Planning for Survivorship After Checkpoint Inhibitors: A Multidisciplinary Education Initiative

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Abstract #98

INTRODUCTION

Survivorship care plans are a key piece of coordinated, patient-centered care delivery. As with other cancer treatment modalities, patients with metastatic disease who achieve durable benefit with immunotherapy (IO) treatment may experience late physical and psychosocial effects which can negatively impact quality of life.

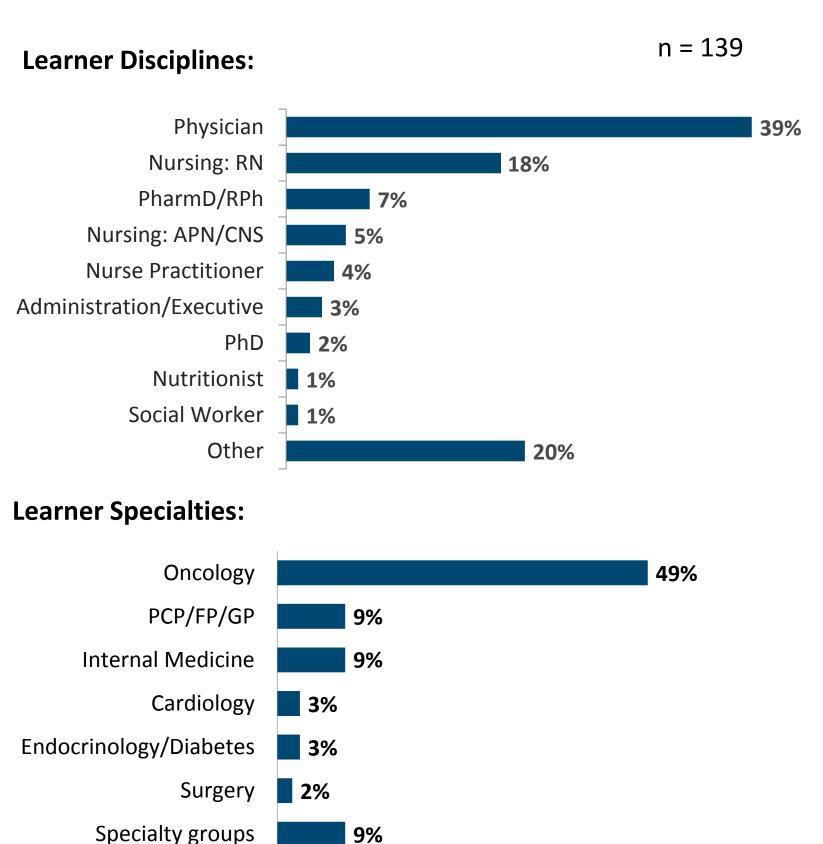
An online education program was created to educate the multidisciplinary cancer care team on the nuances related to survivorship for patients who are treated with checkpoint inhibitors.

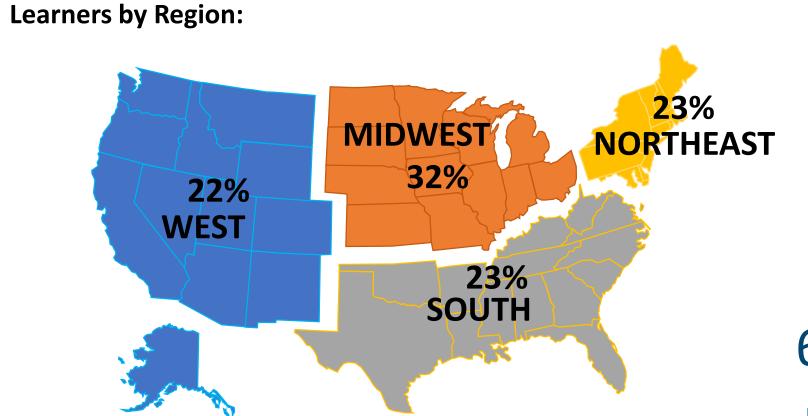
METHODOLOGY

- 1. A medical oncologist, oncology nurse, oncology social worker and melanoma patient developed a curriculum to identify challenges and solutions for survivorship care planning, prepare care teams for nuances related to survivorship for IO patients, and optimize coordination and communication between the care team and the patient.
- 2. In June 2018, a live-online 1-hour webcast that included a panel discussion with presentation slides, participant polling, and live 'ask the panel' questions was produced and then made available on-demand. Attendees interacted with faculty through real-time Q&A. Demographic information was collected for generalizability.
- 3. Three pre- and post-activity challenge questions were administered immediately prior to and following live and ondemand activity, including:
 - What are the differences (if any) between immunotherapy and chemotherapy survivorship?
 - Who should receive the Survivorship Care Plan?
 - When does survivorship begin for a patient who is/was treated with a cancer immunotherapy?
- 4. A follow-up post-activity survey was administered electronically within 8 weeks of learner activity completion to measure knowledge and competence gain, as well as behavior change related to program learning objectives.

DEMOGRAPHICS

Most learners indicated specializing in oncology (49%), were practicing physicians (39%), and saw 1-10 new patients on an IO therapy each week (59%) in a hospital-based setting (42%).

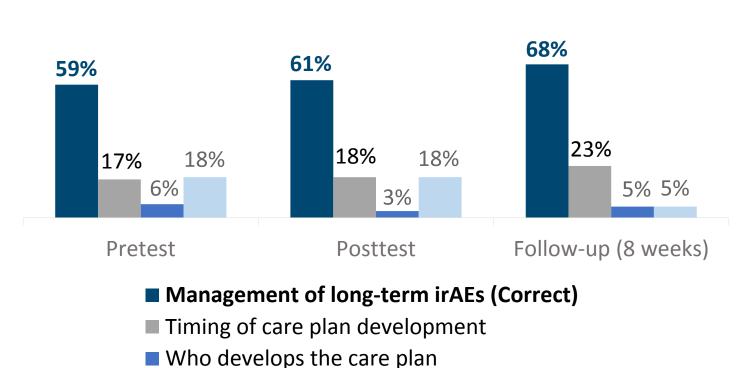




RESULTS

- 86 learners participated in the live webinar; 70 learners have participated in the on-demand webinar (n=156).
- Analysis of pre-test and post-test responses to knowledgebased questions highlighted gaps in learner knowledge that were effectively addressed through this education activity, such as:

What are the differences (if any) between immunotherapy and chemotherapy survivorship?



 As a result of the education provided, learners reported proactive changes to their clinical practice, including:

None

- Ability to better recognize irAEs (65%)
- Greater awareness of the treatment principles and key aspects of cancer survivorship (63%)
- Communicating more effectively with all members of the care team monitoring immuno-oncology patients (45%)
- When asked about barriers encountered to implement practice recommendations discussed during this activity, respondents noted:
 - "My practice center does not have access to the therapies discussed in the activity."
 - "My patients cannot afford the treatments discussed in the activity."
 - "Push back from staff."

68% of learners reported the activity positively impacted clinical practice.

CONCLUSIONS

Outcomes results from this educational activity suggest the value of future education in survivorship related to immunotherapy, particularly related to:

- Identifying irAEs associated with checkpoint inhibitors in patients in survivorship care plans
- Differentiating immunotherapy from chemotherapy survivorship care plans
- Strategies for educating patients on irAEs associated with immunotherapy
- Addressing staffing infrastructure issues to create survivorship care plans
- Identifying and addressing reimbursement challenges associated with survivorship care plans

Continued refinement of care coordination practices related to survivorship is recommended to improve the long-term management of patients who are treated with checkpoint inhibitors.



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