

Annual Community Outreach Summary 2017

Standard 4.1 - Lung Cancer Prevention Event

Type of cancer	Meeting date need was discussed	Type of Activity	Guidelines used to design activity	Date of Activity	Participants (target audience, # in attendance)	Outcomes/Follow-up process for participants w/positive findings (Screening only)	Effectiveness of Activity (value, lessons learned, recommendations for improvements)
<p><b>Lung</b> (MPH, The focus on prevention of lung cancer was chosen by the Cancer Committee because lung cancer is the leading cause of death in Vance and Granville counties. The majority of our patients present with Stage III &amp; IV lung cancer; Stage III is 33% and Stage IV is 52%. Compared to other Community Cancer Program Hospitals in South Atlantic, this is at least 12% over other facilities (according to 2014 NCDB Hospital Benchmark Report data).</p>	<p>1st Qtr Mtg 3rd Qtr Mtg 4th Qtr Mtg</p>	<p>Prevention</p>	<p>ACS Guidelines for early detection.</p>	<p>On November 2, 2017, we hosted a Lung Cancer Prevention event. <b>"Let's Prevent Lung Cancer Together"</b> Also this event was used to make the community aware of the low dose CT screening now offered at Maria Parham Health.</p>	<p>Population below the poverty level, uninsured or underinsured; 35 participants</p>	<p>NA</p>	<p>This event was marketed through targeted mailers sent out in Vance, Warren, Granville and Franklin counties. Fliers were made available to the community along with a sign placed at the road the day of the event. Interested people were able to register via phone for the event but this was not mandatory. Ads were placed in the local newspapers and also on the radio. The event took place at the main entrance of the hospital. Attendees stopped at the first table to receive a pen and blue card. The blue card read as follows: <i>Are you a smoker, How long have you been a smoker, Are you interested in quitting, Do you live in a house with smokers.</i> After filling out the first part of the blue card, attendees browsed other tables set up. Tables set up included a radiology table, smoking cessation table, and general information regarding lung cancer. At the end of the event, participants completed the blue card and placed in the basket to receive their snack and gift bag. Guests were given a lung cancer awareness magnet, additional lung cancer educational materials, pen, water bottle and bag. <b>Effectiveness:</b> At the conclusion of the event 35 cards were collected. Out of 35 cards, 4 people reported being a smoker, and all 4 indicated they desired to quit smoking, 2 indicated they were interested in a smoking cessation program, 1 was not interested and 1 did not answer the question. 1 participant indicated they were a former smoker but currently dip, and indicated the desire to quit and participate in a smoking cessation program. <b>Value:</b> 32 people indicated this event was helpful, 1 indicated it was not helpful and 2 did not answer the question. 28 guests indicated they did not know about low dose CT screening, 5 indicated they were aware of low dose CT screening and 2 did not answer the question. 32 found the resources made available helpful, 1 did not and 2 did not answer the question.</p>

4.2 - Prostate Cancer Screening Program Event

Type of cancer	Meeting date need was discussed	Type of Activity	Guidelines used to design activity	Date of Activity	Participants (target audience, # in attendance)	Outcomes/Follow-up process for participants w/positive findings (Screening only)	Effectiveness of Activity (value, lessons learned, recommendations for improvements)
<p><b>Prostate</b> MPH NCDB data showed that in 2014 17% men were presenting with stage IV prostate cancer. Because of age, incidence rates indicated in the data we reviewed, as well as information in the CNA, we provided the Prostate Screening Program in 2017.</p>	<p>1st Qtr Mtg 3rd Qtr Mtg 4th Qtr Mtg</p>	<p>Screening</p>	<p>ACS Guideline for the Early Detection of Prostate Cancer</p>	<p>9/20/17</p>	<p>47 men participated</p>	<p><b>Outcomes:</b>  <ul style="list-style-type: none"> <li>• 47 participants</li> <li>• 46 participants were screened..</li> <li>• 4 participant had abnormal exam findings.</li> <li>• 1 elevated PSA and 2 with both abnormal exam findings and elevated PSAs.</li> </ul> <b>Follow-up process:</b> Local urologist reviewed each finding and provided instruction for needed follow-up. Letters were sent to all men instructing them of findings and appropriate follow up needed. Follow-up phone calls were made to each of the seven men with abnormal findings to ensure they understood their need for follow-up. Resources and assistance were available to any men who needed it, all seven had appropriate follow-up.</p>	<p><b>Effectiveness:</b> Dr.Ogle headed up the group of physicians that participated in the digital rectal exam. The MPMC lab department performed the PSA draws. This event targeted males over 50 or any male at high risk for prostate cancer. The men were provided with questionnaires with the following questions: <b>Q: How did you learn about screening?</b> Newspaper (20), Family/Friend (17), Radio (3), Other (5) No Response (2) <b>Q: When did you last have a complete physical exam by a doctor?</b> Within the last year (23), 1-2 years ago(16), 2-5 years ago(4), More than 5 years ago (2), Never (1), Don't know (1) <b>Q: When did you last have a rectal exam?</b> Within the last year (8), 1-2 years ago(25), 2-5 years ago(5), More than 5 years ago (5), Never (3), Don't know (1) <b>Value:</b> This event is valuable to the men of our community because it offers an opportunity for a free prostate screening increasing opportunity for early detection. Opportunities some may not otherwise have. <b>Future Plans:</b>We plan to do this event again next year. We will mail information to local churches and plan to get information to local barber shops. These have proven beneficial in the past.</p>

Completed by: Kim Smith, Community Outreach Coordinator

Meeting date report was presented to cancer committee: November 30, 2017

The cancer committee should be discussing if the activities are or are not producing the intended results of the pr

evention and screening program (i.e. lessons learned).