



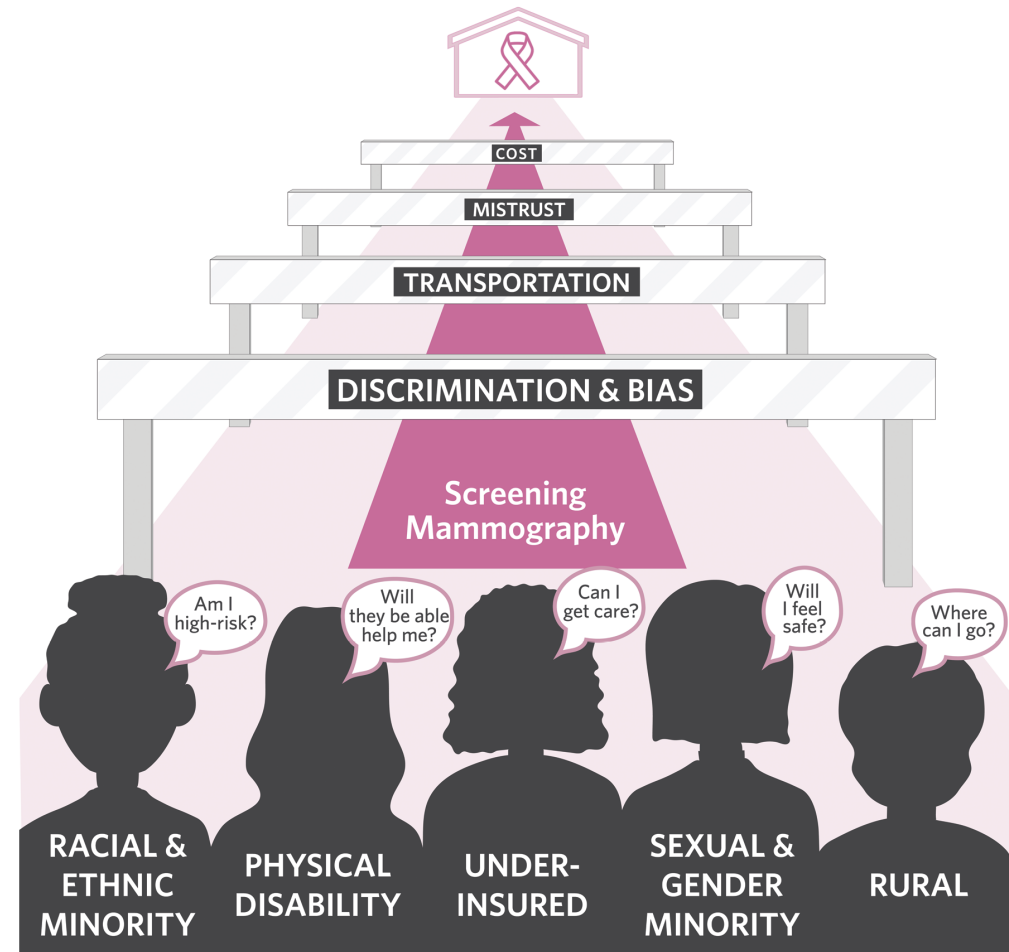
# A Culturally Responsive Care Model for Breast Cancer Screening in Non-English Speaking Patients

# Learning Objectives

- Identify barriers to breast cancer screening among vulnerable patients
- Appreciate the importance of multidisciplinary teamwork in the provision of culturally responsive patient care
- Reflect on ways to minimize gaps in patient care within their own practice

# Disparities in Breast Cancer Treatment Outcomes

- Non-Hispanic Black and Hispanic women with early-stage breast cancer are more likely to experience delays in adjuvant or neoadjuvant chemotherapy
- Breast cancer survival rate is lower among patients who live in poverty
- Breast cancer is diagnosed at a later stage in low income patients due to lack of consistent access to care
- Patients who live in rural areas are more likely to experience treatment delays



# Community Health Centers Background

- CHC is one of the largest Federally Qualified Health Center in VT with 9 sites serving Chittenden County and Grand Isle County
- Of our 32,000 patients, 36% are Medicaid enrolled, 25% are Medicare enrolled, 4% are uninsured and either using our Sliding-Fee Scale or are fully self-pay, and 35% have private insurance
- 9% of our patients received care in a language other than English.
- Nepali is the second most spoken language after English among our patients
- Our target safety net population includes people who are living in poverty; low-income and uninsured/underinsured residents; adults and families enrolled in public health insurance; residents experiencing homelessness or who are in marginal housing or shelters; youth who are at-risk; or those who speak languages other than English and/or resettled/former refugees

# CHC Mammogram Task Force

## Who:

- Multidisciplinary team across all CHC sites (clinical and operational)

## Goals:

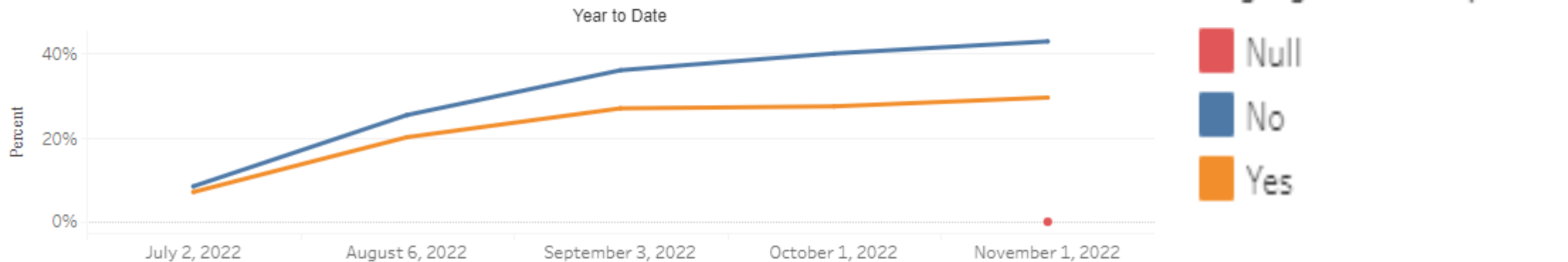
- To improve breast cancer screening rate in CHC patients
- To address health disparity between English and non-English speaking patients

## Key Community Partnerships:

- Vermont Department of Health – You First Grant
- University of Vermont Medical Center – Department of Breast Imaging
- Association of Africans Living in Vermont (ALLV)

# Baseline Data

Mammograms by Language Barrier



- Organizational level data only told part of the story
- Initial efforts to improve data sources confirmed the disparity between patients with a language barrier and those who spoke English
- Mammogram Task Force focused on CDC Evidence Based Interventions (EBI) to improve cancer screening rates BUT also the need to implement EBI with cultural sensitivity and awareness
- CHC identified Nepali speakers as the first focus group due to low screening rates and prevalence in our patient population

# Listening to our Community

- Variable understanding of the indications for cancer screening
- Fear of the procedure itself
- Modesty and privacy concerns
- Concern about long wait times
- Fear of not having an interpreter
- Apprehension around where to go to get screened
- Need for more education and direction from their primary care team
- Scheduling challenges

# Evidence Based Interventions

## **Increase Patient Engagement – Reminders and Reducing Structural Barriers**

- ✓ Patient-facing, language-specific breast cancer awareness materials
- ✓ October breast cancer awareness month celebrations
- ✓ Mailed patient-specific reminders in preferred language for those due for mammograms in multiple languages with info for those uninsured about VDH's You First program
- ✓ Phone outreach using an interpreter to patients who speak languages other than the top 5 languages mailed
- ✓ Partnership with UVM Medical Center Department of Breast Imaging

## **Provider Oriented Interventions: Staff Education and Reminders**

- ✓ CME session on Breast Cancer Screening with Dr. Hannah Perry from UVM Medical Center (January 2023)
- ✓ Review of best practice for screening under current guidelines and meeting the needs of all of our patients (culturally diverse, LGBTQ+)
- ✓ Shared the identified barriers and discussed importance of provider directive to the patient
- ✓ Reeducation regarding workflows for pre-visit planning
- ✓ Panel management data for individual primary care teams



# Evidence Based Interventions

## Breast Cancer Screening

From double A's to triple Z's,  
diagnostic screening saves lives!



- It's a quick, easy and painless process!
- There is no referral needed.
- Interpreter support is available.
- This is covered by most insurances; assistance for anyone uninsured is available through YouFirst VT: (800) 508-2222

## What is a Mammogram?

A mammogram is an x-ray image taken of breasts to determine early signs of cancer. Early detection of breast cancer is important; the earlier the detection, the more treatment options available.

## When Should I Get One?

ALL individuals assigned female at birth should have a screening mammogram at least every two years starting at age 50 until age 74. Individuals at higher risk for breast cancer may need to start screening sooner or be screened more frequently. Ask your CHC provider about your individual risk factors. **Although this is not a CHC service, it is an incredibly important part of your primary care, so we encourage you to make a plan for breast cancer screening today!**

## How Do I Schedule? Just Call or Scan the QR Code!

- University of Vermont Medical Center  
Breast Cancer Center • (802) 847-2262  
Interpreter Line • (802) 847-4444
- Northwestern Medical Center  
Diagnostic Imaging Center • (802) 524-1058



UVM Medical Center Appointment Request

If you need an interpreter for your visit,  
please enter your preferred language in the  
"comments" section of the form.

# Community Partnership to Create Culturally Responsive Mammography Clinics

## **UVM Medical Center:**

- Hosted Nepali breast cancer screening clinics
- Offered at more convenient times to support families with transportation needs or who prefer to attend with family
- Scheduled with in-person interpreters through AALV onsite that were trusted members of the Nepali community
- Shared an open schedule with CHC team to use for scheduling patients directly
- Visual guides on what to expect in the mammogram visit

## **CHC:**

- Community Health Worker reached out to patients in need of breast cancer screening in their preferred language
- Scheduled patient directly in the Saturday Nepali-specific clinic
- Assured patients that an in-person interpreter would be on site
- Reviewed location and ensured access
- Connected patient with health insurance navigator and/or You First for coverage
- Offered education on the importance of breast cancer screenings
- Made reminder calls with an interpreter the day before the appointment



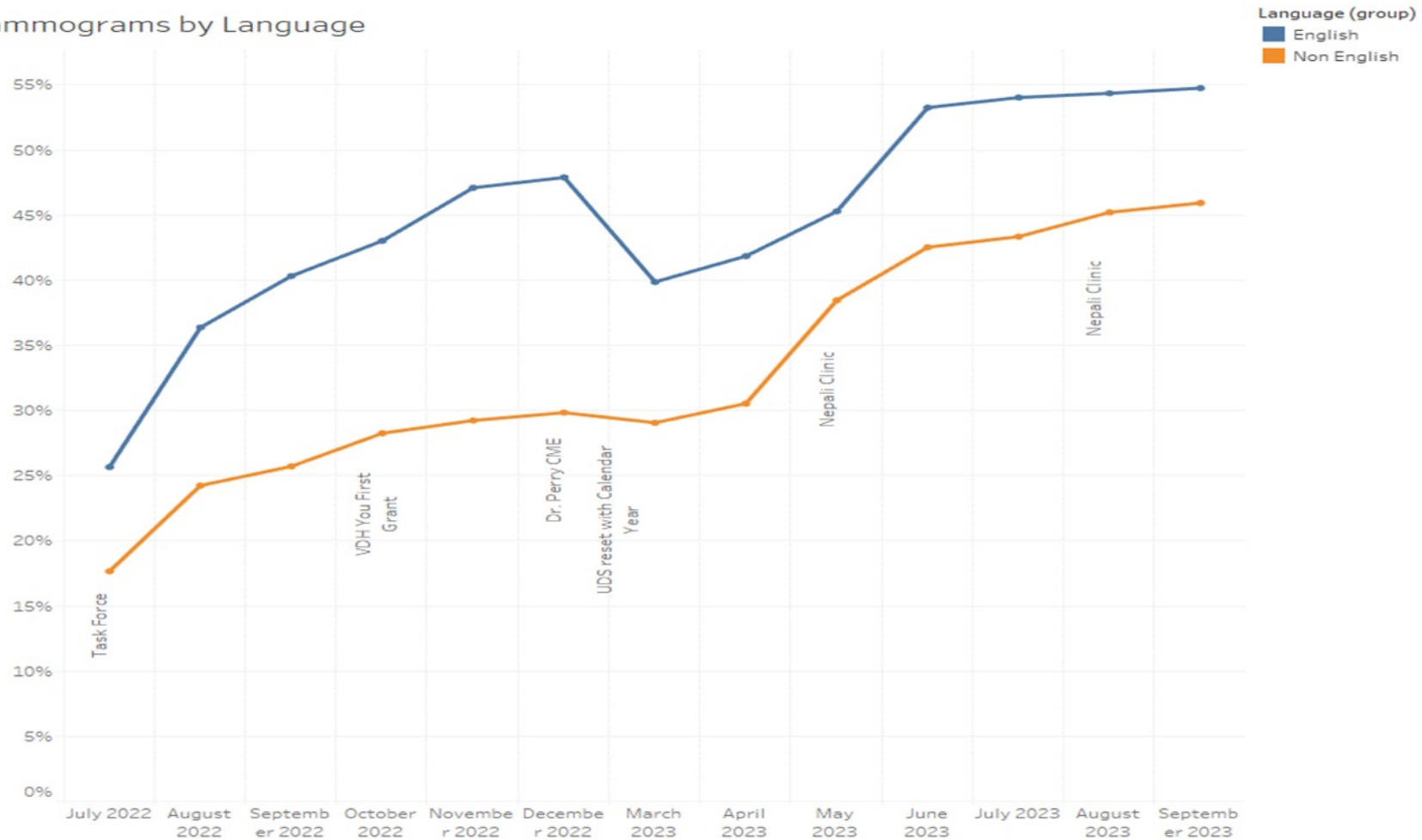
# Nepali Breast Cancer Screening Day

- Nepali-speaking screening event with UVMCC Department of Breast Imaging on May 20, 2023
- Closed the breast cancer screening disparity between English and Nepali-speakers!
- Completed a 2<sup>nd</sup> Nepali screening event in August 2023
- A 3<sup>rd</sup> event is planned for Maay Maay speakers in Fall 2023



# Community Partnerships Work!

Mammograms by Language



# Key Components of Success and the Future

- Multidisciplinary partnership of invested and passionate members of CHC, UVMMC, AALV
- Formed on a foundation of cultural humility, with willingness to examine gaps in care, and motivation to seek equitable improvements within our systems
- Acknowledgement that a singular model for accessing healthcare does not fit all!
- Many opportunities for building on this work in other areas of cancer prevention and with other community members who have barriers to care