

Goals and Objectives (Overview)

Cross-Cutting Issues:

Build overall capacity for cancer prevention and control in Kansas

1. **Health Equity** - Increase health equity related to race, ethnicity, income or population density by including at least one strategy for each state plan objective that will improve health equity.
2. **Financial Burden** - Decrease the number of Kansans who report financial problems as a barrier to accessing cancer care.
3. **Clinical Trials** - Increase the percentage of Kansas adults 18 years old and older who have been diagnosed with cancer and participated in a cancer-related clinical trial.
4. **Genetics** - Increase the number of adult Kansans who know their family history of cancer back through second-degree relatives (parents, siblings, children, grandparents, aunts, uncles).
5. **Patient Navigation** - Increase the number of cancer patient navigators who participate in the state navigation network to promote high-quality cancer care from early detection through treatment and survivorship.

Prevention:

Prevent cancer from occurring or recurring

1. **Fruits & Vegetables** - Increase consumption of fruits and vegetables among adults and adolescents.
2. **Human Papilloma Virus (HPV)** - Increase HPV immunization rates to prevent HPV-related cancers.
3. **Physical Activity** - Increase the percentage of adults and adolescents who participate in physical activity.
4. **Radon** - Increase the percent of Kansas homes tested and mitigated for radon during purchase or construction.
5. **Tobacco Use:**
 - a. **Adults** - Reduce the percentage of adults who use cigarettes, e-cigarettes and any tobacco products.
 - b. **High School Students** - Reduce the percentage of high school students who use cigarettes, e-cigarettes and any tobacco products.
6. **Ultraviolet (UV) Radiation**
 - a. **Sunburn** - Reduce the percentage of Kansans that report sunburn.
 - b. **Indoor Tanning** - Reduce the percentage of Kansans that use indoor tanning devices.

Early Detection and Diagnosis:

Detect cancer in its earliest stage through early detection and a timely, definitive diagnosis

1. **Breast Biopsies** - Increase the percentage of breast biopsies by percutaneous biopsy vs. excisional surgery for breast cancer diagnosis.
2. **Breast Cancer** - Increase the percentage of age-appropriate women who had a discussion with their health care provider about breast cancer screening.
3. **Cervical Cancer** - Increase the percentage of Kansas women who receive cervical cancer screening (i.e., Pap test) based on nationally recognized guidelines.
4. **Colorectal Cancer** - Increase the percentage of Kansas adults (50-75) using one of the screening options recommended for colorectal cancer based on nationally recognized guidelines.
5. **Lung Cancer** - Increase the percentage of high risk population (current and former smokers aged 55 to 74 year olds) who had a discussion with their provider about lung cancer screening.
6. **Prostate Cancer** - Increase the percentage of men aged 50 to 69 who had a discussion with their provider about prostate cancer screening.

Post-Diagnosis and Quality of Life throughout the Cancer Journey:

Assure the highest quality of life for Kansans who have been diagnosed with cancer during and after treatment

1. **Quality of Life** - Improve the physical and mental health of people who have had a cancer diagnosis, as well as that of their care providers.
2. **Treatment Summary** - Increase the number of cancer patients with curative intent (i.e., seeking cancer-specific treatment) and who have completed therapy (other than hormonal) who report receiving treatment summaries and survivorship care plans.
3. **Palliative and Hospice Care** - Improve Kansas scorecard for access to Palliative Care services, as measured by Center to Advance Palliative Care (CAPC).
4. **Transportable Physician Orders for Patient Preferences (TPOPP)** - Increase the number of health systems in Kansas that have an infrastructure for increasing understanding of and honoring treatment preferences for seriously ill patients as they move across the continuum of care.