Survey Instrument: Defining the Role of Occupational Therapy in Cancer Survivorship

1. What state or territory do you live in?

2. Which option best describes your geographical location?
   a. Capital City
   b. Regional Centre
   c. Rural
   d. Remote

3. Which option best describes your current work arrangement?
   a. Full time
   b. Part time
   c. Not working at present

4. If you are working do you:
   a. Work in permanent position
   b. Work in contract position

5. Which category best describes your primary work setting?
   a. State Public
   b. Commonwealth
   c. Private Service
   d. Education Institution
   e. NGO
6. Please indicate below the year of graduation from your OT qualifying program:

7. What type of OT qualification do you have?
   a. Undergraduate
   b. Master’s Entry
   c. Other (please specify)

8. How many total years would you estimate you have spent in an OT role since graduation (excluding gaps in service)?

9. Do you have any post graduate qualifications? If so, please specify below:

10. Have you undertaken any post qualification education in cancer care?
    a. Yes
    b. No

11. If yes, please specify topic, length of program and who presented it:

12. Please indicate your gender
    a. Male
    b. Female

13. Please indicate your age below:
14. Which option best describes your current area of OT practice? (Please choose one)

a. Acute Care
b. Administration / Management
c. Aged Care
d. Assistive Technology
e. Community
f. Disability
g. Environmental Modifications / Access
h. General
i. Health Promotion
j. Medical / Surgical
k. Mental Health
l. OH&S / Ergonomics
m. Oncology
n. Outpatients
o. Paediatrics
p. Palliative Care
q. Private Practice
r. Rehabilitation
s. Research
t. Not currently practicing in an OT role
u. Academia/ Teaching (University based)
v. Other (please specify)
15. Do you currently work with people with cancer?
   a. Every day
   b. Frequently
   c. Sometimes
   d. Rarely
   e. Never

16. If you currently work with people with cancer, what setting do you work in? THEN GO TO Q20
   a. Oncology ward of a hospital
   b. Dedicated oncology centre / clinic
   c. Post-surgical care
   d. In the community
   e. Rehabilitation
   f. Other (please specify)

17. If in Q16 you indicated you never work with people with cancer, have you done so in the past?
   a. Yes
   b. No

18. If you have worked with people with cancer in the past, what setting was it in?
   a. Dedicated oncology centre / clinic
   b. Post-surgical care
   c. In the community
   d. Rehabilitation
   e. Other (please specify)
19. Have you personally had a cancer diagnosis?
   a. Yes
   b. No

20. Have any members of your close family had a cancer diagnosis?
   a. Yes
   b. No

21. Have you ever acted in a caring role for someone with cancer
   a. Yes
   b. No

22. Which health professionals do you think currently are involved routinely in assisting people with cancer? Please select all which apply:
   a. General Practitioners (GPs)
   b. Nurses
   c. Occupational Therapists
   d. Oncologists
   e. Pharmacists
   f. Physiotherapists
   g. Psychologists
   h. Social Workers
   i. Speech Pathologists
   j. Surgeons
   k. Other (please specify) and add any comments
23. Which cancer or treatment related occupational performance issues do you think are most commonly addressed by OTs? Please choose as many as you feel are routinely incorporated into OT programs for people with cancer:

a. Anxiety & Depression
b. Cognitive changes
c. Decreased range of motion
d. Education
e. Equipment needs
f. Fatigue / Energy Conservation
g. Generalised Weakness
h. Joint & bone protection
i. Lifestyle Adjustment
j. Lymphoedema
k. Pain
l. Pressure areas prevention & management
m. Return to meaningful activities including leisure
n. Return to work
o. Side effects of chemotherapy
p. Stress Management
q. Other (please specify) and add any comments

24. Whilst all these barriers are recognised, which do you prioritise as the most important current barriers in providing occupational therapy to people with cancer? Please choose three:

a. Lack of funding
b. Lack of interdisciplinary communication
c. Limited referrals
d. Lack of funding for OT positions
e. Lack of recognition of the OT role by health professionals
f. Lack of experienced OTs
g. Occupational performance issues may arise after discharge
h. Lack of consumer awareness of the OT profession and what OT can offer
i. Dominance of the medical model in oncology management
j. Limited patient self-advocacy
k. OT best practice not well defined
l. Occupational performance issues may be managed by other disciplines (e.g. nurses)
m. Inadequate education in OT professional preparation programs
n. Inadequate availability of appropriate continuing professional education
o. Other (please specify) and add any comments

25. Do you think there any other issues faced by people with cancer that are currently not being addressed by occupational therapy and should be? Please specify:

26. When should people with cancer to be referred to occupational therapy? Please answer at least one option

a. Immediately following diagnosis
b. Upon commencement of treatment (e.g. chemotherapy, radiation)
c. During treatment (e.g. chemotherapy, radiation)
d. Upon discharge from treatment such as chemotherapy & radiation (e.g. when attending follow-up appointments)
e. Following surgical discharge from hospital
f. When functional issues identified by the person with cancer arise
g. In particularly complex cases
27. How would you prioritise ALL the following solutions to address any existing therapeutic gaps? Please rank the following in order of importance (1 = most important)

   a. Continued professional education
   b. Oncology pathways for OTs
   c. Research to identify effective OT interventions
   d. Promotion of potential role of OT to other disciplines
   e. Development of an evidence based protocol
   f. Increased communication between health professionals
   g. Creation of specific cancer care courses in tertiary education
   h. Offering more cancer care related placements for students
   i. Increased multidisciplinary programs
   j. Establishment of survivorship clinics
   k. Working with cancer support groups

28. Please add any comments about what needs to be done to address therapeutic gaps

29. Should there be a requirement for OTs to undertake extra training to work with people with cancer?

   a. Yes
   b. No
   c. Comments?

30. To enable OTs to undertake a greater role in cancer treatment what extra training and education would you prioritise as being the most beneficial? Please select at least one

   a. Medical management of cancer
   b. Physical treatment (e.g. lymphoedema care)
   c. Evidence base on effective treatment
d. Cancer and treatment side-effects, experience of medical interventions for people with cancer, symptom control

e. How to address emotional/psycho-social responses to cancer and its management

f. Cancer pathology

g. Communication with carers and family

h. Support needs of carers and family

i. Occupational performance issues associated with the diagnosis

j. Return to work processes

k. Other (please specify)

31. Thank you for taking the time to complete this survey. Do you have any further comments about occupational therapy's role in cancer treatment?