



Cancer Survivorship Programs

The effects of marketing and education on program implementation

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In Brief

In the past decade, cancer patients who have completed their intensive treatments have expressed a need for clearly outlined care plans that help them transition to maintenance or follow-up care. Today, many community cancer centers are implementing survivorship programs to meet these patient needs. Marketing and education help to create internal buy-in for these programs—ultimately contributing to the overall success of the new program. This article examines how marketing efforts and education of key stakeholders improved physician, staff, and patient awareness and encouraged buy-in for the survivorship program at Gibbs Cancer Center in Spartanburg, S.C.



Gibbs Cancer Center

personal. experience. shared.

Gibbs Cancer Center is a designated National Cancer Institute (NCI) Community Cancer Centers Program (NCCCP) pilot site. After ARRA (American Recovery and Reinvestment Act) funding was awarded to the NCCCP, Gibbs Cancer Center was one of eight sites identified to specifically develop a community survivorship program. The new program included a stand-alone survivorship clinic and an array of support and educational programs. The overall goal of the comprehensive community survivorship program was to meet the needs of cancer patients as survivors in their own community.

During implementation of the survivorship program, Gibbs Cancer Center faced numerous barriers, including gaining acceptance and buy-in from its medical oncologists. To meet these challenges, Gibbs Cancer Center developed marketing and educational strategies and recommendations based on clinical data, case studies, and research, as well as the professional opinions of the survivorship program coordinator, nurse navigator, and key stakeholders.

Program Objectives & Outcomes

Developing a new program at a community cancer center requires considerable time, effort, and resources. It also requires a group effort; all parties involved are vital to the program's overall success. While logistics vary widely depending on the program's scope, the target population, and the number of individuals or organizations involved, program implementation should be well planned, with roles and responsibilities delineated carefully.¹

Before implementing its survivorship program, Gibbs Cancer Center focused on three main marketing and educational objectives:

First, increase physician awareness of the need for additional survivorship care beyond that which patients were traditionally receiving. With increased physician awareness, Gibbs Cancer Center hoped to gain buy-in from oncologists who would then refer patients to the survivorship clinic, as well as other educational services.

Second, enhance hospital staff awareness of the new survivorship clinic and educational offerings. The education of staff would aid in disseminating information about these new survivorship resources to patients. Specific interventions to increase staff awareness included updating the hospital's Internet and intranet survivorship web pages and scheduling talks at staff and committee meetings. Through successful education, we hoped to see a measurable increase in class enrollment and referrals to the new survivorship clinic.

Third, educate patients and the community about the survivorship clinic and its educational offerings. The successful education of patients and family members could



also be manifested by increased awareness for patients and the community. Specific activities supporting these objectives included:

- Updating the hospital's Internet and intranet survivorship web pages that describe the survivorship clinic and its educational offerings
- Placing a calendar on the survivorship web page that highlights the survivorship activities, including a live contact number and email for questions about the survivorship clinic
- Speaking at support groups and other community activities.

To see how we did meeting these objectives, go to "Success Stories & Lessons Learned" on page 40.

Marketing Strategies

Survivorship programs are a new innovation nationally. Any new program requires significant marketing to the public and healthcare community to foster acceptance. Hospital subject matter experts often assume new and existing staff will absorb certain information. In our case, we felt that a failure to properly educate staff on the basic tenants of the program and underlying components of the survivorship movement would negatively impact implementation. Intensive education and communication to staff is vital to improve understanding and buy-in. In order for our marketing staff to effectively promote our survivorship program, we found that spending time with our survivorship team was imperative. An obvious first step was to ensure that everyone involved in the project had a clear understanding of what "marketing" involves. In "A New Marketing Playbook," author Nancy Paton suggests two actions:²

1. *Change your marketing strategy to win over today's patients from a value proposition standpoint.*

2. *Move to a marketing message that's about patients, the stability of your healthcare organization, and the reasons your program pursues quality.*

Successful marketing involves an equal exchange in which both parties experience a benefit. This, in turn, should lead to the development of a relationship.³ Effective marketing of a survivorship program can lead to both—benefits to providers and patients *and* a relationship between cancer survivors and the survivorship program. Before a lasting patient and hospital relationship can be developed, however, there must first be a hospital and staff relationship. So begin by marketing your survivorship program within your organization.

When staff has a clear understanding of the survivorship program and its goals, they can then actively promote the program. For Gibbs Cancer Center, this meant branding our program—first internally and then externally. Alcorn and colleagues suggest that: "An internal brand is the glue that binds the culture and organization so the company can make good on its external promise."⁴ If hospital staff is aligned with the brand strategy, they will be able to communicate a consistent expression of the brand to patients.⁵

With this in mind, Gibbs Cancer Center introduced a new brand platform to "personalize" the cancer center.





We placed a simple three word statement—*personal. experience. shared*—on all of our branding for the Gibbs Cancer Center (see logo on page 36). Our branding strategy was designed to highlight the three main value components of our cancer center’s philosophy.

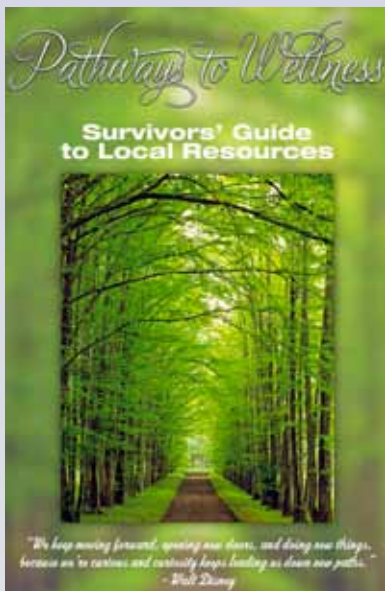
Education is Key

Hospitals often assume that certain information is commonplace to new staff. In our case, we found that a marketing staff inexperienced in oncology (and without a solid understanding of which internal branding themes needed promotion) combined with a failure to properly educate staff on internal branding could negatively impact the implementation of our survivorship program. Two takeaways: 1) for our marketing department to effectively promote and brand our survi-

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vorship program, spending time with our survivorship team was imperative; and 2) educating our staff about the new cancer survivorship program was essential so that they would be able, in turn, to educate and deliver this message to our cancer survivors.

In 2008 Chang and Chang wrote: “The most important resources for an organization are no longer raw materials, production technique, or the product itself, but rather well-educated, service-oriented employees.”⁶ Without proper education, our staff would fail to make referrals to the survivorship program. Worse, our patients and families would be unaware of the new survivorship program. Education for staff on the new program would equip them to discuss these services with our patients. Further, we understood that education often results in increased confidence. In other words, when staff members are confident about their knowledge, they are more willing to become



Additional Online Content

In June 2011 Gibbs Cancer Center released the second edition of its book, *Pathways to Wellness: A Survivor's Guide to Local Resources*. Written by the survivorship program coordinator Regina Franco, MSN, NP-C, with help and input from Marietta P. Stanton, PhD, Reggie Scoggins, RN, Perry Patterson, and volunteer cancer survivors Kay McClure, Hollie Walker, and Laurens Flanagan. This 54-page book is distributed to all cancer patients who visit the survivorship clinic. Contents include information about nutrition, exercise, survivorship care plans, a survivorship reading list, and more. It is available online at: www.accc-cancer.org/oi/JF2012. Publication of the guide was made possible by a grant from the South Carolina Cancer Alliance.

engaged in program efforts. At Gibbs Cancer Center, we found that physicians and clinical staff who were educated and knowledgeable on our survivorship program increased referrals to our new survivorship program.

Patient education is just as important. As the pivotal 2005 IOM report, *From Cancer Patient to Cancer Survivor: Lost in Transition*, states: "Healthcare providers, patient advocates, and other stakeholders should work to raise awareness of the needs of cancer survivors, establish cancer survivorship as a distinct phase of cancer care, and act to ensure the delivery of appropriate survivorship care."⁷ Educating the community about our survivorship program would increase awareness of these services. While survivorship programs are a direct result of the needs of cancer survivors, we found that often cancer survivors are unaware of available post-treatment resources. Educating our cancer patients can help them understand these services and seek out survivorship care in their communities.

Physician Buy-In

Marketing and education collectively create buy-in. With buy-in comes support from individuals, groups, departments, and hospital administration, which is imperative for a survivorship program. Physician support is key because:⁸

- Physicians enroll patients in programs.
- Most disease management initiatives require physician approval before patients can enroll in a program.
- Patients frequently ask their physician whether they should enroll in a program offered by their healthcare plan.

Programs that fail to gain widespread physician support have great difficulty enrolling patients and usually experience enrollment rates of less than 50 percent.⁸ Conversely, programs with strong physician buy-in can achieve enrollment rates as high as 80 to 90 percent.⁸ Physicians who sup-

port survivorship care as a distinct entity can help other physicians understand how survivorship care in their hospital can improve quality initiatives internally, as well as meet external benchmarks.

The Survivorship Clinic Visit and Beyond

The most opportune time for a referral to the survivorship clinic is when cancer patients complete their radiation, endocrine, or chemotherapy treatment. At our one-on-one survivorship clinic visit, survivors meet with a nurse navigator and nurse practitioner and develop a personalized road map for the next phase of care. Survivors receive a personalized survivorship care plan—both a paper hard copy and an electronic version on a security-encrypted flashdrive. This care plan is composed of a staging summary, a treatment summary, and a pathology report. We forward a copy of the care plan to the patient's oncologist and primary care physician. We also:

- Provide follow-up care recommendations for cancer surveillance, as well as visits with primary care physicians and specialists.
- Make any necessary referrals.
- Assess the patient's physical, social, psychosocial, and spiritual needs.
- Provide an overview of how survivorship directly relates to each patient.
- Promote overall wellness education, including information on diet and exercise. Referrals to wellness programs are made as needed.
- Hand out a "Life after Treatment" folder and a manual of local and national survivorship resources.

Survivors are encouraged to attend the educational offerings held at our cancer center and, when appropriate, to bring their caregivers as well. These classes allow survivors

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Success Stories & Lessons Learned

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- **To enhance physician awareness and encourage physician buy-in of the survivorship program**, we circulated peer-reviewed publications highlighting survivors' needs and examples of documents generated in our Survivorship Clinic to physicians and staff. During the course of the NCCCP pilot project, we realized that nurses and nurse practitioners play a significant role in reminding physicians of new initiatives. The success of our survivorship program depended greatly upon the referrals from these clinicians, so we simplified the referral process by creating prescription pads designed to encourage participation in survivorship initiatives. Our survivorship clinic coordinator also engaged oncologists at weekly and monthly clinical meetings. Soon our physicians became stakeholders and encouraged each eligible patient to take part in the survivorship program, clinic, and educational offerings. Moreover, we introduced an automatic entry prompt in our electronic check-out.
- **To enhance internal awareness of the survivorship program and improve interdepartmental relationships**, we delivered presentations to various hospital departments. We invited marketing staff to participate in our cancer survivorship committee meetings and provide us with input. In the future, we plan on educating new staff or staff with limited oncology experience prior to program implementation so that they "buy into" the initiative from the beginning. We also plan on delivering survivor-

ship presentations to various hospital committees composed of hospital employees from different departments.

- **To share information about the survivorship program with our local community**, we have placed signage throughout the hospital and survivorship publications in the monthly activities calendar mailing. We plan on distributing flyers and announcements to local churches with health ministries. We also plan to meet with established support groups and committees to create awareness within those groups.
- **To provide education and create awareness to patients**, we created informational tent cards to place at check-in and check-out stations. These tent cards let patients know what resources are available and how we can serve them. While the survivorship clinic visit requires a physician referral, educational classes are open to *all* cancer survivors.
- **To improve the web presence of the survivorship program**, we made changes to the hospital's intranet and Internet websites. With these changes we branded our initiatives clearly and keep them in the forefront of the minds of both patients and employees.

This is one area that was particularly challenging, so marketing or IT staff skilled at web development is key. We found that updating these web pages was very time consuming and involved several steps for each update or change. Often, the request could not be done

because of design limitations of the web pages. There are many nuances to web updating, such as different file requirements to upload a document to be viewed only as compared to a document that will be viewed and also printed. In addition, we were challenged by limited resources. Considering the size of our hospital, our marketing department is quite small. Further, there are several major programs developing within our cancer center simultaneously. Consequently, marketing staff could spend only a small amount of time on each new initiative or program.

- **To measure the success of our survivorship program**, our survivorship clinic coordinator collected quarterly data summarizing referral patterns. Data collected related to which oncologists had higher referrals and what types of referrals were generated as a result of the survivorship visit. Using this information, we developed a business plan that included downstream revenue and qualitative benefits to survivorship care. We benchmarked our data against other NCCCP survivorship projects and participated in monthly conference calls with other NCCCP sites. Quality Oncology Performance Objective chart auditing in the fall and spring following implementation revealed a 90 percent adherence to the six survivorship chart auditing question, an increase from the two previous auditing periods. We shared our outcomes data with administration and physicians, resulting in an increase in referrals to our survivorship clinic.



- Ensure that your website accurately depicts the array of your survivorship services. Most important, the information must be highly visible, easy to use, and easy to update.

Before a lasting patient and hospital relationship can be developed, however, there must first be a hospital and staff relationship.

Today, survivorship care clinics and educational programs are recognized as a valuable component of the cancer care continuum. When cancer patients move beyond the active treatment phase of care, they often experience a host of latent side effects, feelings of uncertainty and loneliness, and a fear of recurrence. Successful survivorship programs address these specific issues and equip patients with the knowledge and tools to live life after cancer. 📖

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and families to connect, encourage, and build bonds with one another, as well as to ask oncology professionals any questions that may have arisen. There is no charge for any of the educational classes for survivors.

As we continue to develop and market our survivorship program and educate providers, patients, and the community about the program, we share the following recommendations:

- Seek marketing staff experienced in oncology. Learning about cancer to market the oncology service line is difficult; learning new initiatives, such as survivorship, in addition to oncology “basics” is even more difficult for non-medical personnel.
- Meet face-to-face with physicians to discuss outcome data and the benefits of the survivorship clinic visit. These personal meetings were the most effective tools for gaining physician buy-in and referrals.
- Personally invite patients and families to participate in the various survivorship educational classes. We found it to be the most effective method for increasing program participation.
- Brand your survivorship program—internally (to staff) and externally (to patients and the general public).
- Personalize information about the need for survivorship care in your community.

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