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Commentary

Engaging Advanced Practice Providers in Cancer Clinical Trials

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Commentary Overview

- Advanced practice providers (APPs) offer specialized skills and expertise outside the scope of cancer treatment.
- The use of APPs in oncology has increased significantly over the past 20 years, but their role has not been clearly defined in the oncology setting.
- Oncology APPs offer a valuable insider perspective that can enhance multiple facets of clinical trials.

As cancer treatments become more complex and people with cancer are living longer, more fulfilling lives, a critical need has developed for the specialized skills of licensed non-physician practitioners with expertise outside the scope of cancer treatment. Advanced practice providers (APPs) are integral members of oncology teams, which also include physicians, pharmacists, social workers, and other professionals who work together to deliver a continuum of care and support.

APPs enhance cancer care delivery and provide continuity of care for patients at a vulnerable time in their lives by offering an extra layer of support and better access to the oncology team. Since they manage patients on active treatment, help patients manage symptoms, and follow patients through survivorship, many times APPs see patients more often than their oncologists do. Because of this consistent contact, APPs get to know their patients well and develop strong relationships with them.

Oncology APPs provide a range of services, including treatment counseling, side effect monitoring and management, coordination of care, disease surveillance, supportive care, long-term follow-up, survivorship, prevention, and palliative care. The support of APPs is especially critical now: according to an [American Society of Clinical Oncology \(ASCO\) study](#), the number of practicing oncologists throughout the United States has remained stable despite increased demand, leading to a shortage in many areas of the country. The same study noted that when nurse practitioners are permitted to work to the full scope of their education, costs are reduced and the quality of patient care improves.

The use of APPs in oncology has increased significantly over the past 20 years. In fact, 75 percent of oncology practices that responded to a [survey](#) conducted by ASCO in 2016 reported employing APPs. However, in spite of the urgent need for the assistance and support of qualified APPs, their role has not been clearly defined in the oncology setting. This is particularly evident in the management and conduct of cancer clinical trials.

There is great potential for leveraging APPs and their unique skills in clinical trials offices (CTOs). Since oncology APPs are so ingrained in everyday clinical practice, they offer a valuable insider perspective that can enhance multiple facets of clinical trials, from increasing accrual to educating participants, developing and improving protocols, and providing feasibility and scientific review.

Many current clinical research protocols don't reflect the scope of practice of APPs, limiting their ability to improve patients' quality of life. Other barriers include under-representation on research committees and a lack of knowledge about available trials. This underscores the need for CTOs to assess their environment and ensure APPs are practicing to the top of their license.

It is important to leverage the skills and institutional knowledge of APPs to improve trials from all angles. APPs can identify potential patients, follow patients on trials, and even enroll their own patients on studies related to symptom management and quality of life. In addition, APPs can assist research personnel with the coordination of trials, assuring that scheduling, follow-up, labs, and imaging are all completed within the protocol framework. They can add value to protocol development and review, as their firsthand knowledge of patients and clinic workflow gives them insight into the potential success of a protocol.

The best way to integrate APPs into the workflow of cancer clinical trials is to set clear expectations and make clinical trial involvement a defined component of the APP role. Clinical trial involvement can even be used as a performance metric. APPs should be educated on the trials available at their institution, how trials work, and how they can get involved.

The University of Hawai'i Cancer Center (UHCC) provides clinical trial access to oncology practices in the community. Most of our trials come through the National Cancer Institute's (NCI) National Community Oncology Research Program (NCORP). Oncology APPs are encouraged to become non-physician investigators through the NCI and enroll their own patients on trials when they can. Furthermore, oncology APPs routinely follow patients on treatment trials, sharing investigator responsibilities with the oncologist. They assist the research staff with coordination and are routinely involved in protocol review. We even now have APPs serve as primary investigators on symptom control, cancer control, and cancer care delivery trials.

When I joined the UHCC as nursing faculty supporting clinical research, I wanted to increase the involvement of APPs in clinical trials, but I found little information available on their role in community cancer centers. I recently collaborated with the Association of Community Cancer Centers to develop a survey for APPs and pharmacists—another critical oncology team member—that was piloted in Hawaii, and later conducted on a national scale.

The survey data showed that the vast majority (more than 75 percent) of APPs in community settings want to play an active role in clinical research. This is important because the patient populations of community cancer centers tend to be more reflective of the general population as compared to patients treated at large academic cancer centers.

However, to become more involved in research, APPs must have a clear sense of purpose and understand the extent of their authority. They should be made aware of trials that may match their patients' needs and provided with the flexibility and freedom to work to their full potential.

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