2018 ACCC Institute for the Future of Oncology

*Reflect, Renew, Reignite: Creating a Resilient Oncology Team in Your Community*

**EXECUTIVE SUMMARY**
Each year, the ACCC Institute for the Future of Oncology brings together key leaders in the oncology community in a one-day forum discussion focused on significant issues in cancer care delivery they are facing today, and those they are likely to face in the future. Participants in the invitation-only forum brainstorm what is needed to address these challenges and advance quality patient care. The sixth annual Institute held in Washington, D.C., on June 27, 2018, convened more than 30 experts in cancer care, wellness, and resiliency to share insights on what is fueling burnout among members of the cancer care team and what needs to happen on both a micro and macro level to support and improve team well-being.

Health System Wide Problem, But Inherent in Oncology

Clinician burnout has been identified as a national crisis. As a member of the organization network of the National Academy of Medicine’s National Action Collaborative on Clinician Well-Being and Resilience, ACCC has expressed its commitment to addressing this issue not only for physicians but for the entire multidisciplinary team involved in the delivery of cancer care today. ACCC recognizes that the field of oncology is inherently stressful—all cancer program staff from the front desk to the clinic to those working behind the scenes are interacting with patients and families facing devastating diagnoses, complex care regimens, difficult conversations, and varying levels of loss. Increased financial and productivity pressures, overly burdensome administrative and reporting requirements, and frustrations with inefficient health information technology over the past decade have exacerbated the level of stress for cancer care professionals. Keenly aware of this increasing stress and frustration, ACCC President 2018-2019, Thomas A. Gallo, MS, MDA, chose as the theme of his tenure, Reflect, Renew, Reignite: Creating a Resilient Oncology Team in Your Community.

With the understanding that many recommendations for addressing burnout and improving resiliency focused on physicians and were not specific to oncology, the 2018 ACCC Institute forum participants were charged with identifying strategies, tools, and resources that currently exist or that could be created that are specifically geared toward the multidisciplinary cancer care team, including front desk staff, pharmacists, financial advocates, navigators, social workers, advanced practice providers, medical assistants, nutritionists, oncology nurses, physicians, and others.

During the half-day meeting, participants met in breakout groups to discuss and report back on two overarching themes for building wellness and resiliency: 1) factors related to organizational structure and culture and 2) factors related to practice efficiency and administrative burden. Institute participants also engaged in an exercise to identify current positives and negatives in the cancer care team’s daily work experience and brainstormed possible solutions to reduce burnout and foster resiliency and well-being for the entire team.

Improving Organizational Structure & Culture to Support Wellness and Resiliency

For today’s cancer programs and practices, a focus on workforce wellness requires a culture shift and solutions geared for the individual, multidisciplinary cancer care team, and the organization. To be successful, well-being must be a priority for both the organization and the individual. Institute attendees offered these suggestions to help cancer programs and practices build a structure and culture to support workforce wellness and resiliency:
• Prioritize a healthy workforce by hiring a Chief Experience Officer, with a budget equal to those for safety and quality; ensure that leaders see resiliency as a strategic initiative and fund it accordingly.
• Establish the business case and calculate the return-on-investment of resources to support well-being, demonstrating the value of investing in wellness initiatives.
• Engage leaders by creating a platform for addressing burnout and ensure that leaders share and model aspects of self-care with staff below them and above them.
• Normalize wellness by setting the expectation and giving “permission” for self-care; avoid implying that burnout reflects weakness.
• Recognize that safety is essential to a healthy workforce. Create a “Just Culture,” where staff can trust that there will be follow-up on issues that are raised, and an environment where people feel safe.
• Support individual resiliency and well-being by offering interventions such as mindfulness training and by modeling behaviors that foster well-being; develop peer support resources.
• Develop a group process to deal with the emotional impact of cancer care (e.g., 15 minutes of mindfulness time, like Schwartz Rounds but with mindfulness practice).
• Include all members of the cancer care team when considering burnout interventions, including those at the bottom of the power gradient.

Improving Practice Efficiency & Reducing Administrative Burdens to Support Wellness and Resiliency

Increased administrative and reporting requirements coupled with inefficient health information technology have increased the level of stress for all members of the multidisciplinary cancer care team. Institute attendees offered these suggestions to help cancer programs and practices reduce inefficiency and lessen administrative burdens:

• Ask team members about inefficiencies in the workplace and design solutions with them, rather than developing a strategy and presenting it to them.
• Reach out to patients and families (e.g., from patient and family advisory councils) and ask about practice inefficiencies.
• Reduce redundancy wherever possible.
• Understand that administrative burdens, for example requiring that patients register multiple times (e.g., for medical oncology, for radiation oncology, for imaging) can have a negative effect on patients and staff.
• Ask team members if their work is currently structured so that they are not only effective but also able to experience some joy at work. Where possible, redistribute tasks so that each team member is working at top of license.
• Track metrics related to documentation burdens (e.g., total EHR time, EHR time at night/on weekends) and offer coaching to clinicians with high numbers.
• Ask the team: “Are the measures we collect and report on meaningful?” Engage in a thoughtful reassessment of what is being measured and determine whether it is truly important.
• Use scribes and EHR coaches to reduce EHR burden; leverage voice recognition technology.
• Acknowledge that there are some regulatory and administrative burdens that individuals and organization cannot change; focus on the places where individuals and organizations can have an impact.
• Identify regulatory burdens efforts (e.g., excessive reporting, redundancy, lack of accuracy, reduced face-to-face time between providers and patients) and address these with policymakers through advocacy efforts.
Engage the legal department in a review of regulations to ensure that they have not been interpreted too conservatively (e.g., requirement that certain electronic medical record fields must be filled out by a physician).

Participants also offered tips for implementation in resource-limited settings. They suggested that leaders in these settings focus on changes that are impactful but not resource-intensive. Examples include reducing ineffective or unnecessary meetings, using appreciative inquiry, redistributing work tasks among the care team, and modeling self-care behaviors.

**Next Steps**

Institute participants suggested several concrete action steps that ACCC can take to advance the well-being and resiliency of the cancer care team. These included:

- Offer sessions on these topics at the 2018 ACCC National Oncology Conference and 2019 ACCC Annual Meeting and Cancer Center Business Summit.
- Develop a web-based repository of oncology-specific resources and tools for fostering the well-being of the cancer care team.
- Research and articulate the business case for prioritizing workforce well-being. Consider metrics such as costs associated with employee turnover, patient satisfaction/experience scores, adverse effects of being short-staffed, and absenteeism rates. Share examples from other industries of organizations that have made wellness a priority.
- Develop resources to support ACCC members in starting discussions with leaders and making the case for the imperative to focus on workforce well-being.
- Create a toolkit for ACCC members that includes:
  - Tools to build the business case for resiliency programs and resources, recognizing that these tools must be customizable because each organization is culturally unique
  - Vignettes of real-world examples of successful well-being initiatives
  - Practical examples of self-care techniques and approaches that are effective
  - Standard job descriptions for the role of Chief Wellness Officer or Chief Experience Office (to include role overview, responsibilities, priorities, areas of focus)

ACCC is responding to these recommendations by taking immediate action to help members improve the well-being of their multidisciplinary cancer care teams. Stay tuned for additional resources and tools which will be added to the Oncology Team Well-Being section of the ACCC website at accc-cancer.org/TeamWellBeing.