

2011-2015 CANCER PLAN DRAFT

South Carolina Cancer Alliance

January 13, 2010

Cancer Sites

Breast Cancer

Goal: To reduce breast cancer deaths in South Carolina through increased awareness, early detection, diagnosis and treatment

Objectives:

- By December 31, 2011 secure state funding for breast cancer screening and follow up care funding by the Best Chance Network program (SC Legislative Record).
- By December 31, 2015 increase the proportion of women aged 40+ who have received a clinical breast exam within the proceeding two years from 83.5% to 86% (SC BRFSS 2008).
- By December 31, 2015 increase the proportion of women aged 40+ who have received a mammogram within the proceeding two years from 74.9% to 80% (SC BRFSS 2008).
- By December 31, 2015 increase the proportion of patients with non-metastatic breast cancer who receive surgical resection from x% to x% (SCCCR)

Cervical Cancer

Goal: To reduce cervical cancer deaths in South Carolina through increased awareness, prevention, early detection, diagnosis and treatment

Objectives:

- By December 31, 2011 secure state funding for cervical cancer screening and follow-up care funding by the Best Chance Network program (SC Legislative Record).
- By December 31, 2015 increase the proportion of women aged 18+ who have received a cervical cancer screening exam within the previous three years from 86.1% to 90% (SC BRFSS 2008).
- By December 31, 2015 increase the proportion of 9-26 year olds who initiate vaccination for human papillomavirus from 28.5% in 2009 to x% in 2015 (NIS-TEEN dataset, National Immunization Survey of 13-17 year old teens).
- By December 31, 2015 increase the proportion of 9-26 year olds who complete vaccination for human papillomavirus for cancer prevention from 16.6% in 2009 to x% in 2015 (NIS-TEEN dataset, National Immunization Survey of 13-17 year old teens).

Colorectal Cancer

Goal: To reduce colorectal cancer deaths through screening

Objectives:

- By December 31, 2011, secure state funding for the SC SCOPE program (SC Legislative Record).
- By December 31, 2015, increase the proportion of adults age 50+ who have had a colonoscopy procedure within the past 5 years from 65.5% to 80.5% (SC BRFSS 2008; Ambulatory Surgical Centers; Medicare)
- By December 31, 2015, increase the proportion of African American adults age 50+ who have had a colonoscopy procedure within the past 5 years from 59.8% to 74.8% (SC BRFSS 2008).
- By December 31, 2015, increase the proportion of Medicare recipients who have had a colonoscopy procedure within the past 5 years from x% to x% (by 15 percentage points). (Medicare, Year)
- By December 31, 2015 increase the proportion of patients with non-metastatic colorectal cancer who receive surgical resection from x% to x% (SCCCR)

Head and Neck

Goal: To reduce head and neck cancer deaths in South Carolina through increased awareness, prevention, early detection, diagnosis and treatment

Objectives:

- By December 31, 2015 increase the proportion of individuals who have received an oral examination from 23.5% to 30% (SC BRFSS 2006).
- By December 31, 2015 increase the proportion of oral cavity and pharyngeal cancers newly diagnosed among African American males at early stage (in-situ or localized) from 22.2% to 32.2% (SC Central Cancer Registry, 2007).
- By December 31, 2015 increase the proportion of esophageal cancers newly diagnosed among African American males at early stage (in-situ or localized) from 26.3% to 36.3% (SC Central Cancer Registry, 2007).

Lung Cancer

Goal: To reduce lung cancer deaths in South Carolina through prevention of smoking and exposure to second hand smoke

Objectives:

- By December 31, 2015 decrease the age-adjusted lung cancer incidence rate from 71.0 per 100,000 to 66.0 per 100,000 (SC Central Cancer Registry, 2007).

- By December 31, 2015 increase the proportion of patients with non-metastatic non small-cell lung cancer who receive surgical resection from x% to x% (SCCCR)

Prostate Cancer

Goal 1: To increase our understanding of the issues and process of decision making for prostate cancer screening and treatment.

Objectives:

- By December 31, 2011, develop a survey question to determine the percentage of South Carolina men aged 50-75 years who are making an informed decision on screening for prostate cancer and have the question included in the SC BRFSS survey.
- By December 31, 2011, conduct a scientifically valid survey of South Carolina African- American men, to determine how and why they learn about prostate cancer screening, treatment and survival, or why they do not learn about these topics and how they go about making a personal informed decision on whether to be screened.
- By December 31, 2013, submit a research study proposal to investigate PSA screening among African American men in South Carolina, its accuracy, and ways in which prostate cancer detection may better inform decisions on treatment. (add meeting with Dr. Terry Chapman)

Goal 2: To promote quality education and outreach on prostate cancer screening and treatment.

Objectives:

- By December 31, 2012, convene a state-wide conference on prostate cancer to help determine community and medical directions on prostate cancer education, screening and treatment.
- By December 31, 2015, increase the percentage of men making an informed decision about screening for prostate cancer by at least 10% over the baseline established in 2012.

Skin Cancer

Goal: To reduce skin cancer deaths in South Carolina through prevention and early detection

Objectives:

- By December 31, 2015, to increase the proportion of persons who report almost always or always using at least one of the following sun protective measures that may reduce the risk of skin cancer: wearing sunscreen, staying in the shade, wearing a wide brimmed hat, or wearing a long-sleeved shirt, from x% to x% (SC BRFSS 2005).
- By December 31, 2015, to establish a mechanism in SC DHEC to regulate tanning bed facilities so that these facilities must post a conspicuous warning about the cancer risk associated with tanning bed use (SC DHEC Policy Manual)
- By December 31, 2015, to reduce the incidence of melanoma skin cancer from 22.3 per 100,000 to 19.0 per 100,000 (SC Central Cancer Registry, 2007)

Cancer Prevention

Exercise, Prevention and Obesity

Goal: To reduce obesity in South Carolina by promoting regular physical activity and nutrition

Objectives:

- By December 31, 2015, increase the proportion of the SC population that consumes at least five servings of fruits and vegetables from 17.4% to 30% (Note: corresponds to SC Obesity State Plan: Options for action) (SC BRFSS, 2009)
- By December 31, 2015, increase the proportion of adults who meet the recommendation for moderate physical activity from 35.2% to 43% (Note: Corresponds to SC Obesity State Plan: Options for Action) (SC BRFSS, 2009)

Tobacco

Goal: To reduce tobacco use and exposure to second hand smoke in South Carolina

Objectives:

- By December 31, 2013, Increase the percentage of the population covered by comprehensive smoke-free ordinances from 31% to 50% (SC Tobacco Collaborative, 2010)
- By December 31, 2015, increase the sales tax on cigarettes from 50 cents to \$1.00 per pack (SC Code of Laws, 2010)
- By December 31, 2015, decrease the rate of tobacco use among adult South Carolinians (age 18+) from 20.4% to 15% (SC BRFSS, 2009)
- By December 31, 2015, decrease the percentage of high school students in South Carolina using tobacco from 17.8% to 13% (SC YTS, 2008)

Environmental Risk Factors

Goal: To reduce cancer incidence by knowledge of and avoidance of environmental cancer risks

Objectives:

- By December 31, 2013, provide a **fact sheet about known environmental cancer risk factors and their prevention and on** resources to measure environmental cancer risk

Patient Care

Goal: To ensure access to state of the art cancer care for South Carolina cancer patients

Cancer Treatment

Objectives:

- By December 31, 2015, increase the proportion of cancer patients who participate in cancer clinical trials by 10% (SC Health Sciences South Carolina; SC Central Cancer Registry)
- By December 31, 2015, increase the proportion of cancer patients in South Carolina who are referred to ACOS certified hospitals by 20% (ACOS hospitals or SC Cancer Registry; Year-target percentages need to be developed)
- By December 31, 2013, ensure passage of a state law to mandate insurance coverage for oral chemotherapy (SC Code of Laws)
- By December 31, 2015, increase the proportion of patients who have access to information and resources to manage the side effects of cancer and its treatment by 15% (pre-post test survey; CDC HINTS survey?)
- By December 31, 2015, increase by 20% the proportion of cancer treatment centers that formally offer patient navigation services. Formal navigation programs defined as those that provide one-on-one assistance to deal with cancer treatment and access to care. (pre-post survey of cancer treatment centers, ACOS hospital source?)

Genetics

Objectives:

- By December 31, 2015, increase the number of South Carolinians who utilize cancer-related genetic testing, profiling and counseling services by 15% (pre-post data from genetic testing facilities)

Survivorship

Goal: To ensure that the physical and psychosocial needs of cancer survivors are addressed

Objectives:

- By December 31, 2015, to increase the proportion of patients who are provided with an integrative survivorship care plan by the end of treatment by 20% (pre-post survey of cancer patients; ACOS hospital source?)
- By December 31, 2015, to increase the number of cancer centers who provide or make referrals to practitioners of integrative oncology services by 20% (pre-post survey of cancer centers; ACOS hospital source?)

Cancer Health Disparities

Goal: To reduce cancer-related health disparities in South Carolina

Objectives:

- By December 31, 2011, secure state funding for the SC SCOPE colorectal cancer screening program (SC Legislative Record)
- By December 31, 2015, reduce the gap in colorectal screening rates between whites and minority populations by 20% (SC BRFSS)
- By December 31, 2011 secure state funding for breast and cervical cancer screening by the Best Chance Network program (SC Legislative Record).
- By December 31, 2015, reduce the gap in mammography screening rates between whites and minority populations by 20% (SC BRFSS)
- By December 31, 2015, reduce the gap in cervical cancer screening rates (pap tests) between whites and minority populations by 20% (SC BRFSS)
- By December 31, 2015, reduce the gap in late stage diagnosis of lung cancer between whites and minority populations by 20% (SC Central Cancer Registry)
- By December 31, 2015, reduce the gap in late stage diagnosis of prostate cancer between whites and minority populations by 20% (SC Central Cancer Registry)
- By December 31, 2015, increase the proportion of African American adults age 50+ who have had a colonoscopy procedure within the past 5 years from 59.8% to 74.8% (SC BRFSS 2008).
- By December 31, 2015 increase the proportion of oral cavity and pharyngeal cancers newly diagnosed among African American males at early stage (in-situ or localized) from 30.9% to 40.9% (SC Central Cancer Registry, 2007).
- By December 31, 2015 increase the proportion of esophageal cancers newly diagnosed among African American males at early stage (in-situ or localized) from 23.8% to 33.8% (SC Central Cancer Registry, 2007).

Advocacy and Policy

Goal: To create environmental and policy change that will reduce the burden of cancer in South Carolina

Objectives:

- By December 31, 2011, to develop a cancer advocacy and policy leadership network, to include key partner organizations, to set and implement annual priorities and strategies (SCCA)

- By December 31, 2011, to publish an SCCA report to provide recommendations for implementation of the cancer-related services within the Patient Protection and Affordability Care Act of 2010 in South Carolina (SCCA)
- By December 31, 2011, secure state funding for the SC SCOPE colorectal cancer screening program (SC Legislative Record)
- By December 31, 2011 secure state funding for breast and cervical cancer screening by the Best Chance Network program (SC Legislative Record)
- By December 31, 2013, increase the percentage of the population covered by comprehensive smoke-free ordinances from 31% to 50% (SC Tobacco Collaborative, 2010)
- By December 31, 2013, increase the sales tax on cigarettes from 50 cents to \$1.00 per pack (SC Code of Laws, 2010)
- By December 31, 2013, ensure passage of a state law to access insurance coverage for oral chemotherapy (SC Code of Laws)
- By December 31, 2013, to develop a grassroots advocacy and policy network to include representation from all counties in South Carolina (SCCA)
- By December 31, 2015, to secure direct state funding for the SCCA (SC Legislative Record)

Cancer Research

Goal: To optimize the potential benefits of cancer-related research by streamlining the process for conducting cancer research in South Carolina and disseminating research findings to the SC public

Objectives:

- By December 31, 2013, to ensure that the SC Tissue Bank will have an active tissue banking process in place that includes ongoing collection of new specimens and a formal process in place to request specimens and related identifiers needed to conduct research
- By December 31, 2013, to ensure that each Health Sciences South Carolina research partner (MUSC, Greenville Hospital Systems/Clemson partnership, Spartanburg Regional, Palmetto Health, USC) has engaged in at least one study with another statewide partner site using the shared statewide electronic IRB system
- By December 31, 2013, the SCCA will regularly utilize at least two approaches per month to disseminate critical cancer prevention and treatment-related research findings to the SC public