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### Supportive and Palliative Care Provider script for phone call with patient

<b>Greeting</b>	Hello, (patient name). My name is (provider name) and I'm a nurse specialist calling from supportive care to discuss arranging a home visit to discuss our services. Your oncologist, (oncologist name) may have told you that you would be receiving a call from us after your first visit.
<b>Call set up</b>	This call will likely take around 10-15 minutes. Is this an okay time to talk? Is there somebody else you'd like to include in this call?
<b>Normalization</b>	We are calling everyone who has a new diagnosis of advanced lung cancer to offer an appointment for a consultation, to sit down and discuss what you are going through and supports that are available to you. This is a part of your cancer care.
<b>Refer to chart/Immediate issues</b>	[Referring to chart if applicable]: I noticed from your chart that you were experiencing (symptoms/had questions at your first appointment). How are you doing? Do you have any urgent concerns/burning questions that we should address before we talk more?
<b>Describing the consult and Supportive &amp; Palliative Care</b>	<p>Your first consultation will be with (<i>myself/other nurse specialist in our team</i>). This visit may be virtual or in your home and could take (60-90 minutes hours). Our team is called supportive and palliative care, which means we are here to provide support in managing any of your symptoms, and other needs you may have. Supportive and palliative care is a philosophy of care that helps you live your best during your cancer journey and is considered an important part of your cancer treatment. Perhaps I should pause here to give you an opportunity to ask any questions you might have.</p> <p>At the first visit, here are some things we'll talk about: getting to know you and what's important to you, addressing any symptoms/difficulties, and also connect you with any resources and services that are available in the community. Would you be interested in booking a consultation with me, at a time that works for you?</p>
<b>Patient says yes and consultation is booked:</b>	<p>Great I'm happy to email/mail you a summary of what we talked about today, as well as any resources. What address should I use?</p> <p>I'll send a note to your family doctor and oncologist to let them know that I called you today. Contacting patients directly is a new process for us for supportive and palliative care, and we want to hear your feedback. So please expect a call to collect your feedback in the next few days</p> <p>[If they say no to the idea of research call]: "Because this is new for us, we are calling patients afterwards to gather their perspectives. And we're looking to improve this process. A ___ will be calling and they would appreciate your perspectives, but you don't have to talk to them if you don't want to."</p> <p>[if hard objection]: "is there anything you want to pass on that you'd like to tell me now?"</p>



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<p><b>Patient says no to a consultation offer:</b></p>	<p>That's no problem. Can I call you back at a later time to check in and see how you're doing? <i>When would be best? / I will leave you with my number in case you change your mind.</i> Your oncologist should remain your primary point of contact but should you wish to talk about anything I've mentioned today feel free to reach out. You can also get a hold of me through your oncologist if you prefer to reach out at a later time. I'll let your family doctor and oncologist know that I called you today.</p> <p>Would you like any information about any other supports that are available? If you would like to talk to other patients, there is a group called Lung Cancer Canada or Wellspring is another good option. I'm happy to email/mail you a summary of what we talked about today, as well as information about these resources – what is the best address to send this information to?</p> <p>Contacting patients directly is a new process for us for supportive and palliative care, and we want to hear your feedback. So please expect a call to collect your feedback in the next few days</p> <p><i>[If they say no to the idea of research call]:</i> “Because this is new for us, we are calling patients afterwards to gather their perspectives. And we're looking to improve this process. An AHS evaluation specialist will be calling and they would appreciate your perspectives, but you don't have to talk to them if you don't want to.”  <i>[if hard objection]:</i> “is there anything you want to pass on that you'd like to tell me now?”</p>
<p><b>Questions (regardless of whether consult accepted)</b></p>	<p>Are there any additional questions or comments you have before we hang up?</p>
<p><b>Voicemail (after a couple tries of calling the patient):</b></p>	<p>Hello, (patient name). My name is (provider name) and I'm a nurse specialist calling from Alberta Health Services. Please call me back at _____</p>
<p><b>Call back to Answering Machine (automated)</b></p>	<p>Hello, you have reached the voicemail for Alberta Health Services Supportive care team. Please leave a message with your name and number, and a good time to call you back. We'll get back to you as soon as possible.</p>

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