

### **Training & Education Considerations**

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#### **Disclosures**

- Employment: University of Michigan
- Boards: National Cancer Advisory Board (NCI)
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- Consulting: Vanderbilt University / Leukemia/Lymphoma Society

#### **Current State & Concerns**

- Vacancies & reduced clinical hours → less cohesive & stable teams
- Increased complexity of cancer treatment & care
- Increased consequences for patient adverse events
- Condensed training schedules for some clinical professions
- Pervasive threats to clinician psychological safety in workplace

# Oncology Nurses' Practice Environments: Focus Group Thematic Analysis





Unsafe workloads for patient & nurses



Communication challenges



Financial constraints



Support from leaders & assistants





# Outcomes of an Interprofessional Chemotherapy Safety Training Program

#### **Process**



Prework (2h)



**Group class** (4h)

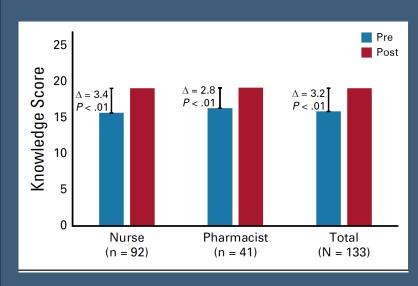


Simulation (3h)



**Survey** at 3 mos

#### Improved Knowledge



Effect size of 1.07, between preand 3-month knowledge test

#### **Clinical Practice Change**



60%

reported practice or policy changes made at three months

Aebersold, et al., JCO Oncol Pract 2021.

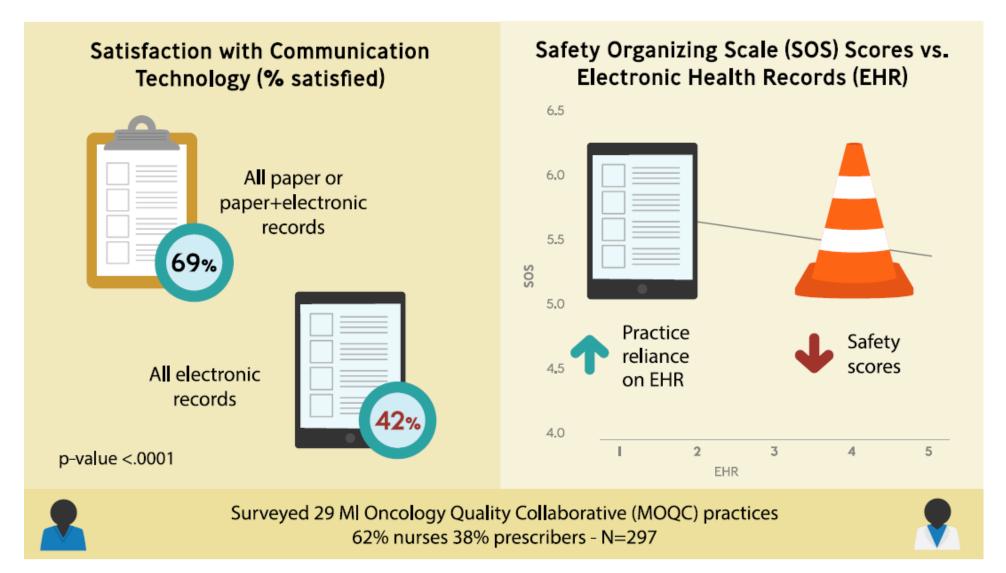
doi: 10.1200/OP.20.00816

website: mosst.nursing.umich.edu





# Clinician Perspectives on Electronic Health Records, Communication, and Patient Safety across Diverse Medical Oncology Practices





## **Cancer Care Teamwork Intervention (2021)**

- Adapted Bunnell & Gross intervention in medical oncology practice
- Clinician (Teamwork, Safety Behaviors, Communication) & Patient (CancerCAHPS) surveys
- Interdisciplinary workgroup reviewed data and posited improvement strategies
  - Patient (90%) and Clinician (78%) response rates
  - Diverse use of communication technologies -> standard use guide
  - Patient appointment scheduling process improvements -> changed workflow
  - Clinician unease discussing topics in front of leadership (separate debriefs?)
  - Post workshop participants were satisfied or extremely satisfied with participation
  - Practice asked the study team to repeat the survey to evaluate process changes

Bunnell CA, et al. BMJ Qual Saf. 2013;22(5):405-13. doi: 10.1136/bmjqs-2012-000948. Blok, AC, et al. Cancer Care Research Online. 2023 3(3):p e043. doi: 10.1097/CR9.000000000000043



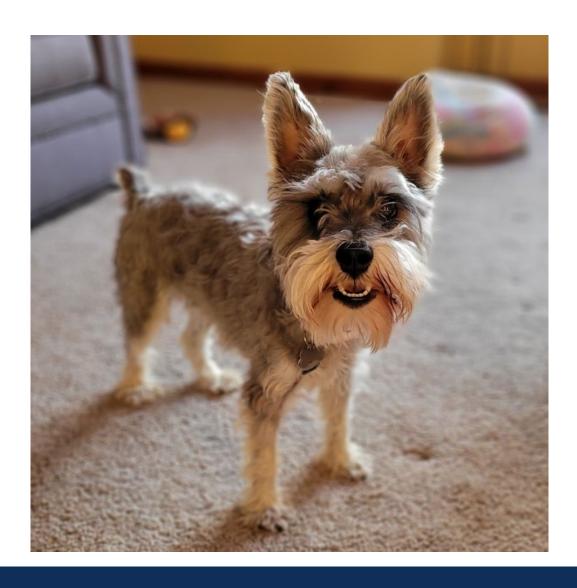
#### **Lessons Learned**

- Embrace lifelong learning. Education is not retained nor relevant for long
- Interprofessional training is highly valued yet rarely programmed
- Consider both clinical issues and care delivery content
- Clinicians highly value institutional investments in education & training
- Clinicians accept virtual, novel delivery approaches with good design



### Research & Policy Agenda

- Efficient, satisfying strategies to support current & future oncology workforce
- Repurpose regional/multi-site quality efforts to support clinical teams
- Streamline & automate quality data collection & analysis
  - Reinvest in clinician effort to implement and de-implement, as appropriate
- Increased investments in interprofessional clinical & quality training



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