2022 NPCR MONTANA SUCCESS STORY

Montana Central Tumor Registry; Heather Zimmerman and Leah Merchant

Cancer Surveillance Data Guides State Cancer Planning Process

National Program of Cancer Registries SUCCESS STORY

SUMMARY

The Montana Cancer Coalition (MTCC) and the Montana American Indian Women's Health Coalition (MAIWHC) needed to update their five-year plans. The Montana Central Tumor Registry (MCTR) provided detailed cancer surveillance data to inform the planning process and ensure data driven decision making. Cancer incidence and mortality data in Montana highlighted disparities in cancer burden among American Indian Montanans and lead to the MTCC and MAIWHC to both focus on achieving health equity by addressing the social determinants of health in the new plans. MCTR will stay actively involved in both coalitions and seek their input at least twice a year to ensure continued collaboration.

CHALLENGE

The Montana Statewide Cancer Plan and the MAIWHC plan are updated every 5 years. The most recent plans were set to end in 2021 so the planning process needed to start in late 2020. Updating the plans presented an opportunity to re-evaluate priorities and use data to drive decision making. Having a reliable source for high quality data is essential for the planning process. There were also many other challenges to overcome. Most importantly the COVID-19 pandemic diverted the attention of many of the coalition members who work in public health and healthcare organizations and made in-person planning meetings impossible. The planning process needed to take place virtually and took longer than it had in previous iterations. Additionally, there are always challenges reconciling diverse opinions and perspectives to come to consensus on plan priorities.

SOLUTION

Updating the Statewide Cancer Plan and the MAIWHC Plan was a collaborative process. Implementation teams (one team works on each section of the plan) met through 2021 to revise the plan and presented and received feedback on their sections at the Fall 2021 MTCC Statewide Roundtable. Suggestions were incorporated and the revised plan was reviewed by physicians and accompanying medical professionals, representatives from the University of Montana Rural Institute for Inclusive Communities Disability and Health Program, American Indian representatives, and representatives from the State of Montana Department of Public Health and Human Services. Similarly, the MAIWHC leadership met regularly and went through an iterative revision process with input from MAIWHC members and tribal health leaders throughout the process.

The MCTR manager stayed engaged in this process by developing strong relationships and communicating consistently with the coalitions. The MCTR manager meets weekly with the Comprehensive Cancer Control program manager and was able to stay apprised of plan update timeline and data needs. Because of relationships built and sustained through previous MTCC/MAIWHC plan iterations and meetings, members of both coalitions are familiar with the MCTR staff and data resources and can easily request and receive information. MCTR makes data publicly available on the cancer control website. The MCTR manager worked with the Rocky Mountain Tribal Epidemiology Center to develop factsheets for each reservation and tribe in Montana in 2019 and the factsheets are updated annually. All data reports produced by the MCTR are directly emailed to members of the MTCC and MAIWHC.

RESULTS

MCTR data was an integral part of developing the 2022 – 2026 Montana State Cancer Plan and the MAIWHC Plan. The planning process started with a comprehensive assessment of progress that has been made on the existing plan. The MCTR epidemiologist prepared reports for both the MTCC and MAIWHC leadership teams and presented the findings in late 2020. The presentations included cancer incidence and mortality trends by sex in Montana compared to the United States overall. Cancer incidence data was also analyzed by primary site, race, and rurality. This analysis highlighted which types of cancer are causing the largest burden and what populations are disproportionately affected. Starting with this data in mind lead the MTCC and MAIWHC leadership teams to center the new plan on health equity and addressing the social determinates of health.

Throughout the planning process the MCTR epidemiologist participated in MTCC and MAIWHC leadership team meetings to answer any data related questions and assist with determining the most appropriate metrics to measure progress in the new plans. Current cancer incidence and mortality statistics were included in both plans to demonstrate cancer burden in Montana and to support the identified priorities in both plans.

SUSTAINING SUCCESS

MCTR staff will continue to be active participants in the MTCC and MAIWHC to assist the coalitions with fully using cancer surveillance data possible. The MCTR manager will present at coalition meetings whenever invited to do so. MCTR will also continue to send all data reports to members of both coalitions. Finally, MCTR has established the leadership team of the MTCC as our advisory group and will consult with them at least twice a year to gather input on the coalition's data needs and other topics as needed. These steps will ensure that coalition members and leadership teams always have access to Montana cancer surveillance data and will maintain strong relationships between the coalitions and the registry.

STORY QUOTE

"With the intense challenges that public health and local communities have faced over the past couple years, it's easy to overlook the parts of our work that are going *well* – the aspects that function seamlessly and the relationships that are steadfast. It's exciting to see how both the Montana Cancer Coalition and the Montana American Indian Women's Health Coalition continually turn to the Montana Central Tumor Registry for accurate cancer data and are eager to include the Registry in their planning and evaluation processes!" – Leah Merchant, Section Supervisor, Montana Cancer Control Programs

REGISTRY CONTACT INFORMATION

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