

Upstate Carolina NCORP affiliates Spartanburg Medical Center and Gibbs Cancer Center at Pelham under the Spartanburg Regional Healthcare System (SRHS) applied to participate in the Moonshot Biobank protocol. The Biobank is a project to enroll participants with certain cancer who will be receiving targeted therapy and who agree to provide biospecimens at various times. The goal is to obtain samples longitudinally, at baseline, while on treatment, and at progression. During our first year of participation, Moonshot announced yearly supplemental Engagement funding. Moonshot encouraged sites to apply for funding to engage participants and providers and to increase enrollment of patients from underrepresented populations. Under Dr. Amy Curtis' leadership, we began brainstorming and developed our application.

Prostate cancer is both more prevalent in Black men than White men in South Carolina and more deadly. While both groups are showing improved survival trends, Black men continue to have incidence rates two times higher and mortality rates almost three times higher than White men. The statistics around multiple myeloma mortality and morbidity are similarly bleak. Mindful of these stark statistics and desirous of positively impacting health disparities, Spartanburg Medical Center, and Gibbs Cancer Center-Pelham, participating sites in the NCI Moonshot Biobank, sought an Engagement Supplement to support efforts to enroll and engage Black patients with prostate cancer and multiple myeloma (MM) onto the Moonshot Biobank protocol.

Gibbs Cancer Center and Research Institute has an average annual analytical rate of three thousand with 17.6% of the patients identifying as Black or African American. Our NCORP develops enrollment goals based on the population we serve and at the time of Engagement application, our enrollment of patients identifying as Black/African American onto trials was

17%. Utilizing our planned engagement strategies and with the Moonshot Engagement grant, we proposed to enroll Black/African American patients onto Moonshot Biobank protocol at greater than 17%.

After establishing increased enrollment of African America/Black patients onto the Moonshot Biobank as a primary goal, we developed complementary goals that would support our primary objective. These included the establishment of a community advisory council (CAC), design of supplemental educational materials, supporting our physician champions, and identification and orientation of a newly created role, the Engagement Coordinator. We contracted with One Acorn, a local consultancy group headed by Drs. Russell and Sheryl Booker. We designed the supplemental goals to include our research department, our physicians, our healthcare system, and our community, in a collective effort to meet our primary goal.

We established ambitious goals and set tight timelines. During quarter one, we contracted One Acorn, led by Drs. Russell and Sheryl Booker, to provide training and expertise. The Bookers also agreed to support our efforts to form CAC. The Bookers are both life-long Spartanburg residents and describe themselves as, “deeply rooted in both the African American community and the broader collective impact efforts currently underway across sectors throughout our county.”

Our Moonshot core team participated in a retreat entitled Getting to Know Each Other: Equity and Economic Mobility. During this interactive session, we learned about the disparities in our county, including the fact that zip code can predict life span. Dr. Booker presented eye-opening statistics about our community, reinforcing the importance of health equity.

Additionally, participants shared views, experiences, and the “why” for his or her emphasis on

eliminating health disparities outcomes. This initial session allowed the Moonshot core team to coalesce toward a common goal.

Next, our entire research department and Physician Champions attended training in both Diversity, Equity, and Inclusion-Community Engagement and Unconscious Bias. We held these courses to demonstrate our commitment to addressing individual and interpersonal-level barriers and to allow participants to understand their own potential biases. We surveyed participants following the training and 45% found it relevant and planned to implement it in their daily interactions.

Additionally, One Acorn facilitated a meeting between our Moonshot leadership group and Veronica Carlisle, MPH, CHES, Senior Community Health Educator, Community Outreach and Engagement for Lineberger Comprehensive Cancer Center to hear about how Lineberger successfully developed a Community Advisory Board to, “meaningfully engage the community in its cancer research, clinical care, and programmatic efforts to better understand and serve the population’s needs”. This interaction allowed us to ask questions and understand the process of developing a community advisory board from the ground up.

Next, Dr. Russell Booker and Melyssa Foust, MSN, RN met with Spartanburg Regional Healthcare System’s Senior VP System Strategy & Community Health, Elizabeth Fletcher, to discuss the proposed CAC, solicit input, and garner senior leadership support. We also met with Kristy Caradori, Foundation Executive Director & Senior VP Institutional Advancement, to discuss the proposed council and its interaction with our Foundation and Foundation Boards. Dr. Booker also reached out to local community leaders regarding Moonshot and our plans to form a CAC to solicit input.

We chose Dr. Tondre Buck, and Dr. Michael Humeniuk as Physician Champions for their respective expertise in multiple myeloma and prostate cancer as well as for their dedication to clinical trial enrollment. Additionally, we anticipated Dr. Buck and Humeniuk would train and encourage their peers to refer and enroll to the Biobank.

Originally, we identified a current Research Coordinator to function as the Engagement Coordinator 25% of her time. When she resigned, we re-worked the job description and created a full-time position to support the Moonshot Biobank as well as other research engagement activities. We posted the newly created position of Research Engagement Coordinator during quarter one and began interviewing of qualified candidates. We offered the position to and Audrianna Carrington, MS, a recent graduate of the Masters in Community Engaged Medicine program from Furman University who also holds an undergraduate degree in chemistry from Spelman College. When she accepted, we knew we were making great progress.

Building on the efforts initiated during quarter one, our Moonshot team as well as the Bookers from One Acorn, met with the Executive Director of the Spartanburg Regional Foundation, Kriti Caradori, and Director of Diversity and Language Services, Dr. Marchele Garrett, to discuss our plans for the CAC. The Offices of Diversity and Inclusion would house the CAC to ensure sustainability and to offer structure and support. We developed a one-pager to use when soliciting membership for the CAC. Our plans were for the CAC to be comprised of community leaders and people effected by cancer, specifically multiple myeloma, or prostate.

In efforts to build community support, Kamara Mertz-Rivera, UC NCORP Administrator, and Melyssa met with Spartanburg Regional Healthcare System Director of Community Health Policy and Strategy, Carrie Rothschild, and the Director of Access Health Spartanburg, Summer Tebalt, on June 7. We presented on our research department, the Moonshot protocol, and our

engagement plans. The meeting allowed us to build collaborations that will benefit our community members.

During Quarter 3, the CAC met for the first time. As this was at the height of COVID, we met via Zoom. We had provided the community members gift cards for a local food delivery service so that we could “share a meal.” The CAC is comprised of community leaders and disease ambassadors, people who have been either diagnosed with cancer or who have cared for a loved one with cancer. We worked hard to ensure that we built support from SRHS leadership so that, even if the funding were gone, the CAC would continue. SRHS leadership has demonstrated support myriad times. For example, our Foundation funds honorariums for the ambassador’s attendance. Additionally, we just held our second-annual CAC retreat and system VPs were in attendance.

Planning, determination, challenging work, and solicitation of support went into creating our CAC; it has been worth all the effort. It is so important in research to solicit input from the community one serves. Without that input and engagement, how can we expect to put people on trials? How can we expect to build relationships? How can we understand one another? We know our CAC is just a small part of building these relationships, but it is part of our bigger efforts to increase historically underrepresented populations onto clinical trials. As for measure of success? Currently, we are the number one enroller to the Moonshot Biobank and our enrollment of patients identifying as Black/African American is 50%.



Ms. Julia Lyons, Community Ambassador and Moonshot participant discussing her multiple myeloma journey and reason for participation.



Ms. Audrianna Carrington, MS, presenting Moonshot updates.



Some of the CAC members and support staff