



New York State



Cancer Consortium

A 5-Year Strategic Plan to address and reduce the burden of cancer in New York State

# New York State Cancer Consortium

---

## Mission

The mission of the New York State Cancer Consortium is to reduce the human and economic burden of cancer in New York State.

## Vision

People concerned about cancer will work collaboratively to implement the *New York State Comprehensive Cancer Control Plan*, while respecting and embracing the cultural, demographic and geographic diversity within New York State.

# New York State Cancer Consortium

---

Voluntary network of over 200 individuals and organizations in NYS, including the NYS Department of Health that collaborate to address the cancer burden in NYS.

Our members are from public and private sectors with missions aligned with reducing cancer incidence and mortality.

Formed in 2003 from group that convened to write the first NYS Comprehensive Cancer Control Plan.

To join the Consortium, send an e-mail to [cancerconsortium@health.ny.gov](mailto:cancerconsortium@health.ny.gov)

[www.nyscancerconsortium.org](http://www.nyscancerconsortium.org)

# What Does the Consortium Do?

---

Guided by the NYS Comprehensive Cancer Control Plan (Plan), which sets objectives for reducing the burden of cancer in NYS and offers strategies to do so:

Develops and updates the Plan every 5 years

Implements strategies offered in the Plan

Tracks progress on indicators tied to the Plan

Provides information to members about cancer prevention and control

# What is a Comprehensive Cancer Control Plan?

---

A strategic plan for New York State (NYS) to address cancer prevention and control. (This is the 3<sup>rd</sup> iteration of the Plan.)

A Centers for Disease Control and Prevention deliverable.

A consensus document; Plan reflects input from subject matter experts, medical community, NYSDOH and NYS Cancer Consortium members.

# Why Do We Need a Comprehensive Cancer Control Plan?

---

Cancer is the second leading cause of death in the state.

Annually, more than 100,000 New Yorkers learn they have cancer, and more than 35,000 succumb to the disease.

There are more than 1 million cancer survivors (people ever diagnosed with cancer) in New York State.

Overall, the number of people in NY diagnosed with cancer each year has been steadily increasing. This is due to increases in New York's elderly population, who are more likely to develop cancer.

# A Look Back: Progress Since the 2012-2017 Plan

---

Data for 24 indicators related to the 2012-2017 NYS Comprehensive Cancer Control Plan objectives were tracked.

Progress was assessed by comparing baseline values to the most recently available data point. Of the 24 indicators:

- ✓ 11 objectives met or exceeded the 2012-2017 Cancer Plan targets
- ✓ 6 objectives improved from baseline
- ✓ 2 objectives had no detectable change from baseline
- ✓ 6 objectives worsened from baseline

# Tracking Results of the 2018-2023 Plan

An online dashboard established by the NYSDOH serves as a key source for monitoring statewide progress on Plan objectives. Dashboard will include new indicators for this 5 year Plan.

The screenshot shows the top portion of a web dashboard. At the top is a purple header with the text "Department of Health". Below this is a breadcrumb trail: "You are Here: [Home Page](#) > [Cancer Home Page](#) > [Cancer Dashboard](#)". The main title is "2012-2017 New York State Comprehensive Cancer Control Plan Dashboard" in green. Below the title is a navigation bar with three tabs: "Cancer Dashboard" (which is active and highlighted in dark blue), "About This Site", and "2012-2017 NYS Comprehensive Cancer Control Plan". Underneath the navigation bar are three links: "Home", "Data Table", and "Data Trends". The main content area contains filter options. The first filter is "Filter by State Status on:" followed by an information icon (i) and an "Apply" button. Below this are two filter rows. The first row is "CCC Plan 2017 Objective:" with a green flag icon, "Met" with an unchecked checkbox, a red flag icon, "Not Met" with an unchecked checkbox, and an information icon (i). The second row is "Indicator Performance:" with a green circle icon, "Improved" with an unchecked checkbox, a yellow circle icon, "No Change" with an unchecked checkbox, a red circle icon, "Worsened" with an unchecked checkbox, and an information icon (i).





# What's in the 2018-2023 Cancer Plan?

---

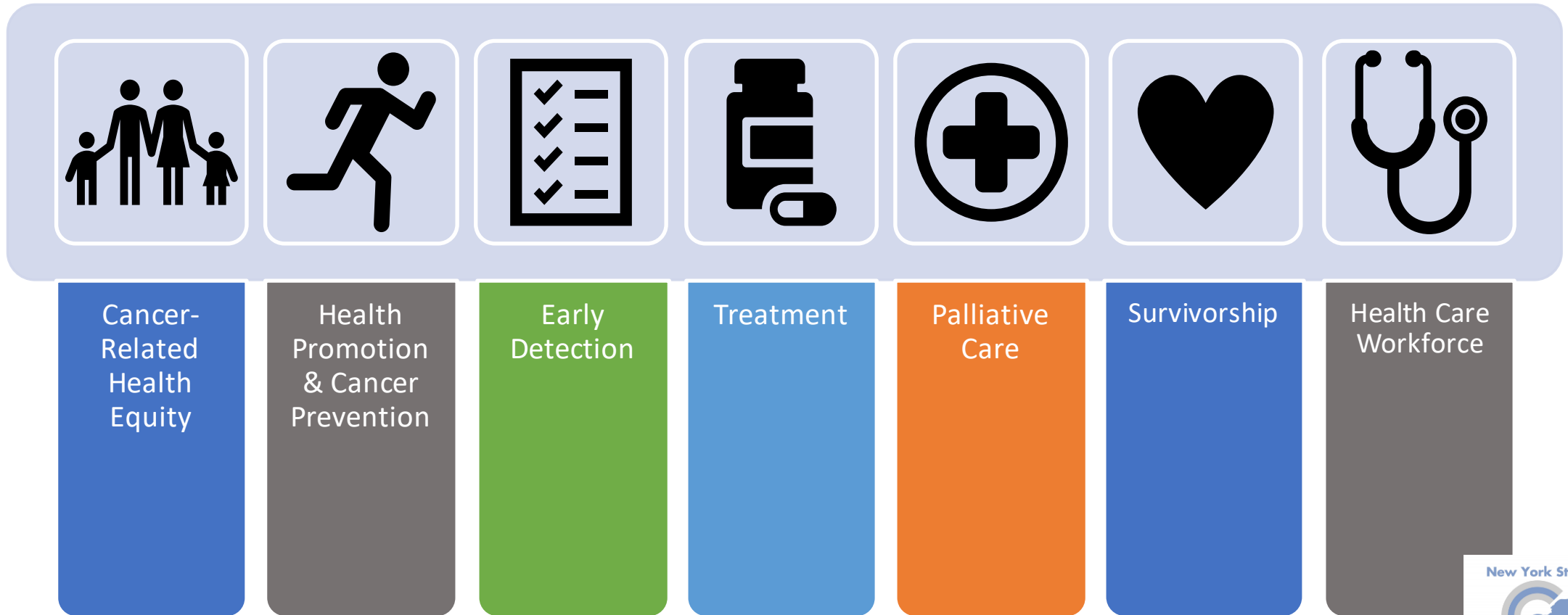
Seven priority areas for action that reflect the continuum of cancer prevention and control, and cross-cutting topics

Priority areas include background information, objectives, suggested evidence-based strategies or promising practices to make improvements, and related resources

56 objectives - five developmental and 51 measurable objectives

A “Call to Action” section with ideas and activities for individuals and organizations of all kinds to help reduce the burden of cancer in New York State

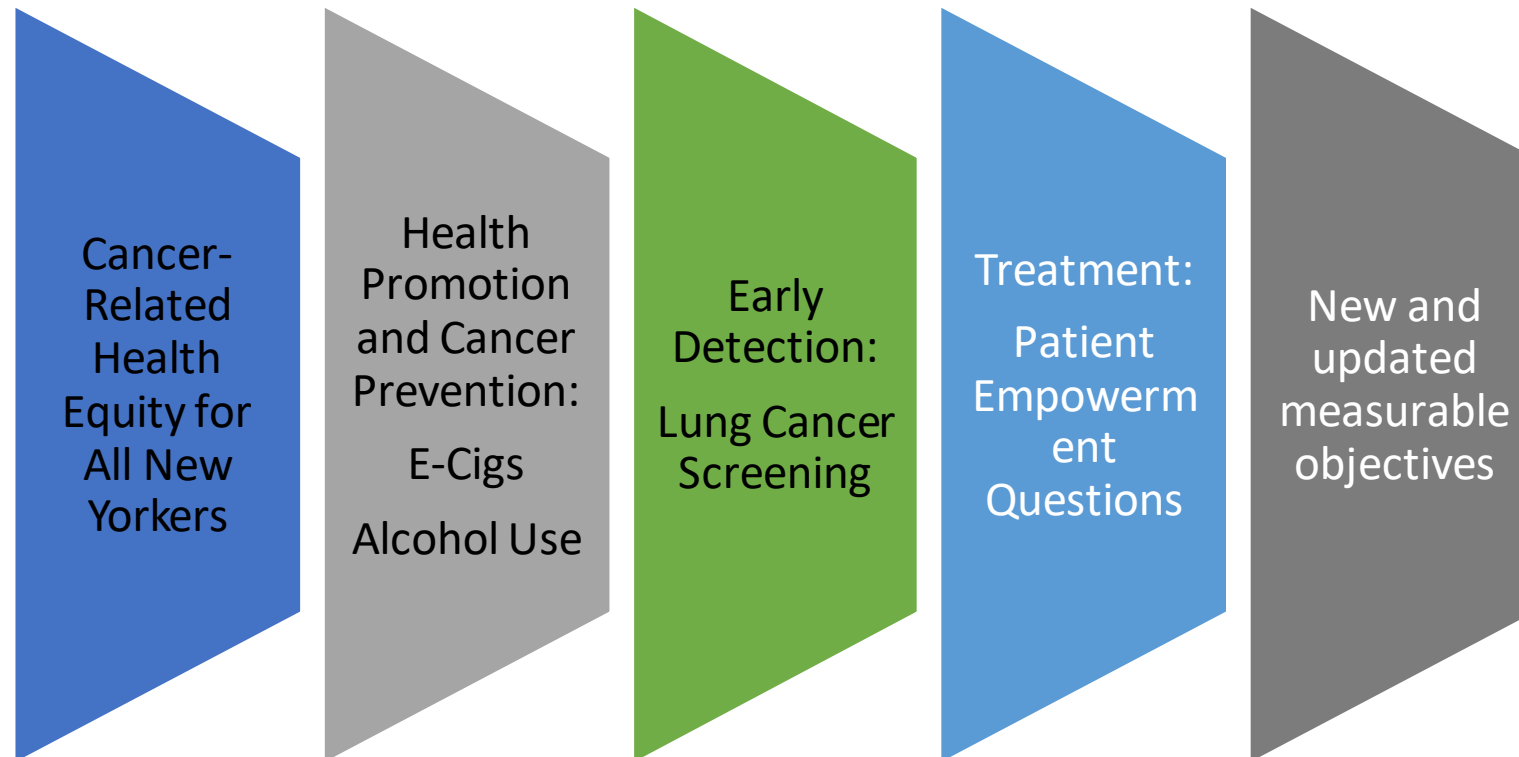
# Priority Areas of the 2018-2023 Plan



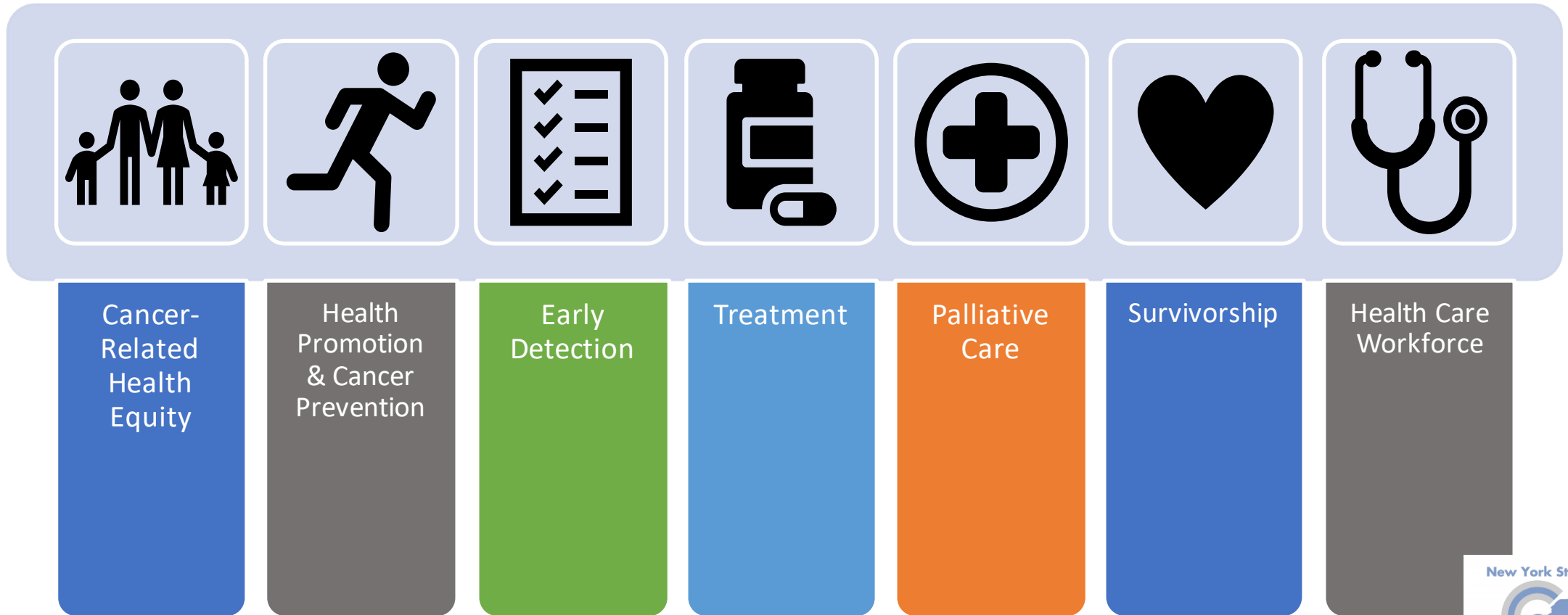
# What's New in the 2018-2023 Plan?

---

While much of the info in the new 5-Year Plan is updated and based on the 2012-2017 version, there are several notable additions and changes both in content and measurable objectives.

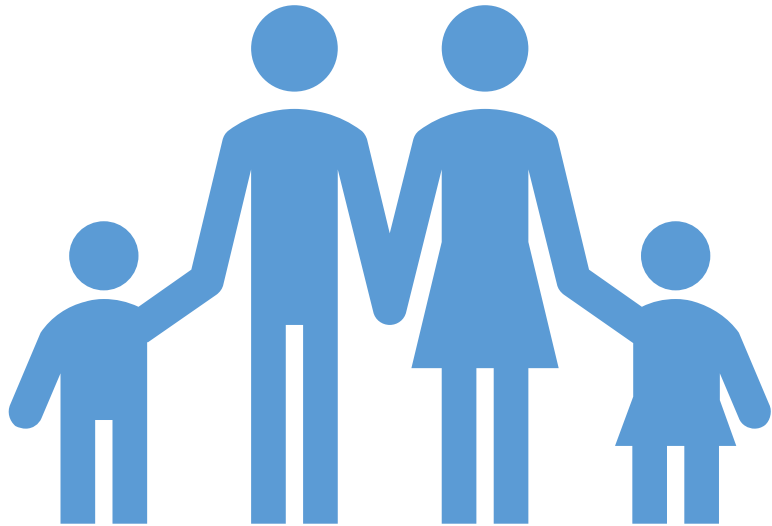


# Priority Areas of the 2018-2023 Plan



# Cancer-Related Health Equity

---



*All New Yorkers will have the opportunity to make choices that lead to good health, live in social and physical environments that promote good health, and have access to quality health care.*

# Cancer-Related Health Equity

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Physical and social determinants of health contribute to the risk of developing and dying from cancer.

Lack of health insurance and low socio-economic status are some of the strongest factors contributing to cancer health disparities.

## Goal of Suggested Strategies

Promote programs and policies which both help document and address health disparities; increase access to healthcare services; and ensure that services are available and accessible for all populations across the continuum of cancer care.



# Health Promotion & Cancer Prevention

---

Alcohol Use

Environmental & Occupational Exposure

Genetics & Family Health History

Physical Activity, Nutrition, & Breastfeeding

Tobacco Use

Ultraviolet (UV) Radiation

Vaccine-Preventable & Infectious Disease-Related Cancers

*All New Yorkers will have access to evidence-based information, resources and opportunities to understand and reduce their risk of cancer.*

# Alcohol Use

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Excessive alcohol use increases an individual's risk for several cancer types, including: oral cavity and pharynx, larynx, esophagus, liver, colon, rectum, and female breast cancers.

## Goal of Suggested Strategies

Increase public awareness about the risks and consequences of excessive and/or chronic drinking; as well as reduce alcohol consumption among underage youth.



# Environmental & Occupational Exposure

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Exposure to certain substances may have cancer-causing potential.

Prevention efforts should focus on reducing the length of time, concentration, and intensity of exposure to substances and toxicants in the environment, workplaces, and in consumer products.

## Goal of Suggested Strategies

Improve individual and employers' awareness and understanding of the risks of exposure to cancer-causing substances in the environment and in workplaces.

# Genetics & Family Health History

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Mutations or changes in genes passed on from biological parent to child can cause some cancers, such as breast, colorectal, and ovarian cancer.

Genetic testing and knowledge of family health history (when possible) can help inform an individual's health care decisions and promote specific interventions aimed at reducing risk.

## Goal of Suggested Strategies

Enhance public knowledge about the importance of genetics and family history for cancer risk and management; as well as promote the recommended use of genetic counseling and testing and collection of family health histories.

# Physical Activity, Nutrition, & Breastfeeding

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

About one in three cancers diagnosed in U.S are linked to poor nutrition, physical inactivity, and obesity.

Thirteen different cancers are strongly linked with obesity.

Breastfed babies have a lower risk of being obese in their childhood, and mothers who breastfeed have a lower risk of some cancers.

## Goal of Suggested Strategies

Increase opportunities for physical activity and access to nutritious foods for adults, adolescents and children; and support for breastfeeding mothers.

# Tobacco Use

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

One out of every three cases of cancer is linked to tobacco use. It is the leading preventable cause of death in New York and the United States.

Electronic cigarettes (e-cigarettes) has been added to this section because use nearly doubled between 2014 and 2016.

## Goal of Suggested Strategies

Decrease youth and adult smoking rates through individual behavior change, clinical services, and policy, systems, and environmental change.

# Ultraviolet (UV) Radiation

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Exposure to ultraviolet (UV) radiation from the sun and from indoor tanning can lead to skin cancer.

UV radiation from the use of indoor tanning devices (beds, booths, and lamps) before age 35 increases the risk for melanoma by 75%.

## Goal of Suggested Strategies

Prevent new cases of skin cancer through reduction of UV exposure using policies, community-wide interventions, education and promotion of individual sun safety behaviors.

# Vaccine-Preventable & Infectious Disease-Related Cancers

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Nearly all cervical cancers are caused by human papillomavirus (HPV). Many other cancers are also caused by HPV. The HPV vaccine is an effective form of cancer prevention when given to males and females 13-17 years old.

Chronic hepatitis B (HBV) and C (HCV) infections attack the liver and have been associated with an increased risk of cancer. The HBV vaccine is the most effective way to prevent HBV infection. There is no vaccine for HCV, but a screening test is available.

## Goal of Suggested Strategies

Increase HPV vaccination rates among adolescents ages 13 to 17 years in NYS; increase HBV vaccination rates; and increase HCV screening test rates among target populations.



# Early Detection

---

*All New Yorkers will receive age-appropriate, evidence-based, guideline-driven screening services for the early detection of cancer.*

# Early Detection

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Women should be screened for breast and cervical cancer, and both men and women should be screened for colorectal cancer.

Some cancer screening tests can find cancers early, when they are most easily treated. In some cases, such as with cervical and colorectal screenings, growths can be found and removed before they ever become cancer.

Men and women between the ages of 55 and 80 years who have a history of heavy smoking and either currently smoke or have quit within the past 15 years should be screening for lung cancer.



# Early Detection (continued)

---

*<insert any specific info relevant to your organization and audience here>*

Improvement over previous Plan (2012 -2017): decrease in incidence of late-stage breast, invasive cervical, and invasive colorectal cancers.

More work is needed to reach people without health insurance or a regular health care provider, as well as those with low incomes, and persons with disabilities.

## Goal of Suggested Strategies

Increase public demand for cancer screening, increase access to screening by removing barriers and improve clinical workflows across health care settings.



# Treatment

---

*All New Yorkers diagnosed with cancer will have equitable access to affordable, patient-centered, evidence-based, high quality cancer care, regardless of the setting where care is provided.*

# Treatment

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

Nationally-accepted components that define high-quality cancer care should be accepted by all cancer treatment facilities in NYS and quality standards should be adopted to measure performance.

Every person diagnosed with cancer be empowered to demand high-quality cancer care. Questions are provided for persons diagnosed with cancer and their family members to use to understand the quality of care provided by a physician's office or treatment center.

## Goal of Suggested Strategies

Support efforts to improve the quality of cancer treatment for all New Yorkers.



# Palliative Care

---

*All New Yorkers will have access to evidence-based, evidence-informed and guideline-driven patient and family-centered palliative care services.*

# Palliative Care

---

*<insert any specific info relevant to your organization and audience here>*

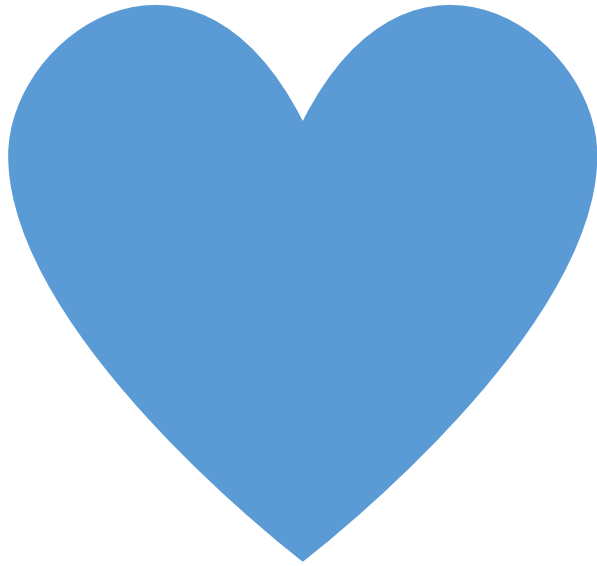
## Main Points

People facing serious illness such as cancer can benefit from palliative care at any stage of their illness to improve their quality of life.

Palliative care is a wide range of supports for addressing pain management, social and emotional needs, and other symptoms of treatment.

## Goal of Suggested Strategies

Improve accessibility of palliative care; educate patients and their families; invest in provider training; conduct research to document the benefits of palliative care; and incorporate high-quality palliative care in measurement, payment, and accreditation standards in the healthcare system.



# Survivorship

---

*All New Yorkers will have equal access to evidence-based, evidence-informed and guideline-driven services and appropriate, high-quality follow-up care that supports cancer survivors, families and caregivers.*

# Survivorship

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

The effects of cancer continue after treatment. Survivors often experience challenges related to physical, psychological or spiritual well-being, relationships, and financial and legal matters.

## Goal of Suggested Strategies

Ensure that health care providers and community-based organizations are helping meet the wide range of survivors' needs through the promotion of standardized survivorship care plans, survivorship self-management programs, and staff trainings and awareness.



# Healthcare Workforce

---

*All New Yorkers will have access to adequate numbers of primary care and specialty providers with demonstrated competencies in cancer prevention and control.*



# Healthcare Workforce

---

*<insert any specific info relevant to your organization and audience here>*

## Main Points

There is a need to build awareness and support for cancer-related fields as a career option; as well as equitable distribution of and support for existing primary care and oncology practitioners.

Primary care providers are critical to the provision of cancer prevention, early detection, and survivorship care. A lack of access to primary care can have a negative impact on cancer outcomes.

Improved coordination and multidisciplinary teams (including patient, caregivers, and family members) can positively affect treatment decisions, reduce time in treatment, and improve outcomes in patients.

## Goal of Suggested Strategies

Support and maintain a quality, diverse, and accessible workforce to meet the needs of New Yorkers and respond to cancer in New York.

# A Call to Action: What New Yorkers Can Do

---

Individuals and organizations of all kinds can help reduce the burden of cancer in New York State.

No matter how small these activities may seem, all New Yorkers can make a difference at home, at work, and in their communities.

# A Call to Action: What New Yorkers Can Do

---



# A Call to Action: What New Yorkers Can Do

---

*<insert relevant audience here>*

*<insert ideas and activities for audience here>*

# Questions?

---

<Insert Contact Info Here>

