

Comprehensive Cancer Alliance For Idaho

Annual Meeting
February 1, 2016

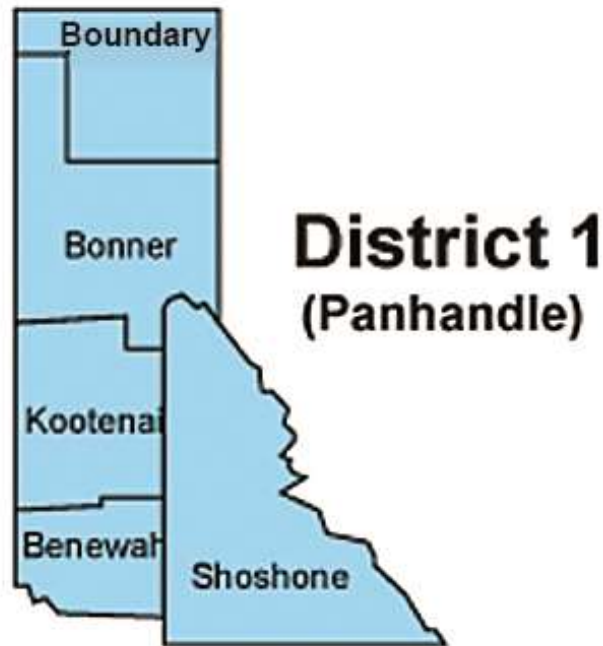
Agenda

- Local Cancer Coalition Updates
- 2016-2020 Idaho Comprehensive Cancer Plan
 - Current Status of Cancer in Idaho
- CCAI Priority Identification
- Priority Area Workgroup Action Planning
 - Prevention
 - Early Detection/Screening
 - Treatment
 - Quality of Life
- Around the Room
- CCAI Website Update

What's Happening Around Idaho



Panhandle Health District



North Central Health District



District 2
(North Central)

Southwest District health



Central District Health Department

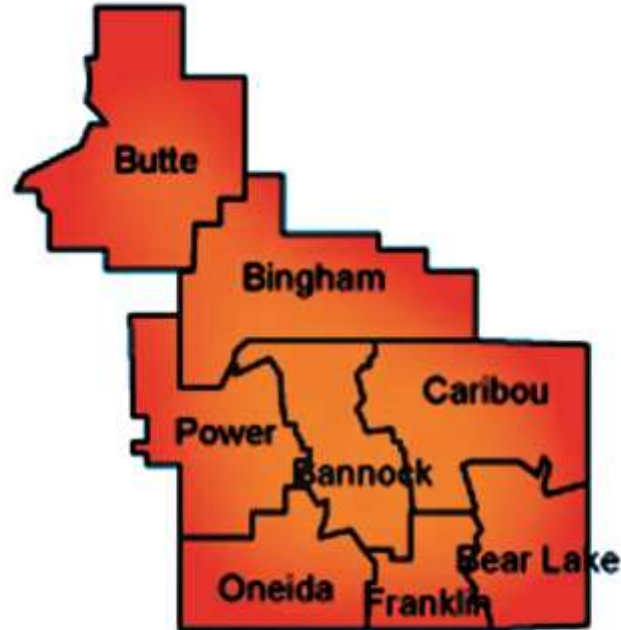


South Central Public Health District



District 5
(South Central)

Southeastern Idaho Public Health



District 6
(Southeastern)

Eastern Idaho Public Health District



Idaho Comprehensive Cancer Plan 2016-2020

Plan Overview

CCAI Board of Directors



National Comprehensive Cancer Control Program (NCCCP)

- NCCCP
- About the Program
- What Is Comprehensive Cancer Control?
- Comprehensive Cancer Control Plans**
- Resources +
- Success Stories
- Funding Opportunities +
- Partners
- Related Links
- Contact a Local Program

CDC > Cancer Home > NCCCP

Comprehensive Cancer Control Plans



Comprehensive cancer control (CCC) plans identify how an organization addresses cancer burden as a significant public health challenge. They are data-driven, evidence-based blueprints for action. CCC plans guide cancer control activities and can have similar components. Plans typically cover a five-year timeframe. In the fifth year, different processes are used to revise and update CCC plans.

All 50 states, the District of Columbia, 7 tribes and tribal organizations, and 7 territories and U.S. Pacific Island jurisdictions have produced 65 plans. In addition to these plans, the Cancer Council of the Pacific Islands developed a [Pacific Regional Plan](#). [PDF-613KB]

To download a CCC plan—

- Click the link (state, U.S. territory, or tribe/tribal organization) on the map, or
- Review the lists of plans ([state](#), [U.S. territory or tribe/tribal organization](#)) and click the link.

Please visit the [Comprehensive Cancer Control Plans Search Tool](#) to search CCC plans for keywords.

Stay Informed




Idaho Comprehensive Cancer Plan

- Cancer Overview
- Idaho Demographics
- Healthcare Workforce
- Burden of Cancer in Idaho
- Plan Goals Priority Areas
- How to Apply the Plan




Idaho Comprehensive Cancer
Strategic Plan
2016-2020

Cancer in Idaho

Cancer is the
2nd 
leading cause of death
in the U.S.

Cancer is the
leading 
cause of death in
Idaho since 2008.

In Idaho, 
approximately
22%
of all deaths each year
are from cancer.



Each year, there are
approximately
8,000 
new cases of cancer
(invasive and in situ)
and
2,700 
cancer deaths.

Figure 1. Classification of Idaho Counties

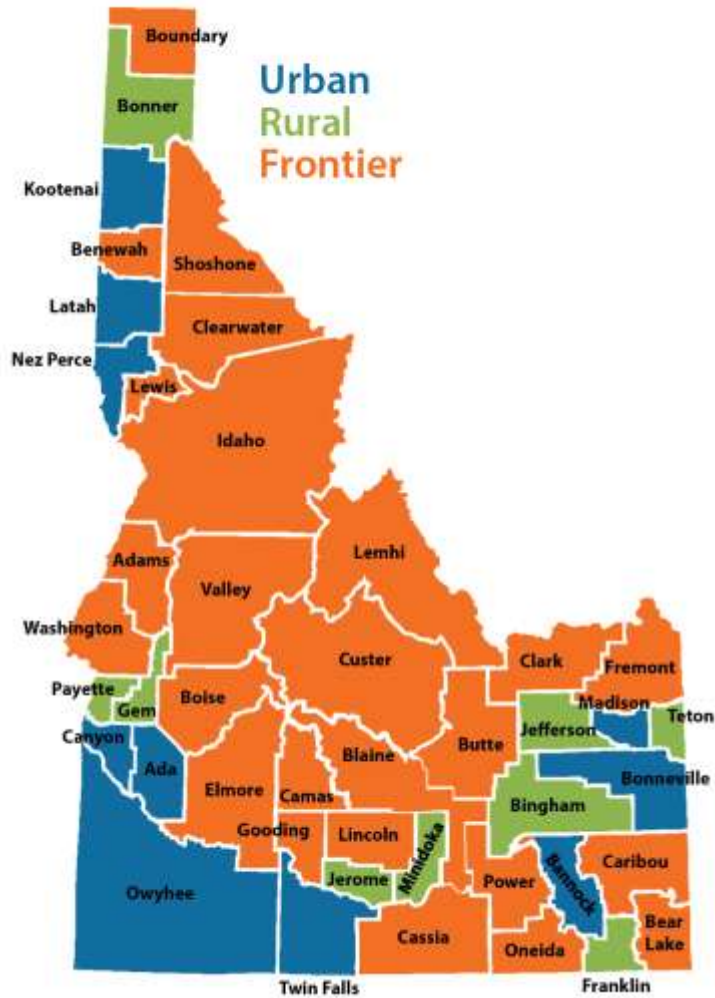
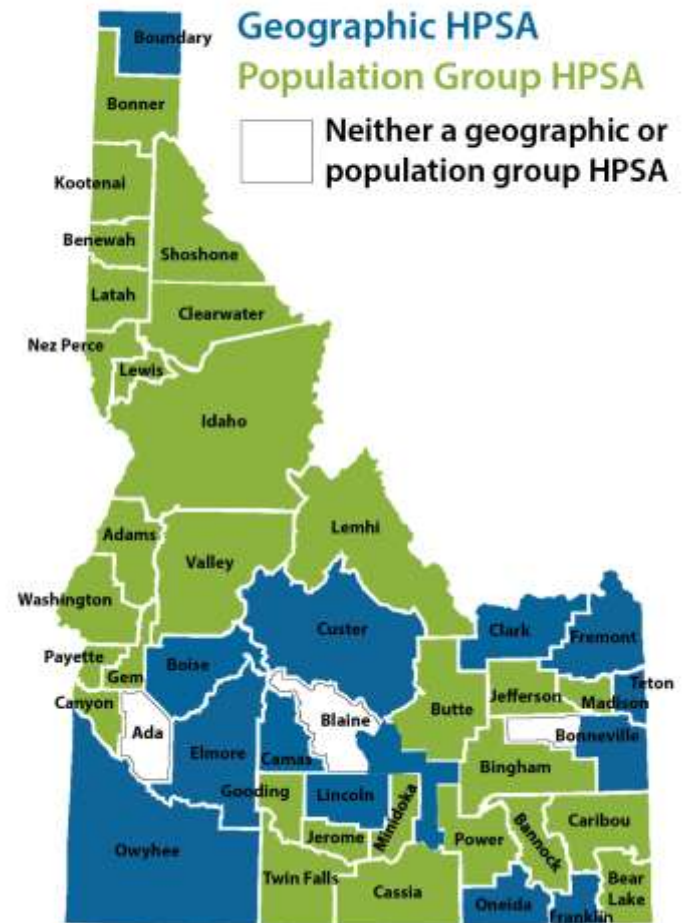


Figure 3. Idaho Primary Care Health Professional Shortage Area Service Areas



Health Professional Shortage Area Designations in Idaho



More than 97% of the state has an HPSA designation in primary care



95% of the state has an HPSA designation in dental care



100% of the state has an HPSA designation in mental care

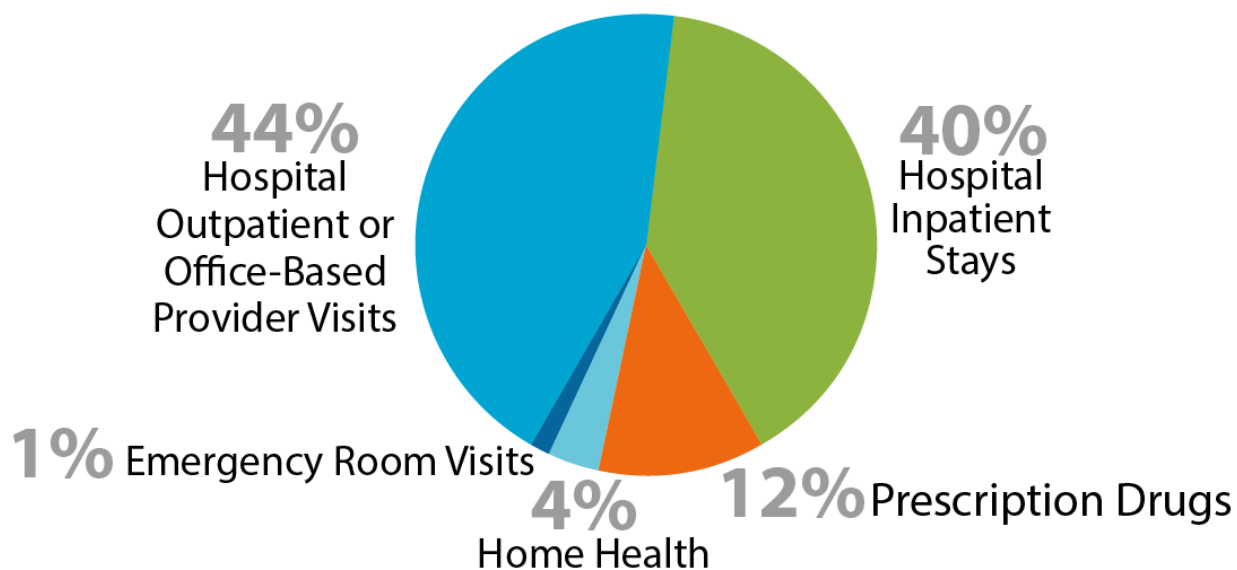


71% of the state is designated a Medically Underserved Area (MUA) or Medically Underserved Population (MUP)

Idaho benefits from **13** Federally Qualified Health Centers (FQHCs).

Financial Burden of Cancer

Figure 3. Percent Distribution of Cancer Treatment by Type of Service (U.S.) Idaho (2013)



Medical cost projections for cancer in Idaho are estimated at

\$1 Billion

for 2015 (Based on 2010 dollars)

Let's Get Started!



Idaho Comprehensive Cancer Strategic Plan 2016-2020

Prevention

Prevent cancer from
occurring

Early Detection and Screening

Detect cancer at its earliest stages

Treatment

Treat all cancer patients by
using the most appropriate
and effective therapy

Quality of Life

Optimize the quality of life for
every person affected by
cancer

At a Glance – Goals of the Idaho Comprehensive Cancer Plan

Prevention – Prevent Cancer from Occurring

Goal 1	Reduce the incidence and mortality of tobacco-related cancers
Goal 2	Increase access to healthy food options and opportunities for physical activity
Goal 3	Increase protective behaviors from sun and other ultraviolet radiation exposure
Goal 4	Increase the vaccination rate for vaccines shown to reduce the risk of cancer
Goal 5	Reduce cancer risk related to environmental carcinogens

Early Detection and Screening – Detect Cancer at Its Earliest Stages

Goal 6	Reduce breast cancer deaths and rate of late stage diagnosis through screening and early detection
Goal 7	Reduce deaths and numbers of new cases of cervical cancer through screening and early detection
Goal 8	Reduce the numbers of deaths and new cases of colorectal cancers through screening and early detection
Goal 9	Monitor the development and implementation of screening and early detection methods for other cancers

Treatment – Treat All Cancer Patients by Using the Most Appropriate and Effective Therapy

Goal 10	Increase timely access to quality cancer diagnostic and treatment services for all Idahoans
Goal 11	Increase opportunities to access and participate in cancer treatment clinical trials
Goal 12	Increase provider utilization of evidence-based treatment guidelines

Quality Of Life – Optimize the Quality of Life for Every Person Affected by Cancer

Goal 13	Improve the physical and mental health of cancer survivors
Goal 14	Improve access and referrals to palliative care services for cancer patients

PREVENTION

Goal 5: Reduce cancer risk related to environmental carcinogens

Objective	• Increase the proportion of persons living in homes that have been tested for radon.		
Measure	Measure	Baseline	Target
	5.1 Percentage of adults living in households ever been tested for radon (age adjusted to the year 2000 standard population)	20.7% BRFSS 2014	24.8% CCAI (20%)
Strategic Actions	<ul style="list-style-type: none">• Implement evidence-based policies, programs and systems changes to share information among the public, researchers, regulatory agencies and industry about environmental carcinogens, specifically radon.• Advocate for evidence-based epidemiologic and environmental monitoring and research across the life course (in utero and childhood, workplace, and multi-generational exposures).• Improve health professional knowledge, practice behaviors and systems support related to known and emerging environmental carcinogens.		

Annual State of Cancer in Idaho

- Executive summary
- Annual priorities
- Updated data tables

Stay tuned for updates in 2017

How to Apply the Plan



2016-2020 Idaho Comprehensive Cancer Plan Data Measures

**Comprehensive Cancer Alliance for Idaho
Annual Meeting
February 1, 2016**

Chris Johnson, Epidemiologist
Cancer Data Registry of Idaho
cjohnson@teamiha.org

Outline

- CDRI
- Cancer burden in Idaho
- CCAI Strategic Plan Measures

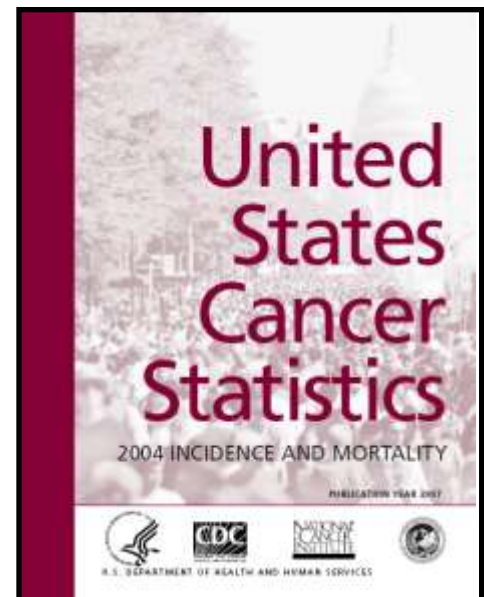


Cancer Data Registry of Idaho

- CDRI is a statewide cancer registry that collects incidence and survival data on all cancer patients who reside in the state of Idaho or who are diagnosed and/or treated for cancer in the state of Idaho.
- CDRI was established in 1969 and became population-based in 1971.
- Cancer is a reportable disease under state law, and operations of the registry are mandated by Idaho Code.
- Funding:
 - <1% of the Idaho tobacco tax, sole source contract from IDHW.
 - CDC
 - Grants & contracts
 - Post-marketing surveillance for monitoring drug safety
 - Special projects

Quality of Idaho Cancer Data

- Achieved NPCR National Data Quality Standard (24-month data) and Advanced National Data Quality Standard (12-month data)
- NAACCR Gold Standard for Quality, Completeness, and Timeliness
- Data included in all United States Cancer Statistics (USCS) and Cancer in North America (CINA) publications to date
- NPCR Data Quality Evaluation for 2011 data - accuracy rate of 99.3%

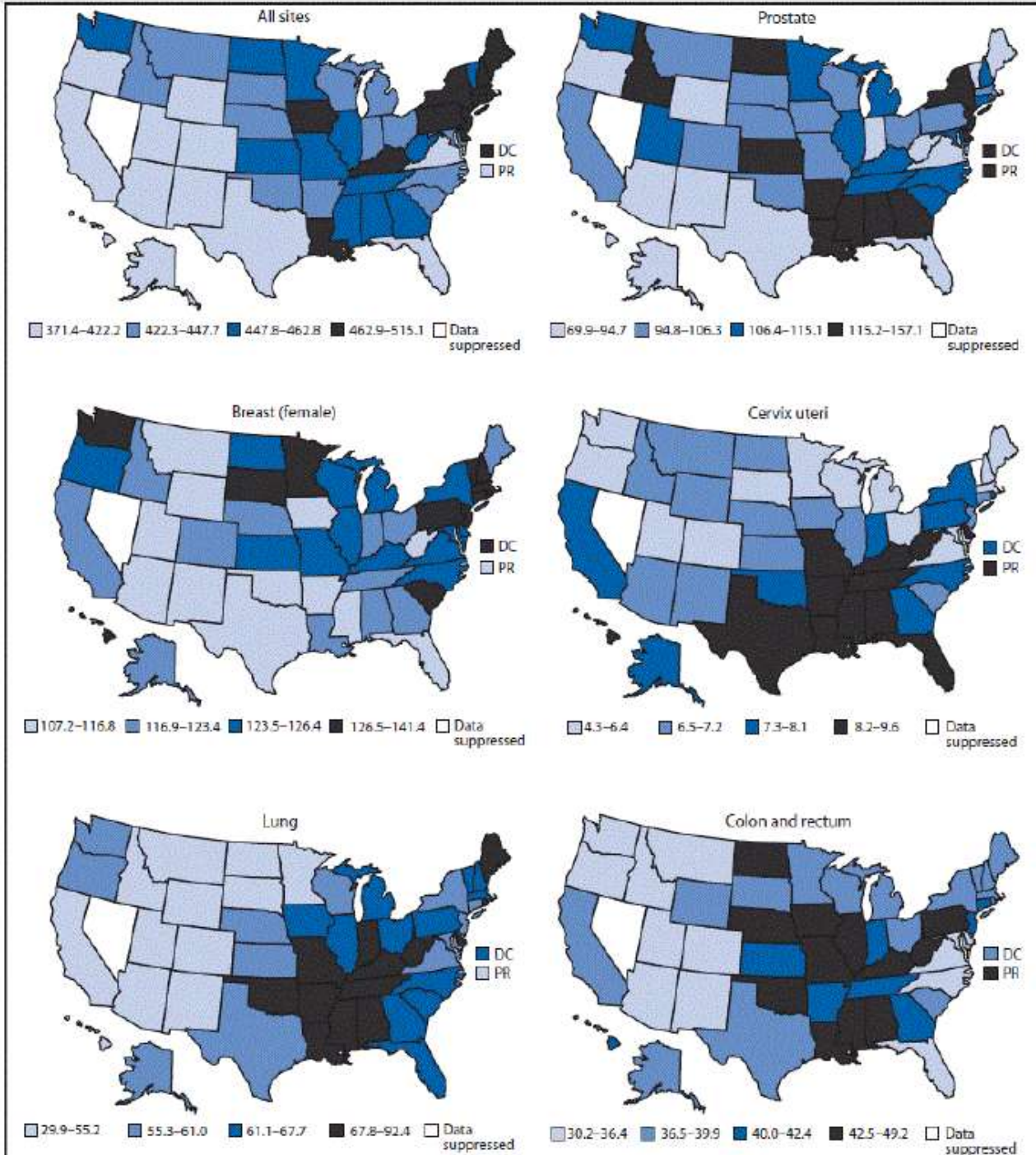


Cancer Burden in Idaho

- Since 2008, #1 cause of death in Idaho
 - About 22% of deaths are from cancer
- In 2014 in Idaho (preliminary data):
 - 7,354 new invasive cases
 - 900 new in situ cases
 - 2,789 cancer deaths

30% of those diagnosed this year will die of cancer within five years

Cancer Incidence 2012



Risk Factors and Screening

- 12th lowest state for smoking prevalence
- 22nd for healthy weight
- 29th for physical activity
- 36th for smokeless tobacco among males

- 44th for colorectal cancer screening
- 50th for mammography
- 51st for Pap test

2016-2020

Idaho Comprehensive Cancer Plan Data Measures

Across the cancer continuum:

- Risk Factors
- Screening
- Incidence
- Treatment
- Quality of Life
- Survival
- Mortality

Goal 1: Reduce incidence and mortality of tobacco-related cancers

Objectives

- Reduce cigarette smoking by adults.
- Reduce tobacco use by adolescents.
- Reduce use of smokeless tobacco products by adults.

Measures

	Measure	Baseline	Target
1.1	Percentage of adults who are current smokers (age adjusted to the year 2000 standard population)	16.5% BRFSS 2014	12.0% HP2020
1.2	Percentage of adolescents in grades 9 through 12 who used cigarettes, chewing tobacco, snuff, or cigars in the past 30 days	17.0% YRBS 2015	13.6% CCAI (20%)
1.3	Percentage of adult males aged 18+ who are current users of smokeless tobacco products such as chewing tobacco, snuff and snus (age adjusted to the year 2000 standard population)	9.4% BRFSS 2014	7.5% CCAI (20%)

Goal 2: Increase access to healthy food options and opportunities for physical activity

Objectives

- Increase the proportion of adults who meet the recommended physical activity guidelines.
- Increase the proportion of adults who are at a healthy weight.
- Increase the proportion of adolescents who meet current federal physical activity guidelines for aerobic physical activity.

Measures

Measure	Baseline	Target
2.1 Percentage of Idaho adults aged 18+ who engage in the recommended level of weekly physical activity (age adjusted to the year 2000 standard population)	18.4% BRFSS 2013	22.1% CCAI (20%)
2.2 Percentage of adults aged 20+ who are at a healthy weight (BMI >= 18.5 and <= 25.0; age adjusted to the year 2000 standard population)	32.5% BRFSS 2014	35.8% CCAI (10%)
2.3 Percentage of adolescents in grades 9 through 12 who meet physical activity guidelines for aerobic physical activity	27.9% YRBS 2013	31.6% HP2020

Goal 3: Increase protective behaviors from sun and other ultraviolet radiation exposure

Objectives

- Reduce the proportion of adolescents in grades 9 through 12 who use artificial sources of ultraviolet light for tanning.
- Reduce the proportion of adults aged 18 years and older who use artificial sources of ultraviolet light for tanning.
- Reduce the proportion of adults aged 18 years and older who become sunburned.

Measures

Measure	Baseline	Target
3.1 Percentage of adolescents in grades 9 through 12 who report using artificial sources of ultraviolet light for tanning	9.0% YRBS 2015	7.2% CCAI (20%)
3.2 Percentage of adults aged 18+ who report using artificial sources of ultraviolet light for tanning (age adjusted to the year 2000 standard population)	5.6% BRFSS 2014	4.5% CCAI (20%)
3.3 Percentage of adults who report having a red or painful sunburn that lasted a day or more in the past 12 months (age adjusted to the year 2000 standard population)	52.0% BRFSS 2014	46.8% CCAI (10%)

Goal 4: Increase vaccination rate for vaccines shown to reduce the risk of cancer

Objectives

- Increase the percentage of youth and young adults who have completed the recommended HPV vaccine series according to national guidelines.
- Promote hepatitis B vaccination and adoption of CDC recommendations for hepatitis screening.

Measures

	Measure	Baseline	Target
4.1	Percentage of adolescent females aged 13-17 years who completed 3 doses of the HPV vaccine	38.3% NIS-Teen 2014	80.0% HP2020
4.2	Percentage of adolescent males aged 13-17 years who completed 3 doses of the HPV vaccine	17.2% NIS-Teen 2014	80.0% HP2020
4.3	Percentage of newborns receiving hepatitis B vaccine (Hepatitis B vaccine administered from birth through age 3 days; children in the 2014 NIS born in January 2011 through May 2013)	75.4% NIS-Child 2014	85.0% HP2020

Goal 5: Reduce cancer risk related to environmental carcinogens

Objective Measure

- Increase the proportion of persons living in homes that have been tested for radon.

	Measure	Baseline	Target
5.1	Percentage of adults living in households ever been tested for radon (age adjusted to the year 2000 standard population)	20.7% BRFSS 2014	24.8% CCAI (20%)

Goal 6: Reduce breast cancer deaths and rate of late stage diagnosis through screening and early detection

Objectives

- Increase the proportion of women who receive breast cancer screening according to national guidelines.
- Reduce late stage female breast cancer.
- Reduce the rate of female breast cancer.

Measures

	Measure	Baseline	Target
6.1	Percentage of women aged 50 to 74 who had a mammogram within the past two years (age adjusted to the year 2000 standard population)	68.9%	81.1%
		BRFSS 2014	HP2020
6.2	Age-adjusted rate per 100,000 females of breast cancer diagnoses at late stage (regional and distant)	42.4	38.1
		CDRI 2013	CCAI (10%)
6.3	Age-adjusted mortality rate, female breast cancer	20.5	18.5
		BVRHS 2014	CCAI (10%)

Goal 7: Reduce deaths and numbers of new cases of cervical cancer through screening and early detection

Objectives

- Increase the proportion of women who receive cervical cancer screening according to national guidelines.
- Reduce the rate of invasive cervical cancer.

Measures

	Measure	Baseline	Target
7.1	Percentage of women aged 21-65 who have had a Pap test within the past three years (age adjusted to the year 2000 standard population)	76.3% BRFSS 2014	93.0% HP2020
7.2	Age-adjusted rate per 100,000 females of invasive cervical cancer diagnoses	5.2 CDRI 2013	4.7 CCAI (10%)
7.3	Age-adjusted cervical cancer mortality rate per 100,000 females	2.0 BVRHS 2014	1.6 CCAI (20%)

Goal 8: Reduce the numbers of deaths and new cases of colorectal cancers through screening and early detection

Objectives

- Increase the proportion of adults who receive colorectal cancer screening according to national guidelines.
- Reduce the rate of invasive colorectal cancer.
- Reduce the colorectal cancer death rate.

Measures

	Measure	Baseline	Target
8.1	Percentage of adults aged 50-75 who reported receiving a colorectal cancer screening based on the most recent guidelines, which include a blood stool test in the past year, sigmoidoscopy in the past 5 years and blood stool test in the past 3 years, or a colonoscopy in the past 10 years (age adjusted to the year 2000 standard population)	60.9% BRFSS 2014	80% 80% by 2018
8.2	Age-adjusted rate per 100,000 of invasive colorectal cancer incidence	35.1 CDRI 2013	31.6 CCAI (10%)
8.3	Age-adjusted mortality rate, colorectal cancer	12.8 BVRHS 2014	11.5 CCAI (10%)

Goal 9: Monitor the development and implementation of screening and early detection methods for other cancers

Objectives

- Disseminate updates to USPSTF cancer screening recommendations. Specific cancer screenings to address include:
 - ◊ Lung Cancer
 - ◊ Oral Cancer
 - ◊ Prostate Cancer
- Disseminate information on novel methods for screening and early detection, including imaging technologies, genomics and proteomics.

Goal 10: Increase timely access to quality cancer diagnostic and treatment services for all Idahoans

Objectives

- Increase the proportion of adults with health care coverage.
- Reduce the proportion of adults with cost-related barriers to care.
- Increase the proportion of cancer survivors who are living 5 years or longer after diagnosis.

Measures

	Measure	Baseline	Target
10.1	Percentage of Idaho adults aged 18-64 with health care coverage (age adjusted to the year 2000 standard population)	79.3% BRFSS 2014	95.2% CCAI (20%)
10.2	Percentage of Idahoans who could not see a doctor due to cost sometime in past year (age adjusted to the year 2000 standard population)	16.4% BRFSS 2014	13.1% CCAI (20%)
10.3	5-year relative survival ratio, adjusted for age and primary site mix (NAACCR cancer survival index)	63.6 CDRI 05-11	65.6 CCAI (Best states)

Goal 11: Increase opportunities to access and participate in cancer treatment clinical trials

Objectives

- Increase the proportion of cancer patients who enroll in treatment-related clinical trials.

Measures

	Measure	Baseline	Target
11.1	Percentage of cancer patients who enroll in treatment-related clinical trials	TBA CDRI 2015	50% Pediatric 5% Adults CCAI

Goal 12: Increase provider utilization of evidence-based treatment guidelines.

Objectives

- Promote awareness, education and advocacy efforts aimed at increasing the number of patients who receive high quality care.
- Monitor Idaho performance on American College of Surgeons Commission on Cancer (CoC) standards for Cancer Program Practice Profile Report (CP3R) treatment standards.

Goal 13: Improve the physical and mental health of cancer survivors

Objectives

- Increase the proportion of cancer survivors who receive survivorship care plans.
- Decrease the proportion of cancer survivors who report poor physical health.
- Decrease the proportion of cancer survivors who report poor mental health.
- Decrease the proportion of cancer survivors who report being a current smoker.
- Decrease the proportion of cancer survivors who report no physical activity outside of work in the past month.
- Increase the proportion of cancer survivors who report eating 5+ fruits and vegetables per day.

Goal 13: Improve the physical and mental health of cancer survivors

Measures

Measure	Baseline	Target
13.1 Proportion of cancer patients receiving survivorship care plans	TBA CoC Hospitals 2015	75% CoC
13.2 Percentage of cancer survivors who report poor physical health 14+ of last 30 days (age adjusted to the year 2000 standard population)	29.0% BRFSS 2011- 2012	26.1% CCAI (10%)
13.3 Percentage of cancer survivors who report poor mental health 14+ of last 30 days (age adjusted to the year 2000 standard population)	28.6% BRFSS 2011- 2012	25.7% CCAI (10%)
13.4 Percentage of cancer survivors who are current smokers (age adjusted to the year 2000 standard population)	31.3% BRFSS 2011- 2012	28.1% CCAI (10%)
13.5 Percent of cancer survivors who report no physical activity outside of work (age adjusted to the year 2000 standard population)	20.0% BRFSS 2011- 2012	23.3% CCAI (10%)
13.6 Percent of cancer survivors who report consuming 5+ servings fruit and vegetables per day (age adjusted to the year 2000 standard population)	20.0% BRFSS 2011- 2012	22.0% CCAI (10%)

Health Status and Behaviors among Cancer Survivors in Idaho, 2012

- There are more than 70,000 cancer survivors living in Idaho today
- Cancer survivors reported lower health-related quality of life than persons with no history of cancer
- CCAI targets for colorectal and cervical cancer screening were achieved by cancer survivors
 - CCAI target for breast cancer screening not achieved by cancer survivors
- Cancer survivors were more likely to be current smokers

Goal 14: Improve access and referrals to palliative care services for cancer patients

Objectives

- Work with the Idaho Health Care Directive Registry to evaluate and monitor progress on Idahoans who complete advanced directives.
- Collaborate with Honoring Choices Idaho to move forward the Idaho Community Initiative on Advanced Care Planning and report outcomes as the program moves forward.
- Increase the proportion of cancer patients whose physical pain caused by cancer or cancer treatment is under control.

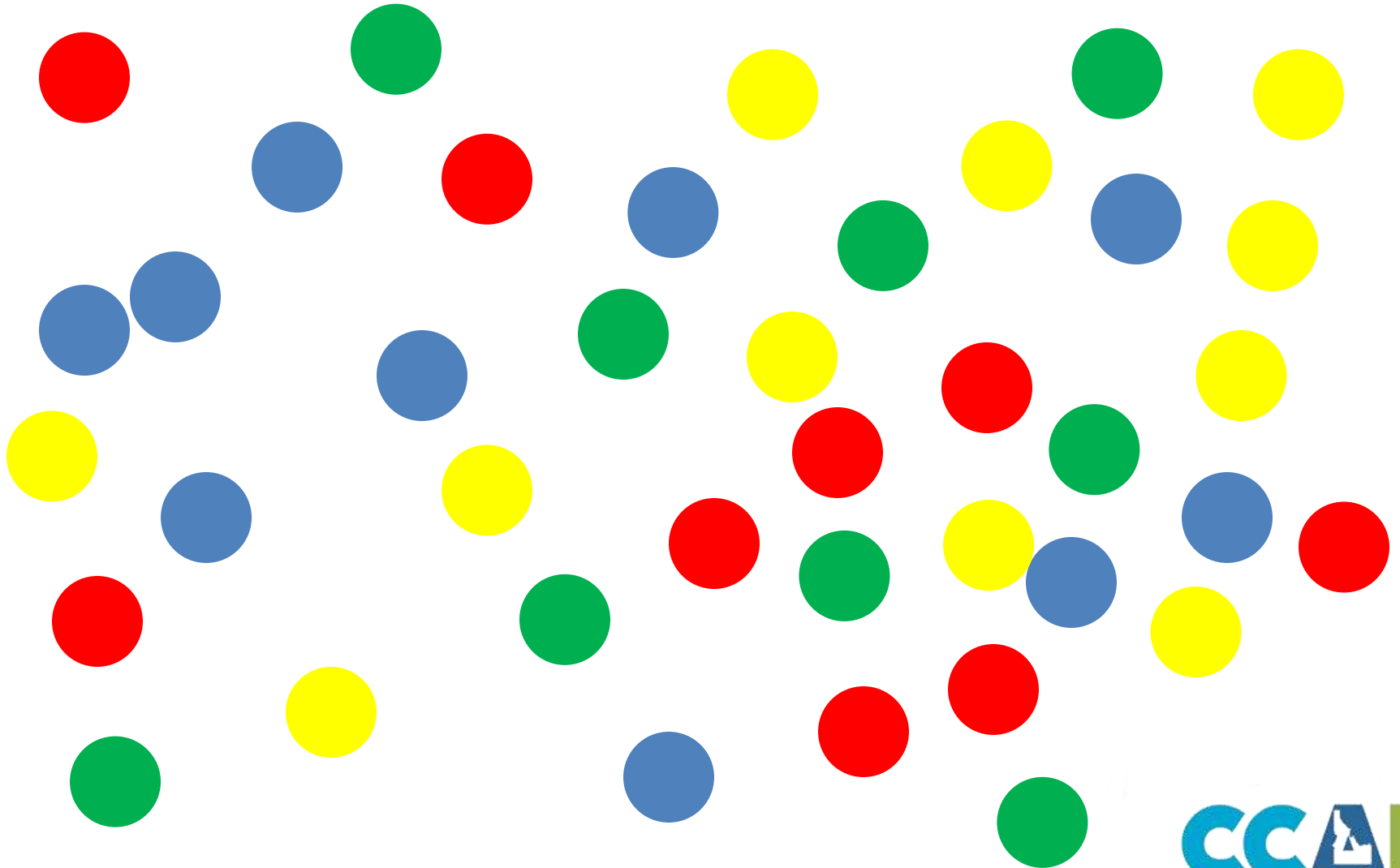
Measures

Measure	Baseline	Target
14.1 Access to palliative care in hospitals	B Grade CAPC 2015	A Grade CCAI
14.2 Proportion of cancer patients whose physical pain caused by cancer or cancer treatment is under control	TBA BRFSS	TBA

Questions?



2016 CCAI Priorities



Workgroup Breakout Session

Comprehensive Cancer Alliance for Idaho

Prevention

Early
Detection

Treatment

Quality of
Life

It's Your Turn!





Upcoming Events

 [CCAI Annual Meeting](#)

Monday, Feb 1 at 1:00 PM - 5:00 PM

 [Cancer Awareness and Prevention Coalition](#)

Tuesday, Feb 9 at 1:00 PM - 2:00 PM

 [North Idaho Cancer Advisory Group \(NICAG\)](#)

Monday, Feb 22 at 11:00 AM - 12:00 PM

 [Southeastern Idaho Public Health Cancer Coal!](#)

Wednesday, Feb 24 at 5:30 PM - 6:30 PM

[CLICK HERE for more upcoming events](#)

Idaho Comprehensive Cancer Plan 2016-2020



Idaho Comprehensive Cancer Strategic Plan 2016-2020

Check CCAI out on Facebook



 **Comprehensive Cancer Alliance for Idaho** shared their event.
1 hr

The CCAI Annual Meeting is right around the corner! Register today and join us in moving cancer control forward here in Idaho.



Next Steps

- Implement the Plan!
- Workgroup meetings

Visit www.ccaidaho.org or
Facebook
for more information



Comprehensive Cancer
Alliance for Idaho

Thank you!