

**Cancer Center Without Walls**

Advisory Board Meeting

March 28, 2019

University of Virginia's College at Wise, Chapel of All Faiths

**Attendees and Introductions:** Morgan Barlow, Andrew Barnes, George Batten, Emily Bowen, Donna Brock, Sue Cantrell, Deborah Clarkston, Brian Dunn, Pat Fortner, Betsy Grossman, Rachel Helton, Lindsay Hauser, Patty McAndrews, Sabrina Mitchell, Dianne Morris, Cindy Newman, Kathleen Porter, Sarah Ramey, Scott Schriefer, Ester Thatcher, Margaret Tomann, Peter Valadez, Noelle Voges, Michael Wampler, Judy Willis, Jamie Zoellner. Attending by audio: Raj Balkrishnan, Emma Mitchell

**Welcome:** Jamie Zoellner introduced the new Co-chair from Planning District 1: Margie Tomann

November 2018 minutes reviewed and approved, motion by Judy Willis and second by Scott Schriefer.

**Research Updates:**

**Rural Health Supplement: P30 Grant:** NIH P30 Supplement: Building Research Capacity to Improve Colorectal Cancer (CRC) Screening in Rural Southwest Virginia Clinics

- Partnered with Stone Mountain Health System to move the needle on CRC screening to 80% by 2020.
- Working with 6 clinics, survey patients on barriers/opportunities for CRC screening. Interviewing providers and nurses. Project has gotten UVA and Stone Mtn IRB. Ready to move forward with surveys.
- Goal is to develop and implemented other evidence based interventions. Will work on trying to get additional funding to implement these interventions.

Jamie Zoellner, [jz9q@virginia.edu](mailto:jz9q@virginia.edu)

**Population Health Supplement:** Population Health Assessment in the UVA catchment a multi model survey to look at basic health behaviors and beliefs. The goal will be to get better understanding of demographics, barriers, needs. Looking at what questions are relevant to the region, using phone, on-line, and in person surveys. George Batten, UVA, [gpb2c@hscmail.mcc.virginia.edu](mailto:gpb2c@hscmail.mcc.virginia.edu)

**Newly funded proposal on cervical cancer** (Primary Investigator: Roger Anderson)

- NHI funding for cervical cancer
- Stone Mountain and SWVA Community Health System will be the partners, opportunity to bring on other partners. Contact Roger Anderson's if you are interested in being part of the project. (MEOC has interest)
- 3 interventions: smoking cessation, HPV immunization, HPV self-sampling. Roger Anderson, [ra2ee@hscmail.mcc.virginia.edu](mailto:ra2ee@hscmail.mcc.virginia.edu)

**Submitted proposal to National Outreach Network:** Lindsay Hauser,  
[lh7yn@hscmail.mcc.virginia.edu](mailto:lh7yn@hscmail.mcc.virginia.edu).

**Submitted proposal to National Institute of Health and American Cancer Society:** Kathleen Porter 'weSurvive' cancer survivorship proposal

- Sustainable program for cancer survivors. Pilot looked at feasibility of a single evidence based intervention.
  - Advisory group developed 'weSurvive-' program open to all survivors, genders, in person and telehealth, action planning around individually chosen behaviors.
  - Pilot will be in spring at Clinch Valley (13 week program). Recruitment will be in April, program to begin May-July 2019.
  - Submitting 2 grants (American Cancer Society and National Institute of Health R21) to look feasibility testing. Kathleen Porter, [kiporter@virginia.edu](mailto:kiporter@virginia.edu).
- UVA Karen S. Rheuban Center for Telehealth: updates from Brian Dunn,  
[bnd9n@hscmail.mcc.virginia.edu](mailto:bnd9n@hscmail.mcc.virginia.edu).
- Strategical restructure to help expand telehealth in a more systematic way.
  - Projects currently underway:
    - Survivorship in Head and Neck (DeGuzman, UVA CPH pilot funding), after discharge and 6 month follow up do a distress screening by phone or videoconference. Patient can do it from home or at local telehealth site. Helps also connect supportive care services for the 6 month follow up. Recruiting 10 patients for feasibility study, then 20 additional patients will be added. SWVA patients are also being recruited.
    - Cystoscopy (Krupski, American Cancer Society funding)- Saltville Medical Center now seeing patients, also working with the Health Wagon.
    - Colposcopy (Mitchell, TRCC funding): Mobile device to do colposcopy.
    - Remote patient monitoring- UVA is looking at devices that can go home with patients and can report back data to their care team. Devices range from scales, blood pressure, ENT.
    - Future expansion: tele-oncology for genetic counseling, clinical trials recruitment and consenting
    - Appalachian Prosperity Project Symposium- Highlight partnerships and understand the needs and fostering of collaboration in the area.
    - Lung Cancer Screening Program at Buchanan General has picked up, can also see patients from West Virginia

#### **Cancer Center Without Walls Board Updates and Announcements**

- Virginia Department of Health/Lenowisco District and Stone Mt. Health: Hep C program, cancer prevention supported through UVA Infectious Disease team, uses telehealth for visits. Endoscopy suites needed.

- Telecolposcopy has a 2<sup>nd</sup> Nurse Practitioner to cover Cumberland Plateau. Works with Every Women's Life patients to help them get their colposcopy. Lenowisco Health District has LEEP equipment, but no trained staff at the Health District. UVA used to come but hasn't come in a while so that proceed is not happening anymore. Sue Cantrell, [sue.cantrell@vdh.virginia.gov](mailto:sue.cantrell@vdh.virginia.gov).
- Virginia Department of Health/Mount Rogers District: has held the 3<sup>rd</sup> harm reduction program and has 16 participants, the program is growing quickly. They are referring their harm reduction patients to Saltville Medical Center for the Hep C clinic. Cynthia Newman, [Cynthia.newman@vdh.virginia.gov](mailto:Cynthia.newman@vdh.virginia.gov).
- Mountain Empire Older Citizens: has hosted 2 Understanding Cancer workshops, AARP and Trinity Baptist Church
- MEOC Scott County School nurses showed "Someone You Love," a movie on HPV
- MEOC working another Understanding Cancer workshop, for April, with a local Methodist Church
- MEOC Fundraiser, Harold Lester Golf Tournament, will be held June 14<sup>th</sup>  
Dianne Morris, [Dianne.morris@moec.org](mailto:Dianne.morris@moec.org).
- Concern about how we will get patient numbers from Ballad Health when patients are seen in TN. All payers database can pull people by their residence (~70 of patients would pull up on this). It is labor intensive to use this process. HD uses this for mammograms. Uniform Data System (HRSA) requires all clinics to report to it. Cancer registry, data is shared across state lines.
  - The UVA core can help drill down data
  - Group suggested a resource list for CCWW as a first line for members to use. UVA Core will take this on for the next meeting.
- Medicaid expansion- Clinch Valley working on educating those patients who newly have insurance to let them know what services they have access too.
- Clinch Valley Oncologist, Dr. Bhat, has a passion for CRC screenings, doing talks and lunch and learns.

**Cancer Center Without Walls has a Facebook page available, please like and share.**

**Patient-Centered Outcomes Research Institute: (PCORI) Contract Update**

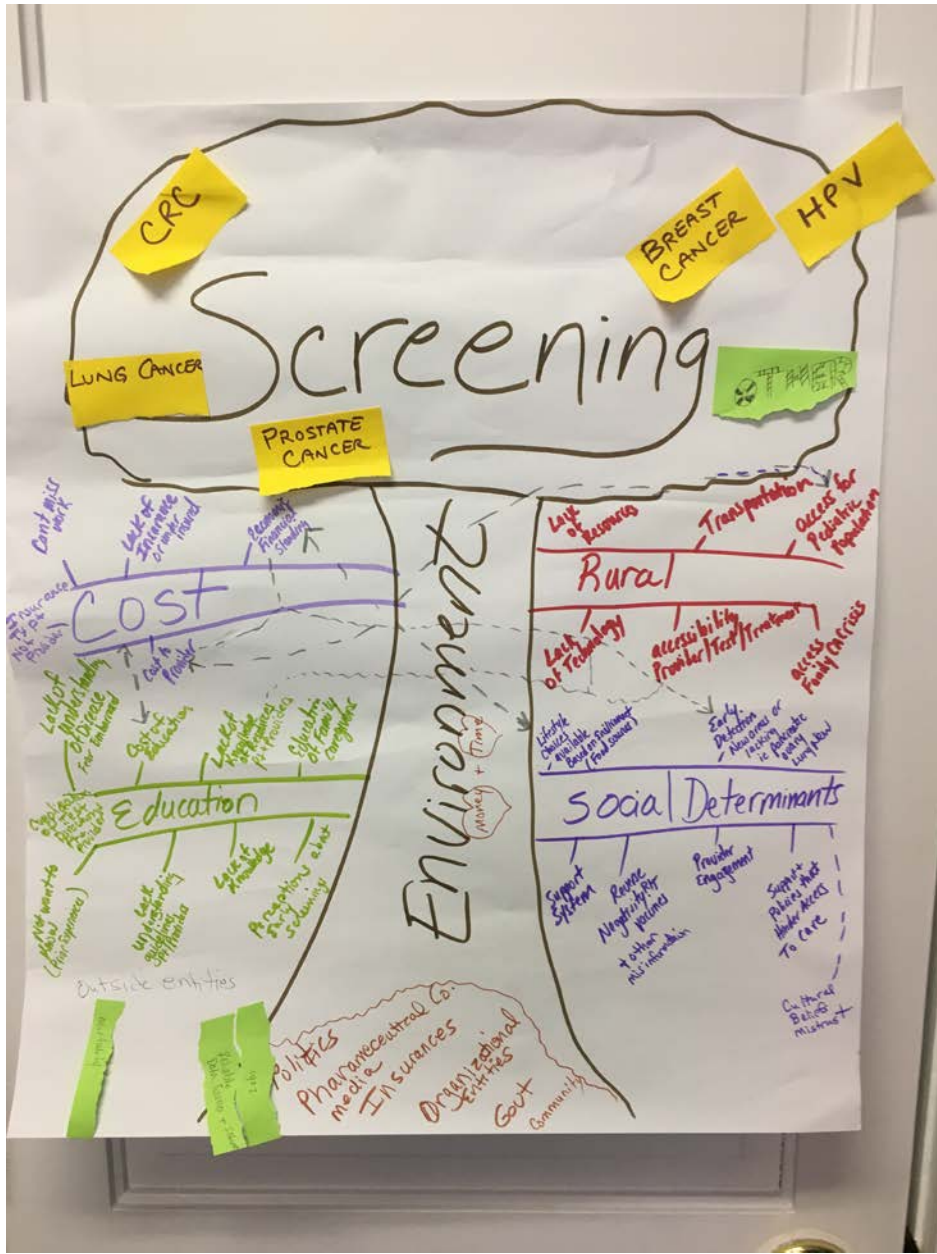
- Review PCORI milestones
- Updates on 1<sup>st</sup> 6-month accomplishments
- Currently on track with our milestones
- Press Release went out to help grow the group to include more cancer survivors. It is a continuous process and an area we will continue to focus on.
- Leadership team came to UVA Cancer Center

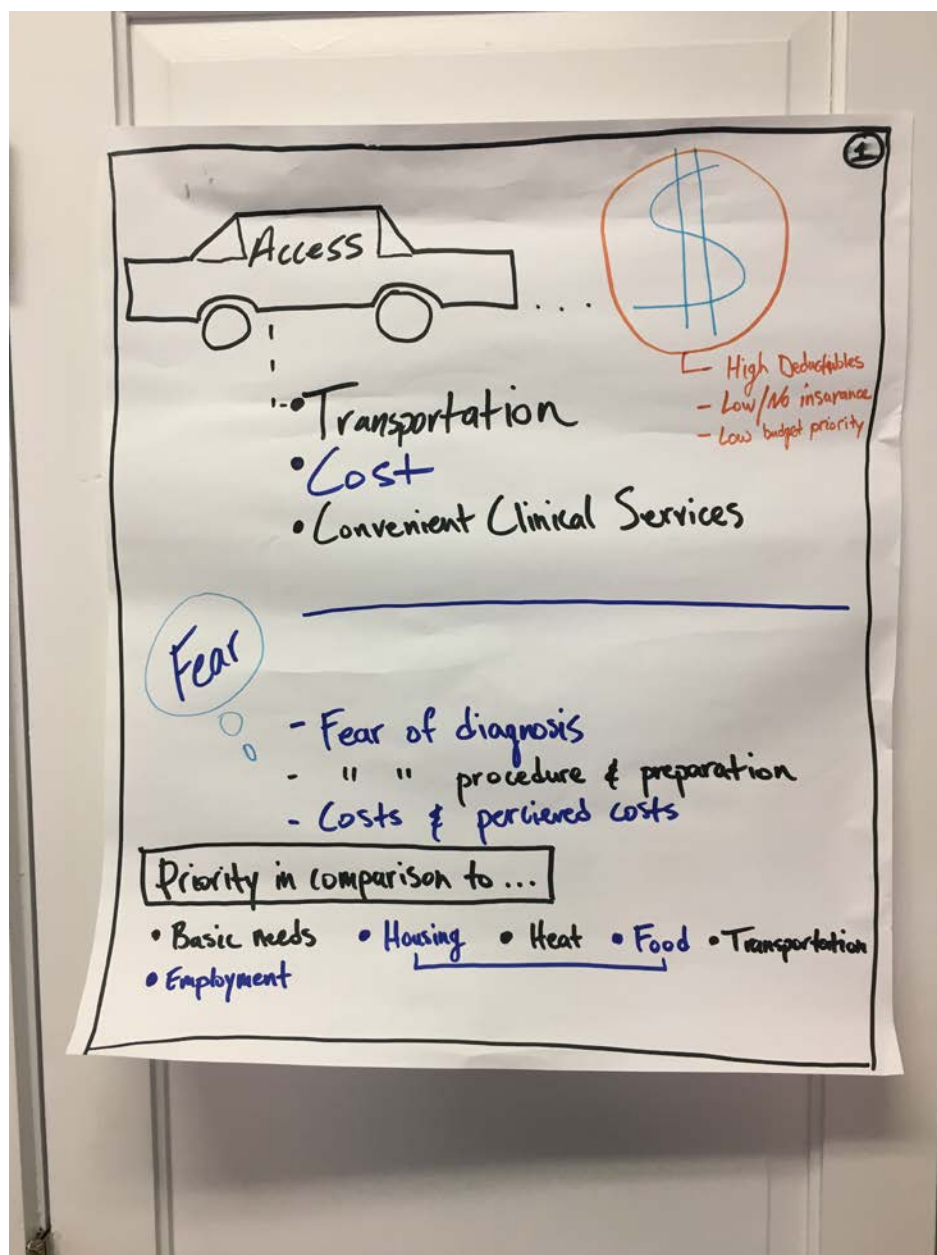
- Researcher and community town hall, summary of themes were developed
- Attended CPH symposium
- Webinar was hosted in February that focused on intervention for prevention and screening in rural populations. (recording will be available online soon)
- Upcoming PCOR training for UVA researchers in April
- Website is moving forward

**Progressing the Planning Process for the PCORI Contract: Comprehensive Participatory Planning and Evaluation work:**

- Long-term goal: Build and sustain capacity of rural Appalachian communities to prioritize, act on, and decrease cancer disparities.

Divided into groups working on Prevention or Early Detection to set priorities based on “what is most meaningful for prevention or early detection and what causes a lack of prevention or early detection.” Each group used casual models to identify priorities which were then shared with the whole group.





## What is Meaningful?

(2)

### Education:

- Provider
  - Public
- > Standards of Care

### Lung Cancer Screenings

- Highest Mortality

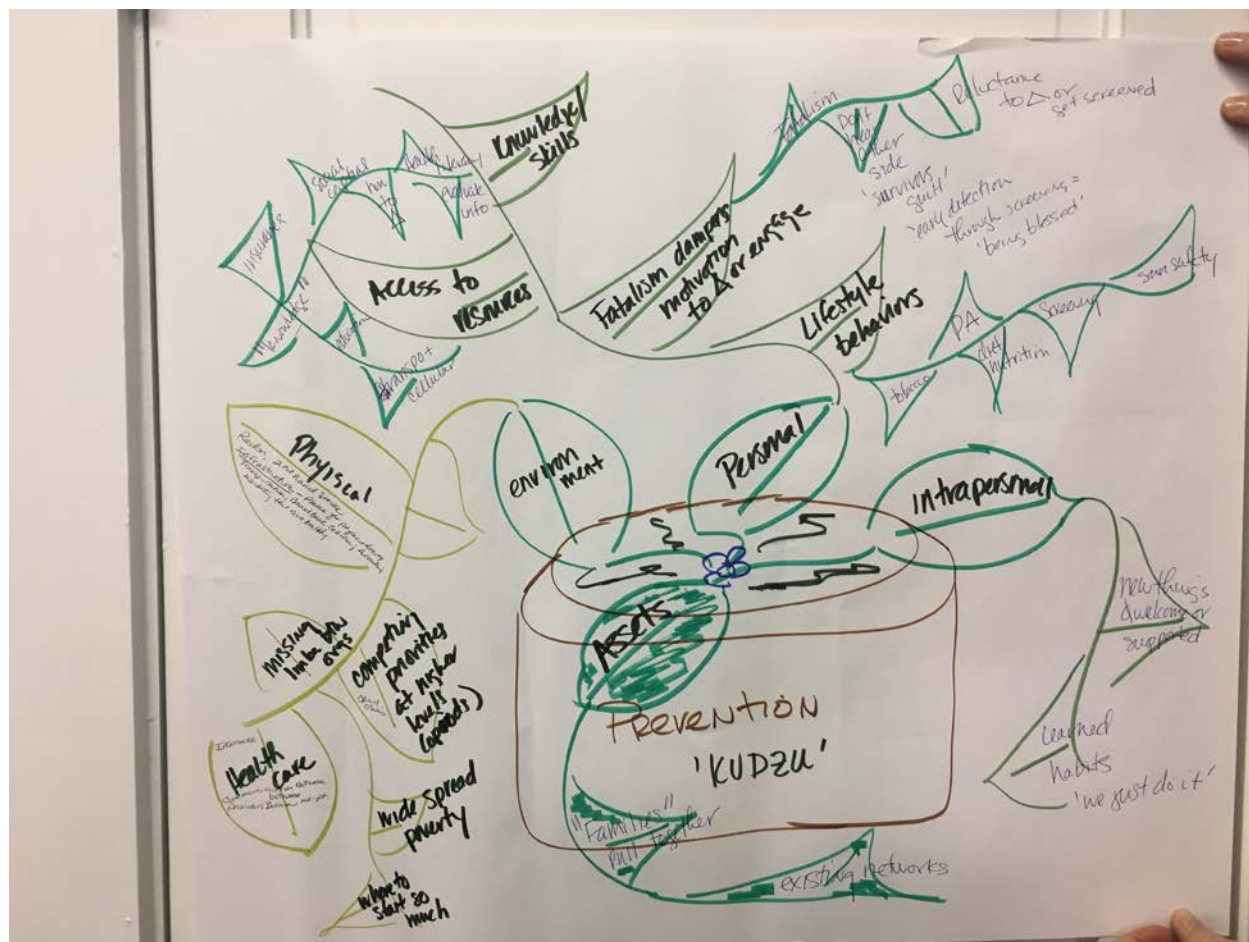
### Cost:

- Insurance

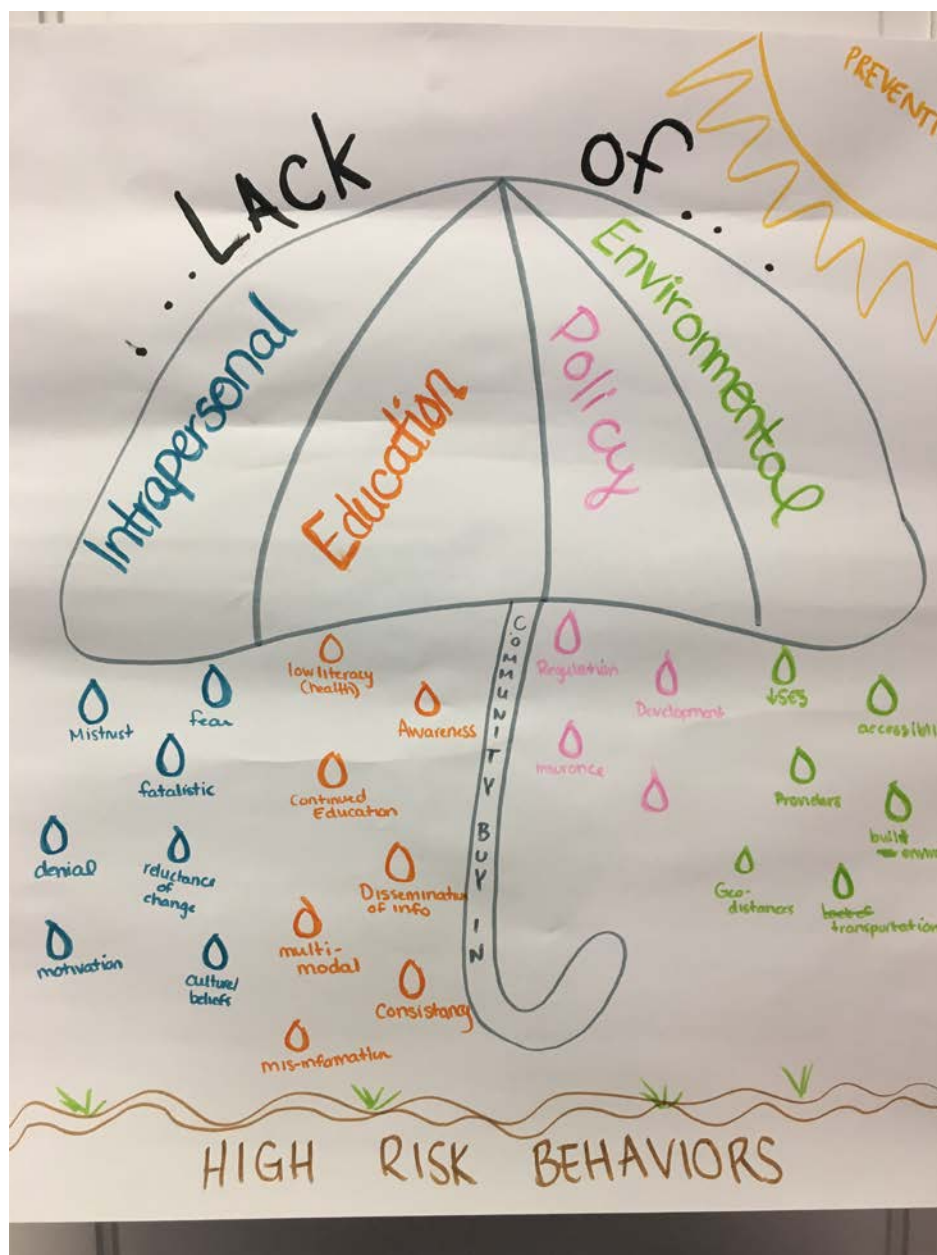
### Access:

- Consistent Availability

### Culturally Competent Health Care Workforce







### Summation, setting next meeting date, and next steps

- Upcoming meetings: Thursday May 2, at Lebanon & Thursday August 1, at Abingdon
- Interest in future webinars? If so, what topics?

2:00 **Adjournment**