

NEVADA CANCER PLAN 2026-2030

Childhood Cancer and Adolescent/Young Adult (AYA) Section

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Nevada Cancer Plan History

- 1) 2002 the Nevada Cancer Council (NCC) was formed to develop a comprehensive cancer plan, funded through the CDC.
- 2) 2011: The NCC hired it's first employee, an executive director, and became a 501c3 in 2013.
- 3) There have been 4 Nevada Cancer Plans, the 5th one is being developed now for 2026-2030.
- 4) NCC is now known as the Nevada Cancer Coalition to better reflect the collaborative nature of the organization.

CURRENT PLAN: 2021-2025

▶ Organization

- ▶ Progress
- ▶ Demographics
- ▶ Data
- ▶ Health Disparities

▶ Goals and Objectives

- ▶ Prevention
- ▶ Early Detection
- ▶ Equitable Access
- ▶ Quality of life
- ▶ Surveillance
- ▶ Research

CURRENT PLAN 2021-2025 Continued

The current plan mentions childhood cancer a few times throughout the narrative, but there are not currently any objectives or goals related to this age demographic.

On page 18:

Access to pediatric oncology care is even more limited. Since the release of Nevada's last cancer plan, comprehensive pediatric oncology/hematology services at both St. Rose Siena and Washoe Medical Center in Las Vegas have been eliminated. In southern Nevada, Cure 4 The Kids Foundation is the primary source of care, partnering with Sunrise and Summerlin hospitals to provide care. In northern Nevada, Renown Health offers pediatric hematology. Although Cure 4 The Kids has a robust treatment and survivorship program, it relies on out-of-state partnerships to deliver more specialized care, which often requires travel long distances or temporarily relocate to access services.

On page 34:

For children, there are only two Children's Oncology Centers – one in Las Vegas and a second in Reno, which often requires requiring children elsewhere in the state to travel several hours to participate in a clinical trial. Advancing enrollment and retention in clinical trials requires not only expanding access to trials by offering care in more care settings, but also increasing promotion of clinical trials and standard of care.

WHY ADD A CHILDHOOD CANCER/AYA SECTION

- ▶ Childhood cancer is the number one cause of death by disease in children.
- ▶ Cancer Plans are in a unique position to educate their partners and communities about the needs of childhood cancer survivors and their families.
- ▶ Examples:
 - ▶ Survivorship needs are substantial and differ from those of adults.
 - ▶ The need for support includes not only the patient but also parents and siblings.
 - ▶ Survivors of childhood cancer require lifelong surveillance.
 - ▶ Late effects contribute to significant morbidity among adults who were treated for cancer during childhood.

Source: <https://www.acco.org/wp-content/uploads/2023/05/CCC-Tip-Sheet-Childhood-Cancer-v04.pdf>

BENEFITS

- ▶ **MEASUREABLE OBJECTIVES**
- ▶ **INCREASED AWARENESS**
- ▶ **PROVIDES STATE STANDARDS**
- ▶ **COMPLIES WITH CENTER FOR DISEASE CONTROL AND PREVENTION (CDC) BEST PRACTICES.**

TIMELINE 2026-2030 PLAN

1) SECTION WORKGROUP

Comprised of key stakeholders across the state.

2) WRITE SECTION

Hold multiple meetings to gain input and come to a consensus of plan details.

3) NCC FINALIZATION

Staff at NCC takes the consensus - writes, edits, designs, and prints the plan.

4) RELEASE

2025 Cancer Control Summit the Plan will be released. By January 2026, the plan will be implemented.

Questions?

Learn more:

www.nevadacancercoalition.org

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