

# Quarterly Newsletter

Greater Kansas City Chapter



## ADVOCACY 101-- MAKING A DIFFERENCE

By Brittany Waller & Lori Ranallo

Believe it or not, advocacy is something that nurses practice every day! Nurses practice advocacy when they provide patient care, facilitate conversations around patient care, and collaborate with members of the interdisciplinary care team. Practicing advocacy when it comes to health policy is not something that comes to top of mind and can even feel intimidating, however, nurses CAN and should be involved with health care policy decision making as it impacts nurses as individuals, professionals, our communities, and the future of cancer care in the United States!

For those who are interested in learning more about health policy advocacy, ONS offers a FREE CE course on the topic called Advocacy 101: Making a Difference. The course is free to members and non-members!

This course was redesigned and launched last summer. It is more interactive and relevant to everyday oncology nurses. It also features some familiar faces! Lori Ranallo, immediate Past President, volunteered for an interview to discuss how she practices advocacy informally and formally as a Health Policy Liaison for the Greater KC Chapter. Brittany Waller, Archives Chair, also served as a course contributor and assisted with the content development and design.

To begin your advocacy journey, sign up for the course today!

[Advocacy 101: Making a Difference | ONS](https://www.ons.org/courses/advocacy-101-making-difference-1)

<https://www.ons.org/courses/advocacy-101-making-difference-1>

For more on ONS & Advocacy, read "Oncology Nurses Are Making a Difference in Policy and Advocacy" by Alex Stone

<https://voice.ons.org/advocacy/oncology-nurses-are-making-a-difference-in-policy-and-advocacy>



## Save the Date!

Greater Kansas City ONS  
Fall Education Fair

"Oncology Fundamentals: Bringing it  
Back to the Basics"

DATE: October 21, 2023

WHERE: Heart to Heart International  
11550 Renner Blvd  
Lenexa, KS 66219

WHO: ONS members, non-members,  
APRNs, RNs, and Students

TIME: 7am - 3 pm

OFFERING: 6 CEUs, Breakfast/Snacks,  
Lunch, door prizes, large item  
giveaways

Reserve the date on your calendar and  
be on the lookout for additional  
details!

Contact Megan Brening  
[mbrening@yahoo.com](mailto:mbrening@yahoo.com) for more  
information

Online CEU Event  
July 18

Certification Review Course  
August 26-27

Board Meeting  
September 30

## A MESSAGE FROM THE PRESIDENT

By Jennifer Carter

To all GKCC ONS members,

There is much to focus on every day to be the best nurse we can be. It also gets overwhelming trying to stay on top of the demands of a high-pressure career and one that is constantly changing. As your local Oncology Nursing Society, we hope to offer new ways to receive education, network with other professionals, and share in the experiences of others. In this newsletter, we have members who share their experience from the National ONS Congress and a special story from a member who volunteered her skills inside the borders of Ukraine. From these stories, I hope we can all recall our personal and professional excellence and can share these lessons with others.

We have great opportunities coming up with an online CE offering in July and the annual Education Fair in October. The upcoming fair focuses on 'Getting back to basics' which allows us all a chance to go back to the core of what we do every day and find motivation together to re-examine our goals and path to excellence.

As stated by Maryellen Potts, a fellow board member and educator, "I think we often take education as something that we must do to stay current, but it's also about being motivated to grow your knowledge and skill set, and ultimately, about improving patient and family outcomes. Patients and families look to nurses for information they can trust. In oncology, a fast-changing field, especially today with advances in CAR-T cells, microbiomes, and epigenetics' relationship to cancer, nurses need to be equipped with this knowledge."

We can also look back to others' advice that stand the test of time:

*"You treat a disease: you win, you lose. You treat a person; I guarantee you win- No matter the outcome."* Patch Adams

*"Education is the most powerful weapon which you can use to change the world."* Nelson Mandela

*"Let us never consider ourselves finished nurses ... we must be learning all of our lives."* - Florence Nightingale

Jenn Carter



Jennifer Carter, President  
GKC Chapter ONS  
St Luke's East Hospital  
Hematology & Oncology APP



### **GKCC ONS FALL EDUCATION FAIR!** **"Oncology Fundamentals: Bringing it Back to the Basics"**

October 21, 2023, 7am - 3 pm

*Heart to Heart International*

11550 Renner Blvd

Lenexa, KS 66219

ONS members, non-members, APRNs, RNs,  
and students welcome!

6 CEUs, Breakfast, snacks, lunch, door prizes, & giveaways

Contact Megan Brening [mbrening@yahoo.com](mailto:mbrening@yahoo.com) for more information



## ONS CONGRESS 2023

Three members of GKC Chapter ONS attended

By Kyle Robbins, RN, and Brittany Waller, RN, Cancer Center



Next year's Congress is themed: "Ignite the Extraordinary"  
Oncology nurses have a fire within them. Fan that flame at ONS Congress®.  
Washington, DC, April 24-28

From April 26-30, 17 nurses from The University of Kansas Health System attended the 48th Annual ONS Congress in San Antonio, TX. Attendees included nurses from CA11 Medical Oncology Unit, outpatient Oncology RNs, Olathe Health colleagues, and Gloria Solis, Senior Nursing Director of The University of Kansas Cancer Center.

Attendees networked with fellow oncology nurses from around the country. In addition to the networking, the team heard dynamic lectures on topics, including:

- Evidence-based practice
- Pharmacology updates
- Health care worker mental health

The team also viewed posters on nursing improvement projects. Several of our nurses had their posters accepted:

- "Outpatient Oncology Fall Risk: A Quality Improvement Study," Stephanie Hammontree, MSN, RN, OCN
- "Revitalizing Care Delivery at the Frontline: The Use of Simulation as a Tool to Train Nurses to Manage a Taxane-Induced Hypersensitivity Reaction," Stephanie Hammontree, MSN, RN, OCN
- "Peer-Led Nursing Support Group," Stephanie Nigro, MSN, RN, OCN, BMTCN, CHON, CPHQ
- "Targeting Unsigned Orders to Reduce Treatment Delays for Oncology Infusion Therapy," Christopher Bayne, MSN, RN, NE-BC

Two staff members received scholarships to attend the conference. Attendees brought back a variety of information to their colleagues and have been working on process improvement projects including hazardous drug handling, CHG bathing, and onboarding enhancements.

(Article originally published in TUKHS' *Clinical Connections* newsletter.)

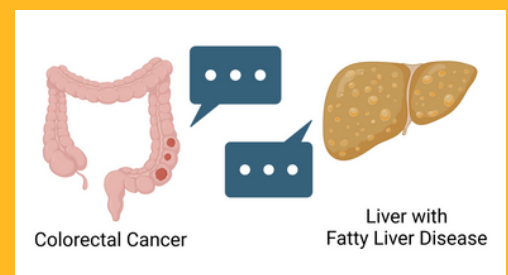


### How Fatty Liver Disease Helps Cancer Thrive in the Liver

Around 25% of US adults have nonalcoholic fatty liver disease (NAFLD). It is [linked with colorectal cancer metastasis](#) and associated with an increased risk of several cancers, including liver cancer.

An NCI-funded study, largely conducted in mice, found that [fatty livers sent fat-coated "message bubbles" to colorectal cancer cells](#). The message bubbles, called extracellular vesicles (EVs), encouraged colorectal cancer to grow in the liver and prevented immune cells from attacking [metastatic tumors](#) in the liver.

"What this study shows is that NAFLD can impact the aggressiveness of metastatic cancer—specifically of colorectal cancer that metastasizes to the liver," said Joanna Watson, Ph.D., of NCI's [Division of Cell Biology](#), which partially funded the study.



The findings suggest people with colorectal cancer and fatty liver disease might need different treatments than people with colorectal cancer and healthy livers.

Credit: Created with BioRender.com

# ONS CONGRESS -- MY STORY

By Heather Edwards MSN, RN, OCN

I'm so honored to have been able to attend Congress this year with the support of the Greater Kansas City Chapter. There are so many things that I gained from this experience. I was exciting to learn so many new things such as how the GI Microbiome may affect patient outcomes that are undergoing CAR T Therapy, new drugs now available and the process they undergo for approval, and usage of drugs regarding where they fall in the lines of therapy in comparison to old standards of care.

I was able to collaborate with fellow oncology nurses and leadership staff from across the country. I was able to reflect on challenges being faced in healthcare today and learned of potential solutions that have worked for other facilities.

One of the most invaluable things I got from Congress was a refueling of emotions that oncology nurses are the most valuable asset to cancer care. I came away from this meeting feeling excited about my nursing career and helping others grow into rich oncology nurses. One of my favorite quotes used in a developing leader's presentation was "Leadership is not about titles, status, and wielding power. A leader is anyone who takes responsibility to recognizing the potential in people and ideas, and has the courage to develop that potential" (Brené Brown, 2019).

As an educator this empowered and motivated me further to help grow leaders everywhere and recognize how each one of you is a leader. I can't advocate enough for oncology nurses to be a part of their local ONS Chapter and take advantage of opportunities to attend Congress. It was an amazing experience that NOURISHED my love of Oncology Nursing!

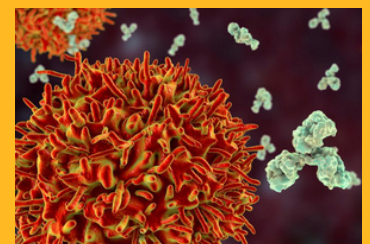


ONS members Heather Edwards MSN, RN, OCN (left) and Jackie Graham-Menocal, BSN, RN, OCN Both are with St. Luke's Hospital

## Trial Confirms CAR T-Cell Therapy Benefits People with Aggressive Lymphomas

Axi-cel, a personalized immunotherapy that uses CAR T cells, can cure some patients with aggressive non-Hodgkins lymphoma that does not respond to chemotherapy.

This is the main finding of the ZUMA-7 trial, a large randomized phase 3 study that compared axi-cel with standard treatment for relapsed disease. The trial results, presented at the ASCO annual meeting, showed that axi-cel improved overall survival by 9% at 4 years. The study leaders said that axi-cel is now the preferred option for this patient group and the new standard for future research..



B cells (orange) produce antibodies (green), which are vital for the immune response. But a type of blood cancer called B-cell lymphomas can form in B cells. Credit: iStock

## ONS CONGRESS -- MY STORY



By Jessica Callaghan, RN, BSN, OCN; Olathe Radiation Oncology

### *What did you enjoy the most about Congress this year, and why?*

Congress is a special event because of the collaboration of drug companies along with nurses, APRN's and physicians to provide us with information. These people have spent a lot of their time preparing presentations for Congress and hearing from people who are out there working in oncology is the best way to absorb information when you know they are working hard each day just like you are to care for oncology patients. Hearing case studies and real life events is how we problem solve and have a sense of community as many of us face the same challenges. Being in the company of such wonderful individuals is heart warming.

### *Name the top three sessions you attended and briefly tell me why those sessions made an impact on you*



"Innovative Management Strategies for Acute Radiation Toxicities: Assisting Patients During Their Treatment Course and Enhancing Quality of Life" -- favorite because this is what I deal with on a daily basis. Hearing about new recommendations from MASCC (Multinational Association of Supportive Care in Cancer) about skin care was an interesting topic.

"Unleashing the Power of Pet Therapy: How to Integrate Pet Therapy Into Your Cancer Center -- I did not attend this session but I did review the slides. I love this session because it shows the diversity of ONS and how much you can learn through this type of conference!

"

The Intestinal Microbiota- A New Frontier in CAR-T Cell Therapy" -- This is a very interesting topic about diet, probiotics, and how the body processes certain treatments that are given based on how their gut bacteria is working and how much inflammation is in their body. I find this personally interesting but also take note of the holistic care that is given and considered when treating cancer patients. Much more to come on this topic!

### *What was your greatest take away from Congress for your practice as an oncology nurse?*

I do plan to implement some small changes with our H&N population after discussing with our team as well as gathering some great ideas for projects for our department in the next year or two. I also feel a renewed sense of caring for my patients after this conference, it's such a gift to be in oncology.

### *What was your greatest take away for you personally?*

KEEP LEARNING, ALWAYS KEEP LEARNING

### *Would you recommend others to attend Congress? Why?*

Attending Congress is a networking opportunity to learn from other nurses and absorb so much information that is tailored to what you want to learn. It is exciting to see what's coming in the future and remember how far cancer treatment has come. ONS is a great organization that works hard to produce quality materials and guide oncology nurses in practice, it is an honor to be a part of their organization.



# MY JOURNEY TO UKRAINE PART 2

By Cathy Glennon

RECAP: Shortly after the start of Russia's invasion of Ukraine February 24, 2022, Ukrainian doctors contacted Global Care Force asking for help. Disruption in supply chains cut off access to items desperately needed to care for patients and many of their health care staff were deployed to the military. I was part of the mobile medical clinic that provided primary care to residents in central and southern Ukraine. As of December 2022, over 1,250 Ukrainians received primary care through the mobile clinics. I left 2 days after Thanksgiving and returned home several days prior to Christmas, 2022.

## PART 2:

As a volunteer for Global Care Force's Ukraine Humanitarian Relief, numerous challenges were encountered, that one rarely even considers otherwise. For instance, no electricity. Not only while seeing patients, but all the conveniences normally taken for granted. There were no elevators /escalators working in the hotels, train stations, etc. Long, steep staircases were navigated with our numerous bags. In addition to our personal bags, we each had a huge suitcase of medications. Basic medications such as vitamins, aspirin, acetaminophen, blood pressure meds, etc. were hard to obtain in Ukraine, so were brought from here. Wound vacs for the injured troops were also transported. On several occasions we got to go to restaurants which have acclimated to the loss of electricity by providing a regular menu and a 'light's out' menu consisting of cold items when there were no means to cook hot food. Streets in the larger villages and cities were lined with back up generators that cycled on and off to conserve energy. Streetlights and stoplights were nonexistent.

(next page)



On the road in Ukraine to a remote clinic



Cathy Glennon and the interpreter

Forsaken Russian tank left near clinic site

**"The world has seen what we are capable of. We have shown that we will not give up, even when we are faced with the most difficult challenges. We will continue to fight for our freedom and our independence."**

President of Ukraine, Volodymyr Zelensky

# MY JOURNEY TO UKRAINE PART 2

By Cathy Glennon

Continued from page 3

We carried our passports and a formal letter, stating we were on a humanitarian mission, on our person at all times in case we needed to evacuate urgently. Missile strikes were ongoing, such that Ukrainians have a phone app that show locations of missile strikes at any moment. Ukrainian fighter jets were heard overhead daily. Travel was challenging. Since the Ukraine airport is not operating; we flew into Krakow, Poland and trained for more than 12 hours to the border where we were met by the local minister who was hosting the team and arranged our clinic stops.

However, the hardships the team encountered were minimal compared to the daily strife Ukrainians face. Yet, they remain resilient and thankful for all support.

Global Care Force, with headquarters in Olathe, Kansas, send volunteer health care professionals to under-resourced communities of critical healthcare staffing shortages. They partner with organizations providing safety net services in their communities to address healthcare disparities. <https://www.globalcareforce.org/>

Cath Glennon

*Thanks to Cathy for sharing her story in the this newsletter!*



Cathy with patients... now new friends

Routine of unloading equipment and meds each day for clinic



A screenshot of the NIH All of Us Research Hub website. The header includes the 'All of Us Research Hub' logo, the NIH logo, and navigation links for 'ABOUT', 'DATA &amp; TOOLS', and 'DISCOVER'. Below the header, there are two main buttons: 'Learn How to Join as a Participant &gt;&gt;' and 'Explore Genomic D...'. The main content area features a large image of a woman's face in profile, looking at a computer screen. The text reads: 'Welcome to the All of Us Research Hub'. Below this, it says: 'The National Institutes of Health's All of Us Research Program is building one of the largest biomedical data resources of its kind. The All of Us Research Hub stores health data from a diverse group of participants from across the United States.' At the bottom, it says: 'Register for the Researcher Workbench to access data and tools to conduct health research and improve understanding of health and disease.'

## CHECK OUT NIH All of US

The All of Us research hub is a platform that allows researchers to access and analyze data from the All of Us Research Program, a national initiative that aims to enroll one million or more participants from diverse backgrounds to improve health outcomes. The research hub is designed to support a variety of research topics and questions, such as how genetic, environmental, and lifestyle factors affect health and disease.

<https://researchallofus.org/>

# MISSOURI LEGISLATIVE UPDATES

By Cathy Glennon

The Leukemia & Lymphoma Society’s Spring Lobby Days in Washington, D.C 5/15 thru 5/17/2023 allowed me opportunity to meet individually with Senator Eric Schmitt (with Peter Dudziak, HLA) MO-S (R); Sen. Josh Hawley MO-S (R); and Rep. Samuel Graves (with Andrew Gilstrap, HLA) MO-06 (R) to request support of the following Acts.

### ***Accelerating Kids’ Access to Care Act (AKACA)***

Over 50% of children in the United States rely on Medicaid and Children’s Health Insurance Program (CHIP) for health insurance. Medicaid and CHIP limit access to providers outside a child’s home state. If a child’s medical condition requires them to obtain care from an out-of-state provider or care team, that out-of-state provider must undergo a screening and enrollment process in the child’s home state Medicaid program. These rules impede timely access to care, and those delays can cause a child’s condition to worsen or become fatal.

This bill allows physicians to quickly enroll in any state’s Medicaid program, enabling them to provide time-sensitive care to kids without delay. More than 100 organizations support AKACA including the Children’s Hospital Association, Family Voices, and the American Academy of Pediatrics.

### ***NIH Clinical Trial Diversity Act***

Clinical trials should be available to all patients who qualify but only a fraction of cancer patients enroll in clinical trials. Many patients lose out on access to treatments and researchers lack a full understanding of how safe and effective new treatments are for different groups of patients.

Barriers to participation include travel costs, lost time at work, and the lack of insurance-covered trial sites. Not all patients have the same opportunity to participate in clinical trials. People of color, young adults, older patients, and patients living in rural communities are especially underrepresented in clinical trials today. For some of those patients, that’s because there are few, if any, trials underway in their region. For others, it’s because their healthcare provider did not explore with them the possibility of seeking treatment through a trial. And for others, a lack of insurance coverage proves too great a barrier.

This bill will improve clinical trials by making it easier for patients to participate in them and by ensuring that sponsors have concrete goals for diverse enrollment in trials, such as making trial participation less burdensome for patients.

**Update:** H.R.3503 - NIH Clinical Trial Diversity Act of 2023 was sponsored by Rep. Kelly, Robin L. [D-IL-2] on 05/18/2023 and referred to the House Committee on Energy and Commerce. *(Edited for brevity)*



Cathy Glennon with Peter Dudziak, HLA for Sen. Eric Schmitt MO-S



LLS team from IL, IN, and Cathy as only MO resident



Andrew Gilstrap, HLA for Rep. Samuel Graves MO-6 (R)

NCI Press Release

## **Biden-Harris Administration launches initiative to improve cancer outcomes in low-income areas**



The Biden-Harris Administration awarded \$50 million to launch the Persistent Poverty Initiative, an initiative to alleviate the cumulative effects of persistent poverty on cancer outcomes by building research capacity, fostering cancer prevention research, and promoting the implementation of community-based programs. The Persistent Poverty Initiative is the first major program to address the structural and institutional factors of persistent poverty in the context of cancer. It is coordinated by the National Cancer Institute (NCI), part of the National Institutes of Health (NIH). These awards create five new Centers for Cancer Control Research in Persistent Poverty Areas that will advance key priorities of the Administration’s Cancer Moonshot— to reduce inequities in the structural drivers of cancer and prevent more cancers before they start by reducing tobacco use and making sure everyone has access to healthy food.

Posted: June 26, 2023