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Identifying Onboarding Gaps of Advanced Practice Providers in Surgical Oncology

Abstract: Introduction: Onboarding employees into their new role is critical for the success of a company. The aim of this study is to identify education gaps in the training process that are suboptimal in retrospect from the perception of the APP (Advanced Practice Provider) in Surgical Oncology. There has been a rapid expansion of APPs within surgical subspecialties.

Full Abstract: Introduction: Onboarding employees into their new role is critical for the success of a company. The aim of this study is to identify education gaps in the training process that are suboptimal in retrospect from the perception of the APP (Advanced Practice Provider) in Surgical Oncology. There has been a rapid expansion of APPs within surgical subspecialties, especially in the complex care and management of oncology patients. Any training program is vital to the success of the employee but even more so in Surgical Oncology due to the subspecialized field of practice and lack of training in educational programs. The scarcity of prior training creates a large experience gap that the APP must traverse during the onboarding experience. Despite the growth of the APP workforce, there is still a lack of standardized training for Surgical Oncology. The goal of this study is to investigate and identify the educational and training needs of APPs in Surgical Oncology. Problem: APPs come from diverse backgrounds without prior training and lack of standard onboarding processes at most centers. Methods: A group of thirty-nine APPs with varying levels of experience completed an anonymous encrypted online survey at a single institution, within the Surgical Oncology department. The survey was distributed via email over a three-week period with items designed to find gaps in training and the APP's overall perception of the training experience. Results: A substantial number of responses (75%) agree that overall, the APP onboarding experience was favorable. The most prominent feedback received was that the APPs felt there was a lack of a standardized training process and requested additional information on the specific subspecialty disease site. The majority of APPs gave feedback that the credentialing process was lengthy and suboptimal, they requested more training on the of reading diagnostic imaging, and dedicated time with an EMR (Electronic Medical Record) representative for personalization. Conclusion: The study was able to identify knowledge gaps in the onboarding process for Surgical Oncology APPs. Recommendations: This study was able to highlight the positives and negatives of the training experience from the APP perspective. The information provided by this study gives a foundation of topics that can be further investigated to provide interventions to improve the onboarding process.