



INTERACT EUROPE

Deliverable 3.1 - Conduct an early assessment of cancer centre needs associated to ISCTP participation in order to help inform activities of Work Package 2 on curricula development

This document has been circulated to consultative partners of Work Package 3 of the INTERACT-EUROPE project as a preliminary assessment of cancer centre needs and as a basis for further discussion and stakeholder comment

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1) Creating an Inter-specialty cancer training programme for Europe: the INTERACT-EUROPE project

While the need for multidisciplinary and multiprofessional cancer management to achieve best patients outcomes has been widely recognised, there is more that most healthcare ecosystems across the European Union (EU) could do to facilitate and support this need. The education and training provision for oncology professionals' education and training is a key area of opportunity for better embedding principles and foundational knowledge in support of multidisciplinary cancer care. Indeed, highly distinct education and training programmes for various oncology specialities and disciplines can result in missed opportunities for inculcating stronger mutual understanding and cooperation between the various cancer care professionals.

The INTERACT-EUROPE project to create an EU inter-specialty cancer training programme aims to foster a patient-centric approach to quality cancer care through the promotion of multi-disciplinary and multi-professional team working. The project seeks to advance the foundations of knowledge and understanding that different professions involved in cancer care have of each other.

Healthcare professional organisations involved in the project are presently developing a curriculum for an inter-specialty training programme targeted at clinical oncology, surgery, and radiology, including their respective nursing services, based on relevant needs assessments.

In conducting this activity, the project must also lay out the foundations of trainees and cancer centres recruitment and participation to the programme. This entails gaining a strong understanding of trainee and centre needs and their readiness for the later delivery of the programme.

It is an aspiration that elements of the training curriculum be translated into technology-enhanced learning scenarios, to ensure wider access to such training tools across the EU. Finally, communication actions will ensure broad awareness of the programme to allow uptake of the project's recommendations by the cancer care community.

More information about the INTERACT-EUROPE project is available at:
<https://www.europeancancer.org/eu-projects/impact/interact-europe>.

2) Preparing trainees and cancer centres: Work Package 3's core objectives and tasks

Work Package 3 of the INTERACT-EUROPE project is associated to 'Preparation of Trainees and Cancer Centres'. The Work Package is led by the European Cancer Organisation, with a significant role in the Work Package also conducted by the European School of Oncology (ESO) in respect of, for example, the provision of preliminary training and education opportunity for the first cohort of the inter-specialty cancer training programme.

The main objectives of Work Package 3 are to:

- Create and implement a process for selecting trainees and cancer centres to the Inter-specialty Cancer Training Programs (ISCTP).
- Ensure a strong understanding of the need of cancer centres and trainees participating in the ISCTP.
- Ensure readiness of the first selected cohort of trainees and cancer centres to conduct the ISCTP.

In meeting these objectives, the main tasks of Work Package 3 are to:

- 1) Conduct an early assessment of cancer centre needs associated to ISCTP participation in order to help inform activities of Work Package 2 on curricula development (T3.1)
- 2) Create eligibility criteria for trainees and centres participating in the Inter-specialty Cancer Training Programme (T3.2)
- 3) Design and agree the selection procedure to be used following the call for interest (T3.3)
- 4) Conduct a 2nd assessment of cancer centre needs associated to ISCTP participation (T3.4)
- 5) Create and approve Guidebook for trainees, centres and mentors (T3.5)
- 6) Secure communication partners for launch of call for interest (T3.6)
- 7) Launch call for interest for trainee and centre participation (T3.7)
- 8) Select trainees and cancer centres for first cohort (T3.8)
- 9) Host live introductory educational event for trainees, centres and mentors (T3.9)
- 10) Produce final assessment of cancer centre needs associated to ISCTP participation (T3.10)
- 11) Collect and agree recommendations and reflections for Project Blueprint document (T3.11)

3) Work Package 2 and the inter-specialty cancer training curriculum: Early Developments

For the purposes of the INTERACT-EUROPE project, inter-specialty cancer training refers to joint training for surgical, medical and radiation oncologists, as well as radiologists and cancer nurses.

Work Package 2 of the INTERACT-EUROPE project is associated to '**Training Needs Assessment and Curricula Development**'. The Work Package is led jointly by the European Society of Surgical Oncology (ESSO) the European Society of Surgical Oncology (ESSO), and the European Society for Radiotherapy and Oncology (ESTRO).

Since June 2022, WP2 leaders and beneficiaries have been working towards the development of a curriculum including via the conduct of a training needs assessment.

The inter-specialty cancer training needs analysis has included:

- A **scoping review** of the literature on interprofessional education in oncology.
- A comparison of specialty curricula developing a **quantitative survey** investigating competences.
- A **qualitative survey** exploring understanding and previous experience of inter-specialty training.

The analysis of **the scoping review** was conducted by three researchers, and pre-prepared worksheets were used to extract data. 5 out of 24 papers contained a description of definition of inter-professional education and collaboration, inter-professional learning, team training and inter-disciplinary education.

As part of the **quantitative analysis**, an online survey was shared in June 2022 with INTERACT-EUROPE Consortium Member representatives, ECO Member Society Education Committee members, as well as other medical representatives and patient representatives. The survey's aim was to measure the value of inter-disciplinary training including statements on:

- the value of a period of inter-disciplinary training in each of the other two disciplines for clinical/radiation oncologists, medical oncologists and surgeons;
- the value of an opportunity for cancer nurses and medical trainees to observe each other in practice consulting with patients;
- the value of cancer nurses having access to inter-disciplinary training.

The survey revealed that participants strongly agreed with all three statements with a good consensus.

The **qualitative survey** collected responses from a varied group of EU societies and healthcare professionals (oncology medical professionals, including medical oncologist, radiation oncologist, oncology surgeon, and nurses) as well as patient representatives. 219 (55%) responses were returned, of these 115 respondents answered the qualitative survey questions.

While the results of the early scoping review and survey activities of WP2 will be published more fully as part of the INTERACT-EUROPE project's series of publicly accessible deliverable documents, key headlines from these actions with high relevance for WP3's considerations include:

- A strong consensus was conveyed from the survey activity in respect to a shared sense among healthcare professionals and patients of the importance and value of inter-specialty cancer training programme
- However, inter-specialty training, as a concept, does not yet appear to attract a clear common understanding
- Highly identified competencies for coverage in an inter-specialty cancer training programme include communication, teamwork, interprofessional collaboration, safety, psychosocial support, and well-being at work.
- Preferred modes of learning appear to favour traditional methods of education and training such as lectures, case studies, interactive workshops, audiovisual materials, simulation, and shadowing.
- Learning scenarios suggested for cancer centres to support include those related to interprofessional practice, teamwork, and communication.
- The inter-specialty cancer training programme curriculum should take measures to prevent interference with already existing system of trainings deployed.
- The inter-specialty cancer training programme should incorporate a combination of eLearning and simulation pedagogy and should include patient scenarios from palliative care/pediatric oncology/gero-oncology/psycho-oncology/symptom management and consider some special focus on cultural diversity, survivorship care responding patients psychosocial needs/emotional support and/or well-being at work/safety.

The early activities WP2, briefly described above, have also been the subject of two consensus meetings of the INTERACT-EUROPE consortium, held on 09 September and 23 September 2022. At these meetings the emerging concepts of the inter-specialty cancer training programme curriculum, and the practicalities of their delivery, were discussed with WP3 and other consortium members.

The WP3 early assessment of cancer centres, as outlined below, is therefore prepared based on WP2 outputs and the activities conducted between June-September 2022 on curriculum development.

4) Ensuring readiness and understanding of cancer centre needs and the inter-specialty cancer training programme

A) ELIGIBILITY CRITERIA FOR CANCER CENTRES, TRAINEES AND MENTORS

What might be the general criteria for cancer centres involvement?

WP3, in discussion with WP2, has given initial reflections to what should be understood as the eligibility criteria for cancer centres participating in the INTERACT-EUROPE inter-specialty cancer training programme.

Reflective of a need to build an inclusive and accessible programme, that can support inter-specialty training needs across the diversity of Europe's health systems, present considerations on cancer centre eligibility are that...

...Centres should be able to:

- **Demonstrate their commitment to developing multidisciplinary cancer care within the centre, including with the professions in focus of the inter-specialty cancer training programme**
- **Demonstrate their commitment to the provision of appropriate mentor/trainee participation, including certification of learning by the trainee**
- **Demonstrate their commitment to providing trainees with the time and support required to complete the programme**

QUESTION 1 – ELIGIBILITY CRITERIA FOR CANCER CENTRES TO PARTICIPATE IN THE INTER-SPECIALTY CANCER TRAINING PROGRAMME

- Taking into consideration the need to maintain an accessible inter-specialty cancer training programme, do you agree with the above suggestions of eligibility criteria as being sufficient?
- Would you have additional proposals for eligibility criteria to suggest?
- Are you aware of good examples of eligibility criteria for cancer centre participation in training programmes from other fields?

B) ROTATION REQUIREMENTS ASSOCIATED TO THE INTER-SPECIALTY CANCER TRAINING PROGRAMME

The degree to which rotation may be a component of the delivery of the inter-specialty cancer training programme has been a subject of particular discussion in the early part of the INTERACT-EUROPE, with an understanding of its significant implications for all involved.

A full and complete understanding of the degree to which rotation will be a feature of the inter-specialty cancer training programme will be obtained following the agreement of the core curriculum and an assessment of how that curriculum should be delivered.

Also within these considerations has been the wording and intention of the original EU4Health ([EU4H-2021-PJ-02](#)) call for proposals on developing an inter-specialty cancer training programme, which underlined the importance to deliver a more skilled and mobile cancer workforce through **cross-border training** and information-sharing. This raised attention as to whether or not cross-border rotation opportunities should be a component of the inter-specialty cancer training programme.

During early meetings of INTERACT-EUROPE, key points raised in relation to rotation requirements have included:

- Rotation requirements within a centre are less financially burdensome for a trainee than rotation between centres.
- Rotation across countries have been indicated as desirable by the European Commission in opening calls for the project – but would have the highest cost implication for trainees. Challenges would be posed too for centres and trainees in respect to language knowledge.
- Yet rotation between countries may be desired by some individuals and centres. A model could be developed that makes that an optional, but not mandatory, requirement of the process.
- Benefits of conducting cross-border rotation, or rotation to another hospital/cancer centre, could include observing different forms of multi-disciplinary working and thereby enabling active exchange and uptake of better practice.
- Forthcoming audit of the published curriculum will better indicate which elements of the curriculum will require rotation, with an expectation that rotation within a centre could be sufficient.
- Cross-border elements of the ISCTP could be underpinned by the provision of some educational event activity enabling trainees to learn alongside colleagues from other countries.

In order to maintain an accessible training programme, which need not necessarily entail high cost for trainees and cancer centres, initial considerations by the Steering Committee of the INTERACT-EUROPE programme envisage rotation potentially taking place in 3 different ways:

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| I. | National level (within the centre) – ISCTP trainees will conduct elements of learning via rotation periods across departments of the same centres (e.g., to the surgery unit, the radiation oncology unit etc) |
| II. | National level (across centres) – Possibility/flexibility could be created for ISCTP trainees will exchange across centres at a national level, allowing for further promotion of their own hospital |
| III. | Cross-border level (across centres in Europe) – Trainees will exchange across centres at the European level (depending on language knowledge) |

Rotation level i) above could be considered the minimal level of rotation. ii) and iii) may be aspirational but non-mandatory forms of delivery for the ISCTP that are developed in due course.

QUESTION 2 – ROTATION REQUIREMENTS ASSOCIATED TO THE ISCTP

- Taking into consideration the need to maintain an accessible inter-specialty cancer training programme, do you agree with the first described views of the INTERACT-EUROPE Steering Committee on how any rotation requirements might be conducted as a part of the programme?
- Would you have concerns, experiences or additional suggestions about how clinical rotation should be envisaged as part of the inter-specialty cancer training programme
- Are you aware of good examples of clinical rotation programmes from other training courses/methods used in your centre/country/field of practise.

C) UNDERSTANDING THE NEEDS FOR TUTORS AND MENTORS

As the INTERACT-EUROPE project advances, there is an increasing sense that the role of tutors and mentors will be of high importance. For the longer-term sustainability and impact of the programme, the ‘train-the-trainer’ methodology is also anticipated to be a critical feature of delivery.

Mentors/tutors will be vital to assisting a trainee through the curriculum, underpinning their active learning, and validating impact of education and training provided by the programme.

Consideration must therefore be provided to the suggested level of seniority, and years of experience of such mentors/tutors, mindful too of maintaining an accessible programme for cancer centres to participate within.

It is also anticipated that mentors/tutors will require key elements of support within the ISCTP e.g. the provision of guidebooks, the offer of informational and support events by the programme coordinators.

A more complete understanding of mentor/tutor needs will emerge following the completion and agreement of the ISCTP curriculum. However, in advance of that, the above reflects some of the very preliminary considerations underway as the INTERACT-EUROPE seeks to shape and clarify the profile and support needs for mentor/tutors within the ISCTP. Stakeholder input and transmission of experience at this stage would be gratefully received to assist the refinement of understanding.

QUESTION 3 – UNDERSTANDING THE NEEDS FOR TUTORS AND MENTORS

- Please share your thoughts and comment about the profile of mentor/tutors within the ISCTP e.g. in respect to a desired level of seniority/experience
- Please share your experience of good (and bad) practice in respect to mentor/tutor led programmes of education and training in your hospital/cancer centre, or elsewhere
- What do you think are **key needs for mentor/tutors** that the ISCTP should take account of from the outset? What makes a mentor/tutor programme work well?

D) WHAT BENEFITS CAN BE UNDERSTOOD FOR CANCER CENTRES FROM PARTICIPATION?

In order to bring about a wide participation of cancer centres within the future ISCTP, it is understood that cancer centres will require a strong sense of the benefits to be derived.

From the perspective of the INTERACT-EUROPE project commencement, these are presently understood to include:

- Raising the skills of healthcare professionals in the cancer centre; and
- Enhancing the functioning of the multi-disciplinary teams

With the ultimate benefit from the above, of improved outcomes and quality of care for the patient.

Additional benefits of participation in the programme might include:

- Participation within a recognised international level training and education programme
- Opportunity for a cancer centre to network and learn from counterpart cancer centres also taking part in the programme, both within country, and in other countries.

It is also understood that for the strong sense of benefit for the cancer centre to be maximized, care should be taken to avoid the ISCTP conflicting, or duplicating existence education and training provision undertaken by the cancer centre.

Time of trainees and mentor/tutors to fulfill the programme requirements should also be proportionate and appropriate.

QUESTION 4: WHAT BENEFITS CAN BE UNDERSTOOD FOR CANCER CENTRES FROM PARTICIPATION?

- Do the above reflections on the benefits to be derived to cancer centres from participation in the ISCTP appear reasonable
- Are there additional benefits for cancer centres from participation that should be considered for the INTERACT-EUROPE project as it completes design of the curriculum and develops the programme delivery methodology?
- Are there training programmes that your cancer centre already participates within with a particularly high value? What makes the programme high value?

E) LEARNING FROM OTHERS

As indicated from the questions above, the INTERACT-EUROPE programme has an enthusiasm to actively learn from good examples of European (or national) level training programmes that may contain useful insights and lessons for the construction of the EU's inter-specialty cancer training programme.

Some programmes that have been brought to our attention already in this regard include:

i. [The European School of Oncology \(ESO\) Clinical Training Centres Fellowship Programme](#)

The ESO's Clinical Training Centres Fellowship programme gives young oncologists the opportunity to spend 3-6 months at a centre of excellence in Europe where they will gain more knowledge in their own specialties and experience in a multidisciplinary clinical setting specially designed to address their needs.

Centres involved in the Fellowship programme include Istituto Nazionale dei Tumori (Milan, Italy); Champalimaud Clinical Centre (CCC) (Lisbon, Portugal); The Christie, NHS Foundation Trust, (Manchester, United Kingdom); Centre Leon Berard (Lyon, France), and others.



ii. [The European Urological Scholarship Programme \(EUSP\)](#)

Initiated by the European Association of Urology (EAU), the European Urological Scholarship Programme offers a wide range of programmes in Europe, including:

- Short visit – for a duration of 2/3 weeks providing with a first-rate learning experience at a centre of excellence in Europe.
- 1-Year Scholarship - Research project under the guidance of experts.
- Clinical visit – Learning best practices by observing the experts first-hand at a reputable institution abroad for a period of 6 to 12 weeks. Collaborate with the experts to generate an international peer-reviewed publication.

Applicants to the EUSP Scholarships must be EAU members who are urologists, urologists-in-training, or urology-associated basic scientists. All projects and/or visits must be conducted in a European institution.

iii. [ESTRO educational courses](#)

ESTRO provides several courses in person and online format throughout all the academic year.

Examples at national level:

i. [Humanitas University \(Italy\)](#)

The 5-years program provides different possibilities of rotations, depending on the level of experience, such as:

- Rotations in hospitalisation, outpatient clinics and oncology day hospitals in the various locations (approximately 6 months in a location in the country)
- Rotations in outpatient clinics and day hospitals in the various disease groups
- Training period abroad at centers of excellence to develop a thesis project (for a period of 6-12 months)

QUESTION 5 – LEARNING FROM OTHER PROGRAMMES

- Taking into consideration the above-mentioned cancer training programmes, is there any other examples/best practices you would like to suggest for us to take into consideration for the training programme development?
- Do you believe that INTERACT-EUROPE can create synergies and coordinate with other existing training programmes for rotation activities in the future?

5) YOUR inputs and reflections invited

Via the above 5 areas of consultative questions, the European Cancer Organisation, in its capacity as leader of Work Package 3 (Cancer Centres and Trainees) of the INTERACT-EUROPE project to develop an EU inter-specialty cancer training programme now cordially invite your inputs and opinions.

Received inputs will be used in order to create a formal consultation report and to help advise the full INTERACT-EUROPE consortium on strategic decision-making to take place in advance of curriculum finalization, and agreement on its mode of delivery.

All inputs are kindly invited. Responses should be submitted to silvia.romeo@europeancancer.org.

We remain at your disposal for further information and discussion on all of the above and more.

We thank you for your contributions of time and expertise towards the success of the EU's inter-specialty cancer training programme.