

## ACCC Welcomes its Newest Members

### The Cancer Center of Hawaii

Honolulu, Hawaii

Delegate Rep: Carolyn Voulgaridis RN, JD, MBA

Website: [tccoh.com](http://tccoh.com)

### Ferguson Cancer Center at FHN Memorial Hospital

Freeport, Ill.

Delegate Rep: Risa Tyler BSN, RN

Website:  
[fhn.org/specialtyCareFeatCancer.asp](http://fhn.org/specialtyCareFeatCancer.asp)

## ACCC Hosts Pre-Conference Events

On March 8, the day before the ACCC 49th Annual Meeting and Cancer Center Business Summit (#AMCCBS), ACCC held two events: the Best of Community Cancer Care Workshop and the Delivery of Psychosocial Care in Oncology Summit. More than 100 people attended the Best of Community Cancer Care Workshop in-person and online to learn from invited subject matter experts, with 33 participants attending the invite-only summit dedicated to addressing mental health needs in oncology.

### Featured Clinical Oncology/ Hematology Updates

Natalie Rizk, MD, breast surgical oncology

specialist at Ascension Michigan Van Elslander Cancer Center -Ascension St. John Providence and assistant professor at Wayne State University School of Medicine, opened the Best of Community Cancer Care Workshop pre-conference with detailed updates on the multidisciplinary management of breast cancer. In highlighting the evolution of breast cancer surgery from a radical mastectomy (whether halsted or modified) to breast conservation lumpectomy, the treatment of breast cancer has evolved to consider patients' preferences and dedicated improvement to their quality of life. Yet further advancements must be made to address health disparities, use of

locoregional management after neoadjuvant chemotherapy, and de-escalation of treatment across disciplines when treating patients with breast cancer.

In quoting June Goodfield, Dr. Rizk closed her session by stating: "Cancer begins and ends with people...It is sometimes possible to forget this one basic fact. Doctors treat disease, but they also treat people, and this precondition of their professional existence sometimes pulls them in two directions at once."

Pedro Barata, MD, MS, director of the Genitourinary Medical Oncology Research Program at University Hospitals Seidman Cancer Center and associate professor of medicine at Case Western Reserve University, then took the stage to discuss emerging targeted therapies for the treatment of prostate cancer. In doing so, Dr. Barata emphasized the need to understand patient's cancer through genetics. "Germline information complements somatic information and vice versa," he said. Further, Dr. Barata believes that genetic test results—whether somatic or germline—are expected to be increasingly used by providers to inform treatment decisions and that molecular profiling holds great potential as a biomarker for response assessment.

Lastly, Farrukh Awan, MD, professor of internal medicine and director of the Lymphoid Malignancies Program at UT Southwestern Medical Center, Harold C.



Krista Nelson, MSW, LCSW, OSW-C, FAOSW, Past ACCC President and senior oncology social worker and program manager, Cancer Support Services & Compassion Providence Health & Services.

Simmons Comprehensive Cancer Center, spoke on the current landscape for treating patients with hematologic malignancies and patient selection for novel cellular therapies. From targeted therapies to immunotherapies, Dr. Awan shared how the evolution of anti-cancer treatments have positively impacted patient outcomes (survival vs. progression) and improved patients' quality of life during and after treatment, with more advancements to come in this space.

### **Supporting the Well-Being of Patients and Staff**

The Best of Community Cancer Care Workshop also featured two sessions dedicated to the operational side of oncology care. Much anticipated, the ACCC Financial Advocacy Network released its Financial Advocacy Services Guidelines. Speakers Lori Schneider, oncology operations manager at Green Bay Oncology, and Meredith Doherty, PhD, LCSW, assistant professor at the University of Pennsylvania - School of Social Policy & Practice, discussed the current landscape of the field and shared strategies to best implement these guidelines in any cancer program or practice. Both speakers emphasized the importance of clinical and operational staff collaboration when building comprehensive financial advocacy programs and addressing financial hardship for patients with cancer. "Please don't push yourselves on this. We know building programs takes time, and we want to help you build a good program," Schneider said. Further, the network will be spending much of its 2023 agenda to identify and disseminate strategies to help cancer programs and practices—of any resource, size, or patient volume—put these guidelines into practice.

Kamakshi Rao, PharmD, BCOP, interim director of pharmacy, Clinical and Academic Enterprises at the University of North Carolina Hospital, then spoke on oncology pharmacy workforce issues that have been severely impacted by the



#AMCCBS participants gather at a networking event.

COVID-19 pandemic. With a rapid increase in rate and prevalence of burnout among healthcare providers, including pharmacists, Dr. Rao suggested that cancer programs and practices provide support to their pharmacy staff in the form of professional development, additional training, and protected time to engage in activities outside core business. "We have work to do both from an institutional and organizational level to engage and retain the workforce," Dr. Rao said. And by appropriately supporting, advocating, and recognizing their oncology pharmacy workforce, as Dr. Rao shared, cancer program and practice leaders will be one step closer to retaining a happier and more satisfied workforce.

### **Delivery of Psychosocial Care in Oncology Summit**

Patients with cancer and their circles of support are not the only ones to benefit from psychosocial care. The burden of COVID-19—coupled with the emotional distress associated with caring for patients with cancer and helping patients and families make difficult treatment choices—has brought to light the urgent need to provide comprehensive psychosocial care to the healthcare workforce as well.

Therefore, ACCC hosted its invite-only Delivery of Psychosocial Care in Oncology Summit to convene experts in the field to discuss the current state of mental health in oncology; build a collaborative dialogue among all interested stakeholders to identify action plans that address ongoing mental health issues for patients, caregivers, and the cancer care team; review and identify effective screening tools, training, resources, and policies to address psychological distress among individuals; and identify barriers to providing and accessing timely and appropriate care for patients and caregivers experiencing psychological distress. Next steps identified by the group in this space includes incorporating rural health systems into the process to better fill gaps and increase access, education on what collaborative care is, better support for those implementing collaborative care in practice, and identifying a group of early adopters—needed to convince others to develop collaborative care models with a focus on psychosocial care, too. Stay tuned for more information from ACCCBuzz, the CANCER BUZZ podcast, and the association's official journal, *Oncology Issues*.

# The ACCC 49th Annual Meeting and Cancer Center Business Summit

**O**n Thursday, March 9, about 500 participants convened in Washington, D.C., at the ACCC 49th Annual Meeting & Cancer Business Summit for a day and a half of general sessions, deep dive workshops, and networking opportunities. Below are highlights from #AMCCBS.

## Stories From CRISPR

Kevin Davies, PhD, referred to CRISPR as a “cutting-edge technology with miraculous benefits,” adding that “this is not just science fiction anymore. There are patients walking around today that have been cured by this technology. This is why we fund basic research.” Dr. Davies described the current healthcare landscape as being characterized by an “arms race for drugs,” thus technologies like CRISPR will be key in the future of delivering equitable, high-quality cancer care to patients everywhere.

## Cancer Moonshot Update

“I want to start where the president and first lady usually start—hope. We don’t mean hope in the abstract. We mean hope grounded in reality,” said Danielle Carnival, PhD, coordinator for the White House Cancer Moonshot, as she opened her session. “Taking on cancer is one the life missions for the president and first lady because of the impact it has had on them, but it is a presidential priority because of the impact it has on every one of us—cutting short too many Americans’ lives. That is why the president and first lady relaunched the Cancer Moonshot program.”

According to Dr. Carnival, access and health equity are major components of the relaunched Cancer Moonshot Initiative. “The tools we have and those we develop along the way must reach all Americans,” she said. “To address inequities, we must ensure that every community in America—rural, urban, tribal, and everywhere else—has access to cutting-edge cancer diagnostics, therapeutics, and clinical trials.”

Dr. Carnival described these goals as a “shared agenda” that every member of the healthcare community must focus on achieving. “The president called on everyone to do their part: the scientific community to bring its boldest thinking to the front, and the medical community to improve their outreach

and support for underserved people around the country,” she said, adding that “the private sector must step up and develop new treatments.” Further, Dr. Carnival highlighted President Biden’s desire for patients with cancer to share their stories. “The president respectfully called on people living with



Meeting participants enjoyed the opportunity to learn from and ask questions of expert presenters.



Keynote speaker Kevin Davies, PhD, executive editor of *The CRISPR Journal* and author of “Editing Humanity: The CRISPR Revolution and the New Era of Genome Editing.”



cancer, their caregivers, family, and those who have lost someone to share their perspectives and experiences and to keep pushing for progress,” she said. Patients with cancer and their loved ones can share their experiences on the Cancer Moonshot’s website.

Dr. Carnival then discussed the goals of the first ever Cancer Cabinet:

- To set up priority actions to close the screening gap
- To understand environmental and toxic exposures
- To decrease the impact of preventable cancers
- To bring cutting-edge research through the pipeline to patients and their communities
- To better support patients and caregivers.

Dr. Carnival went on to discuss the work that has been done within the Department of Veteran Affairs: “1.5 million veterans have already received screening for toxic exposures as of January, and in November, the VA [Veteran Affairs] announced it would expedite veteran’s claims for cancers associated with toxic exposure,” she said. The commitment of the U.S Food and Drug Administration (FDA) and National Cancer Institute (NCI) were also highlighted. “The FDA is moving forward on making sure that we have regulations in place that make cigarettes and tobacco products less attractive and addictive,” Dr. Carnival said. “The NCI launched new efforts to connect clinical trials more extensively to underrepresented groups.”

Dr. Carnival wanted attendees to leave with two primary messages. “The first is we need to bring the cancer care system to people,” she said. “And the second is, so much is being asked of a family with a cancer diagnosis—cancer brings a financial, emotional, and medical burden. We need to find better ways to support them.” Dr. Carnival concluded by discussing the primary points from President Biden’s 2023 State of the Union address, regarding the Cancer Moonshot. These points include:

Bringing America’s Cancer Moonshot mission into the 21st century—an initiative centered around the reauthorization of the National Cancer Act.



Meeting attendees packed the deep dive sessions and participated in lively and timely discussions.

Providing patient navigation to support every American facing cancer.

Tackling smoking, the single biggest driver of cancer-related deaths in the U.S.

“The president often says that his dad had [an] expression, ‘Don’t tell me what you value. Show me your budget, and I will tell you what you value.’ I am glad to say the budget [which was published on Thursday, March 9] will show the value the President places on the Cancer Moonshot,” Dr. Carnival said. “America will lead by the power of its example—this is the framework in which [the] Cancer Moonshot sits.”

### *Diving Deep into Oncology Care Challenges*

ACCC hosted eight deep dive workshops throughout the day, allowing invited expert facilitators and attendees to partake in

interactive conversations to identify challenges its members are experiencing today and help generate practical solutions to mitigate or resolve those challenges.

Areas of focus included:

- New care delivery models
- Business intelligence and artificial intelligence technology solutions
- Precision medicine
- Payer-driven challenges
- Research and clinical trials
- Staffing models and workforce strategies
- Patient engagement.

Discussion from these workshops will be captured and used to develop a comprehensive report for ACCC-members post-conference, scheduled for publication in the Volume 38, Number 4 *Oncology Issues*.

## The 2023-2024 ACCC President's Theme

Friday, March 10, #AMCCBS began with the ACCC House of Delegates Meeting and the announcement of Olalekan Ajayi, PharmD, MBA, chief operating officer at Highlands Oncology Group, PA, as the 2023-2024 ACCC President. "It is a privilege and an honor to serve as ACCC President," Dr. Ajayi said. "My President's Theme will be *(Re)Building the Oncology Workforce to Deliver Next Generation Cancer Care*." (Read more on page 4). As his first official duty as ACCC President, Dr. Ajayi introduced opening keynote, Andre Harvin, PharmD, MS, MBA, executive director of pharmacy, Oncology Services, at Cone Health Cancer Center.

## Robotics in the Oncology Pharmacy

Andre Harvin, Pharm D, MS, MBA, previewed his keynote for ACCCBuzz—sharing the major highlights of his address. And during his live session, Dr. Harvin discussed how incorporating robotics into the oncology pharmacy facilitated efficiency at Cone Health Cancer Center. "By leveraging robotics and improving collaboration with nursing, we reduced average patient waiting time by 30 percent," he said. "We also used robotics to compound medication ahead of time—this strategy saved 143 hours in [patient] wait time each month."

According to Dr. Harvin, growing healthcare costs pose a significant challenge to cancer programs and practices around the country. Further, Dr. Harvin



2023-2024 ACCC President Olalekan Ajayi, PharmD, MBA



Attendees at the 2023 ACCC House of Delegates Meeting.



Friday's keynote speaker Andre Harvin, PharmD, MS, MBA.

believes that healthcare has been affected by the inflation rates that have and are still sweeping the nation. "High contract labor expenses, in addition to high salaries, are required to keep qualified employees," he said. "Healthcare has not been immune [to inflation rates, as] a lot of people exited the healthcare field." By leveraging robotics at Cone Health, Dr. Harvin and his team were able to devote their time to more pressing issues. "Now, I can have that pharmacist focusing on what they do that is unique, and that is being a drug expert who can answer questions for providers and patients," he said.

## The NYC Nursing Strike

"There was moral distress. The nurses that had to walk away from that baby at 6:00 AM, the nurses that knew that patients were going to come in for chemotherapy that day and they were not going to be there to see them—there was so much distress," said Una Hopkins, DNP, RN, FNP-BC, director of research at Montefiore Einstein Center Cancer Care, as she discussed the nursing strike that occurred in New York City earlier this year. "It is upsetting because I am nurse."

Mark Liu, MHA, senior director of oncology strategy, transformation, and analytics, Oncology Service Line at Mount



Sinai Health System & Tisch Cancer Institute, echoed Hopkins's sentiment on the issue—where more than 7,000 nurses in NYC walked off the job and went on a three-day strike in early January. “We aim for perfection, but, in moments of crisis, there is a lot to handle,” he said. According to Liu and Hopkins, burnout, stress, and a reduced workforce contributed to the NYC nursing strike. “It wasn’t about salary. It was about fighting for safer staffing ratios and not wanting to take care of patients in hallways,” Hopkins explained.

Liu and Hopkins also asserted that the COVID-19 pandemic created a lasting strain among nurses that may have contributed to the strike. “COVID[-19] really did a lot to the nursing workforce,” Hopkins said. And Liu adding: “During COVID[-19], there were long, incredibly intense days. We were home for maybe four hours on some days. The uncertainty of not knowing when it would end—it was very tough.”

To supplement the gap in care created by the strike, Hopkins’ team sought the services of travel nurses. “We knew we were going to add travel nurses, but they are expensive,” she said. “I onboarded 485 nurses in three days.” Her team also employed specialty nurses to assist in care delivery at her cancer program.


The impact of the NYC nursing strike also affected different members of the multidisciplinary cancer care team. “Our respiratory therapists, our nurses’ aides, who were not in the same contract, our unit secretaries, they were all impacted,” said Hopkins. “The impact was real for everyone. It wasn’t just nurses.”

Moving forward, Liu and Hopkins believe it is incumbent for health systems and/or hospitals’ leadership to ensure workplace satisfaction—thereby reducing the risk of a strike among other groups within healthcare.

### **Creating a Real Impact**

“This conference [#AMCCBS] will have an impact on improving cancer care delivery on Monday morning,” said ACCC Immediate-Past President David R. Penberthy, MD, MBA, medical director, Radiation Oncology at Penn State Health Milton S. Hershey Medical Center, at the conclusion of #AMCCBS. The inclusion of small-group deep dives and

expert-driven general sessions gave attendees unique insights and strategies to take home to improve operations at their program or practice. Looking forward, ACCC will continue to provide resources and tools based on the conversations at #AMCCBS

that cancer programs and practices everywhere can use to facilitate the delivery of comprehensive, high-quality, and equitable cancer care to patients. 



Ben Jones, vice president, Government Relations & Public Policy, The US Oncology Network, McKesson (far right) interviewed Mark Liu, MHA, senior director of Oncology Strategy, Transformation & Analytics, Oncology Service Line, Mount Sinai Health System & Tisch Cancer Institute, and Una Hopkins, RN, FNP-BC, DNP, director of Research, Montefiore Einstein Center Cancer Care, about the recent nursing strike in New York City.



#AMCCBS attendees returned to their cancer programs and practices with insight into the emergent issues facing the oncology community.