

Health Equity Report Card (HERC)

Recommendations to Reduce Racial Disparities in Access to
Guideline-Adherent Cancer Care
(Updated February 2024)

Community Engagement



- Reflect Community Demographics in Practice Leadership
- Use Culturally and Linguistically Appropriate Wording
- Partner Formally and Equitably with Community-Based Organizations
- Develop Programs Based on Community Health Needs Assessments

Accessibility of Care and Social Determinants of Health



- Facilitate Access to Non-Emergency Transportation
- Collect and Utilize Data on Social Determinants of Health
- Offer Flexible Hours for Screening and Treatment
- Offer Representative Patient Navigators and Community Health Workers
- Establish a Process to Connect Patients with Resources
- Provide Staff Training to Reduce Barriers to Clinical Trial Participation

Addressing Bias in Care Delivery



- Embed Diversity, Equity, and Inclusion in All Policies
- Recruit, Retain, and Promote Underrepresented Researchers and Practitioners
- Utilize Health Information Technology and Workflow Processes to Prevent Disparities in Care
- Incorporate Disparities and Equity Framework into Quality Improvement Activities
- Provide and Require Annual Training to Promote Health Equity for All Employees

Quality and Comprehensiveness of Care



- Refer Patients to Preventive and Supportive Services where Appropriate
- Discuss Clinical Trial Options with All Patients
- Establish Comprehensive Survivorship Program
- Discuss Germline and Somatic Biomarker Testing with All Patients

Read Full HERC Recommendations at www.NCCN.org/herc

Read Policy Change Recommendations at www.NCCN.org/acce-policy

Elevating Cancer Equity Working Group Members

- **Chair: Shonta Chambers, MSW**
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- **Chair: Darcie Green**
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