INTRODUCTION

As new approvals and indications for immunotherapy continue to transform treatment approaches in community cancer settings, oncology practitioners have a constant need to equip themselves with knowledge about immunotherapeutic agents. Practitioners need to know how to identify, triage, and manage immune-related adverse events (irAEs) and champion education among their colleagues about the benefits and risks of immunotherapy. The need for education across the clinical spectrum is critical given the vast array of potential side effects with these therapies.

To address the need for education, a multidisciplinary “Visiting Experts” curriculum tailored to the host institution was developed to engage participants on the nuances and complexities of immuno-oncology (IO), with a focus on advancements, operations, and effective practices.

METHODOLOGY

The program was designed by a group of multidisciplinary oncology faculty and structured around a peer-to-peer learning format that enabled cancer program participants and expert faculty to share experiences in real-time and identify effective practices for the complex implementation of IO. While oncology advanced practitioners learn about the clinical trials and science of IO, the experts learn about what it’s like to administer IO in a contrasting-environment.

The curriculum focused on evolving challenges in the field, including patient selection, management of irAEs, support for patients and caregivers, and effective approaches for educating clinical colleagues on the unique intricacies of IO.

DEMOGRAPHICS

A series of 10 concentrated, one-day workshops were convened by multidisciplinary oncology faculty—comprised of an oncologist, administrator, nurse, and pharmacist—experienced in the delivery of cancer immunotherapies.

- **307 learners**, including **202 advanced oncology practitioners** benefited from this comprehensive program.
- **100%** of programs were held at community cancer programs nationwide.

RESULTS

Over 85% of learners reported that direct, peer-to-peer learning was vital.

Over 86% of learners valued the opportunity to connect with experts beyond their own programs who shared “on the ground” IO expertise, but their exposure to IO experts—especially from those involved in early immunotherapy trials—shored up their clinical confidence and validated their experiences.

Over 15,000 patients have potentially been reached by ACCC’s Visiting Expert Program. Each visiting expert program host had an average annual case load of 2,000+ new cancer patients per year.

CONCLUSIONS

Participants know that they face future challenges in the expansion of their IO programs, such as using combination therapies—which will generate greater toxicity. Nonetheless, workshop participation emboldened staff and provided fresh ideas on how best to achieve their IO goals. Such goals include staffing a Symptom Management Unit by nursing professionals with immune-related adverse events expertise who can escalate care when required.

This program demonstrated the success of a bi-directional educational approach and effectiveness of team-based learning. Given the rapid approvals and new indications for IO therapies that are transforming treatment approaches in oncology, nowhere is the education need greater for interprofessional learning than in the oncology multidisciplinary team.