Supporting Cancer Patients after a diagnosis: Is there a role for CHWs?

Nov 6, 2025

Agenda

- Cancer Overview
- Navigators and Cancer Screening
- Cancer Navigator model expanding across the continuum
- Cancer Navigator Training
- Resources for Right Now: Screening
- Resources for Right Now: After Diagnosis

Cancer Facts and Figures

 Cancer impacts 1 in 2 men and 1 in 3 women

Cancer cases continue to grow

Cancer survival continues to increase



11/5/2025



Lifetime probability of developing cancer for males, US, 2018-2019,2021

Site	Risk
All sites ^a	1 in 3 (39.9%)
Prostate	1 in 8 (12.8%)
Lung & bronchus	1 in 17 (5.8%)
Colon & rectum	1 in 24 (4.1%)
Melanoma of the skin ^b	1 in 29 (3.5%)
Kidney & renal pelvis	1 in 45 (2.2%)

^aExcludes basal cell and squamous cell skin cancers and in situ cancer except for urinary bladder. ^bProbabilities for non-Hispanic White individuals only.

Data source: DevCan 6.9.0, National Cancer Institute, 2024.



Lifetime probability of developing cancer for females, US, 2018-2019, 2021

Site	Risk
All sites ^a	1 in 3 (39.0%)
Breast	1 in 8 (13.1%)
Lung & bronchus	1 in 18 (5.6%)
Colon & rectum	1 in 26 (3.8%)
Uterine corpus	1 in 32 (3.1%)
Melanoma of the skin ^b	1 in 40 (2.5%)

^aExcludes basal cell and squamous cell skin cancers and in situ cancer except for urinary bladder. ^bProbabilities for non-Hispanic White individuals only. Data source: DevCan 6.9.0, National Cancer Institute, 2024.



Navigators and Cancer Screening

Cancer screening saves lives.



Screening Recommendations

These recommendations are for people at average risk for certain cancers. Talk to a doctor about which tests you might need and the screening schedule that's right for you. It's a good idea to also talk about risk factors, such as lifestyle behaviors and family history, that may put you or your loved ones at higher risk.

Ages 25-39

Cervical cancer screening

recommended for people with a cervix beginning at age 25.

Ages 40-49

Breast cancer screening

recommended beginning at age 45, with the option to begin at age 40.

Cervical cancer screening

recommended for people with a cervix.

Colorectal cancer screening

recommended for everyone beginning at age 45.

At age 45, African American individuals should discuss **prostate cancer screening** with a doctor.

Ages 50+

Breast cancer screening recommended.

Cervical cancer screening recommended.

Colorectal cancer screening recommended.

People who currently smoke or used to smoke should discuss **lung cancer screening** with a doctor.

Discussing **prostate cancer screening** with a doctor is recommended.

Search The Community Guide

Search the Guide

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CPSTF Findings for Cancer Prevention and Control

The following tables include alphabetized lists of intervention approaches reviewed by the Community Preventive Services Task Force with summaries of the CPSTF finding for each (<u>definitions of findings</u>). Click a linked review title to read a summary of the evidence, access supporting materials, and where available, link to <u>EBCCP-Evidence-Based Cancer Control Programs</u> . This table does not include <u>inactive</u> or <u>archived</u> reviews. Findings are divided into the following categories:

Increasing Cancer Screening

- Client-Oriented Interventions
- Provider-Oriented Interventions

<u>Preventing Skin Cancer</u>

- Community-Wide Interventions
- Education and Policy Approaches

Increasing Cancer Screening

Intervention	Breast Cancer	Cervical Cancer	Colorectal Cancer
Interventions Engaging Community Health Workers	Recommended (strong evidence)April 2019	Recommended (strong evidence)April 2019	Recommended (strong evidence)April 2019

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> Am J Prev Med. 2023 Apr;64(4):579-594. doi: 10.1016/j.amepre.2022.10.016. Epub 2022 Dec 19.

Community Health Workers to Increase Cancer Screening: 3 Community Guide Systematic Reviews

Devon L Okasako-Schmucker ¹, Yinan Peng ², Jamaicia Cobb ¹, Leigh R Buchanan ³, Ka Zang Xiong ¹, Shawna L Mercer ¹, Susan A Sabatino ⁴, Stephanie Melillo ⁴, Patrick L Remington ⁵, Shiriki K Kumanyika ⁶, Beth Glenn ⁷, Erica S Breslau ⁸, Cam Escoffery ⁹, Maria E Fernandez ¹⁰, Gloria D Coronado ¹¹, Karen Glanz ¹², Patricia D Mullen ¹⁰, Sally W Vernon ¹⁰; Community Preventive Services Task Force

Affiliations + expand

PMID: 36543699 PMCID: PMC10033345 DOI: 10.1016/j.amepre.2022.10.016

FULL TEXT LINKS





ACTIONS







CHWs and Cancer Screening Research

- The review included **76 studies**. Interventions engaging community health workers increased screening use for **breast** (median increase=11.5 percentage points, interquartile interval=5.5–23.5), **cervical** (median increase=12.8 percentage points, interquartile interval=6.4–21.0), and **colorectal cancers** (median increase=10.5 percentage points, interquartile interval=4.5–17.5).
- Interventions were effective whether community health workers worked alone or as part of a team. Interventions increased cancer screening independent of race or ethnicity, income, or insurance status.

Sage Program Background

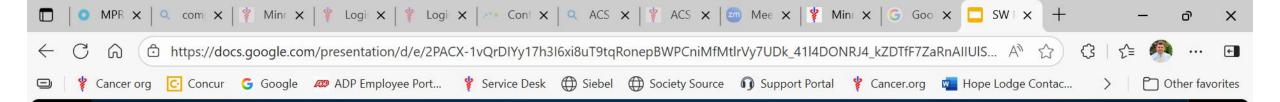
Since 1991:

- •178,391 women have received services through Sage.
- •3,251 breast cancers (invasive and in-situ) have been detected.
- •131 cervical cancers and 8,806 cervical pre-cancers have been detected.



Program Basics

- The Sage Screening Program provides free screening for breast and cervical cancer and includes breast and cervical diagnostic services for the underserved Minnesota population.
- Individuals qualify for Sage program based on age, income and family size, and insurance status.
- Sage patients who receive a breast or cervical cancer/precancer diagnosis can be referred to Medical Assistance for Breast or Cervical Caner (MA-BC) for treatment coverage.

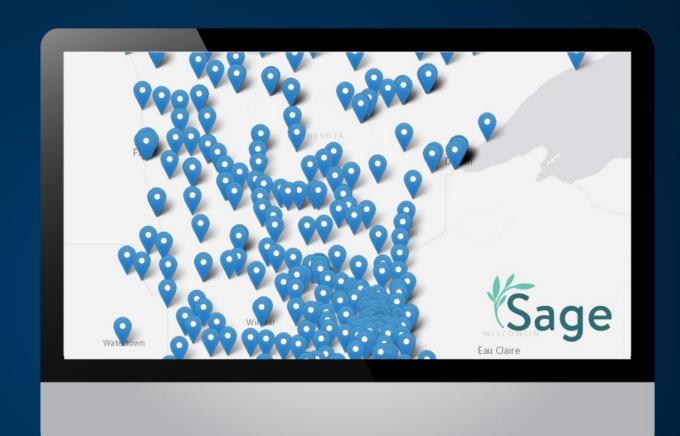


Sage Screening Locations

Over 440 clinics statewide

Find a clinic near you or call Sage to schedule an appointment.

1-888-643-2584





Cancer Navigators







Patient Navigation in Cancer Care

If you have cancer, patient navigation can offer valuable support. A cancer navigator helps you get past barriers so you can receive quality care before, during, and after cancer treatment. They can also help find support for your caregivers and family.

For example, a navigator might help you:

- Get a cancer screening and schedule a follow-up visit if your screening test result is abnormal.
- Learn more about your cancer and its treatment.
- Manage money problems that come up during and after treatment.



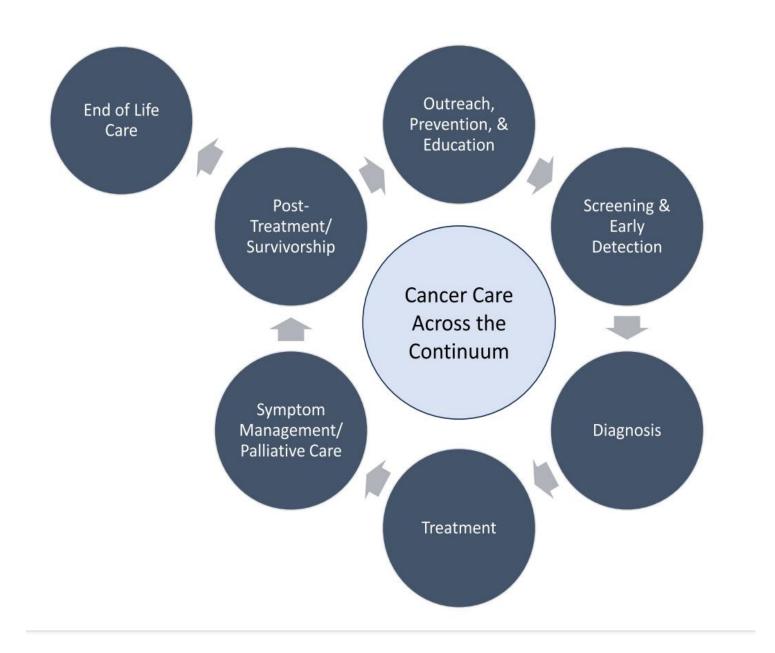


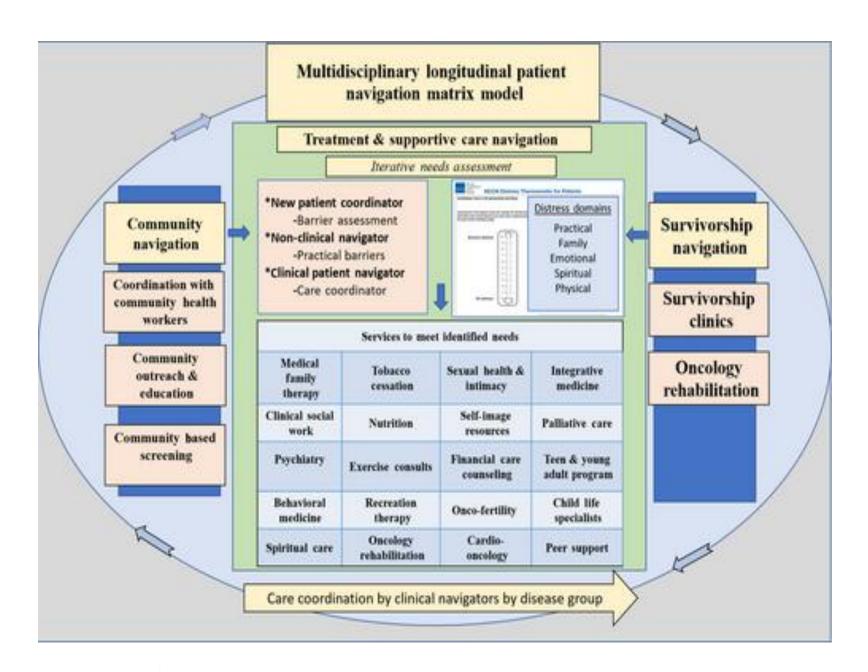
The American Cancer Society National Navigation Roundtable (ACS NNRT) serves as a catalyst to initiate work on key issues around patient navigation, as well as to disseminate best practices and to overall enhance the field of navigation.

A fundamental premise of the Roundtable is that collective action among member organizations will be more successful in advancing the field, than if they worked alone. Together, members work to share information, identify needs and opportunities, while addressing gaps relating to navigation.

The American Cancer Society National Navigation Roundtable was established in 2017. The ACS NNRT is a national coalition of 150+ member organizations to advance navigation efforts that eliminate barriers to quality care, reduce disparities, and foster ongoing health equity across the cancer continuum. The American Cancer Society provides organizational leadership and expert staff support to the ACS NNRT.

Our members include partners from diverse sectors including academia, public health, advocacy and survivor groups, professional societies, industry, training, and state and federal agencies.





Cancer Med. 2020 Mar 4;9(9):3202–3210. doi: 10.1002/cam4.2950



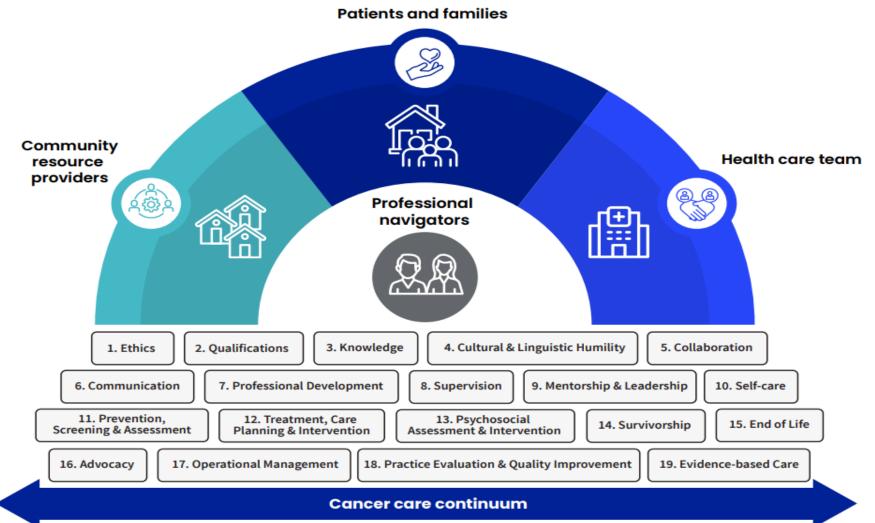
Community-centralized care

	Previsit preparation	Initial visit in-person	Routine follow-up in-person or remote
Provider	Primary care provider (RN, LPN, or other) Community navigator	Primary care provider Community navigator Others based on assessment (SW, PT, RD, psych MD, etc.)	Primary care provider Community navigator
Approach	Obtain cancer treatment history Comorbidities Patient and caregiver needs assessment Scheduled initial visit based on findings	Initial contact and discussion with navigator Meet with primary care Consultations with other services Order tests and imaging	Review needs assessment Assess progress against prior needs or reported morbidity Review tests Update or adapt plan
Outcome	Develop patient profile Coordinate services for initial visit	Create survivorship care plan Provide interventions as indicated Referrals for next-level care	Update survivorship plan Provide interventions as indicated Triage for next-level care





Driving Impact: Professional Standards in Oncology Navigation





Scan the QR code to learn more about how the <u>Oncology Navigation Standards of Professional Practice</u> provide the foundation to enhance the quality of professional navigation services.

Who are professional navigators?

Professional navigators are trained individuals employed and paid by a health care—, advocacy-, or community-based organizations to provide oncology navigation. Oncology navigators provide assistance to patients, families, and caregivers to help overcome barriers and facilitate timely access to care throughout all phases of the cancer experience.

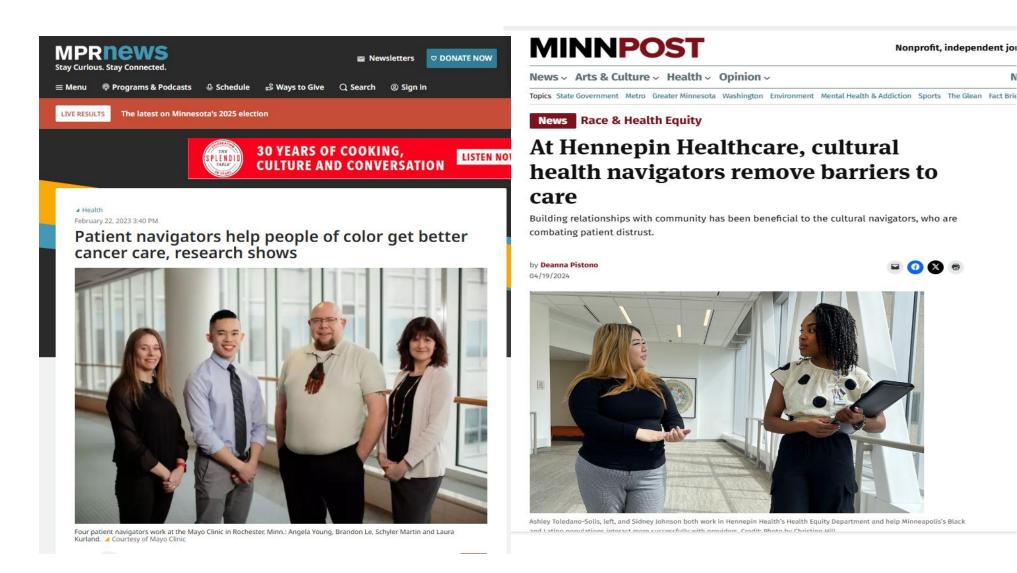
Positions that fall under the professional navigator category include:

Patient Navigators	Clinical Oncology Nurse Navigators	Clinical Navigator Oncology Social Worker
Professional individuals whose focus is on connecting patients to resources, reducing logistical and systemic barriers, and serving as a consistent point of contact. They do not have or use clinical training.	Registered nurses with oncology-specific knowledge. Using the nursing process, they provide education and resources to help patients and families make informed decisions.	Professional social workers with a master's degree in social work, an appropriate clinical license, and oncology-specific knowledge. Using the social work process, they provide education and resources to help patients and families make informed decisions.

Oncology Patient Navigator

A patient navigator may be employed by a clinic or a community-based organization and work throughout the community, crossing the clinic threshold to continue to provide a consistent person of contact and support within the healthcare system. A patient navigator does not have or use clinical training.

Examples of Health System Navigators



Changes in 2024



New Payor Reimbursement

- New Medicare reimbursement for addressing HRSNs
 - Offers an unprecedented opportunity for oncology providers to create, enhance, or expand their navigation services
- Additional payors recently announced

Support from ACS

- ACS Leadership in Oncology Navigation (ACS LION)
- The program meets the Centers for Medicare & Medicaid Services (CMS) training requirements for "Principal Illness Navigation" reimbursement and is aligned to Oncology Navigation Standards of Professional Practice



Received: 25 November 2024

Revised: 18 December 2024

Accepted: 22 January 2025

DOI: 10.1002/cncr.35764

COMMENTARY

Job descriptions by oncology patient navigator experience

¹Advancing Synergy, Baltimore, Maryland, USA

²Native American Cancer Initiatives, Native American Cancer Initiatives, Pine, Colorado, USA

Cultural knowledge and behaviors:

It is imperative to develop, maintain, and use an organizational system to record and update health care, cultural relevance, health literacy, and linguistically appropriate resources for patients and their communities.

Collect data and share it with the organization's leadership to ensure we are meeting the diverse needs of our patients.

Health equity framework considerations include:

- Special efforts to recruit "trusted" messengers from historically underrepresented marginalized communities
- Consideration for "lived experiences" in the job description that can speak to similar skills of PN;
- Consideration for the caregiving role that often women from these communities have;
- Consideration for increasing the labor force from an underrepresented community.

Opportunity for Advancement

Entry

One to two years or equivalent experience. Starting a new position without experience in navigation and builds on resources for addressing barriers (logistical, economic, cultural & linguistic, communication, and provider centered) and basic Oncology Patient Navigator-Certified Generalist (OPN-CG) principles to guide practice.

Intermediate

Three to four years or equivalent to such effort. Possesses a basic understanding of patient care flow within job boundaries, matching resources to the unique needs of the patient, identifying resources lacking in the community of care, beginning to analyze needs and gaps, and exploring/collaborating with multidisciplinary team members to advocate for resources for unmet needs for community or clinical setting.

Advanced

Five or more years. Skilled in the ability to perceive patient situations holistically based on past experiences, focusing in on the unique aspects of the patient assessment, and uses critical thinking and decision-making skills pertaining to navigation processes. Builds on and includes all knowledge, skills, roles, and responsibilities from Entry and Intermediate navigators.

Patient navigator roles and responsibilities progress from entry through advanced levels beginning with outreach in the community and learning how to identify and address barriers.

Definition of patient navigator levels.



Cancer Navigator Training

ACS LION Training



The ACS LION program is designed for individuals providing non-clinical navigation services (in whole or in part) or any organization employing individuals providing non-clinical navigation services.



Training and credentialing for nonclinical patient navigation services

Guidance and education on implementing navigation best practices Grants to health systems and practices interested in sustainable navigation

Eligible job titles may include but are not limited to:

- Patient Navigator/Oncology Patient Navigator
- Professional Navigator
- Social Worker
- Cancer Nurse Navigator
- Community Health Worker
- Promotores/Promotoras de salud
- Financial Navigator
- Clinical Trial Navigator
- Patient Care Coordinator
- Registered Nurse
- Licensed Practical Nurse

Patient Navigator Training & Credentialing |
American Cancer Society

ACS CARES™



ACS CARES (Community Access to Resources, Education, and Support)

is a mobile app for people with cancer, their families, and caregivers.

- Users can:
 - Access personalized, quality cancer related information
 - Speak directly with ACS cancer information specialists
 - Find reliable information on important topics such as emotional health, finances, and more
 - Connect virtually with trained community volunteers who share the same cancer experience
 - Receive in-person support from clinic volunteers at pilot locations
- Available in English/Spanish from Google Play or the App Store.



People with cancer and caregivers who sign up for the app will select their **Community Volunteer** "match" based on one or more of the characteristics that are important to them.

Initial matching options include someone who:

- has experienced a cancer diagnosis
- has cared for an adult with cancer
- has cared for a child with cancer
- has navigated cancer as active-duty military or a veteran
- has navigated cancer living in a rural area
- has navigated cancer living in an urban area
- can help find information and/or resources

Time Requirements

- Time spent communicating with patients and/or caregivers varies based on need and availability.
- Willing to respond to requests within 24 hours.
- A commitment of one year is preferred.
- Notify the ACS CARES team if you anticipate being "away" for more than 2 weeks.

Benefits

- Flexible Schedule: Volunteer on your own time, from anywhere with an internet connection and a mobile device.
- Convenient Virtual Volunteering: No need to travel! You can provide valuable support without leaving your home, making it easy and accessible.
- Opportunity to Support Others and Build Quality Relationships: Share your experience and help ease the burden of those facing cancer.
- **Specialized Training:** Receive comprehensive training that is online and completed at your own pace (averaging 4-6 hours) to provide effective support. This training ensures you feel confident and prepared to help others.





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FEATURES

Home Courses

NEW ONCOLOGY PATIENT NAVIGATOR TRAINING: THE FUNDAMENTALS

OVERVIEW

ACCREDITATION

REGISTER/TAKE COURSE

Welcome to the new course, if you experience any issues advancing through the course, please email cancercontrol@gwu.edu.

Visit the <u>frequently asked questions</u> on our Patient Navigator Training Resources page for more information.

COURSE SUMMARY

Available credit:

14.00 AMA PRA Category 1 Credit™



Resources for Right Now: Prevention & Screening



A web-based app that assesses comprehensive cancer risk and offers personalized recommendations to empower individuals to reduce their cancer risk and improve overall health.

Potentially Modifiable Risk Factors	Non-Modifiable Risk Factors
Tobacco Use	Age
Excess Body Weight	Sex
Alcohol Consumption	Family History
Diet	Genetic Factors
Physical Inactivity	Race & Ethnicity
Infectious Agents	Previous Cancer History
Sun & Radon Exposure	
Adherence to cancer screening and vaccination recommendations	

What ACS CancerRisk360™ is NOT

- Not a replacement for a visit with a doctor or other healthcare professional
- Not a risk calculator
- Not a medical device
- Not a research tool/project

How does ACS Cancer Risk360 compare to other cancer risk assessments?

The ACS CancerRisk360 is a unique cancer risk assessment tool. Other cancer risk assessment tools may cover a specific type of cancer. But ACS CancerRisk360 explores known cancer risk factors to help explain a person's overall risk of cancer. The tool asks questions and combines information about family history, personal health history, daily life activities and behaviors, and cancer screening history.

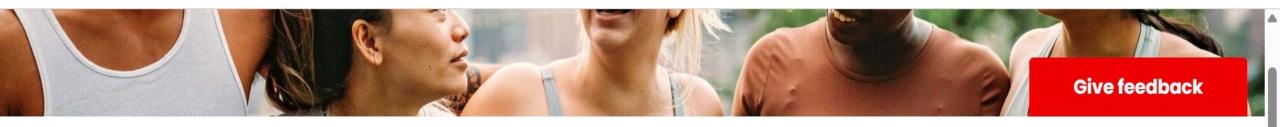
Assessment Look and Feel

- Optimized for mobile
- Tap to listen feature
- Dynamic assessment progress circle
- Available at no cost to users
- Individual assessment data is not stored
- Email, profile, log-in is **not** needed to complete the assessment or get recommendations on summary page









Your Personalized Action Plan







This assessment was taken on 07/16/2025. Retake the assessment

These recommendations are not medical or legal advice, not intended for use in the diagnosis or treatment of individual conditions, nor meant to be comprehensive. They are generated based on your answers using automated decision-making. They should not be relied on as a substitute for consultation with qualified doctor. Please talk to your doctor about your risk factors and screening recommendations.

Schedule your next mammogram to get screened.
Take actions to get to and stay at a healthy weight.
Consider cutting back on drinking alcohol to reduce your cancer risk.

Get screened for hepatitis B virus (HBV) and hepatitis C virus (HCV).





ACS CancerRisk360™: A simple tool to check your cancer risk.

How it works:

- 1. Go to acscancerrisk360.cancer.org
- 2. Take the test in about 5 mins. *No prep or studying needed.*
- 3. Get a personalized action plan.
- 4. Improve your whole health.

You can save your results to discuss with your doctor by downloading, printing, or sending it to yourself.

Don't forget to encourage your friends and family to take the assessment too!





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Screening Recommendations

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At age 45, African American individuals should discuss **prostate cancer screening** with a doctor.

Ages 50+

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Cervical cancer screening recommended.

Colorectal cancer screening recommended.

People who currently smoke or used to smoke should discuss **lung cancer screening** with a doctor.

Discussing **prostate cancer screening** with a doctor is recommended.

Empowered to Quit: Free Smoking Cessation Support



Empowered to Quit is a free, personalized email-based program to help people quit smoking.

- Once a Quit Day is chosen, participants can make a quit plan with the help of short emails from ACS.
- Once Quit Day arrives, participants will continue to receive tailored emails and tools from ACS to support the quitting journey.
- The program helps participants understand:
 - When and where they most feel like smoking
 - How to cope with cravings
 - How to set a quit date and stick to it





Resources for Right Now: After Diagnosis

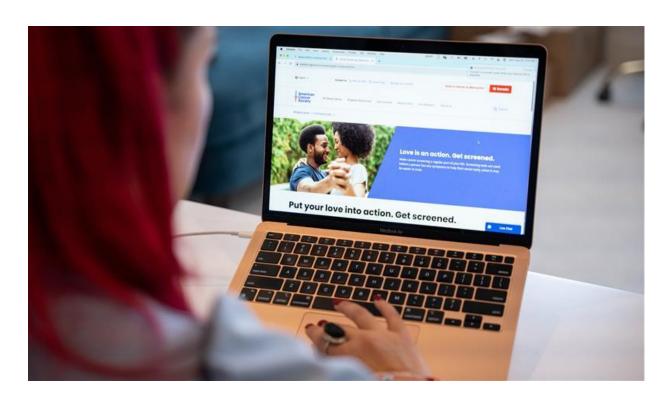
Cancer.org



Our website **cancer.org** is a highly trusted source of clear, science-based content that educates the public, empowers patients and caregivers, and supports health care professionals.

Cancer.org has in-depth information on:

- Risk and prevention
- Screening
- Diagnosis and staging
- Cancer types
- Treatment and side effects
- Financial and insurance matters
- Coping and survivorship
- End of life care
- Resources to support caregivers and family members
- And much more





Home > All About Cancer > Managing Cancer Care

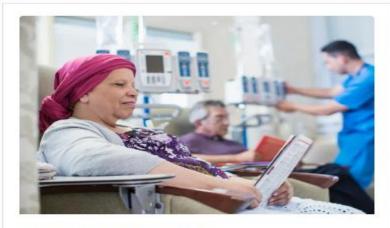
Managing Cancer Care

In this section you'll find general information about the types of treatments used against cancer. This includes both traditional therapies (such as surgery, chemotherapy, and radiation therapy), newer forms of treatment (including information on clinical trials), and complementary and alternative therapies. We'll also discuss the possible side effects of these treatments.



Preparing for and Getting Treatment

If you or someone you care for is facing treatment for a new cancer diagnosis or cancer that has come back, you probably have lots of questions that need answered. Learn about how to approach making decisions about treatment, and what to ask your health care team.



Learn about Treatments

Treatment Types

Planning cancer treatment can take time. Find out what you need to know about the most common types of cancer treatment, such as surgery, chemotherapy, radiation therapy, and immunotherapy. Learn how they work and what to expect if they are part of your treatment plan.



Dealing with Side Effects

Get information about the physical side effects that can be caused by different cancer treatments and what you can do to manage them.

Side Effects

Palliative Care

Making Treatment Decisions

Survivorship Resources

These are additional survivorship resources from ACS that can be shared:

- Survivorship: During and After Treatment landing page on cancer.org
- Moving Through Cancer: A Guide to Getting and Staying Active During Cancer Treatment*
- Cancer Survivors' Network
- ACS CARES™ mobile app
- After Cancer Treatment is Finished*



American Cancer Society



Nutrition and Physical Activity Guidelines for Cancer Survivors

Cancer survives often ask questions about food choices, physical activity, and different supplement. They want to learn whether survivion and physical activity can high them to leve longer or feed better. These guidelines are meant to answer some of those questions. Developed by an American Cancer Society (ACS) panel of experts, they will give you as a cancer survivor and your family the information you need to make informed decisions about your food and physical activity choices.

Vitamin and Mineral Supplements

You may be timoking about using distarty supplements such as vitamins and instead during your cancer treatment or you may already be taking some supplements. You should know that phylicians do not agree on their ince. Therefore, if you are taking any supplements, discuss this with your phylicians. Many directly supplements contain levels that are higher than the amount found in food, and some may also be higher than what is recommended for good health. Some contain substances that may affect some chemotherapy draws.

PATIENT PAGE

Many cancer experts advise their patients not to take supplements during treatment, or they may suggest using a dictary supplement only when it is needed to treat a

There currently is no evidence to support taking supplements after a cancer diagnosis to reduce the risk of re-

ents can be useful in correcting specifi t most studies have found that the risks o ements usually outweigh the benefits. Unles te team recommends a supplement for

uring Cancer Treatme

during cancer treatment, and it has many rows bone health, muscle strength, erectile do other quality-of-life measures. Before sercise program, talk with your doctor or m. Ask them about when you can start to ow you can be physically active during at health care team will consider your your personal preferences as they help you

SCHOOL OF LANSING A FREE AND ADDRESS STOLE.





Visit <u>cancer.org/cancer/survivorship</u> for more.

^{*}also available for printing

Cancer Survivors Network®



The **Cancer Survivors Network (CSN)** is a peer support community for cancer patients, survivors, caregivers, families, and friends.

- CSN provides a safe online connection where cancer patients and caregivers can connect with others with similar experiences.
- Users can participate on discussion boards, join a chat room, and build their own support network.





Caregiver Resources

Caregivers are a crucial part of any cancer care team. These are additional caregiver resources from ACS that can be shared:

- Caregivers landing page on cancer.org
- The Caregiver Resource Guide
- When Someone You Know Has Cancer
- Being a Caregiver*
- Caregiver Distress Quiz
- What a Cancer Caregiver Does
- Help for People Facing Cancer, Survivors, and Caregivers*

*also available for printing



Visit <u>cancer.org/cancer/caregivers</u> for more.



A caregiver is someone who helps take care of a person with cancer. In most cases, the main caregiver is not paid – usually a spouse, partner, or adult child. Sometimes close friends, coworkers, or neighbors may fill this role. The caregiver is a key part of the care for the person with cancer.



What does a caregiver do?

A caregiver is part of the cancer care team, which also includes the person with cancer and the medical

staff. Caregivers do many things to help the person with cancer, like:

- Bathe, groom, and dress.
- Eat and get res
- rake medicines.
- Keep track of appointme
- Take care of insurance problem
- Get to and from appointments.
- Neip with other family members in
- . Halo them live their life as normal as no rible

Agood caregiver is often the one person who knows everything that's going on with the patient. Don't be afraid to ask questions and take notes during doctor visits. Learn who the members of the cancer care team are and know how to

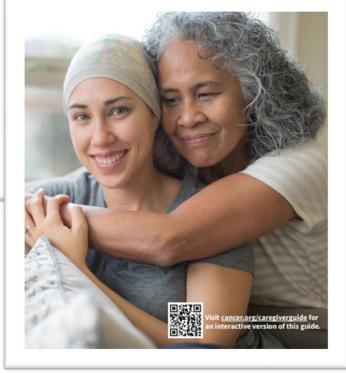
Involve the person with cancer as much as possible to do their part to get better.

Let the person with cancer make decisions.
If they're overwhelmed with decisions, give

 If the person with cancer does things that can cause them harm, get help and talk with the cancer



Caregiver Resource Guide Caring for a Loved One With Cancer



ACS CARES™



ACS CARES (Community Access to Resources, Education, and Support)

is a mobile app for people with cancer, their families, and caregivers.

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 - Speak directly with ACS cancer information specialists
 - Find reliable information on important topics such as emotional health, finances, and more
 - Connect virtually with trained community volunteers who share the same cancer experience
 - Receive in-person support from clinic volunteers at pilot locations
- Available in English/Spanish from Google Play or the App Store.

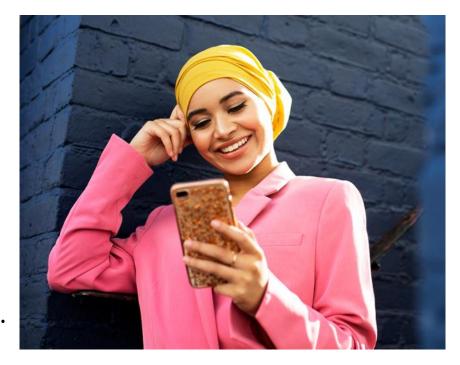


24/7 Cancer Helpline



Our **cancer helpline** at **1-800-227-2345** provides support for people dealing with cancer 24 hours a day, 7 days a week.

- Trained cancer information specialists:
 - Provide accurate, up-to-date information on cancer
 - Answer questions about treatment options, side effects, clinical trials, and more
 - Connect people with programs and services
 - Offer emotional support
- Help is available in more than 200 languages via translation service.
- The helpline also available via Live Chat through <u>cancer.org</u>.
 - Available weekdays, 7 a.m. to 6:30 p.m. CT.



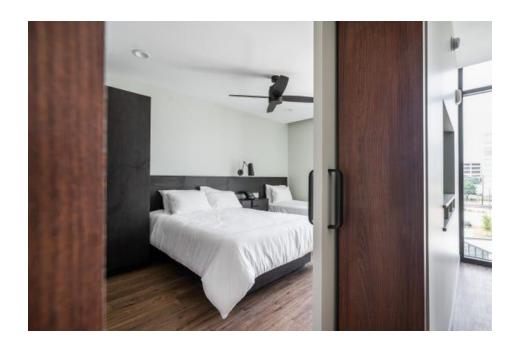
To refer patients to an ACS program or service, have them call the helpline at 1-800-227-2345. Or you can call on their behalf.

Lodging Assistance – Hope Lodge®



Hope Lodge communities provide a free place to stay during treatment so people with cancer can focus on getting better.

- Hope Lodge communities provide:
 - 1,100 rooms at 31 US locations, including Puerto Rico
 - Close proximity to local cancer treatment centers
 - Private guest rooms and bathrooms
 - Fully equipped community kitchens for food storage and preparation
 - Free laundry rooms stocked with supplies
 - Places to gather or find a quiet respite
 - Comprehensive resources about diagnoses and treatments, and social, health, and wellness programs



To learn more about specific Hope Lodge locations and patient eligibility, call 1-800-227-2345 or visit cancer.org/HopeLodge.



Beltrami County 2024

601

21

28.62

27

Nights Provided Unique Recipients

Avg Nights per Hope Lodge Stay

Rides Provided

Questions?



matt.flory@cancer.org 651-335-8926