Background: Risk of recurrence scores (RSs) from gene expression profiling (GEP) tests such as OncotypeDX® and EndoPredict® are being used increasingly alongside clinico-pathologic features to help determine the likely benefit of adjuvant chemotherapy in early stage breast cancer. Health literacy and numeracy skills in the general population are often poor, thus explaining risk and uncertainty can be confusing especially when set against a backdrop of fear and anxiety. As Health Care Professionals (HCPs) find these types of conversations with patients challenging, we developed and evaluated the TARGET educational programme.

So far, we have published two modules of the TARGET programme focusing on the interpretation of low and high risk GEP scores [1, 2]. In this paper we report our findings from the TARGET Evaluation workshops, which were attended by 80 HCPs (21 clinicians, 59 nurses) from 4 UK regions. The workshops were 8 hour workshops across 2 days accredited 9 CPD points. The 2-day workshops are split into modules:

Module 1: The GEP landscape science underpinning GEP tests
Module 2: EndoPredict® low & high risk scenarios
Module 3 OncotypeDX® low, intermediate & high risk scenarios
Module 4: OncotypeDX® further scenarios after theTAILORx results

TARGET Evaluation Workshops
Comprised:
- 2 hour didactic interactive lecture on risk with exercises on numeracy, frequency & intolerance of uncertainty
- facilitated group discussion about the scenarios
- 8 hour workshops across 2 days accredited 9 CPD points

Methods
Pre & post workshop
Participants
- completed 9 item self-confidence questionnaires
- discussed risk scores with patient simulators (recorded)
- self-rated presence/absence of 17 key informational areas

Patient simulators
- completed the same checklist of 17 key areas
- different patients/scenarios used at pre & post assessments

Experienced researchers
- assessed recordings (blinded to time point) (objective results)

Hypotheses:
- participants’ communication skills when discussing GEP test results would improve i.e. competence would be better
- self-efficacy would be enhanced i.e. participants would feel more confident when conducting these interviews

Results
65 UK HCPs (56 clinicians, 9 nurses) participated in 7 workshops

Conclusion
The short, intensive TARGET workshops significantly improved HCPs’ competence & confidence communicating GEP results, which is likely to transfer into the clinical setting assisting patient decision-making about chemotherapy

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References
3. Sparano JA, et al. (2018) TAILORx: Phase III trial of chemotherapy versus endocrine therapy alone in hormone receptor positive, HER2-negative, node negative breast cancer and an intermediate prognosis 21 gene recurrence score. JCO 36:18suppl, LBA1-LBA1