

Coming in Your
2005
Oncology
Issues

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- ▶ An Introduction to Pharmacoeconomics
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Plus, how are oncology practices faring under ASP?



In the Blink of An Eye

by Patti A. Jamieson-Baker, MSSW, MBA

It's been my privilege to serve as ACCC president during a critical year in oncology care. From the unrolling of ASP (average sales price) to the stirrings of a new controversy over the off-label use of oncology drugs—it's been a period of change, challenge, and renewed commitment. And with the cost of healthcare and the price of drugs continuing to skyrocket, little relief is in sight.

As we move forward, I'd like to focus my final column on the positive accomplishments of the past year at ACCC—collaboration, teamwork, and innovation.

Collaboration. When I assumed office in March 2004, one of my goals was to strengthen ACCC's position within the oncology community. Twelve months later the Association's ties to other oncology organizations have been revitalized, and new partnerships have been forged. ACCC continues to work closely with the American Society of Clinical Oncology (ASCO), the Oncology Nursing Society (ONS), and the Association of Oncology Social Work (AOSW), among others. New partnerships have been developed with The Advisory Board, the National Cancer Institute, and Physician's Weekly.

Teamwork. One characteristic that sets ACCC apart from other oncology organizations is its mission to serve the multidisciplinary cancer care team—medical, radiation, and surgical oncologists; oncology nurses; pharmacists; cancer program administrators; coders and billers; among others.

In 2004 my President's Grant focused on one integral member of the cancer care team: oncology nurses. ACCC contracted with an oncology clinical nurse special-

ist/educator to research and write an article on nursing workforce issues and budgeting in the community cancer center. This timely educational tool was presented at ACCC's Annual Meeting in March and will be published in a future *Oncology Issues*.

ACCC also continues to reach out to oncology pharmacists through OPEN (the Oncology Pharmacy Education Network). E-mail newsletters, special sessions at ACCC's national meetings, and a one-day OPEN meeting in March 2005 were just a few of the ways we served these cancer care team members.

Innovation. New cancer treatments and anti-cancer drugs continuously come down the pipeline. To provide quality care to our patients with cancer, we must keep up with these new treatment options. To that end, ACCC has established two new ad hoc committees: Radiation Oncology and New Technology. The committee experts have helped develop new articles for ACCC's journal on a range of topics that relate to a variety of emerging technologies. From digital radiography to cancer genomics, ACCC keeps your community cancer program informed about new technology, helping you answer such questions as: *When should my program consider purchasing such equipment?* and *What are the financial and staff requirements for the new technology?*

Collaboration. Teamwork. Innovation. Those are the three stepping-stones I bequeath to ACCC's incoming president. If we continue on this path, there is no limit to what the Association of Community Cancer Centers and its member institutions, group practices, and state societies can accomplish. ☐

