# Application

FY26 Iowa Cancer Plan
Implementation Grant Cycle

Iowa Cancer Consortium
www.canceriowa.org

## Applicant Information:

**Name of Project Lead:** Sherri Edwards
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**Project Lead Phone Number:** 563.690.2434
**Organization:** Crescent Community Health Center
**Street Address:** 1690 Elm Street, Suite 300
**City:** Dubuque
**Zip Code:** 52001

## Project Details:

**Project Title:** Community Health Solutions: Advancing Cancer Prevention & Care for Black/African Americans
**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.)*
Crescent Community Health Center's (Crescent's) program will advance community health efforts to address cancer prevention and treatment for vulnerable Iowans living in the greater northeast Iowa region. It will have a focus on Black/African Americans (B/AAs) due to the need to address clear disparities in the data for this population. In FY26, Crescent will increase outcomes, numbers served, and innovative ways to advance access to cancer healthcare.

This is a third year request to the Iowa Cancer Consortium (ICC) for this program. Previously, Crescent received an ICC grant in FY23 and FY24. In FY25, we were selected for an award; however, due to loss of a key staff person that fall, Crescent decided to decline the funding. During FY25, Crescent's team took time to review the program structure, expected outcomes, and methods of outreach for intended goals. Mid-year, Crescent hired a lead community health worker (CHW) with significant experience with diverse populations, knowledge of CHW best practices, and flexible skills to work with anyone in need. The CHW now is fully trained and poised to take the program to the next level starting with FY26, which prompted this request for a third and final year of ICC support.

In FY26, Crescent will focus on re-establishing the program, incorporating it into long-term sustainability plans, and expanding community outreach and education. Along with the medical team,

the lead CHW will create an enhanced referral process and workflow that promotes a stronger communication conduit to identify patients in need more quickly when they present for their first clinic visit. This workflow will be built on gaining the assistance of any CHW after this team completes training on the process and the population. This step will build a strong base for future sustainability.

In addition, the CHW will continue prioritizing colorectal cancer education/screenings based on the high rates in men, expand connections to breast and cervical cancer support/resources, and plan methods to address other high-incidence cancer rates. These and other program strategies will help vulnerable patients, including B/AAs, better understand the role of prevention, signs of cancer, and access to screenings, treatment, and other cancer services – even in situations where they lack resources or have faced fear, discrimination, trauma, and stigmas that prevented past participation. It also will create a team of CHW who can serve this population.

The program will engage, educate, and empower patients to reduce cancer risk and accomplish screenings/treatments through the following strategies:

- Build patient-provider relationships for cancer preventative and specialty care.
- Ensure access to free fitness opportunities in an onsite Wellness Center, nutrition programs, and substance abuse consultation to foster healthier behaviors, prevent cancer, and improve survivor rates.
- Share understandable and relatable health information to address patient concerns including translated materials if needed.
- Coordinate referrals to quality specialty care and treatment.
- Address patient stigmas and fears around screenings plus assistance in accomplishing screenings.
- Facilitate positive health outcomes for those who have elevated cancer risk/rates in part due to socioeconomic, environmental, institutional, or structural factors that have caused disparities.
- Support overcoming barriers including systemic ones that prevent attaining quality healthcare needed to maintain cancer-free lives.

The program's lead CHW, experienced in this work, will lead the effort and shares some life experiences in common with those served. This CHW has comprehensive knowledge of barriers faced by vulnerable populations and will use skills to increase service outcomes, forging trusted relationships essential to inspiring confidence and engaging B/AAs in particular in preventative and restorative healthcare. The program will meet the following goals in collaboration with staff, community partners, and specialist providers.

- Serve as patients' primary contact and case coordinator.
- Implement outreach and promotional activities.

- Accompany patients at appointments to facilitate communication, knowledge building, and identification of needs.
- Ensure patients have culturally appropriate materials, appointment reminders, follow-up instructions.
- Connect patients to financial resources for healthcare needs.
- Provide education on cancer diseases, prevention strategies, and after-diagnosis care planning.
- Collaborate with pharmacies for access to affordable prescriptions.
- Offer on-demand support for navigating the healthcare system.
- Link patients to other resources and advocacy.
- Anticipate roadblocks to provide satisfactory results in cancer care.
- Assist with survivorship or end-of-life support plans.
- Explore the feasibility of accessing genetic screenings and cancer trials.
- Bring awareness of negative perceptions/stigmas around cancer and ways to address.
- Partner with regional organizations on holistic strategies to decrease B/AAs' life expectancy gap, especially as some move back/forth between this area and Chicago.
- Collaborate with other organizations to hold cancer-related classes and exhibit at events.

For the focus population in the Iowa counties closest to Crescent, approximately 7,375 B/AAs live here, totaling almost 5% of the population (U.S. Census, American Community Survey, 2023). This is over a 50% growth in B/AA residents since 2020. The service area or "community" for this program includes the following counties: Dubuque, Jones, Jackson, Delaware, Clayton, and Allamakee. Crescent has the capability to serve additional counties.

Disparities that B/AAs face are incredibly serious. Although disaggregated data is not available for the 7,375 B/AAs living in Crescent's service area, data for B/AAs in Iowa overall portrays continued needs. Crescent will work to impact the following (most recent year data noted below from sources including the Iowa Department of Public Health; Iowa Cancer Registry, Cancer Among Iowa's Black Population; and National Cancer Institute, State Cancer Profiles):

- 28% of B/AAs live in poverty compared to 11% of Iowans (2023)
- 33% of B/AA children live in poverty compared to 11% of Iowans (2023)
- Iowa ranks #2 in the nation for rate of new cancer cases in B/AAs (2024)
- Iowa ranks #3 in the nation for rate of cancer deaths in B/AAs (2024)
- Cancer mortality rate for B/AAs is 204.8 compared to 149.6 for Iowans (2018-2022)
- For all Iowans, the B/AA population has the highest rate of all new cancer cases with especially notable differences in prostate, lung, and liver (2021)
- Prostate cancer incident rate for B/AAs is 219.3 compared to 125.9 for Iowans (2017-2021); prostate cancer death rate for B/AAs is 41.4 compared to 20.0 for Iowans (2018-2022)
- Lung cancer incident rate for B/AAs is 80.3 compared to 60.8 for Iowans (2017-2021); lung cancer death rate for B/AAs is 50.1 compared to 35.0 for Iowans (2018-2022)

- Colorectal cancer incident rate for B/AAs is 52.1 compared to 39.9 for Iowans (2017-2021); colorectal cancer death rate for B/AAs is 24.5 compared to 13.5 for Iowans (2018-2022)
- Liver cancer incident rate for B/AAs is 17.6 compared to 7.2 for Iowans (2017-2021); liver cancer death rate for B/AAs is 13.0 compared to 5.5 for Iowans (2018-2022)
- Current smoking rate for B/AAs is 23.7 compared to 13.7 for Iowans with Iowa's rate the highest in the nation (2023)
- Non-elderly B/AAs with health insurance total 4% lower than Iowans (2021)

In 2024, 24/7 Wall Street report ranked Iowa as the second worst state for B/AAs based on measures of socioeconomic outcomes. Iowa was ranked third in 2023, so the status of B/AAs is getting worse compared to the rest of the country. While this report did not examine healthcare, the poverty and incarceration measures assessed link to poor health outcomes.

In addition, the 2025 Cancer in Iowa report stated, "In Iowa, non-Hispanic Black (NHB) and Hispanic Iowans have an earlier average age of diagnosis… and lower survival (rates)… compared to NHW (non-Hispanic White) individuals. This means they often experience the effects of cancer earlier in life and are less likely to live as long with their diagnosis. To improve the survivorship experience for people from target populations, patient navigators, patient advocates, and culturally sensitive intervention/navigation programs need to be available and accessible to all Iowans."

Crescent's community health program has made progress and will make greater strides in this next year. As an "agent of change, helping to reduce health disparities in underserved communities" (National Health Institute), this program has helped support over 3,000 B/AAs in its initial years of operation.

One future goal is to get community health outreach into neighborhoods of high need through community events or neighborhood associations. Many vulnerable community members including B/AAs live near Crescent in the 52001 zip code having one of the highest levels of poverty in Iowa. At Crescent, these residents will access services, gain information, reinforce new behaviors, and address cancer healthcare goals to reduce their higher-than-average risk factors. Still there is more to do. Thank you for considering our request.

**How many individuals in Iowa do you expect to reach through your project?**
1,800

**In which Iowa counties do you expect to reach people through your project?**
Dubuque, Allamakee, Clayton, Delaware, Fayette, Jackson, Jones

**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.)

Crescent's program works toward meeting all priority areas:
#1: Community health program is designed to address health access issues and disparities across the cancer continuum. This includes case and resource management plus wellness promotion for cancer prevention and healthcare services for cancer treatment. In Crescent's service area, B/AAs in particular have high rates of disparities in cancer diagnoses and obtaining services, with social drivers of health barriers explained as follows.

Specific populations in this part of Iowa, especially in disadvantaged neighborhoods, face higher poverty levels, food insecurity, fewer economic and educational opportunities, and poorer health (Dubuque Community Equitable Poverty Reduction & Prevention Plan). These disparities severely reduce quality of life, expand negative cancer impact, and burden healthcare systems often stretching capacity beyond limits.

The city of Dubuque includes Census tracks 1 and 5 identified as having concentrated areas of poverty (i.e., rate at 40%+). Using the United Way's ALICE threshold, 44% of area families are struggling to live on a basic household survival budget. B/AAs are disproportionately impacted. Financial disparities make it difficult for individuals to pay for insurance and health care, especially when facing a serious diagnosis like cancer. This also increases the odds that they will turn to cheap, low nutritional value food or alcohol and skip fitness efforts.

Through Crescent's program, B/AAs and others will find a medical home with accessible services, support to treat/prevent cancer conditions, and help to improve other social drivers. Unique characteristics of vulnerable populations are accepted by Crescent's staff and are not barriers to quality care. If anyone struggles to address cost, access, education, etc., this program steps in to offer the resources and emotional support to help patients overcome barriers, promoting a better experience in managing the cancer continuum.

**#2**: Crescent's program is built around proven strategies for engaging high-risk, vulnerable community members in behaviors that help prevent cancer and in supporting screenings and other methods of early detection. Crescent has a strong referral system through a team of care coordinators who work with CHWs and their focus populations.

Medical care teams are the first line identifiers of needs and problems – as they refer patients and care coordinators do their work, the CHW team is a place of support and comfort, both of which are much needed when B/AAs face the need to have sometimes invasive and scary screenings, to determine how to stop unhealth behaviors like smoking, and to find treatment options when insurance isn't a guarantee.

On any day, the CHW could be presenting on the need for colorectal cancer screening to the area's Black Men's Coalition or having a one-on-one visit with a patient who has no showed on a colonoscopy and needs increased understanding/support to accomplish that screening process. When cancer brings emotional struggles advanced in scope, the CHW will refer the patient to Crescent's Brain Health Clinic for therapy or medication.

To address the many steps in early detection, this program is uniquely capable of reaching and supporting populations that frequently have disproportionately high rates of cancer. Crescent examined cancer type data prior to the program launch and identified B/AAs as the highest priority group. The program includes a multi-pronged approach, including increasing awareness, screenings, and resources. For example, Crescent has a dental clinic, so CHW staff links B/AAs without a dental home to basic oral health services and oral cancer screenings. These connections improve diagnosis and treatment of oral cancers.

When medical providers recommend other screenings, the program facilitates access to specialty services that accept B/AAs' medical resource plans. Often, the CHW will sit with patients to discuss questions. The CHW identifies stigma barriers around screenings for sensitive body parts, like colorectal and breast, and then helps address concerns.

The program shares culturally designed cancer messages with patients plus communicates these through outreach efforts at community events where B/AAs and other populations gather. Some information is general regarding cancer types, but the priority is on types rising in Iowa. Messages include early detection methods, signs/symptoms, and relatable education geared for easy and accessible understanding. Staff customize information based on patient needs, event types, or audience served. For example, the CHW staff shares information on skin cancer at summer health fairs and breast/uterine at She Unites women's meetings.

**#3**: Although Crescent's service area is around Eastern Iowa, including Dubuque County and contiguous counties, the program model is applicable throughout the state. Crescent will utilize the program to expand the service area further through community outreach efforts to engage additional B/AAs and new patients.

Crescent continues to share success stories and challenges with other community health centers and at state-level organizations like Iowa's Primary Care Association. This includes imparting insights on the program model, implementation efforts, outreach, and outcomes. The intent is to promote how to best serve target populations in other areas, plus provide support for health centers who want to start similar programs for patients seeking services close to home.

**#4**: Crescent's program is working towards formalizing lasting and broad changes in cancer control through policy and systems work. Crescent uses a strategic and collaborative approach to building support for community health work. For example, Crescent is a consistent key collaborator in the

area's Community Health Needs Assessment & Health Improvement Plan process. Staff including CHWs engage patients with health needs, including cancer, to take community needs surveys and speak on concerns to address gaps in services and systems solutions that would make the greatest impact. To date, this plan has identified priorities that are leading to programming and future policy/systems advocacy efforts at the state and federal levels.

Additionally, the program is forging partnerships to advocate for the unique needs of B/AAs and cancer care access challenges. This includes speaking at community events, state-level meetings, onsite legislative events, and growing initiatives including nonprofit, foundation, and governmental efforts. The lead CHW for the program will participate in advocacy events locally, statewide, and federally as opportunities become available. Crescent as an organization and the lead CHW will represent the B/AA population and their unique needs as they meet leaders. The CHW will share best practices in community health work plus patient needs and stories.

**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.)*
As shared earlier in this proposal, a main challenge has been a brief interruption in services last year. Crescent did not accept the ICC FY25 award, which would have been the third program year, after the loss of key staff at the start of FY25. Making the decision was difficult, but Crescent wanted to be the best steward of funds. We did not want to utilize full or even partial ICC funding on finding and training the right new candidate for a lead CHW.

Fortunately, Crescent was able to tap another funding source to support a recruitment effort and secured a CWH candidate with excellent qualifications for this program. This CHW started in February 2025 and is almost fully trained with the position temporarily supported through limited funds for another special population. With the new FY26, the lead CHW will be ready to take over the program and develop a new team approach to program services.

While Crescent has been developing plans to get the program at full speed again, several positives have happened during this last year. Crescent developed a career ladder for CHWs, building professional development opportunities, standards, and raises into the ongoing development of positions. All CHW staff are pursuing at least one of several professional credentials. In part, this level of support has helped fully staff the department with CHWs poised to be integrated into a team approach in future years to serve any target population through a stronger referral process.

Regarding external partnerships, the City of Dubuque advanced leadership at the Multi-Cultural Family Center promoting its director to an overall community impact position for the entire area. This restructure is resulting in increased opportunities to build the scope of the center's outreach and strengthen partnership efforts with Crescent on gaps in service for target populations and ways to work together to address these.

Finally, last year Crescent was still building staff knowledge and data reporting systems because of a changeover in electronic health records systems to EPIC. With that transition behind Crescent, staff now are well trained, are operating smoothly in documenting patient needs, and can run comprehensive data reports for long timeframes.

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

**#1**: Health Equity: Program staff have a diverse background instrumental in helping B/AAs and other populations who have documented health/cancer disparities significantly more than other populations. Staff link B/AAs to quality primary care, wrap-around services, and health improvement strategies while addressing any barriers to achieving care.

**#2**: Prevention & Risk Reduction: Program educates B/AAs and others on relatable reasons for prevention and support connections to risk reduction opportunities, many of which are free or covered including fitness center, alcohol and tobacco cessation, substance use consultation, healthy eating classes, and vaccinations. Staff share educational materials on cancers that may be prevented or mitigated through behavioral actions while spending time reviewing these with patients.

**#3**: Early Detection & Screening: Program staff understand barriers B/AAs and others have regarding healthcare and cancer screenings, so they make time for conversations to address concerns and review provider recommendations. Staff also increase access to affordable screening options and assistance for seeing them through. The program works to provide support for all the most common types of cancer, promoting early detection and risk reduction. For those with a diagnosis, the program facilitates access to genetic counseling services in conjunction with provider recommendations.

**#4**: Diagnosis & Cancer-Directed Therapy: Staff increase B/AAs' and others' treatment access for all ages by coordinating specialty services, caring reminders, transportation, care plans, financial support options for cost of care, affordable treatment options, insurance enrollment, possible clinical trial options, and brain health care referrals. Staff collaborate with medical providers for the best possible outcomes and ensure other needs are met.

#5: Survivorship & End-of-Life Care: Crescent's patients with cancer receive after-care customized for life-long health goals. The program helps build respectful, age-appropriate, culturally based relationships to promote ongoing coordinated services for patients' unique needs including clinical and non-clinical services. If needed, staff help arrange for palliative care to maintain dignity and follow with support during this phase. Program staff also do education in the community on cancer patient needs, and leaders do advocacy at the state and national level on community health efforts.

## 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: **S**pecific, **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://cancerioiowa.org/grants/ifp)*

***Objective #1:** Increase by 40% the number of B/AAs enrolled for services at Crescent. Increase by 35% the number of B/AA enrolled patients who had a social drivers of health assessment by CHW including follow-up assistance when needed with access to cancer treatment or prevention resources. Can be expanded to other vulnerable populations.

- Deadline *(funding period is July 1, 2025-May 31, 2026):* May 31, 2026
- Baseline data: 1,699 enrolled and 10% with assessment as of April 30, 2025
- Target by deadline: 680 new patients and 35% assessed

***Objective #2:** Increase by 20% the number of B/AA enrolled patients who have at least one medical visit annually that includes referrals to cancer screenings when needed and cancer prevention education. Increase by 35% the number of cancer screenings accomplished by B/AAs at provider recommended timeframes. Can be expanded to other vulnerable populations.

- Deadline *(funding period is July 1, 2025-May 31, 2026):* May 31, 2026
- Baseline data: 1,179 with at least one medical visit annually and 42% compliant on cancer screenings as of April 30, 2025
- Target by deadline: 1,415 with at least one medical visit annually and 300 compliant on cancer screenings

***Objective #3:** Increase by 20% the number of B/AA patients with a cancer diagnosis who are receiving treatment, specialty care, and/or surgery as needed until reaching a consistent 100%. Can be expanded to other vulnerable populations.

- Deadline *(funding period is July 1, 2025-May 31, 2026):* December 31, 2025, and May 31, 2026
- Baseline data: 50% as of April 30, 2025

- Target by deadline: 70% by December and 100% by May

## 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:** Antonio Mouzon
**Organization:** City of Dubuque, Multi-Cultural Family Center
**Mailing Address:** 1157 Central Ave, Dubuque, IA 52001
**Phone:** 563.690.6041
**Email:** amouzon@cityofdubuque.org
**Please describe the collaborator's proposed responsibilities/role in the project.** *(Suggested: 100 words or less)*
The city provides community assessment leadership, progress reporting, promotion of Crescent's services, and sometimes contributes supplementary financial support for community health programs. Under the umbrella of the city, the Multi-Cultural Family Center partners with Crescent on community outreach events and educational sessions to share cancer information with the target population and connect them to healthcare services.

### **Collaborator #2** (optional)

**Name:** Stacey Killian
**Organization:** Visiting Nurse Association
**Mailing Address:** 660 Iowa Street, Dubuque, IA 52001
**Phone:** 563.556.6200
**Email:** Stacey.killian@unitypoint.org
**Please describe the collaborator's proposed responsibilities/role in the project.** *(Suggested: 100 words or less)*
The VNA provides complimentary, unduplicated cancer support services in partnership with Crescent for target populations, including patient referrals to Crescent for medical care and case management, home care, and breast or cervical cancer funding for screenings.

### **Collaborator #3** (optional)

**Name:** Click or tap here to enter text.
**Organization:** Click or tap here to enter text.
**Mailing Address:** Click or tap here to enter text.
**Phone:** Click or tap here to enter text.
**Email:** Click or tap here to enter text.
**Please describe the collaborator's proposed responsibilities/role in the project.** *(Suggested: 100 words or less)*
Click or tap here to enter text.

## 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.)* Historically, the evidence supporting the effectiveness of this program remains valid as shared in previous proposals. It will be implemented daily for B/AAs and others at Crescent based on the principles outlined here and as documented by source notation material.

Many scientific studies and evidence reviews have examined the CHW model and strategies. This resulted in guidance on implementing community-based health promotion and disease prevention programs, including which methods work based on scientific evidence.

In 1996, the U.S. Department of Health and Human Services established a Community Preventative Services Task Force (CPSTF), an independent and non-federal panel of health and prevention experts, to study program effectiveness. Since then, with the latest review completed in 2024, the CPSTF has found CHW programs and their interventions for target populations increase completion of cancer screenings, education, and treatment. (Source: CPSTF, All Active Findings, 2024, www.thecommunityguide.org/media/pdf/cpstf-finding-lists/CPSTF-All-Findings-508.pdf)

According to research, programs are effective when the CHW staff are operating individually or on a team. There is strong evidence to show community health interventions are cost-effective for most types of cancer and are particularly impactful when implemented for underserved populations to increase access to healthcare. These are the cornerstones of Crescent's program.

In addition, the CPSTF found evidence to recommend the use of one-on-one education to increase preventative activities that reduce the risk of some types of cancer. Delivering prevention education through trusted messengers works well with individuals, especially if messages are tailored based on "characteristics unique to that person, related to the outcome of interest, and derived from an individual assessment."

Education should include support materials and patient reminders, and Crescent implements all. Trusted messengers can be health professionals or community health advisors and may be done in a facility, in the community, or in a home setting – Crescent's program staff spend time with target populations in all these settings.

Additional Sources:
https://stacks.cdc.gov/view/cdc/81490
https://stacks.cdc.gov/view/cdc/126179

**How will you evaluate your project? How will you know if you have been successful?** (*Suggested: 250 words or less.)*
Crescent will evaluate its program through quantitative and qualitative data.

• Output measures will include the number of B/AAs served and other patients, especially those lacking resources, primary care, and cancer screenings/treatments. Crescent also will examine the number of patients by cancer type or pre-cancer concerns. Measures will reflect outreach and engagement strategies crucial to program success and identification of individuals in need of in-depth support.

• Outcome measures will include the number/percentage of patients receiving recommended screenings by type (e.g., like BMI, tobacco, and other screenings) and the number/percentage of B/AAs and others participating in cancer treatments. Measures will reflect coordination of advanced care to treat cancer.

• Additional outcome measures will include number of hours CHW staff spend on patient visits, outreach events, presentations, and partner meetings. These are effective communication standards, supporting patient care plans and community partnerships/outreach. Crescent will collect data on patients receiving assistance for social drivers of health. Engagement in care is instrumental in preventing/treating cancer.

• Quality and efficiency measures will include qualifications of the lead CHW staffing the program and enabling encounters (e.g., financial counseling, translation, health education) by type. Enabling will help patients afford healthcare services, obtain culturally appropriate education, address needs like transportation, and participate in wellness services like fitness activities/nutrition. Measures will reflect the quality of program efforts to make a positive difference in lives.

Other key data is included in the successes/challenges section of this proposal. Many measures will be tracked through Crescent's electronic health record system and patient surveys. Crescent also will compile patient stories to show patients' individual experiences.

Starting with the last funding award in collaboration with the ICC, Crescent has increased data measures for this program. At the end of that year, Crescent had met or was close to meeting three of the five new goals and is looking forward to additional progress in FY26.

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

Crescent's program demonstrates the possibility of going beyond offering a service to wrapping warm handoffs at every step in the cancer continuum. This has not changed since the program began three years ago. The connections made and support coordinated make a substantial difference for impact on target populations.

Most individuals seek to live healthier lives. Many have the knowledge, resources, and privileges to access cancer prevention and treatment or other healthcare services. Some do not or have unique and challenging barriers to accessing services. To increase opportunities for target populations to meet needs, the initial program focus will be on access and affordability for all. This includes placing patients on a sliding scale for fees, helping to enroll in insurance, coordinating services needed, and securing access to special grants that cover costs of transportation, home health equipment, specialist fees, and more.

Then, Crescent program staff use social drivers of health assessments, additional screenings, and motivational interviewing to identify other barriers and plan/support access to resources and services solutions. This is the stage where unique needs are addressed. Specific populations, like B/AAs, are prioritized for CHW outreach and support services. For example, program CHWs help build productive and trusting relationships between patients and medical providers by attending appointments, interpreting when needed, helping plan ways to make progress on health goals, etc.

Through this enabling support, patients can lean on CHWs when they hear difficult news, face hard decisions, and realize they need to make changes to address their health goals. These connections are especially important for vulnerable populations – they access high-quality care when first walking through Crescent's door but also frequently need ongoing support to accomplish advanced cancer care and screenings.

Crescent also trains staff to deliver strengths-based care to every patient. This effort, including the B/AA program, meets individuals wherever they are in their health journey. Staff promote services to at-risk residents in their own neighborhoods, and then ensure patients have resources to participate fully. For certain populations who have had little healthcare access, this luxury is now within reach. It is the key to better health for all and strengthens the whole community.

## 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)*

Funding would support approximately .50 of a CHW full-time position in development for the expected duties described in this proposal, but it would not supplant other or existing responsibilities. Compensation includes benefits and taxes calculated at 23%. Additional program expenses are funded either by supplementary grants/donations or built into Crescent's operational budget including travel costs, printing, supplies, and professional development support. Attachments for the current CHW staff person include a resume, job description, and statement of estimated program hours and program-related responsibilities.

**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** | | | |
| Community health worker @ $23 per hour for 40 hours per week x 48 weeks; cost includes wages and 23% fringe | $25,000 | $29,317 | $54,317 |
| | | | |
| **Travel** | | | |
| Mileage in the service area for community health worker to attend meetings and patient visits at approximately 1,600 @ $.625 per mile rate | | $1,000 | $1,000 |
| | | | |
| **Printing** | | | |
| Educational and event flyers @ $1 per page for 1,000 copies | | $1,000 | $1,000 |
| | | | |
| **Supplies** | | | |
| Routine misc. office supplies | | $500 | $500 |
| | | | |
| **Shipping** | | | |
| | | | |

| | | | |
|---|---|---|---|
| **Other** | | | |
| Professional development fees for community health worker | | $1,000 | $1,000 |
| Professional development dues for community health worker | | $200 | $200 |
| | | | |
| | | | |
| **Totals:** | $25,000 | $33,317 | $58,317 |

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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.

### A Note Regarding Funding Sources

Iowa Cancer Plan Implementation Grants will be funded by state comprehensive cancer control dollars through a contract with the Iowa Department of Health and Human Services and Iowa Cancer Consortium general funds.

### About the Iowa Cancer Consortium

The Iowa Cancer Consortium is a partnership of more than 600 healthcare providers, public health professionals, caregivers, researchers, cancer survivors, volunteers and other Iowans who work together to reduce the burden of cancer in our state. Through collaboration, the Consortium enhances partners' abilities to address cancer prevention, early detection, treatment, and quality of life in Iowa.

Sign up to receive email alerts at www.canceriowa.org/newsletters.

Mailing Address:

**Iowa Cancer Consortium**
**PO Box 859**
**North Liberty, IA 52317-0859**

www.canceriowa.org

Crescent Community Health Center
Job Description

TITLE: Community Health Worker

DEPARTMENT: Health Equity

REPORTS TO: Director of Grants & Health Equity

FLSA STATUS: Non-Exempt

**Summary:** Under the supervision of the Director of Grants & Health Equity, the Community Health Worker (CHW) will be responsible for helping patients to navigate and access community services, understand their health conditions, and determine patient priorities for healthy behaviors – while addressing disparities in health outcomes specific to the population(s) served. The CHW may serve any patient but also may have assigned focus population(s) (e.g., Pacific Islanders, Hispanic/Latinos, Black/African Americans).

**Essential Duties:** Essential job duties within this position's scope of practice include the following items. Other duties must be performed as assigned or required.

**ORGANIZATIONAL FUNCTIONS:**

- Performs all job functions according to the mission and values of Crescent Community Health Center (Crescent).
- Maintains a working knowledge of applicable federal, state, and local laws and regulations; standards of conduct; and policies and procedures to ensure adherence in a manner that reflects honest, ethical, and professional behavior.
- Maintains a professional, collaborative work environment to foster a positive public image for Crescent.
- Knows and adheres to all laws and regulations pertaining to patient health, safety, and medical information (e.g., HIPAA).
- Respects the confidentiality of individuals and groups, unless obligated to disclose under proper authorization or legal compulsion.
- Maintains accountability for their own actions and behaviors.
- Seeks feedback concerning their practice and is responsive to coaching as well as individual and organizational goals and standards.
- Embraces change and learning, taking personal accountability to seek experiences that enhance skills/competence in a healthcare practice and for the CHW role.
- Works collaboratively throughout the Health Equity team to support patient needs and address challenges.

**CULTURAL MEDIATION FUNCTIONS:**

- Maintains a strong working knowledge of focus populations served.
- Uses the principles of cultural humility to work with all patients.

- Helps improve patients' ability to effectively communicate with all health providers.
- Helps reduce cultural and socio-economic barriers between patients and providers.
- Serves as cultural brokers between patients and essential needs resources.

**DIRECT SERVICE FUNCTIONS:**

- Helps prevent illness and disease for at-risk populations by linking them to consistent medical care, screenings, and insurance/financial resource plans. May include support for specific diagnoses (e.g., cancer, diabetes, hypertension).
- Partners with care teams to facilitate plans that will impact positive changes in care for chronic conditions and other health challenges.
- Maintains comprehensive knowledge of area resources for essential needs (e.g., food pantries) and connects patients when needed.
- Provides interpretation, if qualified, when needed for focus populations.

**ASSESSMENT AND EVALUATION FUNCTIONS:**

- Assesses patient needs informally and formally to determine the key areas of social drivers of health for which patients need assistance, intervention, and services (e.g., transportation).
- Make referrals so that patients can access community resources to meet their needs.
- Maintains knowledge of internal, grant-funded patient support programs and coordinates access when needed.
- Works across all departments at Crescent to identify any gaps and provide continuity for improved patient care.
- Participates if requested in community-level assessments related to identifying needs, gaps, and priorities for focus populations or overall community health.
- Documents patient telephone calls, encounters, and other activities in the designated format and in health records systems (e.g., Epic).

**CARE COORDINATION AND SYSTEM NAVIGATION FUNCTIONS:**

- Supports patients by coordinating care from multiple service providers and by helping patients navigate complex health and social service organizations and programs in the community. This includes preventative (e.g., immunizations, fitness center) and treatment care (e.g., cancer care, medication access).
- Helps coordinate specialty provider services that accept patients' insurance coverage.
- Follows up with patients via phone calls, appointments, and visits to other settings where patients are located.

**COACHING AND EDUCATION FUNCTIONS:**

- Works toward a full understanding of health disparities unique to patients and uses proven techniques to empower patients toward successful health outcomes.

- Helps patients understand their health conditions; works with nurses, referral coordinators, primary care providers, and others to develop support strategies to improve patients' health conditions.
- Uses methods such as Motivational Interviewing, Teach Back, Strengths-Based Approach, and Client-Centered Care to help clients set health-related goals and reduce risk behaviors.
- Ensures patients have access to health education.

**CAPACITY AND ADVOCACY FUNCTIONS:**

- Facilitates clients in developing skills and confidence to promote and advocate for their own health and well-being. May include working with patients, their families, or others in the community.
- Advocates by sharing general health needs of focus populations in the service area.
- Works with other community entities to help identify health disparities and develop solutions for more equitable and inclusive health outcomes.

**OUTREACH FUNCTIONS:**

- Educates others in the service area on Crescent services and seeks to engage new patients in care.
- Supports outreach efforts, which may include exhibits, presentations, partnership building, and other activities designed to build strong healthcare-related support and resource systems.

**OTHER FUNCTIONS:**

- Performs other duties as assigned.
- Must adhere to departmental standards regarding HIPAA and other privacy regulations.
- Serves as a mandatory reporter of suspected child or dependent adult abuse. Must meet federal/state laws regarding reporting, participate in mandatory training, maintain strict confidentiality, report within the specified timeframe, and notify supervisor as soon as possible of the need for the report.
- Must complete and remain in compliance with required trainings.
- During a public health emergency, the employee may be required to perform duties like but not limited to those in their job description.

**Qualifications:** To perform this job successfully, the individual in this position must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the minimum knowledge, skills, and abilities required.

Education/Experience:

- Must be 18 years old.
- High school diploma strongly preferred.
- Bachelor's degree in human service or related field desired.

CHW Core Competencies:

- Ability to use strong communication skills to relate with diverse populations.
- Ability to build interpersonal and trusting relationships with patients, other employees, and community resource providers.
- Ability to coordinate services and assist patients in navigating services.
- Ability to build patients' advocacy, strengths, and capacity to thrive.
- Ability to use advocacy skills to share information at multiple levels in the community.
- Ability to educate patients and facilitate strategies for patients to make progress.
- Ability to implement individual and community assessments.
- Ability to do outreach in the community to engage new patients and build supportive networks.
- Ability to perform role using professional skills and conduct.
- Ability to evaluate patient progress and review/understand research-based best practices.
- Ability to do ongoing building of a knowledge base on CHW work.

Language Skills:

- Ability to read and comprehend simple instructions, short correspondence, and memos.
- Ability to write simple correspondence.
- Ability to effectively present information in one-on-one and small group situations to customers, clients, and other employees of the organization.

Mathematical Skills:

- Ability to add and subtract two-digit numbers and to multiply and divide with 10's and 100's.
- Ability to perform these operations using units of American money and weight measurement, volume, and distance.

Reasoning Ability:

- Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions.
- Ability to deal with problems involving a few concrete variables in standardized situations.

Certificates, Licenses, Registrations:

- CPR and Child/Dependent Adult Abuse Mandatory Reporter trainings are required within 6 months of hire and at renewal periods thereafter.

- A valid driver license, verification of personal auto insurance, and the ability to become an authorized driver as detailed in the driver authorization procedure.
- Completion or registration to complete CHW Professional Skills certification within first 2 years on the job.

**Intellectual Demands**: The demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job.

| Intellectual Demands: | **Amount of Time** | | | |
|---|---|---|---|---|
| | None | Under 1/3 | 1/3 to 2/3 | Over 2/3 |
| **Problem solving** | ☐ | ☐ | ☒ | ☐ |
| **Communication - written** | ☐ | ☐ | ☒ | ☐ |
| **Communication - verbal** | ☐ | ☐ | ☒ | ☐ |
| **Money handling** | ☒ | ☐ | ☐ | ☐ |
| **Organization** | ☐ | ☐ | ☐ | ☒ |
| **Interpersonal skills** | ☐ | ☐ | ☐ | ☒ |
| **Calculating** | ☐ | ☐ | ☒ | ☐ |
| **Concentration** | ☐ | ☐ | ☐ | ☒ |
| **Creativity** | ☐ | ☐ | ☒ | ☐ |
| **Working with interruptions** | ☐ | ☐ | ☐ | ☒ |

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

| Physical Activities: | Amount of Time | | | |
|---|---|---|---|---|
| | None | Under 1/3 | 1/3 to 2/3 | Over 2/3 |
| **Stand** | ☐ | ☐ | ☐ | ☒ |
| **Walk** | ☐ | ☐ | ☐ | ☒ |
| **Sit** | ☐ | ☐ | ☒ | ☐ |
| **Talk** | ☐ | ☐ | ☐ | ☒ |
| **Hearing/Listening** | ☐ | ☐ | ☐ | ☒ |
| **Use hands to finger, handle, or feel** | ☐ | ☐ | ☒ | ☐ |
| **Reach with hands and arms** | ☐ | ☐ | ☒ | ☐ |
| **Climb or balance** | ☐ | ☒ | ☐ | ☐ |
| **Stoop, kneel, crouch, or crawl** | ☐ | ☒ | ☐ | ☐ |
| **Taste or smell** | ☐ | ☒ | ☐ | ☐ |
| **Travel** | ☐ | ☒ | ☐ | ☐ |

**Amount of Weight/force to be exerted:**

| Weight | Amount of Time | | | |
|---|---|---|---|---|
| | None | Under 1/3 | 1/3 to 2/3 | Over 2/3 |
| **Up to 10 pounds** | ☐ | ☒ | ☐ | ☐ |
| **Up to 25 pounds** | ☐ | ☒ | ☐ | ☐ |
| **Up to 50 pounds** | ☒ | ☐ | ☐ | ☐ |
| **Up to 100 pounds** | ☒ | ☐ | ☐ | ☐ |
| **More than 100 pounds** | ☒ | ☐ | ☐ | ☐ |

**Special vision requirements:**

☐ Close vision (clear vision at 20 inches or less)
☒ Distance vision (clear vision at 20 feet or more)
☐ Color vision (ability to identify and distinguish colors)
☐ Peripheral vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)
☒ Depth perception (three-dimensional vision, ability to judge distances and spatial relationships)
☒ Ability to adjust focus (ability to adjust the eye to bring an object into sharp focus)
☒ No special vision requirements.

**Work Environment:** The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of the job.

Environmental – Exposure to potentially hazardous environmental conditions may include:

| Environmental Conditions: | **Amount of Time** | | | |
|---|---|---|---|---|
| | None | Under 1/3 | 1/3 to 2/3 | Over 2/3 |
| **Wet or humid conditions** | ☒ | ☐ | ☐ | ☐ |
| **Bloodborne pathogens** | ☐ | ☐ | ☐ | ☒ |
| **Work near moving mechanical parts** | ☐ | ☒ | ☐ | ☐ |
| **Work in high, precarious places** | ☒ | ☐ | ☐ | ☐ |
| **Fumes or airborne particles** | ☐ | ☐ | ☒ | ☐ |
| **Toxic or caustic chemicals** | ☒ | ☐ | ☐ | ☐ |
| **Outdoor weather conditions** | ☒ | ☐ | ☐ | ☐ |
| **Extreme cold (non-weather)** | ☒ | ☐ | ☐ | ☐ |
| **Extreme heat (non-weather)** | ☒ | ☐ | ☐ | ☐ |
| **Risk of electrical shock** | ☒ | ☐ | ☐ | ☐ |
| **Work with explosives** | ☒ | ☐ | ☐ | ☐ |
| **Risk of radiation** | ☐ | ☒ | ☐ | ☐ |
| **Vibration** | ☒ | ☐ | ☐ | ☐ |

**Amount of noise typical for the work environment of this job?**

☐ Very quiet (examples: forest trail, isolation booth for hearing test)

☐ Quiet (examples: library, private office)

☒ Moderate noise (examples: business office with computers and printers, light traffic)

☐ Loud (examples: metal can manufacture department, large earth-moving equipment)

☐ Very loud (examples: jack hammer work, front row at rock concert)

**Acknowledgement:**

I understand that this position description is not an exhaustive list of all functions that you may be required to perform, and you may be required to perform additional functions. Additionally, the company reserves the right to revise the job description at any time.

I acknowledge this position description was reviewed with me and a copy was provided to me. I agree to and accept the terms and conditions and acknowledge this does not represent a contract of employment, and that employment at Crescent Community Health Center is employment at-will, which may be terminated at the will of either the company or myself.

_____ _____

**Employee Signature** **Date**

_____ _____

**Supervisor Signature** **Date**

**Crescent Community Health Center, Community Health Worker Position Statement**
**FY26 Iowa Cancer Consortium Grant Proposal**

**Estimated program hours worked per week:** 20-25 hours of an FTE position.

**Program-related responsibilities:** For vulnerable populations including the Black/African American (B/AA) population community health work (CHW) program, the following are core responsibilities.

- Help prevent and treat cancer by doing outreach to link new and existing patients to consistent medical care, screenings, and insurance/financial resource plans.
- Connect patients to prevention services and education, like alcohol/tobacco cessation, vaccinations, brain health, fitness center, and nutrition/weight reduction consultation.
- Advocate for target populations and impart advocacy training to build patient strengths; improve patient-provider dialogue and trust; and help patients give voice to their concerns and questions in order to become their own best healthcare advocate.
- Ensure patients have access to enabling services, such as health education, transportation, and care coordination.
- Have one-on-one conversations with patients on sensitive cancer prevention and treatment methods that help advance health outcomes.
- Help identify and reduce cultural and socio-economic barriers between patients and providers.
- Help patients understand their cancer health conditions; the importance of preventative efforts; and ways to overcome obstacles to cancer healthcare control.
- Collaborate with local, regional, and state organizations and initiatives to help identify health disparities within target populations and develop solutions for more equitable and inclusive health outcomes.

# Juan Monjarrez

**Business Administrator/Marketer and CNC Operator**
Platteville, WI 53818
jjmonjarrez@gmail.com
(608) 642 3226

I am a native Spanish speaker with experience in business management, marketing, sales, customer service, and CNC operations. I consider myself a goal oriented person with a high level of communication skills. I achieved a training certificate in medical interpretation and have done contract work for several years as a hospital interpreter and community resource coordinator.

Willing to relocate: Anywhere
Authorized to work in the US for any employer

## Work Experience

### CNC Machinist/Supervisor

HYPRO INC - Platteville, WI
March 2018 to Present

2nd Shift Supervisor: To supervise the production and performance of the operators on 2nd shift. To watch closely we accomplish as a team the daily goals of the plant. As a supervisor Im responsible of other aspects in the plant like safety, quality of the job, job hours approval, time off approval, monthly and annual reviews, etc.

### Sales Consultant

UBERSOX CHRYSLER - Platteville, WI
2016 to 2016

Auto motors sales consultant, marketing advisor.

### Restaurant manager

Los Amigos Restaurant - Platteville, WI
2015 to 2015

Staff supervisor, accounting, customer service, food quality control, administrative duties.

### Export/import coordinator

Maersk Line Nicaragua
2013 to 2014

Shipping containers coordinator

### Marketing research/spss teacher

Ave Maria University Latin American Campus Nicaragua
2012 to 2013

## Education

**Bachelor of Business Administration in Business Administration**
Ave Maria University Latin American Campus
2013

## Skills

- CNC
- CNC Milling Machine
- Restaurant Management
- Blueprint Reading
- SPSS
- Manufacturing
- Calipers
- CNC Programming
- Leadership Experience (4 years)
- Management Experience (4 years)

## Certifications and Licenses

**Vehicles Sales Consultant Licensed**
Present

**IFSTA License**
Present

## Groups

**Certified Fire Fighter Wisconsin**
Present

THE CITY OF DUBUQUE
*Masterpiece on the Mississippi*

Dubuque All-America City NATIONAL CIVIC LEAGUE 2007★2012★2013 2017★2019

Office of Community Impact
2200 Bunker Hill Rd
Dubuque, Iowa 52001
Office (563) 690-6171
Amouzon@cityofdubuque.org

May 8, 2025

Iowa Cancer Consortium
P.O. Box 859
North Liberty, IA 52317-0859

Iowa Cancer Consortium Board of Directors:

As the director of the Office of Community Impact in the city of Dubuque, I'm writing to support Crescent Community Health Center's (Crescent's) proposal for their community health program for Black/African American residents in this area. This program addresses the FY26 Iowa Cancer Plan Implementation Grant and has been making great progress in this community.

The Multicultural Family Center has been working with Crescent and the program community health worker in the following ways, many of which support the 2023-2027 Iowa Cancer Plan. We plan to advance this partnership into the future as both our organizations grow.

- Addressing and eliminating barriers for services
- Providing information to the public
- Community Resource Connections
- Health & Wellness Expo

Closely aligned with the efforts of Crescent, the mission of the MFC is to empower all families and community members of Dubuque to reach their potential and build unity through diversity, equity, and inclusion. We believe in the power of Crescent's role toward this mission and strongly encourage you to support this program. It has and will continue to link Black/African Americans and others to cancer prevention and treatment strategies plus the helping hand needed to succeed in obtaining other essential resources for a better quality of life.

I appreciate your time and consideration of Crescent's proposal.

Sincerely,

Antonio Mouzon
Community Impact Director
City of Dubuque
563-582-3681

UnityPoint Health
Visiting Nurse Association

May 12, 2025

Iowa Cancer Consortium
P.O. Box 859
North Liberty, IA 52317-0859

Iowa Cancer Consortium Board of Directors:

As the director for the VNA, I'm writing to support Crescent Community Health Center's (CCHC's) proposal to continue a community health program for Black/African American community members. This program addresses the FY26 Iowa Cancer Plan Implementation Grant, Invitation for Proposals, and is meeting an important community need.

For many years, the VNA has collaborated with CCHC staff to help underserved residents access essential services available in the community. We strongly support CCHC's proposal to address the needs of the Black/ African American population and connect them to services that are open to all patients, regardless of their background. VNA will partner on the following, these strategies are in strong support of the 2023-2027 Iowa Cancer Plan.

- Worked together and are implementing goals/strategies on the current Community Health Assessment.
- Refer area residents identified as in need of cancer prevention or treatment services.
- Referral through VNA's Care for Yourself Breast and Cervical Cancer Early Detection program.
- Referral through VNA's Maternal Health Doula project.
- Collaborate on provision of other core public health services and improved access to care reaching vulnerable populations through vaccinations, insurance, and needed oral health services.

At the VNA, we support initiatives that focus on addressing the challenges and barriers to accessing health services in the community. Programs that facilitate linking members of the community to cancer and other health information, screenings, care coordination, and treatment services is important to ensure the community is aware of the resources available can assist with improving their health outcomes

Thank you for your time and consideration of CCHC's request.

Sincerely,

Stacey Killian

Stacey Killian, Director

Crescent Community
HEALTH CENTER

April 16, 2025

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

Dear Iowa Cancer Consortium Board of Directors:

On behalf of Crescent Community Health Center (Crescent), I am writing this letter of intent to apply for the Iowa Cancer Consortium's FY26 Iowa Cancer Plan Implementation Grant. Last year, Crescent was awarded a grant but had to decline due to unanticipated staffing changes. We have addressed these and will be ready to re-launch the program with the new grant year. Therefore, Crescent submits this intent to apply for a third program year for which we are eligible.

In alignment with priorities in the 2023-2027 Iowa Cancer Plan, Crescent will continue advancing our population health program to address cancer health inequities for Blacks/African Americans targeting those living in the 52001 zip code, which is one of the highest poverty areas in the state. Key program strategies include engaging new/existing patients in screenings, specialist services, treatments, community services, and more. These efforts leads to cancer prevention, access to care, growing survivor rates, and positive health outcomes overall.

Crescent serves patients who are vulnerable, underserved, face service access barriers, and can lack adequate insurance coverage. This program includes outreach and support for the Black/African American population whose health care is negatively impacted by social constructs and other disparities/barriers.

Thank you for this opportunity.

Sincerely,

Sherri Edwards

Sherri Edwards, Director of Grants & Health Equity
Crescent Community Health Center
(563) 690-2434, sedwards@crescentchc.org