



OUR MISSION

The mission of the Bristol-Myers Squibb Foundation is to promote health equity and improve the health outcomes of populations disproportionately affected by serious diseases and conditions, by strengthening community-based health care worker capacity, integrating medical care and community-based supportive services, and mobilizing communities in the fight against disease.

The Foundation engages partners to develop, execute, evaluate and promote innovative programs to help patients with lung cancer in the United States; HIV and comorbid diseases such as cervical and breast cancers, tuberculosis and mental health disorders in sub-Saharan Africa; hepatitis B and C in China and India; veterans' mental health and well-being in the U.S.; and type 2 diabetes in the U.S., China and India. The Foundation also is working to build cancer nursing capacity in Central and Eastern Europe; and to expand access to specialty care for vulnerable populations with lung cancer, skin cancer or HIV in the U.S.

LUNG CANCER IN THE UNITED STATES

Lung cancer is the second-most-commonly-diagnosed cancer and the leading cause of cancer-related deaths, with African Americans suffering significantly higher incidence and mortality rates and with marked regional variations. New data from the National Minority Quality Forum indicate that 77% of all lung cancer cases reside in 20% of all zip codes. Since 2014, the Bristol-Myers Squibb Foundation's **Bridging Cancer Care™** initiative has committed \$31.5 million to expand the current limited scope of community-based supportive care resources and survivorship programs to underserved populations in the U.S.

OUR APPROACH

We foster partnerships with prestigious academic institutions and community organizations seeking to advance strategies for engaging those at highest risk for or diagnosed with lung cancer in care and support programs – including interventions throughout the care continuum (from prevention to survivorship to palliative care), with the goal of improving the quality of life, health outcomes and health equity for those most disproportionately affected. Our target geography are the US states that have the highest lung cancer incidence and mortality rates in the country.

OUR PARTNERSHIPS AND GRANTS

PREVENTION, EARLY DETECTION, SCREENING AND NAVIGATION PROGRAMS

University of Kentucky, the University of Louisville and the Lung Cancer Alliance will collaborate on Kentucky Lung Cancer Education, Awareness, Detection, Survivorship (KY LEADS). The project is a comprehensive, statewide initiative aimed at improving patient outcomes through provider education, prevention and early detection, and survivorship care.

The Levine Cancer Institute launched the Lung B.A.S.E.S. (Bringing Awareness, Screening & Education to Improve Survivorship) 4 Life project that will pioneer deploying a mobile CT scanning unit into communities in North and South Carolina to avail vulnerable populations of the benefits of screening, early detection and to streamline patients with abnormal scans into a comprehensive health network designed to deliver care regardless of where a patient resides.

The American Cancer Society (ACS) project called **The Lung Cancer Screening Navigation Pilot Program** will be working in partnership with three federally qualified health centers (FQHCs) to develop, implement and evaluate a lung cancer screening navigation program to advance evidence-based strategies to increase lung cancer screening rates within primary care systems and increase timely access to specialists after a positive screening result.

The McGuire Research Institute, Carl T. Hayden Medical Research Foundation, Houston VA Research and Education Foundation, Icahn School of Medicine at Mount Sinai and Vista Expertise Network will collaborate on the Partnership to increase Access to Lung cancer Screening (VA-PALS) Implementation Network. The project will improve Veterans' access to lung cancer screening through implementation of the evidence-based I-ELCAP screening program and protocol at 10 VA medical centers through a process that includes training, oversight, and centralized quality assurance from the I-ELCAP team, with the aim of increasing the likelihood of early detection, and ultimately reducing the mortality rate of lung cancer among veterans.

LUNGevity's Project ACTS (Adherence to CT Screening) is a collaboration between academics, clinicians, and a patient advocacy group that aims to increase adherence to follow-up low-dose computerized tomography (CT) screening for those high-risk individuals who represent with lung nodules in their initial scan, or who do not present with nodules in the initial scan but require annual follow-up, by developing a procedure and tool for the screening centers responsible for patient follow-up.

The National Minority Quality Forum's project Lung Cancer Screening Quality Improvement in Kentucky is a pilot program to test adaptation of a QI model to enhance lung cancer screening among underserved and increased risk populations, to form a model for statewide and national dissemination. The program will include training of 20 primary care practice leaders in the Kentucky LEADS tools, quality improvement, patient engagement and team-based care approaches. These will be utilized to achieve the overall goal of developing a strategy for sustainably increasing tobacco use counseling and lung cancer screening referrals in primary care offices serving underserved and at risk patients.

Avera McKennan will implement a pilot program Increasing Lung Cancer Screening for High Risk Smokers in a Frontier Population and investigate the effectiveness of increasing lung cancer screening among high-risk smokers in the medically underserved frontier population in western South Dakota, a region which is primarily comprised of low income whites and American Indians living on reservations and in rural communities. This type of education and research of its effectiveness has never been done within this population and will aid in producing evidence-based policy recommendations that are specific to serving this vulnerable group.

DISEASE AWARENESS AND PATIENT EDUCATION

Augusta University's project cancer-Community Awareness Access Research & Education (c-CARE) is a collaboration with faith-based organizations and clinics, who will train community health workers to lead lung cancer awareness classes and make screening referrals for African American populations in the Central Savannah River Area.

The University of Louisville's LuCa National Training Network will establish the first national effort to educate providers, through intermediary organizations, on lung cancer. The goal of the Center is to institute a national education and training epicenter to improve lung cancer care across the continuum of disease, starting with improvements in screening uptake and adherence to guidelines. The Center will develop partnerships with national health systems, professional organizations, and other groups to widely disseminate best practices and implementation tools.

Lung Cancer Alliance's project, **The Alabama Lung Cancer Awareness, Screening & Education program (ALCASE)** will be composed of three interventions: Community Health Advisors (CHA) awareness, education and community outreach; screening center technical assistance and support; and ancillary interventions and services for those diagnosed in 7 counties in the Black Belt region of Alabama.

LINKING LUNG CANCER PATIENTS TO CASE MANAGEMENT

Patient Advocate Foundation will implement a program in West Virginia that will increase awareness about lung cancer screening and improve access to care for Medicaid eligible lung cancer patients by linking them to case management support, helping them to overcome non-clinical barriers to care and ultimately, achieve better health outcomes.

The American Lung Association's Smoke Free Public Housing Initiative will take a comprehensive approach to supporting HUD by helping Public Housing Authorities (PHAs) across 10 states to prepare to implement the U.S. Department of Housing and Urban Development's (HUD) new smoke-free public housing rule. ALA will provide technical assistance supports that will ensure PHAs finalize and implement the smokefree housing rule in a manner which maximizes staff and resident compliance, and, it will utilize a peer based system of education and support among PHA resident case managers, to link residents to nearby smoking cessation and lung screening programs.

SURVIVORSHIP CARE MODELS AND ENHANCING PSYCHOSOCIAL SUPPORT

Lung Cancer Alliance (LCA), will establish **The National Lung Cancer Support Group Network**, a national network of lung cancer specific support groups, and provide technical assistance to individuals and organizations that want to start or are having trouble sustaining a lung cancer support group in their community.

The University of South Carolina College of Nursing's project Advancing Quality Lung Cancer Survivorship in South Carolina will establish a statewide collaboration between cancer advocates and academic institutions called Partners in Quality lung Cancer Survivorship (PIQ) to test the feasibility and preliminary effects of a Mindfulness-based Stress Reduction (MBSR) intervention called Breathe Easier.

The West Virginia University Cancer Institute's program Bridge to Good Living: Thriving Beyond Lung Cancer will implement an innovative program model that includes: Establishment of a monthly, interdisciplinary survivorship care clinics; Enhances the current surveillance system for recurrence of the primary and/or secondary cancer(s); Monitors and manages physical, psychosocial effects of diagnosis, treatment, and after effects; Provides health education about screening recommendations and follow-up, survivorship issues, and community resources; Assesses patient's attitude toward smoking cessation and offer intervention options.

The Mississippi Public Health Institute in partnership with Greenwood Leflore Hospital will implement **Survive 2 Thrive (S2T) - Community Based Survivorship Care for Lung Cancer Patients** an innovative patient centered community care model that will leverage nurse navigators, social workers, and community health workers for improving development of and adherence to survivorship care plans for lung cancer survivors in the Mississippi Delta region.

The American Cancer Society's Comprehensive Lung Cancer Patient Support Program (CLCPSP) will develop, implement and evaluate an innovative approach to survivorship care that includes both telephone based and in-hospital lung cancer survivorship navigation; a self-management smart phone app developed in partnership with NCI; and a provider focused webinar designed to improve care for lung cancer survivors. The program will target 8 southeast states, focusing primarily on medically underserved and low SES areas.

The Institute for Medical Research at the Durham VA will develop and pilot a comprehensive lung cancer survivorship program that will provide a coordinated approach to management of life after lung cancer and address depression, debility, and tobacco use while ensuring appropriate surveillance through an integrated electronic medical record for veterans serviced by the Durham VA.





























