Iowa Cancer Consortium
www.canceriowa.org

Application

FY26 Iowa Cancer Plan Implementation Grant Cycle

Applicant Information:

Name of Project Lead: Trina Radske-Suchan
Project Lead Email Address: tsuchan@iacommunityhub.org
Project Lead Phone Number: 515-635-1285
Organization: Iowa Community HUB
Street Address: 939 Office Park Road, Suite 333
City: West Des Moines
Zip Code: 50265

Project Details:

Project Title: **The Cancer Survivorship Navigation Initiative**
Total Amount of Funds Requested for FY26 (up to $25,000): **$25,000**

Provide a brief description of your intended project and any relevant background information about your organization. *(Suggested: 1,000 words or less.)*
CHPcommunity, doing business as the Iowa Community HUB (HUB), is a statewide community care hub dedicated to helping initiate, expand, and sustain programs that address essential health needs. The HUB collaborates with healthcare providers, community organizations, and public health agencies to prevent and manage chronic conditions by connecting Iowans, regardless of age, ability, income, or background, to supportive health programs and services. As a centralized coordination point, the HUB streamlines referrals, enrollment, and participation in evidence-based programs (EBPs) across the state. More than 550 healthcare providers actively refer to the HUB, which also welcomes self-referrals and referrals from non-medical partners. At the core of our work is a robust navigation system that empowers individuals to identify their needs, set goals, and access resources through the support of a trained HUB Navigator. These Navigators act as community liaisons, helping individuals overcome barriers to care and connect with services such as disease-specific programs, food assistance, transportation, and health education. Since 2021, our Navigation Program has helped more than 3,400 Iowans access programs, with over 700 of those individuals being cancer survivors referred through our collaboration with Above and Beyond Cancer, a nonprofit dedicated to uplifting cancer survivors and their families. The HUB also operates a centralized referral and data infrastructure that streamlines communication across sectors and enables shared accountability. This

system allows for efficient referral management, program enrollment, and outcomes-based reporting.

The Iowa Community HUB is uniquely positioned to respond to the Iowa Cancer Consortium's FY26 Implementation Grant opportunity with a focused initiative to improve the lives of cancer survivors through community-based navigation and strategic coordination. **The Cancer Survivorship Navigation Initiative** is designed to improve the health and well-being of cancer survivors across Iowa by expanding access to community-based support services through the work of HUB Navigators within the Iowa Community HUB. Building on our successful partnership with Above and Beyond Cancer, this project will support the development of a dedicated HUB Navigator tasked with guiding cancer survivors to the resources and programs most aligned with their recovery, wellness, and long-term health goals. This initiative directly aligns with the 2023–2027 Iowa Cancer Plan, specifically its goals to reduce disparities in cancer care, enhance survivors' quality of life, promote evidence-based practices, and foster collaboration across systems. We recognize that survivorship extends beyond medical treatment; it is a lifelong journey that can involve physical, emotional, financial, and social challenges. Many survivors experience gaps in post-treatment care, struggle with unmet social needs, and are unaware of available resources that can support their continued healing and quality of life. Through this grant, we will collaborate with cancer-focused organizations across Iowa to establish strong referral pathways and connect survivors to the programs and services they offer by implementing the following activities:

1. **Expand statewide navigation services for cancer survivors** by introducing a dedicated HUB Navigator focused on cancer survivorship support.
2. **Screen survivors for health-related social needs**, including food insecurity, transportation barriers, housing instability, and mental health concerns.
3. **Establish referral pathways** with healthcare partners to connect cancer survivors to evidence-based support programs offered by HUB-affiliated, cancer-focused organizations.
4. **Partner with cancer-focused organizations** to broaden their ability to reach and support cancer survivors in communities throughout Iowa.
5. **Use data to monitor progress**, track outcomes, and evaluate the impact of navigation on survivor well-being and program engagement.

The Cancer Survivorship Navigator within the HUB will serve as a dedicated point of contact for survivors, working closely with clinical and community partners to ensure that survivors receive timely, appropriate referrals and ongoing support. Survivors will receive follow-up to help them enroll in services, address any barriers, and stay engaged in programs that contribute to their recovery and wellness.

Target Population and Equity Focus

This project will prioritize outreach to underserved and rural cancer survivors, who often face the most significant challenges accessing care and support services. Many of these individuals experience heightened barriers due to geography, language, transportation limitations, or a lack of awareness of available resources. By embedding navigation within our existing statewide infrastructure, we can ensure equitable access regardless of location or background. We also recognize the disproportionate cancer burden experienced by certain populations, including low-income individuals, racial and ethnic minorities, and older adults. Our approach emphasizes person-centered care, ensuring that each

survivor's needs, preferences, and lived experiences are respected throughout the navigation process.

Community and Partner Engagement

A hallmark of the Iowa Community HUB model is our collaborative approach. Currently, more than 550 healthcare providers make referrals to the HUB. We will leverage our extensive partner network, including healthcare systems, local public health departments, and community organizations, to identify survivors, coordinate care, and promote available programs. Our ongoing partnership with Above and Beyond Cancer has already demonstrated success in connecting survivors to health promotion programs, fresh produce boxes, and health education. This project seeks to scale our navigation services by incorporating additional partners and increasing the capacity of the HUB to serve more survivors statewide. We will also work with regional coalitions, patient advocacy groups, and survivor networks to ensure that the voices of cancer survivors inform the project's direction, priorities, and continuous improvement.

Sustainability and Impact

The Iowa Community HUB is committed to building sustainable infrastructure for community care coordination. Our long-term vision is to embed cancer survivorship navigation into our core model, supported by diverse funding sources including health system investments, managed care partnerships, and public health contracts. This grant will allow us to pilot and evaluate a dedicated Cancer Survivorship Navigator within the HUB and establish the roles and demonstrate value through data-driven reporting and stakeholder engagement.

Anticipated outcomes include:

- Increased identification of survivors with unmet social needs
- More timely and appropriate referrals to survivorship programs
- Improved survivor engagement in evidence-based services
- Enhanced quality of life among survivors reached
- Stronger partnerships between clinical and community organizations

This initiative will contribute not only to individual healing journeys but also to broader systems change that makes survivorship care more inclusive, coordinated, and accessible across Iowa.

How many individuals in Iowa do you expect to reach through your project?

We intend to serve 200 individuals in the first year, 300 individuals in the second year, and 400 individuals in the third year, for a total of 900 cancer survivors served over 3 years.

In which Iowa counties do you expect to reach people through your project?

Statewide

Please describe how your project addresses one or more of these priority areas: *(Suggested: 1,000 words or less.)*

- Addressing cancer disparities across the cancer continuum.
- Addressing cancer prevention and/or early detection.
- Expanding successful local projects statewide in Iowa.

- Formalizing lasting and broad change in cancer control through policy and systems change within organizations, systems, and communities. (Funds may not be used for lobbying.)

1. Addressing Cancer Disparities Across the Cancer Continuum

This initiative directly targets disparities that exist in the post-treatment phase of the cancer continuum, particularly for survivors from rural and underserved communities. Many survivors face unmet social needs such as food insecurity, transportation, and housing instability that can impact their recovery and quality of life. Additionally, gaps in awareness or access to survivorship programs disproportionately affect low-income individuals, older adults, and racial and ethnic minority populations. By embedding a dedicated Cancer Survivorship Navigator within the HUB, we will:

- Identify health-related social needs through survivor screening.
- Provide person-centered guidance, support shared decision-making, and offer consistent follow-up.
- Help survivors enroll in programs, with language support and other accommodations as needed.
- Help rural communities overcome access barriers and become more aware of available local and virtual programs.

Our community-based navigation model ensures survivors, especially in rural or underserved areas, receive inclusive, needs-based support.

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2. Addressing Cancer Prevention and/or Early Detection

While this initiative is primarily focused on survivorship, it contributes indirectly to cancer prevention by improving health literacy and access to community-based programs that promote wellness, nutrition, physical activity, mental health, and chronic disease management. These interventions are essential for preventing recurrence and promoting healthy lifestyles.

Through HUB Navigation, survivors will be supported in:

- Maintaining healthy behaviors
- Managing comorbidities
- Accessing preventive screenings and education relevant to their ongoing care.

The HUB's role as a connector across systems ensures that survivors are not lost to follow-up and remain engaged in services that support both recovery and prevention.

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3. Expanding Successful Local Projects Statewide in Iowa

The Iowa Community HUB is a proven leader in statewide coordination of community health initiatives. Through its cross-sector HUB Advisory Group meeting consistently every other month since 2020, the HUB brings together healthcare systems, public health agencies, community-based organizations, and social service partners to align efforts and drive impact across Iowa. The HUB also serves as a backbone organization for a wide range of chronic disease prevention and management initiatives, while supporting and amplifying the work of partner-led projects.

The HUB's leadership is exemplified through several key initiatives:

- **SNAP-Ed Healthy Eating and Active Living (HEAL) Project**: Fosters sustainable improvements in nutrition and physical activity through community-driven policy, systems, and environmental (PSE) changes, focusing on Des Moines' 50314 area. Led by the HUB in partnership with Grace Fitness and guided by a compensated Community Advisory Group and Community Coalition, the project prioritizes SNAP-eligible residents and their lived experiences.
- **HUB Community Fresh Produce Box Project:** Home delivery of fresh produce monthly to participants in chronic disease prevention and management programs. Funded by the HUB through various grants, including an award from Prairie Meadows, and delivered by Capital City Fruit, the program addresses food insecurity by reducing barriers such as transportation and cost.
- **CDC-Funded Arthritis Initiative**: A five-year statewide project in collaboration with Iowa State University and six partner teams, involving over forty community partners across Iowa, focused on increasing access to arthritis-appropriate, evidence-based interventions (AAEBIs) with a particular emphasis on rural areas.
- **CDC Evaluability Assessment Participation**: Contributing to the development of scalable lifestyle change interventions, including the National Diabetes Prevention Program in collaboration with Iowa HHS and several delivery organizations throughout the state.
- **Pilot Site for NACDD's Public Health Framework**: Collaborating with Primary Health Care in Des Moines to implement a new, national model for arthritis management and falls prevention, focusing on integrated care delivery.
- **ASTHO Falls Prevention Project:** Collaborating with Iowa HHS to expand the use of CDC's STEADI (Stopping Elderly Accidents, Deaths & Injuries) toolkit in clinical settings and referring patients to the HUB for connection to community-based falls prevention programs**.**

These examples show a strong HUB foundation to support the expansion of cancer-related projects through statewide coordination, referrals, and cross-sector collaboration.

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4. Formalizing Lasting and Broad Change Through Systems Change

At its core, this initiative is about integrating survivorship care into the larger system of community care coordination. The HUB's existing infrastructure allows for long-term, systems-level change by:

- Standardizing survivorship screening and referral protocols.
- Establishing formal partnerships between clinical and community organizations.
- Collecting, analyzing, and reporting data to drive continuous improvement and demonstrate impact.

The Cancer Survivorship Navigator will serve as a dedicated point of contact to guide survivors across systems and help organizations work together more effectively. The result will be a coordinated and person-centered approach to survivorship support, embedded within existing systems and sustained through shared resources and infrastructure. A core strength of the HUB model is its collaborative foundation. With more than 550 healthcare providers referring to the HUB and dozens of active community partners, the infrastructure already exists to support this work at scale. We will leverage this network and expand it to include cancer-focused organizations of all sizes and geographies.
Key activities include:

- Convening partners to align on referral processes and survivor outreach.
- Engaging regional coalitions, advocacy groups, and survivor networks to ensure the project reflects lived experiences.
- Supporting partner organizations in increasing capacity and visibility of their survivorship programs.

Please indicate which type of funding you are applying for (choose one):

☐ **Single Year** (applying for one year of funding only)

☒ **Multi-Year: Year 1** (applying for the first year of a two- or three-year project with the intention of applying for Year 2 in FY27, if awarded)

☐ **Multi-Year: Year 2** (FY25 Year 1 awardees only) *

☐ **Multi-Year: Year 3** (FY25 Year 2 awardees only) *

If you are applying for continued funding (funded last year for the same multi-year project), please describe your success and challenges in previous years of funding. *(Suggested: 250 words or less.)*

Click or tap here to enter text.

Which goal(s) and strategy(ies) from the Iowa Cancer Plan will your project support/help to implement? (*Suggested: 100 words or less.)*

The Iowa Community HUB primarily advances Goal #3: Survivorship and End-of-Life Care by implementing Strategy C: Increase linkages to community support services for cancer survivors like community programs, fresh produce, and physical activity to enhance quality of life. It also supports Goal #1: Health Equity (Strategy B) by addressing social needs through HUB navigation and cross-sector partnerships. In alignment with Goal #2: Prevention and Risk Reduction (Strategies A and B), the HUB reduces barriers to physical activity and healthy food access, especially in underserved areas, through year-round programs and produce box initiatives that support long-term wellness.

Project Objectives:

***Objective #1: Hire and train a HUB Navigator by the end of 2025 to address the unique needs of cancer survivors, ensuring they receive personalized, community-based support and resources.**

- Deadline *(funding period is July 1, 2025-May 31, 2026):* Year 1: by October 31st, 2025
- Baseline data: This would be our first specialized HUB Navigator position
- Target by deadline: Part-Time Cancer Survivorship Navigator hired

***Objective #2: Establish referral pathways with at least 10 new healthcare provider partners to connect their cancer survivors to community programs, services, and resources through the HUB within the first 11 months, improving access to support and enhancing provider engagement.**

- Deadline *(funding period is July 1, 2025-May 31, 2026):* Year 1: through May 31st, 2026
- Baseline data: Over 550 healthcare providers currently refer to the HUB, including more than 90 cancer healthcare providers.

- Target by deadline: 10 new healthcare provider partners

***Objective #3: Increase access to cancer support programs and services by connecting 200 survivors including those from rural and underserved areas to cancer programs through the HUB's navigation system within the first 11 months.**

- Deadline *(funding period is July 1, 2025-May 31, 2026):* Year 1: through May 31st, 2026
- Baseline data: Over 700 cancer survivors have been connected to Above and Beyond Cancer programs since 2021.
- Target by deadline: 200 cancer survivors

Project Collaborators:

The Iowa Cancer Consortium seeks to fund collaborative proposals. **At least one collaborator is required per project.** A letter of support is required for each listed collaborator.

Collaborator #1 (required)

Name: Kylie Cooper, Program Director
Organization: MercyOne Richard Deming Cancer Center
Mailing Address: 411 Laurel Street; Suite 3300**,** Des Moines, IA 50314
Phone: Click or tap here to enter text.
Email: kylie.cooper@mercyoneiowa.org
Please describe the collaborator's proposed responsibilities/role in the project. *(Suggested: 100 words or less)*
Kylie Cooper, Program Director at MercyOne Richard Deming Cancer Center, will play a key role in the project by acting as a primary collaborator and referral source. She will work closely with the HUB to promote its services to cancer survivors and help facilitate referrals from the cancer center to the HUB for enrollment in community-based support programs. Kylie will also provide valuable input into the design and implementation of the cancer survivorship navigation services, ensuring they meet the specific needs of cancer survivors and contribute to the overall success of the initiative.

Collaborator #2 (optional)

Name: Megan Schmidt, Assistant Director, Community Outreach & Engagement
Organization: Holden Comprehensive Cancer Center
Mailing Address: 200 Hawkins Dr, Iowa City, IA 52242
Phone: 319-467-0908
Email: megan-e-schmidt@uiowa.edu
Please describe the collaborator's proposed responsibilities/role in the project. *(Suggested: 100 words or less)*
Megan Schmidt, Assistant Director, Community Outreach & Engagement will serve as a key collaborator in the Cancer Survivorship Navigation Initiative by facilitating connections between the HUB and relevant University of Iowa and Holden Comprehensive Cancer Center programs, contributing data-driven insights to inform outreach and survivorship strategies, and promoting community and rural engagement to ensure HUB navigation services remain aligned with community needs.

Collaborator #3 (optional)

Name: Mary Van Heukelom, Program Director

Organization: Above and Beyond Cancer

Mailing Address: 1305 50th Street, West Des Moines, Iowa 50266

Phone: 515-669-9879

Email: mary@aboveandbeyondcancer.org

Please describe the collaborator's proposed responsibilities/role in the project. *(Suggested: 100 words or less)*

Mary Van Heukelom, Program Director at Above and Beyond Cancer, will share testimonials of the support provided by the HUB and highlight the successes of their programming. She will play a key role in helping the HUB recruit and expand the number of cancer-focused organizations connected to the HUB. Her expertise and collaboration will strengthen the network of resources available through the HUB, ensuring more survivors can benefit from the support they need.

Evidence & Evaluation:

What scientific evidence is there that your project will be effective? (*Suggested: 500 words or less.)*
Our project leverages evidence-based strategies and models that have demonstrated effectiveness in improving health outcomes for cancer survivors. The Iowa Community HUB's model of person-centered navigation, which has already shown success in other chronic disease areas, is built on best practices for linking individuals to appropriate resources and addressing social determinants of health. Below are key evidence-based practices supporting the project's anticipated effectiveness:

1. **Navigation Programs:** Research shows that navigation, which help individuals access healthcare and community resources, significantly improve health outcomes for chronic disease patients, including cancer survivors. The National Cancer Institute (NCI) reports that cancer patient navigation improves timely access to care (Freund et al., 2014). Furthermore, a study published in *Supportive Care in Cancer* found that patient navigation plays an essential role in overcoming barriers to care and improving outcomes for those most in need (Lopez et al., 2019). The HUB's navigation model aligns with these findings, as it guides cancer survivors to necessary services such as nutrition, physical activity, and mental health support.
2. **Access to Community-Based Programs and Services**: Numerous studies have shown that community-based interventions, such as access to nutrition programs, physical activity, and mental health support, play a significant role in improving cancer survivors' health outcomes. A study published in *Journal of Pain and Symptom Management* explored the emotional, psychosocial, and physical effects of a community-based exercise program for cancer survivors. The results indicated significant improvements in fatigue, physical function, and emotional well-being among participants (Kollas et al., 2016). These findings highlight the importance of integrating accessible, community-based resources into survivorship care to support long-term recovery and quality of life.
3. **Addressing Social Determinants of Health:** A growing body of research underscores the importance of addressing social determinants of health in improving cancer outcomes. Studies consistently demonstrate that addressing factors such as food insecurity, transportation barriers, and mental health issues is critical for cancer survivors, especially in rural and underserved areas. According to Journal *Cancer,* more than one-third of the survivors (36.3%) reported social needs including 17.1% of survivors reported 2 or more (Hastert et al., 2021). The HUB's work in screening for and addressing these needs aligns with the evidence supporting the importance of a holistic, person-centered approach to cancer care.
4. **Strengthening Referral Pathways:** The success of referral pathways in improving access to care has been well-documented. A study published in the *American Journal of Men's Health,* showed that while referrals to chronic disease programs were limited, those who received them were significantly more likely to attend (Bergeron et al., 2024). By expanding referral pathways with healthcare providers and cancer-focused organizations, the HUB enhances access to a broader range of services, helping survivors navigate their journey from diagnosis to survivorship.

In summary, our project builds upon established, evidence-based strategies for cancer survivorship care. Through the implementation of these proven strategies, we are confident the project will lead to measurable improvements in survivor outcomes across Iowa.

How will you evaluate your project? How will you know if you have been successful? (*Suggested: 250 words or less.)*

The success of our project will be evaluated through a combination of process, outcome, and impact measures that align with the objectives and goals of the grant. We will use both qualitative and quantitative data to assess the effectiveness of the initiative.

1. **Referral Process Evaluation:** We will track the number of cancer survivors referred to the HUB and the number of new healthcare provider referral sources.
2. **Outcome Evaluation:** We will measure survivor engagement in programs and services through a couple of key outcome indicators:
    - Increased access to cancer support programs and services as measured by the number of survivors enrolled in programs and receiving services and the number of cancer-serving organizations onboarded with the HUB.
    - Improvement in survivor quality of life, as measured by post program surveys and feedback.
3. **Impact Evaluation:** The impact of the project will be assessed by capturing the lived experiences of cancer survivors as they are referred to the HUB, receive HUB Navigation services, and access relevant programs and services. This will be achieved through community focus groups, testimonials, and/or surveys.

Progress will be reviewed quarterly by the project team and key stakeholders to ensure the project is on track and meeting objectives. We will use this feedback to adjust strategies as needed, ensuring continuous improvement and the achievement of desired outcomes.

How will you modify your project to meet the unique needs of certain populations? *(Suggested: 500 words or less.)*

To address the unique needs of specific populations in this project, the HUB will implement a range of strategies.

1. Targeting Rural Populations:

To address the unique challenges faced by rural cancer survivors in Iowa, our HUB Navigator will help overcome barriers such as limited access to resources and transportation. We will connect survivors to local and virtual support programs, with additional help through a transportation fund in partnership with United Way 211 for Lyft rides. Our efforts are strengthened through partnerships with rural health leaders such as Samra Hiros at the Iowa Office of Rural Health, the Iowa Rural Health Association (which supports our CDC Arthritis grant), and our subject matter expert at the National Organization of State Offices of Rural Health to guide and enhance rural outreach and service delivery.

2. Culturally and Linguistically Appropriate Services:

To effectively serve diverse populations, the HUB offers a multilingual language line to support non-English speaking survivors and provides translation assistance to community partners for program materials when needed. We will also work with culturally competent staff and collaborate closely with organizations that serve diverse communities to ensure services are respectful, relevant, and trusted. These efforts will help build stronger connections, improve engagement, and reduce barriers for diverse populations across Iowa.

3. Focus on Vulnerable Populations:

We will prioritize support for vulnerable populations such as low-income individuals, older adults, and people with disabilities, who often face layered barriers to care. HUB Navigators will ensure these groups are connected to appropriate programs, including transportation assistance and tailored physical activity options for those with mobility limitations. Through partnerships with Easterseals Iowa and Iowa Compass, the HUB offers access to adaptive equipment and expertise in creating inclusive environments. Additionally, collaboration with the Area Agencies on Aging helps link older adults to vital services that promote safety, independence, and well-being in their homes and communities.

4. Collaborating with Cancer-Focused Organizations Across Iowa:

To better understand and respond to the needs of diverse cancer survivor populations, the HUB will collaborate with cancer-focused organizations across the state. These partners offer vital insight into existing local resources and the unique barriers their communities face. By working closely with them, we will strengthen referral pathways, ensure navigation services are tailored to local contexts, and identify gaps in programming. This statewide collaboration promotes shared learning, builds trust, and ensures services are community-informed and more effective in reaching underserved populations.

5. Feedback and Continuous Improvement:

To ensure we are meeting the evolving needs of these populations, we will regularly capture feedback from cancer survivors through focus groups, surveys, and/or testimonials. This feedback will guide us in modifying our approach to better serve all Iowans, making adjustments based on what is working and where gaps remain. By centering the voices of survivors, we will create a responsive, adaptable program that meets the changing needs of those we serve.

Budget:

Please explain your budget in words: *(Suggested: 100 words or less)*

The $25,000 budget will help fund a part-time HUB Navigator dedicated to supporting cancer survivors across Iowa. This Navigator will manage incoming referrals from healthcare and community partners, screen survivors for health-related social needs, and provide person-centered support. Their responsibilities include enrolling survivors in relevant programs and connecting them to community-based services such as nutrition support, physical activity opportunities, mental health resources, and transportation assistance. Project workload: up to 30 hours per week. A staff resume is not included, as this position is pending hire; however, the job description detailing project responsibilities is attached.

Use the table below to complete your proposed budget:

Reminder: Funding period is July 1, 2025, to May 31, 2026. This is an 11-month period, not a full year.

Budget Items and Explanation	Grant Funds Requested	Other Funding	Total Funds for Project
If possible, please divide them into categories. Examples include staff support, travel, supplies, equipment, etc. If service delivery or incentives are included within the budget, please include a statement of need along with each budget item.	*Funds being requested from the Iowa Cancer Consortium.*	*Include in-kind support, volunteer hours, collaborator financial support, and other types of financial support.*	*Include requested Iowa Cancer Consortium funds + items outlined in the Other Funding category.*
Staff Support			
	$25,000 for part-time Cancer Survivorship HUB Navigator	Up to $5,000 will be provided as in-kind support to cover the remaining salary and any applicable fringe benefits.	$30,000
Travel			
	0	0	0
Printing			
	0	0	0
Supplies			
	0	0	0
Shipping			
	0	0	0
Other			
Technology Support	0	$1,000 will be provided to cover laptop, head set and additional technology support services	$1,000
Community Health Worker Training	0	If individual does not have this training already, the HUB covers the training at $900+	$900
Totals:	$25,000	$6,900	$31,900

MERCYONE

Richard Deming
Cancer Center
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Suite 3300
Des Moines, Iowa 50314

T 515-643-8206
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May 6, 2025

Iowa Cancer Consortium
PO Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

I write on behalf of the Iowa Community HUB in support of the Cancer Survivorship Navigation Initiative proposed to the Iowa Cancer Consortium as part of the FY26 Iowa Cancer Plan Implementation Grant, Invitation for Proposals.

At the MercyOne Richard Deming Cancer Center, we understand that cancer survivorship is a complex, lifelong journey that extends beyond clinical care. Survivors often face social, physical, emotional, and practical challenges that are too often overlooked. The Iowa Community HUB has proven to be a trusted partner in connecting individuals to community-based programs and addressing social drivers of health through its statewide navigation network. While highly effective, this model has not yet been expanded as a dedicated, statewide resource for cancer survivors and the organizations that serve them. This initiative represents a vital opportunity to close that gap and bring coordinated, person-centered survivorship support to communities across Iowa.

I will serve as a key collaborator and referral partner in this initiative. I am committed to working closely with the Iowa Community HUB to:

- **Champion awareness** of HUB services among our cancer survivor population, ensuring individuals are informed and empowered to access community-based support.
- **Develop and enhance two-way referral pathways** between our center and the Iowa Community HUB, ensuring cancer survivors are seamlessly connected to evidence-based programs that promote healing, resilience, and long-term wellness.
- **Provide strategic input** on the design and implementation of the survivorship navigation services, helping ensure they are grounded in the real-world experiences, needs, and priorities of cancer survivors across Iowa.

The MercyOne Richard Deming Cancer Center is proud to support this initiative, and I personally look forward to contributing to its success. Together, we can ensure that more Iowans, especially those in underserved and rural communities, receive the resources, care, and support they need to thrive in survivorship.

Please feel free to reach out to me directly if additional information is needed.

Sincerely,

Kylie Cooper, MPH - Program Director, Integrative Oncology
MercyOne Richard Deming Cancer Center
Kylie.Cooper@mercyoneiowa.org

IOWA
HEALTH CARE

University of Iowa Health Care
Holden Comprehensive
Cancer Center
Community Outreach & Engagement

May 7, 2025

Iowa Cancer Consortium
PO Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

I write on behalf of the Iowa Community HUB in support of the Cancer Survivorship Navigation Initiative proposed to the Iowa Cancer Consortium as part of the FY26 Iowa Cancer Plan Implementation Grant, Invitation for Proposals.

The main goal of the Holden Comprehensive Cancer Center Community Outreach and Engagement team is to ensure the efforts of the cancer center are relevant to Iowa by engaging cancer center researchers and the people of Iowa in ways that are meaningful, inclusive, and impactful.

The proposed HUB model aligns closely with our commitment to reducing the burden of cancer by addressing barriers to care, improving navigation, and ensuring coordinated access to cancer-related services and research across the state. We believe the HUB approach will help close critical gaps in care and improve survivor experiences, particularly rural populations and others not yet reached.

As a key collaborator in this initiative, I am committed to supporting its success through the following contributions:

- **Facilitate Collaboration**: I will help connect the HUB team with relevant researchers, programs, and partners at the University of Iowa and Holden Comprehensive Cancer Center to ensure strong alignment and collaboration.
- **Share Data and Insights**: I will contribute data-driven insights and evidence-based strategies that may inform outreach, navigation, and survivorship support efforts statewide.
- **Promote Community and Rural Engagement:** I will help amplify the Cancer Survivorship Navigation Initiative efforts across the communities we serve, including rural areas and others in need of community resources, by encouraging active participation and feedback to ensure the HUB navigation services remain aligned with local needs and truly community-centered.

We are excited to partner with the Iowa Community HUB and confident in its potential to serve as a transformative resource for both survivors and providers across Iowa.

Sincerely,

Megan Schmidt, MEd, MPH
Assistant Director, Community Outreach & Engagement
Holden Comprehensive Cancer Center
Megan-e-schmidt@uiowa.edu

ABOVE+BEYOND

05/09/25

Iowa Cancer Consortium
PO Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

I write on behalf of the Iowa Community HUB in support of the Cancer Survivorship Navigation Initiative proposed to the Iowa Cancer Consortium as part of the FY26 Iowa Cancer Plan Implementation Grant, Invitation for Proposals.

Above + Beyond Cancer has worked closely with the Iowa Community HUB to support cancer survivors through access to health education, wellness services, health and fitness programs, and fresh produce. We've seen firsthand the impact of their navigation model in helping survivors overcome barriers and connect with meaningful community-based support. The HUB's collaborative framework and holistic approach have allowed our organization to reach more individuals, especially those coping with the ongoing personal, financial, and social impacts of cancer treatment.

This initiative is a natural and needed extension of that work. By embedding a dedicated Cancer Survivorship HUB Navigator within the HUB, more survivors across Iowa will be connected to the right services at the right time, empowering them to thrive in survivorship.
As Program Director at Above + Beyond Cancer, I will:

- Strengthen and expand statewide survivor support by improving coordination and access to resources for more individuals.
- Share survivor testimonials and referral outcomes that reflect the impact of HUB-facilitated connections.
- Collaborate with the HUB to recruit additional cancer-focused organizations into the network, strengthening our collective ability to support survivors and ensure no one faces their journey alone.

Together, we can build a more robust and unified system of care that addresses the diverse needs of cancer survivors across Iowa.

Sincerely,

Mary Van Heukelom, Program Director
Above + Beyond Cancer
mary@aboveandbeyondcancer.org

Cancer Survivorship HUB Navigator
Position Description

TITLE: Cancer Survivorship HUB Navigator

REPORTS TO: HUB Lead Navigator

CLASSIFICATION: Part-Time

Summary: The Cancer Survivorship HUB Navigator plays a key role in improving the health and well-being of cancer survivors across Iowa, with an emphasis on rural and underserved communities. This position is responsible for guiding survivors to evidence-based health promotion programs (EBPs) and social care services by addressing barriers such as transportation, cost, and access. The Navigator provides personalized support, strengthens care coordination, and promotes equity in survivorship care through collaboration with community partners and health systems.

Essential Functions: Essential functions for this position include the following items. Other duties must be performed as assigned or required.

- Perform all job functions according to the mission and values of our organization.
- Manage and process incoming referrals for EBPs relevant to cancer survivorship.
- Conduct assessments to identify health risks, survivorship needs, and social determinants of health.
- Provide encouragement to support survivors in adopting healthy lifestyle behaviors.
- Educate survivors on available EBPs and assist with registration and completion of required forms and surveys.
- Refer individuals to appropriate social care services that support program adherence (e.g., transportation, food access, mental health).
- Track engagement, enrollment, and retention in referred programs and services.
- Collect, manage, and report individual-level data, including pre- and post-program surveys.
- Maintain communication with referring providers and community partners to ensure coordinated care.
- Collaborate with rural health partners (e.g., Iowa Office of Rural Health, Iowa Rural Health Association) and participate in grant-related initiatives.
- Advocate for survivors and community health needs, particularly in addressing health disparities across Iowa.

Responsibilities:

- Treat all individuals, including cancer survivors and their families, with respect, empathy, cultural humility, and confidentiality.
- Provide additional support and availability during critical times, such as post-diagnosis, treatment transitions, or when barriers to care intensify.
- Communicate clearly and compassionately, tailoring information to the needs and understanding of cancer survivors from diverse backgrounds.
- Maintain up-to-date knowledge of HUB standards, policies, and procedures to ensure ethical, professional, and mission-aligned conduct.
- Adhere to HIPAA and other state and federal privacy regulations when handling personal health information.
- Foster a professional and collaborative work environment across teams and partner organizations.
- Attend required meetings, staff trainings, and project-related team check-ins.
- Actively participate in ongoing learning opportunities (e.g., webinars, conferences) and contribute to improving navigation processes, care coordination, and survivor support.

Qualifications: The requirements listed below are representative of the minimum knowledge, skills and ability required.

Education/Experience:

- Must be at least 18 years old.
- High school diploma or GED required; additional education in health or social services preferred.
- Completion of Community Health Worker training preferred.
- Experience working with underserved and diverse populations, including rural communities.
- Familiarity with the unique needs of cancer survivors, such as physical, emotional, and social challenges during and after treatment, is highly desirable.
- Experience navigating health and social service systems, including making referrals to evidence-based programs and support services.
- Strong interpersonal skills, including the ability to build trust with individuals coping with chronic illness.
- Ability to meet deadlines, manage multiple tasks, and work independently with minimal supervision.
- Proficient in word processing and data entry; experience with client tracking systems or referral platforms is a plus.

Communication Skills:

- Excellent customer service through telephone, listening, and verbal & written communication skills.

Certificates, Licenses, Registrations:

- Community Health Worker Training is highly encouraged, and we can work with you to complete this training.
- Child and Dependent Adult Abuse Mandatory Reporter Training is encouraged. Will assist the candidate in accessing this training as needed.

Physical Demands & Work Environment: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job.

- Up to 80% of the role involves sitting while performing computer-based and telephone-related tasks.
- Approximately 20% of the time may involve attending health fairs, community events, or external meetings to educate the public and partners about healthy lifestyles and evidence-based programs (EBPs).
- Must be able to carry a laptop and light supplies to off-site locations as needed.
- Requires the ability to perform hand and wrist movements for standard administrative tasks.
- Must be able to communicate effectively via phone and virtual platforms, including the ability to hear and speak clearly.
- Must be proficient in using a computer/laptop for data entry, virtual meetings, and retrieving information.
- Ability to manage varying levels of stress in a fast-paced, community-focused environment.

(The qualifications listed above are intended to represent the minimum skills and experience levels associated with performing the duties and responsibilities contained in this job description. The qualifications should be viewed as general guidelines.)

Environmental – Minimal to no exposure to hazardous environmental conditions.

If interested, contact Ernesta Miller at 515-635-1285 or emiller@iacommunityhub.org

NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

iowa community HUB

PARTNERING WITH A COMMUNITY CARE HUB

Partnering with a community care hub creates bridges between healthcare and social services, ensuring health and daily living needs are met so everyone can participate meaningfully in chronic disease management programs.



Are you a healthcare provider?

Learn more about how partnering with your local community care hub can enhance patient care!

WHAT IS A COMMUNITY CARE HUB?

A Community Care Hub (CCH) is a community-focused entity that organizes and supports a network of community-based organizations providing services and resources to address health and daily living needs and expand participation in evidence-based programming. It centralizes administrative functions and operational infrastructure.

The CCH is a trusted, local connector that can serve as a one-stop shop for a variety of needs including affordable housing, nutritious food, and reliable transportation.

HOW IT WORKS

1. Referral
Consult with your electronic health record team to add the CCH as a referral option.

2. Patient Assessment
The CCH conducts a comprehensive assessment to understand the patient's specific needs and identifies appropriate services from their network.

3. Community Referral
The CCH connects the patient with the right resources and the right organization.

4. Care Coordination
The CCH monitors the patient's progress and communicates updates to the healthcare provider to ensure coordinated care.



KEY BENEFITS

Improved Access to Social Services

Patients can readily access a wide range of social services like housing assistance, food security, transportation, and mental health support through a single referral point.

Reduced Administrative Burden

Healthcare providers don't need to navigate multiple referral pathways to different social service agencies, simplifying the process.

Efficient Care Coordination

By addressing daily living needs through coordinated referrals, the CCH can contribute to better overall patient health outcomes.

Holistic Patient Care and Outcomes Reporting

The CCH manages the referral process, identifying the most appropriate community-based organizations to meet a patient's specific needs and improve outcomes. The CCH coordinates communication between healthcare providers and social service providers.

READY TO PARTICIPATE?

Visit **iacommunityhub.org** to learn more about how the Iowa Community HUB serves Iowans statewide or email us at **info@iacommunityhub.org** with questions.

Scan the QR code for more information

NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

Since 1988, the National Association of Chronic Disease Directors and its more than 7,000 Members have worked to strengthen state-based leadership and expertise for chronic disease prevention and control in all states, territories, and nationally.

Learn more at chronicdisease.org.

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If you require this document in an alternative format, such as large print or a colored background, please contact the Communications Department at publications@chronicdisease.org.

Community Care Hubs (CCHs) and the National DPP Lifestyle Change Program: CCH Spotlights

The National Diabetes Prevention Program (National DPP) lifestyle change program played a significant role in the development of CCHs. In 2014, the Center for Medicare and Medicaid Innovation (CMMI) funded a demonstration for the National DPP lifestyle change program in which the YMCA of the USA served as a lead organization to a delivery system of local YMCAs across the country that delivered the program. The outcome showed increased effectiveness of individual community-based organizations (CBOs) organized as a network under a single managing organization, improved health outcomes, and reduced costs.

As a result of the demonstration, Medicare established coverage for the Medicare Diabetes Prevention Program (MDPP), allowing CBOs to deliver the program as a new Medicare benefit. The history and evidence demonstrating the effectiveness of the National DPP lifestyle change program makes it a promising starting place for CCHs.

There are many examples across the country of organizations that use the CCH model to support a network of CBOs. Iowa Community HUB (HUB) is an example of a CCH that supports providers in offering the National DPP lifestyle change program among other evidence-based programs.

Iowa Community HUB

Background and description

The Iown Community HUB, established in 2020, is a statewide nonprofit CCH dedicated to reducing health disparities among priority populations through centralizing support for its partners and connecting Iowans to evidence-based programs. The HUB collaborates with partners to maximize resources and support community initiatives by:

- Strengthening clinic-to-community partnerships
- Building support for evidence-based programs
- Advancing navigation to community resources
- Operationalizing lived experience feedback

The HUB supports initiating, expanding, and sustaining health and wellness programs through centralizing and coordinating administrative functions on behalf of its CBO partners (Figure 1).

The HUB is working to add billing and contracting as a centralized administrative function to further enable CBO partners to focus on program delivery and relationship building. The HUB aims to expand its network and study the model's impact by collaborating with Iowa State University (ISU) as its translational research partner.

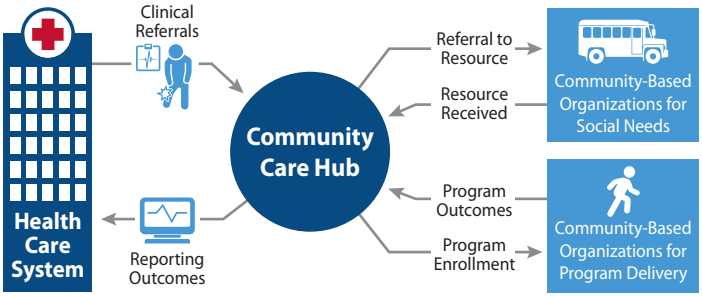
Funding for the HUB comes from various sources and is braided to maximize support for HUB efforts. Funding partners include:

- Initial contract support from the National Association of Chronic Disease Directors (NACDD) for statewide program expansion of Walk with Ease (WWE) and the National DPP lifestyle change program
- CDC grants for WWE, Falls Prevention, and Arthritis (AAEBIs) in partnership with ISU

Figure 1: Iowa Community HUB Administrative Functions

- Management of referrals
- Bidirectional feedback with referral sources
- Screening for and addressing HRSN
- Program enrollment
- Program locator and marketing
- Fidelity and compliance
- Data management and security
- Reporting

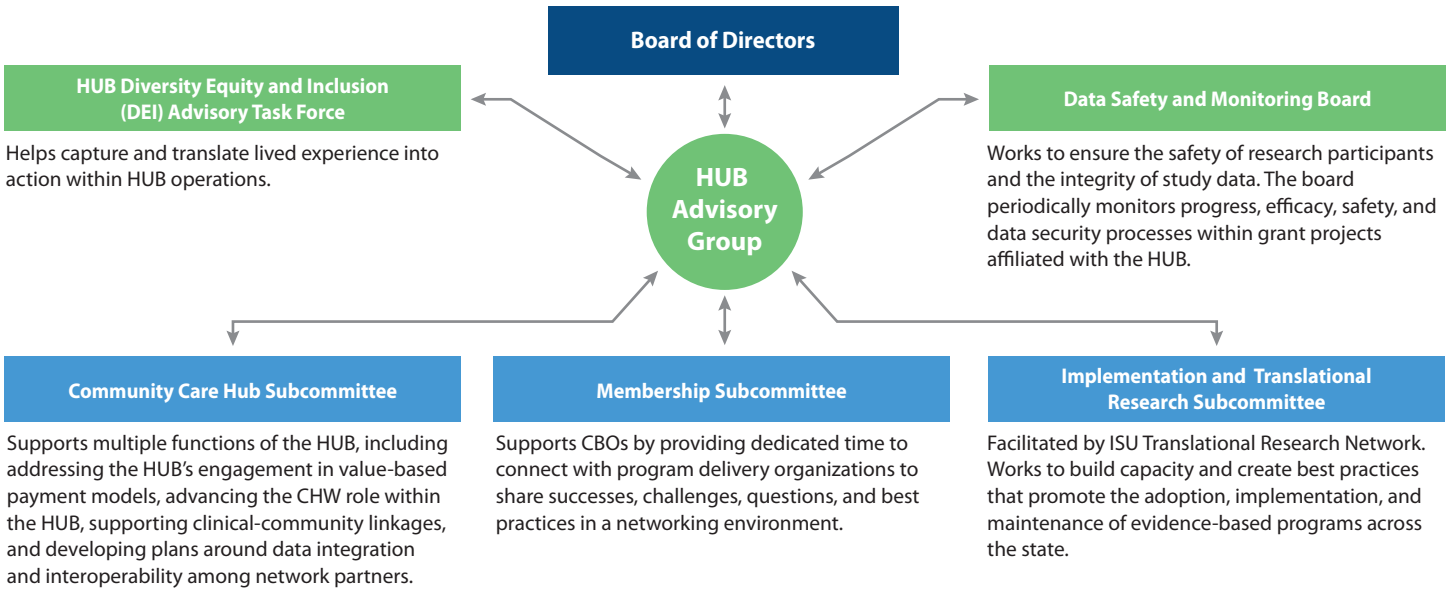
Figure 2: Iowa Community HUB Referral Pathways



- Contracts with the Iowa Department of Health and Human Services through CDC 2320 and the Association of State and Territorial Health Officials (ASTHO)
- USAing Center of Excellence to Align Health and Social Care CCH grant
- Data Across Sectors of Health (DASH) Incubator
- Administration for Community Living (ACL) Falls Prevention grant with the University of Iowa

As of April 2024, contracts funded approximately 55% of the HUB's budget, with grants covering the remaining 45%.

Figure 3: Iowa Community HUB Organizational Chart



Service delivery model

The HUB provides services through HUB Navigators that process referrals and work to enhance enrollment and retention in evidence-based programs. Navigators are trained community health workers (CHWs).

Once an individual is referred to the HUB, a navigator contacts the individual, screens for health-related social needs (HRSN), enrolls the participant in the appropriate evidence-based programs (i.e., the National DPP lifestyle change program), and connects the participant to resources to address HRSN that may present as barriers to program participation (i.e., childcare, transportation, nutritious food) (Figure 2).

The HUB is partnering with a Medicaid managed care organization (MCO) to pilot a payment approach that bundles the National DPP lifestyle change program with other social care services that address HRSN for Medicaid beneficiaries.

Governance model

The HUB governance model consists of an 85+ member HUB Advisory Group comprised of CBOs. Advisory Group members engage in a learning forum focused on the CCH model and work to advance the HUB's efforts statewide. The HUB Advisory Group includes three subcommittees, a Diversity, Equity, and Inclusion (DEI) Advisory Task Force, and a Data Safety and Monitoring Board (Figure 3).

The HUB Advisory Group's collaborative and participatory nature facilitates a welcoming environment for members to communicate openly about challenges, barriers, and successes in their work to bridge health and social care.

Role of National DPP lifestyle change program

The HUB was established to support the delivery of all evidence-based programming. Through opportunities with NACDD, the HUB expanded to become an Umbrella Hub Organization as a strategy to facilitate access to sustainable funding to CBOs delivering the National DPP lifestyle change program and Diabetes Self-Management Education and Support (DSMES). As of June 2024, the HUB has preliminary recognition status from CDC's Diabetes Prevention Recognition Program (DPRP), soon to achieve full recognition.

The Iowa Department of Health and Human Services contracts with the HUB to help support, expand, and sustain the National DPP lifestyle change program, DSMES, and the Chronic Disease Self-Management Program statewide. The contract includes HUB efforts to address program participants' HRSN, including coupling participation with monthly, home-delivered boxes of fresh produce.