

action

ACCC 50th Annual Meeting & Cancer Center Business Summit

Galvanized by a productive February 28 Capitol Hill Day, ACCC members convened in Washington D.C. on February 29 for the second day of #AMCCBS. Through a compelling keynote address, general sessions, deep dive workshops, and many networking opportunities, attendees explored cutting-edge solutions to persistent challenges in the oncology landscape.

The day began with an address from members of ACCC leadership, as they shared their excitement for the Association's rebranding. "Words matter, and our new name [the Association of Cancer Care Centers] truly reflects who we are and where we are going," said ACCC president-elect, Nadine J. Barrett, PhD, MA, MS, senior associate dean for Community Engagement and Equity in Research at Wake Forest University School of Medicine and Atrium Health and associate director, Community Outreach and Engagement at Wake Forest Comprehensive Cancer Center and Levine Cancer Institute. "It is exciting how much the organization has grown, and I am looking forward to the next 50 years."

Building on Dr. Barrett's insight, ACCC president Olalekan Ajayi, PharmD, MBA, chief operating officer at Highlands Oncology

Group, PA, said, "Over the coming weeks you will witness updates to the ACCC branding and communications as we implement this change seamlessly. As president and president elect of ACCC, Nadine and I would like to thank you for your support, and we look forward to the future."

As the leading education and advocacy organization for the cancer care community in the United States, ACCC's history in the past half-century has been built on pioneering innovations. These accomplishments were highlighted in an evocative video presentation that drew a rousing applause from attendees.

Empathy & The Oncology Workforce

"It is an incredible honor to be here with you today," Mila Felder, MD, FACEP, enterprise vice president, Well-Being for All Teammates at Advocate Health, said to begin her keynote address. "I was moved as I listened to the incredible video documenting how you all in the community, small or big, work to deliver comprehensive cancer care...in the next 40 minutes, I will give you a little path on improving your organizational wellbeing."

Through a series of carefully curated pieces of

art created by clinicians, Dr. Felder illustrated to the audience that clinicians are much more than their job description. Even in the current health care landscape—inundated by workforce shortages, burnout, and workplace violence.

"Workplace violence is not normal, even though members of the multidisciplinary cancer care team try to downplay it," she said. "Let's create a health care culture that embraces our humanity."

According to Dr. Felder, the idea of "embracing our humanity" begins with health care professionals caring for each other as they care for their patients. "Ask yourself, how can I support me and my team, so we are not only here to save the world, but enjoy the day?"

Further, Dr. Felder advises that health care workers remember what "grounds them to where they come from." For Dr. Felder, it is her journey as an immigrant who had to leave her family to pursue a career in medicine. It is the pain of losing her 17-year-old daughter following a long-drawn-out illness. Dr. Felder believes these experiences connect her to both sides of the care continuum—understanding the trauma of the patient, and the resiliency of the physician.

"I have held the hand of the patient who died when I was a medical student, and I have held the hand of the parents who lost their child like



Olalekan Ajayi, PharmD, MBA, chief operating officer at Highlands Oncology Group, PA.



Mila Felder, MD, FACEP, enterprise vice president, Well-Being for All Teammates at Advocate Health.



Research and Clinical Trials #AMCCBSM deep dive.



Attendees asked questions and participated in lively interactive discussions in the #AMCCBS deep dives.



EHR Integration: A Key Component to Precision Medicine #AMCCBS deep dive.



Left to right: ACCC president-elect Una Hopkins, RN, FNP-BC, DNP, FACCC; 2020–2021 ACCC president Randall A. Oyer, MD; 2023–2024 ACCC president Olalekan Ajayi, PharmD, MBA, FACCC; and 2021–2022 ACCC president Krista Nelson, MSW, LCSW, OSW-C, FAOSW.

I did,” she said. Her story is what makes her human, and she argues organizational well-being can be improved by cancer programs and practices capturing that essence in their daily activities. “I hope that our time together has inspired you to bring back that community and sense of belonging at your organization,” Dr. Felder concluded.

Diving Deep into Cancer Care Challenges

Back by popular demand, ACCC hosted 8 deep dive workshops throughout the day, allowing invited expert facilitators and attendees to partake in interactive conversations. These workshops aimed to identify challenges ACCC members are experiencing and brainstorm practical solutions to mitigate or resolve them. Areas of focus included:

- Collaborative Care Delivery Models
- Research and Clinical Trials
- Payer, Manufacturer, and Supply Challenges
- EHR Integration: A Key Component to Precision Medicine
- Artificial and Business Intelligence Technology
- Community Engagement in Cancer Education and Prevention
- Oncology Workforce Challenges

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 39, Number 3 *Oncology Issues*.

The 2024-2025 ACCC President’s Theme

The final day of #AMCCBS on March 1, began with the ACCC House of Delegates meeting and the announcement of Nadine J. Barrett, PhD, MA, MS, senior associate dean for Community Engagement and Equity in Research at Wake Forest University School of Medicine and Atrium Health and associate director, Community Outreach and Engagement at Wake Forest Comprehensive Cancer Center and Levine Cancer Institute, as the 2024–2025 ACCC president.

“As the incoming ACCC president, I am excited to announce my theme: *Reimagining Community Engagement and Equity in Cancer*,” Dr. Barrett said. “With this theme, I am encouraging all of us as ACCC to ensure that the work we are doing engages our community’s and puts our patients at the center as we continue to move forward in advancing equity in cancer.”

Award Presentations

Following the ACCC House of Delegates Meeting, attendees heard presentations from the 2024 ACCC Award winners. The Clinical Research Award, which recognizes individuals whose research has significantly and positively impacted the oncology patient, family, and/or community was presented to Robert Winn, MD, director, and Lipman chair in Oncology, VCU Massey Comprehensive Cancer Center.

“Dr. Winn walks the walk, all day, every day, with his commitment to advancing equity. He ensures that we look at our patients and our communities as experts in their own right,” Dr. Barrett said. “I am truly humbled to introduce

and welcome up to the stage, my friend, my colleague, and my champion, our champion for the cause, Dr. Robert Winn.”

“I want to thank ACCC for all the work that you do,” Dr. Winn said as he accepted the award. Then he asked the audience an important question: Why the need for change and why now? “It is easy to figure out why folks don’t trust us. They see all these organizations working to eradicate cancer, and they don’t feel included in the process,” he said. “If you want to change a system, don’t just do something different, do a different thing.”

It is difficult to care for a community that experiences medical mistrust. Dr. Winn believes trust is built by creating informed, collaborative partnerships, in which the patient is respected as an equal and expert. “ACCC allows us to do a different thing,” Dr. Winn said. “Our organizations need to have a different type of talk, not about what will be taken, but what will be brought to the table.”

Regarding the issue of trust, Dr. Winn argues that the cancer care community has been asking the wrong question. “The question should not be how do we get trust, but how do we as an institution become more trustworthy,” he said. Dr. Winn believes trust is especially important in recruiting clinical trial participants. “We have to rethink how we are conducting clinical trials,” he said. “We must recognize blind spots, reflect, and figure out how we can do better.”

Dr. Winn reminded a captivated audience that while health care workers discuss medical illiteracy among their patients, they too must be aware of their own community illiteracy that needs to be addressed. “What if we do a



Association of American Cancer Institutes (AACI) president Robert Winn, MD, and ACCC president Nadine J. Barrett, PhD, MA, MS.



Left to right: ACCC president Nadine J. Barrett; ACCC immediate past president Olalekan Ajayi; Dr. Christa M. Braun-Inglis; ACCC executive director Christian Downs, JD, MHA; and ACCC president-elect Una Hopkins, RN, FNP-BC, DNP, FACCC.



Katherine A. Meese, PhD, assistant professor, Department of Health Services Administration at the University of Alabama at Birmingham.

different thing by training the next generation [oncology workforce] to not only know about the science of clinical trials, but about the communities they take place in,” he said. “Our organizations need to realize that while we exist, we exist as a group. If we start having a different conversation within our communities, what will be possible?”

In concluding his address, Dr. Winn shared his optimism for the future of community engagement across the cancer care continuum and left attendees with a call to action. “Let us remember that through grace and humility, there is power. We are much more powerful together than we are separate.”

The David King Community Clinical Scientist Award, which recognizes individuals who have demonstrated leadership in the development, participation, and evaluation of clinical studies and/or active in the development of new screening, risk assessment, treatment, or supportive care programs for patient with cancer was presented to Christa M. Braun-Inglis, DNP, APRN, FNP-BC, AOCNP, nurse practitioner and assistant researcher at the University of Hawaii Cancer Center.

“Thank you to everybody at ACCC, who thought enough of me to receive this award,” Dr. Braun-Inglis said upon accepting the award. Like Dr. Winn, Dr. Braun-Inglis highlighted the importance of engaging the community in clinical research and trials. Further, she finds that advanced practice providers add value to clinical research teams in all aspects of clinical trials. Thus, cancer programs and practices must reassess the lens through which they view clinical research staff.

Improving Leadership

The second keynote address at #AMCCBS was delivered by Katherine A. Meese, PhD, assistant professor, Department of Health Services Administration at the University of Alabama at Birmingham. Dr. Meese shared insights on how leaders can strengthen their workforce by focusing on “the human margin.” According to Dr. Meese, leaders must equip their employees with the tools to navigate independently, for as she puts it, “autonomy without skills is cruelty.” Further, Dr. Meese argues that to maximize productivity, employees must understand the end goal, priorities, and values of their organization. “When they can see the map, they can get to the destination,” she said.


Dr. Meese believes the benefit of clear and open communication cannot be overstated. “According to a Gallup poll, employees are 73% less likely to feel burned out at work when they strongly agree that the leadership of their organization communicates effectively with the rest of the organization,” she said. “Employees are also 2.8 times more likely to be engaged when they speak with their manager regularly about their goals and progress.”

To improve communication at their organizations, Dr. Meese shared these conversations starters leaders can adopt:

- I work for you, what do you want me to work on?
- What worries you the most?
- What do you find most rewarding about your work?
- What challenges are you currently facing in your work?

With the oncology workforce experiencing an unprecedented level of burnout, having these conversations must become a standard procedure at cancer programs and practices. “Seventy-five percent of healthcare executives were burned out in 2022 compared to 60% in 2018,” Dr. Meese said. “The suicide rate for female physicians is 1.46 times higher and approximately 4,800 years’ worth of education and training is lost to physician suicide each year.”

Dr. Meese argues that these figures emphasize the importance of improving the wellbeing of the oncology workforce. “Creating a healthy workforce is not just important for meeting the broader goals of the organization but for improving the health of the community,” she said. “Employees who strongly agree that their employer cares about their overall wellbeing are: 3 times more likely to be engaged, 69% less likely to search for a new job, 71% less likely to report burnout, and 36% more likely to be thriving in their overall lives.”

Thus, as the broader cancer care community pushes to consistently innovate, it must ensure that those who make that possible are healthy in mind and body, to carry on the life-changing work they do. Through meetings like #AMCCBS, ACCC hopes to create an environment where that goal remains a priority. 

ACCC Meets with Swedish Delegation

On Tuesday, March 12, Molly Kiesel, MSN, FNP-BC, ACCC director of clinical content joined Jennifer Bires, LCSW, OSW-C, CST, FACC, executive director of Life with Cancer and Patient Experience at Inova Schar Cancer Institute and newly elected member of the ACCC Board of Trustees, for a meeting with delegates from the Swedish Ministry of Health and Social Affairs. During the meeting—which happened at Inova’s Life with Cancer clinic in Fairfax, Virginia—Kiesel provided an overview of ACCC’s efforts to expand access to cancer care and alleviate the financial burdens on patients, highlighting recent advocacy initiatives on Capitol Hill. While Bires shared Inova’s innovative approach to person-centered cancer care, with an emphasis on the invaluable psychosocial support offered by its Life with Cancer program.

One notable topic of discussion centered around the use of advanced practice providers (APPs) to expand the availability of healthcare providers—a practice integral to the multidisciplinary oncology care team in the United States. The absence of APPs in Sweden sparked interest among the delegates, with 1 expressing their admiration for the role of nurse practitioners based on prior experiences in the U.S. and a desire for a similar expansion in Sweden.

Both the U.S. and Sweden face challenges in cancer care access, albeit with different underlying causes. Sweden grapples with a shortage of oncologists as does the U.S., with the latter also confronting challenges rooted in social drivers of health, including financial barriers to the cost of treatment.¹

A panel consisting of 4 members from the Life with Cancer program, including 2 nurse navigators, Laura Kaminski, BSN, RN, OCN, and Eva Ruiz Olivares, BSN, RN; an oncology behavioral therapist, Anna Harkins-Joseph, LCSW; and an oncology dietitian, Marion Irvin, RD, CSO, LD, CNSC, elaborated on their pivotal roles in



This exchange of ideas and experiences between the United States and Sweden serves as a testament to the importance of global cooperation in advancing cancer care and research, which will ultimately benefit patients worldwide. ACCC expresses its thanks and gratitude to everyone at Inova Schar who made this visit possible.

providing continuous support to patients and their families from diagnosis to survivorship. Robust discussions ensued between the Swedish delegates and Inova staff regarding potential research opportunities focusing on the impact of psychosocial care on patient outcomes.

Stephanie Van Bebber, senior director of the Inova Schar Clinical Trials Office within the Inova Health System, provided an insightful overview of the ongoing research endeavors at the program—highlighting the expanding reach of trials into the Northern Virginia community. Van Bebber mentioned the enrollment rate of patients into cancer clinical trials at the cancer program currently stands at between 1% to 5%, but with a concerted effort to raise this figure over the next 3 years. Swedish delegates expressed a desire for all patients with cancer to be enrolled in trials, emphasizing the importance of maximizing participation rates. This aspiration aligns with several initiatives spearheaded by ACCC, such as the Just ASK training program in partnership with the American Society of Clinical Oncology (ASCO), aimed at enhancing clinical trial

awareness and diversifying participation. Additionally, the ACCC Community Oncology Research Institute (ACORI)—launched under the tenure of past ACCC president, Randall A. Oyer, MD, FACC, executive medical director, Penn Medicine Lancaster General Health, Ann B. Barshinger Cancer Institute—endeavors to broaden access to clinical trials within community settings and reflects ACCC’s commitment to advancing research and improving patient outcomes.


Kathleen Harnden, MD, MBA, director of Breast Medical Oncology at Inova Health System, provided valuable insights into the integration of cancer clinical trials within her program. Notably, she highlighted Inova’s significant contribution as one of the leading enrollers in an ongoing clinical trial investigating a promising new approach to hormone therapy for patients with breast cancer. Dr. Harnden emphasized the importance of clinical trials in advancing treatment options and improving outcomes for patients. Further, she discussed how participation in such

trials not only offers patients access to cutting-edge therapies but also contributes to the advancement of medical knowledge and the development of more effective treatments.

Bires led the Swedish delegation on a tour of Inova Schar Cancer Institute and provided insights into the patient-centric design of Inova Schar Cancer spaces. The delegation then visited the Inova Saville Cancer Screening and Prevention Clinic, where Elizabeth Hatcher, MSN, FNP-BC, outlined the clinic's services and ongoing trials. Finally, the group explored the Radiation department on a tour led by Ann

Miner, senior director of Radiation Oncology at Inova Health System, observing cutting-edge technologies, such as a proton beam, and facilities designed to cater to the needs of pediatric and adolescent patients.

As the meeting concluded, members of the Swedish delegation expressed their admiration for witnessing “words put into actions” during their visit. They conveyed their anticipation of bringing back valuable insights and learnings to their country, inspired by the innovative approaches and collaborative efforts witnessed today. This exchange of ideas and experiences serves as a testament to the importance of global cooperation in advancing cancer care

and research, which will ultimately benefit patients worldwide. 

References

1. Ladan, M. The doctor exodus – with focus on the Scandinavian context. *BMG Global Health*. April 23, 2023. Accessed March 22, 2024. <https://blogs.bmj.com/bmjgh/2023/04/13/the-doctor-exodus-with-focus-on-the-scandinavian-context/>



(Top left) Molly Kiesel shares information about ACCC, its mission, and its membership with delegates from the Swedish Ministry of Health and Social Affairs.

(Top and bottom right) Delegates from the Swedish Ministry of Health and Social Affairs toured Inova Schar Cancer Institute and its Life with Cancer program.

(Bottom left) Elizabeth Hatcher, MSN, FNP-BC, speaking to the Swedish delegation at the Inova Saville Cancer Screening and Prevention Clinic.



Celebrating 50 Years of Service

Recognizing ACCC's 50 years of Innovation and Contributions to the Field of Oncology

As ACCC celebrates 50 years of serving its member programs and practices and looks ahead to the next 50 years of innovation, education, and advocacy, we'd like to share the association's key accomplishments.

We are grateful to the members, providers, and supporters who have contributed to these achievements and are excited about continued collaboration to advance cancer care delivery in the future.

▼ 1974

The Beginning

ACCC (Association of Community Cancer Centers) was founded to challenge the notion that community physicians were uninterested in and incapable of delivering in state-of-the-art cancer care, including participation in research and clinical trials.



▼ 1980s

Multidisciplinary Growth

ACCC's membership diversified to include all oncology professionals. ACCC became the only national organization promoting the collective concerns of the multidisciplinary oncology team.



▼ 1978

Emphasis on Community Care

ACCC actively advocated for increased government funding for the National Cancer Institute's Cancer Centers Program, creating a network of community oncologists to educate Congress. This effort led to the renewal of the National Cancer Act, which was amended to include, for the first time, an emphasis on community care.



▼ 1986

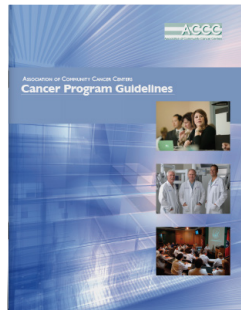
ACCC Creates The Journal of Cancer Program Management

The official journal of the Association is published quarterly until 1989 when goes bi-monthly with a rebrand as *Oncology Issues*. To this day, *Oncology Issues* remains the only journal focused on issues impacting the multidisciplinary cancer care team.

▼ 1988

ACCC Publishes its Standards for Cancer Programs

This publication (later re-named ACCC Cancer Program Guidelines) established a set of standards that would provide members with guidance on how to go about setting up oncology programs.



▼ 2007 to 2010

Resources for Comprehensive Cancer Care

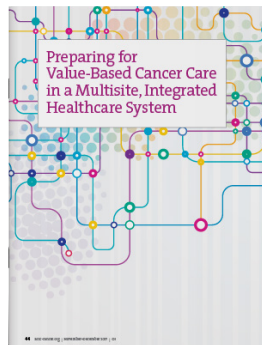
Building on the success of its Cancer Program Guidelines, ACCC developed comprehensive education programs and resources on topics like patient navigation, cancer survivorship, and nutrition in cancer care.



▼ 1990s

Advocating for Access to Therapies

ACCC worked tirelessly to overcome reimbursement difficulties related to off-label uses of FDA-approved drugs and advocated for patients who were denied access to therapies.



▼ 2010

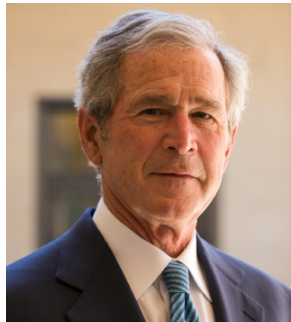
Transition to Value-Based Care

The Patient Protection and Affordable Care Act (ACA) was signed into law by President Obama on March 23, 2010, kicking into high gear the transition to value-based care. ACCC members lead the way as early supporters and adopters of this methodology.

▼ 2003

Medicare Modernization Act

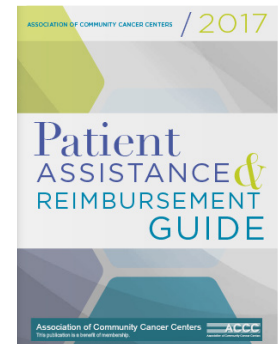
Years of advocating for policy and regulatory changes to improve cancer care delivery paid off when President Bush signed the Medicare Prescription Drug, Improvement, and Modernization Act into law, revamping the program and introducing average sales price (ASP) methodology for drug reimbursement.



▼ 2010

Patient Assistance and Reimbursement Guide

Recognizing that the skyrocketing costs of cancer treatment were affecting patient access to care, ACCC developed its first Patient Assistance and Reimbursement Guide, which quickly became an important resource for cancer care professionals across the country.



▼ 2004

Advocacy for Adequate Drug Reimbursement

ACCC celebrated 30 years of service. With adequate drug reimbursement top of mind for its membership, ACCC recognized that pharmacists were critical to these efforts and created the Oncology Pharmacy Education Network (OPEN), guided by founding member Steven D. D'Amato, BScPharm, BCOP.



▼ 2011

ACCC Innovator Awards Program

ACCC launched its Innovator Awards program to honor Cancer Program Members for ingenuity and pioneering achievements in oncology. These peer-reviewed innovations advanced the goals of improving access, quality, and value in cancer care delivery.

▼ 2012

Financial Advocacy

Building on the success of its annual Patient Assistance and Reimbursement Guide, ACCC launched its Financial Advocacy Network to develop education, tools, and resources to support cancer program staff responsible for helping patients navigate the financial issues surrounding cancer care delivery.



▼ 2014

40 Years of Service

ACCC celebrated 40 years of service, continuing its focus on helping its membership improve the delivery of patient-centered care, developing resources and education in areas like adolescent and young adult cancer care, distress screening, oncofertility, geriatric care, and palliative care.

▼ February 3, 2014

ACCCBuzz Posts Its First Blog

Lessening the financial side effects of cancer was the first topic covered on ACCC's official blog, sharing that ACCC's most recent Trends in Community Cancer Centers survey found that 88% of cancer programs reported seeing more patients needing help with prescription drug expense and co-pays.



▼ 2015

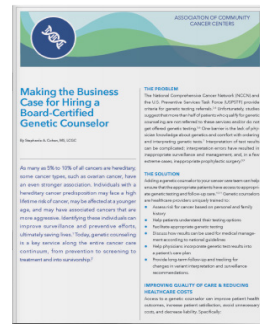
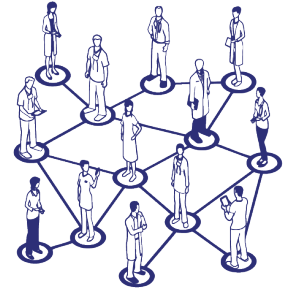
Immuno-Oncology

ACCC launched the Institute for Clinical Immuno-Oncology, the first initiative to guide the multidisciplinary care team's adoption of immuno-oncology in community cancer settings.

▼ 2016

The Oncology Care Model

ACCC launches the OCM Collaborative to help members succeed under the Oncology Care Model—the first specialty care model implemented by the Center for Medicare & Medicaid Services.



▼ 2019

Advocacy for Reimbursement of Comprehensive Cancer Care Services

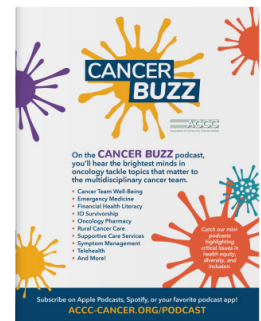
ACCC continues to develop resources to help its members deliver comprehensive cancer care services, including business case studies for hiring supportive care staff, and advocating for reimbursement for these services.

OPEN celebrated 15 years, and ACCC continued its advocacy efforts around key issues like brown- and white-bagging, step therapy, and pharmacy benefit managers.

▼ June 26, 2019

CANCER BUZZ Hosted Its First Guest

The inaugural episode of ACCC's award-winning podcast focused on why and how some cancer programs are working to provide 24-hour access to oncology-specific emergent care services.



▼ 2020

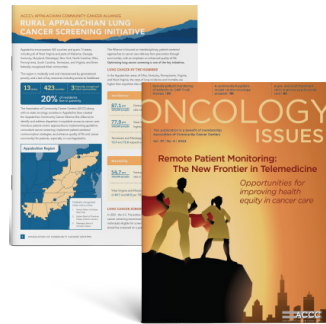
Responding to the Pandemic

ACCC adapted quickly to the COVID-19 pandemic, developing tools and resources to help members redefine how they work while keeping their patients and staff safe during a global pandemic.

▼ 2021

The Launch of ACORI

ACCC established the ACCC Community Oncology Research Institute (ACORI) to strengthen oncology research and engage patients and caregivers. A Research Site Self-Assessment tool, an Increasing Diversity in Clinical Research training module, a Research Review e-newsletter, and a clinical trials glossary are among the many resources developed under this initiative.



▼ 2022

Leveraging Technology to Transform Cancer Care Delivery

ACCC developed tools and resources to help its members use technology and digital tools to help mitigate workforce shortages, reduce health disparities, and improve care efficiency.

After President Biden announces efforts to revamp the Cancer Moonshot Program, ACCC works with the White House on efforts around increasing screening rates post-COVID-19 and improving health equity with projects like ACCC's Rural Appalachian Lung Cancer Screening Initiative.

▼ 2023

A Focus on the Oncology Workforce

ACCC develops resources to help rebuild the oncology workforce after a 3-year global pandemic in areas like building a pipeline of future workers, improving recruitment and retention, and identifying and mentoring diverse leaders.



ACCC is 1 of 3 organizations asked to testify at the President's Cancer Panel in support of the National Cancer Plan released on April 3, 2023.

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