



Palliative Care Early and Systematic (PaCES):

Expanded Oncology Survey – MAPPED to Michie’s Behaviour Change Wheel (BCW) and Theoretical Domains Framework (TDF)



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Survey Background

Evidence suggests patients with advanced cancer benefit when early palliative care supports are provided concurrently with cancer treatments, but this isn't yet being consistently achieved in Alberta. Advanced cancer is defined as primary or metastatic cancer that is unlikely to be cured, controlled or put into remission with treatment.

The PaCES (*P*Alliative Care *E*arly and *S*ystematic) project aims to achieve earlier palliative care utilization in Alberta in order to enhance patient and family outcomes (e.g., symptom control and quality of life).

Please help us discover

What barriers need to be addressed to improve the delivery of early palliative care in Alberta?

This questionnaire will take less than 10 minutes to complete.

Completion of the questionnaire is entirely voluntary. Completion implies your informed consent to use submitted responses in data analysis. All responses will remain confidential and will be kept anonymous. You may decline to answer any question or stop answering the questionnaire at any time. Because the questionnaire is anonymous, however, we will not be able to withdraw your answers after submission.

Thank-you,
On behalf of the PaCES study team
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SECTION 1

About You

1. What is your primary professional role?
 - a. Nurse
 - b. Nurse Practitioner
 - c. Nurse Navigator
 - d. Doctor
 - e. Clinical Associate
 - f. Administration (e.g., clinic manager)
 - g. Clerical
 - h. Allied Health Care Professional: _____
 - i. Other: _____

2. Which cancer center or catchment area do you primarily work in?
 - a. Central Alberta Cancer Centre
 - b. Cross Cancer Institute
 - c. Community Cancer Centre: _____
 - d. Grande Prairie Cancer Centre
 - e. Jack Ady Cancer Centre
 - f. Margery Yuill Cancer Centre
 - g. Tom Baker Cancer Centre (and/or Holy Cross)
 - h. Other: _____

3. Which discipline do you primarily work in?
 - a. Medical Oncology (including hematology)
 - b. Radiation Oncology
 - c. Surgical Oncology
 - d. Other: _____
 - e. Not Applicable (please specify): _____

4. a). Which tumour group(s) do you work in? Please check all that apply to you.
 - a. Breast
 - b. Cutaneous
 - c. Endocrine
 - d. Gastrointestinal (GI)
 - e. Genitourinary (GU)
 - f. Gynecological
 - g. Head and Neck
 - h. Hematological
 - i. Lung
 - j. Neuro-oncology (CNS)

- k. Palliative
- l. Pediatric
- m. Sarcoma
- n. Other: _____

b). *If more than one applies*, please choose **one** tumour group to use as your lens as you answer the rest of the survey.

- a. Breast
- b. Cutaneous
- c. Endocrine
- d. Gastrointestinal (GI)
- e. Genitourinary (GU)
- f. Gynecological
- g. Head and Neck
- h. Hematological
- i. Lung
- j. Neuro-oncology
- k. Palliative
- l. Pediatric
- m. Sarcoma
- n. Other: _____

5. How often does your work involve care of **outpatients with advanced cancer** (i.e., cancer that is unlikely to be cured or controlled with treatment)?

- a. Never
- b. Rarely
- c. Sometimes
- d. Most of the time

6. How many years have you been working in your profession?

- a. I'm a trainee/student/resident
- b. 0-2 years
- c. 3-5 years
- d. 6-10 years
- e. 11-15 years
- f. >15 years

7. Your Gender:

- Female
- Male

SECTION 2

REFERRING Patients to Palliative Care

For me, **making REFERRALS** to palliative care services (consultation and/or home care services) is challenging due to:

	Entirely Disagree (It's NOT a challenge) (1)	Mostly Disagree (2)	Somewhat Disagree (3)	Neither Agree nor Disagree (4)	Somewhat Agree (5)	Mostly Agree (6)	Entirely Agree (It's a challenge) (7)	Don't Know
Not knowing what palliative care services are available	COM-B category: Opportunity TDF category: Environmental Context and Resources							
Too few palliative care providers available in my region	COM-B category: Opportunity TDF category: Environmental Context and Resources							
Slow response time of palliative care providers to referral	COM-B category: Opportunity TDF category: Environmental Context and Resources							
The criteria for palliative care services are too restrictive to meet my patients' needs	COM-B category: Opportunity TDF category: Environmental Context and Resources							
Patients have negative perceptions of "palliative care"	COM-B category: Motivation TDF category: Emotion							
Referral pathway issues (e.g., when to refer, how to	COM-B category: Capability TDF category: Memory, attention, decision processes and/or Behavioural Regulation							

refer, complexity of use)	
There is little benefit for my patients from palliative care services	COM-B category: Motivation TDF category: Belief about consequences
Other challenges or solutions for referring patients to palliative care are:	Open ended question

SECTION 3

WORKING with Palliative Care Services

For me, **WORKING with** palliative care services (consultation and/or home care services) is challenging due to:

	Entirely Disagree (It's NOT a challenge) (1)	Mostly Disagree (2)	Some what Disagree (3)	Neither Agree nor Disagree (4)	Some what Agree (5)	Mostly Agree (6)	Entirely Agree (It's a challenge) (7)	Don't Know
Role confusion when multiple professionals are involved (i.e., who does what)	COM-B category: Opportunity							
	TDF category: Environmental Context and Resources							
Lack of a standard process for professional communication between teams (e.g., knowing who, when, and how to contact each other; access to home care records)	COM-B category: Opportunity							
	TDF category: Environmental Context and Resources							
Lack of standard processes for executing new orders for patients who are at home (e.g., arranging paracentesis for a homecare patient)	COM-B category: Opportunity							
	TDF category: Environmental Context and Resources							
Sub-optimal prior experience of working with palliative care services	COM-B category: Motivation							
	TDF category: Beliefs about consequences							
If your prior experience working with palliative care services was sub-optimal, please describe your experiences.	Open ended questions							
Other challenges or solutions in working with palliative care services are:								

SECTION 4

ADDRESSING My Patients’ Palliative Care Needs Myself

ADDRESSING my outpatients’ palliative care needs **MYSELF** is challenging due to:

	Entirely Disagree (It’s NOT a challenge) (1)	Mostly Disagree (2)	Somewhat Disagree (3)	Neither Agree nor Disagree (4)	Somewhat Agree (5)	Mostly Agree (6)	Entirely Agree (It’s a challenge) (7)	Don’t Know
Limited time and competing priorities in my work	COM-B category: Opportunity TDF category: Environmental Context and Resources							
My capability to manage physical symptoms (e.g., pain)	COM-B category: Capability TDF category: Knowledge/Skills							
My capability to manage psychological concerns (e.g., depression)	COM-B category: Capability TDF category: Knowledge/Skills							
My capability to manage spiritual concerns (e.g., meaning of life)	COM-B category: Capability TDF category: Knowledge/Skills							
My capability to manage social issues (e.g., lives alone)	COM-B category: Capability TDF category: Knowledge/Skills							
The emotional impact on me	COM-B category: Capability TDF category: Behavioural Regulation							
	COM-B category: Opportunity							

My leaders are not supporting me to address palliative care issues in my practice	TDF category: Social Influences
Colleagues in my clinic are not routinely addressing palliative care needs	COM-B category: Opportunity TDF category: Social Influences
Managing palliative care needs is not part of my responsibilities	COM-B category: Motivation TDF category: Professional Role/Identity
Other challenges and solutions in addressing my cancer patients' palliative care needs are:	Open ended questions

SECTION 5

Early Palliative Care Pathway

PaCES is proposing an early palliative care pathway to support all advanced cancer patients. The pathway will:

- Routinely identify patients in need
- Ensure that symptoms are addressed
- Engage patients in advance care planning
- Provide earlier access to home care services
- Improve communication between oncology, family physicians and palliative care providers.

How much do you *agree* with the following statements?

	Entirely Disagree (It's NOT a challenge) (1)	Mostly Disagree (2)	Somewhat Disagree (3)	Neither Agree nor Disagree (4)	Somewhat Agree (5)	Mostly Agree (6)	Entirely Agree (It's a challenge) (7)	Don't Know
I am likely to recommend an early palliative care pathway to my patients	COM-B category: Motivation TDF category: Optimism							
I personally would have to make substantial changes to the way I practice to use earlier palliative care supports	COM-B category: Motivation TDF category: Beliefs about consequences							
Please provide your ideas on how early palliative care could be better integrated into cancer care	Open ended questions							

On behalf of the PaCES study team, thank you for completing this survey. We are looking forward to improved early palliative care for all cancer patients in Alberta.