



**Palliative Care Early and Systematic (PaCES):  
Expanded Oncology Survey**



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# Section 1

## PaCES Expanded Oncology Survey

Q1. What is your primary professional role ?

- Nurse
- Nurse Practitioner
- Nurse Navigator
- Doctor
- Clinical Associate
- Administration (e.g., clinic manager)
- Clerical
- Allied Health Care Professional
- Other (please specify)

If "Allied Health Care Professional" or "Other", please specify:

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Q2. Which cancer centre or catchment area do you primarily work in ?

- Central Alberta Cancer Centre
- Cross Cancer Institute
- Tom Baker Cancer Centre (and/or Holy Cross)
- Grande Prairie Cancer Centre
- Jack Ady Cancer Centre
- Margery Yuill Cancer Centre
- Community Cancer Centre (please specify)
- Other (please specify)

If "Community Cancer Centre" or "Other", please specify:

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Q3. Which discipline do you primarily work in?

- Medical Oncology (including Hematology)
- Radiation Oncology
- Surgical Oncology
- Other (please specify)
- Not Applicable (please specify)

If "Other" or "Not Applicable", please specify:

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Q4. Which tumour group(s) do you work in? Please check all that apply to you.

- Breast
- Cutaneous
- Endocrine
- Gastrointestinal (GI)
- Genitourinary (GU)
- Gynecological
- Head and Neck
- Hematological
- Lung
- Neuro-oncology (CNS)
- Palliative
- Pediatric
- Sarcoma
- Other

If "Other", please specify:

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# Section 1 (continued)

Q5. Based on your answer above, please choose ONE tumour group to use as your lens as you answer the rest of the survey.

- Breast
- Cutaneous
- Endocrine
- Gastrointestinal (GI)
- Genitourinary (GU)
- Gynecological
- Head and Neck
- Hematological
- Lung
- Neuro-oncology (CNS)
- Palliative
- Pediatric
- Sarcoma
- Other

If "Other", please specify:

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Q6. 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)?

- Never
- Rarely
- Sometimes
- Most of the time

Q7. How many years have you been working in your profession?

- I'm a trainee/student/resident
- 0-2 years
- 3-5 years
- 6-10 years
- 11-15 years
- >15 years

Q8. Your gender is:

- Female
- Male

## 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 is NOT a challenge)	Mostly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Mostly Agree	Entirely Agree (it IS a challenge)	Don't know
Not knowing what palliative care services are available	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Too few palliative care providers available in my region	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Slow response time of palliative care providers to referral	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The criteria for palliative care services are too restrictive to meet my patients' needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patients have negative perceptions of "palliative care"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Referral pathway issues (e.g., when to refer, how to refer, complexity of use)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is little benefit for my patients from palliative care services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other challenges or solutions for referring patients to palliative care are:

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## WORKING WITH PALLIATIVE CARE SERVICES TEAMS

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

	Entirely Disagree (it is NOT a challenge)	Mostly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Mostly Agree	Entirely Agree (it IS a challenge)	Don't Know
Role confusion when multiple professionals are involved (i.e., who does what)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of standard processes for executing new orders for patients who are at home (e.g., arranging paracentesis for a home care patient)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sub-optimal prior experience of working with palliative care services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other challenges or solutions in working with palliative care services are:	_____							

## ADDRESSING PATIENTS' PALLIATIVE CARE NEEDS

### ADDRESSING my outpatients' palliative care needs MYSELF is challenging due to:

	Entirely Disagree (it is NOT a challenge)	Mostly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Mostly Agree	Entirely Agree (it IS a challenge)	Don't Know
Limited time and competing priorities in my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My capability to manage physical symptoms (e.g., pain)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My capability to manage psychological symptoms (e.g., depression)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My capability to manage spiritual concerns (e.g., meaning of life)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My capability to manage social issues (e.g., lives alone)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The emotional impact on me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My leaders are not supporting me to address palliative care issues in my practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Colleagues in my clinic are not routinely addressing palliative care needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Managing palliative care needs is not part of my responsibilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other challenges and solutions in addressing my cancer patients' palliative care needs are:

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## EARLY PALLIATIVE CARE PATHWAY PROPOSAL

**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 is unlikely)	Mostly Disagree	Somewhat Disagree	Neither agree nor Disagree	Somewhat Agree	Mostly Agree	Entirely Agree (it is likely)	Don't Know
I am likely to recommend an early palliative care pathway to my patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I personally would have to make substantial changes to the way I practice to use earlier palliative care supports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide your ideas on how early palliative care could be better integrated into cancer care

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