Application

FY26 Iowa Cancer Plan
Implementation Grant Cycle

Iowa Cancer Consortium
www.canceriowa.org

Applicant Information:

Name of Project Lead: Dayna Boyles-Carpenter
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Project Details:

Project Title: Can Do Cancer – Expansion of Cancer-Specific Pathways
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.)*
Can Do Cancer is a Central Iowa nonprofit organization that has spent over a decade supporting breast cancer patients undergoing chemotherapy. Our mission has always been to ease the burden of a cancer diagnosis by addressing non-medical needs often overlooked during treatment. Through peer-based support, financial relief, and access to practical services, we've created a model that meets patients where they are—emotionally, physically, and logistically.

Since our founding, we've built a trusted and wide-reaching network of survivors, individual donors, corporate sponsors, healthcare providers, volunteers, and service vendors who share our vision: no one should face cancer alone. With this strong foundation, we are now poised to expand beyond breast cancer and offer the same high-quality, compassionate services to other cancer patients across Central Iowa.

Our intended project is a strategic expansion of Can Do Cancer's core services—peer support, dinner for IV-chemotherapy treatment days, and housecleaning—to include individuals diagnosed with other types of cancer. These are services we've honed over years of close collaboration with patients, caregivers, and care teams. What makes our approach unique is its simplicity and effectiveness: we relieve the day-to-day stressors that can overwhelm patients in active treatment, allowing them to focus on healing.

Peer support remains central to our program. Survivors who've "been there" provide encouragement, practical advice, and a listening ear through structured outreach. Our network of Patient Partners (trained peer mentors) has grown steadily, and we are confident in our ability to extend this compassionate framework to patients with other forms of cancer by recruiting and training new survivor volunteers with diverse experiences.

In addition, we provide meal assistance to patients and their families on the days they receive IV-infusion chemotherapy. This support helps ease the time, energy, and expense of meal planning on treatment days, when proper nutrition and rest are especially important. We also coordinate professional housecleaning services – another practical and often overwhelming task during intensive treatment. These services are designed to support not only the individual undergoing chemotherapy, but also their entire household. All services are offered at no cost to patients, made possible through the generosity of our supporters and the efficiency of our operational model.

Over the years, we've created a streamlined, scalable system for intake, service delivery, and follow-up. Our website and program materials are easy to access, and our partnerships with oncology teams across Des Moines and Ames allow for smooth referrals and timely support. These efficiencies will be leveraged as we broaden our reach to serve patients with other cancer diagnoses.

We are making this move not simply because we can, but because we must. The need is clear. Many of the challenges breast cancer patients face—fatigue, isolation, financial strain, and a lack of coordinated non-medical support—are shared by those with other cancer types. We believe our model is adaptable, and our track record of success makes us well-positioned to lead this expansion. By growing thoughtfully and collaboratively, we will ensure the same level of quality and care that has made Can Do Cancer a trusted name in the breast cancer community. Our next chapter is one of inclusion, scalability, and continued impact—for the benefit of all cancer patients in Central Iowa who could use a helping hand.

Together, we CAN DO CANCER.

How many individuals in Iowa do you expect to reach through your project?
We anticipate reaching a significantly broader population of cancer patients in Central Iowa through this project. Since its inception, Can Do Cancer has provided practical and emotional support to more than 1,100 breast cancer patients, helping them navigate the transition from diagnosis through treatment and into survivorship. In 2024 alone, 143 patients enrolled in our program—demonstrating both the ongoing need for and trust in our services.

By expanding our services to include patients with other cancer diagnoses, we are opening our program to a much larger group. Within our Central Iowa regional footprint, approximately 6,480 individuals are expected to receive a new cancer diagnosis in 2025–2026 and a significant percentage of those diagnosed will require IV-chemotherapy, making them potentially eligible for our program.

While we do not anticipate serving every one of these patients immediately, our goal is to expand intentionally and sustainably to reach those who would benefit most.

In collaboration with healthcare teams and oncology navigators, we will identify the most diagnosed cancer types in Central Iowa that follow treatment plans involving IV-infusion chemotherapy. These pathways present the greatest alignment with our existing support model, allowing us to provide immediate, high-impact services while building a scalable framework for future growth.

We will also continue to partner with oncology navigation teams and fellow nonprofit organizations to identify patients in need and to recruit survivor volunteers who can serve as trained Patient Partners, ensuring personalized peer support across a broader range of diagnoses.

This expansion will maintain the integrity and quality of our current model—centered on peer-based emotional support and non-medical assistance such as meals and housecleaning—while meaningfully increasing the number of Iowans we are able to serve.

In which Iowa counties do you expect to reach people through your project?
Through this project, Can Do Cancer expects to reach individuals across a wide swath of Central Iowa, leveraging our strong referral partnerships with oncology providers in both Des Moines and Ames.

Our existing relationships with facilities such as John Stoddard Cancer Center, MercyOne Des Moines Cancer Center, Broadlawns, and Mission Cancer + Blood in Des Moines—as well as Mary Greeley Medical Center and McFarland Clinic in Ames—ensure we are positioned to serve patients throughout the region.

We anticipate reaching individuals in the following Iowa counties:

- **Polk**
- **Dallas**
- **Warren**
- **Madison**
- **Marion**
- **Jasper**
- **Story**
- **Boone**
- **Marshall**
- **Guthrie**
- **Greene**
- **Hamilton**
- **Hardin**
- **Webster**
- **Humboldt**

These counties represent the broader Central Iowa footprint where patients commonly receive cancer treatment at major regional centers. Our phased program expansion will initially focus on individuals undergoing IV-infusion chemotherapy for commonly diagnosed cancers in the region, with specific cancer types to be determined in collaboration with oncology navigators and clinical partners. As capacity and funding allow, we intend to broaden our scope further. By partnering with healthcare teams and fellow nonprofits across this geography, we will ensure that individuals in both urban and rural communities have access to the non-medical support and peer-based encouragement that are the hallmarks of Can Do Cancer's model.

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.)

Can Do Cancer's proposed project to expand non-medical cancer support services beyond breast cancer addresses multiple priority areas in a strategic, impactful, and sustainable manner. For over a decade, our organization has filled critical gaps in care for breast cancer patients by providing peer-based emotional support, meals, and housecleaning services – all of which reduce financial strain, ease treatment burden, and improve quality of life.

Now, we are poised to extend this proven, patient-centered model to additional cancer diagnoses—identified in collaboration with our clinical and community partners—serving a broader population of Iowans and directly advancing the following priority areas:

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1. Addressing Cancer Disparities Across the Cancer Continuum

Cancer disparities often emerge not only from access to treatment but from differences in support systems, geographic location, and socioeconomic status. Our project directly targets these inequities by:

- Providing services free of charge, removing financial barriers for low-income individuals and families;
- Offering practical support that helps reduce treatment interruptions due to unmanaged stressors like food insecurity, lack of rest, or unstable housing environments;
- Prioritizing rural outreach by partnering with regional cancer centers in Des Moines and Ames that serve patients from both metro and rural counties, including Warren, Jasper, Boone, Marshall, Greene, and others;
- Recruiting peer mentors who reflect the lived experiences and geographic diversity of those we serve, ensuring cultural competence and personal relatability.

By expanding our services beyond breast cancer and intentionally focusing on reaching patients across Central Iowa, we are advancing health equity through accessible, wraparound care that meets individuals where they are.

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2. Expanding Successful Local Projects Statewide in Iowa

Can Do Cancer is a long-standing, trusted organization in the Des Moines metro area with a track record of success. Since our founding, we have supported more than 1,100 breast cancer patients, including 143 in 2024 alone. Our service model—centered on peer support, meal delivery, and housecleaning—has been refined over time and is well-positioned for replication.

This project represents the natural next step: a phased expansion of our core offerings to Iowans facing other common cancer diagnoses. Our strategic partnerships with oncology navigation teams and nonprofit collaborators will allow us to scale thoughtfully, using existing infrastructure to extend services throughout Central Iowa and beyond. Our goal is to build a sustainable, adaptable system that can serve patients across the state, with potential for future statewide implementation through cross-system partnerships and referral integration.

Importantly, this expansion is not based on assumption—it is a direct response to community need. Over the years, we have received numerous heartfelt inquiries from individuals affected by non-breast cancers, expressing a desire for the same support services we currently provide. Their messages underscore the urgency and breadth of this demand. A selection of these anonymized inquiries is included in **Appendix A**, offering a firsthand look at the voices behind this pressing need.

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3. Formalizing Lasting and Broad Change in Cancer Control Through Policy and Systems Change

While this project does not include lobbying efforts, it is inherently structured to drive lasting systemic change within Iowa's cancer care landscape. Our expansion will:

- Strengthen referral pipelines between nonprofit services and oncology providers, making non-medical support a routine and expected part of the treatment plan;
- Formalize peer mentorship as a standard, scalable intervention that can be applied across cancer types;
- Create a replicable, data-informed model that can be adopted by healthcare systems, other nonprofit organizations, or community coalitions seeking to reduce treatment burden and improve patient outcomes;
- Elevate awareness around the essential role of non-medical support in improving adherence, morale, and survivorship – especially among underserved populations.

By embedding these supports more deeply within the cancer care ecosystem, we aim to normalize and institutionalize holistic care that considers the full spectrum of patient needs.

Conclusion

This project is about more than expanding a program – it is about redefining what comprehensive cancer care looks like for Iowans. By addressing disparities, scaling a proven local initiative, and building a framework for system-level change, Can Do Cancer is positioned to make a profound and lasting impact on how patients are supported through the cancer journey.

While our long-term vision is to serve patients statewide, this initial phase of expansion will focus on individuals receiving IV-infusion chemotherapy in Central Iowa – specifically those receiving treatment at cancer centers in Des Moines and Ames. These locations serve a broad regional footprint and align closely with the existing structure and capacity of our nonprofit. Central Iowa is where Can Do Cancer is headquartered and where the majority of our current supports—volunteers, board members, and Patient Partners—are based. Focusing on patients receiving treatment in Des Moines and Ames allows us to build on our established partnerships and infrastructure while piloting a scalable model for future statewide expansion.

Through this thoughtful and targeted approach, we will ensure that more individuals—regardless of diagnosis or income—can access the dignity, relief, and community they deserve, while laying the groundwork for broader statewide reach in the future.

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.)*
N/A

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

Our project supports the Iowa Cancer Plan (2023–2027) by addressing:

- **Health Equity**: Expanding services beyond breast cancer to include additional cancer diagnoses—identified in collaboration with healthcare partners—ensures more equitable access to non-medical support for a larger cohort of patients across Central Iowa.
- **Survivorship and End-of-Life Care**: Can Do Cancer provides peer-based support, meals on treatment days, and housecleaning services to enhance the quality of life for individuals undergoing active treatment and their families. Patients with metastatic disease are eligible

for multiple enrollments, as long as they are receiving IV-infusion chemotherapy, ensuring ongoing support through the continuum of care.

- **Diagnosis and Cancer-Directed Therapy**: Collaborating with oncology navigation partners to recruit survivor mentors reduces barriers to care and promotes evidence-based practices.

This expansion aims to reduce disparities and improve outcomes across the cancer continuum.

Project Objectives:

These objectives will serve as the grant deliverables for your project, if awarded. The Iowa Cancer Consortium Board of Directors may request to change, add, or remove objectives with your agreement prior to funding. Where applicable, please include baseline (current) data. Please add additional objectives, if desired.

Objectives should be SMARTIE goals: **Specific, **M**easurable, **A**ttainable, **R**elevant, **T**ime-Based, **I**nclusive, and **E**quitable. The CDC's National Breast and Cervical Cancer Early Detection Program put together a helpful resource for SMARTIE objectives. (This and additional resources can be accessed at https://canceriowa.org/grants/ifp)*

***Objective #1:** Conduct a comprehensive audit and update all program, outreach, and application materials to ensure inclusive, diagnosis-specific language and accessibility for patients beyond breast cancer.

- **Deadline *(funding period is July 1, 2025-May 31, 2026):*** October 31, 2025
- **Baseline data:** All current materials (website content, patient application forms, recruitment flyers, etc. are tailored exclusively to breast cancer patients.)
- **Target by deadline:** In collaboration with our partners at John Stoddard, Bliss Cancer Center, and Above + Beyond Cancer, we will complete an audit and adapt or create **at least 10 key materials** (including the website, print collateral, application forms, volunteer recruitment pieces, and intake scripts) to reflect the inclusion of additional cancer diagnoses to be identified in collaboration with partners. Incorporate patient and navigator feedback in the review process to ensure materials are clear, inclusive, and culturally responsive across patient demographics.

***Objective #2:** Recruit and train cancer survivor volunteers representing at least three additional diagnosis pathways to serve as Patient Partners.

- **Deadline (funding period is July 1, 2025–May 31, 2026):** December 31, 2025
- **Baseline data:** Can Do Cancer currently has nearly 70 active Patient Partners, all with lived experience navigating breast cancer. At this time, we have not formally identified Patient Partners for other cancer pathways, though several current volunteers may have experience with multiple cancer types and could support broader patient needs during the initial expansion.

- **Target by deadline:** In collaboration with clinical partners, identify three priority diagnosis pathways and recruit, onboard, and train at least **10 survivor volunteers per pathway** (minimum of 30 total) to ensure patients are matched with mentors who understand the specifics of their treatment experience.

***Objective #3:** Establish and formalize referral and collaboration processes with oncology navigation and medical teams at two or more Central Iowa cancer centers

- **Deadline *(funding period is July 1, 2025-May 31, 2026):*** December 31, 2025
- **Baseline data:** Breast cancer-specific collaboration exists with nurse navigators at John Stoddard Cancer Center (Des Moines), William R. Bliss Cancer Center (Ames), and other cancer centers in Central Iowa.
- **Target by deadline:** Formalize referral workflows and patient education processes regional cancer centers in Des Moines and Ames to ensure timely, equitable access to Can Do Cancer services for patients diagnosed with additional cancer types identified in collaboration with clinical partners. Update the intake application and verification process to support expanded eligibility.

***Objective #4:** Enroll and support cancer patients beyond breast cancer using expanded services while maintaining patient satisfaction and program integrity.

- Deadline *(funding period is July 1, 2025-May 31, 2026):* May 31, 2026
- Baseline data: 143 breast cancer patients served in 2024; 0 current non-breast cancer patients enrolled.
- Target by deadline: Enroll **at least 50 non-breast cancer patients** from Central Iowa and provide them with peer mentorship and/or non-medical support services (meals and/or housecleaning), while achieving **at least 90% satisfaction** in post-treatment surveys and maintaining demographic and geographic diversity in outreach.

***Objective #5:** Evaluate and adapt service delivery to meet the unique needs of new cancer pathways, ensuring high satisfaction, inclusivity, and meaningful engagement for both patients and Patient Partners.

- **Deadline (funding period: July 1, 2025–May 31, 2026):** May 31, 2026
- **Baseline data:** Existing survey and evaluation tools are tailored to breast cancer patients; no current feedback is collected from patients with other diagnoses or from Patient Partners (mentors).
- **Target by deadline:**
    - Develop and implement inclusive evaluation tools for patients from expanded diagnostic groups, with data disaggregated by cancer type and demographics to ensure equitable experience.
    - Achieve at least **90% of patients** reporting that services met their practical and emotional support needs.

- Introduce a companion evaluation for Patient Partners to assess perceived impact, including purpose, connection, and quality of life, with findings used to inform program improvements and retention strategies.

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: Alissa McKinney, Executive Director
Organization: Above + Beyond Cancer
Mailing Address: 1305 50th Street, West Des Moines, IA 50266
Phone: (515) 710-7794
Email: alissa@aboveandbeyondcancer.org
Please describe the collaborator's proposed responsibilities/role in the project. *(Suggested: 100 words or less)*

Can Do Cancer is actively collaborating with **Alissa McKinney** at **Above + Beyond Cancer** to strengthen the continuum of care for cancer patients across Central Iowa. As we expand our services beyond breast cancer, we are partnering with Alissa and her team to identify and recruit survivor volunteers—patient partners from a variety of cancer pathways—who can serve as peer mentors within our program.

This collaboration also enables a more seamless experience for patients navigating a complex and often overwhelming journey. For those receiving a new diagnosis, particularly from medical centers not closely affiliated with Above + Beyond Cancer, Can Do Cancer provides immediate non-medical support—such as meals, housecleaning, and emotional encouragement. Once stabilized, patients are introduced to the deeper, long-term wellness resources available through Above + Beyond Cancer. We think of it as a "warm handoff"—ensuring no patient falls through the cracks and every individual has access to both short-term and long-term survivorship support.

This partnership reflects our shared belief that we are stronger together, and that coordinated collaboration between organizations leads to better outcomes and more holistic care for Iowans facing cancer.

Collaborator #2 (optional)

Name: Mary Charlton, PhD – Professor, Department of Epidemiology | Director, Iowa Cancer Registry | President, Iowa Cancer Consortium
Organization: University of Iowa College of Public Health
Mailing Address: College of Public Health, Department of Epidemiology, University of Iowa, 145 N Riverside Drive, Iowa City, Iowa 52242-2007
Phone: (319) 384-1564
Email: mary-charlton@uiowa.edu

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

We are honored to collaborate with **Dr. Mary Charlton, Professor of Epidemiology at the University of Iowa, Director of the Iowa Cancer Registry, and President of the Iowa Cancer Consortium.** Dr. Charlton is providing strategic consultation to guide our expansion beyond breast cancer, including sharing statewide data on chemotherapy patients by cancer type and geography. Her insight helps ensure that our services reach the populations most in need. She will also promote Can Do Cancer through the Iowa Cancer Affiliate Network (I-CAN), helping us scale with purpose and equity. Her leadership strengthens our alignment with statewide survivorship priorities.

Collaborator #3 (optional)

Name: Michelle Reichert, MSN, RN, CNL, OCN – Nurse Navigator & Cancer Resource Center Coordinator
Organization: William R. Bliss Cancer Center
Mailing Address: Mary Greeley Medical Center – 1111 Duff Ave, Ames, IA 50010
Phone: (515) 956-6410
Email: reichertm@mgmc.com

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

We are proud to collaborate with **Michelle Reichert, MSN, RN, CNL, OCN**, Nurse Navigator and Cancer Resource Center Coordinator at the **William R. Bliss Cancer Center** in Ames. Michelle plays a pivotal role in helping us reach cancer patients at a critical moment in their journey. She shares our program information with newly diagnosed individuals, helping them understand the emotional and practical support we provide.

Michelle also serves as a vital bridge between the clinical and support services sides of cancer care. She offers ongoing guidance to our team regarding emerging treatments, side effect profiles, and common care trajectories for patients at Bliss Cancer Center. This collaboration ensures our services remain aligned with the real-time needs of patients and the realities of their treatment experiences. Her expertise helps us refine our approach as we expand our services beyond breast cancer to include additional cancer diagnoses identified in partnership with clinical collaborators.

Michelle's insight, advocacy, and commitment to whole-person care make her an invaluable partner in extending our mission to cancer patients across Central Iowa.

Collaborator #4 (optional)

Name: Jennifer Witt, Oncology Nurse Navigator
Organization: Unity Point Health, John Stoddard Cancer Center
Mailing Address: 1221 Pleasant Street, Des Moines, IA 50309
Phone: (515) 241-4141
Email: jennifer.witt@unitypoint.org

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

The Oncology Nurse Navigators are a key collaboration contact for our program. One of our most trusted points of contact is **Jen Witt, RN, MSN, OCN**, an oncology nurse navigator at **UnityPoint Health – John**

Stoddard Cancer Center in Des Moines. Jen and her team play a critical role in connecting newly diagnosed patients to Can Do Cancer's services. She shares our informational materials directly with patients and encourages them to apply at a time when they may be feeling overwhelmed or uncertain about what support is available outside of their medical care.

Beyond patient referrals, Jen serves as a trusted advisor to our team. She keeps us informed about new cancer treatments, medications, and potential side effects – especially as we expand to support individuals with a broader range of cancer diagnoses. Her insights help us tailor our services to align with each patient's treatment timeline and needs and ensure our peer mentors and service providers are equipped with the knowledge necessary to deliver timely, appropriate, and compassionate support.

Jen's partnership reflects the kind of clinical-nonprofit collaboration that strengthens outcomes across the cancer care continuum, and we are grateful for her ongoing involvement in helping us expand our reach and impact.

Evidence & Evaluation:

Resources for Evidence-Based Interventions and Evaluation: (This and additional resources can be accessed at https://canceriowa.org/grants/ifp)

- *The Iowa Cancer Consortium has put together a blog post, A Public Health Professionals Guide to Evidence-Based Cancer Control Interventions (EBIs), which contains state and national resources for public health professionals to visit when selecting interventions.*
- *CDC's Program Evaluation Framework guides public health professionals in conducting program evaluation. It is a practical, nonprescriptive tool, designed to summarize and organize essential elements of program evaluation.*

What scientific evidence is there that your project will be effective? (*Suggested: 500 words or less.)*
Our project is grounded in strong scientific evidence demonstrating the positive impact of peer-based, non-medical support for cancer patients—particularly those undergoing active treatment. Numerous studies support the effectiveness of peer support in improving emotional well-being, enhancing self-management, and increasing overall quality of life.

1. Psychological and Emotional Support:
Peer support transforms the cancer journey from an isolating experience into one of shared understanding and community. Research has shown that peer-led groups and one-on-one support reduce feelings of anxiety and emotional distress by offering encouragement and validation from others who have lived through similar challenges. According to a 2022 study published in *BMC Women's Health*, participants reported that peer support helped reduce isolation and fostered emotional connection, helping them reframe their experience in a more positive and empowered way (Lognos et al., 2022).

2. Empowerment and Self-Management:
Patients who engage in peer support report feeling more confident and in control of their care. Hearing directly from someone who has navigated treatment encourages patients to adopt effective coping strategies and advocate for their needs. As highlighted in research by Lognos et al., peer facilitators play a central role in empowering patients to take an active role in managing their health and understanding treatment decisions—both of which are linked to better outcomes.

3. Quality of Life Improvements:
The feasibility study by Walshe et al. (2020) in *BMC Palliative Care* found that individuals with advanced cancer who participated in structured peer support reported measurable improvements in emotional well-being and social connection—two critical components of quality of life. These benefits are particularly important during active treatment, when patients often face both physical and psychological hardships.
While much of the published research centers around breast cancer, the principles of peer support – shared lived experience, emotional validation, and practical guidance – are transferable across cancer types. As we expand our services to include individuals with additional cancer diagnoses, we are adapting our model based on both existing scientific literature and guidance from clinical partners. This ensures that the structure, training, and content of our peer-based program reflects the nuanced needs of diverse patient populations.

In addition, our non-medical support services – such as meals on treatment days and housecleaning – further ease the day-to-day burden of treatment. These wraparound supports align with a growing body of literature emphasizing the need for whole-person, quality-of-life-focused care during cancer treatment.

In summary, our project is firmly supported by evidence-based practices. Peer support is a validated, scalable intervention that contributes meaningfully to the cancer care continuum and Can Do Cancer is well-positioned to expand its impact across Central Iowa.

How will you evaluate your project? How will you know if you have been successful? (*Suggested: 250 words or less.)*
Can Do Cancer uses a structured evaluation process to track impact and guide strategic decisions. For every patient enrolled, we collect data on cancer diagnosis type, age, geographic location, and other key demographics. This will allow us to monitor reach and ensure equitable access across Central Iowa as we expand to serve patients beyond breast cancer.

Throughout the program, our Patient Partners—trained survivor mentors—log each interaction in our database, providing real-time insight into the frequency, depth, and quality of peer support. We also track enrollment numbers monthly and annually to assess demand, trends by cancer type, and regional growth.

At the conclusion of active treatment, all patients receive a comprehensive survey capturing both qualitative and quantitative feedback. This includes questions related to satisfaction, perceived impact, emotional well-being, and unmet needs. The data is reviewed by our board and used to inform service improvements, training updates, and outreach strategies.

We will consider the project successful if we:

- Achieve a measurable increase in the number and diversity of patients served;
- Maintain high patient satisfaction and mentor engagement;
- Demonstrate meaningful support across multiple cancer types;
- Use insights to continuously refine and scale services in response to patient and navigator feedback.
- This thoughtful, data-informed approach ensures that our expansion is both intentional and impactful.

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

As Can Do Cancer expands its scope beyond breast cancer to include individuals diagnosed with additional cancers, we recognize the importance of modifying our approach to meet the diverse needs of these patient populations. While the foundation of our support model remains unchanged – peer-based encouragement, meals on treatment days, and housecleaning – we understand that each cancer type presents different physical, emotional, and logistical challenges. To ensure relevance and effectiveness, we are taking a thoughtful, inclusive, and evidence-informed approach to this expansion.

Tailored Peer Support:

Central to our model is survivor-to-patient mentorship. To reflect the experiences of those we serve, we will recruit and train cancer survivors from across diagnosis categories to serve as peer mentors. These individuals will be matched with patients who share similar cancer journeys, allowing for more meaningful emotional connection, treatment-specific advice, and encouragement. Our training materials and mentorship guidelines will be updated to reflect differences in treatment timelines, symptom management, and psychosocial needs based on diagnosis.

Education and Clinical Collaboration:

We will continue working closely with oncology navigators – including partners at John Stoddard Cancer Center and William R. Bliss Cancer Center – to stay informed on treatment advances and side effect profiles for various cancer types. These clinical collaborators help us adjust the timing and scope of our support services to align with real patient experiences. For example, meal needs or side effect-related sensitivities may vary between breast and colorectal cancer patients, and we will adjust offerings accordingly.

Culturally and Demographically Responsive Outreach:

We are refining our outreach strategies to ensure they are inclusive and resonate with a broader demographic. This includes adapting marketing materials and messaging to reflect the diversity of

patients affected by various cancer diagnoses and removing gendered language or assumptions specific to breast cancer. We will actively seek feedback from survivors within these newly served populations to ensure our materials and services feel relevant, respectful, and empowering.

Flexible Service Delivery:

Our team is evaluating whether any adjustments are needed in how services are delivered – particularly related to the timing and type of support offered. We know that patients experience different levels of fatigue, dietary needs, or vulnerability depending on their treatment plan. We will remain flexible in service scheduling and vendor selection to best accommodate these varying needs.

This transition is not simply about expanding who we serve – it's about deepening our ability to serve well. By listening to patients, collaborating with care teams, and centering survivor voices, Can Do Cancer will meet the unique needs of a broader cancer community with the same compassion, efficiency, and impact that has defined our work for over a decade.

Budget:

Allowable budget categories have been identified below. If funding is requested within a specific category, a brief explanation or funding justification is required.

Staff Support

- Applicants may request funds for key personnel. Funds may not be requested to supplant existing job responsibilities.
- For any staff support requests through this grant mechanism, a copy of staff resume/CV, estimate of project hours, and list of staff project-related responsibilities must be included along with the budget request. Resumes should be included as an attachment.

Travel

- Travel essential to the proposed project may be funded under this proposal.
- Travel reimbursement is allowed at the following rates: $0.50/mile; in-state travel reimbursements follow Iowa Department of Administrative Services (DAS) guidelines, which is $37/day for meals ($27.75/day for first and last day of travel); out-of-state travel reimbursements follow Iowa DAS guidelines, which varies by destination. Maximum lodging reimbursement for in-state hotels is $80 plus taxes per night (see the Iowa DAS travel webpage for more information and resources).

Printing and Copying

- Estimate the total number of document pages that will be copied or printed. Use $0.06/page for calculating costs. Example: 500 pages X $.06/page =$30.00

Supplies

- Estimate the unit cost for each item to be purchased and the total number of items needed. Example: 200 brochures X $1.25/brochure = $250.00

Indirect/Administrative Costs

- Applicants for whom the Iowa Cancer Consortium is not serving as a fiscal agent may charge an indirect rate limited to 8% of the direct costs proposed in the budget.
- The total budget, including indirect or administrative costs, may not exceed the total requested funds (maximum of $25,000).

- Administrative costs are those incurred for common or joint objectives and cannot be identified readily and specifically with a sponsored program but are still necessary to the organization's operations.
- For example, the costs of operating and maintaining facilities, depreciation and administrative salaries are generally treated as indirect/administrative costs.
- If there is a need for indirect funding beyond 8% of direct program costs, requests should be written into the applicant's budget and justified heavily.
- The applicant shall maintain documentation to support the administrative cost allocation. The Consortium reserves the right to request the documentation at any time.

Other:

- Equipment
    - Describe equipment needed for project implementation.
    - Equipment costs must be justified, and an explanation provided for equipment use after the grant period ends.
    - Items that cost $5,000 or more are not routinely funded but will be considered on an individual basis.
- Incentives
    - Incentives are an allowable expense only if proven to be effective as part of an evidence-based intervention. The research or evidence case must be outlined.

- Clinical Care/Service Delivery
    - Clinical care, including the provision of medication, vaccinations and/or treatment, is not an allowable expense. Service delivery, including radon mitigation and cancer screening test purchases, will be reviewed individually.
    - Community organizations and collaborators are encouraged to provide financial support for service delivery components.

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

Funds will support the recruitment and onboarding of new Patient Partners representing additional cancer types, including training materials and welcome items. Budgeted expenses also include the redesign and production of updated digital and print collateral to reflect our expanded scope. A significant portion of the budget will support personnel time dedicated to program design, volunteer training, communications, and overall project management to ensure a high-quality, scalable rollout of services for non-breast cancer patients across Central Iowa.

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			
Molly Zaver – Founder & Board President		$23,571	$23,571
Deonne Winkel – Program Director & Secretary, 10 hours/week	$13,267	$15,304	$28,571
Leah Hill – Program Assistant, 10 hours/week	$8,845	$7,779	$16,624
Heather Brewer – Graphic Designer		$5,439	$5,439
Kari Gilbert – Treasurer		$4,868	$4,868
Patient Partner Support (Estimate - $29.96 per HR X ~25 HR per patient)		1,250 estimated volunteer hours for a minimum of 50 patients – Value $37,450	$37,450
Travel			
Printing			
Marketing Materials & Patient Partner Cards	$784		$784
Marketing Materials for Clinic Distribution	$608		$608
Marketing – QR Code Signs, Patient Enrollment Stickers	$177		$177
Marketing: Printing for Clinic Mailing	$127		$127
Supplies			
Shipping			
Flat Rate Box Shipping - ~50 Welcome Packages	$958		$958
First Class Postage – Patient Mailings	$234		$234
Other			
Spanish Translation of Docs & Application		$1,250	$1,250
Patient Meals		$35,000	$35,000
Patient Housecleaning		$20,000	$20,000
Patient Transportation		$7,500	$7,500
Totals:	$25,000	$158,161	$183,161

Submit your completed application, along with letters of support from all collaborators and resumes/CVs for anyone whose salary will be supported by requested funds, to orton@canceriowa.org by 11:59pm (CDT) on May 14, 2025.

ABOVE+BEYOND
CANCER

May 9, 2025

Iowa Cancer Consortium
PO Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

I am writing on behalf of Can Do Cancer in support of a pilot program to explore ways to expand services to all cancer diagnoses proposed to the Iowa Cancer Consortium as part of the FY26 Iowa Cancer Plan Implementation Grant, Invitation for Proposals.

Above + Beyond Cancer will fulfill the following roles in this partnership:

- Connect our Above + Beyond Cancer participants with Can Do Cancer resources
- Create more synergy between cancer non-profits
- Help Can Do Cancer expand to serve individuals with all cancer diagnosis.

Can Do Cancer and Above + Beyond Cancer has had a long-time partnership. Molly Zaver, President, has participated in two Transformational Journeys including our most recent journey to Patagonia in April.

It is important to Above + Beyond Cancer and Dr. Richard Deming to connect individuals with the resources available in the community. Many of our breast cancer patients and survivors utilize the services of Can Do Cancer, including meals that are provided on chemotherapy days, house cleaning and connecting them with a supportive patient partner.

We are excited to support this effort by Can Do Cancer to grow so we can continue to support more patients, survivors and those living with cancer.

Sincerely,

Alissa McKinney
Executive Director
Above + Beyond Cancer

College of Public Health
Department of Epidemiology
University of Iowa
145 N. Riverside Dr.
Iowa City, Iowa 52242-2007
319-384-1564

May 10, 2025

Dear Colleagues at the Iowa Cancer Consortium,

I am writing to express my enthusiastic support for **Can Do Cancer's** proposal to expand its peer-based and non-medical support services to individuals facing cancer diagnoses beyond breast cancer. As you all know, the Iowa Cancer Registry featured Survivorship in the 2025 Cancer in Iowa report and highlighted the need for more comprehensive survivorship resources for cancer survivors from the time of their diagnosis through the balance of their lives. For over a decade, Can Do Cancer has provided compassionate, practical support—including meals, housecleaning, and one-on-one peer mentorship—to breast cancer patients in Central Iowa. Their work fills a critical gap in cancer care by addressing non-medical and emotional challenges, and their expansion into other types of cancer is a natural and much-needed next step. Can Do Cancer's thoughtful, patient-centered model is both scalable and responsive to the evolving needs of our community.

I am committed to providing consultation to the Cancer Do Cancer team, as well as data on the historical numbers of cancer patients in Iowa receiving chemotherapy by county and cancer site to help guide their implementation strategies. I am also willing to promote the Can Do Cancer resources among our Iowa Cancer Affiliate Network (I-CAN) sites across Iowa.

I very much appreciate your strong consideration of this application that is very responsive to the survivorship needs of Iowans with cancer, as well as to the priority areas of the ICC Implementation Grants.

Sincerely,

Mary Charlton, PhD
Professor, Department of Epidemiology
University of Iowa College of Public Health
Director, Iowa Cancer Registry
President, Iowa Cancer Consortium
mary-charlton@uiowa.edu

William R. Bliss
CANCER CENTER

A SERVICE OF McFARLAND CLINIC &
MARY GREELEY MEDICAL CENTER

McFARLAND CLINIC PC
1215 DUFF AVE., AMES, IA 50010 | 515-239-4401
MARY GREELEY MEDICAL CENTER
1111 DUFF AVE., AMES, IA 50010 | 515-239-2411

WWW.BLISSCANCERCENTER.ORG

5/12/2025

Iowa Cancer Consortium
PO Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

On behalf of the William R. Bliss Cancer Center, I would like to voice sincere support and promotion of Can Do Cancer's proposal to the Iowa Cancer Consortium. Please consider them a desirable candidate for the *FY26 Iowa Cancer Plan Implementation Grant*.

In our partnership with Can Do Cancer, we have been fortunate to enroll over 130 women with breast cancer since 2019. These patients have greatly benefited from meals, housekeeping, and motivational support throughout their chemotherapy treatments. In addition, each participant has received a care package that has included a variety of self-care and comfort items. Patients often comment on the overwhelming appreciation they have for the thoughtfulness and compassion shown by Can Do Cancer in both their interactions with staff and through the care packages they receive. The meal and housekeeping support provide respite from daily chores that patients and their families may not have the time or energy to complete, and it is provided to them at no cost.

William R. Bliss Cancer Center will continue to support and recommend Can Do Cancer to all patients receiving chemotherapy for breast cancer. In addition, we would love to be able to offer this assistance to all our patients receiving chemotherapy. We have consistently received inquiries from patients with other cancer types expressing interest in these same services, including Can Do Cancer specifically, after hearing the strong endorsements from our breast cancer patients. We have enjoyed our interactions with Can Do Cancer, as they are always considerate and pleasant to partner with. Numerous patients have voiced gratitude, stating Can Do Cancer's support has been very meaningful.

I am confident that Can Do Cancer would serve as responsible stewards of this grant, using the funds effectively to expand their reach to even more patients in need. Their daily impact on the lives of individuals facing cancer is both meaningful and measurable. This grant would

empower them to broaden their services beyond breast cancer patients, extending their support to a wider community. Thank you for your thoughtful consideration.

Sincerely,

Michelle Reichert, MSN, RN, CNL, OCN
Nurse Navigator
Cancer Resource Center Coordinator
William R Bliss Cancer Center
515-956-6410
reichertm@mgmc.com

UnityPoint Health
John Stoddard Cancer Center

1221 Pleasant Street
Des Moines, IA 50309-1424
(515) 241-4141

A service of Iowa Methodist Medical Center

May 12, 2025,

Dear Iowa Cancer Consortium,

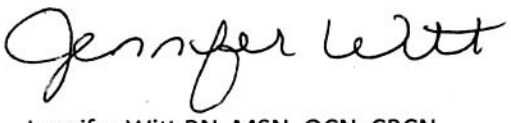
It is truly an honor to collaborate with Can Do Cancer. As an Oncology Nurse Navigator at John Stoddard Cancer Center, I have the privilege of working with patients with breast cancer and helping them through providing education, connecting with supportive resources and finding meaning as they navigate their way forward from diagnosis into survivorship. One of the truly great joys I have is sharing with them about the generous support that your team provides. The legacy of love in action that they shine on our community, truly paying it forward and helping to make their experience easier and more positive is unmatched. I have seen firsthand how having a peer-mentor helps to raise spirits, find hope and help women feel seen, heard and much less alone. Being blessed by the gift cards and offer of house cleaning is often a gift and luxury many have never even considered or felt worthy of. Can Do Cancer gives them permission to accept help and simultaneously feel empowered and lifted up by other women.

I wish all patients and their families facing a diagnosis of cancer could be touched by their services and yet, understand how limited resources can be. I know this organization would be good stewards of additional funding to help them to further their mission and be able to expand their programming to include more patients and further help those in surrounding rural counties who typically have less available support within their centers. Rural satellite cancer clinics bring high level cancer care that allows patients to remain close to their support networks and community. Unfortunately, though, they may be limited in having dedicated oncology support teams in place that can further help them to navigate many of the other areas that impact their social, emotional, and physical dimensions of their

life. Providing a dedicated resource such as Can Do Cancer will help these women with psychosocial and emotional wellbeing, as well as the financial distress they can endure due to loss of employment or reduced ability to work and how that further impacts childcare and ability to care for their families.

Thank you for your consideration of this Pilot Program and expansion of services to patients with all types of cancer diagnoses. It is truly sacred work being done by a team who has persevered themselves, and who are then in turn able to shine that hope and belief that better is possible.

Sincerely,



Jennifer Witt RN, MSN, OCN, CBCN
Oncology Nurse Navigator, John Stoddard Cancer Center
1221 Pleasant Street, Ste. 450
Des Moines, IA 50309
Jennifer.witt@unitypoint.org
515-241-3399

May 9, 2025

Dear Iowa Cancer Consortium Board of Directors,

I am honored to write this letter of support for Can Do Cancer's grant request to expand services in a pilot program to serve patients with cancers beyond breast cancer. I have been served by Can Do Cancer twice as a patient, and I also serve as a Patient Partner for the Organization.

I was first diagnosed with breast cancer in August 2013. My kids were 9, 11, and 13 at the time. I had a bilateral mastectomy, and just prior to beginning chemotherapy, a friend suggested I enroll in Can Do Cancer. The help was so critical to me as a busy working mom who was suddenly exhausted from chemotherapy. Many friends cooked meals, but being able to use the meal gift cards on days of my choosing gave enabled me to time them with the days I felt the worst. Trying to juggle life as a wife and mom with work is hard without chemo, but with the added challenge of treatments, keeping the house clean was extra difficult. I was so grateful to have cleaning assistance during treatment, and it allowed me to devote what little energy I had to my family, work, and getting through treatments. Less than 2 years after my initial diagnosis, I was diagnosed again with breast cancer in February 2015. I went through more surgeries, 16 more rounds of chemotherapy, and over 30 rounds of radiation. Can Do Cancer was again there to provide meal support, house cleanings, and moral support, which were all so critical for me. I strongly believe that the support of Can Do Cancer was critical in how well I was able to cope with treatments and still function as a working mom.

Can Do Cancer made such a difference during my treatments, that I volunteered to serve as a Patient Partner as soon as I finished treatment in 2013. I still serve in this role and have mentored over 30 women through their breast cancer journeys. This has allowed me to share advice and details I learned from my experience. Doctors give medical advice, but practical day to day advice to surviving chemo and balancing treatments with family life can only come from those who have "been there".

Cancer is very common in Iowa, and increasingly common among young adults with families, facing a situation similar to mine. I have been approached by many people over the years inquiring about assistance from Can Do Cancer for individuals facing a variety of cancers. Expanding this important assistance to individuals with cancers other than breast cancer will be enable more people to receive this needed assistance during what's likely the most stressful time in their lives.

Thank you for your consideration.

Sincerely,

Karen Peters

May 12, 2025

Iowa Cancer Consortium
P.O. Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

I am writing on behalf of Can Do Cancer In support of the FY26 Iowa Cancer Plan Implementation Grant.

Can Do Cancer holds a very special place with our family and our 5+ years' of living with cancer.

In 2014, my 42-year-old husband, Dr. Matt McCullough was diagnosed with sarcoma. He passed away in 2019, one month after his 48th birthday. During that time, we had three young children from pre-school to middle school age. Because sarcoma is so rare, from the beginning of the diagnosis, all treatment over the five years was provided out of state at The Mayo Clinic in Rochester, Minnesota.

Can Do Cancer who primarily focuses on supporting those with breast cancer was able to provide support to our family because of a similar grant. This support included house cleanings by a cleaner of our choice, gift cards that we kept in our kitchen drawer for our children and caregivers to use for groceries, gas, and quick meals from local retailers. Because we were in the busiest phase of life, it took a village to transport our three children to activities and to provide meals while we were out of state for treatment.

I have referred multiple friends with cancer diagnosis's to Can Do Cancer for support and they have all received the same unwavering and consistent support throughout their treatment.

Please consider Can Do Cancer as a recipient of the FY26 Iowa Cancer Plan Implementation Grant as they have consistently demonstrated they are a good steward of such funds.

Sincerely,

Brea McCullough
Ankeny, Iowa

Letter of Support

FY26 Iowa Cancer Plan Implementation Grant Cycle

May 12, 2025

Iowa Cancer Consortium
PO Box 859
North Liberty, Iowa 52317

Dear Iowa Cancer Consortium Board of Directors,

I am writing this letter to express my support for Can Do Cancer and their request for funding from the Iowa Cancer Consortium as part of the FY26 Iowa Cancer Plan Implementation Grant.

As a lifelong friend of Can Do Cancer's Founder, Molly Zaver, past Can Do Cancer Board Member, and father to a cancer survivor, I cannot adequately express the level of respect I have for this organization and its mission. Can Do Cancer has proven, over the course of many years, their ability to adequately serve members of our community receiving breast cancer treatment by providing life-changing non-medical support. I have personally witnessed the impact Can Do Cancer has had upon the patient population they are blessed to work with, the dedication of Can Do Cancer volunteers, and the professionalism with which the organization is operated.

It is my understanding that Can Do Cancer is now seeking additional support so as to provide their services to individuals undergoing treatment for a variety of cancer diagnoses. I strongly recommend this organization and thank you for your consideration.

Sincerely,

John Kruzich, MS, OTR/L
Workers Compensation Program Manager
Athletico Physical Therapy
515-943-2874

Appendix A: Community Inquiries Reflecting Demand for Non-Breast Cancer Support Services

The following are excerpts from individuals who have reached out to Can Do Cancer in recent years. These messages, presented with identifying details removed, illustrate the real, diverse, and growing need for supportive services among patients with cancer types beyond breast cancer—including colon, uterine, lung, throat, bone, rectal, and blood cancers. Each entry reflects a sincere call for help that Can Do Cancer was unable to fulfill under its current breast-cancer-specific model.

All identifying details (names, emails, phone numbers) have been removed to protect privacy.

- June 2018

“My mom was diagnosed with colon cancer several weeks ago and is undergoing chemotherapy and radiation in Des Moines. Is she able to sign up for your services and programs, or are they exclusive to breast cancer patients? Unfortunately, there isn't a support group similar to Can Do Cancer for colon cancer patients. I know it would be very beneficial to her and lift her spirits if she could enroll.”

- January 2018

“My 10-year-old daughter [has been] suffering from bone cancer... lot of pain, lot of tears blowing both of our eyes.” Treatment is in process, she had taken 6 chemotherapy [treatments]... Still we have some hope to survive.

- April 2019

“She could really use some help with her home and yard.” A friend advocated for a woman living with Stage 4 lung cancer: My friend... is continuing to fight for life and to work... as long as possible. I told her about your organization and she would be grateful for any assistance you could offer.

- December 2019

“She has 2 boys, age 2 and 4... We were just wondering.” An office colleague inquired about services for a woman diagnosed with stage 3 intestinal cancer, concerned for her family.

- June 2018

“He urgently needs to get an operation... we don’t have the money to pay.” A caregiver seeking help for a parent with throat cancer wrote: He is in a lot of pain. It is difficult for him to eat and to swallow. He is getting sicker every day. Please help us to get him better.

- January 2021

“Do you help people with rent or utilities?” A woman shared her experience following a cervical and uterine cancer diagnosis: Treatments made me sick so I ended up losing my job... I live in Kansas... Please let me know. I could use the help.

- August 2022

“I don’t know if you help women with husbands that have cancer.” A woman caring for her husband with blood cancer (Amyloidosis) wrote: One of the 3 drugs they are giving him makes him pass out... I find myself over my head with care for him. Laundry, meals and of course cleaning... I would appreciate your consideration.

- April 2018

“My mom has uterine cancer and will be doing chemo and radiation.” Is this service only for breast cancer patients? We’re just beginning our search for resources.

- January 2021

“My husband and I both work full-time… I am in need of assistance.” A caregiver balancing a household and support for her mother with Stage 4 lobular carcinoma wrote: Our oldest [child] has severe depression and is on suicide watch… My mom was diagnosed last week… Can you tell me what you need from us, what services are available and how we sign up?

- August 2020

“While she has been undergoing treatment for breast cancer, I actually have Non-Hodgkin Lymphoma.” Do you assist patients with other types of cancer? If not, are you aware of any other organizations similar to yours?

- March 2021

“My daughter-in-law was diagnosed with rectal cancer… if she can receive your services please let me know.”

- July 2019

“My friend undergoing chemotherapy for colon cancer… Do you know a similar service in the area?”

- September 2019

“My mom just finished her cancer treatment… Karen mentioned you have a good support group.” A new mother, recently relocated, was seeking emotional support for her parent: She had a different type of cancer (anal), but it didn’t sound like that would prevent your group from helping.

Deonne Winkel

Program Director

Deonne Winkel
530 NE 44th Court
Ankeny, IA 50021

515-745-1706
deonne@candocancer.org

Skills

Highly motivated, self starter with great communication skills. Attention to detail and ability to successfully multitask. Encouraging leader who works well with all types of people, and has a passion for helping others.

Experience

Independent Contractor for Can Do Cancer /

Program Director & Board Secretary
April 2015- PRESENT, Ankeny, IA

Founding board member who assists with various needs of the Board of Directors. Oversees program operations and coordinates all aspects of patient services. Assists with fundraising, donor relations and event planning. Implements volunteer training and coordinates mentor appreciation and other special events. Creates social media copy and designs program surveys.

Ankeny Community Schools / Long Term Substitute Teacher
September 2006- 2017 , Ankeny, IA

Created lessons in various subject areas for students in Kindergarten through 5th Grade. Taught both small and whole class lessons. Collaborated with grade level teams, organized and set up classrooms at the beginning of the school years. Communicated with parents regularly to provide progress updates, identifying areas of improvement and accomplishments. Conducted parent teacher conferences and participated in faculty meetings.

Butterfield- Odin Community Schools /4th Grade Classroom Teacher
July 2001 - July 2006 , Butterfield, MN

Set up the classroom at beginning of each school year. Taught all subject areas of the 4th Grade curriculum. Participated in staff meetings and served on various committees within the school. Planned field trips and class parties. Designed newsletters. Communicated with parents on a regular basis about student goals and achievements. Collaborated with the special education team to help all learners reach their potential.

Education

Walden University / Master of Science Education
December 2004, Minneapolis, Minnesota

Iowa State University / Bachelor of Science Elementary Education
August 1993 - December 1997, Ames, IA

Leah Hill

Program Coordinator

Leah Hill
3602 SW Edgewood Ln.
Ankeny, IA 50023

515-975-3465
Leah@candocancer.org

Skills

Excellent oral and written communication skills. Persistent in finding answers to questions and solutions to difficult problems. Skilled at multitasking and completing projects independently. Strong attention to detail. Outgoing, friendly personality with compassion for and interest in helping others. Flexible, dependable.

Experience

Can Do Cancer / Program Coordinator

January 2021 - Present

Manage new patient enrollment and services, create and utilize spreadsheets to track data, monitor and manage inventory, work closely with volunteers for mentoring and outreach opportunities, compose and edit communications, assist with event planning and fundraising, consult and provide feedback on program services and direction.

Farrell's Xtreme Bodyshaping / Fitness Instructor

July 2007 - Present

Plan and lead workouts for members of different ages and abilities. Communicate instructions clearly to enable new members to learn quickly and safely. Create a welcoming atmosphere. Focus on helping others achieve their fitness goals.

Lutheran Church of Hope - Ankeny / Food Pantry Volunteer

2012-2022

Engage with clients of varying ages and backgrounds to make them feel welcome and comfortable. Explain available services and handle questions and concerns.

Education

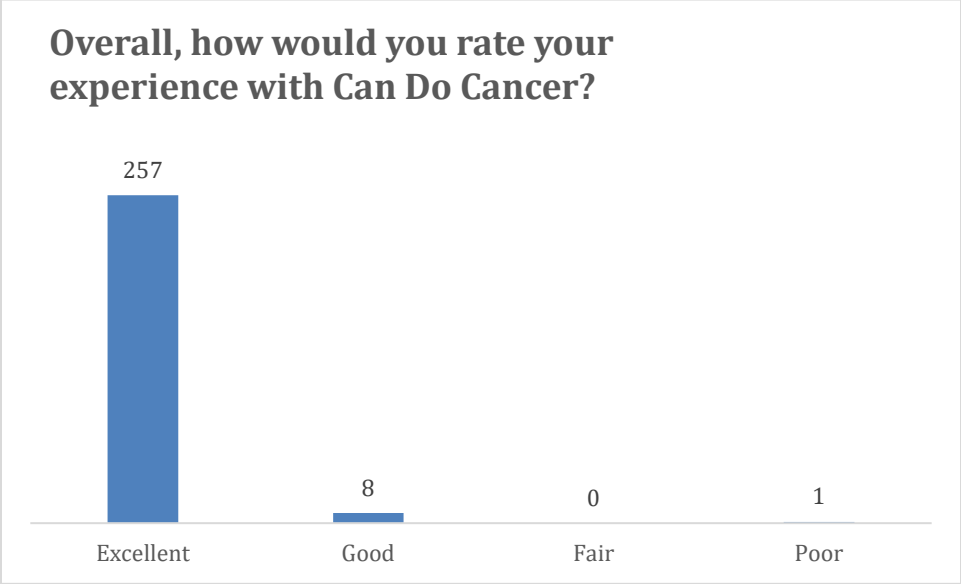
Drake University School of Law / Juris Doctor
May 1997

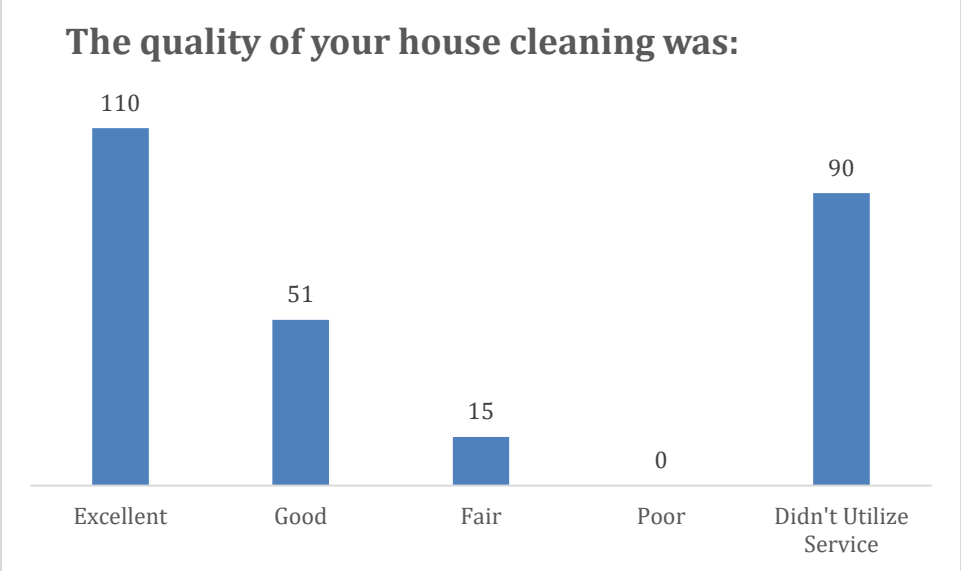
Wartburg College / Bachelor of Arts, Marketing and Communications
May 1992

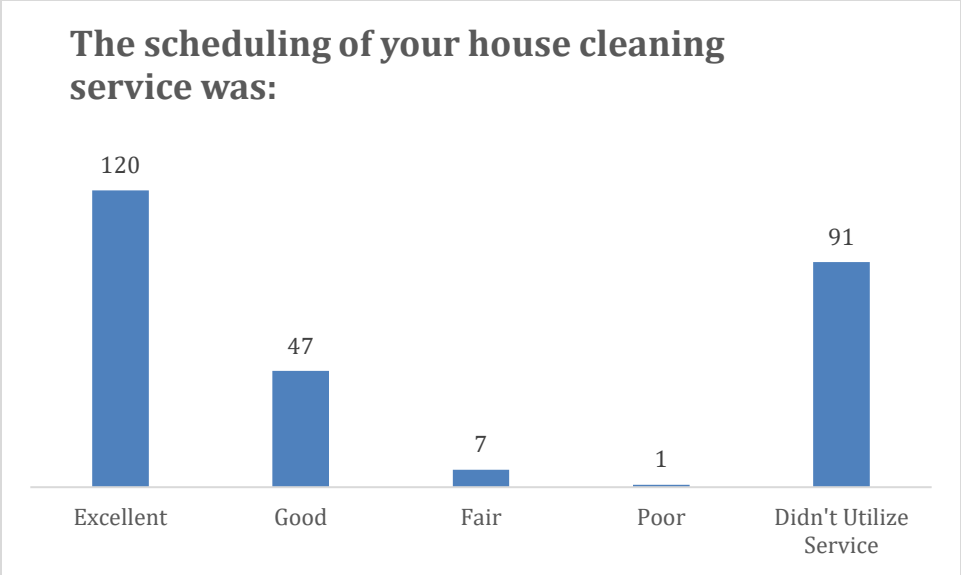
Appendix B: Summary of Patient Feedback – Can Do Cancer

This appendix provides a summary of patient feedback gathered through surveys of individuals who received services from Can Do Cancer from approximately 2017 through year-to-date 2025.

The comments below reflect the voices of patients who have experienced the program firsthand, offering insight into the emotional and practical impact of services such as meal support, housecleaning, peer mentorship, and website resources. The feedback is organized by topic area and has been anonymized to protect participant privacy.





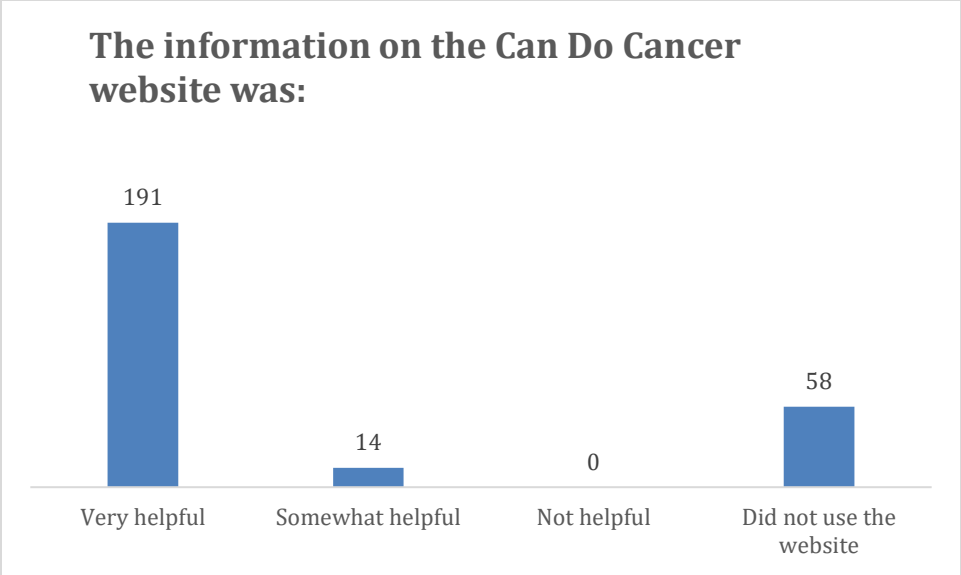


Suggestions for Improving Meal and Housecleaning Services

- "House cleaning it would be beneficial if I needed to skip a month due to being down and out, if we could continue it the next month. Just a suggestion but I understand that this could be a paperwork nightmare."
- "I was overwhelmed by the generosity and the choices picked for my family were perfect for us."
- "The services you provide are great and so much appreciated."
- "I don't have any at this time."
- "None - you do amazing things!"
- "I really liked Deb, but she is unable to do the work due to an injury. I didn't like that it was different people each time, didn't know the background of some. The meal cards were so helpful. I was able to take my driver out to lunch or send my husband and boys out to eat if I really wasn't feeling like cooking or didn't want to be around food."
- "Knowing the time of cleaning."
- "The cleaning and meals were a wonderful boost for me."
- "Nothing. It was all fantastic!"
- "None appreciated everything."
- "The staff was awesome in meeting my needs."
- "Had I thought about how I was going to feel I may have selected a couple different options. Honestly there is nothing I can truly say that would or could improve your services. It was so incredible to have such amazing support from the organization."
- "The cleaning company didn't do a consistently good job. One week they didn't do my kitchen floor at all. I also noticed that they only dusted around stuff; never moved anything. I am very thankful that I didn't have to do it myself, but if I was paying for it I would've made sure they moved things to dust. I just don't want you guys to pay for mediocre services."

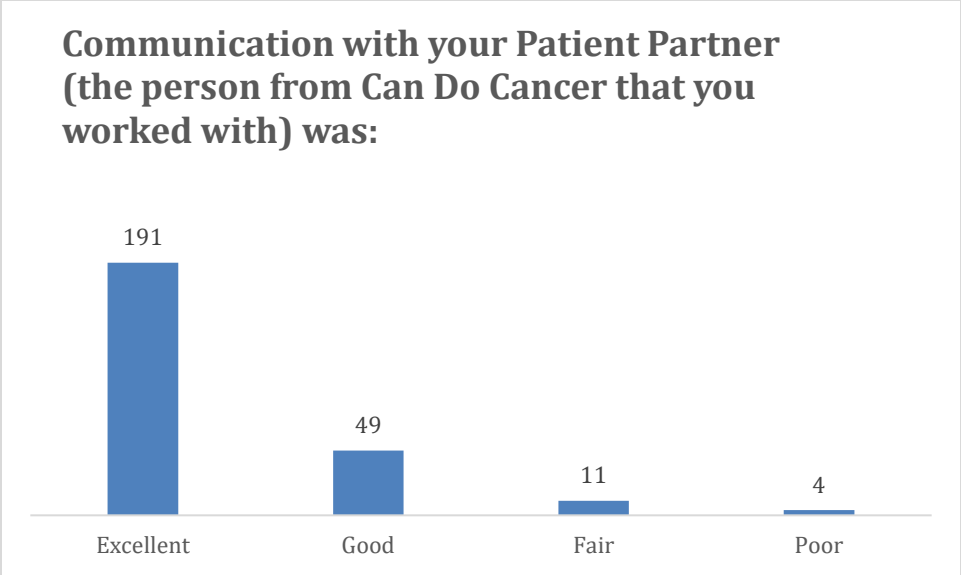
- “Everything has been great. My husband [sic] and I appreciate it very much. Thank you, Can Do Cancer.”
- “None at this time. This is all such a blessing to me and my family.”
- “It's great!”
- “Can't think of anything. Thank-you for everything!!!”
- “None, I think your program is amazing and I very much appreciate everything you have done for me and my family through the process.”
- “The meal coupons were a godsend!”
- “They already do a great job at providing services.”
- “Can't improve perfection. :)”
- “It would be nice if house cleaning continued for the month of surgery.”
- “I was so grateful for funds to hire a house cleaner. It was a HUGE help to me. I was most grateful for this! Thank you!”
- “The gift cards were very helpful. Did not use her me meals.”
- “Have set standards of what is required and the amount of time spent.”
- “They were very helpful and it was a great thing to provide cleaning.”
- “I don’t want to be negative on a free service, however, I was not real happy with my cleaning service. I actually told her not to come the last time.”
- “My house cleaner was a smoker. Took several smoking breaks on my property and smelled of smoke.”
- “They provided us with a lot of options which was helpful!”
- “You are doing a great job, the gift cards were so helpful!!”
- “We are very grateful for the restaurant gift certificates. We picked up meals after my chemo treatments.”
- “Na- keep up the great work”
- “Everything was great! Thank you so much!”
- “Other than Molly Maids sending a reminder with the time attached, nothing!”
- “I'm overwhelmed at your generosity! Thank you!!”
- “Nothing - it was very easy to enroll, and the meals provided have been so, so very helpful!”
- “The restaurant gift cards were well beyond what I would have ever imagined. They were very helpful. The two cleanings helped keep things in order and allowed me to maintain better while recovering from chemo.”
- “I appreciated the help on both!”
- “It was all so Wonderful!!!”
- “Perfect.”
- “Can Do Cancer has been extremely helpful and diligent in helping me and my family during a very difficult time.”
- “My house is already really clean. It would have been nice if they could have done other cleaning things for me. Such as, ceiling fans, baseboards and so on. I know that stuff is not fun but the house was already always clean.”

- “Tell patients specifics of exactly what the cleaning people do. I was pleasantly surprised when they brushed the ceiling for spider webs. I don’t know exactly what they do on hard surface floors (broom, Swiffer, wet mop?) or is that thechoice of the home owner? I LOVE the housecleaning service!!!!!”
- “The gift cards were amazing I don’t think it could have been any better”
- “None. Very efficient”
- “There is nothing additional. I can’t express my gratitude for the many times Can Do Cancer supported me and my family.”
- “This team has the best people, who come in and immediately start to make your home clean. More so than anything I've ever seen. The best.”
- “Excellent meal services. I dont suggest using Clean Queen, could get better service for the money elsewhere. They didnt stay the 2 hours each time, they asked for list and I would write what I wanted done and if time allowed what else they could do, and didnt even though they had time and were paid for 2 hours of service each time. The scheduling was easy. I liked that they used clean ingredient products.”
- “I don't think anything”
- “Nothing it was so helpful!”
- “Nothing. Everything was wonderful! There was one local restaurant that would not take a Visa Card, but just decided to use it at another one.)”
- “I'm not sure I could recommend you use MaidPro. The first young girl who was sent to clean did a poor job (not because she wasn't doing her best, i'm just assuming really inexperienced or not trained). I did request, although I hated to say something, a different person the next time and two girls were sent who did an amazing job. by the third cleaning, the first girl (who I had requested not clean my house) was sent with a mask on as she had just had COVID and I felt bad, but I had to request to not have her clean for two reasons (recently having COVID and she did a poor job the first time).”
- “Nothing, I was happy with the cleaning money and the gift cards provided.”
- “I enjoyed the gift cards for meals. During treatment. Didn't use the house cleaning”
- “Everything was great and I was so thankful for it.”
- “None, it's great the way it is”
- “I think the meal services were wonderful, much more than I expected! I have no suggestions for improvement!”
- “I have been very pleased and grateful. I think it is such a wonderful service to provide for women during their treatments.”



Suggestions for the Can Do Cancer Website

- "N/A at this time"
- "Maybe information of other agencies that provide help to cancer patients after chemo day for meals"
- "I will look at this website."
- "N/A"
- "On the website, we could add helpful hints and make suggestions in a checklist of sorts for chemo days / mastectomy. Organize the helpful hints on a symptom base . . . Products page woud be helpful. I ordered "Pink Pockets" for the drains - they are awesome. We ordered cookbooks to assist in cooking for side effects - nausea, metal taste, constipation, etc. Gather menus from members. Resources and or information for partners/caretakers. Tim was left not knowing what to do, how he could help and what I was really going through. Support for those supporting us would be so helpful - gives them direction and purpose."
- "Perhaps other sources which may be available for cancer patients who do not qualify for Can DO Cancer services."
- "I didn't look at it very long."
- "Can't think of anything."
- "None"
- "Nothing great website"
- "Easy, healthy recipies [sic] or nutrition suggestions."
- "I haven't visited it recently, but it seemed very straight-forward and easy to understand when I've used it."
- "Idk"
- "Just more advertising. This organization has saved me with finances and still being able to justify going for a nice dinner. Gas and groceries helped immensely."
- "It was perfect"



Feedback on Patient Partner Communication

- "Karen is so helpful and caring. She keeps in contact and I'm always gald [sic] to hear from her."
- "Lauri is a great partner and I think of her as a friend."
- "She was fantastic. I liked the notes she sent and that she'd text me to check in. She was also very kind in answering questions I had that I wouldn't want to ask just anyone."
- "Always appreciated the calls. May have been helpful if she would have reached out a couple of more times. When we did connect it was good!"
- "Elaine has been checking in with me after each chemo treatment and other times. She has been very caring and thoughtful in her messages."
- "Very helpful & understanding."
- "I liked how my partner had the same diagnosis as me so it was easier to discuss our situation."
- "Joyce is amazing! She encouraged me and offered phenomenal support"
- "Mary was incredible from the very beginning. She came to meet me at my first appointment. She seemed to just know when I needed an extra hug, a extra smile, or just needed to talk. Mary has an incredible spirit and I am better for having her in my life. She would laugh and share stories with me. Brought me an amazing plant/orchid when I needed to celebrate. She is so relatable and I needed that."
- "I only received 1 Can Do Cancer card from my partner and it was 10 days after finishing chemo. She didn't even give me the poster things to signal I finished chemo, nor came to any of my chemo treatments. My only contact with her was 1-2 texts and a few notes on my FB page. I think she did a very poor job of connecting with me during the 20 weeks of chemo. Thank God for caring church friends and community friends that connected with me during that time, but it would have been nice to have heard from a breast cancer survivor during that time."
- "Heather always contacts me, is positive [sic], encouraging, friendly, yet professional."

- “Karen is very knowledgeable and helpful. She too is a blessing to me.”
- “Kristin is amazing! I hope she is able to continue as a patient partner.”
- “She is caring and knowledgeable. A great advocate for breast cancer.”
- “Helpful and fun person.”
- “She was very helpful & kind. They go above and beyond for you.”
- “She's an absolute angel!”
- “Bonnie did an excellent job of reaching out to me and asking how things were going. She went out of her way to meet with me and answered any questions I had as well as sharing her experiences with me.”
- “Bonnie was just perfect! She was so supportive, but not pushy! Excellent support!”
- “Bonnie was delightful! We had some very nice visits. Was also good to have her email during communication.”

Additional Comments on Can Do Cancer Experience

- “Can do Cancer is a greasy [sic] organization that had blessed me and my family time and time again. Especially when friends and family members have pulled back with help and concern. I've been fighting this so long and I think they just get busy with their lives and forget. Can Do Cancer never forgets. Thank you for that and your help and support”
- “Thank you. It was huge to have someone to talk to when I was first diagnosed. I was very grateful for the texts and notes as well. The gift cards were amazing. I'm a stubborn person and thought I could do it myself, but I couldn't. I was very grateful for the help in such a positive, encouraging way.”
- “This group does so much to help at such a difficult time. They are angels and I cannot say enough good about how grateful I am that they have taken on this mission. I am forever grateful. I don’t know how my husband who also has cancer and I would get through the times I do chemo”
- “Can Do Cancer has helped me and my family immensely. I can't thank you enough for the support. It takes things off of me and allows me to concentrate on me. Thank you”
- “It was such an encouragement to receive the meal and cleaning help, and to know that people who don't even know me care enough to make that happen.”
- “It was a very generous program that I didn't know existed! I appreciate the monetary and emotional support it gave. It was nice to get mail that wasn't a bill! Thank you for everything.”
- “Can do cancer blessed me so much and I’m overwhelmed with the generosity! I’m looking to helping in the future”
- “This is an awesome program! I appreciated it so so much!”
- “The Can Do Cancer program is helping me each day. The chemo is a day by day project. Thank you to all of the helpers of Can Do Cancer.”
- “Excellent job!!!! 😃”
- “Thank you for your service.”
- “Jodi (Mentor) was great to talk to and gave me several ideas on how to handle the new journey. The cleaning companies done a great job, with that being said of course no one

can clean your house the way you want it cleaned, so I was grateful to have it cleanded [sic] at least."

- "Outstanding service and support! I'm so happy to have had this help while battling!"
- "Cancer is hard, it is raw, and it affects one's whole life and family. Your organization is amazing. You are all wonderful. Thank you so very much for making this journey easier."
- "Great program"
- "It was an inspiring experience making me feel so loved and supported! The meal gift cards were especially helpful!"
- "This was amazing! the care packages and mentor support were very helpful, and i think ALL types of cancer should be supported."
- "You gave me hope from early on. It was nice to communicate with others going through cancer especially with my patient partner"
- "Thank you all so much!!!"
- "Your organization is a total blessing. We appreciated everything that you've done for us!"
- "Thank you for all you do! It is very much appreciated."
- "I am very thankful for my patient partner. It was a little challenging for me to connect due to her being long distances. I like to connect one on one, but I know everyone is different."
- "They helped me a lot, unfortunately it was for a short time. I wish there were more organizations like this to support cancer patients since the treatments are long, lasting a year or more. Thank you for everything."
- "I am humbled by the generosity, thoughtfulness, and support that we received from complete strangers. Thank you for providing relief and encouragement during such an overwhelming journey!"
- "My experience was very excellent. I am so grateful for the people who I worked with. They were very encouraging and helpful. Thank you for what you do."
- "The gift cards fir chemo day meals were absolutely wonderful and very much appreciated. Thanks for all the encouraging cards too!"
- "You ladies rock and everything you do is absolutely amazing!!!"
- "Thank you for the wonderful experience and help during the scariest and most difficult time in my life. Thank you for being there- I will always let everyone I talk to know about my experience."
- "I really appreciate your help! It meant a lot to me and my family! Thank you!"
- "Going through cancer is very emotional and very overwhelming!! I honestly would have been lost with out the help from can do cancer. This is an amazing program and I am so very thankful for everyone there."
- "The food gift cards were such a blessing. Not being able to work it was so appreciated"
- "Thank you guys so so much. You have no idea how much you helped me and my family through all this. You're the best!!"

- “I love the housecleaning service. Please do not send me any more of the wonderful lotions or gift cards. I will be getting treatments for the rest of my life, and I would feel guilty getting more of them.”
- “CanDo Cancer has been a blessing! The encouragement through notes, care packages, and my mentor have been uplifiting [sic].”
- “We have been so very grateful for the support we have received. I have two of the motivational prints/cards framed by my bed, and one sitting at my desk. Each time I've received a package from Can Do Cancer, it brings tears to my eyes and means the world that people I've never met have worked so hard to support families like mine. Thank you so much for all you do!”
- “None”
- “The overall help and support was well beyond anything I would have imagined. I am very appreciative of all the help and support.”
- “I was so thankful to be able to re-enroll as long as I was on treatment. The money for groceries and the house cleaning were an amazing gift and so much help.”
- “Thank you so much - it was really wonderful having your help!”

Appendix C: Expansion Support Roles

Key Responsibilities – Deonne Winkel & Leah Hills

- Accept and review new applications from prospective patients with a broader range of cancer diagnoses, ensuring timely response and compassionate communication.
- Liaise with oncology nurses, navigators, and care coordinators across Central Iowa to verify patient eligibility based on diagnosis, treatment type (e.g., IV chemotherapy), and geographic area.
- Match patients with appropriate Patient Partners, considering shared diagnosis, treatment stage, and other factors critical to peer support success.
- Onboard newly enrolled patients, providing orientation on available services, timelines, and expectations for engagement.
- Recruit, train, and support new Patient Partners—including those with lived experience in colorectal, prostate, lung, and other cancers—as we expand beyond breast cancer.
- Develop additional structure and support materials to guide onboarding for Patient Partners from new cancer pathways, ensuring consistency and confidence in peer interactions.
- Participate in continuous learning about different cancer types, side effect profiles, and care experiences to ensure tailored, accurate support for each cohort.
- Serve as key relationship managers across both patient and provider communities, ensuring alignment between clinical care and non-medical support services.