toward eliminating health disparities in this at-risk group.

- Ventanilla De Salud (Health Windows) was created by the Mexican Consulate as a collaboration between government and private organizations to eliminate barriers to healthcare in the growing Mexican-American population. MSK’s Immigrant Health and Cancer Disparities Service serves as the lead agency for this program, and partners with the Mexican Consulate to provide disease prevention activities for Mexican families in New York City. More than 1,000 individuals benefited from this program in 2012, which included referrals for social services and support.

The Immigrant Health and Cancer Disparities Service staff also participated in extensive research activities in 2012, including:

- Two studies looking at the HPV vaccine, including a study to assess attitudes and barriers that exist around the implementation of evidence-based practices for cancer screening and prevention among community-based primary care providers serving large Latino patient populations, and a study that
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focuses on the knowledge, attitudes, beliefs, and barriers that exist around childhood HPV vaccination among Latino immigrants and the general barriers Latino immigrant parents face in accessing health-care services for their children.

• A collaborative study with Fox Chase Cancer Center in Philadelphia to develop targeted community education programs that can be used in specific populations and language groups. IHCD will conduct focus groups to tailor the curriculum to Chinese-American immigrant populations.

• A study to investigate colorectal cancer screening practices among physicians who serve Arab Americans.

The Immigrant Health and Cancer Disparities Service will participate in the following research activities in 2013:

• A study of the impact of food vouchers, grocery home delivery, and hospital-based food pantries on cancer treatment, quality-of-life, food supply, and nutritional status.

• A trial to assess the effectiveness of the Integrative Cancer Care Access Network (ICCAN) compared to usual and customary care services to determine whether ICCAN is helping to increase the number of patients who complete cancer treatment and to improve patient quality-of-life.

• A pilot study of paan and gutka smokeless tobacco use and dependence levels among South Asian immigrants in New York City.

Training of Health Professionals, Students, and Allied Professionals

Training and education are mainstays of MSK’s mission that benefit the delivery of cancer care globally. We offer educational opportunities at the MD and PhD levels, through students at the high school level.

>> Gerstner Sloan-Kettering Graduate School of Biomedical Sciences

Our doctoral program trains basic laboratory scientists to work in research areas related to human disease, with a focus on cancer. The school admitted its first class of six students in 2006 and has become one of the premier training grounds for cancer biology and a model for training biomedical scientists. Today, more than 50 students are engaged in thesis work in the laboratories of our faculty. Four students graduated in May 2012.

>> Weill Cornell Graduate School of Medical Sciences, Sloan-Kettering Division

A collaboration between the Weill Cornell Medical College and MSK’s Sloan-Kettering Institute (SKI), our school trains future generations of biomedical researchers. SKI’s graduate educational programs offer a unique and comprehensive program in the study of biomedical sciences and the management of cancer. In 2012, 55 students received their PhD degrees from Weill Cornell Graduate School of Medical Sciences.

• Sponsored collectively by the Sloan-Kettering Institute, The Rockefeller University, and Weill Cornell Medical College, the Tri-Institutional MD-PhD Program trains physician-scientists to become leaders in biomedical research.

• The Tri-Institutional Program in Computational Biology and Medicine is a collaborative effort among Memorial Sloan-Kettering, Cornell University in Itha-
ca, and Weill Cornell Medical College. Our program is training a new breed of scientists to use computational and analytical methods to solve complex problems in biology.

- Our Program in Chemical Biology is a collaborative effort among Memorial Sloan-Kettering, Weill Cornell Medical College, and The Rockefeller University that trains future scientists to use chemical tools and approaches to solve problems in biology.

>> Training for Fellows, Residents, and Clinical Observers

MSK provides highly specialized educational and training opportunities for physicians pursuing advanced training in oncology and cancer-related disease, with a dual focus on both patient care and clinical research. We offer training in approximately 80 clinical programs. Approximately 1,700 physicians trained at MSK in 2012.

MSK also offers a Clinical Observer program through the Office of Graduate Medical Education. Generally, a Clinical Observer is a physician, dentist, or clinical doctor of philosophy who desires to visit Memorial Sloan-Kettering for a period ranging from one day to three months. Over 550 Clinical Observers visited Memorial Sloan-Kettering in 2012.

>> Continuing Medical Education

In 2012, more than 2,000 participants registered for Continuing Medical Education (CME) Program courses at MSK. The aim of CME Program courses is to enhance professional knowledge, with the immediate goals of stimulating new research ideas and improving patient care and treatment outcomes.

The CME Program also sponsored numerous CME courses designed to address unmet needs in different communities. Examples of such CME courses include:

- Achieving Successful and Productive Academic Research Careers: Building Your Academic Portfolio—a course jointly sponsored by the CME Program, the Weill Cornell Medical College Office of Faculty Diversity, and The Rockefeller Institute for Medical Research. This CME course successfully built capacity and interest among researchers who are underrepresented in academic medicine. It is now an annual course accredited by the CME Program. There was no registration fee to attend the course.

- Safe Zone LGBT Allies Training—a course sponsored by the CME Program that helped participants to learn about lesbian, gay, bisexual, and transgender (LGBT) identities, understand LGBT-related institutional climate issues, describe the role of an LGBT Ally, and acquire the skills needed to serve as an LGBT Ally. This is an important ongoing educational initiative to encourage community sensitivity and awareness. There was no registration fee to attend this activity.

Also in 2012, the CME Program added to its free, online educational offerings posted at www.mskcc.org/cme. A primary goal of our online CME activities is to provide community practitioners with important information about the diagnosis and treatment of various cancers that they may be confronted with in their practice.

MSK’s regional sites provided numerous CME opportunities for health professionals in their local areas in 2012. Topics included: Progress in Cervical Cancer Screening: 2012 Guidelines; Ovarian Cancer: Know the Signs and Symptoms; Personal Genomes and Cancer: The New Frontier; Understanding Clinical Trials and the Role of the Primary Care Physician to Increase Accruals to Trials; Next Steps: Transitioning to Cancer Survivorship; Advances in Diagnosis and Treatment of Lung Cancer; and Updates on Non-Hodgkin’s Lymphoma. Several clinical staff members presented at Intersection of Law and Medicine in End-of-Life Care, a program for physicians and attorneys held at the professional conference Palliative Care Evolves: Meeting Human Needs in a Changing World.

>> Continuing Education for Nurses

Continuing Nursing Education at MSK provided courses on topics such as adult and pediatric chemotherapy and biotherapy, radiation therapy, end-of-life care, care management of elderly patients with cancer, and neuro-oncology. A total of 631 nurses from MSK and elsewhere attended our courses in 2012.
>> Medical Student Education

MSK offers two main programs for medical students—a four-week elective program for students in their final year of medical school and an eight-week Summer Student Fellowship Program for students in their first or second years. The elective program offers a hands-on introduction to clinical training under the supervision of our fellows and faculty, while the eight-week summer research program provides a closely-mentored experience in research and clinical oncology designed to enhance the students’ knowledge about cancer and promote future interest in oncology. Approximately 430 students participated in these educational programs in 2012.

The Summer Pipeline Program is a companion program to the Summer Student Fellowship Program that provides funding and research opportunities for under-represented minority medical students to participate in an eight-week summer research program. A total of 26 African-American, Hispanic, and Native American medical students participated in 2012.

>> Educational Opportunities for College and High School Students

MSK’s Sloan-Kettering Institute hosts a small, highly selective internship program for undergraduate and graduate students interested in experiencing what it is like to work as a research technician. This ten-week summer program allows students to apply the knowledge and skills they have acquired in their academic coursework and previous laboratory experiences in one of the Institute’s research labs or core facilities. Six students participated in the program in 2012.

The Summer Clinical Oncology Research Experience (SCORE) is an eight-week program offered to female undergraduates and post-baccalaureate students in the Continuum of Undergraduate Research Training program at City College of New York. The EnCORE program is a continuation of the SCORE program that is open to students that distinguished themselves during the SCORE program. The goal of both programs is to encourage the participation of women in clinical cancer research. In 2012, we accepted six students in the SCORE program and two in the EnCORE program.

The Clinical Oncology Open Learning (COOL) Scholars program is a month-long summer internship program designed to encourage female undergraduates to consider careers as oncology physicians. In 2012, nine COOL scholars were placed at MSK’s five regional facilities.

The Summer Exposure Program for high school students is a six-week program designed to expose under-represented minority high school students to careers in medicine and research. In 2012, ten students participated in the program from the High School for Math, Science, and Engineering in Manhattan, and the World Academy for Total Community Health in Brooklyn. We also employed a former Summer Exposure Program student to help mentor the students.

The Human Oncology and Pathogenesis Program Summer Student Program is designed for high school students from underserved populations who are interested in pursuing careers in the biomedical sciences. A total of 20 students participated in the 2012 program, which focused on two distinct areas: independent research and extracurricular events.

MSK’s Department of Radiology organizes a summer mentoring program. In 2012 the program included 15 high school, undergraduate, and post-baccalaureate stu-
Educational Opportunities for Allied Professionals

MSK is home to two schools for allied health professionals. The School of Cytotechnology specializes in the study of cells from the human body and trains cytotechnologists to microscopically evaluate cell samples to detect disease. In 2012 four students participated in the program.

The School of Radiation Therapy offers a two-year, full-time program of study in radiation oncology technology. Radiation therapists are trained to deliver high doses of radiation to patients under a physician’s supervision. In 2012, we trained 12 students in the program.

MSK also serves as the primary clinical nutrition and management rotation site for New York University’s Dietetic Internship Program. Each dietetic intern spends 22 weeks at MSK completing various food service management and clinical nutrition rotations. Upon successful completion of the dietetic internship program, graduates are eligible to take the dietetic registration exam, which is required to become a registered dietitian. MSK had four dietetic interns in 2012. We accommodated one additional dietetic intern from the University of Medicine and Dentistry of New Jersey for a rotation in ICU/Nutrition Support.

The Rehabilitation Service at MSK helps students gain exposure to the delivery of physical and occupational services to cancer patients of all ages in the acute care setting. Students receive direct supervision from a therapist on staff and have the opportunity to evaluate and develop treatment plans for hospital inpatients who require skilled physical and occupational therapy services. The 2012 program consisted of seven physical therapy students and four occupational therapy students.

The Integrative Medicine Service hosts two to four post-graduate music therapy interns per academic year. This training fulfills a mandatory licensing requirement for music therapists.

The Immigrant Health and Cancer Disparities Service’s Program for Medical Interpreting Services and Education (PROMISE), now in its third year, provides training in medical interpreting for bilingual individuals, including, but not limited to, women, the disabled, veterans, and people born in countries outside of the United States. PROMISE seeks to enhance the marketability of unemployed and underemployed individuals by tapping into and capitalizing on their bilingual skills, and to serve as a resource for hospitals, healthcare institutions, job training programs, agencies, commercial interpretation services companies, and other organizations that need professional interpreters or dual role-healthcare industry employees. In 2012, PROMISE trained more than 100 bilinguals who speak Spanish, Mandarin, Arabic and Russian.
New Initiatives to Expand Access

In addition to continuing our current initiatives to increase access to care for the community, we are planning to implement several new efforts to help additional patients access our care over the next three years.

MSK expects a major shift in the treatment paradigm for cancer patients over the next decade, with a much higher percentage of patients being treated in the outpatient setting. As a result, MSK is building expanded outpatient facilities within walking distance of the hospital.

The Josie Robertson Ambulatory Surgery Center at 1133 York Avenue is currently in the construction phase. This facility will accommodate 12 operating rooms and space for pre-anesthesia, post-anesthesia, and patient recovery rooms. The state-of-the-art operating rooms will expand MSK’s robotic, minimally invasive, and general surgery capacities; allow us to engage in research into the use of advanced surgical techniques to reduce cancer morbidity and complications; and facilitate the transitions of patients from an inpatient care model to an ambulatory care setting.

Over the last decade, MSK has developed a Regional Care Network of outpatient cancer treatment sites in Commack, Hauppauge, Sleepy Hollow, and Rockville Centre, New York, and in Basking Ridge, New Jersey. Two additional sites are currently under construction – one in Harrison, New York, which is expected to open in October 2014, and the second in Monmouth County, New Jersey, which is expected to open in 2016.

Conclusion

MSK’s 2013-2015 Community Health Needs Assessment and Community Service Plan provides summary information about our programs of benefit to the community.

It is mailed to local elected officials and organizations and publicized through our community newsletter. It is also available on our website — www.mskcc.org/communityserviceplans — and by mail upon request.

* The 2013 Community Health Needs Assessment Results can be accessed at www.mskcc.org/communityserviceplans.