

# 2023 ANNUAL CANCER SUMMIT

*ACCELERATING MOMENTUM*





# Cancer Screening Guidelines for Average Risk Adults

Talk with your medical provider about what screening tests you need based on your specific risk. Guidelines are based on current U.S. Preventive Services Task Force (USPSTF)\* recommendations. You may be at increased risk for certain cancers due to family or medical history, race or ethnicity, or lifestyle behaviors or exposures.

**Ages  
21-29**

## Cervical Cancer

Pap test recommended for people with a cervix every 3 years, beginning at age 21.



**Ages  
30-39**

## Cervical Cancer

- Pap test recommended every 3 years **or**
- HPV test alone every 5 years **or**
- Both Pap and HPV test every 5 years.



**Ages  
40-49**

## Breast Cancer

Mammograms recommended every 2 years for people assigned female at birth who have breasts, beginning at age 40.



## Colorectal Cancer

Colorectal cancer screening recommended beginning at age 45. Stool-based tests and visual exams (i.e., colonoscopy) are options. Frequency depends on the type of screening test. Talk to your medical provider about which option is best for you.\*\*



## Cervical Cancer

Continue Pap test and/or HPV testing.



**Age  
50+**

## Lung Cancer

At age 50, if you have a history of smoking\*\*\*, talk to your medical provider about getting a low-dose CT scan every year, until age 80.



## Prostate Cancer

At age 55, if you have a prostate talk to your medical provider about your risk and the benefits and harms of screening, until age 69.



## Breast Cancer

Continue mammograms every 2 years, until age 74.



## Cervical Cancer

Continue Pap test and/or HPV testing, until age 65.



## Colorectal Cancer

Continue screening for colorectal cancer. After age 75 discuss with your medical provider.



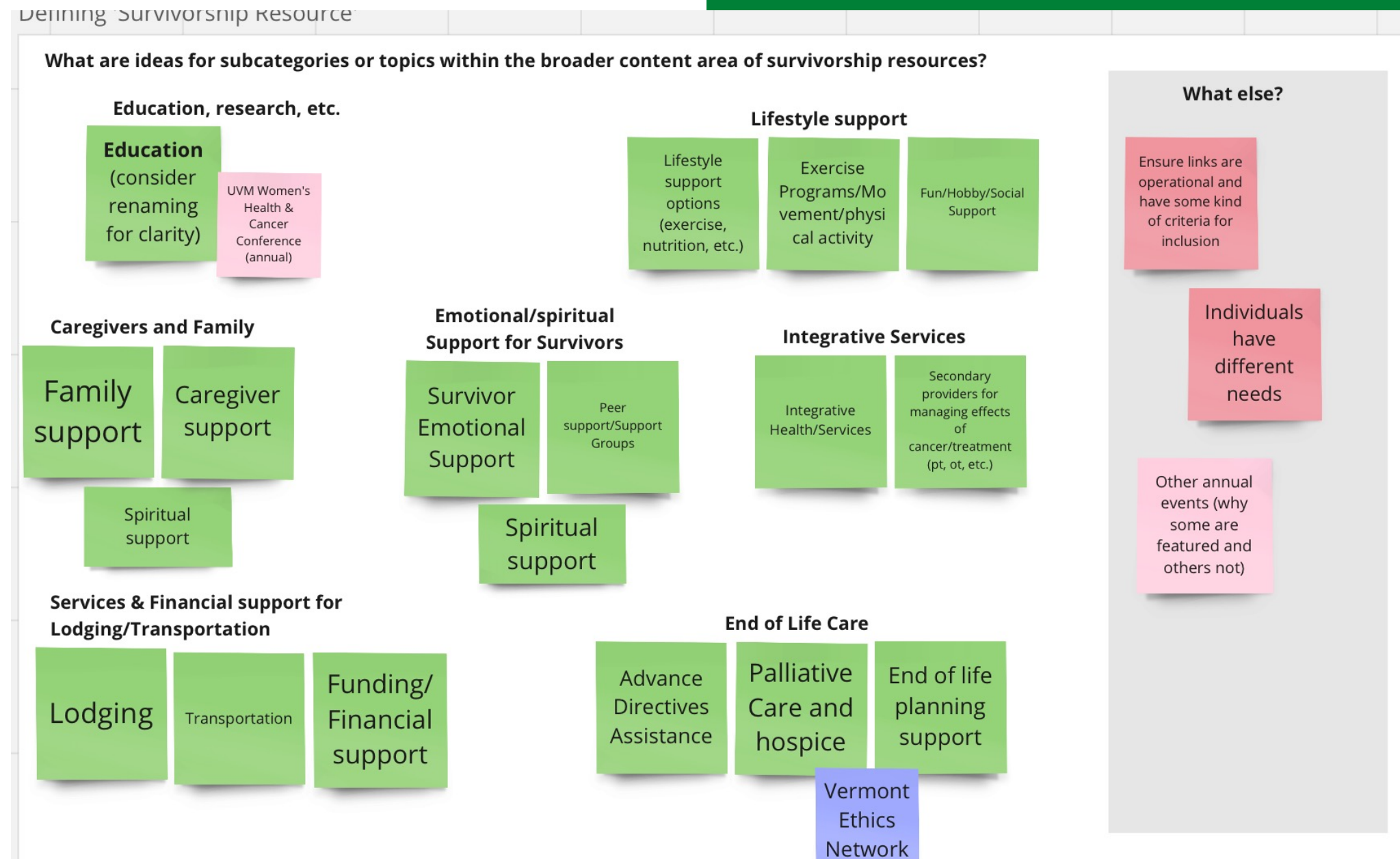
# PREVENTION & DETECTION WORKGROUP

- **Chair:** Lisa Purvis, Director, Community Outreach and Engagement, Dartmouth Cancer Center
- This group meets quarterly for 60 minutes to hear about local and national cancer prevention & early detection programming, data and research. Partners also collaborate on prevention and detection-related projects, such as awareness campaigns and educational toolkits.
- This workgroup recently published a new Cancer Screening Guidelines flyer (shown left). The group hopes this short infographic will be helpful for both providers and the wider community to understand recommended cancer screenings for average risk adults based on age. This follows the USPSTF recommendations.
- A downloadable version of the guidelines can be found at: <https://vtaac.org/cancerscreeningguide/>.



# QUALITY OF LIFE WORKGROUP

- **Co-Chairs:** Kristie Grover, Osher Center for Integrative Health
- This group meets quarterly for 90 minutes to hear about local and national survivorship projects, data and research. Partners also collaborate on quality-of-life related projects, such as resource flyers and social media toolkits.
- VTAAC applied for a \$25,000 supplemental funding opportunity for Year 2 of the workplan (July 1, 2023–June 30, 2024) to go towards a survivorship-focused project. The Quality of Life Workgroup has decided to spend some of the funds on building a Survivorship Resource Center on VTAAC's website. Some of the funds will be spent on an evaluation team and a web developer. Next steps are to identify how this Resource Center will look, what information to gather and how the application process will flow.





## Vermont “Start at 9” Campaign to Prevent HPV Cancers



September 2023

### VT organizations that have endorsed starting the HPV vaccine series at age 9:

- American Cancer Society
- Bi-State Primary Care Association
- Central Vermont Medical Center
- Dartmouth Cancer Center
- Northern New England Clinical & Translational Research Network
- People's Health and Wellness Clinic
- Southwestern Vermont Medical Center
- UVM Cancer Center
- UVM Children's Hospital
- UVM Health Network
- Vermonters Taking Action Against Cancer
- Vermont Dental Hygienists' Association
- Vermont State Dental Society

Dear Vermont Health Care Provider,

The Human Papillomavirus (HPV) is estimated to cause about 37,300 new cases of cancer each year in the U.S.<sup>1</sup>

We have an opportunity to eradicate HPV-associated cancers, yet too few people get the safe and effective vaccine. HPV can cause six different cancers, and the vaccine prevents most diagnoses of these cancers including 81% of invasive cervical and 66% of oropharyngeal cancers.<sup>2</sup> In Vermont, oral pharyngeal cancer is now the eighth most diagnosed cancer among males and females; every year about 108 Vermonters are diagnosed with oral pharyngeal cancer, and 23 die from it.<sup>3</sup>

A nine-valent HPV vaccine (HPV9) is available to protect against multiple strains, including the types that cause most cervical and other anogenital cancers, as well as some oropharyngeal cancers. **The HPV vaccine is approved for ages 9 years through 45 years for ALL GENDERS.** The American Cancer Society and American Academy of Pediatrics (AAP) recommend vaccination beginning at age 9.

In Vermont, only 62% of adolescents aged 13-17 have completed the HPV vaccine.<sup>4</sup> In rural communities, HPV vaccination rates are low, yet incidence and mortality rates of HPV-associated cancers are high.<sup>5</sup> In Vermont, only 59% of rural youth have been vaccinated for HPV, compared to 67% of those living in urban areas.<sup>6</sup>

We must address this preventable public health issue. **You** can make a difference! **Provider recommendation for the HPV vaccine is considered the most effective determinant of vaccine uptake.**

The Vermont Department of Health Immunization Program provides vaccines at no cost to providers for all children and adults. The program is available to all enrolled providers through Vermont Child Vaccine Program (VCVP) and Vermont Adult Vaccine Program (VAVP).

Vermont is partnering with NH, CT, VA, WV, DC, PA, OH, MD, and DE, in a multi-state *Call to Action* to increase HPV vaccination through strong and consistent provider recommendations and the initiation of HPV vaccination starting at age 9. *HPV vaccination is cancer prevention!*

Please review the Provider Call to Action steps below as well as the resources and links at the end of the letter. Vermont's Cancer Coalition, Vermonters Taking Action Against Cancer (VTAAC), is actively supporting this effort through its HPV Taskforce. For more information on how you can be involved in this initiative, please go to [www.vtaac.org](http://www.vtaac.org) or email [Coordinator@VTAAC.org](mailto:Coordinator@VTAAC.org).

Thank you for all that you do to improve the health of your patients. We appreciate your support for this important effort to prevent cancer by increasing HPV vaccination in Vermont.

**Recommend starting HPV Vaccination at age 9!**

# HUMAN PAPILOMAVIRUS (HPV) TASKFORCE

- **Chair:** Leigh Sampson, Associate Director, State Partnerships, American Cancer Society
- Leigh is looking for a Co-Chair! If you're curious about this role, please reach out to Hanna Snyder.
- Collaborating with other states, this Taskforce recently created and released two call-to-action letters – one for health care providers and one for dental health care providers. These letters encourage providers to recommend HPV vaccinations starting at age 9. These letters received endorsements from many organizations and health care systems throughout Vermont. You can view these letters here: <https://vtaac.org/hpv-call-to-action-letters/>.
- This taskforce meets the third Wednesday of every other month for 60 minutes. Next meeting will be focused on a recap of the dissemination plan of the letter, a discussion about vaccinations in schools and ideas for future collaboration.







***“[VTAAC brings] organizations together to support reducing the burden of cancer in Vermont. Together we can achieve a lot more than one sole entity or organization.”***

***–VTAAC Member***



# HEALTH EQUITY COMMITTEE

- **Chair:** Hanna Snyder, VTAAC Coalition Coordinator, Assistant Director for Training and Education, UVM Cancer Center
- This group was created at the end of 2022 to begin to address some of the Vermont Cancer Plan's health equity goals and objectives. Through partnerships in this committee, two LGBTQ+ best practices trainings were hosted by VTAAC, Pride Center of Vermont and YouFirst VT in 2023. Over 70 individuals attended each session.
- A priority setting survey was sent to committee members to identify interests, capacity and next steps. Members are interested in supporting the update of VTAAC's Guiding Principles document with a health equity/plain language focus. The group will be sent a draft of this document in December for review and feedback.
- The Health Equity Committee meets on an ad hoc basis for 60 minutes.



Join Us for an Exciting Training Opportunity!



## LGBTQ+ Best Practices Training

Pride Center of Vermont, Vermonters Taking Action Against Cancer (VTAAC) and You First VT are hosting two LGBTQ+ Best Practices Trainings in May.

Join us!

The trainings will cover a brief overview of identity development, provide exercises to distinguish and understand the components of the LGBTQ acronym, facilitate a discussion around pronouns, discuss how to normalize conversations regarding personal pronouns and will review the minority stress model. The trainings will also hold a wrap-up conversation where participants identify best practices when working with LGBTQ clients using all of their newly gained information.

### Who could benefit from this training?

- VTAAC members and partners
- Public Health Professionals
- You First partners
- Anyone interested in supporting LGBTQ+ Vermonters



## NATIONAL LUNG CANCER SCREENING DAY



### DE Organizations who have endorsed the NLCSD campaign:

**American Cancer Society**  
[www.cancer.org/](http://www.cancer.org/)  
1-800-227-2345

**American Lung Association**  
[www.lung.org](http://www.lung.org)  
1-800-586-4872

**Bayhealth**  
[www.bayhealth.org](http://www.bayhealth.org)  
302-744-7060 (Kent County) or 302-430-5707 (Sussex County)

**Beebe Healthcare**  
302.645.3178  
[www.beebehealthcare.org](http://www.beebehealthcare.org)

**ChristianaCare**  
302-623-0552  
[www.christianacare.org/lung-screenings](http://www.christianacare.org/lung-screenings)

**Delaware Cancer Consortium, Early Detection & Prevention Committee**  
[www.healthylouisiana.org](http://www.healthylouisiana.org)

**Delaware Division of Public Health, Bureau of Cancer Prevention and Control**  
**Screening for Life**  
302-744-1040

**Delaware Imaging Network**  
[www.delawareimagingnetwork.com](http://www.delawareimagingnetwork.com)  
877-990-2121

**Tidalhealth**  
410-543-7006  
[www.tidalhealth.org](http://www.tidalhealth.org)

Dear Medical Provider:

The American Cancer Society National Lung Cancer Roundtable (ACS NLCRT), American College of Radiology® (ACR®), and Radiology Health Equity Coalition (RHEC) have partnered once again for the second annual **National Lung Cancer Screening Day** (“National LCS Day”).

This year’s **National Lung Cancer Screening Day** is on Saturday, November 11. The goal of this event is to reduce disparities, promote access to care, and save lives.

Lung cancer is one of the deadliest forms of cancer and is estimated to claim the lives of over 127,000 Americans this year. Did you know that even though survival rates can be improved significantly by screening, only a small percentage of eligible individuals get screened for lung cancer. **In Delaware, only 27.9%** of those that are eligible reported having a CT or CAT scan for lung cancer screening within the past 12 months. Most cases continue to be diagnosed at distant stage, which is harder to treat and decreases survival. In 2015-2019, **44%** of new lung cancer cases were diagnosed at the distant stage.

Our purpose for this event is to increase screening access for people who cannot take time off during their weekly schedules to get screened for the early detection of lung cancer.

Support National Lung Cancer Screening Day on 11/11 by **referring your eligible patients for screening**. Show them you care about their health. Refer them to a nearby screening center today.

Together, we can make a difference and create a nation where lung cancer is screened for, detected early, treated effectively, not stigmatized, and conquered!

### Let’s work together to save lives!

To easily find a lung screening site near you, click on, [Lung Cancer Screening Locator Tool](#) | [American College of Radiology \(acr.org\)](#)

For more information visit the **National Lung Cancer Roundtable** at [Lung Cancer Screening Day - National Lung Cancer Roundtable](#)

# LUNG CANCER SCREENING TASKFORCE

- **Chair:** Dana Bourne, Tobacco Cessation Specialist, Tobacco Control Program, Vermont Department of Health
- This group is currently working with the American Cancer Society on a media and education campaign around Lung Cancer Awareness Month (November) using a \$15,500 grant awarded to ACS VT to work with VTAAC. National Lung Cancer Screening Day is Saturday, November 11 and with support from VTAAC and ACS, sites across the state will be hosting Saturday screening clinics. Dartmouth Cancer Center, UVM Medical Center, Northwestern Medical Center and all VT VA locations are among those participating.
- Lung Cancer Screening Resources can be found here: <https://vtaac.org/lung-cancer-screening/>.
- Partners from this taskforce are also collaborating with the Department of Corrections to support their efforts to bring lung cancer screening to incarcerated Vermonters.
- This group meets the first Thursday of every month for 60 minutes.





# 2025 Vermont Cancer Plan Year 1 of 5 Status Report

View the Status Report at <https://vtaac.org/vermont-cancer-plan/>. The statewide progress made toward achieving the measurable objectives laid out in the 2025 Vermont Cancer Plan is summarized in this report.

See your impact in action!



## 2025 Vermont Cancer Plan Year 1 of 5 Status Report

Progress as of March 2023

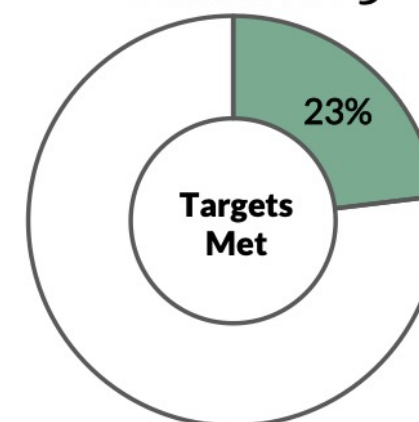
The [2025 Vermont Cancer Plan](#) outlines the five-year shared goals, objectives, and strategies chosen to reduce the burden of cancer in Vermont. Measurable objectives were selected along the cancer continuum, including [Health Equity](#), [Cancer Prevention](#), [Early Detection](#), [Cancer Directed Therapy & Supportive Care](#), and [Survivorship & Advanced Care Planning](#).

The statewide progress made toward achieving the measurable objectives laid out in the 2025 Vermont Cancer Plan is summarized in the pages below.

Reducing the burden of cancer is best achieved through the collective effort of many individuals and organizations. The Vermont Department of Health's Comprehensive Cancer Control Program, Vermont's statewide cancer coalition, Vermonters Taking Action Against Cancer (VTAAC), and a network of community, clinical and nonprofit partners together use the 2025 Vermont Cancer Plan and the Cancer Plan Status Report to guide this work.

Find a list of data source abbreviations on [page 12](#) and an At-A-Glance Status Report on [page 13](#).

### Summary of Progress March 2023





# Skin Cancer Taskforce

- **Chair:** Lisa Purvis, Director, Community Outreach and Engagement, Dartmouth Cancer Center and Sharon Mallory, Comprehensive Cancer Control Program Director, Vermont Department of Health
- Thanks to the collaborative efforts of Dartmouth Cancer Center, IMPACT Melanoma & VTAAC, as part of the Skin Cancer Taskforce, 12 sites across VT were selected to receive free sunscreen dispensers and a start-up supply of sunscreen for their summer programming. The purpose of these free sunscreen stations was two-fold: to provide easy access to SPF 30 sunscreen, as well as remind Vermont residents and visitors that sun protection is critical to their optimal health.
- To see the list of selected sites, more information on the program and sun safety social media toolkits, visit: [www.vtaac.org/free-sunscreen-dispenser-initiative](http://www.vtaac.org/free-sunscreen-dispenser-initiative).





# Coverage for a Follow-up Colonoscopy

Summary Guide for Providers and Medical Offices

## 🚨 IMPORTANT COVERAGE CHANGE:

**Starting in 2023, Medicare, ACA and commercial plans will now cover, as part of preventive care and screening, a follow-up colonoscopy after a non-invasive stool-based test returns a positive or abnormal result for patients 45 years of age and older.**

This change recognizes that a follow-up colonoscopy is a key part of the colorectal screening process, due to the need for visual confirmation of a positive or abnormal result, and means that beneficiaries aged 45 and older will not have out-of-pocket costs for both a non-invasive stool-based test and, if needed, the follow up colonoscopy.

This resource from Fight Colorectal Cancer (Fight CRC) provides information about the critical regulatory change, what it means for providers, and how to code the change correctly.



# COLORECTAL CANCER TASKFORCE

- **Chair:** Rebecca Hewson-Steller, Nurse Navigator, Southwestern Vermont Medical Center
- In March, this group created a media campaign for Colorectal Cancer Awareness Month with shared messaging and a resource page housed on VTAAC's website. These resources can be found here: <https://vtaac.org/resources-2/crc/>.
- Recently, the taskforce worked with FIGHT Colorectal Cancer to co-brand three educational toolkits around cost-sharing for follow-up colonoscopies. There is a summary guide designed for payors, patients and providers. To review these resources, visit: <https://vtaac.org/colonoscopy-toolkits/>.
- This group meets on an ad hoc basis for 60 minutes. Next meeting will be focused on dissemination of these guides, as well as collaborating with other partners who would like to have these co-branded with their own logo.





# STEERING COMMITTEE

- **VTAAC Co-Chairs:** Justin Pentenrieder, Program Manager, YouFirst VT, Vermont Department of Health and Rebecca Hewson-Steller, Nurse Navigator, SVMC
- The Steering Committee recently voted in Rebecca Hewson-Steller as VTAAC's new Co-Chair! Rebecca is the Nurse Navigator at SVMC Cancer Center. She has a passion for collaboration and is already integral to much of the work in this coalition. We're thrilled to have her a part of VTAAC in this new way.
- Sarah Lemnah recently stepped down from her role as VTAAC Co-Chair because she accepted a position as the Vermont Executive Director for the American Red Cross. We will miss Sarah's guidance and leadership as Co-Chair but look forward to future collaborations in her new role.
- At the last Steering Committee meeting, the group reviewed VTAAC's outdated Guiding Principles and are working to re-imagine and update these by-laws. Once reviewed by the Health Equity Committee, the Steering Committee will vote to finalize the document. They will then be shared with VTAAC members.

Vermonters Taking Action Against Cancer  
Partnership Guiding Principles  
*Revised March 21, 2014*

VTAAC's Mission:

*VTAAC provides a forum for collaboration, engagement and sharing of resources for individuals and organizations concerned about cancer in Vermont.*

Purpose

Vermonters Taking Action Against Cancer (VTAAC) was formed in 2005 to develop and carry out Vermont's statewide strategic plan to reduce the impact of cancer on all Vermonters. The *Vermont State Cancer Plan* enumerates shared priorities for cancer prevention, early detection, optimal treatment, and improved quality of life for cancer survivors. The *Vermont State Cancer Plan* guides the activities of VTAAC.

Membership

1. VTAAC voluntary membership includes as many organizations and individuals as possible to achieve the goals and objectives outlined in the *Vermont State Cancer Plan*.
2. **Organizational Member:** an independent organization, agency or group that joins with VTAAC to address one or more specific goals identified in the *Vermont State Cancer Plan*. Organizational Members are free-standing, legal entities that may have memoranda of understanding (MOU's) with VTAAC.
3. **Individual Member:** an individual cancer survivor, advocate, health educator, health care provider or community member, who joins VTAAC to address one or more specific goals of the *Vermont State Cancer Plan*. Individuals may be active in any VTAAC workgroup, receive communications and updates like other members, and may be invited to serve on the VTAAC Steering Committee or be an advisor.
4. **Affiliate:** an independent coalition or group that joins with VTAAC to address one or more specific goals in the *Vermont State Cancer Plan*. Affiliates may have memoranda of understanding (MOU's) with VTAAC.

Staff

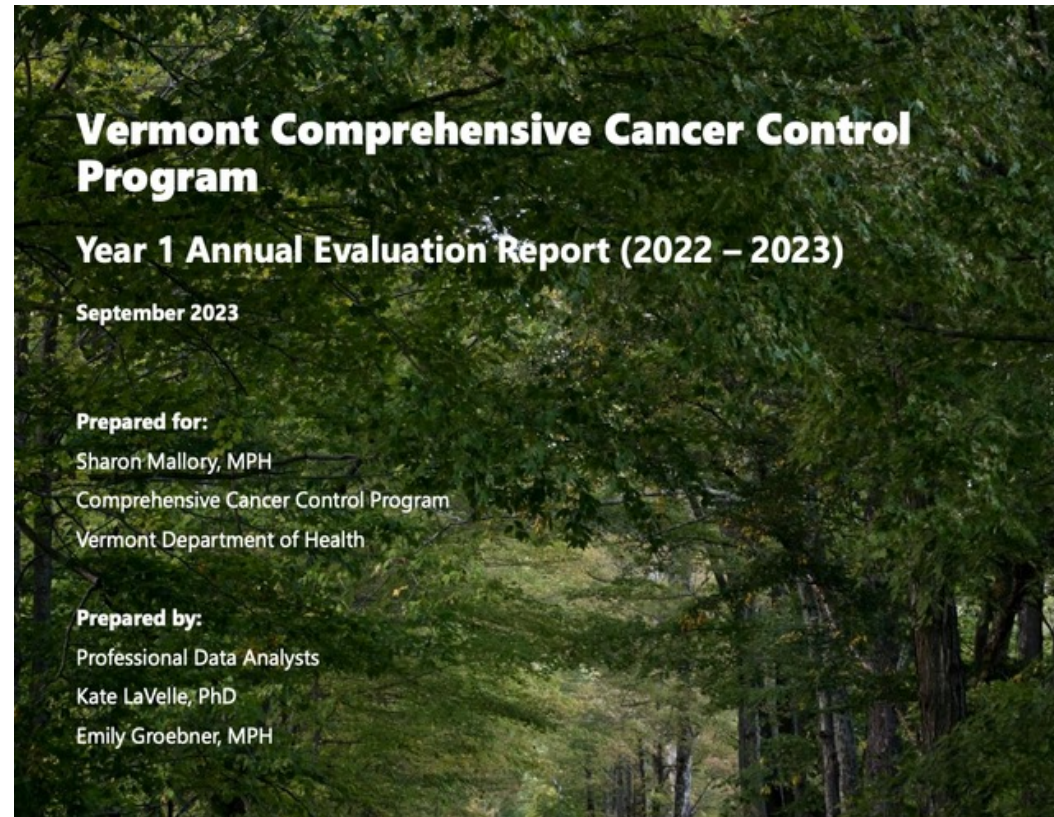
Staffing is determined by CDC Grant funding and Vermont Department of Health employment procedures. Staff may include (but is not limited to) a comprehensive cancer control coordinator and a coalition coordinator. Staff is responsible for managing the operations of VTAAC and the *Vermont State Cancer Plan*.







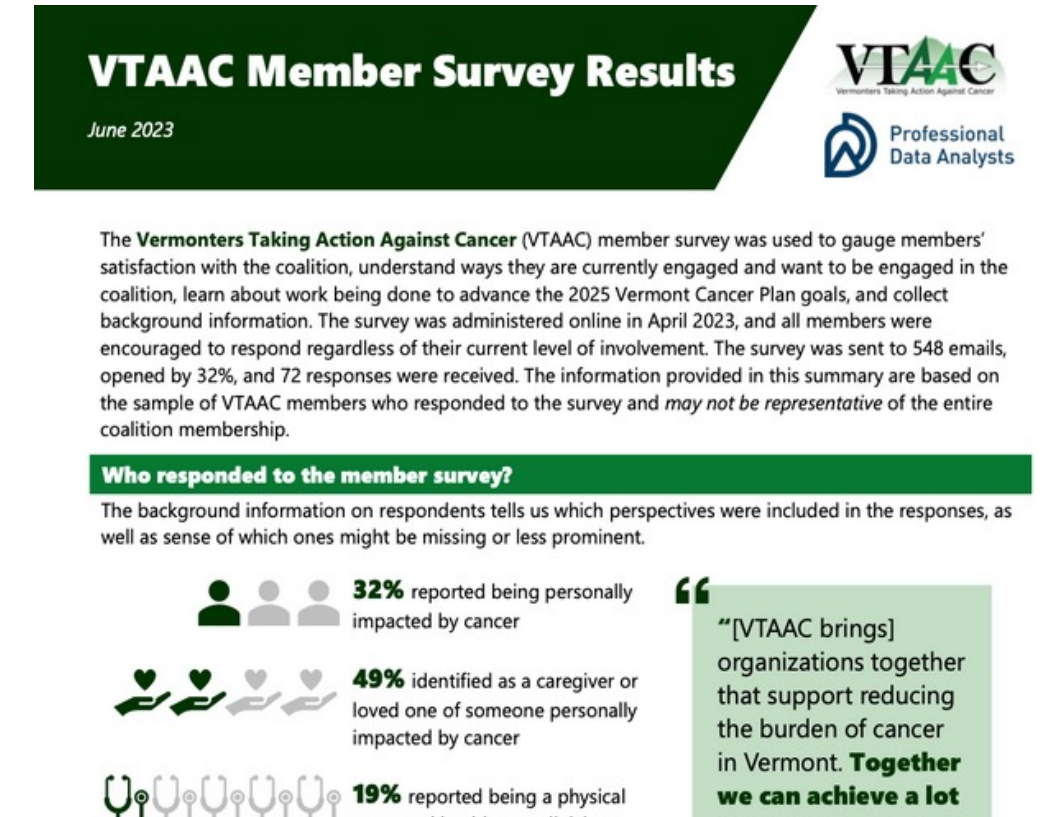
# VTAAC Evaluation Products



**Year 2 Evaluation Plan (2023-2024)**



**Year 1 Annual Evaluation Report (2022-2023)**



**2023 VTAAC Member Survey Brief**

Professional Data Analysts (PDA) are the external evaluators who help VTAAC evaluate programming and create our Evaluation Plans, Evaluation Reports, and Membership Briefs.





# VTAAC TEAM



**Hanna Snyder**  
Coalition Coordinator  
VTAAC



**Sharon Mallory, MPH**  
Comprehensive Cancer Control  
Program Director  
Vermont Department of Health



**Lauren Ressue, PhD**  
Data Analyst  
Vermont Department of Health





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