

2014

NYSCC Member Program Directory

New York State



Cancer Consortium

Compiled by:
The NYSCC
Communications
Committee

Contents

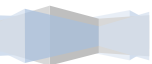
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I. DISCLAIMER:

The purpose of this directory is to provide basic information about existing programs attributed to NYSCC member organizations. This publication consists of information self-reported by NYSCC member organizations that chose to do so. This directory should not be considered an exhaustive list of programs related to cancer in NYS nor of NYSCC member organization programs. This directory is for informational purposes and is not an endorsement of these programs by the NYSCC.



II. Letter from the NYSCC Steering Committee

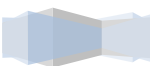
In December 2012, the New York State Cancer Consortium (NYSCC) released the [New York State Comprehensive Cancer Control Plan 2012-2017](#) (Plan). The 2012-2017 Plan was created over an 18-month period by the NYSCC, a statewide network of individuals and organizations dedicated to New York's cancer burden. The Consortium identified six priority areas of action: Health Promotion and Cancer Prevention, Early Detection, Treatment, Survivorship, Palliative Care and Health Care Workforce. Each priority area section in the Plan contains background information about the current status of work in the area, objectives to measure improvements, and suggested evidence-based or promising practices to make improvements.

While the Plan was developed by the Consortium, no one organization or individual can be responsible for all work contained within the document. Effective strategies for cancer prevention and control require a concerted effort across disciplines.

This directory serves as a list of Consortium members' organizations and programs. We hope that this directory will help to facilitate collaboration amongst both NYS Cancer Consortium members' organizations and other interested organizations in order to reach the Plan goals.

“Working Together, Reducing Cancer, Saving Lives”

NYS Cancer Consortium Steering Committee



III. NYSCC Organizational Member Programs or Activities by Plan Area and Strategy

A. Health Promotion and Cancer Prevention:

Goal: All New Yorkers will have current and evidence-based information, resources and opportunities necessary to adopt and maintain health-promoting behaviors to reduce the risk of cancer.

a. Tobacco Use

1. **STRATEGY 1: Supports policy-driven, population-based approaches to prevent youth from smoking and to motivate adult smokers to quit. (Includes: keeping tobacco products out of consumer view in non-adult-only retail environments, promoting efforts to limit tobacco sales in pharmacies, tobacco-free college/university campus policies and parks, playgrounds and beaches, voluntary adoption of tobacco-free policies in multi-unit housing, expanding health plan coverage of tobacco dependence treatment.)**

[**Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program**](#)

[**American Cancer Society: New York State Colleges Tobacco Free Initiative \(NYSCTFI\)**](#)

[**American Cancer Society: Healthy High Rises**](#)

[**American Lung Association of the Northeast: Lung Force Expo**](#)



[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

2. STRATEGY 2: Promotes the recommended strategies of the Community Prevention Task Force and the Centers for Disease Control (CDC) Best Practices for Tobacco Control Programs.

[American Cancer Society: New York State Colleges Tobacco Free Initiative](#)

[American Cancer Society: Health High Rises](#)

[American Lung Association of the Northeast: Lung Force Expo](#)

[Oral Cancer Consortium: Oral Cancer Screening](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[Roswell Park Cancer Institute: Office of Cancer Health Disparities Research](#)

3. STRATEGY 3: Other strategy not listed.

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)



[Roswell Park Cancer Institute: Office of Cancer Health Disparities](#)

b. Physical Activity and Nutrition

- 1. STRATEGY 1: Endorses policies and initiatives that support health-promoting behaviors, including access to nutritious foods and increasing opportunities for physical activity, especially among populations most at risk or affected by overweight and obesity.**

[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[New York Academy of Medicine: Designing a Strong and Healthy New York \(DASH-NY\)](#)

[New York State Prostate Cancer Coalition](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)



[URMC Center for Community Health: Cancer Services Program of Monroe County](#)

- 2. STRATEGY 2: Promotes voluntary adoption of food procurement and vending guidelines by state agencies, local governments and community-based agencies and their vendors.**

[New York Academy of Medicine Designing a Strong and Healthy New York \(DASH-NY\)](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

- 3. STRATEGY 3: Supports policies to increase the duration and exclusivity of breastfeeding, including those policies recommended by New York’s Medicaid Redesign Team.**

[New York Academy of Medicine Designing a Strong and Healthy New York \(DASH-NY\)](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

- 4. STRATEGY 4: Works with local school districts to ensure compliance with state requirements for physical activity for students and reporting on Body Mass Index.**



5. **Strategy 5: Encourage hospitals that provide labor and delivery services to achieve “Baby-Friendly Hospital” designation.**

[New York Academy of Medicine Designing a Strong and Healthy New York \(DASH-NY\)](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

6. **STRATEGY 6: Other strategy not listed.**

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem](#)

c. Environmental Exposure

1. **STRATEGY 1: Improves citizens’ awareness and understanding of the risks of exposure to cancer-causing substances in the environment and ways to reduce exposure to those substances through collaborative educational efforts with environmental health entities. Included in these efforts: information about the role of diet in cancer prevention, including the identification of dietary risk factors for common cancers and ways to reduce exposures; the potential risks from products used in and around the home (e.g. pesticides, solvents and other chemicals); and the need to recognize the potential for known or possible occupational/agricultural carcinogens to be brought into the**



home; and the identification of actions to reduce these exposures.

[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[American Lung Association of the Northeast: Lung Force Expo](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[SHARE Cancer Support: For Women Facing Breast & Ovarian Cancers](#)

2. **STRATEGY 2: Increases the availability of data about cancer incidence and unusual patterns of cancer for small geographic areas across the state.**

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

3. **STRATEGY 3: Partners with federal, state and local governments, businesses and communities to reduce elevated exposures or suspected environmental risk factors for cancer (e.g. elevated levels of known or suspected human carcinogens at hazardous waste sites, in the workplace, in personal care and consumer products, in drinking water supplies and in indoor or outside**



air).

[American Lung Association of the Northeast: Lung Force Expo](#)

4. **STRATEGY 4: Increases the number of environmental risk factors for cancer addressed by programs, policies or initiatives (e.g. carcinogens in soil, water, air, food, consumer products; occupational carcinogens; radon in existing and new homes).**

[American Lung Association of the Northeast: Lung Force Expo](#)

5. **STRATEGY 5: Other strategy not listed.**

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

d. Ultraviolet Radiation

1. **STRATEGY 1: Supports and promotes educational initiatives that stress sun safety messages and decreases exposure to UV lights for all ages, including initiatives that target schoolchildren, adolescents, parents, health care providers and summer camps.**

[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)



2. **STRATEGY 2: Supports existing tanning facility regulations (Subpart 72-1) to promote safety and appropriate use.**
3. **STRATEGY 3: Supports implementation of legislation banning the use of tanning beds by minors ages 16 and under.**
4. **STRATEGY 4: Other strategy not listed.**

e. Genetics

1. **STRATEGY 1: Educates health care providers about the importance of asking patients about their personal and family histories of cancer to identify those likely to benefit from genetic counseling, consideration of genetic testing and chemoprevention.**

[Adelphi NY Statewide Breast Cancer Hotline & Support Program](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)



2. **STRATEGY 2: Provides accurate information to the public and health care providers about genetic tests and resources available to aid with risk assessment and development of management plans.**

[Adelphi NY Statewide Breast Cancer Hotline & Support Program](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[SHARE Cancer Support: For Women Facing Breast & Ovarian Cancers](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

3. **STRATEGY 3: Distributes up-to-date information about the availability of genetic counselors in the state, including those that provide services at low or no cost.**

[Adelphi NY Statewide Breast Cancer Hotline & Support Program](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

4. **STRATEGY 4: Assesses the availability of reimbursement for genetic counseling and genetic testing, when appropriate and supported by evidence.**

[Adelphi NY Statewide Breast Cancer Hotline & Support Program](#)



[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

5. **STRATEGY 5: Other strategy not listed.**

[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[The Brooklyn Minority-Based Community Clinical Oncology Program](#)

[UB Family Medicine and Patient Voices Network: Patient Ambassadors to Increase Mammography Screening](#)

f. Vaccines

1. **STRATEGY 1: Institutes reminder-recall systems in health care settings to increase the use of the HPV and HBV vaccines according to evidence-based guidelines.**

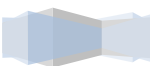
[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[New York State Department of Health: Bureau of Immunization](#)

2. **STRATEGY 2: Educates health care providers about the benefits of providers recommending the HPV and HBV vaccinations to their patients.**

[New York State Department of Health: Bureau of Immunization](#)

[Oral Cancer Consortium: Oral Cancer Screening](#)



[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

3. **STRATEGY 3: Supports educational campaigns targeted to at-risk adolescents and adults regarding the benefits and risks of HPV and HBV vaccines.**

[New York State Department of Health: Bureau of Immunization](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

4. **STRATEGY 4: Ensures access to HPV and HBV vaccines for persons and communities at-risk.**

[New York State Department of Health: Bureau of Immunization](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

5. **STRATEGY 5: Promotes the use of HBV vaccine in venues where persons at risk for HBV access services, such as sexually transmitted disease (STD) clinics and needle exchange programs.**

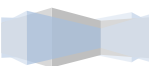
[New York State Department of Health: Bureau of Immunization](#)



Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

6. **STRATEGY 6: Other strategy not listed.**

Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research



B. Early Detection

Goal: All New Yorkers will receive age-appropriate, evidence-based, guideline driven screening services for the early detection of cancer.

1. **STRATEGY 1: Assures the successful implementation of the Patient Protection and Affordable Care Act (PPACA) to reduce economic barriers to cancer screening.**

[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[American Lung Association of the Northeast: Lung Force Expo](#)

[Chenango Health Network: The Every Woman Counts in Chenango County Campaign and Cancer Financial Assistance Program](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

[UB Family Medicine and Patient Voices Network: Patient Ambassadors to](#)



Increase Mammography Screening

- 2. STRATEGY 2: Implements the recommended strategies outlined in the Guide to Community Preventive Services to improve screening rates (includes: patient and provider reminders, educating patients about the benefits of cancer screening and ways to overcome barriers to screening, evaluating and giving providers feedback on provider performance in providing screening services, using small media [videos, letters, brochures, newsletters] and earned media [free media, letters to the editor, appearances on local new programs] to build public awareness and demand for cancer screening, remove structural barriers to cancer screening, integrate cancer screening into routine clinical preventive services wherever possible, eliminate out-of-pocket costs for cancer screening, encourage and help health providers and health insurance companies include reminders for cancer screening in electronic health records systems.**

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[American Lung Association of the Northeast: Lung Force Expo](#)

[Cancer Services Program of Fulton, Montgomery & Schenectady Counties](#)

[Chenango Health Network: The Every Woman Counts in Chenango County Campaign and Cancer Financial Assistance Program](#)

[Icahn School of Medicine at Mount Sinai: Community Based Colorectal Cancer Education Program](#)



[Icahn School of Medicine at Mount Sinai: Esperanza y Vida- The Latina Witness Project of Harlem](#)

[Icahn School of Medicine at Mount Sinai: Witness CARES: Community Awareness, Reach and Empowerment for Screening](#)

[Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Oral Cancer Consortium: Oral Cancer Screening](#)

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

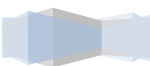
[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

[UB Family Medicine and Patient Voices Network: Patient Ambassadors to Increase Mammography Screening](#)

[URMC Center for Community Health: Cancer Services Program of Monroe County](#)

- 3. STRATEGY 3: Provides accessible cancer screening to all New Yorkers regardless of insurance status or geographic location (including: support a reassessment of the federal National Breast and Cervical Cancer Early Detection and Colorectal**



Cancer Prevention Programs in light of PPACA implementation; and implement reciprocal referral systems to ensure that persons who need health insurance coverage for screening are appropriately referred to and enrolled in public health and insurance programs.

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[Cancer Services Program of Fulton, Montgomery & Schenectady Counties](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

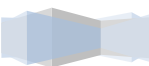
[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

[UB Family Medicine and Patient Voices Network: Patient Ambassadors to Increase Mammography Screening](#)

- 4. STRATEGY 4: Develops systems to assess and monitor disparities and barriers related to cancer screening and diagnostic services.**

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[Cancer Services Program of Fulton, Montgomery & Schenectady Counties](#)



[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[Roswell Park Cancer Institute: The Office of Cancer Health Disparities Research](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

[UB Family Medicine and Patient Voices Network: Patient Ambassadors to Increase Mammography Screening](#)

5. STRATEGY 5: Other strategy not listed.

[New York State Cancer Registry](#)



C. Treatment

Goal: All New Yorkers will have access to high quality, comprehensive cancer care at an affordable cost.

1. **STRATEGY 1: Promotes availability of the state’s Medicaid Cancer Treatment Program (MCTP), and ensures that treatment facilities train or have access to Designated Qualified Entities, who are responsible for enrolling clients in the program.**

[**American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program**](#)

[**Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention**](#)

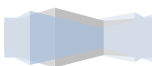
[**The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Care Center**](#)

2. **STRATEGY 2: Implements reciprocal referral systems to ensure that persons who need health insurance coverage for treatment are appropriately referred to and enrolled in public health insurance programs.**

[**American Italian Cancer Foundation: Mobile, No-Cost Cancer Screening Program**](#)

[**Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention**](#)

[**The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care**](#)



3. **STRATEGY 3: Supports implementation and evaluation of patient navigation programs to help patients and families navigate the health care system (and support care coordination efforts).**

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[Icahn School of Medicine at Mount Sinai: Esperanza y Vida- The Latina Witness Project of Harlem](#)

[Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

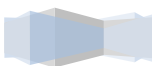
[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

4. **STRATEGY 4: Educates the public and the medical community regarding recommended guidelines for effective treatment and quality of cancer care, such as those released annually by the National Comprehensive Cancer Network (NCCN).**

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)



To Life!: Beat the Odds

- 5. **STRATEGY 5: Promotes adherence to National Quality Forum consensus standards for quality cancer care.**

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care

- 6. **STRATEGY 6: Reduces barriers to and increases treatment-related clinical trial enrollment across all populations through education and awareness.**

American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program

American Lung Association of the Northeast: Lung Force Expo

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care

To Life!: Beat the Odds

- 7. **STRATEGY 7: Promotes efforts to include coverage for the cost of patient care received during participation in clinical trials.**
- 8. **STRATEGY 8: Other strategy not listed.**



[American Cancer Society: Look Good Feel Better](#)

[New York State Cancer Registry](#)

[Catie Hoch Foundation](#)



D. Survivorship

Goal: All New Yorkers will have equal access to evidence-based, evidence-informed and guideline-driven services and appropriate, high-quality follow-up care for cancer survivors, families and caregivers.

1. **STRATEGY 1: Develops new or enhances and leverages existing regional resource directories to increase cancer survivors' awareness of the availability of community support services (includes: transportation, housing, nutrition, psychosocial support, legal support, wellness programs, etc.).**

[Adelphi NY Statewide Breast Cancer Hotline & Support Program](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[Roswell Park Cancer Institute: Support for Life Survivorship Program](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care](#)

[SHARE Cancer Support: For Women Facing Breast & Ovarian Cancers](#)

[South Nassau Communities Hospital: SIBSPlace](#)

[Support Connection, Inc.](#)

2. **STRATEGY 2: Promotes the use of standardized survivorship care plans (a written summary of cancer treatment, future care needs and available resources).**



Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care

3. **STRATEGY 3: Provides appropriate follow-up care (guideline-concordant cancer screening) and other appropriate post-treatment support (tobacco cessation counseling, physical activity recommendations, etc.).**

Adelphi NY Statewide Breast Cancer Hotline & Support Program

American Lung Association of the Northeast: Lung Force Expo

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

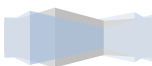
Roswell Park Cancer Institute: Support for Life Survivorship Program

The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care

4. **STRATEGY 4: Conducts research and education about cancer survivors' needs (including adequacy of follow-up and support services, barriers encountered during the diagnostic, treatment and post-treatment phases of care, etc.).**

American Lung Association of the Northeast: Lung Force Expo

Roswell Park Cancer Institute: Support for Life Survivorship Program



Miles of Hope Breast Cancer Foundation: Miles of Hope Medical Gap Care Program

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

SHARE Cancer Support: For Women Facing Breast & Ovarian Cancers

- 5. STRATEGY 5: Implements policies across multiple settings that deter employment and insurance discrimination.**

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Cancer Care

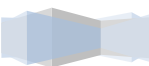
- 6. STRATEGY 6: Promotes health care facility adherence to National Quality Forum consensus standards to symptom management and end-of-life care.**

Adelphi NY Statewide Breast Cancer Hotline & Support Program

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

- 7. STRATEGY 7: Tracks the number of NY care treatment facilities with STAR (Survivorship Training and Rehabilitation) certification as comprehensive cancer rehabilitation programs.**

- 8. STRATEGY 8: Other strategy not listed.**



[American Cancer Society: Look Good Feel Better](#)

[Cancer Resource Center of the Finger Lakes](#)

[Icahn School of Medicine at Mount Sinai: Esperanza y Vida- The Latina Witness Project of Harlem](#)

[Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem](#)

[Miles of Hope Breast Cancer Foundation: Miles of Hope Medical Gap Care Program](#)

[Long Island Ovarian Cancer Education, Advocacy, Networking and Support \(LI OCEANS\)](#)



E. Palliative Care

Goal: All New Yorkers will have equal access to evidence-based, evidence-informed and guideline-driven patient and family-centered palliative care services, across all populations.

1. **STRATEGY 1: Works with associations representing health care professionals to promote hospice and palliative care certification and credentialing.**

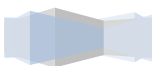
[Cancer Support Team, Inc.: Cancer Support Team](#)

[St. Mary's Healthcare \(Amsterdam, NY\): Palliative Care Program](#)

2. **STRATEGY 2: Promotes oncology-related careers for physicians and nurses, especially those certified in palliative care.**
3. **STRATEGY 3: Promotes efforts to fund palliative care-certified medical schools and residency programs under the Palliative Care Education and Training Act.**
4. **STRATEGY 4: Supports implementation of palliative care programs for children (e.g. Concurrent Care for Children under the PPACA [Patient Protection and Affordable Care Act] and Pediatric Palliative Care Services under the Care at Home I/II Medicaid Waiver).**
5. **STRATEGY 5: Encourages oncology and inpatient programs to incorporate components of palliative care.**

[Cancer Support Team, Inc.: Cancer Support Team](#)

[South Nassau Communities Hospital: SIBSPlace](#)



St. Mary's Healthcare (Amsterdam, NY): Palliative Care Program

6. **STRATEGY 6: Encourages health care providers, institutions, voluntary organizations, government agencies and others to provide education and information on palliative care and hospice care, including scope of services, locations, access to care and reimbursement.**

Cancer Support Team, Inc.: Cancer Support Team

St. Mary's Healthcare (Amsterdam, NY): Palliative Care Program

7. **STRATEGY 7: Documents and promotes the availability of palliative care in inpatient and outpatient settings in NCI-designated cancer centers, tertiary hospitals, children's hospitals and community cancer centers in NYS.**

St. Mary's Healthcare (Amsterdam, NY): Palliative Care Program

8. **STRATEGY 8: Monitors changes in State and Federal legislation and funding regarding palliative care, and serves as a source of this information for health care providers, institutions, voluntary organizations and others.**

Cancer Support Team, Inc.: Cancer Support Team

9. **STRATEGY 9: Other strategy not listed.**

Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program

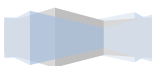
Hospice and Palliative Care Association of NYS



F. Healthcare Workforce

Goal: All New Yorkers will have equal access to an adequate supply of primary care and oncology-related providers with demonstrated competencies in cancer prevention, detection, treatment, supportive services and palliative care.

- 1. STRATEGY 1: Reduces barriers to the supply of cancer care providers in NYS (by supporting public policy changes which would remove U.S. permanent residency requirements for professional licensure among oncology-related professions; implementing PPACA [Patient Protection and Affordable Care Act] provisions for loan forgiveness and other activities aimed at building the health care workforce; and promoting efforts to increase the number of physicians who provide primary and cancer-specific care in geographic areas where they are needed).**
- 2. STRATEGY 2: Increases awareness of cancer-related fields as career options (by: urging federal policy change to increase the cap on Graduate Medical Education residency programs to allow for more physicians to be trained in primary care and cancer-related fields; identifying at least one set of cancer-specific educational modules to encourage persons of all ages to pursue careers in cancer, in collaboration with educational partners such as the Area Health Education Centers (AHECs); collaborating with AHECs on training and recruitment projects in rural and underserved areas; partnering with post-secondary educational systems (e.g. the State University of New York [SUNY] system, the City University of New York [CUNY] system and the Boards of Cooperative Educational Services [BOCES] to develop and/or share cancer career specific information for students; partnering with medical schools, schools of**



nursing/social work/allied health professionals, foundations and corporations to advocate for private funding support for cancer-related professional education such as internships, fellowships and student participation at conferences; encouraging cancer case training with collaborative models, such as patient-centered medical homes).

[Association of Pediatric Oncology Social Workers](#)

[Intercultural Cancer Council](#)

3. **STRATEGY 3:** Ensures access to oncology professionals with demonstrated competency in cancer care (by: increasing the number of physicians, nurses and social workers with subspecialties that relate to specific needs in the oncology field [i.e. hospice and palliative care]; encouraging and supporting continued education and specialty certification for all professionals working in cancer care; encouraging additional use of telemedicine, particularly in medical shortage areas; and developing linkages to integrate behavioral health providers in cancer care).

[American Lung Association of the Northeast: Lung Force Expo](#)

[Association of Pediatric Oncology Social Workers](#)

4. **STRATEGY 4:** Increases the diversity of the oncology health workforce to better match the composition of the New York population by partnering with medical/allied health professional organizations which serve non-White professionals to develop and/or distribute materials regarding the need for oncology specialists, certification processes and training



opportunities.

[Association of Pediatric Oncology Social Workers](#)

5. Strategy 5: Other strategy not listed.

[Association of Pediatric Oncology Social Workers](#)



IV. Program Descriptions (in alphabetical order)

Adelphi NY Statewide Breast Cancer Hotline and Support Program

Description: The mission of the Adelphi New York State Breast Cancer Hotline and Support Program is to educate, support, empower and advocate for breast cancer patients, professionals and the community. The program is proud to provide a full continuum of support to those affected by breast cancer. Through our Hotline we connect callers to specially trained volunteers, most of whom are breast cancer survivors. Additionally, our professional counseling services adapt to the needs of the community and include diversified and specialized support groups and individual and phone counseling. The Program also offers successful survivorship programs including educational forums, celebrations and wellness workshops. All of our services are free.

Program Website: www.adelphi.edu/nysbreastcancer/

Phone: 516-877-4313

Email: rutter@adelphi.com

Collaborating Organizations: Komen NYC, Nassau University Medical Center, NYS Department of Health, PLAN Project of Nassau, Suffolk Law Services, Planned Parenthood of Nassau County, The Manhasset Women's Coalition Against Breast Cancer

Serves: All of New York State

All Strategies Addressed:

Survivorship 1/3/6

Health Promotion Cancer Prevention/Genetics 1/2/3/4

Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program

Description: Affinity Health Plan provides management of cancer patients who need care management support to manage post chemotherapy symptomology. The Program also provides a home based palliative program and hospice program available at end of life.

Program Website: www.affinityplan.org



Collaborating Organizations: None

Serves: Bronx, Kings, Nassau, New York, Orange, Queens, Richmond, Rockland, Suffolk, and Westchester Counties

All Strategies Addressed:

Palliative Care/Other (Health Plan member support.)

Health Promotion Cancer Prevention/Tobacco Use 1

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1

Health Promotion Cancer Prevention/Environmental Exposure 1

Health Promotion Cancer Prevention/Ultraviolet Radiation 1

Health Promotion Cancer Prevention/Genetics Other (Certain genetic testing is a covered benefit.)

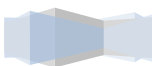
Health Promotion Cancer Prevention/Vaccines 1

Early Detection 1

American Cancer Society: Healthy High Rises

Description: Healthy High Rises is a recognition program for multi-unit residential housing in New York City and New Jersey that have a smoke-free policy, meaning no one is allowed to smoke anywhere in the building. This program is supported by the American Cancer Society, Eastern Division to promote healthier environments, reduce cancer risk, and improve the quality of people's lives. The risk of secondhand smoke is a major health issue solved through adoption of smoke-free policies. Smoke-free apartments and housing policies are becoming more and more popular among building owners and tenants due to the health and positive economic impact of smoke-free living environments. Benefits of being recognized as a Health High Rise include increasing the number of people who want to live in smoke-free housing. Being a Healthy High Rise will demonstrate your commitment to smoke-free buildings and a healthy environment. Multi-unit residential housing buildings deemed to be a Health High Rise receive framed healthy High Rises award certificate and window clings by the American Cancer Society documenting the smoke-free status of the building, a press release announcing the Healthy High Rises designation (if desired), materials on smoking cessation and the benefits of quitting smoking (as needed).

Program Website:



<http://www.cancer.org/acs/groups/content/@eastern/documents/document/acspc-036488.pdf>

Phone: 518-220-6917

Email: Michael.seserman@cancer.org

Collaborating Organizations: New York City Department of Health and Mental Hygiene, Coalition for a Smokefree City, Real Estate Board of New York

Serves: All of New York State

All Strategies Addressed:

Health Promotion Cancer Prevention/Tobacco Use 1/2

American Cancer Society: Look Good Feel Better

Description: Look Good Feel Better is a free program that teaches beauty techniques to women in active treatment to help them combat the appearance-related side effects of cancer treatment.

Program Website: www.cancer.org

Phone: 732-951-6303

Email: debra.malovini@cancer.org

Collaborating Organizations: The Personal Care Products Council Foundation, The Professional Beauty Association/National Cosmetology Association.

Serves: All of New York State

All Strategies Addressed:

Treatment Other (Assists women through the hardships of their cancer treatment.)

Survivorship Other

American Cancer Society: Road to Recovery

Description: The Road to Recovery program is a volunteer-based program designed to transport patients in active cancer treatment to chemotherapy and radiation appointments.

Program Website: www.cancer.org

Phone: 201-650-6607

Email: susan.bedell@cancer.org

Collaborating Organizations: None



Serves: All of New York State

All Strategies Addressed:

Treatment Other (Ensures that patients in need of transportation are able to get to treatment.)

American Cancer Society: New York State Colleges Tobacco Free Initiative (NYSCTFI)

Description: The New York State Colleges Tobacco Free Initiative (NYSCTFI) is a statewide partnership dedicated to encouraging and supporting colleges and universities to implement and effectively enforce 100% tobacco-free campus policies. Monthly calls are offered to partners and interested individuals to share information and to support one another.

Program Website: <http://www.nystobaccofreecolleges.org>

Phone: 518-220-6917

Email: Michael.seserman@cancer.org

Collaborating Organizations: NYS Community Partners, NYS Quitline, National Center for Tobacco Policy, State University of New York

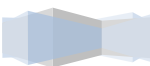
Serves: All of New York State

All Strategies Addressed:

Health Promotion Cancer Prevention/Tobacco Use 1/2

American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program

Description: The American Italian Cancer Foundation's Mobile, No-Cost Breast Cancer Screening Program has been providing no-cost mammograms and clinical breast exams to economically disadvantaged, medically underserved New York City women, age 40 and over, for over 25 years. The screening program collaborates with a diverse network of over 260 community partners throughout the city of New York to provide critical services to communities in need. ACIF's Mobile No-Cost Breast Cancer Screening Program brings breast cancer screening directly to the women most in need of no-cost services. In fiscal year 2012-13, 78% of the women served had annual household incomes of \$25,000 or less; 18% received their first mammogram, 84% were uninsured or underinsured. In addition, the



Program eliminates cultural, linguistic and transportation barriers to health care access by partnering with trusted groups in various communities. AICF works with an extensive network of over 260 community centers, religious institutions, schools, senior centers, health care providers, and offices of elected officials to offer breast cancer screening services to the women that these groups already serve. AICF is also on the ground, recruiting women to screenings through a grassroots approach. Our Mobile Care Clinic travels five days a week throughout New York City to bring breast cancer screening services including mammograms, clinical breast exams and breast self-exam instruction to over 4,500 NYC women each year.

Program Website: www.americanitaliancancer.org

Phone: 877-628-9090

Email: ruthvega@americanitaliancancer.org

Collaborating Organizations: Partner with over 260 community based organizations in New York City.

Serves: Bronx, Kings, New York, Queens, and Richmond Counties

All Strategies Addressed:

Early Detection 1/2/3/4

Health Promotion Cancer Prevention/Tobacco Use/Other (Inform women of tobacco use and the increase risk of cancer.)

Health Promotion Cancer Prevention/Physical Activity and Nutrition (Inform women of the benefits of healthy eating and the role it plays in cancer prevention.)

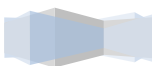
Treatment 1/2/3/4/6

American Lung Association of the Northeast: Lung Force Expo

Description: The Lung Force Expo is a two-track, one day seminar on lung cancer and other lung diseases. One track is for patients and caregivers and the other track is for healthcare professionals, such as physicians, nurses, Pas, respiratory therapists, etc. CEUs are offered for the professional track. There are also exhibition for vendors, as well. A typical agenda for the professional track would include two presentations on lung cancer, one on some aspect of asthma, one on COPD and a presentation on lung disease research.

Program Website: www.lungne.org

Phone: 585-666-1397



Email: pcollins@lungne.org

Collaborating Organizations: None

Serves: Bronx, Nassau, New York, Queens, Suffolk and Westchester Counties

All Strategies Addressed:

Healthcare Workforce 3

Survivorship 3/4

Health Promotion Cancer Prevention/ Tobacco/1/2

Health Promotion Cancer Prevention/ Environmental Exposure/1/3/4

Early Detection 1/2

Treatment 6

Association of Pediatric Oncology Social Workers

Description: The Association of Pediatric Oncology Social Workers is a group of passionate, professional oncology social workers. Our efforts are focused on enhancing the lives of children with cancer and blood disorders and the families who care for them. We accomplish our mission by advancing pediatric psychosocial oncology care through clinical social work practice, research, advocacy, education and program development. If you are a pediatric oncology social worker or a non-social worker professional who shares in the APOSW mission, we cordially invite you to join us.

Program Website: www.aposw.com

Collaborating Organizations: None

Serves: All of New York State

All Strategies Addressed:

Healthcare Workforce 2/3/4/Other (Educating current pediatric oncology social workers to maintain skills and knowledge in this field and attracting new social work students to this field through conference education and listserv on a national and international basis.)

Cancer Resource Center of the Finger Lakes

Description: The Cancer Resource Center provides support, information and community for people affected by cancer who live in and around Tompkins County.



Program Website: www.crcfl.net

Phone: 607-277-0960

Email: bob@crcfl.net

Collaborating Organizations: None

Serves: Cayuga, Cortland, Schuyler, Seneca, Tioga and Tompkins Counties

All Strategies Addressed:

Survivorship/Other (Assists people in understanding their treatment options and then supports them in the decisions that they make.)

Cancer Services Program of Fulton, Montgomery & Schenectady Counties

Description: The Cancer Services Program (CSP) provides breast, cervical and colorectal cancer screenings at no cost to women and men who: do not have health insurance or have health insurance that does not cover the cost of these screenings; cannot pay for these screenings; meet income eligibility requirements; meet age requirements; and live in New York State.

Program Website: Not Applicable

Phone: 518-841-3726

Email: hagadorns@smha.org

Collaborating Organizations: Healthcare Systems, County Department of Health, Non-Profit Community Organizations, Insurance Enrollers, Other Grant Funded Partners

Serves: Fulton, Montgomery and Schenectady Counties

All Strategies Addressed:

Early Detection 2/3/4

Health Promotion Cancer Prevention/Tobacco Use

Cancer Support Team, Inc.: Cancer Support Team

Description: Founded in 1978, Cancer Support Team is licensed by the New York State Department of Health that provides nursing and psychosocial care to oncology patients and their families at any stage of the disease, at no cost and without regard to insurance coverage. CST's mission is to enhance the quality of life of lower Westchester County residents affected by cancer. CST's comprehensive program of nursing, social work and related support



services includes nursing care management, pain and symptom control, nutritional guidance, counseling, advocacy, referral to community resources, financial and transportation assistance.

Program Website: www.cancersupportteam.org

Phone: 914-777-2777

Email: jdobrof@cancersupportteam.org

Collaborating Organizations: None

Serves: Westchester County

All Strategies Addressed:

Palliative Care 1/5/6/8

Catie Hoch Foundation

Description: To help kids take a break from cancer, the Catie Hoch Foundation provides financial assistance to families while their children are in treatment for cancer.

Program Website: www.catiehochfoundation.org

Phone: 518-306-6280

Email: lhoch04@gmail.com

Collaborating Organizations: None

Serves: All of New York State

All Strategies Addressed:

Treatment/Other (Provide financial assistance to families of children with cancer.)

Chenango Health Network: Every Woman Counts in Chenango County Campaign and Cancer Financial Assistance Program

Description: Outreach toward women living in rural Chenango County to encourage and support screening for breast and gynecological cancer and with follow-up. Genetics counseling available on-site. Information and referrals to related cancer support services such as legal, clinical, insurance. Financial assistance for women diagnosed with breast cancer (transportation expense, medical expenses not covered by insurance, linkage for other financial assistance to help with other living expenses). Financial assistance to women diagnosed with gynecological cancer (transportation expense



only).

Program Website: www.chenangohealth.org

Phone: 607-337-4128

Email: lori@chenangohealth.org

Collaborating Organizations: Avon Foundation for Women, St. Agatha Foundation, UHS-Chenango Memorial Hospital, Lourdes Hospital, Ferre Institute, Afton Family Health Center, Chenango Area Agency on Aging, Chenango Palliative Care & Hospice, Family Planning SCNY, Chenango County Public Health, Chenango County DSS

Serves: Chenango

All Strategies Addressed:

Early Detection 1/2

Hospice and Palliative Care Association of New York State (HPCANYS)

Description: The Hospice and Palliative Care Association of New York State is a not-for-profit organization representing hospice and palliative care programs, allied organizations and individuals that are interested in the development and growth of quality, comprehensive end-of-life services. Our mission is to promote the availability and accessibility of quality hospice and palliative care for all persons in New York State confronted with life-limiting illness.

Program Website: www.hpcanys.org

Phone: 518-446-1483

Email: kmcmahon@hpcanys.org

Collaborating Organizations: Multiple State Health Associations

Serves: All of New York State

All Strategies Addressed:

Palliative Care/Other

Icahn School of Medicine at Mount Sinai: Community Based Colorectal Cancer Education Program

Description: Colorectal cancer is the second most commonly diagnosed cancer in both Hispanic men and women. Colorectal cancer screenings, such as colonoscopy, can save lives through early detection and prevention. Yet,



low income minority groups tend to have lower rate of participation in colorectal cancer screening, particularly among Hispanics. Therefore, a culturally sensitive health education program was developed to address this health disparity that exists within the Hispanic community. Modeled after Esperanza y Vida ® it uses creative and innovative technology to educate the communities about colorectal cancer and early detection. The program was designed not only to increase knowledge about the topic, but also to improve adherence to recommended screening guidelines. We are actively looking for sites to conduct programs, such as churches, schools, senior centers, or private homes. If you have had a colonoscopy and would like to uplift and share the good news that colorectal cancer screening can save lives, please contact us! Together we can help others learn more about colorectal cancer and reduce this health disparity.

Program Website: <http://witnessproject.wordpress.com>

Phone: 212-659-5506

Email: lina.jandorf@mssm.edu

Collaborating Organizations: None

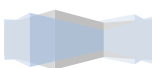
Serves: Bronx, Kings, New York, Queens, Richmond, and Westchester Counties

All Strategies Addressed:

Early Detection 1

Icahn School of Medicine at Mount Sinai: Esperanza y Vida- The Latina Witness Project of Harlem

Description: Esperanza y Vida ® (EyV) represents a culturally sensitive health educational program that works collaboratively with many different community and faith-based organizations within the Hispanic/Latino community. The program uses creative and innovative technology in order to educate the communities about breast and cervical cancer. The program was designed not only to increase knowledge about the topic, but also to improve adherence to recommended screening guidelines. The Project trains breast cancer survivors (Sobrevivientes), to share their own experience of cancer diagnosis and treatment. Additionally, Lay Health Advisors (LHAs) are trained to work with the sobrevivientes in the educational component of the program. The research component of Esperanza y Vida ® has shown that



those participants who were navigated after the educational component of the program, report significant increases in breast and cervical cancer screening. We are actively looking for sites to conduct programs, such as churches, schools, senior centers, or homes. We are actively looking for Spanish-speaking Hispanic/Latina women who have been touched by Breast or Cervical Cancer to work as program volunteers.

Program Website: <http://witnessproject.wordpress.com/>

Phone: 212-659-5506

Email: lina.jandorf@mssm.edu

Collaborating Organizations: None

Serves: Bronx, Kings, New York, Queens, Richmond and Westchester Counties

All Strategies Addressed:

Early Detection 1

Treatment 3

Survivorship Other (Provides survivors and opportunity to share their stories and, in turn, educate women in the community about breast and cervical cancer. It also builds the opportunity for survivors to connect with other survivors for social support.)

Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem

Description: The Witness Project[®] is a culturally competent breast and cervical cancer education program for African American women designed to increase adherence to recommended screening guidelines. The Project trains breast cancer survivors (Witness Role Models [WRMs]), to share their own experience of cancer diagnosis and treatment. Additionally, Lay Health Advisors (LHAs) are trained to work with the WRMs in the education component of the program. Evaluation of the Witness Project[®] has revealed that participants report significant increases in breast cancer screening from pre- to post intervention as compared to a control group. We are actively looking for sites to conduct programs, such as churches, schools, senior centers, or homes. We are actively looking for African American women who have been touched by Breast or Cervical Cancer to work as program volunteers.



Program Website: <http://witnessproject.wordpress.com>

Phone: 212-659-5506

Email: lina.jandorf@mssm.edu

Collaborating Organizations: None

Serves: Bronx, Kings, New York, Queens, Richmond and Westchester Counties

All Strategies Addressed:

Early Detection 2

Health Promotion Cancer Prevention/Physically Activity and Nutrition/Other (Identifies as a high risk factor for breast cancer)

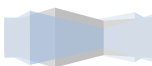
Treatment 3

Survivorship Other (Provide navigation for treatment and recommendations for support services post diagnosis)

Icahn School of Medicine at Mount Sinai: Witness CARES: Community Awareness, Reach and Empowerment for Screening

Description: Colorectal cancer (CRC) incidence is 20% higher and mortality rates are 18% higher in African Americans compared to Whites. These differences in mortality by race/ethnicity are largely accounted for by the later stage at diagnosis, making effective screening and early detection for African Americans a critical strategy for reducing disparities in CRC morbidity. In order to better understand factors influencing the decisions of the African Americans to engage or not engage in CRC screening, this study will test the ability of two interventions to positively impact decisions concerning health seeking and screening behaviors. Survivor stories and other forms of narrative communication are recognized as effective tools for increasing screening and health behaviors. Using personal narratives can increase perceived risk by creating a feeling of similarity to and identity with the communicator. Therefore, this study aims to examine the efficacy of a narrative communication-style group intervention compared to a standard, fact-based didactic intervention to influence African Americans' engagement in colorectal cancer screening, including examining the degree to which the community interventions impact cognitive and affective decision making factors about health care seeking.

Program Website: <http://witnessproject.wordpress.com/>



Phone: 212-659-5506

Email: lina.jandorf@mssm.edu

Collaborating Organizations: Roswell Park Cancer Institute

Serves: Bronx, Kings, New York, Queens, Richmond and Westchester Counties

All Strategies Addressed:

Early Detection 1

Intercultural Cancer Council

Description: The Intercultural Cancer Council is a program dedicated to alleviating the burden of cancer in minorities by promoting policies, programs, partnerships and research to eliminate the unequal burden of cancer among racial and ethnic minorities.

Program Website: Not Applicable

Phone: Not Applicable

Email: danmac9259@aol.com

Collaborating Organizations: American Cancer Society

Serves: All of New York State

All Strategies Addressed:

Healthcare Workforce 2/4

Long Island Ovarian Cancer Education, Advocacy, Networking and Support (LI OCEANS)

Description: LI OCEANS is Long Island based Gynecologic Cancer support group. Our monthly meetings are facilitated by an oncology social worker. LI OCEANS is a non-profit organization whose goal is to improve the quality of life and survival rate of women with gynecological cancers and to create awareness among women and the community regarding early signs and symptoms indicative of ovarian cancer.

Program Website: www.lioceans.org

Phone: 631-495-5414

Email: sandrakrich@hotmail.com

Collaborating Organizations: None

Serves: Nassau and Suffolk Counties



All Strategies Addressed:
Survivorship/Other

Miles of Hope Breast Cancer Foundation: Miles of Hope Medical Gap Care Program

Description: The Medical Gap Care Program is designed to help people in treatment for breast cancer with a financial emergency not covered by insurance. The social service agencies mentioned as collaborators help to identify patients who live in one of the eight counties of Hudson Valley, NY and who are in treatment for breast cancer. Once the person has been interviewed by the social service agency, Miles of Hope steps in to reimburse the patient for a bill (car payment, cell phone, food, gas, heat, transportation to and from treatment, etc.)

Program Website: www.milesofhope.org

Phone: 845-264-2005

Email: pari@milesofhope.org

Collaborating Organizations: Dutchess County Community Action Partnership (DCCAP), Putnam County Community Action Partnership (PCCAP), Greater Hudson Valley Family Health Centers (GHVFHC), Cancer Support Team (CST), Family of Woodstock (FofW)

Serves: Columbia, Dutchess, Greene, Putnam, Rockland, Ulster, and Westchester Counties

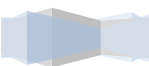
All Strategies Addressed:

Survivorship 4/Other (Offers financial assistance)

New York Academy of Medicine: Designing a Strong and Healthy New York (DASH-NY)

Description: Designing a Strong and Healthy New York (DASH-NY) encourages all New Yorkers to make healthy choices by engaging multiple sectors in creating policy, systems, and environmental changes that will end the epidemic of obesity. DASH-NY offers policy analysis, training, technical assistance, and support for sustainable changes that increase access to healthy food and safe places to play and exercise for all New Yorkers.

Program Website: <http://www.nyam.org/dash-ny-program/home.html>



Phone: 212-822-7261

Email: dashny@nyam.org

Collaborating Organizations: DASH-NY Coalition is comprised of organizations, institutions, and businesses from multiple sectors. Over 1700 members with varying levels of participation. Steering Committee consists of the following organizations: Action for Healthy Kids, The Alliance of New York State YMCAs, Inc. American Farmland Trust, American Heart Association, Empire State Future, Golisano Children’s Hospital at University of Rochester Medical Center, HUD Partnership for Sustainable Communities, Independent Living Center of Hudson Valley, Inc., NAACP, North Country Healthy Heart Network, NYS Department of Health, NYS Council on Food Policy, Parks & Trails NY, The Children’s Agenda.

Serves: All of New York State

All Strategies Addressed:

Health Promotion Cancer Prevention/Physical Activity and Nutrition
1/2/3/5

New York State Cancer Registry

Description: The New York State Cancer Registry provides surveillance information on cancer incidence and mortality.

Program Website: Not Applicable

Phone: 518-474-2255

Email: tmh01@health.ny.gov

Collaborating Organizations: Hospitals, health care providers, laboratories, radiation treatment centers or medical oncology centers.

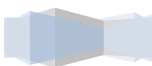
Serves: All of New York State

All Strategies Addressed:

Early Detection/Other (Provides information on early stage cancer diagnosis.)

Treatment/Other (Provides information on timing and type treatment for various cancer sites.)

New York State Department of Health Bureau of Immunization



Description: The Bureau of Immunization’s mission is to reduce morbidity and mortality from vaccine preventable diseases (VPDs), in people of all ages, through strategies that prevent VPDs and reduce transmission. The Bureau works to achieve a vision to eliminate vaccine preventable disease through a diverse set of initiatives that are administered by five program areas: Clinical Immunization Program, Immunization Assessments Program, Immunization Education Program, and New York State Immunization Information System (NYSIIS) Vaccine Program. The Bureau works with a vast network of both public and private contacts to provide statewide leadership to improve vaccine deliver and increase immunization rates.

Program Website: <http://www.health.ny.gov/prevention/immunization/>

Phone: 518-473-4437

Email: immunize@health.state.ny.us

Collaborating Organizations: Centers for Disease Control and Prevention, 57 local health departments in NYS excluding NYC, New York State Association of County Health Officials, NYS Chapter of American Academy of Pediatrics

Serves: All New York State excluding Bronx, Kings, New York, Queens and Richmond Counties

All Strategies Addressed:

Health Promotion Cancer Prevention/Vaccines 1/2/3/4/5

New York State Prostate Cancer Coalition

Description: The New York State Prostate Cancer Coalition offers psycho-social support and support for prostate cancer research and awareness.

Program Website: www.newyorkprostate.org

Phone: 212-673-4920

Email: Darryl@malecare.org

Collaborating Organizations: Malecare, The National LGBT Cancer Project

Serves: All of New York State

All Strategies Addressed:

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1



Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants

Description: The Northeastern New York Affiliate of Susan G. Komen offers community grants for breast cancer and breast health education, outreach, screening, treatment and survivorship programs.

Program Website: www.komenneny.org

Phone: 518-250-5379

Email: info@komenneny.org

Collaborating Organizations: To Life!, American Cancer Society, Glens Falls Hospital, Samaritan Hospital, CRAAB!, CVPH Sunnyview Hospital

Serves: Albany, Clinton, Columbia, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington Counties

All Strategies Addressed:

Early Detection 1/2/3/4

Survivorship 1

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1/3

Health Promotion Cancer Prevention/Environmental Exposure 1

Health Promotion Cancer Prevention/Genetics 1

Oral Cancer Consortium: Oral Cancer Screening

Description: The Oral Cancer Consortium, which consists of 26 metropolitan-area health care institutions and professional societies and more than 40 screening sites in the New York/New Jersey area, is committed to educating local residents about the signs and risk factors associated with oral cancer.

Program Website: <http://www.oral-cancer.org>

Phone: 800-250-9395

Email: denise.trochesset@stonybrookmedicine.edu

Collaborating Organizations: Columbia University School of Dental and Oral Surgery, Essex County Hospital Center, Jersey Shore Medical Center, Long Island Jewish Medical Center, Memorial Sloan Kettering Cancer Center, Morristown Memorial Hospital, Mountainside Hospital Newark, Beth Israel Medical Center, New York City Health and Hospitals Corporation, NYU College of Dentistry, NY Hospital Queens, New Jersey Dental Association, St. Barnabas

Hospital, St. Joseph's Regional Medical Center, Stony Brook University School of Dental Medicine, The University of Medicine and Dentistry New Jersey, Rutgers University Dental School

Serves: Nassau, New York and Suffolk Counties

All Strategies Addressed:

Early Detection 2

Health Promotion Cancer Prevention/ Tobacco Use/ 2

Health Promotion Cancer Prevention/ Vaccines 3

Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention

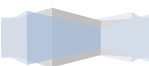
Description: Community outreach is an integral part of eradicating disparities in care and outcome. In order to meet this need the Ralph Lauren Center (RLC) regularly participates in health fairs and visits churches, senior citizens centers and community based organizations. As a health provider, RLC also interfaces with a myriad of other health providers, many of whom care for underserved, minority and uninsured populations. These relationships provide RLC navigators with a keen understanding of the specific needs of marginalized, underserved populations. RLC navigators frequently work on weekends and evenings and are well versed in meeting people "where they are." Moreover, they have extensive experience tailoring their outreach to individual target populations. The Center also markets its services to the public in bilingual print, television, and radio formats; hosts a bilingual website; participates in health fairs; and collaborates with many local health, social service, and religious organizations, corporations, small businesses, and family businesses.

The RLCCCP serves disadvantaged residents of New York City. In particular, RLCCCP targets African-Americans and Latinos, as they often experience higher incidences of common cancers. They also care for a large number of Asian and Pacific Islander patients. Recently, RLCCCP has expanded its awareness of who is underserved to include LGBT, mentally and physically challenged homeless and substance abusers, and the poor elderly.

Program Website: <http://www.ralphlaurencenter.org>

Phone: 212-537-5356

Email: gvillani@ralphlaurencenter.org



Collaborating Organizations: None

Serves: Bronx, Kings, New York, Queens and Richmond Counties

All Strategies Addressed:

Health Promotion Cancer Prevention/Tobacco 1/2

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1

Health Promotion Cancer Prevention/Environmental Exposure 1/2

Health Promotion Cancer Prevention/Ultraviolet Radiation 1

Health Promotion Cancer Prevention/Genetics 1/2

Health Promotion Cancer Prevention/Vaccines 2/3/4/5

Early Detection 1/2/3/4

Treatment 1/2/3/4/5/6

Survivorship 1/2/3/4/5/6

Roswell Park Cancer Institute: Office of Cancer Health Disparities

Description: Roswell Park's Office of Cancer Health Disparities is dedicated to research aimed at understanding cancer health disparities and to developing community-based services and educational programs tailored to meet the needs of populations most at-risk for cancer diagnosis and mortality.

Program Website: www.roswellpark.edu/prevention/cancer-health-disparities

Phone: 716-845-4557

Email: Terry.Alford@roswellpark.org

Collaborating Organizations: American Cancer Society, American Red Cross, Baker Victory Services, Black Buffalo Chamber of Commerce, Buffalo Municipal Housing Authority, Buffalo Urban League, BUILD of Buffalo, Belmont Shelter Services, Community Health Centers of WNY, 100 Black Men of Buffalo, Erie County Health Department, First Ladies of WNY (FLOW), First Shiloh Baptist Church, Greater Emmanuel Temple Church, GROUP Ministries, Ha'naniah Lutheran Church, Hispanic Heritage Council of WNY, International Institute, Gateway-Longview Family Resource Center, Niagara County Health Department, Niagara Falls Medical Center, Primera Iglesia Metodista Unida Church, Second Baptist Church, True Bethel Baptist Church, Trinity Baptist Church, University Coalition of Block Clubs, Word of Life Ministries, Veterans Housing Coalition, WNY Cancer Coalition

Serves: Cattaraugus, Chautauqua, Erie and Niagara Counties



All Strategies Addressed:

Health Promotion Cancer Prevention/ Tobacco Use/Other (Provides lung cancer education to members of at-risk populations, especially those who may smoke, to make them aware of how this behavior potentially puts them at higher-risk for being diagnosed with lung cancer. After education, those concerned individuals seeking are offered assistance by members of the Office in determining if they should be assessed in Roswell Park's high-risk lung clinic for further follow-up treatment if necessary.)

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1

Health Promotion Cancer Prevention/Environmental Exposure/Other

Health Promotion Cancer Prevention/Genetics 1

Early Detection 1/2/3/4

Roswell Park Cancer Institute: Office of Cancer Health Disparities Research

Description: Roswell Park is dedicated to research aimed at understanding cancer health disparities and to developing community-based services and educational programs tailored to meet the needs of populations most at-risk for cancer diagnosis and mortality. The Office of Disparities welcomes churches, community groups, and other organizations to partner for cancer education and screening. We provide cancer information, screening, and support services, especially to those within minority and underserved communities.

Program Website: www.roswellpark.org

Phone: 716-845-4557

Email: None applicable

Collaborating Organizations: Baker Victory Services, Belle Community Center, Buffalo Municipal Housing Authority, BUILD of Buffalo, Belmont Shelter Services, Black Buffalo Chamber of Commerce, 100 Black Men of Buffalo, Buffalo Municipal Housing Authority, Erie County Health Department, First Ladies of WNY (FLOW), First Shiloh Baptist Church, Ford Motor Plan (Tonawanda, NY), Greater Emmanuel Temple Church, Ha'naniah Lutheran Church, Hispanic Heritage Council of WNY, Hispanics Unidos de Buffalo, Gateway-Longview Family Resource Center, Minorities Allied for the Need to Understand Prostate Cancer (MAN UP), Native American Community



Services, Niagara County Health Department, Niagara Falls Housing Authority, Olivenicia Community Services, Primera Iglesia Metodista Unida Church, Second Baptist Church, True Bethel Baptist Church, Trinity Baptist Church, University District Coalition of Block Clubs, West Side Community Services, Western New York Veterans Housing Coalition, Word of Life Ministries.

Serves: Chautauqua, Erie and Niagara Counties

All Strategies Addressed:

Health Promotion Cancer Prevention/Tobacco 2

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1

Health Promotion Cancer Prevention/Environmental Exposure 4

Health Promotion Cancer Prevention/Genetics 1

Early Detection 2/3/4

Treatment 3/6

Survivorship 4/5

Roswell Park Cancer Institute: Support for Life Survivorship Program

Description: The Support for Life Survivorship Program identifies cancer survivors from the day of diagnosis and beyond the completion of their treatment. Support for Life enhances the availability of resources and supportive services for patients and their loved ones. The Support for Life After Therapy Clinic is designed for patients who may have on-going issues after their cancer treatment has been completed.

Program Website: Not Applicable

Phone: 716-845-2333

Email: supportforlife@roswellpark.org

Collaborating Organizations: None

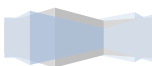
Serves: Allegany, Cattaraugus, Cayuga, Chautauqua, Erie, Genesee, Livingston, Monroe, Orleans, Steuben, Wayne and Wyoming Counties

All Strategies Addressed:

Survivorship 1/3/4

St. Mary's Healthcare (Amsterdam, NY): Palliative Care Program

Description: The St. Mary's Healthcare (SMH) Palliative Care Program



provides consultive services to inpatients at St. Mary's Healthcare, outpatient consults at New York Oncology Hematology, outpatient consults at Cancer Medicine of St. Mary's Healthcare and consults at Wilkinson's Nursing Home.

Program Website: Not Applicable

Phone: 518-770-7523

Email: susan.larusso@smha.org

Collaborating Organizations: None

Serves: Fulton and Montgomery Counties

All Strategies Addressed:

Palliative Care 1/5/6/7

SHARE Cancer Support: For Women Facing Breast and Ovarian Cancers

Description: SHARE supports, educates, and empowers people affected by breast or ovarian cancer. All of our services are provided by survivors who've been there. SHARE is a great resource for information about breast and ovarian cancer, particularly patients' experiences with these diseases. We can connect you with survivors who are happy to tell their stories. Our goal is to raise public awareness and knowledge about these diseases and the impact they have on people's lives.

Program Website: sharecancersupport.org

Phone: 212-937-5573

Email: bkling@sharecancersupport.org

Collaborating Organizations: None

Serves: All of New York State

All Strategies Addressed:

Survivorship 1/4

Health Promotion Cancer Prevention/Environmental Exposure 1

Health Promotion Cancer Prevention/Genetics 2

South Nassau Communities Hospital: SIBSPlace

Description: SIBSPlace of South Nassau Communities Hospital provides free prevention services for children living with a sibling or parent with cancer. Staffed by mental health professionals, the program offers peer support services to address the common feelings a well-child may have as they try to



understand their loved one's diagnosis. Children ages 5-17 meet twice a week and participate in creative arts therapy groups to help them increase self-expression, normalize feelings and develop effective coping skills. Age-based groups are also offered including teen services and a young children's group for participants ages 5-9. Activities address anticipatory grief concerns and bereavement services are also offered. Parents group is help weekly for parents caring for a child or spouse with cancer and also for a parent with a cancer diagnosis. Family events are held throughout the year as an opportunity for the entire family to reinforce their relationships and engage in memorable experiences.

Program Website: www.sibsplace.org

Phone: 516-374-3000

Email: sibsplace@snch.org

Collaborating Organizations: None

Serves: Kings, Nassau, Queens and Suffolk Counties

All Strategies Addressed:

Survivorship 1

Palliative Care 5

Support Connection, Inc.

Description: Support Connection is a not-for-profit organization that offers free, confidential support services to people affected by breast and ovarian cancer. Support Connections offers support groups, one-on-one peer counseling, wellness classes, workshops and educational forums for women diagnosed with breast or ovarian cancer, their families and friends.

Program Website: www.supportconnection.org

Phone: 914-962-6402

Email: info@supportconnection.org

Collaborating Organizations: None

Serves: All of New York State

All Strategies Addressed:

Survivorship 1

The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Care Center



Description: The Breast Program at Northern Westchester Hospital is an interdisciplinary group of physicians and clinicians focused on the individualized treatment and management of a patient diagnosed with cancer, or considered at risk for developing breast cancer. Our strong network of communication within our program has been developed with women’s imaging, breast surgeons, plastic surgeons, medical oncologists, radiation oncologists, nutritionists, genetic counselors and our nurse practitioners who guide patients from diagnosis, through treatment and support. Our program has been accredited with the National Accreditation Program for Breast Centers (NAPBC). Northern Westchester Hospital has an approved AVON grant to provide services for underinsured/uninsured women for screening, and treatment modalities in our Breast Health Initiative Program. Our Cancer Treatment and Wellness Center has a dedicated NP to navigate and assist patients during and after their clinical treatments. Each “program” is connected via a network of clinicians who communicate patient’s needs with one another. NWH has a history of collaborating with our community partners such as Support Connection, American Cancer Society, Gilda’s Club, VNA Hospice, the Hamilton Caregiver Center, to benefit our patients and families in the comfort of their own community.

Program Website: www.nwhc.net

Phone: 914-242-7611

Email: pbonanno@nwhc.net

Collaborating Organizations: Support Connection, American Cancer Society, Gilda’s Club, AVON

Serves: Putnam and Westchester Counties

All Strategies Addressed:

Treatment 1/2/3/4/5/6

Early Detection 1/2/3/4

Survivorship 1/2/3/5

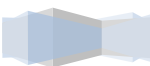
Health Promotion Cancer Prevention/Tobacco 1

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1/2/3/5

Health Promotion Cancer Prevention/Genetics 1/2/3/4

The Brooklyn Minority-Based Community Clinical Oncology Program

Description: Through supplemental funds to the parent grant, the Community



Health Educator (CHE) project addresses the disparity in screening for colorectal cancer (CRC) among two priority populations in Brooklyn– African Americans and immigrants. The CHE project carries out multi-disciplinary research-based plans for outreach and education to promote CRC screening in neighborhoods where the priority populations predominate. In particular, it evaluates the efficacy of a culturally-sensitive Facebook page for residents of Brownsville, New York to promote screening among African Americans. It conducts formative research on engagement of Russian immigrants, among whom there is increased genetic susceptibility to CRC. Woven into all this work are activities to promote awareness of and support biospecimen collection, bio-banking, and enrollment in available cancer clinical trials for prevention, control and treatment.

Program Website: www.thebrooklynmbccop.org

Phone: 718-613-8324

Email: Natalie.baptiste@downstate.edu

Collaborating Organizations: SUNY Downstate Medical Center, Kings Hospital Center, The Maimonides Cancer Center

Serves: Kings County

All Strategies Addressed:

Health Promotion Cancer Prevention/Genetics/Other

To Life!: Beat the Odds

Description: To Life! Hosts a morning symposium (Beat the Odds) featuring two to three medical experts speaking on the latest developments in breast cancer treatment and related health therapies.

Program Website: www.tolife.org

Phone: 518-439-5975

Email: info@tolife.org

Collaborating Organizations: None

Serves: Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Warren, and Washington Counties

All Strategies Addressed:

Treatment 4/6



University at Buffalo Family Medicine and Patient Voices Network: Patient Ambassadors to Increase Mammography Screening

Description: This project addresses lack of education on breast cancer and breast cancer services, transportation barriers, and clinical/provider information and screening protocol for low-income minority women living in the city of Buffalo. The goals of this project are to 1.) increase screening mammography in underserved communities, 2.) create a system to offer screening mammography, follow-up and treatment in the patient centered medical home and 3.) offer support and education by patient ambassadors to women to encourage screening and necessary follow-up. The team partners with WNY Breast Health Mobile Mammography Unit to reduce transportation barriers. The coach is present at each practice once a month for 12 months. Women in need of screening are encouraged to make an appointment to receive their medical check , mammogram referral and mammogram at one time. Cancer Services Program of Erie County is partnering to ensure that uninsured and underinsured women are linked to service and eliminate financial barriers to mammography screening. In addition, Patient Voices Network, a group of empowered patients from each of the primary care practice sites partners. These patients have increasing cancer screening as one of their main objectives. Members of the PVN were trained as Patient Ambassadors and deliver basic breast health education and offer support through listening, kind words, prayer, or other means identified by the patient. Patient Ambassadors are responsible for linking uninsured and underinsured patients with Cancer Services Program of Erie County. The evaluation of the program will evaluate the success of the screening initiative. The results will be reported back to the providers to underscore the importance for maintaining the system that is developed through support by the WNY affiliate of Susan G. Komen for the Cure.

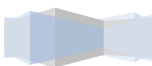
Program Website: www.fammed.buffalo.edu/patientvoices

Phone: 716-816-7278

Email: tumiel@buffalo.edu

Collaborating Organizations: WNY Breast Health, Cancer Services Program, Jericho Road Community Health Center, UBMD Family Medicine at Jefferson Clevehill Family Practice

Serves: Erie County



All Strategies Addressed:

Early Detection 1/2/3/4,

Health Promotion Cancer Prevention/Genetics/Other (Encourages patients to know their family risk and educates them on why it is important to know.)

URMC Center for Community Health: Cancer Services Program of Monroe County

Description: Cancer Services Program of Monroe County (CSP-MC) is the only cancer prevention and screening program in Monroe County that promotes age-appropriate breast, cervical and colorectal cancer screening for uninsured and under-insured men and women. The CSP-MC does not perform the screenings but pays for clinical breast exams and mammograms, pelvic exams and pap tests, and FIT kits and/or colonoscopies at over 100 clinics, hospitals and doctors' offices. The program also pays for follow-up diagnostic exams if there is an abnormal finding during a screening. In the unfortunate instance that cancer is found, the program will enroll eligible patients into the Medicaid Cancer Treatment Program (MCTP) for full coverage of treatment services.

Program Website: GetScreenedRochester.com

Phone: 585-224-3071

Email: Candice.lucas@urmc.rochester.edu

Collaborating Organizations: More than 100 doctors, FQHC, clinics, health systems and health care professionals throughout Monroe County and the New York State Department of Health

Serves: Monroe County

All Strategies Addressed:

Health Promotion Cancer Prevention/Physical Activity and Nutrition 1

Early Detection 2/3



V. New York State Department of Health Cancer Prevention and Control Programs by Plan Area

A. Health Promotion Cancer Prevention

a. Tobacco

Community Partnerships-Tobacco Currently, 33 Community Partnership contracts are funded to implement a coordinated set of strategies designed to build public, political and organizational support for policies that support and reinforce the tobacco-free norm. By effectively educating and mobilizing the public, and educating government and organizational policy makers, communities become receptive to and demand strong tobacco control policies. Such policies include those that reduce tobacco marketing in the retail environment, tobacco-free outdoors, and smoke-free housing. Community policy change is targeted to have the greatest impact on the low SES population.

http://www.health.ny.gov/prevention/tobacco_control/

Youth Partners (Reality Check) Sixteen Reality Check contractors are working to engage youth to counter the tobacco industry and its marketing practices. They implement a coordinated set of strategies designed to build public, political and organizational support for policies that support and reinforce the tobacco-free norm. Such policies include those that reduce tobacco marketing at the retail environment and smoke-free media. Community policy change is targeted to have the greatest impact on the low SES population.

http://www.health.ny.gov/prevention/tobacco_control/

Tobacco Cessation Centers Nineteen Cessation Centers are funded and cover every county in NYS to increase the number of health care provider organizations that have systems to screen all patients for tobacco use, provide advice to quit and brief counseling at all visits, and provide evidence-based treatments to help patients quit successfully. They also promote Medicaid benefits for smoking cessation, and encourage private health plans to expand tobacco cessation coverage. Health systems change work is focused on



providers that primarily serve low SES population and patients with serious mental illness. http://www.health.ny.gov/prevention/tobacco_control/

The New York State Smokers' Quitline The Quitline provides individualized telephone counseling to adult smokers who want to quit. In addition, the Quitline offers free 2-week NRT starter kits by phone or Internet to eligible clients, prerecorded telephone messages covering a range of stop smoking topics, and a Quitsite Web site with interactive features. For health care providers, the Quitline offers an Opt-to-Quit program for tobacco using patients and free cessation continuing medical education programs for providers.

<http://www.nysmokefree.com/newweb/default.aspx>

Tobacco Surveillance

The Adult Tobacco Survey (ATS) ATS was developed by the New York Bureau of Tobacco Control in partnership with Research Triangle Institute. The survey is fielded quarterly to the non-institutionalized adult population in New York State. Since July 2003, the ATS has regularly assessed adult knowledge, attitudes and behaviors regarding tobacco use, purchasing and cessation; health status and health-related problems; attitudes toward, and exposure to secondhand smoke; perceptions of risk related to tobacco use; exposure to pro-tobacco and anti-tobacco media; and attitudes about policy solutions. The ATS is a key surveillance and evaluation tool for the program.

The New York National Comparison Adult Tobacco Survey (NY NATS)

NY NATS is administered to a nationwide sample (minus New York) of the non-institutionalized adult population, aged 18 years or older. It is modeled on the state ATS and used for comparing progress in New York with the rest of the nation.

The Youth Tobacco Survey (YTS) YTS was developed by CDC in collaboration with states to provide information on trends in youth tobacco use, youth access to tobacco, and perceptions related to tobacco. It is the primary tool for measuring the impact of youth prevention in New York, mostly by social norm change. Starting in 2000, NYSDOH has conducted the



YTS biennially to produce separate estimates for New York City, New York State without New York City, and New York State as a whole. The survey reaches students in grades 6 through 12 attending public, parochial, and private schools in New York. Indicators assessed by the YTS include tobacco use; secondhand smoke exposure; peer group influences; prevalence of cigarette smoking on school property; and exposure to pro-tobacco messages.

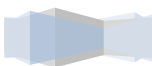
b. Physical Activity and Nutrition

Healthy Schools New York (HSNY) Eighteen contract organizations are working with schools to develop policies that will create healthier environments for students and adults. Policy efforts are focusing on increasing physical education and physical activity opportunities and improving the nutrition environment outside of the school meals program in schools.

Creating Healthy Places, to Live, Work, and Play Twenty-two community contractors are working to increasing the availability and accessibility of places to be physically activity; creating and maintaining places to be physical activity, such as playgrounds and walking trails; increasing the availability of and accessibility to fresh fruits and vegetables; and increasing the healthful quality of foods offered for sale at local restaurants and corner stores. Five of these contractors are also working to implement comprehensive worksite wellness strategies in small to medium size worksites.

Food Procurement Community Demonstration Project Using food procurement guidelines developed by the NYS Council on Food Policy, the Department works with two counties, Schenectady and Broome, on a demonstration project to increase the use of these standards in community based organizations and municipalities.

Breastfeeding Friendly Community Demonstration Project The Department works with two counties, Schenectady and Broome, on a



demonstration project to increase breastfeeding exclusivity and duration in the post discharge period. The two counties are working with family, pediatric, and obstetric offices to adopt policies/practices to become a formula industry-free medical practice. This includes eliminating the practice of distribution of free formula and baby items/materials developed by formula industry to parents and not portraying industry developed materials in medical offices.

Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Breastfeeding Support

All WIC local agencies have active peer counselor programs. Local agencies have designated breastfeeding coordinators with Certified Lactation Counselor training. Many have International Board of Certified Lactation Consultants credentials. Dedicated funds are provided to support the breastfeeding coordinator. 50,000 women are reached monthly by 350 peer counselors statewide. **WIC Healthy Lifestyles** – WIC local agencies assess, develop, implement and evaluate strategies to encourage participants and their families to adopt a healthier lifestyle through physical activity and improved nutrition. All local agencies receive funds to support these strategies in their WIC local agency budget. The WIC Program reaches 513,000 low income women, infants and children statewide through a network of 93 local agency contractors. The program is ongoing. **WIC Farmer’s Market Nutrition Program** – This program is designed to encourage low-income families at nutritional risk to increase their consumption of fresh fruits and vegetables through the issuance of checks that may be redeemed at participating farmers markets throughout the state. In 2012, 922,919 farmer’s market checks, valued at \$3.7million, were utilized by over 271,000 families between May and July.

Breastfeeding-Friendly Child Care Centers and Homes The USDA’s Child and Adult Care Food Program (CACFP) encourages participating child care centers and day care homes to support breastfeeding by seeking designation as a “Breastfeeding Friendly Child Care.” Modeled after UNICEF’s Baby Friendly Hospital Initiative, child care programs must attest that they provide an atmosphere welcoming to breastfeeding families, support mothers efforts

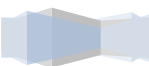


to continue breastfeeding when they return to work or school, provide breastfeeding resources to families, feed infants on demand, coordinate infant feeding times with parents' schedules, train all staff to support breastfeeding families, and create a written breastfeeding support policy. The certification period is two years and is renewable. One hundred forty-six child care centers and 484 day care homes have been designated as Breastfeeding Friendly.

Breastfeeding Quality Improvement Hospitals (BQIH) A structured, data-driven, quality improvement project based on strong, evidence-based hospital policies and practices to promote and support exclusive breastfeeding by new mothers. The DOH, in collaboration with the National Initiative for Children's Healthcare Quality (NICHQ), worked intensively in a learning collaborative with 12 hospitals (10 of which have the highest rates of formula supplementation of breastfed babies in NY) to make policy, systems and environmental changes to better support new mothers to exclusively breastfeed their infants in the hospital and beyond.

Ten Steps to Successful Breastfeeding: 20-Hour Interdisciplinary Breastfeeding Management Course This course addresses the basic training requirements specified in the Ten Steps to Successful Breastfeeding, 10 strategies endorsed by the World Health Organization (WHO) and UNICEF to support successful breastfeeding in maternity care facilities. Approximately 1000 online access codes were purchased and distributed by the Regional Perinatal Care Centers to their affiliate hospitals. Every hospital in the state that provides maternity care received up to 8 access codes each. The New York State Department of Health monitors participants' initiation, progress, and completion of the course statewide.

Breastfeeding Friendly Erie County The goal of this initiative is to increase breastfeeding exclusivity and duration from hospital discharge through 3 months among low income women participating in WIC and Medicaid, who live in communities of color in Erie Co, NY. This is being accomplished by

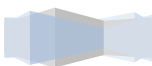


enhancing and strengthening a community system of breastfeeding support through improving: partnership building and coordination; breastfeeding practices in provider offices and practices, home visiting services and programs, child care settings and community based organizations; and access to local breastfeeding centers. This targeted intervention works through 12 community based organizations currently serving and supporting breastfeeding mothers and their babies after discharge from the hospital.

Child and Adult Care Food Program (CACFP) Healthy Meal Patterns

CACFP provides reimbursement to child care centers and homes to provide nutritious snacks and meals to children in care. The goal of the Healthy Meal Pattern was to put in place a meal pattern with nutrition requirements in excess of the nationally-set meal pattern. CACFP's Healthy Meal Pattern more closely aligns with the *Dietary Guidelines for Americans*. Four Thousand fifty child care centers (out of 6,639 licensed centers); 9,647 home-based providers (out of 29,731 licensed, registered and legally exempt); serving a daily average of 320,507+ infants, toddlers, preschoolers, and children ages 5-12, and teenagers ages 13-18.

Eat Well Play Hard in Child Care Centers and Homes CACFP participating low- income child care centers provide nutrition education, obesity prevention, and physical activity interventions through the Eat Well Play in Child Care Settings initiative. The intervention reaches children and families in 33 counties plus 4 NYC boroughs. Currently, the intervention has been implemented in 274 centers reaching 16,000+ children and families and is being expanded to low-income family day care home providers and the families they serve. This work began in 2006 and is funded by both state (\$.4million) and federal sources (\$2 million). The intervention reaches children and families in 33 countries and 244 centers reaching 13,500+ children. This intervention has been expanded to include 170 low income family day care providers reaching 1,000+ children and families they serve. This work began in 2006.



[Hunger Prevention and Nutrition Assistance Program \(HPNAP\) Healthy Foods Initiative](#) –

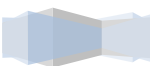
HPNAP implements policies to assure that healthy foods, such as fresh produce, low-fat milk, whole grains and lean protein items are available through the eight regional food banks and 2,500 food pantries, soup kitchens and shelters supported through HPNAP. The HPNAP program provided more than 200 M meals last year to alleviate hunger in NYS and spent \$6.5 million on fresh produce and low-fat dairy products. In 2012-2013, the Department of Health awarded funding to food banks to assist with the purchase or procurement of locally grown fruits and vegetables. Approximately 5 million pounds of locally grown produce was distributed to emergency food providers. This effort supports the Governor’s Fresh Connect initiative.

[Just Say Yes \(JSY\) to Fruits & Vegetables Project](#)

The JSY Project increases access to and consumption of fruits and vegetables by individuals and families receiving food stamps and WIC benefits. In the FFY 11-12, JSY nutritionists conducted nutrition education and food demonstration sessions with more than 28,000 individuals. In New York City, JSY’s Stellar Farmers’ Markets project distributed 15,321 “Health Bucks” during the growing season which helps SNAP participants purchase and consume fresh fruits and vegetables.

[Healthy Eating, Active Living by Design](#) Twelve organizations improve opportunities for physical activity and healthy food choices at the community-level for a significant proportion of their identified target population by implementing sustainable, evidence-based practice and environmental interventions.

[Obesity Prevention in Pediatric Health Care Settings](#) Nine organizations are working on systems change in the primary care setting. The 2007 American Medical Association *Expert Committee Recommendations on the Assessment, Prevention and Treatment of Child and Adolescent Overweight and Obesity* serve as the guide for systems change and improving outcomes. Contractors



contribute to state and regional capacity building, collaboration and planning by networking with local health departments and groups implementing nutrition, physical activity and obesity prevention programs / interventions to facilitate patient / family referrals to existing community resources and improve self-management of obesity and/or obesity-related health conditions.

Community Transformation Grant - Small Communities The departments of health in Broome, Cattaraugus and Chautauqua counties are implementing a coordinated set of ten strategies in eight high need areas to address tobacco-free living, active living and healthy eating, and healthy and safe physical environments for children ages 0-18. The ten strategies are supported by the *Health Impact Pyramid* framework, focusing on policy, systems, environmental and infrastructure changes to make healthy choices the easiest choices in early childcare settings, schools and in the community at-large

Student Weight Status Category Reporting System (SWSCR) This surveillance system was established by amendments to New York State Education Law Sections 903 & 904 in 2007 to support state and local efforts to understand and confront the problem of childhood obesity. Amendments to Education Law required student health certificates to include students' body mass index (BMI) and weight status categories. Currently, students in Pre-Kindergarten, Kindergarten and grades 2, 4, 7 and 10 are required to have a student health certificate completed based on a physical examination (usually performed by the student's personal physician). Information, including BMI and weight status category - underweight, healthy weight, overweight or obese (based on BMI determined from measured height and weight), is collected by each school from the student health certificate forms. A summary from each school is reported to the school district, which forwards the information to NYSDOH, using a secure reporting system. Each year 50% of school districts are required to report student weight status information to generate representative estimates of childhood obesity rates for each school district and county and for the state as a whole, exclusive of



New York City, over a two-year period. School district-level, county-level and statewide reports are publicly available through Health Data NY (<https://www.health.data.ny.gov/>).

c. Environmental Exposure

d. Ultraviolet Radiation

[Increasing awareness regarding the tanning ban and compliance with tanning regulations](#)

The Department is working on a new project with a NYS Cancer Consortium work group to develop and conduct a public opinion poll in order to assess awareness and support for the new regulation and ascertain if people would support an increase in age requirements of indoor tanning. Based on poll results, the work group will develop key messages and work with the Consortium to disseminate them to key target audiences.

e. Genetics

f. Vaccines

[Vaccines for Children Program](#) The Vaccine Program of the Bureau of Immunization manages the New York State Vaccines for Children Program (NYS VFC). The NYS VFC, initiated in 1994, provides vaccines for Medicaid/Medicaid Managed Care, uninsured, American Indian/Alaskan native, and underinsured children. VFC-eligible children, less than 19 years of age, are able to receive any Advisory Committee on Immunization Practices (ACIP)-recommended childhood vaccine, including both hepatitis B and HPV vaccines, from any participating provider. Over 1,800 provider sites in the state are enrolled and active in NYS VFC, including most pediatric practices and NYS local health departments (LHDs), and many family practices. In addition, the Vaccine Program manages the provision of vaccine to providers that see Child Health Plus enrollees and provision of state-funded vaccine to certain underinsured children.

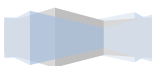
Contact: Jill Dunkel, nysvfc@health.state.ny.us



Immunization Requirements for School Entry and Attendance Hepatitis B vaccine is one of nine vaccines required for school (grades K-12) entry and attendance, and one of eleven vaccines required for pre-kindergarten (day care, nursery school, head start, or pre-K) entry and attendance in NYS. Beginning in 1994, children were required to have three doses of hepatitis B vaccine, demonstrated serologic immunity to hepatitis B virus, or a medical or religious exemption to vaccination in order to attend pre-kindergarten or school in NYS. The Bureau of Immunization has annually surveyed all schools and pre-kindergartens since 1979 in order to assess vaccination coverage; during the 2012-2013 school year 98% of children in NYS schools and pre-kindergartens had three doses of hepatitis B vaccine or serologic evidence of immunity to hepatitis B. **Contact:** Robin Sutor, osas@health.state.ny.us

Perinatal Hepatitis B Prevention Program (PHBPP) The PHBPP provides surveillance and control of perinatal hepatitis B infection by ensuring infants born to infected women receive the recommended treatment at birth, completion of the vaccine series and serology. The Bureau of Immunization provides state and federally funded hepatitis B vaccine at no cost to any birthing hospital that institutes a universal hepatitis B birth dose policy. To date, there are 91 participating birthing hospitals in NYS and an average birth dose rate of 83% was achieved for the state in 2012 (up from ~71% in 2008). The Bureau of Immunization has set a goal for a statewide birth dose rate of 90%; hospitals that achieve the 90% birth dose rate and no deficiencies noted in their Lot Quality Assurance (LQA) site visit are rewarded a Certificate of Excellence. Hospitals with a birth dose rate of < 90% or with a deficiency noted receive more intensive education and follow-up LQA visits in order to raise their birth dose rates and address their deficiencies. Contact: Lynn Pollock, immunize@health.state.ny.us

Adult Hepatitis Vaccination Program (AHVP) The Bureau of Immunization provides hepatitis B vaccine to participating sites for high-risk adults that do not have insurance coverage for vaccination and who seek services in high-risk settings including STD, HIV and adult immunization clinics. Since the program began in 1995, over 272,000 doses of vaccine have been



administered through this program. At present, 157 sites serving adults at high risk of hepatitis B infection are enrolled in the AHVP.

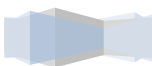
Contact: Betsy Rausch-Phung, immunize@health.state.ny.us

Adolescent Immunization ProgramThe Bureau of Immunization Adolescent Immunization Program aims to increase adolescent immunization coverage rates in NYS, including human papillomavirus (HPV) vaccination of preadolescents and adolescents. One major focus of the Adolescent Immunization Program is to build on the high preadolescent tetanus, diphtheria, and acellular pertussis (Tdap) vaccination rates in NYS to encourage initiation of the HPV vaccine series at the same time as the 11-12 year routine annual provider visit for the Tdap school requirement. The Bureau will utilize multiple methods to encourage HPV vaccination including educational materials, an adolescent vaccination-focused newsletter, webinars, and collaboration with stakeholders.

Contact: Lynn Berger, immunize@health.state.ny.us

B. Early Detection

Cancer Screening Registry (Innovations Project)The Department was awarded a five-year grant to advance evidence-based, cancer-prevention practices within primary care facilities that serve populations with the lowest screening rates for breast, cervical, and colorectal cancers. This Cancer Innovations project will establish a cancer screening registry for federally-qualified health centers (FQHCs) to increase cancer screening among their adult patients and ensure appropriate follow-up care. The initiative is a partnership with the Community Health Care Association of New York State (CHCANYS), which is the federally-designated Primary Care Association for the state, and the Island Peer Review Organization (IPRO), the federally-designated Quality Improvement Organization for New York. The population served by FQHCs mirrors the population with the lowest screening rates for breast, cervical, and colorectal cancers, i.e., generally people with low income, low educational attainment, who do not have health insurance or are underinsured, and have limited access to healthcare. In addition, members of minority groups or recent immigrants are less likely to be screened than their peers. This new clinical information system (registry) will promote quality



improvement in health care and chronic care management, which will improve health outcomes. The registry will automate provider assessment and feedback on screening as well as the monitoring of screening results. The registry will also increase population-level screening, ensure adherence to cancer-screening guidelines, and provide essential data to enable DOH and community-based organizations to more accurately target practices and communities with low screening rates for evidence-based interventions. The project began July 2012.

Cancer Services Program

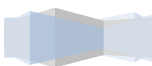
The Department's Cancer Services Program (CSP) oversees the delivery of comprehensive breast, cervical and colorectal cancer screening services to eligible New York State (NYS) residents through 40 contracts with community-based organizations. The CSP contractors enter into agreements with over 5,000 health care providers and clinical laboratories that are credentialed to provide clinical services through the CSP contractors. The contractors provide screening and diagnostic services and assist those diagnosed with cancer to obtain prompt treatment. The contractors also assist individuals diagnosed with breast, cervical, colorectal or prostate cancer in obtaining prompt, comprehensive treatment through the New York State Medicaid Cancer Treatment Program (MCTP), if eligible. Eligible individuals may receive full Medicaid coverage for the duration of their cancer treatment. The CSP monitors the clinical performance and outcome data of participating providers to ensure CSP clients receive quality clinical services. The priority population for the CSP screening contractors is women and men ages 50 to 64 who are at or below 250 percent of the federal poverty guideline and who have no health insurance or whose insurance does not cover screening or diagnostic services. Of special concern are ethnic and racial minority groups and women who are medically underserved because they live in isolated communities. In October 2013, CSP contractors will begin promoting and referring clients to the NY State of Health so that eligible New Yorkers can receive full health insurance coverage. The CSP operates a 24/7 Toll-Free Recruitment Phone-line (866-442-CANCER/866-442-2262), which has translators and refers callers directly to screening partnerships, cancer support services, legal services, and genetic counselors. While



implementation of the Affordable Care Act will greatly expand health insurance coverage for cancer screening, it is estimated that eight to ten percent of men and women ages 50 to 64 will remain uninsured. And, the eligible population for CSP services will be harder to outreach due to, for example, limited English proficiency, lower socioeconomic status, less connected to health care, etc. The Department's CSP will continue to promote cancer screening and address existing barriers to receipt of screening (lack of awareness, fear, busy schedules, transportation, time off from work, and childcare) through promotion, targeted outreach, and improved delivery of care systems. <http://www.health.ny.gov/diseases/cancer/services/>

Increasing awareness of colorectal cancer screeningThe Department uses print, electronic and broadcast public service announcements from CDC's *Screen for Life: National Colorectal Cancer Action Campaign* to raise awareness about colorectal cancer and promote screening among men and women ages 50 and older. The 2013 campaign, which ran from May 17 through June 30, included English and Spanish Internet flash ads, a campaign page on the Department website (<http://www.health.ny.gov/diseases/cancer/colorectal/campaign/>), and 30-second English and Spanish radio spots. The goal was to saturate local media channels with messages about the importance of getting screened and to complement local and regional education and screening campaigns, such as New York's *Main Streets Go Blue* initiative. *Main Streets Go Blue* is an initiative to raise awareness about colorectal cancer screening. CSP contractors selected specific areas in their communities and recruited local businesses, partner organizations and community leaders to educate their employees and communities about the need for colorectal cancer screening and direct new clients to the local CSP for screening services. Businesses and partners distributed educational materials, facilitated community forums and educational sessions and some hosted screening events.

Patient NavigationThe Department funds a large, federally qualified health center serving a five-county region of upstate New York to provide patient navigation services to reduce structural barriers to cancer screening for



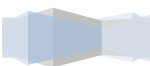
women, such as transportation, work schedules, and education. Patient navigators are care coordinators who help patients access screening services as well as any necessary follow-up diagnostic or treatment services. The ongoing goals are to reduce barriers to timely cancer diagnosis and treatment and to, where possible, link women seeking cancer screening with a medical home. In addition, the Department funds the Charles B. Wang Community Health Center to utilize a patient navigator to increase colorectal cancer screening rates in the Chinese population in Chinatown and Flushing in NYC.

Disability and Health ProjectThe Department is working to increase awareness of cancer screening among women with physical disabilities and improve access to screening services. A survey was disseminated to 260 CSP mammography facilities with a total of 121 respondents who completed the survey on 171 individual mammography facility locations. Survey results have been cleaned and preliminary analysis has occurred. Staff met with the CSP to begin discussions on how to use the survey results to inform provider training and breast cancer screening awareness activities, including the development of training webinars and a best practices document. Additional data analysis is underway.

Cancer Screening Community Demonstration ProjectThe Department works with two counties, Schenectady and Broome, on a demonstration project to increase cancer screening rates through work with municipalities. Contractors are working with municipalities to expand the already existing paid leave policies for their employees to also include cervical and colorectal screenings.

C. Survivorship

Cancer Survivor Follow Up Care PlanIn conjunction with an outside panel of experts, the Department is developing generic survivorship care plan for use by primary physicians as guidance for care of patients who have been discharged from active cancer treatment. This standardized follow-up care plan template is for individualized treatment summaries and follow up

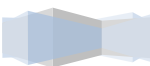


recommendations. The goal is to disseminate and urge routine use of these care plans to oncologists and Primary Care Physicians in NYS in order to reduce morbidity and mortality for cancer survivors.

Community-Based Breast Cancer Education, Counseling, Outreach and Support Services

The Department currently funds ten breast cancer organizations throughout the state to provide community-based supportive/educational services for individuals diagnosed with breast cancer and their families. Services provided by these organizations vary but include: support groups, breast cancer educational seminars, wellness events, yoga instruction and social events.

Legal Supportive Services The Department currently funds six legal assistance projects throughout the state to provide free or low cost legal assistance to those with cancer and their families who cannot afford private representation. Significant legal and financial concerns can arise as a direct result of a cancer diagnosis. These clients often have legal and financial issues that require immediate attention due to the nature of their disease. Some of the legal services provided involve health insurance denials, the need for timely Social Security Disability approval, access to or denial of benefits and entitlements and end-of-life planning.



VII. NYS Comprehensive Cancer Control Plan Area Goals and Strategies

Health Promotion and Cancer Prevention Goal:

All New Yorkers will have current and evidence-based information, resources and opportunities necessary to adopt and maintain health-promoting behaviors to reduce the risk of cancer.

Tobacco Use:

STRATEGY 1: Supports policy-driven, population-based approaches to prevent youth from smoking and to motivate adult smokers to quit. (Includes: keeping tobacco products out of consumer view in non-adult-only retail environments, promoting efforts to limit tobacco sales in pharmacies, tobacco-free college/university campus policies and parks, playgrounds and beaches, voluntary adoption of tobacco-free policies in multi-unit housing, expanding health plan coverage of tobacco dependence treatment.)

STRATEGY 2: Promotes the recommended strategies of the Community Prevention Task Force and the Centers for Disease Control (CDC) Best Practices for Tobacco Control Programs.

STRATEGY 3: Other strategy not listed.

Physical Activity and Nutrition:

STRATEGY 1: Endorses policies and initiatives that support health-promoting behaviors, including access to nutritious foods and increasing opportunities for physical activity, especially among populations most at risk or affected by overweight and obesity.

STRATEGY 2: Promotes voluntary adoption of food procurement and vending guidelines by state agencies, local governments and community-based agencies and their vendors.



STRATEGY 3: Supports policies to increase the duration and exclusivity of breastfeeding, including those policies recommended by New York’s Medicaid Redesign Team.

STRATEGY 4: Works with local school districts to ensure compliance with state requirements for physical activity for students and reporting on Body Mass Index.

STRATEGY 5: Encourages hospitals to provide labor and delivery services to achieve “Baby Friendly Hospital” designation.

STRATEGY 6: Other strategy not listed.

Environmental Exposure:

STRATEGY 1: Improves citizens’ awareness and understanding of the risks of exposure to cancer-causing substances in the environment and ways to reduce exposure to those substances through collaborative educational efforts with environmental health entities. Included in these efforts: information about the role of diet in cancer prevention, including the identification of dietary risk factors for common cancers and ways to reduce exposures; the potential risks from products used in and around the home (e.g. pesticides, solvents and other chemicals); and the need to recognize the potential for known or possible occupational/agricultural carcinogens to be brought into the home; and the identification of actions to reduce these exposures.

STRATEGY 2: Increases the availability of data about cancer incidence and unusual patterns of cancer for small geographic areas across the state.

STRATEGY 3: Partners with federal, state and local governments, businesses and communities to reduce elevated exposures or suspected environmental risk factors for cancer (e.g. elevated levels of known or suspected human carcinogens at hazardous waste sites, in the workplace, in personal care and consumer products, in drinking water supplies and in indoor or outside air).



STRATEGY 4: Increases the number of environmental risk factors for cancer addressed by programs, policies or initiatives (e.g. carcinogens in soil, water, air, food, consumer products; occupational carcinogens; radon in existing and new homes).

STRATEGY 5: Other strategy not listed.

Ultraviolet Radiation:

STRATEGY 1: Supports and promotes educational initiatives that stress sun safety messages and decreases exposure to UV lights for all ages, including initiatives that target schoolchildren, adolescents, parents, health care providers and summer camps.

STRATEGY 2: Supports existing tanning facility regulations (Subpart 72-1) to promote safety and appropriate use.

STRATEGY 3: Supports implementation of legislation banning the use of tanning beds by minors ages 16 and under.

STRATEGY 4: Other strategy not listed.

Genetics:

STRATEGY 1: Educates health care providers about the importance of asking patients about their personal and family histories of cancer to identify those likely to benefit from genetic counseling, consideration of genetic testing and chemoprevention.

STRATEGY 2: Provides accurate information to the public and health care providers about genetic tests and resources available to aid with risk assessment and development of management plans.

STRATEGY 3: Distributes up-to-date information about the availability of genetic counselors in the state, including those that provide services at low or no cost.



STRATEGY 4: Assesses the availability of reimbursement for genetic counseling and genetic testing, when appropriate and supported by evidence.

STRATEGY 5: Other strategy not listed.

Vaccines:

STRATEGY 1: Institutes reminder-recall systems in health care settings to increase the use of the HPV and HBV vaccines according to evidence-based guidelines.

STRATEGY 2: Educates health care providers about the benefits of providers recommending the HPV and HBV vaccinations to their patients.

STRATEGY 3: Supports educational campaigns targeted to at-risk adolescents and adults regarding the benefits and risks of HPV and HBV vaccines.

STRATEGY 4: Ensures access to HPV and HBV vaccines for persons and communities at-risk.

STRATEGY 5: Promotes the use of HBV vaccine in venues where persons at risk for HBV access services, such as sexually transmitted disease (STD) clinics and needle exchange programs.

STRATEGY 6: Other strategy not listed.



Early Detection Goal:

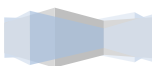
All New Yorkers will receive age-appropriate, evidence-based, guideline-driven screening services for the early detection of cancer.

STRATEGY 1: Assures the successful implementation of the Patient Protection and Affordable Care Act (PPACA) to reduce economic barriers to cancer screening.

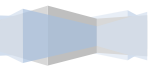
STRATEGY 2: Implements the recommended strategies outlined in the Guide to Community Preventive Services to improve screening rates (includes: patient and provider reminders, educating patients about the benefits of cancer screening and ways to overcome barriers to screening, evaluating and giving providers feedback on provider performance in providing screening services, using small media [videos, letters, brochures, newsletters] and earned media [free media, letters to the editor, appearances on local new programs] to build public awareness and demand for cancer screening, remove structural barriers to cancer screening, integrate cancer screening into routine clinical preventive services wherever possible, eliminate out-of-pocket costs for cancer screening, encourage and help health providers and health insurance companies include reminders for cancer screening in electronic health records systems.

STRATEGY 3: Provides accessible cancer screening to all New Yorkers regardless of insurance status or geographic location (including: support a reassessment of the federal National Breast and Cervical Cancer Early Detection and Colorectal Cancer Prevention Programs in light of PPACA implementation; and implement reciprocal referral systems to ensure that persons who need health insurance coverage for screening are appropriately referred to and enrolled in public health and insurance programs.

STRATEGY 4: Develops systems to assess and monitor disparities and barriers related to cancer screening and diagnostic services.



STRATEGY 5: Other strategy not listed.



Treatment Goal:

All New Yorkers will have access to high quality, comprehensive cancer care at an affordable cost.

STRATEGY 1: Promotes availability of the state’s Medicaid Cancer Treatment Program (MCTP), and ensures that treatment facilities train or have access to Designated Qualified Entities, who are responsible for enrolling clients in the program.

STRATEGY 2: Implements reciprocal referral systems to ensure that persons who need health insurance coverage for treatment are appropriately referred to and enrolled in public health insurance programs.

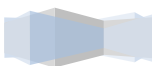
STRATEGY 3: Supports implementation and evaluation of patient navigation programs to help patients and families navigate the health care system (and support care coordination efforts).

STRATEGY 4: Educates the public and the medical community regarding recommended guidelines for effective treatment and quality of cancer care, such as those released annually by the National Comprehensive Cancer Network (NCCN).

STRATEGY 5: Promotes adherence to National Quality Forum consensus standards for quality cancer care.

STRATEGY 6: Reduces barriers to and increases treatment-related clinical trial enrollment across all populations through education and awareness.

STRATEGY 7: Promotes efforts to include coverage for the cost of patient care received during participation in clinical trials.



STRATEGY 8: Other strategy not listed.



Survivorship Goal:

All New Yorkers will have equal access to evidence-based, evidence-informed and guideline-driven services and appropriate, high-quality care for cancer survivors, families and caregivers.

STRATEGY 1: Develops new or enhances and leverages existing regional resource directories to increase cancer survivors' awareness of the availability of community support services (includes: transportation, housing, nutrition, psychosocial support, legal support, wellness programs, etc.).

STRATEGY 2: Promotes the use of standardized survivorship care plans (a written summary of cancer treatment, future care needs and available resources).

STRATEGY 3: Provides appropriate follow-up care (guideline-concordant cancer screening) and other appropriate post-treatment support (tobacco cessation counseling, physical activity recommendations, etc.).

STRATEGY 4: Conducts research and education about cancer survivors' needs (including adequacy of follow-up and support services, barriers encountered during the diagnostic, treatment and post-treatment phases of care, etc.).

STRATEGY 5: Implements policies across multiple settings that deter employment and insurance discrimination.

STRATEGY 6: Promotes health care facility adherence to National Quality Forum consensus standards to symptom management and end-of-life care.



STRATEGY 7: Tracks the number of NY care treatment facilities with STAR (Survivorship Training and Rehabilitation) certification as comprehensive cancer rehabilitation programs.

STRATEGY 8: Other strategy not listed.



Palliative Care Goal:

All New Yorkers will have equal access to evidence –based, evidence-informed and guideline-driven patient and family-centered palliative care services, across all populations.

STRATEGY 1: Works with associations representing health care professionals to promote hospice and palliative care certification and credentialing.

STRATEGY 2: Promotes oncology-related careers for physicians and nurses, especially those certified in palliative care.

STRATEGY 3: Promotes efforts to fund palliative care-certified medical schools and residency programs under the Palliative Care Education and Training Act.

STRATEGY 4: Supports implementation of palliative care programs for children (e.g. Concurrent Care for Children under the PPACA [Patient Protection and Affordable Care Act] and Pediatric Palliative Care Services under the Care at Home I/II Medicaid Waiver).

STRATEGY 5: Encourages oncology and inpatient programs to incorporate components of palliative care.

STRATEGY 6: Encourages health care providers, institutions, voluntary organizations, government agencies and others to provide education and information on palliative care and hospice care, including scope of services, locations, access to care and reimbursement.

STRATEGY 7: Documents and promotes the availability of palliative care in inpatient and outpatient settings in NCI-designated cancer centers,



tertiary hospitals, children's hospitals and community cancer centers in NYS.

STRATEGY 8: Monitors changes in State and Federal legislation and funding regarding palliative care, and serves as a source of this information for health care providers, institutions, voluntary organizations and others.

STRATEGY 9: Other strategy not listed.



Healthcare Workforce Goal:

All New Yorkers will have equal access to an adequate supply of primary care and oncology-related providers with demonstrated competencies in cancer prevention, detection, treatment, supportive services, and palliative care.

STRATEGY 1: Reduces barriers to the supply of cancer care providers in NYS (by supporting public policy changes which would remove U.S. permanent residency requirements for professional licensure among oncology-related professions; implementing PPACA [Patient Protection and Affordable Care Act] provisions for loan forgiveness and other activities aimed at building the health care workforce; and promoting efforts to increase the number of physicians who provide primary and cancer-specific care in geographic areas where they are needed).

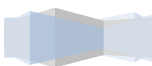
STRATEGY 2: Increases awareness of cancer-related fields as career options (by: urging federal policy change to increase the cap on Graduate Medical Education residency programs to allow for more physicians to be trained in primary care and cancer-related fields; identifying at least one set of cancer-specific educational modules to encourage persons of all ages to pursue careers in cancer, in collaboration with educational partners such as the Area Health Education Centers (AHECs); collaborating with AHECs on training and recruitment projects in rural and underserved areas; partnering with post-secondary educational systems (e.g. the State University of New York [SUNY] system, the City University of New York [CUNY] system and the Boards of Cooperative Educational Services [BOCES] to develop and/or share cancer career specific information for students; partnering with medical schools, schools of nursing/social work/allied health professionals, foundations and corporations to advocate for private funding support for cancer-related professional education such as internships, fellowships and student participation at conferences; encouraging cancer case training with collaborative models, such as patient-centered medical homes).



STRATEGY 3: Ensures access to oncology professionals with demonstrated competency in cancer care (by: increasing the number of physicians, nurses and social workers with subspecialties that relate to specific needs in the oncology field [i.e. hospice and palliative care]; encouraging and supporting continued education and specialty certification for all professionals working in cancer care; encouraging additional use of telemedicine, particularly in medical shortage areas; and developing linkages to integrate behavioral health providers in cancer care).

STRATEGY 4: Increases the diversity of the oncology health workforce to better match the composition of the New York population by partnering with medical/allied health professional organizations which serve non-White professionals to develop and/or distribute materials regarding the need for oncology specialists, certification processes and training opportunities.

STRATEGY 5: Other strategy not listed.



VIII. NYSCC Organizational Member Program by Region Served

A. All of New York State

[Adelphi New York Statewide Breast Cancer Hotline and Support Program](#)

[American Cancer Society: Healthy High Rises](#)

[American Cancer Society: Look Good Feel Better](#)

[American Cancer Society: Road to Recovery](#)

[American Cancer Society: New York State Colleges Tobacco Free Initiative \(NYSCTFI\)](#)

[Association of Pediatric Oncology Social Workers](#)

[Catie Hoch Foundation](#)

[Hospice and Palliative Care Association of New York State \(HPCANYS\)](#)

[Intercultural Cancer Council](#)

[New York Academy of Medicine: Designing a Strong and Healthy New York \(DASH-NY\)](#)

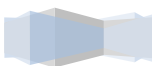
[New York State Cancer Registry](#)

[New York State Prostate Cancer Coalition](#)

[SHARE Cancer Support: For Women Facing Breast and Ovarian Cancers Support Connection, Inc.](#)

B. Capital NY (Albany, Columbia, Delaware, Greene, Montgomery Otsego, Rensselaer, Schenectady and Schoharie Counties)

[Cancer Services Program of Fulton, Montgomery and Schenectady Counties](#)



[Miles of Hope Breast Cancer Foundation: Miles of Hope Medical Gap Care Program](#)

[New York State Department of Health Bureau of Immunization](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[St. Mary's Healthcare \(Amsterdam, NY\): Palliative Care Program](#)

[To Life!: Beat the Odds](#)

C. Central NY (Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego and Tompkins Counties)

[Cancer Resource Center of the Finger Lakes](#)

[Chenango Health Network: Every Woman Counts in Chenango County Campaign and Cancer Financial Assistance Program](#)

[New York State Department of Health Bureau of Immunization](#)

[Roswell Park Cancer Institute: Support for Life Survivorship Program](#)

D. Hudson Valley (Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester Counties)

[Affinity Health plan: Cancer Care Program and Palliative/Hospice Program](#)

[Cancer Support Team, Inc.: Cancer Support Team](#)

[Icahn School of Medicine at Mount Sinai: Community Based Colorectal Cancer Education Program](#)

[Icahn School of Medicine at Mount Sinai: Esperanza y Vida- The Latina Witness Project of Harlem](#)

[Icahn School of Medicine at Mount Sinai: Witness CARES: Community Awareness, Reach and Empowerment for Screening](#)

[Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem](#)



[Miles of Hope Breast Cancer Foundation: Miles of Hope Medical Gap Care Program](#)

[New York State Department of Health Bureau of Immunization](#)

[The Breast Institute at Northern Westchester Hospital: The Breast Institute and Integrated Care Center](#)

E. Long Island (Nassau and Suffolk Counties)

[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[American Lung Association of the Northeast: Lung Force Expo](#)

[Long Island Ovarian Cancer Education, Advocacy, Networking and Support \(LI OCEANS\)](#)

[New York State Department of Health Bureau of Immunization](#)

[Oral Cancer Consortium: Oral Cancer Screening](#)

[South Nassau Communities Hospital: SIBSPlace](#)

F. North Country (Clinton, Essex, Franklin, Fulton, Hamilton, Herkimer, Jefferson, Lewis, Saratoga, St. Lawrence, Warren and Washington Counties)

[Cancer Services Program of Fulton, Montgomery and Schenectady Counties](#)

[New York State Department of Health Bureau of Immunization](#)

[Northeastern New York Affiliate of Susan G. Komen: Komen Community Grants](#)

[St. Mary's Healthcare \(Amsterdam, NY\): Palliative Care Program](#)

[To Life!: Beat the Odds](#)

G. New York City (Bronx, Kings, New York, Queens and Richmond Counties)



[Affinity Health Plan: Cancer Care Program and Palliative/Hospice Program](#)

[American Italian Cancer Foundation: Mobile, No-Cost Breast Cancer Screening Program](#)

[American Lung Association of the Northeast: Lung Force Expo](#)

[Icahn School of Medicine at Mount Sinai: Community Based Colorectal Cancer Education Program](#)

[Icahn School of Medicine at Mount Sinai: Esperanza y Vida- The Latina Witness Project of Harlem](#)

[Icahn School of Medicine at Mount Sinai: Witness CARES: Community Awareness, Reach and Empowerment for Screening](#)

[Icahn School of Medicine at Mount Sinai: The Witness Project of Harlem](#)

[Oral Cancer Consortium: Oral Cancer Screening](#)

[Ralph Lauren Center for Cancer Care and Prevention: Health Promotion and Cancer Prevention](#)

[South Nassau Communities Hospital: SIBSPlace](#)

[The Brooklyn Minority-based Community Clinical Oncology Program](#)

H. Southern Tier (Allegany, Broome, Cattaraugus, Chautauqua, Chemung, Steuben and Tioga Counties)

[Cancer Resource Center of the Finger Lakes](#)

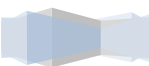
[New York State Department of Health Bureau of Immunization](#)

[Roswell Park Cancer Institute: Office of Cancer Health Disparities](#)

[Roswell Park Cancer Institute: Office of Cancer Health Disparities Research](#)

[Roswell Park Cancer Institute: Support for Life Survivorship Program](#)

I. Western NY (Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Seneca, Wayne, Wyoming, and Yates Counties)



[Cancer Resource Center of the Finger Lakes](#)

[New York State Department of Health Bureau of Immunization](#)

[Roswell Park Cancer Institute: Office of Cancer Health Disparities](#)

[Roswell Park Cancer Institute: Office of Cancer Health Disparities
Research](#)

[Roswell Park Cancer Institute: Support for Life Survivorship Program](#)

[University at Buffalo Family Medicine and Patient Voices Network:
Patient Ambassadors to Increase Mammography Screening](#)

[URMC Center for Community Health: Cancer Services Program of
Monroe County](#)



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