

SOUTH CAROLINA

Comprehensive Cancer Control Plan 2027–2031

PEDIATRIC CANCER WORKGROUP

South Carolina Pediatric Cancer Plan 2027-2031

Strategies, activities, and a measurement plan

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South Carolina Pediatric Cancer Plan 2027-2031

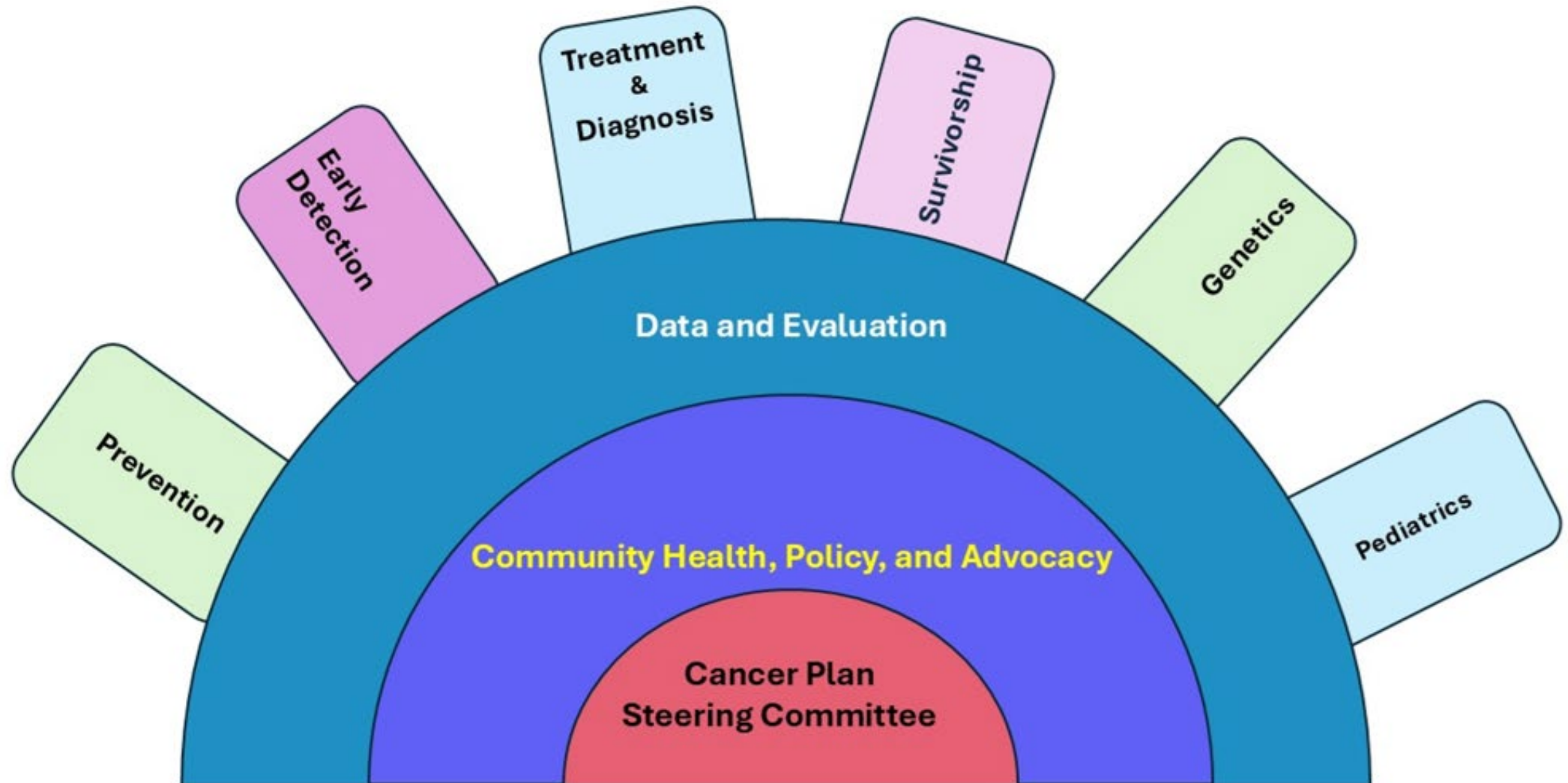
Pediatric Cancer Workgroup

Introduction

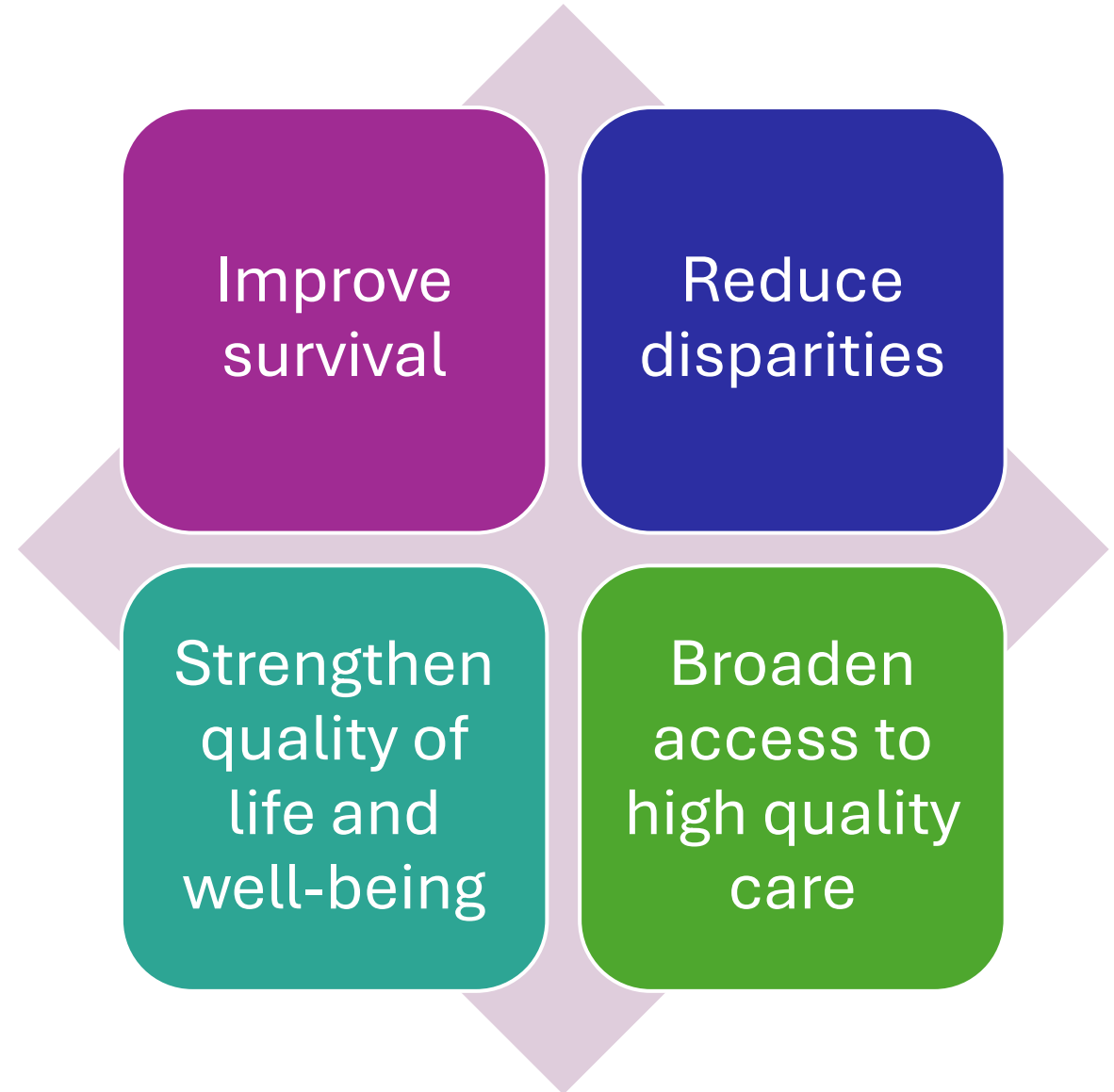
- Since 1998, the CDC's National Comprehensive Cancer Control Program has supported cancer coalitions to implement cancer plans locally in US states, territories, and tribal organizations.
- Comprehensive Cancer Control Plans provide a strategic framework to guide local cancer control activities based on assessment of the cancer landscape.
- South Carolina updates its Comprehensive Cancer Control Plan on 5-year cycles to serve as a guide for reducing the impact of cancer across South Carolina.

In 2024, we published the first trend report on Childhood Cancer in South Carolina with the SC Department of Public Health which laid the foundation for a dedicated Pediatric Cancer Section in our state's Comprehensive Cancer Control Plan for the first time.

2027-2031 South Carolina State Cancer Plan Proposed Workgroup Structure



Core Outcomes for Pediatric Cancer in South Carolina





Guiding priorities for the Pediatric Cancer Workgroup

Ability to receive care close to home

Health equity

Longitudinal family centered support

Affordability and access to care

Mission & Vision

Pediatric Cancer Workgroup

MISSION OF THE PEDIATRIC CANCER PLAN

To improve childhood cancer survival, reduce disparities, strengthen quality of life and well-being for patients and families, and broaden access to high quality care.

VISION OF THE CANCER PLAN

Every child with cancer in South Carolina receives high-quality, affordable, family-centered care, with equitable access to treatment, clinical trials, survivorship services, and long-term support.

SOUTH CAROLINA PEDIATRIC CANCER ROADMAP

1. **Awareness** - *Increase awareness of childhood cancer in South Carolina by providing accurate, up-to-date information including the availability of treatment and resources at the state's three pediatric oncology centers*
2. **Quality Care** - *Ensure that all children with cancer in South Carolina have access to high quality clinical and supportive care services*
3. **Educational Support** - *Improve educational continuity, school reentry, and long-term educational outcomes for children and adolescents affected by cancer in South Carolina*
4. **Survivorship** - *Ensure that every childhood cancer survivor receives a standardized survivorship care plan with coordinated long-term medical and vocational support to promote lifelong health, well-being, and independence.*

South Carolina Pediatric Cancer Plan Awareness Objectives

OBJECTIVE

Update the SC Childhood Cancer Trend Report on a 5-year cycle and the Childhood Cancer Fact Sheet annually to support evidence-based planning, advocacy, and policy.

STRATEGY

Improve transparency and begin dissemination of South Carolina's childhood cancer data to partners, policymakers, and clinicians.

PARTNER(S)

SC Central Cancer Registry (Bezawit Kase, Stephanie Chiodini); physician collaborator: Dr. Anna Hoppmann, SCCA

IMPLEMENTATION MEASURES*Did we do the work?*

- Childhood Cancer Trend Report published on 5-year cycle (Y/N)
- Childhood Cancer Fact Sheet updated annually (Y/N)
- Trend Report and Fact Sheet disseminated to partners, policymakers, and clinicians (Y/N; # recipients) – SCCA/DPH
- Trend Report and Fact Sheet plain-language summary versions produced (Y/N)
- Trend Report and Fact Sheet include rurality, distance to care, primary payor and timeliness of benefits (Y/N)

DATA SOURCES

SC Central Cancer Registry publication records; SCCA dissemination logs; partner mailing lists

PROXIMAL OUTCOME MEASURES*Short-term effects*

- Number of downloads or views of the trend report and fact sheet
- Number of stakeholder organizations confirming receipt and use

DATA SOURCES

SCCA website analytics; stakeholder survey; registry distribution records

DISTAL OUTCOME MEASURES*Population-level impact*

- Citations of SC childhood cancer data in legislative testimony, policy briefs, and grant proposals
- References in media and academic publications
- Use of trend data to inform changes in pediatric cancer policy or funding

DATA SOURCES

Citation tracking; media monitoring; legislative record review

OBJECTIVE

Maintain and update the SCCA Patient & Family Resource Hub biannually to ensure resources remain current and specific to South Carolina.

STRATEGY

Maintain a centralized, regularly updated Patient & Family Resource Hub as the primary statewide access point for childhood cancer information.

PARTNER(S)

SCCA (Brenda Thorpe); psychosocial collaborators — Caitlin Sullivan (Midlands)

Contacts: Tiombe Plaire (MUSC), Amy Bowers (Upstate)

IMPLEMENTATION MEASURES*Did we do the work?*

- Bi-annual resource review completed (Y/N)
- Spanish-language version of core materials published (Y/N)
- Three-center referral pathway to the Resource Hub established (Y/N)

DATA SOURCES

SCCA review logs; content publication dates; Hub navigation maps; translation record

PROXIMAL OUTCOME MEASURES*Short-term effects*

- Percent of resources confirmed current and SC-specific
- Inclusion of late benefits >6 months from diagnosis and community partners that can help with benefits (Y/N)
- Percent of psychosocial teams at each hospital engaged in guide creation biannually
- Number of families receiving the resource guide
- Number of clicks and downloads of Hub materials

DATA SOURCES

Annual internal review; psychosocial-team referral reports; SCCA website analytics; partner dissemination logs

DISTAL OUTCOME MEASURES*Population-level impact*

- Family-reported usefulness of the Resource Hub during diagnosis and treatment
- Family-reported reduction in time to find local resources

DATA SOURCES

Patient and caregiver surveys; psychosocial-team feedback

OBJECTIVE

Implement an annual statewide childhood cancer awareness campaign each September across major communication channels, focused on the high-quality care available at SC's three pediatric oncology centers.

STRATEGY

Promote a unified "Quality Care Close to Home" childhood cancer campaign each September across SCCA, the three Children's Hospitals, and partner organizations.

PARTNER(S)

Drs. Dumitriu and Hoppmann, SCCA, SC DPH
Community Partner: Curing Kids Cancer (Grainne Owen)

IMPLEMENTATION MEASURES

Did we do the work?

- Branded awareness toolkit developed and distributed (Y/N)
- Annual September campaign held (Y/N each year)
- All three Children's Hospitals partnered for content amplification (Y/N)
- Number of SC-based patient stories and care-team profiles produced

DATA SOURCES

Toolkit publication records; campaign run logs

PROXIMAL OUTCOME MEASURES

Short-term effects

- Number of materials produced and partners engaged in dissemination
- Number of social media posts shared and reach metrics
- Increased traffic to the childhood cancer Resource Hub webpage

DATA SOURCES

Website analytics; social media analytics; partner reporting

DISTAL OUTCOME MEASURES

Population-level impact

- Public awareness of in-state pediatric cancer treatment
- Family-reported confidence in seeking care in South Carolina

DATA SOURCES

Stakeholder surveys; Patient and caregiver surveys, year-over-year Hub analytics

South Carolina Pediatric Cancer Plan Quality Care Objective

OBJECTIVE

Complete a statewide grid mapping of clinical and supportive-care services across the three SC pediatric oncology treatment centers to identify service gaps for prioritization.

STRATEGY

Establish a standardized statewide assessment tool and collect staffing and supportive-services data.

PARTNER(S)

Pediatric Workgroup (Drs. Hoppmann & Dumitriu)
Partners: MUSC Shawn Jenkins; Prisma Health Children's Hospitals; SCCA

IMPLEMENTATION MEASURES*Did we do the work?*

- Standardized resource-grid template developed (Y/N) based on ASCO Quality Consensus Statement
- Grid distributed to all three pediatric oncology centers (Y/N)
- Compiled statewide grid and gap-analysis summary produced (Y/N)
- Prioritized list of staffing and service gaps drafted (Y/N)

DATA SOURCES

Template review; grid submissions

PROXIMAL OUTCOME MEASURES*Short-term effects*

- Percent of centers submitting a completed grid
- Completeness of submitted data (percent of fields populated)
- Number of identified gaps prioritized for statewide action

DATA SOURCES

Final compiled grid; gap-analysis summary;

DISTAL OUTCOME MEASURES*Population-level impact*

- Percent of SC pediatric cancer patients with access to recommended supportive services with appropriate ratios within their treating center
- Family-reported access to needed services close to home
- Reduction in regional disparities in pediatric supportive-care availability
- Actionable clinical service gaps to inform policy and advocacy work

DATA SOURCES

Patient and caregiver surveys; SC Central Cancer Registry; regional service disparities analysis

South Carolina Pediatric Cancer Plan Educational Support Objective

OBJECTIVE

Develop and promote standardized school re-entry guidance for SC students with cancer to support academic continuity, accommodations, and safe reintegration.

STRATEGY

Standardize school re-entry expectations and communication across families, healthcare teams, and schools using a single statewide guidance framework.

PARTNER(S)

Tessa Roberts (parent advocate, lead), teacher and parent representatives

IMPLEMENTATION MEASURES

Did we do the work?

- Harmonization statement developed (Y/N)
- SC School Re-Entry Toolkit developed (Y/N)
- Guidance posted on the SCCA Resource Hub (Y/N)
- Addition of immunotherapy guidance to SC School Re-Entry Toolkit (Y/N)
- Number of hospital education liaisons and social workers oriented to the framework
- Include guidance on neurocognitive testing and community partners in SC School Re-entry Toolkit (Y/N)

DATA SOURCES

Final framework document; SCCA Hub publication record; training rosters

PROXIMAL OUTCOME MEASURES

Short-term effects

- Develop partnerships with stakeholders
- SCCA highlights “champion” districts (Y/N)
- Number of hospitals and partners promoting the guidance
- Number of school districts being trained on the framework
- Number of families receiving the re-entry guide

DATA SOURCES

Psychosocial-team data on # of families using the guide; school-district trained; partner usage reports

DISTAL OUTCOME MEASURES

Population-level impact

- Patients and caregivers across the state experience a consistent school re-entry process.
- Improved coordination between families, schools, and healthcare teams
- Reduction in time without school education among SC pediatric cancer patients during and post-treatment

DATA SOURCES

Patient and caregiver surveys; teacher feedback; hospital education-liaison feedback

South Carolina Pediatric Cancer Plan Survivorship Objectives

OBJECTIVE

Ensure that every childhood cancer survivor in South Carolina receives a standardized, evidence-based survivorship care plan (SCP) at transition to survivorship care.

STRATEGY

Use a statewide SCP framework that allows centers to use Passport for Care or an approved equivalent.

PARTNER(S)

SCCA Pediatric Workgroup; survivorship program leads (MUSC, Prisma)

IMPLEMENTATION MEASURES*Did we do the work?*

- One-page statewide SCP standard process created (Y/N)
- Training on SCP completion delivered virtually to survivorship program staff (Y/N)
- SCP delivery tracking process implemented at each center (Y/N)
- SCCA published information on survivorship clinics and standardized care plans (Y/N)
- SCPs to include insurance continuity, genetic testing, and vaccination status information

DATA SOURCES

Final SCP standard document; training logs; center attestation

PROXIMAL OUTCOME MEASURES*Short-term effects*

- Percent of SC pediatric oncology centers using the statewide SCP template
- Percent of eligible survivors who receive an SCP at transition to survivorship
- Completeness score of SCPs against the statewide standard (sample audit)

DATA SOURCES

Center self-report; center tracking logs; sample chart audit; annual center reporting

DISTAL OUTCOME MEASURES*Population-level impact*

- Survivor and family understanding of late-effects risks and follow-up needs
- Survivor adherence to recommended follow-up surveillance

DATA SOURCES

Patient and caregiver surveys; follow-up visit records; clinical partner reports

OBJECTIVE

Determine the feasibility of implementing a statewide process for vocational assessment, guidance, and transition support for childhood cancer survivors.

STRATEGY

Develop and pilot a vocational-support pathway for adult survivors of childhood cancer.

OWNER(S)

Pediatric Workgroup (Drs. Hoppmann/Dumitriu);
Community Partner: Able SC

IMPLEMENTATION MEASURES*Did we do the work?*

- Partnership formalized with community partners (Y/N)
- Vocational-assessment framework drafted (Y/N)
- Feasibility report completed (Y/N)
- Pilot launched at a minimum of one SC pediatric oncology center (Y/N)

DATA SOURCES

Signed MOUs; framework draft; feasibility report; pilot launch records

PROXIMAL OUTCOME MEASURES*Short-term effects*

- Number of survivors completing vocational assessment in the pilot
- Number of pediatric oncology centers engaging with the pathway
- Number of partner organizations actively participating

DATA SOURCES

Pilot enrollment records; partner activity reports; center-level reports

DISTAL OUTCOME MEASURES*Population-level impact*

- Survivor-reported vocational and educational outcomes (employed, in school, in training)
- Survivor-reported confidence in transition to employment or postsecondary education
- Equity in vocational-support access across SC regions

DATA SOURCES

Survivor follow-up surveys; longitudinal cohort tracking

Contact Information for Pediatric Cancer Workgroup Chairs

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