

A ROAD MAP FOR FLORIDA AS A WORLD CLASS
CANCER CARE AND BIOMEDICAL RESEARCH DESTINATION

A MESSAGE FROM FLORIDA'S GOVERNOR



Dear Friends:

our 2014-2015 Budget.

Florida families deserve the best cancer care possible. That's why I am proud to join your efforts to give hope to our families, friends, and neighbors affected by cancer.

Last year I signed legislation to establish the Florida Consortium of National Cancer Institute Center Program at the Florida Department of Health. The Consortium is designed to enhance the quality and competitiveness of cancer care and research in Florida. The Consortium will allocate \$60 million each year to help Florida's Cancer Centers meet the rigorous scientific and research criteria required for the NCI designation. An additional investment of \$20 million for peer-reviewed research grant funding was also included in

This \$80 million investment for cancer centers will allow them to provide the most advanced care through innovative and collaborative research outcomes as a testament to Florida's commitment to providing world-class treatment to all cancerpatients. These efforts, along with the cancer plan development by the Florida Center Control and Advisory Council, will help ensure we're doing everything possible to provide the best outcome for Florida families. Florida's cancer centers provide patients with advanced treatment and support to beat this terrible disease. Our work will better equip Florida's cancer centers with the tools they need to expand cancer research and care for patients and their loved ones.

We remain committed to making Florida the best in the nation for cancer research and providing families with access to world-class treatment. Thank you for your dedication and leadership in the fight against cancer.

Sincerely,

Rick Scott Governor

FLORIDA'S SURGEON GENERAL

On behalf of the Florida Department of Health, I am pleased to present the 2015 Florida Cancer Control and Research Plan, created by the Florida Cancer Control and Research Council. As Florida's State Surgeon General, I feel fortunate to serve on this council which is committed to creating a comprehensive cancer system of care and research for our state.

The 2015 Florida Cancer Control and Research Plan provides a framework to decrease the burden of cancer by establishing goals and objectives that will provide opportunities for progressive research initiatives and enhanced networks of care. With a focus on the immediate and long-term needs of patients, families, and communities, the plan is designed to ease burdens while moving forward towards a cure.

I hope you will join me in working to make Florida the premiere destination for cancer care and research, and the model for cancer prevention in the nation. Together, we can create a better tomorrow for all people in Florida.

Dr. John Armstrong Surgeon General for Florida





Florida Cancer Control & Research Advisory Council Membership



Thomas George, MD FACP *Chair* University of Florida



Brian Rivers, PhD, MPH Vice Chair Moffitt Cancer Center



John Armstrong, MD, FACS Florida's Surgeon General



Jessica Bahari-Kashani, MD Florida Medical Association



Robert Cassell, MD Florida Society of Clinical Oncology Association of Community Cancer Centers



Asher Chanan-Kahn, MD Florida Hospital Association



Christopher Cogel, MD University of Florida Senate President's Appointee



Marti Coley, Director Government Relations Nemours Children Hospital



Lawrence Hochman, DO, FACRO Florida Cancer Affiliates — Tampa Florida Osteopathic Medical Association



Representative **Matt Hudson** Speaker Pro-Tempore House Speaker's Appointee



Erin Kobetz, PhD, MPH Sylvester Comprehensive Cancer Center - University of Miami



Theresa Morrison, PhD, CNS-BC Florida Nurses Association



Amy Smith, MD Arnold Palmer Hospital for Childern Governor's Appointee



Senator **Eleanor Sobel** Senate President's Appointee



Megan Wessel, MPH American Cancer Society

EXECUTIVE SUMMARY

Florida's Cancer Control and Research Advisory Council's membership is comprised of dynamic leadership from across the state representing Florida's major cancer partners and stakeholders. The Council's statutory responsibility is to advise the Governor, the Legislature, and Board of Governors on cancer research, control and treatment policy and priorities for Florida. The Council is responsible for collaborating with Florida's Biomedical Research Advisory Council (BRAC) to formulate, annually review, and recommend a statewide research plan. The Council has outlined five primary areas of focus, each with three goals and strategies to attain those goals.

The five overarching themes to prioritize in 2015 are intended to reduce the burden that patients and their caregivers bear in Florida. With an estimated population of 19.9 million residents, Florida's diverse population also represents a broad variety of cancers, affecting corners of and families in our great state. The best defense in conquering cancer requires a well-organized and effective offense. Prevention of cancer remains the most effective cancer treatment, and being sensitive to the diverse nature of patient needs across the state is critical for success.

Educating and promoting prevention is a long-term goal to reduce the burden of cancer in the Florida. For those currently affected, optimal cancer care begins with **access to high quality care which includes increased access to cancer clinical trials and high-quality, multidisciplinary oncology care.** This also includes supportive care and cancer survivorship services which help patients and their families make the needed health transitions with dignity, independence and support. The return on these improvements is multifold, as - most importantly - the patient seeking care optimizes his/her outcomes, but Florida also benefits from the scientific progress made which supports public and private healthcare, biomedical and technology partnerships.

These objectives culminate in the identification of Florida as a cancer care and research destination. Reaching the goals outlined in this report, Florida will not only reduce the burden of cancer for its residents, but will simultaneously establish itself as a global leader in high-quality cancer care, biomedical research, education, training, employment and policy. These priorities are at the beginning of our Council's vision for what Florida has to offer for our families, neighbors and visitors.

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1. The Faces of Cancer in Florida

Cancer as a Journey

From the moment of detection through treatment and beyond, cancer represents one of the largest healthcare burdens on our Florida families. It affects the patient, caregivers, family, friends and other loved ones. For all involved, it is a journey that we believe can be either avoided or significantly improved. This document is a call-to-arms for state policy makers, healthcare providers and cancer stakeholders to band together and collaborate on making a difference, not just one patient at a time, but simultaneously for all cancer patients and caregivers in our great state.

Some of these recommendations can be accomplished quickly; others require more time to develop. However, the overarching goal is to reduce the burden of cancer for our Florida families and ensure that Florida becomes a destination for the highest-quality cancer care and research.



Florida is the nation's third most populous state with an estimated population of 19.9 million. From 2010 to 2014, Florida is ranked sixth among all states in terms of population growth with a population increase of 5.8% during this time.

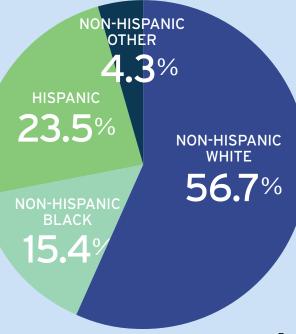
An estimated 2.1 million Florida residents live in rural areas. However, this varies greatly across geographic regions of the state. For example, over 65% of the population of Miami-Dade County is Hispanic.

Florida has the highest population of older adults in the U.S. with 18.6% of Florida residents over the age of 65. Of Florida residents ages five and older, more than one out of four (27.4%) speak a language other than English at home and one out of nine (11.5%) speak English less than "very well."

Approximately 87% of Florida residents ages 25 and older are high school graduates (or equivalent) and 27.2% have completed at least a bachelor's degree.

In summary, Florida is a large and diverse state which closely resembles the continuously changing demographics of the entire nation.

FLORIDA'S RACIAL/ETHIC COMPOSITION



Burden of Cancer

The impact of cancer in the state of Florida is felt throughout every city and county. **Cancer represents the most common cause of death in Florida**, leading to more than 43,000 dying each year. For the U.S. in general the trends are that lung and colorectal incidence rates are declining while incidence rates for liver, thyroid, and melanoma are increasing. In the U.S. most cancer mortality rates have decreased but liver and pancreatic deaths rates have slightly increased.

TOP 10 CANCERS IN FLORIDA (INCIDENCE)

- 1. Lung and Bronchus
- 2. Prostate
- 3. Breast / Female
- 4. Colon and Rectum
- 5. Urinary Bladder
- 6. Melanoma
- 7. Non-Hodgkin Lymph
- 8. Kidney
- 9. Leukemia
- 10. Oral Cavity

TOP 10

CANCERS IN FLORIDA (MORTALITY)

- 1. Lung and Bronchus
- 2. Colon and Rectum
- 3. Pancreas
- 4. Breast / Female
- 5. Prostate
- 6. Leukemia
- 7. Liver
- 8. Non-Hodgkin Lymph
- 9. Urinary Bladder
- 10. Esophagus

114,040
ESTIMATED
CANCER CASES

ESTIMATED CANCER DEATHS 2015 Source: American Cancer Society

Despite this clear burden of cancer on Floridians, the figures above represent an underestimate. Our statewide cancer registry, the Florida Cancer Data System (FCDS; see appendix), does not currently collect data on every Floridian with cancer. As an example, Floridians with cancer who receive care through the Department of Veteran's Affairs are not represented in these data. Likewise, patients diagnosed in ambulatory care centers are also not included. Additionally, what treatments were received by patients and how they are currently doing, is not consistently collected. For Florida to measure improvements in cancer care, identify new trends in disease burden, and establish effective policy, we must know the entire story.

GOAL 1: Expand the statewide data and surveillance program (FCDS) to facilitate accurate and timely cancer diagnosis collection and reporting inclusive of all Floridians

- Incorporate data from Florida-based Department of Veteran's Affairs facilities by end of 2015
- Establish a strategic plan for incorporating all Florida-based ambulatory and hospital cancer cases in 2015

GOAL 2: Support the development of an outcomes-based statewide cancer integrated data repository to facilitate accurate identification of cancer patient treatments, outcomes and migration

- Establish a strategic plan for development, collection, management and utilization of aggregate cancer patient outcomes-based and accurate ethnic/racial/demographic identifiers from throughout Florida in 2015
- Identify key partners for collation of this information (e.g., ACHA, Commission on Cancer, etc.) in 2015

GOAL 3: Link key screening, laboratory, and molecular cancer test results into the Florida cancer integrated data repository

• Establish a strategic plan for incorporating key screening, laboratory and molecular cancer test results into the repository inclusive of public-private partnerships in 2015

2. The Best Defense is a Great Offense

Many of the leading causes of cancer including tobacco use, obesity, viral infections, excessive ultraviolet light exposure, excessive alcohol consumption, and Radon exposure can be reduced or eliminated through awareness and behavior modification. These risk factors appear responsible for nearly 80% of the cancer diagnoses in the U.S.

While advancement has been made in some of these areas over the past few years, there is still a large need for improvement. The prevalence of smoking is on the decline among Florida adults and youth.

16.8% of Florida adults were still current cigarette smokers in 2013

4.3% of Florida youth ages 11-17 were current cigarette smokers in 2014

one of 13 Florida public high school youth wear sunscreen with SPF 15 or higher when they are outside for more than one hour on a sunny day

7.5% have used a tanning device such as a sunlamp, sunbed, or tanning booth in the past year

62.8% Roughly two-thirds of Florida adults were overweight or obese in 2013



19.9% One out of five Florida adults participated in enough physical activity to meet national guidelines.

22.9% Approximately 22.9% of Florida public middle and high school students met the national guidelines of being physically active for at least 60 minutes of physical activity on seven of the past days.

Prevention of cancer remains the most effective cancer treatment.

For many cancers, early detection through cancer screening tests can identify cancers when otherwise undetectable and thus improve outcomes. Prevention through risk factor modification or carcinogenic exposure reduction and early detection through screening offers an opportunity to improve outcomes for Floridians and their families.

For many Floridians, cancer is a family affair, not just through the support of caregivers, but also due to genetic or other predispositions that may contribute. Identification of cancer predisposition in Floridians offers another opportunity to tailor risk factor modification, early detection, and cancer treatment to further improve the health of Floridians and their families. Early detection of cancer, specific to the needs of the individual, is the next best strategy after prevention.



GOAL 1: Decrease the proportion of Floridians who use tobacco products, with particular emphasis on prevention of tobacco use amongst youth

- •Endorse a comprehensive tobacco prevention and cessation program for Florida in 2015
- •Collaborate with tobacco cessation stakeholders (e.g., Tobacco Free Florida)
 - •Increase the number of committed never smokers among youth, ages 11-17, from 67.1% to 73.8% by 2020
 - •Increase the number of youth, age 11-17 who have been taught in any class about tobacco use during the current school year from 38.0% to 43.7% by 2020
 - •Reduce current cigarette use among youth, ages 11-17 from 4.3% to 3.6% by 2020
 - Reduce current smoking rates among adults from 16.8% to 14.3%
 - •Increase the percentage of adult smokers making a quit attempt from 61.1% in 2014 to 67.2% by 2020

GOAL 2: Promote healthy lifestyles and policies for Floridians to reduce the risk of cancer

- Support education and policies aimed to reduce non-tobacco associated risk factors for cancer including certain infections, obesity, excessive ultraviolet light radiation, and Radon
 - •Increase the percentage of Florida adults at a healthy weight from 34.9% to 38.2% by 2017
 - •Increase the vaccination coverage level of 3 doses of human papillomavirus (HPV) vaccine for females AND males by age 13 to 15 years to 80% by 2020
 - Educate providers and the general public through at least two state-wide activities (in 2015) on the importance of provider vaccine recommendation to age appropriate persons, series completion and reminder systems



GOAL 3: Increase the proportion of Floridians who receive appropriate cancer screenings

- •Support education and awareness programs aimed to encourage Floridians to discuss their risks for cancer and potential screening tests available with their doctor
- •Endorse programs aimed to improve cancer screening methods or screening rates, including effective methods to screen high-risk populations of Floridians
 - •Increase the percentage of adults 50 years of age and older who receive colorectal cancer screening based on national guidelines from 61.2% to 80% in 2018
 - •Increase the percentage of women aged 21 to 65 who receive a Pap test in the last three years from 80.4% to 93% by 2020
 - •Increase the percentage of women aged 50 to 74 who receive a mammogram in the last two years from 76.8% to 81.1% by 2020
 - •Support the recommendation from the Florida Prostate Cancer Advisory Council that men aged 50 years and older (age 40 for men at high risk: African American men and men with a family history of prostate cancer) should be informed by their health care providers annually regarding the risks and benefits of PSA screening
- Promote the Human Papillomavirus vaccine for Florida's youth
- By June 2015, educate providers and the general public through two activities on the importance of provider vaccine recommendation to age appropriate persons, series completion and reminder systems
- Support policies which limit out-of-pocket expenses for Floridians recommended for cancer screening services
- Support policies which limit out-of-pocket expenses for Floridians recommended for genetic testing and counseling based upon published guidelines, deemed at high risk for an inheritable cancer risk syndrome

Recommended Health Screenings

BRCA-Related Cancer: Women who have family history of breast, ovarian, tubal, or peritoneal cancer

Breast Cancer: Screening every 1-2 years starting at age 40

Cervical Cancer: Screening every 5 years

Skin Cancer: Periodic skin exams are important

Lung Cancer: Screenings for current or former smokers between the ages of 55-80

Colorectal Cancer: Initial screening for both men and women starting at age 50

Source: USPSTF website

Florida

Cancer Screening /Colorectal

Percentage of adults 50 years of age and older who received a stool blood test in the past year

Percentage of adults 50 years of age and older who received a sigmoidoscopy or colonoscopy in the past five years

Cancer Screening /Cervical

Percentage of women 18 years of age and older who received a Pap test in the past year

Cancer Screening /Breast

57.5% Percentage of women aged 40 to 74 years who received a mammogram in the past year

Percentage of women 18 years of age and older who had a clinical breast exam in the past year

Source: 2013 Florida BRFSS survey





National

67.0% Percentage of adults 50 years of age and older who received colorectal cancer screening

80.1% Percentage of women aged 21 to 65 who received a Pap test in the last three years

77_4% Percentage of women aged 50 to 74 who received a mammogram in the last two years

Source: 2013 BRFSS survey

GOAL 1: Increase the percentage of adults 50 years of age and older who receive colorectal cancer screening based on national guidelines from 61.2% to 80% in 2018

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3. Improving Patient Outcomes with Treatment

Optimal cancer care begins with access to high quality care. Provision of high quality cancer care requires constant education of both providers and patients, awareness of changing practice paradigms, and willingness to assess ones' own individual and group performance to ensure that patient outcomes are being accomplished at a level that is consistent with or higher than national averages. All cancer providers in the State of Florida should provide care in accordance with defined standards based upon the highest levels of scientific and medical evidence. Such standards should be disclosed to patients considering treatment since public reporting of practice outcomes allows full information for patient choice. Cancer patient treatment outcomes are improved when care is delivered in a coordinated and multidisciplinary manner with referral available for expertise in conditions that are uncommon, have high mortality, or when multidisciplinary teams are not available. This is particularly true for cancers of lower incidence and cancers affecting children. Clinical care and patient outcomes are improved when patients participate in clinical trials, even when a standard of care is being delivered. Treatments aimed to advance the scientific field for all patients and provide new or innovative therapies are preferred so Floridians have access to potentially life-saving treatment.

GOAL 1: Support policies that will ensure health equity for all cancer patients and their caregivers

- Support oral therapy parity for cancer patients, regardless of coverage, as exempt from cost sharing purposes, including oral and intravenous cancer therapies and supportive care medications (similar to provision of services provided as part of hospice coverage)
- Recognize Florida provider & coverage networks which are inclusive of comprehensive cancer services available within Florida (e.g., at least one Florida hematopoietic cell transplant center is included in any provider network with cancer treatment coverage, genetic testing and counseling services, etc.)
- Partner with the Florida Health Equity Research Institute (HERI), Biomedical Research and Advisory Council (BRAC), and others to address the multi-level determinants of cancer-health disparities in Florida and reduce cancer morbidity and mortality in minority, medically-underserved, and rural communities
- Support policies to address access to care related to transportation needs to and from cancer treatments

GOAL 2: Improve Floridian's access to high-quality, multidisciplinary oncology care

- Endorse standards of evidence-based high quality oncology care for Florida
- · Undertake a needs assessment of county-based cancer burden from Commission on Cancer Accredited facility
- Support policies and programs which publicly report compliance with provision of high-quality cancer care (e.g., the Florida Cancer Centers of Excellence), particularly for childhood and rare (low incidence/high mortality) cancers
- Within 10 years, reduce mortality associated with the most common causes of cancer death in Floridians, including decreased deaths in lung cancer by 15%, breast cancer by 15%, prostate cancer by 20%, colon cancer by 25%, and melanoma by 15%
- Support navigators for multidisciplinary care provision in community
- Support the development and policies of oncology Medical Homes

GOAL 3: Increase the number of Floridians with access to and participation in cancer clinical trials.

- Recognize proper implementation of clinical trials coverage provisions throughout all insurance and healthcare policies in Florida
- Support development of integrated statewide clinical trials network(s) between academic centers and community oncology practices to promote Florida-centric new treatment options for patients
- Support efforts to encourage patient referral to clinical trials
- Support efforts of NCI-Consortium members to increase the number of therapeutic clinical trials offered in Florida and to increase the number of patients participating in these studies
- Support policies that increase cancer-related device and drug development in Florida

4. Beyond the Cancer Diagnosis

Accuracy in the initial diagnosis and completion of a comprehensive cancer treatment plan is only one aspect of optimal cancer care. To ensure that Floridians receive treatment that supports their goals to be active and functional members of their communities and families, regardless of the ultimate trajectory of their cancer journey, we must support all aspects of cancer care, notably supportive care, palliative care and cancer survivorship.

The National Cancer Institute defines a cancer survivor as "One who remains alive and continues to function during and after overcoming a serious hardship or life-threatening disease. In cancer, a person is considered to be a survivor from the time of diagnosis until the end of life." With improvements in outcomes, the number of cancer survivors in Florida is going to continue to increase.

Cancer survivors have unique needs, both in physical and emotional recovery from treatment, resumption of employment and social integration, active surveillance for recurrence of the disease, and prevention of secondary complications, including new cancers, in the future. Given the complexities, the NCI and several national cancer policy organizations (including the Commission on Cancer, the American Society of Clinical Oncology and the American Cancer Society) have supported or required the development of cancer survivor care plans and treatment summaries.

These tailored summaries are important to safely and effectively ensure that all providers involved in that patient's care (oncologist, surgeon, primary care provider) are aligned in efforts to optimize the patient's recovery and health. Childhood cancer survivors and policies supporting the diverse needs of this patient group have resulted in significantly improved outcomes and maintenance of long-term health. Childhood cancer survivors serve as a model for adult cancer survivorship and transitions in care.

According to the World Health Organization, "Palliative care improves the quality of life of patients and families who face life-threatening illnesses."

Palliative Care:

- Provides relief from pain and other distressing symptoms
- · Affirms life and regards dying as a normal process
- · Intends neither to hasten or postpone death
- Integrates the psychological and spiritual aspects of patient care
- Offers a support system to help patients live as actively as possible until death
- Offers a support system to help the family cope during the patients illness and in their own bereavement
- Uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated
- Will enhance quality of life, and may also positively influence the course of illness
- Is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications



GOAL 1: Support education and awareness of cancer survivor needs in Florida

- · Establish a definition of a cancer survivor for Florida
- Identify and endorse evidence-based high-quality standards for the care of cancer survivors
- Support Florida awareness of Cancer Survivor Day

GOAL 2: Support policies that ensure all Floridians with cancer (and their caregivers) have access to resources that provide quality of life during and after therapy

- Identify and endorse supportive cancer patient care services and palliative care services (inclusive of caregiver support services) for Florida. In areas where there is debate on merit of services, support research to prove or refute value
- •Recognize Florida provider & coverage networks which include comprehensive cancer support services available within Florida
- Support awareness and education of ways to live with cancer, focusing on quality of life and maintenance of independent functioning

GOAL 3: Support policies that ensure all Floridians with incurable cancer have access to resources that provide dignified end of life care

- Identify and endorse high quality evidence-based end-of-life medical care services for Florida
- Support patient and caregiver active decision making in use of hospice and other palliative care services
- Recognize Florida provider & coverage networks which include comprehensive cancer end-of-life services available within Florida



5. Florida as a Cancer Care and Research Destination

Given the burden of cancer in Florida, a comprehensive and collaborative approach is required to address it. That same collaborative approach can be leveraged to facilitate a statewide effort to both reduce the burden of cancer as well develop national and international recognition for Florida as a destination for cancer care and biomedical research. Currently, health care resource utilization in Florida for cancer care is significant but fragmented. Cancer care and outstanding research efforts in Florida is organized in relatively small regional networks or single large institutions/practices.

For our patients in Florida to realize the benefits of a coordinated statewide cancer care and research system, infrastructure linking current groups and efforts is needed, along with a coordinated prioritization of efforts. With a functional statewide platform, innovative research, collaborative private and public partnerships, financial growth, and inclusion of all stakeholders with clinical and research synergy can be fostered throughout Florida. Truly innovative biomedical research also requires multidisciplinary and collaborative teamwork among clinicians, scientists and patients resulting in "bench to bedside and back to bench" discoveries. With these elements in place, Florida will position itself as a destination where oncology practice-changing questions can be rapidly tested and answered.

Despite nationally-recognized leadership and comprehensive cancer care and research in Florida, there remains a disproportionate lack of federal tax dollars, in the form of NCI, NIH, and other major research grants returning to Florida to help Floridians. The recommendations below are part of a strategic plan to facilitate infrastructure investments and collaborations to make Florida an international cancer care and biomedical research destination.

GOAL 1: Invest in Biomedical research - In Florida - For Floridians

- Coordinate the CCRAB Florida Cancer Plan priorities with the BRAC research agenda for Florida
- Increase and maintain continuous Biomedical research funding through the Bankhead-Coley and James & Ester King Biomedical Trust funds with a goal of further securing the reinvestment of federal tax dollars back to Florida for biomedical cancer research
- Focus research investment on new technology/device/ therapy developments in Florida
- Continue to foster state policies that encourage biotechnology companies to headquarter in Florida
- Increase the number of Florida-based public-private partnerships in cancer research in next 3 years
- Increase visibility of successful public-private partnerships that target cancer
- Increase the visibility of cancer research discoveries from Florida researchers
- Increase the visibility of cancer care excellence from Florida cancer provider networks
- Support policies that promote sustainability of initial state Biomedical infrastructure investments
- Support NCI Consortium & Florida Cancer Centers of Excellence collaborative networking to facilitate teambased science
- Increase number of Florida-based NCI Designated Cancer Centers (Designated and Comprehensive) by 2020
- Work with BRAC to establish multi-PI capacity for research proposals by 2016



GOAL 2: Support the development of a state biomedical workforce pipeline (STEMS K-12 and beyond)

- Establish partnerships from stakeholders and the Florida Department of Education to solicit feedback on a needs assessment related to educating the next generation of biomedical researchers and cancer clinicians for Florida in 2015
- Determine how to commission a workforce/needs assessment for cancer and biomedical research for Florida to:
- Link Florida educational STEM programs with opportunities within the State University System and State College Partners
- Support biomedical cancer research training leading to PhD, MPH
- Support biomedical cancer clinical training inclusive of cancer-specific providers such as nursing, pharmacy, advanced practice providers (PA-C; ARNP) and physicians
- Support cancer biomedical research and clinical trainees that represent the communities served in Florida, inclusive of minority and disparate populations

GOAL 3: Facilitate Florida-based Telemedicine for genomics and other advanced cancer research analytics and high-quality care

- Develop a Cancer Medical Tourism plan for Florida in partnership with VISIT Florida and others by 2016
- Endorse a definition of telemedicine and support policies which promote the capacity for licensure to provide consultative services in genetics/genomics for cancer care in Florida
- Support policies which promote the ability to provide consultative services in Florida for cancer patients as part of medical tourism
- Support Florida-based medical, biotechnology and training programs for international cancer providers and investigators to ensure exposure to Florida cancer care and research systems and collaborative opportunities

With a functional statewide platform, innovative research, collaborative private and public partnerships, financial sustainability, and inclusivity of all stakeholders with teambuilding of clinical and research synergy can be fostered across and throughout Florida. Truly innovative biomedical research also requires multidisciplinary and collaborative teamwork between clinicians, scientists and patients resulting in "bench to bedside and back to bench" discoveries and application where practice-changing questions can be rapidly tested and answered.

The David and Marti Coley Florida Cancer Collaborations

Throughout her tenure in the Florida Legislature, Representative Marti Coley was a fervent champion of cancer control and funding opportunities to expand research. To preserve her unmatched resolve, the Council decided in 2014 to include this section in the annual State Cancer Control and Research Plan. This section highlights the progress made between state cancer stakeholders working collaboratively to eliminate cancer in Florida.



Marti Coley

Since 2006 over \$100 million has been allocated to the Bankhead-Coley Research Program from the Florida Legislature. During fiscal year 2013-2014 the Bankhead-Coley Research Program awarded grants to Moffitt Cancer Center, Florida State University, the Mayo Clinic, Sanford-Burnham, the University of Florida, the University of Miami, and the University of Central Florida totaling \$7.5 million. The Florida Cancer Centers of Excellence Program, established in 2013 and the NCI-Consortium Program, established in 2014 further support collaboration between the major cancer centers in Florida and invests in cancer research poised to make Florida a destination for biomedical research and cancer care through public private partnerships.

Appendix

The Florida Cancer Control and Research Advisory Council, also known as CCRAB, is the state council responsible for advising the Legislature, Governor and Surgeon General on how to reduce the cancer burden in Florida. We monitor cancer trends and disparities, evaluate and promote effective interventions to help in cancer prevention, screening and treatment. We also develop position papers on cancer-related legislation and state policy issues.

CCRAB was established in state statute in 1979, and is governed by Florida Statute 1004.435. The Council is housed at, and administratively supported by the H. Lee Moffitt Cancer Center and Research Institute, but operates as an independent group. Individual members are leaders in health care, education, cancer research and treatment, and Florida government, many of whom are cancer survivors. Membership also represents the totality of cancer stakeholder organizations statewide. The Council meets at least twice a year, has membership that is appointed as well as the Governor, President of the Senate, and Speaker of the House and by cancer stakeholder organizations. The group is overseen by a Chair and an Executive Committee. We greatly appreciate Moffitt Cancer Center's continuing support for the Council's operations and for allowing the Council to function as an independent advisory board.

Updated information can be obtained online at our website www.ccrab.org. For additional copies of this report, or any additional information about CCRAB and its activities, please contact the Council office.

For More Information:

2013 and 2014 Legislative Updates in Cancer Policy

http://www.ccrab.org/publications/

Florida Cancer Data Systems (FCDS)

http://www.fcds.med.miami.edu/inc/statistics.shtml

Florida Department of Health

http://www.floridahealth.gov/

Comprehensive Cancer Control Programs

http://www.floridahealth.gov/diseases-and-conditions/cancer/cancer-control-florida.html

Breast and Cervical Cancer Early Detection Program (BCCEDP)

http://www.floridahealth.gov/diseases-and-conditions/cancer/breast-cancer/index.html & http://www.floridahealth.gov/diseases-and-conditions/cancer/cervical-cancer/index.html

Colorectal Cancer Control Program (CRCCP)

http://www.floridahealth.gov/diseases-and-conditions/cancer/colon-cancer/index.html

Policy, Environment and Systems Change Program (PES)

Florida's Health Equity Research Institute (HERI)

http://www.flheri.org/

Florida's Biomedical Research Advisory Council (BRAC)

http://www.floridahealth.gov/provider-and-partner-resources/research/research-cancer-tobacco.html

Prostate Cancer Advisory Council (PCAC)

http://prostatecanceradvisorycouncil.org/

THANK YOU TO OUR PARTNERS







































FOR MORE INFORMATION CONTACT:

Merritt Martin

State Legislative Affairs Director Moffitt Cancer Center merritt.martin@moffitt.org

Laura Lenhart

Public Affairs Strategist Moffitt Cancer Center laura.lenhart@moffitt.org