The George Washington (GW) University Cancer Institute research team is committed to ensuring diverse stakeholder representation throughout the Oncology Community of Practice (CoP) Generation and Dissemination of Evidence (GATE) project. The approach to engaging stakeholders follows the guidance outlined by the PCORI Engagement Rubric, including seeking the participation of individuals who fit into several categories such as patient and stakeholder partners as well as patient and survivor partners who have no other roles on the project.¹

Community Advisory Board Overview
The Community Advisory Board (CAB) was established as a way to ensure a range of perspectives are included in the project approach and to solicit stakeholder feedback on the products developed for the project in a way that leverages each member’s unique perspective. Members of three communities were identified to serve on the board and include: (1) researchers; (2) healthcare professionals; and (3) patients, survivors and caregivers.

Researchers and healthcare professionals on the CAB were selected for their expertise in cancer survivorship and oncology patient navigation as well as their organizational infrastructures and ability to assist in project activities. They helped to conceptualize the project and provided feedback on the project proposal. Each member plays a critical role in creating, launching, and growing the CoP. These Advisory Board members are knowledgeable about the needs of cancer survivors and oncology patient navigation processes through their work in government, research and advocacy organizations and clinical practice with patients across the cancer treatment spectrum.

February 23, 2016 CAB Meeting Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Margaret Farrell, MPH</td>
<td>Government Representative, NCI Research2Reality</td>
</tr>
<tr>
<td>Elizabeth Glidden, MPH</td>
<td>Patient Navigator, GW Cancer Institute</td>
</tr>
<tr>
<td>Chien-Chi Huang</td>
<td>Survivor</td>
</tr>
<tr>
<td>Peggy Kupres</td>
<td>Caregiver / Survivor</td>
</tr>
<tr>
<td>Deborah Mayer, PhD, RN, AOCN, FAAN</td>
<td>Researcher, University of North Carolina</td>
</tr>
<tr>
<td>Robert Parker</td>
<td>Caregiver / Survivor</td>
</tr>
<tr>
<td>Sherri Romanoski</td>
<td>BAG IT</td>
</tr>
<tr>
<td>Julia Rowland, PhD</td>
<td>Government Representative, NCI Office of Cancer Survivorship</td>
</tr>
<tr>
<td>Lillian Shockney, RN, BSN, MAS</td>
<td>Survivor, Clinician / Administrator, Johns Hopkins University/ Program Director, Association of Oncology Nurse and Patient Navigators</td>
</tr>
<tr>
<td>Carrie Tilley, NP</td>
<td>Clinician, University of Maryland</td>
</tr>
<tr>
<td>Jasan Zimmerman</td>
<td>Survivor</td>
</tr>
</tbody>
</table>

GW Cancer Institute Project Team Members in Attendance

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elizabeth Hoffler, MSW</td>
<td>Project Advisor; Director of Policy and Engagement</td>
</tr>
<tr>
<td>Gema Lane, MPA</td>
<td>Project Manager, Cancer Survivorship</td>
</tr>
<tr>
<td>Liza Fues, JD</td>
<td>Patient Advocate/Survivor</td>
</tr>
</tbody>
</table>

Summary

I. Welcome
Elizabeth Hoffler welcomed Advisory Board members to the second Oncology Community of Practice: Generation and Translation of Evidence (GATE) call and thanked everyone for their participation on the project. She noted that during the call the team would provide project updates and a live demonstration of the newly soft launched GATE website. She provided an overview of the agenda and emphasized that we wanted the call to be conversational with plenty of opportunities for CAB members to provide feedback.

II. Brief Introductions
The Advisory Board introduced themselves and provided their name and brief mention of their role. They included:

Margaret Farrell
Location: Bethesda, MD
Affiliation: National Cancer Institute’s Division of Cancer Control & Population Sciences working on Research to Reality (R2R) Community of Practice; Comprehensive Cancer Control National Partnership

Elizabeth Glidden
Location: Washington, DC
Affiliation: George Washington University Cancer Institute; American Cancer Society Patient Resource Navigator

Chien-Chi Huang
Location: Somerville, MA
Affiliation: Survivor; former project director, Asian Breast Cancer Project; Founder and President of Board, Asian Women for Health; committee member of the National Advisory Panel on Addressing Disparities for PCORI

Peggy Kupres
Location: Oak Lawn, IL
Affiliation: Caregiver; survivor; RN Research Coordinator for Cancer Research Program at Advocate South Suburban Hospital; former regional leadership board chair for American Cancer Society; certified Breast Patient Navigator

Deborah Mayer
Location: Chapel Hill, NC
Affiliation: Oncology nurse practitioner and director of cancer survivorship at UNC Lineberger Comprehensive Cancer Center and University of North Carolina-Chapel Hill

Robert Parker
Location: Spokane, WA
Affiliation: Current caregiver for spouse with melanoma; survivor of prostate cancer

Sherri Romanoski
Location: Tuscon, AZ
Affiliation: Founder and president, BAG IT; cancer survivor

Julia Rowland
Location: Bethesda, MD
III. Overview and Project Objectives

Elizabeth Hoffler shared the project aim with the team. The aim of the overall project is to create an easy-to-use CoP to bring together healthcare professionals, researchers, and patients to increase PCOR dissemination and implementation around survivorship and navigation. The project will begin with two general patient-centered cancer care topics—oncology survivorship and patient navigation. It will potentially grow with additional topics in the future. The long-term project objectives are to:

1) Aid in more rapid implementation of PCOR evidence into clinical practice;
2) Rapidly disseminate patient-centered outcomes research findings to a broad audience;
3) Foster collaboration in dissemination and implementation efforts; and
4) Ensure stakeholder engagement in patient-centered outcomes research dissemination and implementation.

GW Cancer Institute Project Team Introductions

The GW Cancer Institute staff introduced themselves to the CAB members. Gema Lane is the new Project Manager, Cancer Survivorship and was introduced as the new point of contact for members.

Mandi Pratt-Chapman, MA, Principal Investigator
Elizabeth Hoffler, MSW, ACSW, Director, Policy and Engagement
Gema Lane, MPA, Project Manager, Cancer Survivorship
Kelli Vos, MPH, Communications Coordinator
Liza Fues, JD, Patient Advocate

Project Logo

Elizabeth Hoffler shared the newly created project logo with CAB members.

Website

Canegate.org was live during the call and CAB members were encouraged to visit the site while the discussion was taking place. Elizabeth Hoffler outlined the core components of the CoP and noted that the GWCI team is currently curating content to build a robust platform before the site is widely disseminated. She discussed each of the following components:

Research Findings and Interventions Registry
The Research Findings section will link to peer-reviewed research on specific patient-Centered topics. The Intervention Registry is a searchable database that connects researchers who have developed and/or tested interventions or strategies related to cancer survivorship and oncology patient navigation with health care professionals, patients, and other stakeholders who are interested in collaborating or using this information.

**Best Practices and Lessons Learned Repository**

The Best Practices and Lessons Learned Repository is a searchable user-generated repository for health care professionals to access best practices (strategies that have worked well) and lessons learned (positive and negative takeaways from strategies implemented) within the fields of cancer survivorship and oncology patient navigation.

Elizabeth Hoffler noted the need to think creatively about identifying materials to include in this section of the GATE, and she asked for assistance from the CAB members in this regard. Jasan Zimmerman suggested for CAB members to review submissions of Best Practices. Deborah Mayer suggested the possibility of CAB members writing comments quarterly about the themes of submitted materials.

Based on a suggestion by Julia Rowland, the group discussed the addition of patient navigation and survivorship resources to the existing GW Cancer Institute’s Cancer Control TAP (Technical Assistance Portal) website, at http://smhs.gwu.edu/cancercontroltap/.

**Searchable Question and Answer Bank**

The Question and Answer Bank provides information on evidence-based research regarding commonly-asked questions. The goal of the Q&A Bank is to make this information available to GATE users. Answers are provided by experts, and will combine evidence and experiences shared by survivors and caregivers. Elizabeth Hoffler requested that the CAB members each pose and/or answer two questions for the Q&A Bank.

**Special Interest Groups**

The Special Interest Groups (SIGS) seek to identify and bring together interdisciplinary health care professionals and researchers with an interest in translation of oncology patient-centered outcomes research. There are two SIGS – one focused on cancer survivorship and one on oncology patient navigation – with a minimum of 15 participants each.

The goal of the SIGs is to connect dissemination and implementation researchers with patient-centered outcomes researchers to: discuss implementation, spur collaborative research, and identify possible future research that is needed. The SIGS have been launched and additional details include:

- **Survivorship**
  - Co-Chairs: Dr. Sarah Birken, PhD, Assistant Professor, Department of Health Policy and Management, Associate Member, Lineberger Comprehensive Cancer Center, University of North Carolina at Chapel Hill and Mandi Pratt-Chapman, MA, Associate Center Director Patient-Centered Programs and Health Equity, GW Cancer Center, and Director, GW Cancer Institute
  - 2 survivorship SIG meetings have been held with over 30 participants
  - The survivorship SIG is collaboratively constructing a research project on survivorship care planning across the country – first step is a survey to better define what is happening in practice with Survivorship Care Planning

- **Patient Navigation**
  - Chair: Elizabeth Glidden, MPH, Patient Resource Navigator, American Cancer Society/GW Cancer Institute
  - The patient navigation SIG is currently recruiting members and has had an overwhelmingly positive response
  - During the first patient navigation SIG call, group member will identify a research project on which the group will focus
Group members requested additional information about how to join the SIGs and discussed the possibility of promoting them at upcoming professional conferences.

**Ask the Expert Sessions**

Small group live web-based discussion will be held with 15-20 participants. The focus will be on specific topics within cancer survivorship and oncology patient navigation. Experts include researchers, clinicians and patients.

GW Cancer Institute held the first Ask the Expert session on December 14, 2015 on Survivorship Care Planning. The expert speakers included:

- Sarah Birken, PhD, Assistant Professor, Department of Health Policy and Management, Associate Member, Lineberger Comprehensive Cancer Center, University of North Carolina at Chapel Hill. Dr. Birken shared her research around evidence-based survivorship care planning.
- Elizabeth Hatcher, MSN, RN, FNP-BC, Nurse Practitioner, The GW Medical Faculty Associates, provided the clinician perspective.
- Liza Fues, JD, Patient Advocate, GW Cancer Institute. Ms. Fues provided her experience as a patient who did not have Survivorship Care Planning.

Learning objectives for the December 14, 2015 Ask the Expert session included:

- Understand the history and evolution of survivorship care planning
- Discuss the opportunities to grow and implement broad survivorship care planning
- Identify the barriers to survivorship care planning
- Learn about evidence-based survivorship care planning.
- Discuss the dissemination and implementation strategies for survivorship care planning best practices.

It was noted that the final learning objective targets the core of the GATE project. The group also discussed the issue of identifying the appropriate health care provider to receive a survivorship care plan and to take responsibility for coordinating a survivor’s care.

Future Ask the Expert session topics were discussed and will include:

- Barriers for oncology patients seeking care and treatment following implementation of Affordable Care Act
- Long-term survivorship concerns including sexuality, reintegration into the workplace, reintegration into family roles featuring Catalina Lawson, PhD; Alli Ward, VP Programs from Stupid Cancer; and speaker from Cancer and Careers
- Staff asked to CAB members suggestions for topics/speakers for future Ask the Expert sessions

CAB members suggested potential participants and topics for future Ask the Expert sessions:

- Chien-Chi Huang suggested Judy Wang from Georgetown University who investigates the impact of culture on survivorship experiences among Asian Americans.
- Lillian Shockney suggested we have a primary care physician who focused on cancer survivorship and suggested Kimberly Peairs, MD Clinical Director at John Hopkins as a potential speaker.
- Robert Parker suggested a topic around transitioning from a private insurance program to a public insurance program.
- Lillian Shockney suggested a topic regarding prescription plans.
- Other topic suggestions from CAB members included: financial concerns regarding screening and treatment, managing side effects, and fear of recurrence, including, PCP training and guidance.
Mandi Pratt-Chapman clarified that patient-directed information should be hosted on the Prepared Patient site while research ideas, evidence and implementation findings should be hosted on the GATE. She invited CAB members to co-write a blog on transparency in pricing or to independently write blogs on any other relevant topic of interest for Prepared Patient or the GATE. She also noted the possibility of reaching out to organizations that are routine sources of information for primary care providers, such as the American Academy of Family Physicians.

E-newsletter

The GW Cancer Institute Patient Navigation and Survivorship e-newsletter currently reaches approximately 2,700 people across the country and information on the GATE project has been incorporated into the monthly newsletter. Future highlights will include updates on the project, such as new interventions in the registry or new answers posted on the Q&A. CAB members were encouraged to sign-up for the e-newsletter if they hadn’t already.

Website

Kelli Vos presented the GATE website. She provided an overview of how to navigate the site and demonstrated how to submit an article, which will go through an internal review process before it is published to the site. She also showed CAB member where to find the Q&A bank, e-newsletter and featured resources. CAB members discussed various methods of promoting the GATE including the following:

- Julia Rowland suggested to link to other big resources like National Cancer Institute (NCI) and to consider reaching out to 67 NCI designated cancer centers.
- Chien-Chi Huang offered to reach out to other breast cancer foundations to promote the website.
- Carrie Tilley suggested an option on the website to register cancer survivorship programs. Mandi indicated that GW is actively working on a Survivorship Program Inventory with ASCO.

The GW Cancer Institute is working on outreach marketing materials to help CAB members disseminate information regarding the website and is considering potential future projects.

Dissemination Champions

Elizabeth Hoffler provided an update on the dissemination champions who are individuals who will disseminate information and galvanize interest about the GATE website and recruit submissions to the best practices and lessons learned and research findings and interventions repositories. They will also attend check-in calls. Their first call will be held on February 25 and it includes individual cancer advocates and Comprehensive Cancer Control coalitions. CAB members were encouraged to suggest other colleagues for this group as there are currently 10 participants.

Engagement Strategies

Engagement strategies were discussed, including why patient navigation or survivorship stakeholders should become involved in the project, as it provides opportunities to stay up-to-date on timely topics and research and to collaborate to prioritize and implement future research. It was noted that stakeholders can also submit their own work or can help recruit submissions to the website repositories. They can also help spread the word about the GATE project and drive traffic to the website. CAB members were asked to think about other potential additions to the website.

Next Steps and Wrap Up

In the next couple of months the project team will:

- Continue to build the online portal so the Community of Practice website can be widely disseminated
- Send a follow-up email to CAB asking them what dissemination materials would be most helpful
- Convene the Dissemination Champions introductory call on February 25, 2016
- Convene Ask the Expert Session in May 10th 2016
• Regroup with ASCO on the Survivorship Program Inventory on April 6th 2016
  o Add Survivorship Program Inventory page or link-out to GATE (TBD)

• Refine CAB review of best practices and lessons learned
  o Identify which CAB members would like to review best practices and lessons learned
  o Develop criteria for inclusion and exclusion (rubric) for best practices and lessons learned
  o Develop protocol and train CAB members who will review best practices and lessons learned

• Refine commentary process for submitted materials
  o Identify which CAB members want to write commentaries
  o Create calendar of when CAB members will write commentaries
  o Create staff process for aggregating submissions and sending to CAB members in time for CAB member to meet commentary deadlines

• Refine blog process for CAB
  o Identify which CAB members want to blog for Prepared Patient
  o Create calendar of blog authors and topics
  o Create staff process for follow up with authors and posting of blogs to Prepared Patient site
  o Link Prepared Patient site to GATE

• Identify resources to be added to the existing GW Cancer Institute’s Cancer Control TAP (Technical Assistance Portal) website, at http://smhs.gwu.edu/cancercontoltp/. Have a section on the GATE that links out to filtered searches on navigation and survivorship to not duplicate resources populated on the TAP portal

• Link out to PubMed filtered searches on patient centered care topics to not duplicate abstracting/search functions

• Create calendar of Q&A bank deadlines, solicit questions and answers from CAB and faculty

• Clarify what Julia Rowland wants to link to and from to leverage resources like NCI and outreach to NCI designated cancer centers – take recommended action steps.

• Send information to Chien-Chi Huang to reach out to other breast cancer foundations to promote the website.

• Follow up on Survivorship SIG survey refinement by end of May