

TAKING CHARGE AGAINST COLORECTAL CANCER 2017 CONFERENCE

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REACH 80% X 2018 AND BEYOND



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Kaiser Permanente is honored to be a sponsor for the **2017 Taking Charge Against Colorectal Cancer Conference**. Our approach to total health includes a significant focus on health care screenings, and we are proud to stand with you in your efforts to improve the health and welfare of the Washington, DC community.



TABLE OF CONTENTS

Sponsors	4
Message from DC CRC Roundtable	5
Roundtable & Advisory Group Members	6
Message from DC Department of Health	7
Agenda	9
Special Guest Profiles.....	11
Presenter Profiles	14
DCAFP Professional Development.....	21
80 x 2018 FAQ/Fact Sheet	22

This Live activity, Taking Charge Against Colorectal Cancer Conference, with a beginning date of 05/05/2017, has been reviewed and is acceptable for up to 4.25 Prescribed credit(s) by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

AMA/AAFP Equivalency:

AAFP Prescribed credit is accepted by the American Medical Association as equivalent to *AMA PRA Category 1 credit(s)*[™] toward the AMA Physician's Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed, not as Category 1.

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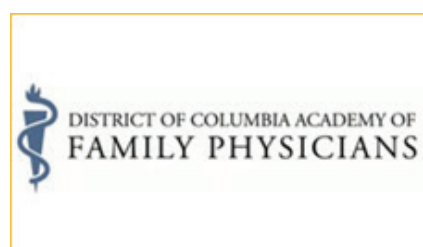
Non-physician participants will receive a certificate of attendance upon completion of the activity and evaluation confirming their participation. Participants should submit his/her certificate of attendance to their professional organization/institute

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DC Colorectal Cancer Roundtable Partner Organizations



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MESSAGE FROM THE ROUNDTABLE



May 5, 2017

Dear Conference Participants:

The DC Colorectal Cancer Roundtable welcomes you to the **2017 Taking Charge Against Colorectal Cancer Conference!** We hope you find the information presented valuable to our shared goal of eliminating the burden of colorectal cancer on our community.

The Roundtable was formed in 2014 to unite the efforts of the founding organizations. Our mission is to promote policy, education and evidence-based strategies to increase screening and decrease colorectal cancer incidence and mortality in the District of Columbia. That mission guided the development of today's theme: *Leveraging Partnerships, Exploring Best Practices and Using Data to Reach 80% x 2018 and Beyond.*

The critical work we do continues beyond today's conference. Our success depends on the engagement of stakeholders across the community: health care providers, clinic staff, health plans, employers, community organizations and advocates. We invite you to become a member of the DC Colorectal Cancer Roundtable to support our initiatives and influence .

Thank you for joining us today and thank you for all that you do to fight colorectal cancer!

Sincerely,

DC Colorectal Cancer Roundtable Members

ROUNDTABLE AND THE ADVISORY GROUP

Roundtable Members

Carrie Dahlquist

American Cancer Society
DC Cancer Action Partnership

Oladunni Filani, MD

Howard University Health System
DC Academy of Family Physicians

Millicent Gorham, MBA, FAAN

National Black Nurses' Association

Jimithy Hawkins, MBA

District of Columbia Department of Health

Tasha Moses, MPA

Strategic Management Services, LLC
DC Cancer Action Partnership

Amari Pearson-Fields, PhD, MPH

District of Columbia Department of Health

Kristi Guillory Reid, JD, MS

Attorney-at-law

Finie Richardson, MPH

Howard University College of Medicine
DC Academy of Family Physicians

Gwendolyn O. Young, RN

District of Columbia Primary Care
Association

Conference Advisory Group

Carrie Dahlquist

American Cancer Society
DC Cancer Action Partnership

Oladunni Filani, MD

Howard University Health System
DC Academy of Family Physicians

Brie Garner

Bread For The City
District of Columbia Primary Care Association

Ashley Harris, MD, MHS

Mary's Center

Jimithy Hawkins, MBA

District of Columbia Department of Health

Tasha Moses, MPA

Strategic Management Services, LLC
DC Cancer Action Partnership

Amari Pearson-Fields, PhD, MPH

District of Columbia Department of Health

Finie Richardson, MPH

Howard University College of Medicine
DC Academy of Family Physicians

Rona A. Schwartz, MD

Unity Health Care

MESSAGE FROM DC DEPARTMENT OF HEALTH



May 5, 2017

Dear Conference Participants:

On behalf of the District of Columbia Department of Health, I am pleased to welcome you to the **2017 Taking Charge Against Colorectal Cancer Conference**. Colorectal cancer is the third most diagnosed cancer in the District (250 diagnosed in 2013), and the third most common cause of cancer death among our residents (86 deaths in 2013).

To combat the burden of colorectal cancer placed on our community, the Department of Health has adopted the National Colorectal Cancer Roundtable's goal of "80% by 2018". To help meet this goal of 80% of District residents age 50 and older regularly screened for colorectal cancer by 2018, we are pleased to support the work of the DC Colorectal Cancer Roundtable through our Comprehensive Cancer Control Program. We are also encouraged by our work with health care systems through the DC Colorectal Cancer Control Program (DC3C) to achieve sustainable systems change that will increase access to and utilization of colorectal cancer screening for our most vulnerable populations.

By working together, setting higher expectations, and collectively pushing harder toward this common goal, we will prevent more cancers, reduce inequities and save more lives than we would by acting alone. I am happy to pledge the support of the Department in the effort to eliminate colorectal cancer as a major public health problem in the District of Columbia.

Sincerely,

Anjali Talwalkar, MD, MPH
Senior Deputy Director
Community Health Administration

Screening for colorectal cancer helps save lives through prevention and early detection.

Make sure that ALL of your patients 50 or older regularly get screened.



Your recommendation to your patients to get a regular screening test is the most powerful influence there is.

The American Cancer Society offers free materials to make it easier for you to make sure that each and every one of your patients who should be screened gets screened for colorectal cancer:

- Web-based toolbox and guides to help you increase screening rates in your practice
- Free patient brochures, videos, and wall charts
- Sample patient screening reminder tools for you to adapt for your practice

Visit cancer.org/colonMD for details.



AGENDA

9:00 am - 9:45 am

Registration & Breakfast *Social Lounge*

Sponsor Exhibits *Mission Center*

9:45 am - 10:00 am

Welcome *Social Lounge*

- Carrie Dahlquist
- Joseph F. Territo, MD
- Donald M. Payne, Jr.

10:00 am - 10:45 am

CRC in DC: Where Are We Now? *Social Lounge*

Colorectal cancer is the #4 most commonly diagnosed cancer in males and females in the District, representing 250 people diagnosed each year. Yet colorectal cancer can be preventable and treated if diagnosed early. Learn about the colorectal cancer burden in DC, from incidence and mortality, to the socio-economic burden of CRC on the community.

- Amari Pearson-Fields, PhD, MPH
- Alfreda Woods, BS, CHES, CTR

10:45 am - 11:30 am

Communicating with Patients: Screening Options & Risk *Social Lounge*

Studies have shown the #1 reason people don't get screened for CRC is their doctor didn't recommend it. Often, they have questions or misunderstandings about their own risk, the different screening options and what is best for them. Panelists will discuss effective tips for communicating with patients that encourages them to get screened.

- Kim Bullock, MD
- Marisa Brown, MSN, RN

Best Practices to Optimize Clinic Workflow *Innovation Center 1*

There are many ways that the workflow of a clinic can affect CRC screening rates. The speaker will discuss small changes that can have a positive impact on screening rates within the practice.

- MaryJane Joseph, RN, BC, CPHQ

The Health Plan Role to Support CRC Screening *Innovation Center 2*

The health plan plays a critical role in CRC screening through their relationship with both providers and beneficiaries. Health plans can employ a number of strategies to educate providers and encourage people to get screened. Learn about best practices for plans and discuss real-world examples of insurance companies working with both employers and providers.

- Emily Bell, MPH

11:30 am - 12:15 pm

Keynote: From Crisis Care to Preventive Care: Making the Case for Total Health *Social Lounge*

Many patients visit the doctor's office only when they are sick. That presents a challenge to health care providers who want to promote regular screenings and risk reduction lifestyle changes. Yet preventive care can be the key to good health. Dr. Territo will discuss the importance of developing preventive care for patients while also providing for the patients' emergent and chronic health needs.

Introduction by **Mary Doroshenk, MA**, Director, National Colorectal Cancer Roundtable, Strategic Director Colorectal Cancer Interventions – American Cancer Society

- Joseph F. Territo, MD

12:15 pm - 1:30 pm	<p>Lunch & Activities <i>Social Lounge</i></p> <p>Sponsor Exhibits <i>Mission Center</i></p> <p>GW Patient Navigation Tool <i>Convergence Center</i></p> <ul style="list-style-type: none"> ▪ Serena Phillips, RN, MPH ▪ Yuqing Zhang <p>DC3C Portal Intro & Hands-on Experience <i>Convergence Center</i></p> <ul style="list-style-type: none"> ▪ Jimithy E. Hawkins, MBA
1:00 pm - 1:30 pm	<p>DC3C Partner Networking <i>Innovation Center</i></p> <ul style="list-style-type: none"> ▪ Senkuta Riverson, MPH ▪ Amari Pearson-Fields, PhD, MPH
1:30 pm - 2:30 pm	<p>Overcoming Challenges to Reach the Unscreened <i>Social Lounge</i></p> <p>Did you know that over 75% of people who aren't up-to-date with CRC screening -- the "unworried well" -- have some form of insurance? We've determined that cost and insurance coverage aren't the only barriers to screening. Panelists discuss their unique experiences in identifying and successfully screening hard-to-reach populations and diverse communities.</p> <ul style="list-style-type: none"> ▪ D. Magrini ▪ Elmer Huerta, MD, MPH ▪ Oralia Dominic, PhD
2:30 pm - 3:00 pm	<p>Snack & Activities <i>Social Lounge</i></p> <p>Sponsor Exhibits <i>Mission Center</i></p>
3:00 pm - 3:45 pm	<p>EBIs: Challenges & Best Practices <i>Social Lounge</i></p> <p>Several evidence-based interventions have been proven to increase colorectal screening rates. But sometimes, things don't always go as planned and challenges arise. Panelists will share their own experiences in planning, implementing, monitoring and evaluating EBIs.</p> <ul style="list-style-type: none"> ▪ Cynthia A. Vinson, PhD, MPA ▪ Jimithy E. Hawkins, MBA ▪ Rona Schwartz, MD <p>Improving Communication Between Primary Care & Specialists <i>Innovation Center 1</i></p> <p>The communication between primary care and specialists is critical to provide the best, seamless care to patients. Panelists will discuss strategies that improve the communication as it relates to CRC screening but that also translates to other health issues.</p> <ul style="list-style-type: none"> ▪ Victor Scott, MD ▪ Kandie Tate, MD, FAAFP <p>Screening Navigation: Making it Work Without a Navigator <i>Innovation Center 2</i></p> <p>One of the most effective ways to ensure that a patient completes the screening process is through the assistance of a navigator. Many clinics, though, don't have the resources to hire a screening navigator and other staff don't have time for the added responsibility. There are ways to make screening navigation a reality in a clinic without a designated staff to do the work. Panelists will present options for adding screening navigation into the current workflow without hiring additional staff.</p> <ul style="list-style-type: none"> ▪ Dorys Lizama ▪ MaryJane Joseph, RN, BC, CPHQ
3:45 to 4:00	<p>Call to Action! <i>Social Lounge</i></p> <ul style="list-style-type: none"> ▪ Asha Moore-Smith ▪ Sandra Rattley <p>Closing <i>Social lounge</i></p> <ul style="list-style-type: none"> ▪ Amari Pearson-Field, PhD, MPH

SPECIAL GUEST PROFILES



Mary Doroshenk

Mary Doroshenk is currently the director of the National Colorectal Cancer Roundtable, an organization co-founded by the American Cancer Society and the Centers for Disease Control and Prevention to bring like-minded organizations together to increase colorectal cancer screening rates.

In her capacity with the Roundtable, Doroshenk helps advance colorectal cancer control strategies, including advancing the shared goal of achieving 80% screened for colorectal cancer by 2018. Some of the signature Roundtable products that Doroshenk has helped

produce are the Colorectal Cancer Clinician's Guide Action Plan, Strategies for Expanding Colorectal Cancer Screening in Community Health Centers, the Lewin study on how increasing colorectal cancer screening rates reduces Medicare colorectal cancer treatment costs and the Colorectal Cancer Evaluation 101 Toolkit. She also serves on the Prevent Cancer Foundation's Dialogue for Action Review Committee and GW Cancer Institute's Steering Committee.

Doroshenk first worked with the American Cancer Society as a senior analyst on the American Cancer Society's National Government Relations Department (now known as ACS CAN)'s policy team, where she started in July of 2000. In this capacity, Doroshenk managed all cancer site issues for the policy team with a special focus on colorectal cancer, though her work also included such diverse projects as establishing the Health Insurance Assistance Team at the National Cancer Information Center.

Doroshenk first started with the Roundtable as manager in July 2006 and was promoted to director in November 2010. In March 2011, she received the Prevent Cancer Foundation's Laurel award for National Leadership. Doroshenk holds an undergraduate degree in English from the College of William and Mary and a Masters in Writing from Johns Hopkins University. Doroshenk came to the American Cancer Society after working for seven years on Capitol Hill, where she worked for Democratic Whip David Bonior. Prior to her tenure on Capitol Hill, Doroshenk worked as a fund-raising consultant for the firm, Bonner and Associates, now known as the Bonner Group.



Donald M. Payne, Jr., Member of Congress

Congressman Donald M. Payne, Jr. is a Democratic congressman representing New Jersey's 10th Congressional District, which covers portions of Essex, Hudson, and Union counties. A Newark, New Jersey native, he was first elected to the U.S. House of Representatives in November 2012, and is now serving in his third full term. Congressman Payne, Jr. is a tireless fighter for New Jersey families, working to create jobs and grow the economy, protect and invest in our children, and ensure the health and safety of our communities.

Congressman Payne, Jr. is a leader in protecting and expanding access to affordable, quality health care for New Jerseyans. He is the lead Democratic co-sponsor of the Removing Barriers to Colorectal Cancer Screening Act, bipartisan legislation that would remove financial barriers to life-saving colorectal cancer screenings and treatment for Medicare beneficiaries. He is also a vocal advocate for cancer prevention, introducing the National Colorectal Cancer Awareness Month Resolution to raise awareness about the importance of regular cancer screenings. Additionally, for three consecutive years, Congressman Payne, Jr. secured from President Obama a presidential proclamation designating March as National Colorectal Cancer Awareness Month.

**Joseph F. Territo, MD**

Dr. Joseph F. Territo was named Associate Medical Director of Quality for the Mid-Atlantic Permanente Medical Group (MAPMG) in 2012. Dr. Territo leads the region's clinical quality initiatives aimed at improving population health outcomes and publicly reported health plan quality programs, including the National Committee for Quality Assurance's (NCQA) Healthcare Effectiveness Data Information Set (HEDIS) and the Centers for Medicare and Medicaid Services' (CMS) 5-star Medicare program.

Under Dr. Territo's leadership, Kaiser Permanente of the Mid-Atlantic States (KPMAS) saw the number of quality measures wherein its rate was among the 10 best in the nation skyrocket from 14 (HEDIS 2012) to 38 (HEDIS 2015). The organization was one of only two health plans in the nation to earn a 5-out-of-5 rating for both its Commercial and Medicare plans by NCQA in its 2015–2016 Health Insurance Plan Ratings. Dr. Territo's work in quality has also helped KPMAS be one of fewer than a dozen health plans in the nation to sustain a CMS 5-star Medicare rating for several years.

His leadership in process and outcome improvements resulted in the highest level of recognition for all 29 MAPMG primary care practice locations in the region by NCQA's Patient-Centered Medical Home (PCMH) program, while more than 150 Permanente physicians qualified for NCQA's Diabetes Recognition Program. Through his innovative outreach programs, application of technology and closely monitored population-health reporting tools, Dr. Territo's team (in partnership with frontline physicians) drastically reduced disparities in care by race and ethnicity for important quality measures like cancer screenings, blood pressure control and diabetes management, while fostering a culture of clinical accountability and excellence.

Prior to his current role, Dr. Territo was Assistant Physician-in-Chief of Quality for Kaiser Permanente's Northern Virginia area. Before joining MAPMG, he served as a Clinical Assistant Professor in pediatric ophthalmology at Georgetown University in Washington, D.C. Dr. Territo has completed patient-safety officer training at the Institute for Healthcare Improvement, Executive Leadership Training at Harvard University Business School, and holds Six Sigma Green Belt certification.

Board certified in ophthalmology, Dr. Territo received both his bachelor's and doctor of medicine degrees from Georgetown University. He completed an ophthalmology residency at Cook County Hospital in Chicago and a pediatric ophthalmology fellowship at Georgetown University.

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Taking Charge Against CRC 2017
May 5th, 12:15—1:30 PM

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PRESENTER PROFILES



Emily Bell, MPH

National Colorectal Cancer Roundtable

Emily Bell is the Associate Director of the National Colorectal Cancer Roundtable, a national coalition co-founded by the American Cancer Society and the Centers for Disease Control and Prevention. In this role she leads a number of projects that support the 80% by 2018 initiative, a movement in which more than 1,500 organizations are working toward the shared goal of reaching 80% of adults aged 50 and older screened for colorectal cancer by 2018. Recent projects include developing a best practices handbook for health plans and launching the 80% by 2018 Blog. Prior to joining the Roundtable, Emily served as the Cancer Screening Quality Improvement Consultant for the Washington State Department of Health, where she designed their approach and curriculum to coach primary care clinics and health systems on quality improvement strategies to increase colorectal cancer screening. Prior to that, Emily worked with the American Cancer Society in Austin, TX as a Cancer Information Specialist and later as a Health Insurance Specialist, where she gained insight into the access and affordability issues surrounding colorectal cancer screening. She holds a Master's in Public Health from Boston University and a B.A. in Psychology from the University of California, Santa Cruz.



Marisa C. Brown, MSN, RN

Georgetown University

Marisa C. Brown is a research instructor in the Georgetown University Center for Child and Human Development, University Center for Excellence in Developmental Disabilities (UCDD) in Washington, D.C. She has been associated with Georgetown University for the past 34 years serving in many capacities. She specializes in the health care of individuals with developmental disabilities, and has over 38 years of experience in this specialty. For the past 11 years she has directed the DC Developmental Disabilities Health Initiative, an effort aimed at improving health care quality and access for adults with intellectual disabilities. She recently completed a training course on dementia and intellectual disabilities from the National Task Group on Dementia and is authorized to use their curriculum.

Ms. Brown's interest in community collaborative approaches to human services delivery are a common thread among the projects with which she has been associated including health services for people with intellectual disabilities, genetics education, community services and supports for people with disabilities, early intervention services for infants and toddlers, cultural and linguistic competence, and home visiting services to families that are homeless and other families impacted by poverty, disability and substance abuse.

Ms. Brown has served on numerous task forces and advisory groups at the local and state level related to children and adults with developmental disabilities. As the parent of a young adult with autism spectrum disorder, she is particularly interested in advocacy for services to support community integration and independence.



Kim Bullock, MD
Georgetown University

Kim Bullock, MD, is a graduate of Yale University (BA) and the University of Michigan Medical School. Following the completion of her residency at Georgetown Medical Center, Dr. Bullock initially served as an emergency physician at Providence Hospital Emergency Department. Past appointments include Medical Director for the Seton House Substance Abuse Center at Providence Hospital, Vice Chairperson/Assistant Director for the Emergency Department and Director of Ambulatory Emergency Services. Dr. Bullock is currently a Clinical Associate Professor, Director of the Community Health Division and Project Investigator for the HRSA Community Health Leadership Development and Primary Care Health Policy Fellowships at Georgetown University. She is also the Chief Medical Officer for the Georgetown/ Developmental Disabilities Administration (DDA) Partnership grant. She offers technical assistance on best practices and evidence-based care as well as collaboration and liaison support for community physicians, hospitals and agencies serving this vulnerable population. Dr. Bullock has given presentations at many national and local conferences on medical issues relevant to intellectual and developmental disabilities (IDD). She has also published in the field and served as a consultant on many IDD grants. Dr. Bullock has promoted the education of health care professionals regarding the care of the IDD population. She brings a multidisciplinary systems approach to care management and highlights the importance of cross-professional dialogue in improving the health and well-being of those with intellectual and developmental disabilities.



Oralia Dominic, PhD
Penn State Hershey Medical Center, College of Medicine

Dr. Dominic is Assistant Professor of Public Health Sciences at Penn State Hershey Medical Center, College of Medicine. As a behavioral scientist by training, Dominic examines the effect of behavioral and community factors on chronic disease by age, sex, race, ethnicity, and geography, and the impact of community- and clinic-based approaches to reduce health disparities. Currently, Dominic spearheads health disparities interventions. These are provider-, member-, and community-focused interventions in Pennsylvania.

Dominic's age-, sex-, race/ethnicity-, geography-, and product-specific interventions are culturally appropriate collaborative, and focus on reportable HEDIS® measures. Dominic intervention models increase screening uptake at post; and increase recruitment and retention of minorities in clinical trials. These models are theory based and utilize three various types of health care delivery systems (primary care physicians, academic/university health systems with a cancer institute, and federally qualified health centers).

Dominic serves on various local, state and national committees; and is a PA Governor appointed and senate confirmed Pennsylvania Cancer Advisory Board (CAB) member, and 11-member board that advises the Governor and Secretary of Health on cancer prevention, treatment and control. Dr. Dominic teaches undergraduate as well as resident and graduate courses in research methods for epidemiology, health education and health promotion, and rural and minority health and health disparities. She has mentored/trained 35+ minority graduate students that have enrolled in doctoral and medical programs. Dr. Dominic has publications in the peer-reviewed literature. Recently, Dominic also released the first ever Latino Cancer Burden Report Pennsylvania 2016 to provide information about cancer incidence for by sex, age, ethnicity, type, stage, and geography- downloadable at: http://www.accnweb.com/docs/2016/Latino_Hispanic_Cancer_Burden_Report_PA_2016.pdf



Jimithy E. Hawkins, MBA, BS

DC Dept of Health

Jimithy E. Hawkins, MBA, BS is the Program Coordinator for the District of Columbia Department of Health's Colorectal Cancer Control Program, which is housed within the Community Health Administration, Bureau of Cancer and Chronic Disease. Jimithy has over 15 years of experience managing and working with Federal- and State-funded public health and social service programs to effect positive changes for all persons living in the United States. Prior to serving with the District of Columbia, he was both a consultant to and employed with the District of Columbia Asthma Coalition, served as the Program Director for the Pennsylvania Department of Health Colorectal Cancer Control Program, Regulator Compliance Analyst in the Pennsylvania Bureau of Child Support Enforcement, Medicaid Case Manager in the Pennsylvania Department of Human Services, and Legal Analyst with the AHS Settlement Trust.

Jimithy earned his B.S. in Supply Chain Management & Information Systems Management from Pennsylvania State University, Smeal School of Business. He graduated cum laude from Shippensburg State University, John L. Grove School of Business with an MBA. In his time at Pennsylvania State University, he worked with the Department of Engineering as a Systems Analyst, maintained and built networked systems, and maintained databases for the Department. While in the MBA program, he concentrated his focus on coursework and team projects related to project management.



Elmer Huerta, MD, MPH

Washington Cancer Institute at MedStar Washington Hospital Center

Elmer Huerta, MD, MPH, is Director of the Cancer Preventorium, a division of the Washington Cancer Institute at MedStar Washington Hospital Center, and a past President of the American Cancer Society. Dr. Huerta has more than 20 years of patient care and education experience and was one of the first physicians to specialize in cancer prevention. In 1994, Dr. Huerta founded the Cancer Preventorium, a prevention and screening clinic for low-income clients, as a vehicle to serve the Washington, DC, area Hispanic/Latino community. The Cancer Preventorium, he offers evaluations of personal cancer risks; screening exams for cancer, including Pap smears for women and prostate-specific antigen tests for men; counseling on ways to reduce cancer risks, education in the importance of early detection, and guidance in how to perform self-exams. In 1998, Dr. Huerta's Cancer Preventorium was noted by the U.S. Department of Health and Human Services and is one of the models for The Patient Navigator, Outreach, and Chronic Disease Prevention Act of 2004 (H.R. 918/S.453).

Dr. Huerta's involvement with the Spanish-speaking community began more than 20 years ago, with his nationally and internationally broadcast radio and television programs. Since 1989, Dr. Huerta's daily radio broadcast Cuidando tu Salud (Taking Care of Your Health) has provided daily disease prevention and health promotion messages to Hispanics on a DC-area Spanish-language station and via the Internet. Dr. Huerta also hosts El Consultorio Comunitario (The Community Clinic of the Air), a daily one-hour radio program, and cohosts Hablemos de Salud (Let's Talk About Health), a nationally syndicated weekly one-hour television program. His nationally syndicated programs reach 90% of the Spanish-speaking population in the United States and are broadcast throughout Latin America.

Dr. Huerta received his medical degree from the University of San Marcos in Peru. Trained in Internal Medicine and Medical Oncology in Peru, he completed a fellowship in Oncology Research at the Johns Hopkins Oncology Center, completed a residency in Internal Medicine at St. Agnes Hospital in Baltimore, earned a master's in Public Health at the Johns Hopkins School of Hygiene and Public Health, and completed a fellowship in Cancer Prevention and Control from NIH's National Cancer Institute.



MaryJane Joseph RN, BC, CPHQ

Montgomery County Primary Care Coalition

At the Primary Care Coalition, Ms. Joseph is the project manager for multiple projects working to improve the health of those served by the safety-net clinics. She provides the Montgomery County safety-net clinics with process improvement training in the areas of preventative health, diabetes and behavioral health. She is also responsible for the development and implementation of patient navigation/care coordination services for the Montgomery County's Montgomery Cares program. As part of the patient navigation services Ms. Joseph developed care management software to assist the clinics in tracking patients needing a specialized level of care.

As the Sr. Director of Behavioral Health for United Health Care and Director of Nurses at Potomac Ridge Hospital Ms. Joseph has worked in program development, management and administration. She is a past board member of The Case Management Society of America and Potomac Ridge Behavioral Health Board of Governors and currently serves on the Mansfield Kaseman Clinic Board and the MedStar Montgomery Medical Center Advisory Task Force.



Dorys Peraza Lizama

Catholic Charities

I most value the services component of my work and the contact I have with clients. I am able to assist clients as they strive to overcome cultural and economic barriers to health care. The mission of providing the best services for every client that walks through our door is my main goal. One of the most rewarding aspects of my job is the ability to directly impact the most needy families and individuals and provide them with the resources available through the our organization and additional resources if it is necessary. I strive to achieve the highest level of customer satisfaction with our services and going above and beyond to be helpful, courteous and pleasant not only with our clients, but my coworkers as well. For me, it is very important to maintain collaboration with others, in my day to day activities and in my extended work environment. This allows me to be successful at what I do. I continue to approach all with respect and value to each individual's input. When we work together, we find better solutions and improve the services that we provide.



D Magrini

Whitman-Walker Health

D Magrini works as the Community Commitment and Training Coordinator and formerly held the position of Health Educator. For more than 20 years, Magrini has worked to reduce health disparities and improve access to culturally sensitive care for underserved and vulnerable women throughout the Washington, DC area. She has developed a range of successful strategies for getting different communities of color to participate in health promotion and early intervention programs. Magrini served as a Sergeant in the U.S. Army.



Asha Moore-Smith

Advocate

Asha Moore-Smith is the daughter of educator Lynn Moore and full-time activist Damu Smith. Asha is a singer songwriter, performance artist, actress, and activist born and raised in Washington DC. She grew up in the protest and civil rights tradition traveling the country with her father, Damu Smith, who was a leader of local, national and global human rights and environmental justice organizations, such as the National Black Environmental Justice Network, Greenpeace USA, Operation PUSH, the National Alliance against Racial and Political Violence, the American Friends Service Committee, National Black Independent Political Party, and Black Voices for Peace, for which he was the founder. May 5, 2006, Asha lost her father to stage-four colon cancer when she was 13 years old. She also watched him passionately use his activism to form the Spirit of Hope Campaign to highlight, educate and fight against racial and economic disparities in the healthcare system that impact access to affordable, quality care that he, and so many others have experienced. Asha has turned the pain of losing her father at a young age into purpose by committing to sharing her father's story and publicize racial health disparities, especially related to colon cancer. This is why being a part of the Taking Action Against Colon Cancer Conference and strategizing new ways to increase screening rates among the uninsured has become a top priority among her life's work.



Amari Pearson-Fields, PhD, MPH

District of Columbia Department of Health

Amari Pearson-Fields, PhD, MPH is the Chief, Cancer Programs Division, Community Health Administration, District of Columbia Department of Health (DOH). Dr. Pearson-Fields has more than 20 years experience in women's health issues including cancer education and prevention, HIV/AIDS, substance abuse, tobacco, and health care disparities for minority women. She oversees the District's Breast and Cervical Cancer Early Detection Program (Project WISH), Colorectal Cancer Control Program (DC3C), Comprehensive Cancer Control Program, and the Management Leadership and Coordination in Cancer Care. Prior to joining DOH, Dr. Pearson-Fields was the Executive Director for the Capital Breast Care Center. She has served as principle investigator on several national studies of health behaviors and access to health care services including a national study of African American lesbian health behavior. She is the creator of the Spirit Health Education (SHE) Circle Program, a national women's wellness program for African American lesbians and bisexual women.



Serena Phillips, RN, MPH

George Washington University Cancer Center

Serena Phillips is a research associate at the George Washington University (GW) Cancer Center and lead developer on the Patient Navigation Barriers and Outcomes ToolTM (PN-BOTTM) project team. Prior to joining the GW Cancer Center, she worked for the Immigrant Health and Cancer Disparities Service at Memorial Sloan Kettering Cancer Center, where she coordinated a hospital-based food pantry program and navigated cancer patients at safety net hospitals throughout New York City. She received her MPH from Columbia University in 2012 and is currently a DrPH candidate at the Milken Institute School of Public Health at GW, studying Health Behavior."



Sandra Rattley

Advocate

Sandra Rattley is a behavior change communications specialist with over 40-years experience as a media and information leader. In 1999, she launched the Africa Learning Channel, a Pan-African information service broadcast via WorldSpace Satellite Radio, providing first-voice, best practices and health information to over 100 million listeners in 51 African countries. She also led a 3-year HIV/AIDS information campaign in rural villages in Uganda and Zambia to increase AIDS awareness and reduce stigma. Ms. Rattley has directed numerous federal and local programs such as a D.C. HIV/AIDS Administration program to establish HIV/AIDS Drop-In Centers at churches and other faith-based organizations to offer services and support to D.C. residents infected and affected by the virus. She also managed programs to provide technical assistance to the D.C. Tobacco Free Coalition. Ms. Rattley has served as Vice President of Cultural Programming, National News Editor, and manager of public information, marketing, community outreach and audience research for National Public Radio. She was also News Director for WHUR-FM, Director of Communications for the Congressional Black Caucus, press spokesperson for Nelson Mandela's first national US tour, and media representative and speechwriter for Winnie Mandela. She is currently executive producer for TV for the Futuro Media Group in New York and manages and conducts qualitative research for the Howard University Center for Urban Progress.



Sullivan Robinson

The Leadership Council for Health Communities

Sullivan Robinson is Executive Director for The Leadership Council for Healthy Communities, Inc. (LCHC). As a founding member of LCHC, Ms. Robinson provides executive leadership for this growing organization headquartered in the District of Columbia (DC). She has over twenty-five years' executive leadership experience with community and faith-based organizations in DC and New York, NY. Ms. Robinson provided executive leadership for the Trinity Development Center (DC) from 2005-2009, where she planned and coordinated the "Clergy Leadership Summit on HIV/AIDS" with more than 150 clergy in Washington, DC. She also acquired funding support and managed a highly-acclaimed substance abuse and HIV/AIDS prevention program that established church-based Conversation Centers to reduce HIV-related stigma in five wards in DC. Her previous positions include serving as executive director of the Congress of National Black Churches (DC), Associated Black Charities (NY), and Opportunities Industrialization Centers (OIC) of NY. Other positions in New York included serving as a management consultant for the New York City Mission Society, National Black Leadership Commission on AIDS, Harlem Urban Development Corporation, and New York State Department of Social Services.



Rona Schwartz, MD

Unity Health Care

Dr. Schwartz is a family physician at Unity Health Care in Washington, DC. Dr. Schwartz serves as the lead physician on Unity Health Care's Preventive Medicine Quality Improvement Team. For the last year, this team has been working to increase screening rates for colon cancer across all of the Unity sites. Dr. Schwartz is also the Medical Director at Columbia Road Health Services and practices family medicine at this site.



Victor F. Scott, M.D., M.A.C.P., AGAF

Howard University College of Medicine

Dr. Victor Scott was born in Bermuda of Jamaican parents, educated in Canada and in the United States of America, and is a graduate of the Howard University College of Medicine. He was a member of the faculty of the Howard University College of Medicine from 1971 to his retirement in July 2008 at the rank of Professor of Medicine. His career was marked by the assumption of leadership roles of escalating importance. He was the Chief of the Division of Gastroenterology in the Department of Medicine for 29 years, and Vice-Chairman of the Department of Medicine for twelve of those years before becoming Interim Chairman in 2000. He was an outspoken proponent for curriculum change from a traditional discipline based curriculum to an integrated system based one, and was intimately involved in its implementation. He served in that capacity for almost three years before being appointed Interim Senior Vice President for the Health Sciences on April 14, 2003. On June 23, 2005 he was appointed Senior Vice President for the Health Sciences at Howard University, retiring from that position in July 2007. Dr. Scott returned to the faculty part time in 2012, and since then has served as the Program Director for the Fellowship Program in Gastroenterology at Howard University Hospital.



Kandie Tate, MD, FAFP

DC Chapter Academy of Family Physicians

Dr. Kandie Tate is a Board Certified Family Medicine physician, practicing at Stone Run Family Medicine. She received her M.D. from Meharry Medical College and went on to complete residency at Howard University Hospital; she also has a Masters in Education and a Masters in Public Health. Dr. Tate is a full service Family Medicine physician providing, pediatric care, adult medicine, geriatric medicine and well woman services. She has extensive experience in research and presentations on smoking cessation, quality improvement, intimate partner violence, medical student development and addiction medicine. Dr. Tate is the President of the DC Academy of Family Physicians.



Cynthia Vinson, PhD, MPA

National Institutes of Health

Cynthia A. Vinson, PhD, MPA is a Senior Adviser for the Implementation Science Team in the Office of the Director in the Division of Cancer Control and Population Sciences (DCCPS) at the National Cancer Institute (NCI). Dr. Vinson works on building and sustaining the field of implementation science in order to enhance the integration of evidence-based guidelines, programs, and policies for cancer control in public health and clinical practice. Dr. Vinson leads dissemination and implementation research training activities including the annual Training Institute for Dissemination and Implementation (D&I) Research in Health. She is responsible for working both within NCI and with other agencies and organizations at the international, national, state and local level to translate research funded by DCCPS into practice.

Dr. Vinson came to the DCCPS as a Presidential Management Fellow and spent three years rotating in various office across NCI including science planning, legislation and communication. Prior to working at NCI, Dr. Vinson was a Peace Corps Volunteer in Gabon where she served as a health educator. Dr. Vinson was also previously a supervisor at the Kern County Department of Human Services in California.

Dr. Vinson holds a doctoral degree in Public Administration and Health Policy from George Washington University, a master in public administration/international development from Rutgers, the State University of New Jersey and a bachelors in political science from California State University, Bakersfield.



Alfreda Woods, BS, CHES, CTR

District of Columbia Department of Health

Alfreda Woods recently joined the Cancer and Chronic Disease Bureau in the Community Health Administration (CHA) as the Program Manager of the Cancer Registry. Prior to joining DOH, Ms. Woods was employed for nine years at Howard University Hospital as the Cancer Registry Manager. She worked for the Arkansas Department of Health for seven years as the Quality Assurance Coordinator in the Central Cancer registry and 11 years for the University of Arkansas for Medical Sciences in various positions, including the cancer registry at the Arkansas Cancer Research Center. Her overall service to the residents of the State of Arkansas was 18 years. She earned her Bachelor's degree in Health Education with an emphasis in community education, and two professional designations: a Certified Health Education Specialist (CHES) and a Certified Tumor Registrar (CTR). Ms. Woods is now completing her Master's degree in Nutrition with an emphasis on oncology nutrition from Howard University. Her hobbies are gardening, cooking and hand dancing.



Yuqing Zhang

George Washington University Cancer Center

Yuqing Zhang is a Research Assistant at the George Washington University (GW) Cancer Center and serves as the lead staff person responsible for systematic integration of the Patient Navigation Barriers and Outcomes Tool™ (PN-BOT™). Prior to joining the GW Cancer Center, she worked as a research intern at the Adventist HealthCare, Center for Health Equity and Wellness, where she provided screenings and educational materials to community members. She graduated from University of Maryland, College Park with a degree in Community and Behavioral Health, and is currently a MPH candidate at the Milken Institute School of Public Health at GW, studying Epidemiology and Biostatistics.

District of Columbia Chapter of the American Academy of Family Physicians

COLORECTAL CANCER PROFESSIONAL DEVELOPMENT WEBCAST SERIES ON DEMAND SELF-STUDY CURRICULUM

To obtain CME/CE credit for this enduring material, view the presentations.
Next, complete the post-test and evaluation online for each session by February 28, 2018.

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SERIES OBJECTIVES:

1. Describe national and local efforts to decrease the burden of colon cancer in support of the 80% by 2018 National Colorectal Cancer Roundtable initiative
2. Discuss colorectal cancer screening guidelines and approved screening modalities
3. Provide evidence based strategies to increase colorectal cancer screening rates in the District of Columbia
4. Discuss best practices for patient engagement and implementation of quality improvement interventions at the clinic level

This Enduring Material activity, Colorectal Cancer Professional Development Webcast Series, has been reviewed and is acceptable for up to 8.00 Prescribed credit(s) by the American Academy of Family Physicians. Participants should claim only the credit commensurate with the extent of their participation in the activity.

This program is funded by the Government of the District of Columbia Department of Health Community Health Administration.



For more information email: exec@dcafp.org

Call: 202.360.8685

www.dcafp.org

THE 80% X 2018 INITIATIVE



About 80% by 2018

"80% by 2018" is a National Colorectal Cancer Roundtable initiative in which hundreds of organizations have committed to substantially reducing colorectal cancer as a major public health problem for those 50 and older. These organizations are working toward the shared goal of 80% of adults aged 50 and older being regularly screened for colorectal cancer by 2018.

The 80% by 2018 initiative is led by the American Cancer Society (ACS), the Centers for Disease Control and Prevention (CDC) and the National Colorectal Cancer Roundtable (an organization co-founded by ACS and CDC).

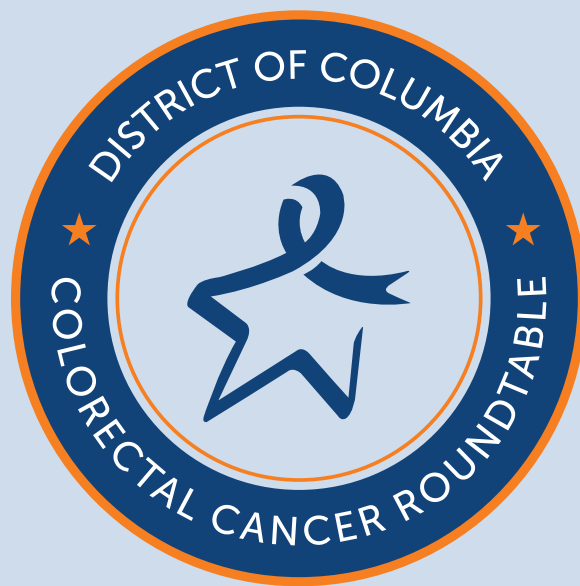
Colorectal Cancer Facts

- Colorectal cancer is the second leading cause of cancer death in the U.S. when men and women are combined. Nearly 135,000 adults diagnosed with colorectal cancer each year.
- Regular screening among average risk adults 50 and older can detect colorectal cancer early at a stage when treatment is most likely to be successful. In some cases, it can be prevented through the detection and removal of precancerous polyps.
- About 1 in 3 adults between 50 and 75 years old – about 23 million people – are not getting tested as recommended.
- There are several recommended screening test options, including: colonoscopy, stool tests (fecal occult blood test [FOBT] or fecal immunochemical test [FIT]), and sigmoidoscopy.

Why an 80% x 2018 Initiative?

- If we can achieve 80% by 2018, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030.
- Organizations share a commitment to eliminating disparities in access to care and improving health outcomes in their communities.
- Achieving an 80% screening rate by 2018 will require the collaboration of many leaders from every sector: health care, businesses, government, communities.
- It is achievable! Top health systems already are achieving 80% screening rates. Massachusetts is already screening over 76% of their eligible population, the highest screening rate in the nation.
- The initiative leverages the energy of multiple and diverse committed partners to make history and achieve this remarkable public health goal.





For updates on DC CRC Roundtable activities, visit us at:
www.TakingChargeCRC.org

Post-conference survey

