



## Today's Presenter: Peggy Johnson

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The objectives for this presentation are to:

- Define comprehensive cancer control
- Highlight burden of cancer priorities and public policy work
- Identify opportunities for collaboration, with a focus on

State level priorities Regional cancer coalitions Public Policy Objectives



Bringing together key partners and organizations to form coalitions dedicated to preventing and controlling cancer.

All states that receive cancer funding from the Centers for Disease Control (today that is all 50 states, several territories and a number of tribes) – breast and cervical screening, cancer registries and any other cancer funding support are required to have a comprehensive cancer control plan. In Kansas all those programs are funding by one grant, with different fiunding lines for each. These comp cancer plans vary from state to state by how they are organized, implemented and to some extent funded. The bottom line is exactly what it sounds like – a plan for comprehensive cancer control.



Comprehensive cancer control aims to reduce the incidence, morbidity and mortality of cancer and to improve the quality of life of cancer patients. These efforts need to engage all levels of the national health system to reach the entire population, from the healthy to those at high risk.

Additionally, the needs of all groups at risk need to be met, including those with a family history of cancer and those who have been diagnosed, cured or are in the final stages of the disease.

To do comprehensive cancer control it takes bringing together key partners and organizations to form coalitions dedicated to preventing and controlling cancer.



- Not all state comp cancer programs are organized the same. Most comp cancer grants are with the state health department, but not all. There are several states where the programs are administered by universities. Obviously, the tribe grants are organized and administered by the residing tribe. Not all comp cancer programs have a membership component, but most do because it is a big job.
- Forge connections and foster partnerships among members and facilitate ways that members and their organizations can work together to accomplish what one organization or individuals could not accomplish alone ("Value-added")
- Strengthen population-based data sources for cancer surveillance and long-term evaluation, and use these data for strategic planning. To ensure success, identify a limited number of priorities to improve the health of the population. The evaluation of the plan documents the results of these strategic planning activities.

Leverage resources to support coalition work, build and sustain the partnership.

- Educate decision-makers, facilitate systems change, develop linkages between clinical systems and communitybased structures. And provide technical assistance for these activities.
- Assure accountability through assessment to identify needs and evaluation of interventions and other coalition work
- In Kansas our KCP provides an opportunity for the members individuals and organizations and coalitions to identify and work on public policy issues together to have a greater impact.
- In many states the state health department personnel are not allowed to work on policy work. The grant specifies what policy efforts the recipients can and cannot do. The member organizations and individuals are very important in working on policy issues.



In Kansas the Policy Committee discussed and agrees on about 10 issues to discuss with our partners. We put all issues in a survey to determine the will of the group on setting the priorities in line according to its importance to the membership.

- Reduce tobacco use tobacco legislation around increasing the tobacco tax and Tobacco 21
- Increase HPV immunizations
- Increase colorectal cancer screening
- Increase health equity Expand Medicaid
- Increase cancer survivor quality of life

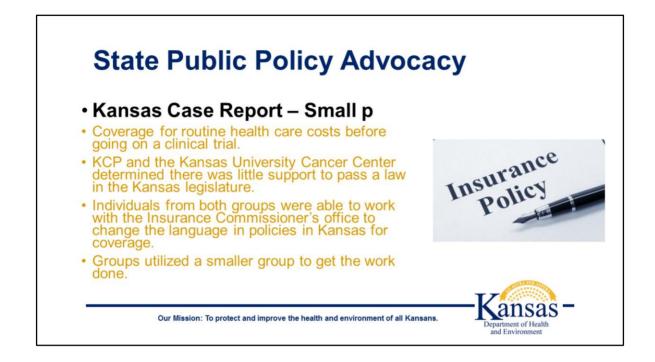






In Kansas all bills that may affect private health care plans and are passed are first applied to state employees. A report is then provided to the Legislature one year later. If no noticeable affect has been seen the provisions of the bill become law for all plans in the state.

Remember to thank your champions. You want to go to them again.



You need to look at who in your state has the authority to make changes to regulations. In Kansas the Insurance Commissioner is an elected officials. This is not true in all states. Find out who can help.



Why a Regional Coalition?

Impact selected priorities in specific regions of the state.

Connects state and regional data to local and state-level efforts

KCP shares data for the regions and regional coalition helps KCP understand what the data means for the region.



Why a Regional Coalition?

Impact selected priorities in specific regions of the state.

Provides opportunities to develop support for the state Comprehensive Cancer Plan.

Opportunity to develop partnerships with other cancer advocacy groups to engage regional policy makers and move them to become 'champions'



