

2016

# 2016-2020 Nevada Comprehensive Cancer Control Plan: Year One Evaluation

Nevada Division of Public and Behavioral Health

This document serves to report on the progress of the 2016-2020 Nevada Comprehensive Cancer Control Plan following the first year of implementation.



Nevada Division of Public and Behavioral Health  
7/11/2016  
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## Overview of the 2016-2020 Nevada Comprehensive Cancer Control Plan

Nevada Comprehensive Cancer Control Program (NCCCCP) is located at the Nevada Division of Public and Behavioral Health. The program partners with the Nevada Cancer Coalition (NCC) and the cancer control community to draft and implement a five-year cancer control plan in order to guide activities designed to prevent cancer, detect cancer earlier, improve treatment, and increase survivorship. The most recent plan was released at the NCC Cancer Control Summit in September 2015 and serves to guide cancer control activities from 2016-2020. The plan will be monitored throughout implementation and an annual report detailing the progress, successes, and challenges encountered will be produced.

## Statements of Progress/Performance Measures

The goals and objectives of the 2016-2020 Nevada Comprehensive Cancer Control Plan were written by the Nevada cancer control community in a series of strategic meetings held from January to June 2015. This evaluation report serves to measure progress on those goals and objectives from September 2015-July 2016. Future reports will detail progress made from September 2015 to July of the respective year.

Many of the goals and objectives use data collected from the Youth Risk Behavioral Survey (YRBS) and the Behavioral Risk Factor Surveillance System (BRFSS) and will be updated as these sources are updated. Unavailable updates will be noted.

For the first year, many measurements are unavailable or have not changed. The Year One Evaluation report will therefore rely heavily on process measures, such as activities completed. This is appropriate as activities have been designed to support the eventual change in outcomes, to be reflected as the plan progresses. Subsequent evaluations will include outcome measures as data becomes available.

## Plan Progress

This document is arranged by priority areas and related goals to best reflect the Nevada plan. Progress on goals is indicated by the status of each associated objective and activity. Status of goals and activities was assigned in a collaborative nature with the key partner(s) identified as being responsible for the goal activity in the plan. The nature of this report is to inform on plan progress, to celebrate successful activities and to recognize those activities needing future attention. In this way, the Nevada cancer control community hopes to be successful in the endeavor to decrease the burden of cancer.

Objectives and Activities marked as “In Progress” indicate the objective has an end. Objectives and Activities marked as “Ongoing” will continue throughout the five-year project period.

Color Coding Key	
	Indicates significant progress, in that the measurement has increased by more than 1/5 (20%) toward the goal.
	Indicates ongoing or in progress, but should be monitored to ensure success. All activities marked as ongoing or in progress are marked in this manner.
	Indicates an initiative in which little or no progress has been made. This initiative may be tackled in subsequent years, but is noted as needing attention.
	Boxes without a color indicate data is not yet available to measure progress.

**Priority Area I: Primary Prevention**

*Reduce risk factors for developing cancer among all Nevadans with an emphasis on human papillomavirus (HPV), tobacco, obesity, radon and ultraviolet (UV) radiation exposure.*

<b>Goal 1.1:</b> Increase the number of 13-17 year old children who have completed the 3-dose HPV vaccination series from 27% for girls and 7% for boys to at or above the national averages of 38% for girls and 14% for boys	<b>Status</b>
<b>Objective:</b> Increase the number of eligible Nevada Vaccines for Children provider offices that will receive AFIX visits and/or training necessary to decrease missed clinical opportunities for HPV vaccination through the use of electronic health records (EHRs) and Nevada WebIZ from 44 to 54.	82 <sup>1</sup>
<b>Objective:</b> Increase the number of continuing education opportunities for credit enhancing provider knowledge on the HPV vaccination series and patient compliance from 4 to 9.	8
<b>Objective:</b> Increase the number of campaigns promoting HPV vaccination from 1 to 5.	3
<b>Activity:</b> Support the efforts and campaigns put forth by immunization partners throughout the state.	Ongoing
<b>Activity:</b> Identify experts and champions to participate in HPV vaccination campaigns and educational opportunities.	Ongoing
<b>Activity:</b> Seek opportunities to increase compliance with the 3-dose HPV vaccination series including reminder-recall and other reminder systems.	Ongoing
<b>Success:</b> The HPV Free NV Summit bridged geographical gaps and increased engagement with rural partners. The HPV task force continues to see growth. HPV Free NV is now a fully recognized campaign.	
<b>Challenges:</b> Maintaining stakeholder engagement throughout work, continued financial constraints, addressing misconceptions on social media and in the public.	
<b>Opportunities:</b> Cancer control members are encouraged to join the Intermountain West HPV coalition to keep up to date with HPV progress in Nevada.	

<sup>1</sup> 38 initial teen AFIX visits occurred between Jan-Jun 2016

<b>Goal 1.2:</b> Decrease the percentage of adults who are current smokers from 19.4% to 18.4%	<b>Status</b>
<b>Objective:</b> Decrease the number of exemptions listed in the Nevada Clean Indoor Air Act by at least 5.	No Change
<b>Objective:</b> Increase the annual call volume to reach the Nevada Tobacco Quitline from 0.5% to 1.5% of the current smoking population.	0.88% <sup>2</sup>
<b>Objective:</b> Increase the number of statewide policies supporting tobacco-free housing from 0 to 1.	1
<b>Objective:</b> Establish a baseline of Nevada Tobacco Quitline users that complete cessation counseling and remain non-smoking after six months.	29.8% <sup>3</sup>
<b>Activity:</b> Promote the Nevada Tobacco Quitline and tobacco cessation resources to Nevadans.	Ongoing
<b>Activity:</b> Educate providers across the care continuum on tobacco cessation counseling, Nevada Tobacco Quitline, and other cessation resources and other cessation resources.	Ongoing
<b>Activity:</b> Monitor the success of the Nevada Tobacco Quitline via data provided on successful cessation through completion of counseling and six-month post-counseling surveys.	Ongoing
<b>Activity:</b> Support the efforts of smoke-free communities, housing, and campus initiatives with the state.	Ongoing
<b>Activity:</b> Educate policymakers on the benefits of comprehensive clean indoor air policy.	Ongoing
<b>Successes:</b> Progress in the movement for smoke-free multi-unit housing.	
<b>Challenges:</b> Removing exemptions to the Clean Indoor Air Act and creating Smoke Free Casinos.	
<b>Opportunities:</b> A Bill Draft Request to include ENDS in the Clean Indoor Air Act has been submitted. Additionally, the town of Mesquite has undertaken the initiative to become Nevada's first smoke free community.	

<sup>2</sup> Calculated from the 2015 BRFSS smoking prevalence and Quitline Call Volume Data

<sup>3</sup> Baseline established in July, 2016. 91 individuals remained non-smokers after six months out of 305 surveyed.

<b>Goal 1.3:</b> Decrease the percentage of youths who have reported smoking or using other tobacco products from 10.3% to 9.9%.	<b>Status</b>
<b>Objective:</b> Increase the known number of tobacco-free sporting venues from 0 to 4.	3 <sup>4</sup>
<b>Objective:</b> Increase the known number tobacco-free school campuses from 1 to 3.	1 <sup>5</sup>
<b>Objective:</b> Increase the known number of tobacco-free rodeo venues from 0 to 5.	1 <sup>6</sup>
<b>Objective:</b> Maintain the Nevada Statewide Coalition of Youth.	Discontinued
<b>Activity:</b> Support the activities of community and youth coalitions to prevent tobacco use initiation and promote cessation among current youth tobacco users.	Ongoing
<b>Activity:</b> Promote youth access to Nevada Tobacco Quitline as a cessation resources.	Ongoing
<b>Activity:</b> Support policies to create tobacco- and smoke-free venues.	Ongoing
<b>Successes:</b> Western Nevada College and Truckee Meadows Community College were awarded scholarships by The Truth Initiative to continue smoke-free efforts.	
<b>Challenges:</b> Engagement in statewide youth activities continues to be a challenge.	
<b>Opportunities:</b> New partnerships have been formed to promote the Nevada Tobacco Quitline to youth.	

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<sup>4</sup> Venturacci Gym (Fallon), Churchill County Pool, Lander County Volleyball Tournament Facilities, and eight parks in Nye, Esmeralda, and Lincoln Counties

<sup>5</sup> University of Nevada, Reno

<sup>6</sup> Nevada High School Rodeo in Elko, Nevada

<b>Goal 1.4: Reduce the percentage of adults who are obese from 26.2% to 24.8%</b>	<b>Status</b>
<b>Objective:</b> Increase the number of adults who report participating in 150 minutes or more of physical activity per week from 53.6% to 56.3%.	Data Not Yet Available
<b>Objective:</b> Increase the known number of worksites represented in the Nevada Cancer Coalition that adopt written worksite wellness policies from 0 to 20.	Data Not Yet Available
<b>Objective:</b> Increase the known number of jurisdictions that adopt a complete streets policy from 0 to 5.	2 <sup>7</sup>
<b>Activity:</b> Promote the benefits of exercise in preventing cancer.	Ongoing
<b>Activity:</b> Educate the public on how to best incorporate exercise into their lives.	Ongoing
<b>Activity:</b> Use the Nevada Division of Public and Behavioral Health worksite wellness toolkit to promote the adoption of worksite wellness policies.	Ongoing
<b>Activity:</b> Educate the public and policymakers on the importance of complete streets, designed and operated to enable safe access for all users, including pedestrians, bicyclists, motorists and transit riders of all ages and abilities.	Ongoing <sup>8</sup>
<b>Activity:</b> Partner with local jurisdictions to create and implement complete streets policies.	Ongoing
<b>Activity:</b> Support local and state efforts to create complete streets.	Ongoing
<b>Successes:</b> Multiple entities have been engaged in creating and drafting complete street policies.	
<b>Challenges:</b> No single best practice reduction/ prevention model has been proven effective in obesity control efforts. Additionally, weight status is dynamic throughout life stages, creating difficulty in designing effective, long lasting interventions.	
<b>Opportunities:</b> A Bill Draft Request will be submitted to the 2017 Legislative session to re-instate the collection of statewide BMI data among Nevada children.	

<sup>7</sup> Completed: Carson City 2014 Complete Street Policy, RTC Southern Nevada 2012 Complete Streets Policy. In process: NDOT Complete Streets, RTC Washoe Complete Streets Master Plan.

<sup>8</sup> Lead Agency: Nevada Department of Transportation

<b><i>Goal 1.5: Reduce the percentage of youth who are overweight or obese from 38.2% to 33.2%</i></b>	<b><i>Status</i></b>
<b>Objective:</b> Increase the number of national Early Childhood Education (ECE) standards met in Nevada from 3 to 15.	3
<b>Objective:</b> Increase the number of policies mandating physical education and physical activity in grades K-6 from 0 to 1.	0
<b>Objective:</b> Increase the number of worksites represented in the Nevada Cancer Coalition who have adopted written policies promoting and encouraging breastfeeding from 0 to 10.	Data Not Yet Available
<b>Activity:</b> Support state policy efforts to increase the number of ECE standards met.	Ongoing
<b>Activity:</b> Support local and state policy efforts to mandate physical education and physical activity in grades K-6.	No Progress
<b>Activity:</b> Promote the benefits of breastfeeding in decreasing obesity and in decreasing cancer risks.	Ongoing
<b>Activity:</b> Work with partners to promote and adopt breastfeeding policies.	Ongoing <sup>9</sup>
<b>Successes:</b> ECEs will be increased to 16 (out of 47) by 2017 due to the passing of AB 152 during the 2015 legislative session and changes occurring at the federal level.	
<b>Challenges:</b> Nevada has no statewide policy mandating PE/PA in grades K-6. Additionally, there is no certification of PE instructors.	
<b>Opportunities:</b> Nevada has recently initiated the Nevada Green Ribbon Schools program, a collaborative effort of reducing environmental impacts and cost, improving health and wellness of students and staff at schools.	

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<sup>9</sup> Lead Partner: WIC

<b><i>Goal 1.6: Decrease the average radon concentration within the state by 5%.</i></b>	<b><i>Status</i></b>
<b>Objective:</b> Increase the number of homes in Nevada tested for radon from 19,139 to 32,090.	22,883
<b>Objective:</b> Of the homes that have elevated radon levels, increase the number mitigated from 708 to 1,400.	896
<b>Objective:</b> Increase the number of newly constructed residential homes built using radon-resistant new construction techniques from 163 to 650.	416
<b>Activity:</b> Educate real estate industry professionals, health providers, municipalities, and policymakers about the radon health risk.	Ongoing
<b>Activity:</b> Encourage realtors and real estate agencies to recommend radon testing as part of the home inspection process or during the real estate transaction.	Ongoing
<b>Activity:</b> Conduct an annual campaign to educate Nevadans about the radon health risk, the importance of testing, how to obtain test kits and properly test their homes, the benefits of radon mitigation and radon-resistant new home construction, and how to find board-certified, and state-licensed radon mitigation professionals.	Ongoing
<b>Activity:</b> Advocate for policy to require radon mitigation to be conducted by certified, state-licensed radon professionals, and for policy to require that professional testing, especially in the case of real estate transactions are conducted by certified radon professionals.	In Progress
<b>Activity:</b> Educate the building industry by promoting best practices in radon-resistant new home construction.	Ongoing
<b>Successes:</b> The Radon Stakeholder Meeting held in Reno in May brought together many agencies to partner on future radon control efforts.	
<b>Challenges:</b> Finding champions to educate stakeholders and policymakers has proven challenging. Radon control efforts include many non-traditional partners, including the building and real estate industries, who may not be familiar with public health efforts and strategies.	
<b>Opportunities:</b> Radon control legislation may move forward during the 2017 session. Additionally, efforts are underway to add tax credits for radon control measures to the 2017 Qualified Allocation Plan.	

<i>Goal 1.7: Increase the number of regulatory policies for indoor tanning salons from 0 to 1.</i>	<i>Status</i>
<b>Objective:</b> Increase the number of enforcement mechanisms to ensure tanning salons are not providing services to youths under age 18, under Nevada Revised Statutes (NRS 597) from 0 to 1.	No Change
<b>Activity:</b> Draft language providing for regulation and enforcement of tanning salons under NRS 597.	In Progress
<b>Activity:</b> Support changes to NRS 597 to provide for regulation and enforcement of tanning salons.	In Progress
<b>Activity:</b> Distribute toolkits outlining NRS 597 to tanning salons.	No Progress
<b>Successes:</b> National and local partners have been essential in supporting these initiatives.	
<b>Challenges:</b> Historically, Nevada does not support mandate language.	
<b>Opportunities:</b> The Food and Drug Administration will be releasing a formal warning on sunlamp use by the end of the year.	

<i>Goal 1.8: Increase the number of Nevada school districts who have adopted UV safety policies from 0 to target of 5 school districts.</i>	<i>Status</i>
<b>Objective:</b> Increase the number of presentations to school staff on the importance of UV safety for students from 0 to 10.	3
<b>Objective:</b> Increase the number of toolkits distributed to schools from 0 to 10.	8 <sup>10</sup>
<b>Activity:</b> Develop toolkit for teachers, nurses, and other school staff to use to adopt UV safety curriculum, and policy within their school.	Developed
<b>Activity:</b> Implement ongoing evaluation to determine best practices for school-based UV safety education.	Ongoing
<b>Successes:</b> Douglas County School District has enrolled in the Sun Smart Schools Program for the 2016-2017 school year.	
<b>Challenges:</b> Skin cancer control efforts are often challenged by opposing norms, including the social normative behavior of a tanned appearance.	
<b>Opportunities:</b> The cancer control community is welcome to become involved in the Sun Smart Task Force and serve as volunteers at various community events. Grass roots and community involvement will be essential in moving this program forward.	

<sup>10</sup> Toolkits to all seven pilot schools and 1 toolkit to the Douglas County Chief Nurse. All Douglas County Schools will receive a toolkit and implement the program in the 2016-2017 school year.

**Priority Area II: Early Detection and Screening**

*Promote, increase, and optimize the appropriate use of high-quality cancer screening to increase early detection of cancer among Nevadans.*

<b>Goal 2.1: Decrease the percentage of late-stage breast cancer diagnoses among women from 37.5% to 35.6%</b>	<b>Status</b>
<b>Objective:</b> Increase the prevalence of women 40 and older who report having had a mammogram and a clinical breast exam within the prior two years from 69.9% to 73.4%.	Data Not Yet Available
<b>Activity:</b> Collaborate to develop a consistent public message used by government and private entities about breast cancer screening guidelines based on scientific evidence.	Developed <sup>11</sup>
<b>Activity:</b> Seek additional funding and address related capacity issues for programs that provide and/or pay for breast cancer screening at low or not cost for women who are uninsured and underinsured through collaboration with partner organizations.	No Progress
<b>Activity:</b> Enhance access to screening and early detection through the state for low-income women, uninsured women, and other medically underserved populations.	Ongoing
<b>Activity:</b> Promote navigation and patient education to enhance compliance with physician screening referral and screening completion.	Ongoing
<b>Activity:</b> Promote awareness of increased risks for breast cancer such as dense breast tissue, genetics, and race/ethnicity.	Ongoing
<b>Activity:</b> Support patient navigation services for all women undergoing screening, diagnostic, and treatment services, particularly for populations at increased risk for late-stage disease or with a higher mortality rate.	No Progress
<b>Activity:</b> Support and promote team-based care reimbursement models.	Ongoing
<b>Successes:</b> Women’s Health Connection and DP Video Productions have partnered to increase awareness of breast cancer screenings via social media, including a new text messaging campaign. The placement of Community Health Workers at FQHCs have increased screening rates by resolving barriers, promoting patient education, and performing case management.	
<b>Challenges:</b> Continued provider shortages and lack of access to screening and treatment services, especially in geographically isolated rural areas.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Early Detection, Diagnosis, and Treatment Task Force to assist in increasing breast cancer screening rates.	

<sup>11</sup> The NCC Early Diagnosis, Detection, and Treatment Task Force has agreed to promote screening at age 40.

<b>Goal 2.2:</b> <i>Increase the overall percentage of women 18 years and older who have had a Pap test within the last three years from 78% to 81.9%.</i>	<b>Status</b>
<b>Objective:</b> Increase the number of community health clinics using reminder-recall systems for cervical cancer screening from 1 to 5.	Data Not Yet Available
<b>Objective:</b> Increase the number of campaigns promoting cervical cancer screening from 0 to 2.	In Progress
<b>Activity:</b> Seek additional funding and address related capacity issues for programs that provide and/or pay for cervical cancer screening at low or not cost for women who are uninsured and underinsured through collaboration with partner organizations.	No Progress
<b>Activity:</b> Enhance access to screening and early detection through the state for low-income women, uninsured women, and other medically underserved populations.	Ongoing
<b>Activity:</b> Support meaningful use initiatives, including opportunities to implement reminder-recall systems and enhance usage of electronic health records.	Ongoing
<b>Successes:</b> Women’s Health Connection (WHC) expanded cervical cancer screening to include women 21-39 years of age. Of the 550 women screened in the last year through WHC, 17 women were diagnosed with cervical cancer and were successfully navigated into treatment services.	
<b>Challenges:</b> Geographical isolation and low population density of the state have presented challenges in providing screening and diagnostic services to women in rural areas. In many cases, provider shortages in rural areas have diminished the program’s ability to reach women in need of services due to distance and financial barriers.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Early Detection, Diagnosis, and Treatment Task Force as well as to participate in public meetings to engage in meaningful ways to increase cervical cancer screening rates.	

<b>Goal 2.3: Decrease the percentage of late-stage colorectal cancer diagnoses from 59.6% to 56.6%.</b>	<b>Status</b>
<b>Objective:</b> Increase the proportion of adults aged 50-75 who had a colonoscopy/sigmoidoscopy within the previous 10 years or a blood stool test within one year from 61% to 80%.	Data Not Yet Available
<b>Activity:</b> Work with community organizations to spread culturally-tailored messages about primary prevention and effective screening methods within ethnically diverse communities.	Ongoing
<b>Activity:</b> Conduct statewide campaign to educate Nevadans on the importance and relative ease of colon cancer screening with “choice” concept.	Ongoing
<b>Activity:</b> Disseminate provider toolkits to assist physicians in educating patients on the importance of colon cancer screening and screening test options.	Implemented
<b>Activity:</b> Promote navigation and patient education to enhance compliance with physician screening referral and screening completion.	Ongoing
<b>Activity:</b> Create and enhance electronic health records (EHR) and reminder-recall systems.	In Progress <sup>12</sup>
<b>Activity:</b> Enhance access to screening and early detection throughout the state for low-income and other medically underserved populations.	Ongoing
<b>Successes:</b> Successful partnerships have been formed with Nevada Health Centers and Northern Nevada HOPES to develop sustainable changes to increase screenings. Additionally, the placement of Community Health Workers at Federally Qualified Health Centers (FQHCs) has increased screening rates by resolving barriers, promoting patient education, and performing case management.	
<b>Challenges:</b> Lack of a real time connection with Medicaid data creates challenges in the ability to produce reliable screening and treatment surveillance data. The continued provider shortage and lack of access to treatment for uninsured/ underinsured individuals continues to impact the burden of colorectal cancer statewide.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Early Detection, Diagnosis, and Treatment Task Force as well as to participate in public meetings to engage in meaningful ways to increase colorectal cancer screening rates in eligible populations.	

<sup>12</sup> Nevada Health Centers and Northern Nevada HOPES

<b>Goal 2.4: Decrease the proportion of late-stage diagnoses of lung cancer from 79.2% to 75.2%.</b>	<b>Status</b>
<b>Objective:</b> Establish baseline screening rates for eligible Nevadans within the recommended screening population and at high risk (between the ages of 55 and 80 and who have smoked 30 pack years in the past and quit within the last 15 years and are now within that age range).	Data Not Yet Available
<b>Objective:</b> Increase screening rates for eligible Nevadans within the recommended screening population and at high risk by 25%.	Data Not Yet Available
<b>Activity:</b> Identify at-risk populations throughout Nevada and provide tailored information on lung cancer risk and low-dose computed tomography (LDCT) screening.	No Progress
<b>Activity:</b> Educate primary care providers on the risks associated with LDCT and encourage best practices among cancer centers and hospitals.	Ongoing
<b>Activity:</b> Provide a comprehensive listing of all sites throughout the state providing low-cost LDCT scans.	Ongoing
<b>Activity:</b> Support policy to ensure that Nevada Medicaid and other health plans within the state health exchange cover lung cancer screening for the recommended population with no cost-sharing.	No Progress
<b>Successes:</b> The United States Preventive Services Task Force (USPSTF) assignment of a Grade B to support screening for lung cancer by use of Low-Dose CT in certain populations led to insurance coverage of this screening by Medicare, Medicaid, and ACA-compliant health plans. Additionally, the Nevada Cancer Coalition established the Early Detection, Diagnosis, and Treatment Task Force to promote this recommended screening and find meaningful ways to increase screening rates.	
<b>Challenges:</b> Stigma concerning lung cancer, paired with low education concerning lung cancer screening continues to discourage patient uptake of screening. Continued provider shortages and lack of access continue to be a challenge as well.	
<b>Opportunities:</b> Cancer control community members are encouraged to join the Nevada Cancer Coalition Early Detection, Diagnosis, and Treatment Task Force to help find meaningful ways to increase lung cancer screening rates.	

**Priority Area III: Diagnosis, Treatment, and Palliation**

*Increase access to appropriate and effective cancer diagnosis and treatment services, and awareness of and participation in cancer clinical trials, especially among underserved populations.*

<b>Goal 3.1: Increase the number of pathways for enrollment in Medicaid for eligible women needing treatment for breast or cervical cancer from 1 to 5.</b>	<b>Status</b>
<b>Objective:</b> Increase the number of policy changes from 0 to 1 allowing women of any age under 250% of the Federal Poverty Level (FPL) access to treatment through Medicaid after a breast or cervical cancer diagnosis from any provider.	In Progress
<b>Activity:</b> Meet with Medicaid to discuss expansion of the treatment.	Completed
<b>Activity:</b> Establish baseline cost and data for the treatment of breast and cervical cancer.	Completed
<b>Activity:</b> Identify entities, such as hospitals or other health care providers, to serve as pathways to enrollment in Medicaid for breast or cervical cancer treatment for eligible women.	Ongoing
<b>Activity:</b> Create an action plan to expand access to breast cancer treatment.	In Progress
<b>Successes:</b> Collaboration between the Nevada Cancer Coalition, Nevada Chronic Disease Prevention and Health Promotion Section, Nevada Medicaid, and Nevada Division of Welfare and Supportive Services, resulted in the successful expansion of eligibility for Medicaid coverage through the Nevada Breast and Cervical Cancer Treatment Act.	
<b>Challenges:</b> High percentage of breast cancer cases in Nevada are diagnosed as late stage. There is a need to increase screening to increase early diagnosis and survivorship, but limited access to screening and treatment remain challenges.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Early Detection, Diagnosis, and Treatment Task Force to engage in meaningful ways to improve access to and quality of treatment for cancer.	

<b>Goal 3.2: Increase the number of education opportunities on palliative care for adults and pediatrics from 0 to 6.</b>	<b>Status</b>
<b>Objective:</b> Increase the number of medical school and nursing school curriculum to include a section on palliative care for adults and pediatrics from 0 to 2.	No Progress
<b>Objective:</b> Increase the number of continuing education opportunities for clinicians on palliative care for adults and pediatrics from 0 to 2.	No Progress
<b>Objective:</b> Increase the number of education materials targeting patients and family on quality adult and pediatric palliative care from 0 to 2.	In Progress
<b>Activity:</b> Identify curriculum incorporating palliative care.	No Progress
<b>Activity:</b> Create partnerships with Nevada nursing programs and medical schools.	Ongoing
<b>Activity:</b> Promote palliative care to nursing school and medical school faculty.	Ongoing
<b>Successes:</b> Children's Specialty Center / Cure 4 The Kids in Las Vegas opened a Pediatric Palliative Care Clinic in Southern Nevada in February 2016.	
<b>Challenges:</b> The intent and spectrum of palliative care continues to be misunderstood, both by the general public and medical community.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Survivorship and Palliative Care Task Force to engage in meaningful ways to improve understanding of and access to palliative care services. Additionally, the development of new medical schools and physician training programs creates new opportunities for collaboration.	

<b>Goal 3.3: Increase the average annual enrollment in adult cancer treatment and cancer control clinical trials from .85% to 1.5%.</b>	<b>Status</b>
<b>Objective:</b> Increase the number of hospitals and physician offices offering clinical trials that accept the short form patient consent for non-English speaking patients from 14 to 16.	14
<b>Objective:</b> Increase the number of resources listing all open National Cancer Institute, pharmaceutical and industry clinical trials available at facilities within Nevada from 0 to 1.	No Progress
<b>Activity:</b> Establish a clinical trials task force.	In Progress
<b>Activity:</b> Prepare a whitepaper on the use of short form consent for non-English speaking patients enrolling in clinical trials.	No Progress
<b>Activity:</b> Present whitepaper to internal review boards of facilities offering clinical trials and collaborate on implementation of short form consent.	Data Not yet Available
<b>Activity:</b> Develop a list of all health care providers offering or potentially offering cancer-related clinical trials within Nevada.	Ongoing
<b>Successes:</b> The increased use of the short form patient consent is likely to lead to an increased enrollment in clinical control trials.	
<b>Challenges:</b> Lack of provider recommendations to enroll in clinical trials continues to challenge enrollment.	
<b>Opportunities:</b> The Nevada Cancer Coalition will be establishing the clinical trials task force in the coming months. The cancer control community is encouraged to look for the inaugural meeting through the NCC newsletter and participate on this task force.	

<b>Goal 3.4:</b> <i>Meet or exceed national baseline of 94% of eligible patients enrolled in clinical trials if seen at a Children's Oncology Group (COG) practice in Nevada.</i>	<b>Status</b>
<b>Objective:</b> Establish a benchmark of COG patients enrolled in clinical trials.	No Progress
<b>Objective:</b> Increase the number of COG components within Nevada from 4 to 5.	No Progress
<b>Activity:</b> Support provider needs for enrollment in pediatric clinical trials.	Data Not yet Available
<b>Activity:</b> Promote research to improve quality of life for pediatric cancer survivors that address the physical, cognitive, and psychosocial consequences of treatment from diagnosis through late effects.	Ongoing
<b>Activity:</b> Advocate for enhanced research funding to address the needs of childhood cancer patients and survivors across the continuum of care.	Ongoing
<b>Activity:</b> Increase access to COG Family Handbook for patients' families and caregivers.	Data Not yet Available
<b>Successes:</b> The Nevada Cancer Coalition has connected with researchers at Fred Hutch's Project Violet for presentation on research and innovations in treatment for brain cancers (focus on pediatric patients) for presentation at 2016 Nevada Cancer Control Summit. Work is also being done to connect researchers from that lab to funding and partners within Nevada. Renown has recently signed an agreement with Stanford that is likely to impact access to pediatric treatment and clinical trials.	
<b>Challenges:</b> Northern Nevada continues to have fluctuation in programs for pediatric cancer treatment.	
<b>Opportunities:</b> Increased collaboration between pediatric cancer organizations and treatment providers is an opportunity, and groundwork is being laid.	

**Priority Area IV: Survivorship and Quality of Life**

*Improve Nevada cancer survivors' quality of life through increased awareness, education, and access to survivorship resources and services.*

<b>Goal 4.1:</b> Increase the number of non-metastatic cancer patients treated at Commission on Cancer- (CoC-) Accredited facilities who receive a survivorship care plan at the completion of treatment to 75%.	<b>Status</b>
<b>Objective:</b> Establish a baseline number of non-metastatic cancer patients undergoing treatment at CoC- Accredited facilities that receive survivorship plans.	No Progress
<b>Objective:</b> Identify opportunities to increase the use of survivorship plans in CoC Accredited facilities and non-CoC- Accredited facilities.	In Progress
<b>Objective:</b> Establish a baseline number of education program including survivorship information as part of the curriculum.	Baseline Established As 0
<b>Objective:</b> Increase the number of education programs including survivorship information as part of their curriculum.	No Progress
<b>Activity:</b> Identify opportunities to collaborate with providers and partners regarding the use of survivorship care plans.	Ongoing
<b>Activity:</b> Share information with partners on challenges, solutions, and best practices in survivorship care planning.	Ongoing
<b>Successes:</b> The Nevada Cancer Coalition has established the Survivorship and Palliative Care Task Force to work on these activities. NCC and state of Nevada staff were able to attend national cancer survivorship research conference to learn the latest about cancer survivorship care and planning.	
<b>Challenges:</b> A funding source to support survivorship activities at the coalition level has not been identified. In the clinical realm, survivorship care planning is not a reimbursable activity. Other challenges include lack of complete health care records, including the lag time of full Health Information Exchange implementation, and lack of provider buy-in, largely due to lack of reimbursement, affects the number of care plans currently developed and delivered.	
<b>Opportunities:</b> Physician champions will need to be identified to help promote the importance of survivorship care plans.	

<b>Goal 4.2: Increase educational opportunities for health care professionals to learn about best practices in survivorship from 0 to 2.</b>	<b>Status</b>
<b>Objective:</b> Increase the known number of medical schools including curriculum on the topic of survivorship care from 0 to 2.	No Progress
<b>Objective:</b> Increase the known number of nursing schools including curriculum on the topic of survivorship care from 0 to 5.	No Progress
<b>Objective:</b> Increase the number of focus groups that result in the identification of information needed to enhance transition of care from 0 to 2.	No Progress
<b>Activity:</b> Identify medical and nursing schools including survivorship curriculum.	No Schools offer curriculum
<b>Activity:</b> Partner with medical and nursing schools to implement survivorship curriculum.	No Progress
<b>Activity:</b> Promote best practices for the transition of care from cancer centers or oncologists to primary care providers.	Ongoing
<b>Successes:</b> The Nevada Cancer Coalition has established the Survivorship and Palliative Care Task Force to work on these activities.	
<b>Challenges:</b> A funding source to support survivorship activities at the coalition level has not been identified. In the clinical realm, survivorship care planning is not a reimbursable activity. Other challenges include lack of complete health care records, including the lag time of full Health Information Exchange implementation, and lack of provider buy-in, largely due to lack of reimbursement, affects the number of care plans currently developed and delivered.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Survivorship and Palliative Task Force to engage in meaningful ways promote and implement survivorship care activities.	

<b>Goal 4.3: Increase the number of systems promoting survivorship care knowledge to cancer survivors from 1 to 3.</b>	<b>Status</b>
<b>Objective:</b> Increase the number of organizations offering the Stanford Survivorship Self-Management curriculum or similar survivorship program with fidelity from 1 to 3.	2
<b>Activity:</b> Identify health care systems working to support survivorship care practices.	Ongoing
<b>Activity:</b> Partner with trainers for Stanford Survivorship Self-Management curriculum to offer training opportunities.	In Progress
<b>Activity:</b> Assist with promotion and enrollment in survivorship care programs.	Ongoing
<b>Successes:</b> A second location offering the Stanford program is now located in at the Sanford Center for Aging at the University of Nevada, Reno, increasing access to these programs to both southern and northern Nevada.	
<b>Challenges:</b> Stanford programs have been challenging to implement in Nevada due to their rigor. A minimum class size is required to train facilitators for the Stanford program, making it a challenge to expand the program to smaller communities without larger expenses for travel related to training. Additionally, the workshops must have a minimal enrollment to be delivered.	
<b>Opportunities:</b> A new radiation facility and partnering nonprofit organization in Elko is looking at opportunities to support survivorship and patients undergoing treatment, creating another opportunity for access to survivorship services in Elko.	

<b>Goal 4.4:</b> Increase the number of programs promoting survivorship care knowledge to pediatric, adolescent, and young adult cancer survivors from 1 to 2.	<b>Status</b>
<b>Objective:</b> Develop guidelines for access to survivorship care to supplement existing Children’s Oncology Group (COG) program, from 0 to 1.	No Progress
<b>Activity:</b> Establish a list of survivorship resources for pediatric, adolescent, and young adult cancer patients to provide to patients and their families.	In Progress
<b>Activity:</b> Identify partners to assist with development of guidelines for access to survivorship care within Nevada.	In Progress
<b>Activity:</b> Identify partners or resources to provider survivorship care education to pediatric, adolescent, and young adult cancer survivors.	In Progress
<b>Activity:</b> Support and promote team-based care reimbursement models.	Ongoing
<b>Successes:</b> The Nevada Cancer Coalition has established the Survivorship and Palliative Care Task Force to work on these activities.	
<b>Challenges:</b> A funding source to support survivorship activities at the coalition level has not been identified. In the clinical realm, survivorship care planning is not a reimbursable activity. Other challenges include lack of complete health care records, including the lag time of full Health Information Exchange implementation, and lack of provider buy-in, largely due to lack of reimbursement, effects the number of care plans currently developed and delivered.	
<b>Opportunities:</b> The cancer control community is encouraged to participate in the Nevada Cancer Coalition Survivorship and Palliative Task Force to engage in meaningful ways promote and implement survivorship care activities.	

## Priority Area V: Cancer Surveillance and Research

*Ensure complete and timely collection, dissemination, and utilization of comprehensive and cancer-related surveillance data for cancer control planning, implementation, and evaluation in Nevada.*

<b>Goal 5.1: Improve Nevada Central Cancer Registry's (NCCR) certification status to Silver Certification by 2016 and Gold Certification by 2018 through 2020.</b>	<b>Status</b>
<b>Objective:</b> Increase the number of providers reporting complete, accurate, and timely data to the NCCR by 82% to 95%.	83% <sup>13</sup>
<b>Activity:</b> Determine providers that are underreporting or not reporting to the NCCR.	In Progress
<b>Activity:</b> Modify reporting regulations with the Nevada Administrative Code 457.	In Progress
<b>Activity:</b> Establish data quality feedback for providers to ensure compliance and implement penalty fees for non-and under-reporters.	Ongoing
<b>Successes:</b> Reporting into the NCCR has been increasing steadily.	
<b>Challenges:</b> Continued outreach is needed to ensure the increase in reporting is maintained. Additional education to providers on how the registry works, how to report data, who needs to report and what information needs to be reported is needed to increase provider compliance and align Nevada with national standards.	
<b>Opportunities:</b> The further development of the Nevada Cancer Registrars Association and collaboration between this association and other professional medical associations could enhance the understanding of the cancer registry's purpose and goals.	

<sup>13</sup> 2013 Data Submission Standard

<b>Goal 5.2: Produce research and cancer control information useful for stakeholders and the public in Nevada from 1 to 7.</b>	<b>Status</b>
<b>Objective:</b> Increase the number of web pages or sites with interactive data charts or graphics allowing stakeholders to review and understand cancer data within the state from 1 to 2.	1
<b>Objective:</b> Increase the number of epidemiological and research reports specific to cancer control from 0 to 5.	0
<b>Activity:</b> Conduct stakeholder meetings to assess the use of cancer data within the state and identify data needs.	Ongoing
<b>Activity:</b> Work with epidemiologists and researchers to research and publish reports.	Ongoing
<b>Activity:</b> Produce cancer control-specific dashboard using resources available and identified additions.	Ongoing
<b>Successes:</b> The Nevada Central Cancer Registry was essential in providing data to guide the work of the 2016-2020 Nevada Comprehensive Cancer Control Plan. The burden reports used during this period are intended to be updated periodically over the next five years of plan implementation.	
<b>Challenges:</b> Reporting to the NCCR must continue to be increased in order to better increase the ability of the registry to provide timely reports to the public.	
<b>Opportunities:</b> The further development of the Nevada Cancer Registrars Association and collaboration between this association and other professional medical associations could enhance the registry's ability to provide meaningful research to the community.	

## Evaluation Results

This report serves to evaluate the first year of the 2016-2020 Nevada Comprehensive Cancer Control Plan. As the plan is in the first year of implementation, this evaluation was largely conducted using a process methodology and focuses largely on the progress made on activities and objectives. Much data is not yet available and will be made available in subsequent reports. Subsequent reports will also focus more on outcome measures as the data becomes available. To summarize the evaluation results, only objectives were examined. Details on both activities and objectives can be found in the previous section of this report (Plan Progress). The results detailed below do not capture the timeline of the plan, as many objectives were designed for development in subsequent years. Within the limits of the methodology, these results bring attention both to the progress made in cancer control efforts over the past year, and highlight those areas of the plan needing future work.

Objectives were assigned to the following categories: positive increase, neutral, or needing attention. Those categorized as positive increase have made a twenty percent (1/5 for 1 year out of 5) increase towards meeting the goal of the objective. Objectives categorized as neutral have made some limited progress or are actively occurring currently. Objectives categorized as needing attention have been discontinued, or have made no progress, either due to lack of attention, resources, or because they are designed to be implemented at a later date. These details can be captured in the Plan Progress Section of this document.

### Priority Area I: Primary Prevention

- Objectives for Priority Area I: Twenty- Three (23)
  - Positive Increase: 13/23 (56%)
  - Neutral: 4/23 (17%)
  - Needs Attention: 3/23 (13%)
  - Data Not Yet Available: 3/23 (13%)

### Priority Area II: Early Detection and Screening

- Objectives for Priority Area I: Six (6)
  - Positive Increase: 0/6 (0%)
  - Neutral: 1/6 (17%)
  - Needs Attention: 0/6 (0%)
  - Data Not Yet Available: 5/6 (83%)

### Priority Area III: Diagnosis, Treatment, and Palliation

- Objectives for Priority Area III: Eight (8)
  - Positive Increase: 0/8 (0%)
  - Neutral: 3/8 (37.5%)
  - Needs Attention: 5/8 (63%)
  - Data Not Yet Available: 0/8 (0%)

### Priority Area IV: Survivorship and Quality of Life

- Objectives for Priority Area I: Nine (9)
  - Positive Increase: 2/9 (22%)
  - Neutral: 1/9 (11%)
  - Needs Attention: 6/9 (67%)
  - Data Not Yet Available: 0/9 (0%)

### Priority Area V: Cancer Surveillance and Research

- Objectives for Priority Area I: Three (3)
  - Positive Increase: 0/3 (0%)
  - Neutral: 2/3 (67%)
  - Needs Attention: 1/3 (33%)
  - Data Not Yet Available: 0/3 (0%)

## Recommendations

Recommendations have been provided for the consideration of the cancer control community. Recommendations are based on the evaluation results enumerated in the previous sections of this report (Plan Progress and Evaluation Results).

Excellent progress has been made in Priority Area I: Primary Prevention. Over half (56%) of all objectives in this areas have made significant progress toward the goal and many activities have already been accomplished and are being successfully maintained. No action is recommended in this section.

Much of the data vital to Priority Area II: Early Detection and Screening is not yet available. Progress is evident in the activities successfully implemented (see Plan Progress); however, we are unable to capture more at this time. This area will be further developed in future reports as data becomes available.

Many of the objectives in Priority Area III scored as “Needs Attention.” Much of this is due to the onboarding of supportive activities, including the successful initiation of the Early Detection, Diagnosis, and Treatment Task Force. The cancer control community may want to critically examine this area and re-consider activities over the next year.

Many of the objectives in Priority Area IV scored as “Needs Attention.” Much of this is due to the onboarding of supportive activities, including the successful initiation of the Survivorship and Palliative Task Force. The cancer control community may want to critically examine this area and re-consider activities over the next year.

Progress is also being made in Priority Area V, where many of the objectives scored as “Neutral.” Work will need to continue to increase reporting into the registry to support the continuation of the activities and the success of these objectives.

## Call to Action

Everyone has a role to play in decreasing the burden of cancer in Nevada. Here's how you can help:

- Attend to your personal health and well-being. Quit smoking and avoid exposure to secondhand smoke. Eat a healthy, well-rounded diet. Be physically active. Test your home for radon. Get the recommended cancer preventive immunizations such as hepatitis B and human papillomavirus (HPV). Avoid overexposure to the sun and artificial tanning. Know your family history of cancer, what types of cancer screenings you should get, how often to get screened and where you can get screened.
- Become a member of the Nevada Cancer Coalition: [NevadaCancerCoalition.org](http://NevadaCancerCoalition.org).
- Join a Task Force: [NevadaCancerCoalition.org](http://NevadaCancerCoalition.org).
  - Survivorship and Palliative Care
  - Early Detection, Diagnosis, and Treatment
  - Skin Cancer/Sun Smart Nevada
  - Surveillance and Research
- Become a Sun Smart Nevada Volunteer: [NevadaCancerCoalition.org](http://NevadaCancerCoalition.org).
- Volunteer with the Nevada Radon Education Program: <http://www.unce.unr.edu/programs/sites/radon/>.
- Be attentive and active during the 2017 Legislative Session. Educate policymakers on the burden of cancer in Nevada and the initiatives of the 2016-2020 Nevada Comprehensive Cancer Control Plan.
- Provide support to those living with cancer.

## Contact Information

Questions and Comments regarding this report can be referred to the:

Comprehensive Cancer Control Program  
Nevada Division of Public and Behavioral Health  
(775) 684-4122

This report and subsequent publications will be made available at the following websites:

[http://dpbh.nv.gov/Programs/CCCP/Comprehensive\\_Cancer\\_-\\_Home/](http://dpbh.nv.gov/Programs/CCCP/Comprehensive_Cancer_-_Home/)

<http://nevadawellness.org/>