ACCC—Get to Know Us, We Love to Help!

BY RANDALL A. OYER, MD



t is a pleasure and privilege to serve as your 2020-2021 ACCC President. I have been a member of ACCC since 2006. My organization, Lancaster General Health, now part of the University of Pennsylvania Health

System, has been an ACCC member for a quarter of a century. When I joined my organization in 2006, I was charged with developing a cancer program and building a cancer center. Looking for resources and guidance from the broader oncology community, I was quickly attracted to ACCC's mission of education and advocacy for the multidisciplinary team because cancer care requires a high-functioning team. I needed to know how to construct new programs, and I just as quickly learned that ACCC is the "how-to" organization.

My cancer center recognized the need to develop financial advocacy, social work, and nutrition programs, and all of the programs we built were informed by information gleaned from other ACCC members and ACCC itself. My team and I attended (and we still do) both the ACCC Annual Meetings and the ACCC National Oncology Conferences, where we learned from other cancer programs and networked with social workers, financial counselors, dietitians, administrators, and other knowledgeable professionals who generously shared their own experiences, challenges, and successes. I believe that what we built in Lancaster, Pennsylvania, has the feel of our community, meets and exceeds the needs of our patients and families, and sprang into action fully functional and effective, in part because of what we learned

My cancer program team has wanted to develop a geriatric oncology program. We read the literature and understood the need and benefit of screening geriatric patients for co-morbidities, poly-pharmacy, frailty, and caregiver needs. We are, of course, not alone, and ACCC recognized this need and put together a task force of geriatric oncology experts to develop a roadmap to grow or build a geriatric oncology program. I am excited that my team is using this ACCC resource as of this writing.

Next on my agenda is to develop a surgical oncology program that better understands

the needs of our patients, our surgeons, and our community. And once again, ACCC is leading the way with a fine surgical oncology pre-conference that brought together experienced surgical oncologists and program directors who shared their insights, tips, and cautions at the recent ACCC 46th Annual Meeting and Cancer Center Business Summit.

Now ACCC is hearing from our members about gaps in community research. In our 2019 "Trending Now in Cancer Care" survey, one in four programs reported that they partnered with another organization to develop or enhance their clinical research programs. Most community programs have fewer than 10 percent of their patients on clinical trials. We have a serious imbalance in our clinical trials work; our patients are in the community, yet the trials are at academic medical centers. I believe that ACCC is uniquely situated to close this gap, which is why I chose the following for my 2020-2021 President's Theme: Community Oncology Can Close the Gap in Cancer Research: Here's How.

Over the next 12+ months, ACCC will work to develop an infrastructure to assist cancer centers amplify, augment, and/or develop a clinical research program. We will develop a glossary of clinical research terms for patients and physicians. We will prepare a guide describing how to open trials. We will create a roadmap for where and how to find trials including National Cancer Institute/Cancer Therapy Evaluation Program, NCI Community Oncology Research Program, industry, and investigator-led trials. We will also generate mentorship opportunities, pairing together programs that are successfully engaged in research and programs that would like to do research. Our members have shared that they also want resources on:

- How to improve care and access for traditionally underserved people.
- Sensitivity awareness and understanding of the needs in geriatric oncology.
- Precision medicine and how to employ molecular diagnostics to bring the latest targeted treatments to patients.

In closing, I would like to share something that I heard at my first ACCC meeting. After registering, I went to the welcome reception. I knew no one and was greeted by then-ACCC President Dick Reiling, a surgeon, who said to me, "Welcome. ACCC needs you and you need us." And you know what? Dr. Reiling is right. So, I'm going to say the same thing to all of you. Please join us in our work.

Coming in Your 2020 ONCOLOGY ISSUES

- Developing a Model of Risk
 Modification for Breast Cancer
 Using Integrative Oncology
- Helping Patients Navigate the Clinical, Psychosocial, and Financial Aspects of Cancer Care
- Electronic Multidisciplinary
 Conference (eMDC): Case
 Planning in the Virtual Space
- Developing and Implementing a Radiation Oncology App to Improve the Patient Experience
- Implementing Genetic Cancer
 Screening and Testing in a
 Medically Underserved
 Community
- Food Security: A Key
 Component in One Practice's
 Financial Advocacy Program
- Researching the Use of Virtual Reality (VR) in the Oncology Infusion Clinic
- Optimizing Provider Access in the Rural Healthcare Setting by Utilizing a Physician-Advanced Practice Provider Model
- Built to Care: Cancer Centers for the Future
- The Role of Nurse Practitioners in Clinical Research
- Cybersecurity in Oncology Practices
- Management of Hospital Admissions for Checkpoint Inhibitor IrAEs