



January 14, 2015

Ms. Laura Wilborn  
Division of Legislative Automated Systems  
201 North 9th Street  
General Assembly Building, Suite 660  
Richmond, Virginia 23219

Dear Ms. Wilborn:

On behalf of the Cancer Action Coalition of Virginia, it is our pleasure to submit the attached report to the Governor, the General Assembly, and the Joint Commission on Health Care as requested in House Joint Resolution No. 56 of 2010.

The Cancer Action Coalition of Virginia (CACV) is a coalition of oncology professionals and patient advocates from throughout the Commonwealth. CACV is a non-profit, 501(c)(3) organization. This status allows the coalition to solicit funds, which are tax-deductible to the provider. CACV members, in partnership with the Virginia Department of Health, create a blueprint for community-based cancer prevention and control activities in the Commonwealth; the document is the *Virginia Cancer Plan, 2013 - 2017*. The Plan contains goals, specific objectives, methods to achieve objectives, and standards used to measure success. In 2014, coalition teams selected goals laid out in the Plan and performed activities to reach them.


The CACV public health mission is to ease the burden of cancer in Virginia. To this end, coalition members focus on planning, developing, and carrying out actions that promote cancer prevention and control. Coalition objectives emphasize prevention activities, conferences, workshops, and educational programs. Achieving cancer plan goals requires that member organizations and individuals collaborate.

The CACV Executive Board worked closely this year with the coalition's action teams as these teams selected objectives and worked to achieve them. The *Virginia Cancer Plan* presents these objectives. The four CACV action teams are 1) Early Detection, 2) Prevention, 3) Survivorship and Palliative Care, and 4) Treatment. We attach a comprehensive summary of 2014 team accomplishments.

Please contact Carlin Rafie at 804-628-2680 or Christina Sheffield at 434-465-5194 to answer questions about the CACV report. Thank you for distributing the report to

Virginia's legislators and citizens.

Sincerely,

A handwritten signature in black ink, appearing to read "Carlin Rafie". The signature is fluid and cursive, with the first name being more prominent.

Carlin Rafie, PhD, RD  
Board Chair  
Cancer Action Coalition of Virginia

A handwritten signature in black ink, appearing to read "Christina Sheffield". The signature is cursive and flows across the line.

Christina Sheffield  
Board Vice Chair  
Cancer Action Coalition of Virginia

Enclosure



**Cancer Action Coalition of Virginia  
Report to the  
Governor,  
General Assembly,  
and the  
Joint Commission on Health Care**

**January 13, 2015**

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## **CACV Mission and Members**

### **Mission**

Develop, promote, and assist implementing the *Virginia Cancer Plan (VCP)* to

- Reduce cancer incidence in Virginia;
- Reduce the financial, psychological, and spiritual effects of cancer;
- Improve the quality of life for cancer survivors; and
- Facilitate collaborative partnerships in cancer prevention and control.

### **Members**

- Members constitute a cross-section of parties that have a professional or personal interest in cancer prevention and control issues.
- Members are not-for-profit organizations, community-based organizations, academic institutions, public health agencies, individuals, private businesses, and health care organizations.
- Members collaborate, providing expertise in identifying the burden of cancer in Virginia, working to reduce risks, promoting state-of-the art treatment, and enhancing survivorship.

### **Virginia Cancer Plan Highlights**

The Cancer Action Coalition began working on the third **Virginia Cancer Plan, 2013-2017**. This plan follows plans produced in 2004 and 2008. The distinctive feature of the plan is it defines primary prevention and control goals, provides specific methods or strategies to achieve the goals, and presents measures to evaluate progress. The report describes activities and results each action team accomplished during 2014. The appendix reproduces the text of HJR 56, which requests that CACV provide annual reports to the Governor, the General Assembly, and the Joint Commission on Health Care regarding changes to the Virginia Cancer Plan.

CACV as an organization plans and carries out organization-wide prevention and control activities. These activities support all action teams. CACV organization activities in 2014 included:

*Organizing quarterly meetings.* The purpose is to disseminate the newest available and locally applicable cancer prevention and control information to the entire membership. The total attendance at quarterly meetings in 2014 was 206.

*Producing and distributing a weekly electronic newsletter.* The newsletter keeps CACV members up-to-date with Virginia prevention and control activities.

More than 200 CACV members receive the newsletter. It also is posted to the [CACV website](#).

*Providing information.* CACV provides information to Virginia's citizens. Major categories include incidence and mortality statistics, community cancer resources, patient navigation services, prevention and control information, and CACV activities. The information is available on the [CACV website](#). In 2014, the CACV web site logged 10,370 visitors of whom 5,478 were new.

*Collaborating with the Virginia Department of Health.* CACV, in collaboration with VDH, finalized and distributed the 2013 - 2017 Virginia Cancer Action Plan. The plan was distributed to Virginia Legislators who are members belonging to the Cancer Caucus, Health, and Finance Committees.

*Scheduling panel discussions.* Panel discussions focus on information useful to one or more actions teams. In 2014, these were:

*Palliative Care: Building Multi-disciplinary Programs to Increase Awareness and Utilization of Resources in Cancer Care* oriented to the Survivorship and Palliative Care Action Team at the March general membership meeting; 59 people attended.

*Colorectal Cancer: Taking Action Through Community-Based Initiatives That Increase Cancer Screening Rates Among Virginians* oriented to the Early Detection Action Team at the June meeting. Thirty-five people attended.

*Accelerating HPV Vaccine Uptake in the Commonwealth* for the Prevention Action Team at the September Meeting. Fifty-nine attendees at five broadcast sites across the state attended.

*Joining Forces on Tobacco Issues in the Commonwealth*, a joint meeting of CACV and the Tobacco Free Alliance of Virginia. Panelists from the Virginia Cancer Registry, the Virginia Department of Health Tobacco Use Control Project, the American Cancer Society, and community groups implementing tobacco use prevention projects made presentations. Fifty-three members from both coalitions attended this December meeting.

## **Action Team Accomplishments**

### **Prevention Action Team**

Cancer prevention includes those actions that individuals and communities take to promote healthy lifestyles. Changes in behaviors, policies, and environments fit into prevention activities. Prevention Action Team efforts focus on reducing the number of people each year who develop cancer and whose quality of life suffers as a consequence.

### **Prevention Action Team objectives**

1. Reduce exposure to cancer causing substances such as tobacco and second-hand smoke, ultraviolet radiation, potential carcinogenic additives, and environmental carcinogens such as radon;
2. Reduce the risk of cancer for all Virginians by encouraging an active lifestyle and healthy eating; and
3. Improve public awareness and knowledge of age-appropriate preventive action as well as screenings and self-examinations.

### **Prevention Action Team Activities**

*Radon Awareness.* A panel discussion, *Radon – Testing, Treatment and Resources*, informed radon outreach efforts established in the Virginia Cancer Plan 2013-2017. The 2014 General Assembly passed legislation to test daycare centers for radon. The team carried out this activity in service of the prevention objective to reduce exposure to environmental carcinogens such as radon.

*Sun Safety Awareness programs.* The goals of sun safety programs are to increase children's awareness of sun safety and employ behaviors to increase sun safety. The team implemented the EPA *SunWise -Youth Sun Safety Awareness* program, and targeted students in grades K-8. Sun Safety programs served 834 students at nine park and recreation sites and youth organization sites. This initiative served the Plan objectives to improve public awareness and impart knowledge of age-appropriate preventive action, screenings, and self-examinations.

### **Other prevention and control activities**

Significant cancer prevention and control activities are organized and carried out by organizations across the state. These are not directly associated with CACV action teams, but the coalition nonetheless encourages them and usually has individual coalition members as participants. In 2014, several prevention and control activities were:

*Free mammograms.* The Sentara Rockingham Memorial Hospital Women's Center, partnering with the RMH Foundation and the Community Donors of Friends, provided 111 free mammograms at the RMH Women's Center and a mobile mammography unit. The screening tests were offered to uninsured women aged 40 or above. Education about mammography and early detection was provided.

*Healthcare provider tobacco cessation training.* The Alliance for the Prevention and Treatment of Nicotine Addiction in Chesapeake carried out training sessions for providers to use effective tobacco cessation interventions, called Ask-Advise-Refer. The sessions followed U.S. Public Health Service clinical practice guidelines on treating tobacco use and dependence.

*Local tobacco tax.* The Charlottesville *Citizens Against Youth Smoking Task Force* proposed a tobacco tax increase in Charlottesville of 15¢ per pack of cigarettes. The Charlottesville City Council adopted a 20¢ increase, to 55¢ per pack. American Cancer Society statistics show teenagers are price-sensitive; increased cost reduces the number of teens who smoke.

*Annual women's health conference.* Women's Health Virginia sponsored its annual conference in Charlottesville. The conference, *Can the Chains Be Broken? Facing the Challenges of Genetic and Other Familial Health Risks*, included discussions on Links to Cancer and Links to Risky Behaviors: Diet, Exercise, Substance Use, and Addiction. Conference organizers offered education about HPV vaccines to providers.

*Colorectal cancer prevention.* Hitting Cancer Below the Belt (HCB2), a Richmond-based 501(c)(3) organization, staged a 5K run, *Boxer Brief Battle*, in Richmond. Participants raised money for colon cancer prevention. A total of 30 free colonoscopies were offered through Access Now in Central Virginia. Plans for 2015 Boxer Brief Battle events are underway. To address fears and misconceptions about screening methods, materials on gastrointestinal (GI) health, the signs and symptoms of colorectal cancer, and the importance of family history were distributed.

*Virginia Breast Cancer Foundation (VBCF):* Conducted education and provided materials at the Remote Area Medical Volunteer Corps (RAM) annual event in Wise County. VBCF distributed materials targeting breast, prostate, ovarian, lung, and cervical cancers.

## **Early Detection Action Team**

The Early Detection Action Team promotes finding cancer before symptoms or signs occur. Cancers generally are more easily treated and cured when found early. Decreasing the incidence of late-stage cancer diagnosis is a primary goal of early detection efforts.

Early Detection Action Team objectives are:

1. Increase distribution of age-appropriate and evidence-based screening guidelines and perform educational activities in Virginia health districts experiencing the highest mortality;
2. Increase cancer screening rates in the state's population by 10%; and
3. Support health care providers to promote age-appropriate, evidence-based early detection guidelines.

### **Early Detection Team activities**

*Coordinating with the CACV Board.* The Early Detection Team developed a panel discussion, *Colorectal Cancer: Taking Action through Community-Based Initiatives That Increase Cancer Screening Rates Among Virginians* for the CACV the June meeting. One outcome is that a working group formed to implement colorectal cancer screening initiatives. This group will work to promote colorectal cancer screening to meet the national target of 80 percent coverage by 2018. The state goal as recorded in the Cancer Plan is to increase screening rates among Virginians by 10%.

*Screening guidelines and education.* The team developed screening guideline materials. These materials assist Virginians to obtain screening information that is reliable and up-to-date. A team also created a support letter. Professionals performing education and screening activities use this letter to describe their activities and report them to CACV.

### **Other prevention and control activities**

Significant cancer prevention and control activities are organized and carried out by organizations across the state. These are not directly associated with CACV action teams, but the coalition nonetheless encourages them and usually has individual coalition members as participants. In 2014, several prevention and control activities were:

*Breast cancer screening.* The Virginia Breast Cancer Foundation (VBCF), which has five chapters in the state, advocates for and educates about breast cancer screening. In 2014, VBCF distributed more than 150,000 items of free educational materials. These items include Pink Ribbon Cards and Breast



**Health Basics brochures.** The Guide for the Newly Diagnosed, produced by the partner organization Living Beyond Breast Cancer 501(c)(3) is a compilation of information for women who are newly diagnosed.

**Worksite wellness.** The Cancer Resource Center of Southern Virginia partnered with the Danville Regional Medical Center on its *Wellness Works* program. In 2014, the program reached 70 employers.

**Colorectal cancer screening.** The Cancer Resource Center of Southern Virginia partnered with Sanofi Pharmaceuticals and the Danville Science Center to bring the *Strollin' Colon* interactive exhibit to the Center during the River District Festival. The focus was on colorectal cancer screening, risk factors, risk reduction, and healthy lifestyles.

**Breast cancer awareness.** The Komen Foundation, the Virginia Breast Cancer Foundation, VCU Massey Cancer Center, representatives from the faith community, and members of the community service organization Guardian Angels partnered for a third time to jointly sponsor the annual *Time to Live* walk in downtown Richmond. Volunteers visited 1,600 households and trained more than 50 residents in breast health basics.

**Screenable cancer activities.** The American Cancer Society (ACS) partnered with three Virginia primary care practices to work with staff at Federally Qualified Health Centers (FQHC) to increase the screening and early detection of colorectal, breast, and cervical cancers.

**Breast cancer screening.** *Community Health Advisors (CHA) of the Portsmouth Partnership to Beat Breast Cancer* and the *Community Network Partners of Portsmouth* collaborated with the VDH Cervical Cancer Early Detection Program (BCCEDP) to provide mammograms to over 125 women. Further, the partners educated more than 200 women about breast cancer awareness, early detection, and prevention.

**Oral, head, and neck cancers.** In April, Southside Regional Medical Center (SRMC) in Petersburg offered free oral, head, and neck cancer screenings. Hospital staff provided 57 screenings during the one-day event.

**Screening for breast, cervical, prostate, and skin cancer.** The five hospitals in the Riverside Health System carried out multiple early detection activities. These included:

- Ten free screening activities, reaching 480 participants.
- Thirty health education events that served 2,175 participants.
- Ten monthly cancer survivorship support groups.
- Acting as an Every Woman's Life breast and cervical screening program provider, serving 401 women during the 2013-2014 fiscal

year, of which there were 15 breast cancer patients, 1 detected pre-cancerous condition of the breast, 1 detected cervical cancer case, and six detected pre-cancerous cervical conditions.

## **Treatment Action Team**

The Treatment Action Team promotes access to effective multidisciplinary cancer treatment, to innovative treatments, and to clinical trials while maintaining the quality of life.

### **Treatment Action Team objectives**

1. Educate providers about national care standards and guidelines;
2. Promote knowledge and awareness of patient navigation programs and services in Virginia; and
3. Connect Virginians to information and access to innovative, evidence-based cancer treatments.

### **Treatment Action Team activities**

*Advances in treatment.* The Treatment Team developed a panel discussion of personalized medicine for the general membership meeting in March. The panel, *Personalized Medicine: Research is Reality*, discussed the emerging synthesis of traditional and molecular / genomic approaches to cancer treatment. A result of the discussion is the Treatment Team is developing a special web-based seminar on this topic to be offered in January 2015. The Plan objective these activities serve is to educate Virginians about innovative, evidence-based cancer treatments.

*Personalized cancer care.* The Virginia Public Radio show *Virginia Conversations*, with host May-Lily Lee, devoted an entire one-hour broadcast to personalized cancer care in April 2014. Primary topics were how providers can tailor treatments to fit patients, and to hear from cancer survivors who benefitted from it. The program reached most of the state and is available on line at the [Virginia Public Radio](#) web site. This activity educated Virginians about innovative, evidence-based cancer treatments and provided personal, patient-centric accounts of experiences.

## **Survivorship and Palliative Care Action Team**

People living with, through, or beyond cancer are survivors. Family members, friends, and caregivers also are survivors. Palliative care is a systematic application of methods that assist people in daily life, including employment, and in managing practical, legal, and financial needs. The Survivorship and Palliative Care Action Team creates means and opportunities to enhance survivors' quality of life.

### **Survivorship and Palliative Care Action Team objectives**

1. Increase the number of cancer patients who are provided with a comprehensive care summary and follow-up plan;
2. Increase the use of survivorship support services; and
3. Educate patients, families, and health care providers about palliative care.

### **Survivorship and Palliative Care Team activities**

*Palliative care education.* The Survivorship and Palliative Care Team partnered with Danville Regional Medical Center (DRMC) to host the live videoconference *Palliative Care: Building Multi-disciplinary Programs to Increase Awareness and Utilization of Resources in Cancer Care*, on March 13. The videoconference was held at the medical center. The primary goal of the event was to educate patients and health care providers about the use and availability of palliative care.

*Survivorship and palliative care resources.* The Survivorship and Palliative Care Team compiled a resource for palliative care, hospice, and survivorship at the local, state, and national levels. Adult cancer survivors and their caregivers are the targeted audience. CACV posted the guide to the [CACV website](#). Team members also plan to distribute the resource to outside organizations, health care providers, and patients. The Comprehensive Cancer Control Program at the Virginia Department of Health provided significant resources for this project.

*Survivorship oncology clinic.* The Survivorship and Palliative Care Team partnered with the American Cancer Society, the American Society of Clinical Oncologists, and the Leukemia and Lymphoma Society to develop a survivorship oncology clinic. Nurse practitioners (NP) oversee the clinic, which focuses on communicating about health disparities in cancer and effective marketing to the public.

**Appendix: House Joint Resolution No. 56, 2010 Session**

ENROLLED

HOUSE JOINT RESOLUTION NO. 56

*Requesting the Virginia Cancer Plan Action Coalition to report annually on changes to the Virginia Cancer Plan to the Governor, the General Assembly, and the Joint Commission on Health Care.*

*Report.*

Agreed to by the House of Delegates, February 8, 2010

Agreed to by the Senate, March 2, 2010

WHEREAS, cancer is the leading cause of death for people under age 65 in Virginia; and

WHEREAS, between 2001 and 2005, over 154,000 cases of cancer were diagnosed and over 67,000 people died from cancer in Virginia; and

WHEREAS, the Virginia Department of Health identified the need to address cancer as a public health issue and established the Cancer Control Project in January of 1998; and

WHEREAS, as part of the Cancer Control Project, the Virginia Department of Health initiated development of the Virginia Cancer Plan, a state cancer plan for the prevention and control of cancer, and established the Cancer Plan Action Coalition to create the plan; and

WHEREAS, the Virginia Cancer Plan sets forth the state's goals and strategies for all areas of comprehensive cancer control, and includes baseline data, measurable objectives, guidance for design, implementation, surveillance, and evaluation of cancer-related actions and issues for the general public, people with cancer and their families, health care providers, policy makers, and the broader health care system; and

WHEREAS, the Virginia Cancer Plan is regularly updated; now, therefore, be it RESOLVED by the House of Delegates, the Senate concurring,

That the Virginia Cancer Plan Action Coalition be requested to report annually on changes to the Virginia Cancer Plan to the Governor, the General Assembly, and the Joint Commission on Health Care. The Virginia Cancer Plan Action Coalition shall submit to the Division of Legislative Automated Systems an executive summary and report of its progress in meeting the request of this resolution no later than the first day of the 2011 Regular Session of the General Assembly. The

executive summary and report shall be submitted for publication as a report document as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.