

# Comprehensive Cancer Alliance for Idaho

## Strategic Plan Objectives 2011-2015

### Version History

December 8, 2011	Measures approved by CCAI Board of Directors.
January 4, 2012	Updates to summary measures of cancer burden in Idaho through 2009, US mortality data through 2008, Idaho mortality data through 2010, and Idaho incidence data through 2009; correction to baseline for Objective 10 - Reduce invasive uterine cervical cancer; updates to Objective 12 - Increase the proportion of cancer survivors who are living 5 years or longer after diagnosis.
July 13, 2012	Updates to US mortality data through 2009, SEER cancer incidence through 2009.
September XX, 2012	Note that revised intercensal population estimates are expected to be released from the National Center for Health Statistics in August 2012. It may be necessary to recalculate all incidence and mortality rates and revise the baseline data, targets, and rankings.

# Comprehensive Cancer Alliance for Idaho

## Strategic Plan Objectives 2011-2015

### Vision

*“Every Idahoan deserves the opportunity for proper cancer prevention and detection; state-of-the-art cancer treatment; and the highest possible quality of life which we are committed to provide through a data-driven, coordinated, comprehensive cancer plan.”*

### Outcome Measures Used in Cancer Control

Cancer Control Component	Outcome Measures*
Primary prevention	Incidence, Mortality
Screening	Mortality, Localized stage percentage, Survival
Early clinical diagnosis	Survival, Localized stage percentage, Mortality
Treatment	Survival, Mortality
Rehabilitation	Quality of life
Palliative care	Quality of life

\* Outcome measures in decreasing order of utility for monitoring and evaluating components of cancer control.

Adapted from: Armstrong BK. The role of the cancer registry in cancer control. *Cancer Causes and Control* 1992;3:569-579.

**SUMMARY MEASURES OF CANCER BURDEN IN IDAHO - 2009**

<b>Primary Site</b>	<b>Incident Cases</b>	<b>Deaths</b>	<b>Median Age at Diagnosis</b>	<b>Median Age at Death</b>	<b>Estimated Prevalence Count</b>	<b>Total Number of YPLL Before Age 75</b>	<b>Average Number of YPLL per Death, Persons Aged Less than 75 Years</b>
All Sites	7,045	2,451	66.0	73.0	52,158	17,077	11.9
Bladder	325	56	71.0	84.0	2,313	122	8.1
Brain	93	75	58.0	63.0	526	1,247	21.1
Breast	977	189	62.0	69.0	10,756	1,733	14.4
Cervix	36	16	51.0	65.0	805	197	15.1
Colorectal	612	211	69.0	75.0	4,363	1,292	12.2
Corpus Uteri	198	20	61.0	64.0	2,223	197	16.4
Esophagus	67	62	63.0	67.0	140	579	12.1
Hodgkin Lymphoma	40	6	41.5	58.0	711	109	27.3
Kidney	243	58	66.0	67.5	1403	505	11.7
Larynx	44	10	70.5	69.5	353	39	4.9
Leukemia	226	96	66.0	72.5	1288	705	12.4
Liver and Bile Duct	80	55	60.0	63.0	94	536	14.1
Lung and Bronchus	776	638	71.0	72.0	1,452	3,840	9.9
Melanoma of Skin	392	57	61.0	66.0	3,766	711	16.2
Myeloma	102	55	71.0	77.0	314	216	8.6
Non-Hodgkin Lymphoma	286	103	68.0	73.0	1,996	685	12.4
Oral Cavity and Pharynx	216	41	64.5	68.0	1,400	317	11.3
Ovary	91	57	63.0	66.0	700	603	14.4
Pancreas	167	156	72.0	73.0	156	971	9.6
Prostate	1,120	165	67.0	82.0	11,045	242	5.9
Stomach	63	37	71.0	72.0	239	203	9.2
Testis	47	3	38.0	-	926	-	-
Thyroid	247	14	48.0	71.5	2,351	121	15.1

Notes:

Incident cases include all invasive and bladder in situ cases newly diagnosed among Idaho residents in 2009.

Cancer prevalence is the number of people alive today who have been diagnosed with cancer. This includes individuals who were newly diagnosed, are in active treatment, have completed active treatment, and those living with progressive symptoms of their disease. Limited-duration prevalence was estimated from long-term incidence and survival rates from 1970 to 2009 but underestimates complete prevalence due to an unknown number of live cases diagnosed prior to 1970.

Years of potential life lost (YPLL) is a statistic used to measure the number of years of life lost in a population when persons in that population die prematurely (standard of 75 years of age used for this table).

Mortality-related statistics are suppressed for testis primary site due to small number of deaths.

## Comprehensive Cancer Alliance for Idaho Strategic Plan Objectives 2011-2015

1. Reduce the overall cancer death rate.

Target: 160.6 deaths per 100,000 population.

Idaho Baseline: 166.0 cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 1: Overall Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	166.0	166.9	159.5	159.8				160.6
Ranking*	8 <sup>th</sup>	11 <sup>th</sup>	8 <sup>th</sup>					
U.S. Rate	178.1	175.8	173.1					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

2. Reduce the lung cancer death rate.

Target: 37.4 deaths per 100,000 population.

Idaho Baseline: 41.6 lung cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 2: Lung & Bronchus Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	41.6	42.0	41.7	38.7				37.4
Ranking*	8 <sup>th</sup>	8 <sup>th</sup>	11 <sup>th</sup>					
U.S. Rate	50.7	49.6	48.5					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

3. Reduce the female breast cancer death rate.

Target: 20.6 deaths per 100,000 females.

Idaho Baseline: 21.6 female breast cancer deaths per 100,000 females occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 3: Female Breast Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	21.6	22.1	22.6	21.6				20.6
Ranking*	15 <sup>th</sup>	26 <sup>th</sup>	31 <sup>st</sup>					
U.S. Rate	22.8	22.5	22.2					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

4. Reduce the death rate from cancer of the uterine cervix.

Target: 2.2 deaths per 100,000 females.

Idaho Baseline: 2.5 uterine cervix cancer deaths per 100,000 females occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 4: Uterine Cervix Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	2.5	2.7	2.0	1.6				2.2
Ranking*	31 <sup>st</sup>	31 <sup>st</sup>	14 <sup>th</sup>					
U.S. Rate	2.4	2.4	2.3					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

5. Reduce the colorectal cancer death rate.

Target: 13.6 deaths per 100,000 population.

Idaho Baseline: 15.1 colorectal cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 5: Colorectal Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	15.1	14.3	13.5	13.4				13.6
Ranking*	8 <sup>th</sup>	6 <sup>th</sup>	6 <sup>th</sup>					
U.S. Rate	16.7	16.4	15.7					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

6. Reduce the oropharyngeal cancer death rate.

Target: 2.3 deaths per 100,000 population.

Idaho Baseline: 2.3 oropharyngeal cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 6: Oropharyngeal Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	2.3	2.7	2.6	2.9				2.3
Ranking*	18 <sup>th</sup>	36 <sup>th</sup>	36 <sup>th</sup>					
U.S. Rate	2.5	2.5	2.4					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

7. Reduce premature deaths from prostate cancer.

Target: 4.0 deaths per 100,000 males aged 0-74.

Idaho Baseline: 4.4 prostate cancer deaths per 100,000 males aged 0-74 occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 7: Prostate Cancer Death Rate, Ages 0-74								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	4.4	6.4	4.7	6.0				4.0
Ranking*	4 <sup>th</sup>	35 <sup>th</sup>	7 <sup>th</sup>					
U.S. Rate	6.3	6.1	5.9					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

8. Reduce the melanoma cancer death rate.

Target: 2.4 deaths per 100,000 population.

Idaho Baseline: 3.1 melanoma cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 8: Melanoma Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	3.1	3.2	3.6	3.6				2.4
Ranking*	42 <sup>nd</sup>	44 <sup>th</sup>	47 <sup>th</sup>					
U.S. Rate	2.7	2.7	2.8					

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

9. Reduce invasive colorectal cancer.

Target: 38.6 new cases per 100,000 population.

Idaho Baseline: 40.6 new cases of invasive colorectal cancer per 100,000 population were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: modeling/projection; HP2020.

Objective source: HP2020

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 9: Colorectal Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	40.6	40.2	39.3					38.6
Ranking*	8 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>					
U.S. Rate	45.5	44.4	42.3					

\* #1 rank is best.

10. Reduce invasive uterine cervical cancer.

Target: 4.2 new cases per 100,000 females.

Idaho Baseline: 4.7 new cases of invasive uterine cancer per 100,000 females were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: HP2020

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 10: Uterine Cervix Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	4.7	6.1	4.8					4.2
Ranking*	2 <sup>nd</sup>	11 <sup>th</sup>	2 <sup>nd</sup>					
U.S. Rate	7.9	7.8	7.9					

\* #1 rank is best.

11. Reduce late stage female breast cancer among women aged 40+.

Target: 88.2 new cases per 100,000 females aged 40+.

Idaho Baseline: 98.0 new cases of late-stage breast cancer per 100,000 females aged 40+ were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: AHRQ/CCAI

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 11: Late Stage Female Breast Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	98.0	91.5	91.5					88.2
Ranking*	n/a	n/a	n/a					
SEER 17 Rate	97.2	96.1	94.3					

\* #1 rank is best.

12. Increase the proportion of cancer survivors who are living 5 years or longer after diagnosis.

Target: 72.8 percent.

Idaho Baseline: 69.5 percent of persons with cancer were living 5 years or longer after diagnosis in 2007.

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: Surveillance Epidemiology and End Results (SEER) Program, NIH, NC; Cancer Data Registry of Idaho.

Objective 12: 5-Year Relative Survival Proportion (Period Approach; Ederer II)								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	69.5%	70.0%						72.8%
Ranking*	n/a							
SEER 17 Rate	65.9%							

\* #1 rank is best.

13. Increase the proportion of cancer patients who enroll in treatment clinical trials.

Target: At least 75% of pediatric patients and 5% of adult patients will enroll in treatment clinical trials.

Idaho Baseline: 36.7% of pediatric patients and 1.7% of adults patients diagnosed in 2007 had enrolled in treatment clinical trials.

Target setting method and source: projection; CCAI.

Objective source: CCAI

Data source: Cancer Data Registry of Idaho; Idaho hospitals with Commission on Cancer Approved Programs.

Objective 13: Treatment Clinical Trial Participation								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Total	2.0%	3.2%	3.7%					75% Peds 5% Adults
Ages 0-19	36.7%	43.8%	66.7%					
Ages 20+	1.7%	2.7%	3.2%					

14. Increase the proportion of women aged 18+ who have had a Pap test to screen for cervical cancer within the prior three years.

Target: At least 81.1% of women aged 18+ will report having had a Pap test in the prior three years.

Idaho Baseline: 76.2% of women aged 18+ reported having a Pap test to screen for cervical cancer within the prior three years (2010).

Target setting method and source: achieve U.S. average screening rate for 2010; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 14: Cervical Cancer Screening Rate							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	76.2%						81.1%
Ranking*	48 <sup>th</sup>						
U.S. Rate	81.1%						

\* #1 rank is best.

15. Reduce late stage colorectal cancer among persons aged 50+.

Target: 63.6 new cases per 100,000 persons aged 50+.

Idaho Baseline: 70.7 new cases of late-stage colorectal cancer per 100,000 persons aged 50+ were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: AHRQ/CCAI

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 15: Late Stage Colorectal Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	70.7	71.6	70.7					63.6
Ranking*	n/a	n/a	n/a					
SEER 17 Rate	80.1	77.9	73.8					

\* #1 rank is best.

16. Increase the proportion of Idahoans aged 50+ who have had a sigmoidoscopy or colonoscopy to screen for colorectal cancer within the prior five years.

Target: At least 53.8% of Idahoans aged 50+ will report having had a sigmoidoscopy or colonoscopy in the prior five years.

Idaho Baseline: 46.1% of Idahoans aged 50+ reported having a sigmoidoscopy or colonoscopy to screen for colorectal cancer within the prior five years (2010).

Target setting method and source: achieve U.S. average screening rate for 2010; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 16: Colorectal Cancer Screening Rate – Sigmoidoscopy/Colonoscopy							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	46.1%						53.8%
Ranking*	47 <sup>th</sup>						
U.S. Rate	53.8%						

\* #1 rank is best.

17. Increase the proportion of women aged 40+ who have had a mammogram to screen for breast cancer within the prior two years.

Target: At least 75.6% of women aged 40+ will report having had a mammogram in the prior two years.

Idaho Baseline: 63.8% of women aged 40+ reported having a mammogram to screen for breast cancer within the prior two years (2010).

Target setting method and source: achieve U.S. average screening rate for 2010; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 17: Breast Cancer Screening Rate							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	63.8%						75.6%
Ranking*	51 <sup>st</sup>						
U.S. Rate	75.6%						

\* #1 rank is best.

18. Decrease the proportion of adults aged 18+ who are current smokers.

Target: 12.0%.

Idaho Baseline: 15.7% of adults aged 18+ reported being current smokers in 2010.

Target setting method: retain Healthy People 2010 target; HP2020.

Objective source: HP2020.

Data source: Behavioral Risk Factor Surveillance System.

Objective 18: Smoking Rate							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	15.7%						12.0%
Ranking*	16 <sup>th</sup>						
U.S. Rate	17.3%						

\* #1 rank is best.

19. Reduce tobacco use by adolescents.

Target: 13.4%.

Idaho Baseline: 21.5% of adolescents in grades 9 through 12 used cigarettes, chewing tobacco, snuff, or cigars in the past 30 days in 2009.

Target setting method: retain CCAI Strategic Plan 2006-2010 target; CCAI.

Objective source: CCAI.

Data source: Youth Risk Behavior Surveillance System.

Objective 19: Adolescent Tobacco Use					
Year	2009 (Baseline)	2011	2013	2015	Target
Idaho Rate	21.5%	19.7%			13.4%
Ranking*	n/a				
U.S. Rate	26.0%				

\* #1 rank is best.

20. Increase the proportion of adults aged 18-64 who have any kind of health care coverage.

Target: 82.2%.

Idaho Baseline: 77.1% of adults aged 18-64 reported having any kind of health care coverage in 2010.

Target setting method and source: achieve U.S. rate for 2010; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 20: Health Care Coverage							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	77.1%						82.2%
Ranking*	44 <sup>th</sup>						
U.S. Rate	82.2%						

\* #1 rank is best.

21. Increase the proportion of adults who are at a healthy weight.

Target: 40.8%.

Idaho Baseline: 37.1% of adults aged 18+ were neither overweight nor obese based on body mass index (BMI) in 2010.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 21: Weight Classification by Body Mass Index (BMI)							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	37.1%						40.8%
Ranking*	17 <sup>th</sup>						
U.S. Rate	35.5%						

\* #1 rank is best.

22. Increase the proportion of adults who participate in physical activities.

Target: 88.0%.

Idaho Baseline: 80% of adults aged 18+ participated in physical activities in 2010.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 22: Physical Activity							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	80.0%						88.0%
Ranking*	9 <sup>th</sup>						
U.S. Rate	76.1%						

\* #1 rank is best.

23. Decrease the proportion of adult males who use smokeless tobacco.

Target: 6.3%.

Idaho Baseline: 8.3% of adult males were current users of smokeless tobacco in 2010.

Target setting method and source: 2 percentage point improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 23: Smokeless Tobacco Use							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	8.3%						6.3%
Ranking*	35 <sup>th</sup>						
U.S. Rate	5.9%						

\* #1 rank is best.

24. Increase the physical health-related quality of life of cancer survivors.

Target: 22.1%.

Idaho Baseline: 24.9% of cancer survivors (excluding non-melanoma skin cancer; limited to persons diagnosed in prior 15 years) reported poor physical health in 14 or more of the previous 30 days in 2009.

Target setting method and source: achieve U.S. average for 2010; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 24: Physical Health-Related Quality of Life of Cancer Survivors							
Year	2009 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	24.9%						22.1%
Ranking*	42 <sup>nd</sup>						
U.S. Rate	22.1%						

\* #1 rank is best.

25. Increase the mental health-related quality of life of cancer survivors.

Target: 9.9%.

Idaho Baseline: 11.9% of cancer survivors (excluding non-melanoma skin cancer; limited to persons diagnosed in prior 15 years) reported poor mental health in 14 or more of the previous 30 days in 2009.

Target setting method and source: 2 percentage point improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 25: Mental Health-Related Quality of Life of Cancer Survivors							
Year	2009 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	11.9%						9.9%
Ranking*	27 <sup>th</sup>						
U.S. Rate	12.4%						

\* #1 rank is best.

26. Increase the proportion of homes that have been tested for radon.

Target: 20.0%.

Idaho Baseline: 15.9% of households in Idaho have ever been tested for radon (2009).

Target setting method and source: 25 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 26: Radon Testing							
Year	2009 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	15.9%						20.0%

27. Reduce the proportion of adolescents in grades 9 through 12 who report using artificial sources of ultraviolet light for tanning.

Target: 14.0 percent.

Idaho Baseline: 19.2 percent of adolescents in grades 9 through 12 reported using artificial sources of ultraviolet light for tanning in 2009.

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: Youth Risk Behavior Surveillance Survey (YRBSS), CDC.

Objective 27: Artificial Tanning Appliance Use - Adolescents							
Year	2009 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	19.2%	14.0%					14.0%
Ranking*	n/a						
U.S. Rate	15.6%						

\* #1 rank is best.

28. Reduce the proportion of adults aged 18 years and older who report sunburn.

Target: 28.3%.

Idaho Baseline: 31.4% of adult Idahoans reported having a red or painful sunburn that lasted a day or more in the past 12 months in 2010.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 28: Sunburn - Adults							
Year	2010 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	31.4%						28.3%
Ranking*	n/a						
U.S. Rate	n/a						

\* #1 rank is best.

29. Reduce the proportion of adults aged 18 and older who report using artificial sources of ultraviolet light for tanning.

Target: 5.2%.

Idaho Baseline: 5.8% of adult Idahoans used artificial sources of ultraviolet light for tanning in the past 12 months in 2009.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 29: Artificial Tanning Appliance Use - Adults							
Year	2009 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	5.8%						5.2%
Ranking*	n/a						
U.S. Rate	n/a						

\* #1 rank is best.

30. Increase the proportion of cancer patients who receive hospice care at the end of life.

Target: 89.2%.

Idaho Baseline: 81.1% of Medicare beneficiaries who had cancer, received care in a hospital, home care, skilled nursing facility or hospice, and died, died under hospice care, 2009.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Hospice Analytics.

Objective 30: Hospice Utilization							
Year	2009 (Baseline)	2010	2011	2012	2013	2014	Target
Idaho Rate	81.1%						89.2%
Ranking*	12 <sup>th</sup>						
U.S. Rate	77.2%						

\* #1 rank is best.

31. (Developmental) Increase the proportion of men who have discussed with their health care provider whether or not to test for prostate cancer.

Potential data source: Behavioral Risk Factor Surveillance System.

32. (Developmental) Increase quality of life among cancer survivors.

Potential data source: Statistics from hospitals with Commission on Cancer Approved Programs.

33. (Developmental) Increase utilization of palliative care among cancer patients.

Potential data source: Statistics from hospitals with Commission on Cancer Approved Programs.