Cervical Cancer Task Force  
Regular Meeting  
October 17, 2019  
Minutes

Attending Task Force Members (6):  
Rhonda Brown, ADH; Michelle Murtha, AFMC; Pam Brown, AHA; Dr. Sam Greenfield, AMDPA; Daphne Gaulden, AMH; Kim Wilmot, DHS.

Absent Task Force Members (7):  
Krista Kirksey, ACS; Dr. Mike Riddell, AMS; Laura Fletcher, Community at Large; Dr. Joseph Su, UAMS COPH; Amanda Deel, Arkansas Academy of Family Physicians; (Vacant), Blue Cross/Blue Shield; Dr. Kristin Zorn, UAMS.

Arkansas Cancer Coalition (ACC):  
Kirsty DeHan

Other Meeting Attendees:  
Misty Smith, ADH; Dr. Jennifer Dillaha, ADH.

I. Welcome & Introductions  
   a. Dr. Greenfield represents the Arkansas Medical, Dental, and Pharmaceutical Association. This is a group of primarily African American physicians that have been in the state for about 127 years. It is a membership group with different specialties and has been serving the community for decades. Dr. Greenfield was previously the president of the Arkansas Medical, Dental, and Pharmaceutical Association for 4 years.
   b. Since the last CCTF meeting, Dr. Dillaha asked Dr. Greenfield to take over as the chair and Dr. Greenfield accepted.
   c. There are 4 new members and 1 member that has renewed their term on the CCTF
   d. Rhonda Brown is new to the chronic disease branch at ADH, she is the cancer prevention and control section chief, and was previously in the family health branch as the women’s health section chief. Rhonda has also worked in women’s health in the state of Florida.
   e. Misty Smith is the comprehensive cancer grants manager for ADH, she is not a member of the task force but attends as a representative of the ADH.
   f. Michelle Murtha works for AFMC in the division of quality improvement
   g. Pamela Brown is the VP of quality and patient safety for the Arkansas Hospital Association. She supports members and their affiliated clinics with quality improvement efforts.
   h. Daphne Gaulden is the grants coordinator and program manager for AMHC. AMHC’s primary focus is on preventive screenings for chronic disease in minority populations.
   i. Kim Wilmott is the nurse manager for Arkansas Medicaid, division of medical services, and has served on the CCTF for a couple of years.
j. Dr. Dillaha’s role at the ADH has changed and thanked Dr. Greenfield for taking over as the chair. Dr. Dillaha would like to continue attending the task force meetings and provide linkage in activities related to HPV vaccinations.

II. Approval of Minutes (April 12, 2018; October 11, 2018; April 18, 2019)
a. Due to no quorum in today’s meeting, the minutes have not been approved.

III. Member Update
a. The CCTF consists of 12 members and 1 non-voting member, and a quorum represents the majority of the members. There has not been a quorum since 2018. Dr. Greenfield asked the task force to review the minutes so they can be approved at the next meeting in January.
b. There is currently one vacant position (Medical Insurance Industry).

IV. Current State of CCTF
a. Dr. Greenfield read from the Cervical Cancer Task Force Act 1414 of 2005 and Act 280 of 2009:

**Act 1414**
For An Act To Be Entitled
AN ACT TO CREATE A CERVICAL CANCER TASK FORCE; TO COORDINATE STATEWIDE EFFORTS TO COMBAT THE DEBILITATING EFFECTS OF CERVICAL CANCER ON FEMALE ARKANSANS; TO IMPROVE HEALTH CARE FOR CERVICAL CANCER VICTIMS; AND FOR OTHER PURPOSES.

**Act 280**
For An Act To Be Entitled
AN ACT TO CREATE A CERVICAL CANCER TASK FORCE; TO COORDINATE STATEWIDE EFFORTS TO COMBAT THE DEBILITATING EFFECTS OF CERVICAL CANCER ON FEMALE ARKANSANS; TO IMPROVE HEALTH CARE FOR CERVICAL CANCER VICTIMS; AND FOR OTHER PURPOSES.

b. Dr. Greenfield read the names of the 12 organizations that represent the task force and some of the powers and duties of the task force. (Kirsty DeHan will email Act 1414 and Act 280 to the task force for further reading)
c. Dr. Greenfield asked that we conversate about the CCTF powers and duties to answer the following questions
   i. Are we doing the work we were charged to do?
   ii. Are we doing the work of other groups, or are we redundant?
   iii. What products or services should we be doing in the next year to add value?

Make recommendations to the breast cancer control advisory board
Dr. Dillaha attended breast cancer control advisory board meetings and updated them on task force activities. Years ago, a cervical cancer plan was submitted, but nothing has been created in recent years. Being that one of the charges is to make recommendations to the breast cancer control advisory board, it would be a great idea to have someone from BreastCare come speak at a future meeting. Rhonda Brown will find a speaker (15 minutes).

**Pursue private and public funding**

Dr. Dillaha said that funding has been available previously through the CDC. ACC has provided funding in the past, but it was difficult to decide how to spend the money since meetings usually did not have a quorum. The task force had agreed to use the funding for HPV vaccines, and then formed the HPV vaccination work group under the Arkansas Immunization Action Coalition to facilitate a better way of spending funds. It’s difficult for the task force to apply for a grant, as each member represents a different organization and you need a fiduciary. The ADH would be the best organization to apply for funding on behalf of the task force, then have the task force carry out the activities.

**Develop standards and policy recommendations considering, but not limited to:**

iv. **Methods for raising public awareness of the prevalence, causes, prevention, screening, and treatment considerations for cervical cancer;**

v. **Methods for raising the medical community’s awareness of the prevalence, causes, prevention, screening, and treatment considerations for cervical cancer;**

vi. **Methods for ensuring that services across the spectrum of causes, prevention, screening, evaluation, and treatment are available to women in Arkansas.**

Dr. Dillaha asked that ACC add a webpage to their site for the CCTF, to include approved minutes and relevant information. Dr Dillaha presented on “Changing the ways vaccinations are presented” at ADH Grand Rounds on October 3.

Dr Greenfield asked if other task force members could provide a link to the ACC page on their organization’s website, to increase public and medical awareness.

The Arkansas Central Cancer Registry of the Department of Health shall provide an annual cervical cancer report to the task force

An Epi from ADH can provide updates and look at core questions in BRFFS, or a module related to cervical cancer. Dr. Dillaha will ask Kristyn Vang to speak and to include County breakdown with screenings. We will plan for this on the agenda in April as Kristyn presented in April this year.

d. Michelle Murtha served on the HPV vaccine work group and tried to get the word out about the HPV vaccine. She suggested the task force work on screenings and prevention messaging and providing more education.

e. What are the gaps in cervical cancer geologically? - The Arkansas Cancer Facts and Figures is a great resource of data. Pam Brown suggested we target the areas with the most need, as opposed to the entire state.
f. 90% of cervical cancer are caused by HPV, but not all. What should we do about the cancers not caused by HPV?

g. AMHC will have a campaign in January with radio spots for Cervical Cancer Awareness Month. Dr. Greenfield is the host of a Q&A radio show of AMHC “Ask The Doctor” on Power 92, from 7-9am, on the 3rd Tuesday of the month, and can promote cervical cancer awareness “Get Screened, Get Vaccinated.”

V. Other Business

a. The 3rd HPV Summit is May 1 at the Crowne Plaza. One speaker is confirmed from NW AR. If anyone has any speaker ideas, please forward them to Dr. Dillaha.

b. What groups and organizations are doing similar work?
   i. IPE group at UAMS working on HPV
   ii. UAMS Cancer Institute
   iii. Check ACC mini and competitive grantees to see if there are any working on cervical cancer

c. The task force will research possibilities for the vacant position of Medical Insurance Industry.

d. The CCTF meeting is always the Thursday before the breast cancer advisory board meeting

Meeting adjourned at 5:40pm.

The next meeting is January 23, 2020.