



Factors Influencing Nurses Using Symptom Practice Guides for Remote Support of Patients Undergoing Cancer Treatments

Baseline Survey

1. Have you reviewed the evidence-informed symptom practice guides by COSTaRS?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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2. Do you currently provide remote support (e.g. telephone, email) to oncology patients undergoing cancer treatment?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, go to Section 3</i>	<i>If no, go to Section 4.</i>

Section 3.0: To be completed by participants that provide remote support

- 3.1 During what hours are patients able to contact you or a colleague for remote support (e.g. telephone, email)?

<input type="checkbox"/> During regular hours only (Monday to Friday daytime)
<input type="checkbox"/> Weekend/evening coverage (mostly outside of regular hours)
<input type="checkbox"/> 24 hours a day, 7 days a week
<input type="checkbox"/> Other (<i>please specify</i>):

- 3.2 Do you document calls in the health record?

<input type="checkbox"/> No; <i>go to question 3.4</i>
<input type="checkbox"/> Yes, routinely
<input type="checkbox"/> Yes, as necessary

- 3.3 If yes, what format is used:

<input type="checkbox"/> Computer-based documentation
<input type="checkbox"/> Documented on paper-based forms that are placed in the health record

- 3.4 Do you use practice guides or guidelines for triaging symptom calls?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If no, go to 3.7</i>
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- 3.5 If yes, which practice guides/guidelines are used?
Please specify:

- 3.6. If yes, how are practice guides/guidelines used?

<input type="checkbox"/> Used primarily for orientation of nurses to their role in providing remote support
<input type="checkbox"/> Used by nurses as a reference (as needed) on their desk
<input type="checkbox"/> Used by nurses as an app on their smartphone
<input type="checkbox"/> Integrated into the computer-based documentation system
<input type="checkbox"/> Used as a paper-based documentation form
<input type="checkbox"/> Other (<i>please specify</i>):

- 3.7 What are three barriers interfering with you using symptom practice guides to provide remote support to patients undergoing cancer treatments (please list them from first priority to third highest priority)?

1st priority _____

2nd highest priority _____

3rd highest priority _____

**Section 4.0: To be completed by all participants**

Please tell us how much to you agree or disagree with the following statements.

	Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
Issues related to the development of the symptom practice guides					
4.1 The developers of the symptom practice guides are credible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2 The information provided within the symptom practice guides is supported by evidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.3 The symptom practice guides are well developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4 The development of the symptom practice guides was not influenced by vested interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.5 Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Issues related to the content and format					
The symptom practice guides contains essential information to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.6 Assess the symptom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7 Triage based on symptom severity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8 Review medications used for symptom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.9 Guide the patients to manage their symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.10 Summarize and document plan agreed upon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.11 The symptom practice guides are well-organized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.12 The evidence described in the symptom practice guides reflects my understanding of symptom management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.13 The evidence is presented in an unbiased manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.14 The evidence is up-to-date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.15 The practice guides are compatible with how I think patients undergoing cancer treatment should be supported when experiencing symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.16 Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For nurses using the symptom practice guides, these practice guides will					
4.17 Be acceptable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.18 Be simple to use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.19 Be too complex to use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.20 Guide nurses through the process of assessing, triaging and helping patients manage their symptoms in a logical fashion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.21 Improve the quality of symptom management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Modified from: Graham, I.D., Logan, J., Bennett, C.L., Presseau, J., O'Connor, A.M., Mitchell, S.I., et al., 2007. Physicians' intentions and use of three patient decision aids. *BMC Medical Informatics and Decision Making* 7, 1e10.

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	Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
4.22 Apply to a sizeable proportion of patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.23 Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Issues related to my current knowledge, skills and confidence in providing remote support to patients					
4.24 I need to enhance <u>my knowledge</u> about using symptom practice guides when providing remote support to patients undergoing cancer treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.25 I feel <u>confident in my ability</u> to use symptom practice guides when providing remote support to patients undergoing cancer treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.26 I need to enhance <u>my skills</u> in using symptom practice guides to provide remote support to patients undergoing cancer treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.27 Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Issues about implementation; from my perspective					
4.28 The symptom practice guides will be easy to use in our oncology program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.29 The symptom practice guides will save time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.30 There is clear direction within our oncology program that we need to provide remote support using practice guides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.31 There is adequate time to provide remote support using these practice guides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.32 Using these practice guides <u>will require</u> reorganization in the way we provide remote support within our oncology program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.33 Using these symptom practice guides <u>will not require</u> major changes to the way we currently providing remote support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.34 Using these symptom practice guides will help me tailor my support to patients' needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.35 Using these symptom practice guides will affect my relationship with patients in a positive way	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.36 Using these symptom practice guides will provide easily observable benefits to the patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.37 The symptom practice guides will be easy to experiment with before deciding to adopt them in our oncology program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
4.38 The symptom practice guides are likely to be used by most of my colleagues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.39 Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. How comfortable would you be using the symptom practice guides when providing remote support to patients in your oncology program?

<input type="checkbox"/> Very uncomfortable	<input type="checkbox"/> Uncomfortable	<input type="checkbox"/> Neutral	<input type="checkbox"/> Comfortable	<input type="checkbox"/> Very Comfortable
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6. How likely are you to tell someone about these symptom practice guides as a resource for providing remote support to patients undergoing cancer treatment?

<input type="checkbox"/> Not at all	<input type="checkbox"/> Very Unlikely	<input type="checkbox"/> Somewhat likely	<input type="checkbox"/> Likely	<input type="checkbox"/> Very likely
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7. What changes need to be made to the symptom practice guides to make them more relevant to your oncology program?

8. What are two to three factors that would make it easier for nurses to use these evidence-based symptom practice guides for providing remote support to patients undergoing cancer treatment (please list them in order of importance, starting with the most important)?

Most important _____

2nd highest _____

3rd highest _____

9. Do you have any further comments, questions or suggestions?



10. Please tell us a little about yourself...

10.1 What is your position within the cancer program?

- Staff nurse
- Supervisor / manager
- Advanced practice nurse
- Educator
- Other: _____

10.2 How long have you been working within this position?

- 6 or fewer months
- 7 to 12 months
- 1 to 2 years
- 3 to 5 years
- 6 to 10 years
- more than 10 years

10.3 Are you currently working: Full-time Regular part-time Causal

10.4 Your age range?

- Under 29
- 30 to 39
- 40 to 49
- 50 to 59
- 60 and older

10.5 Your sex Female Male

10.6 What education programs have you completed (check all that apply)?

- College diploma in nursing
- Undergraduate university degree in nursing
- Specialty certification in oncology nursing
- Graduate university degree in nursing
- Other _____

10.7 How long have you been working within your profession?

- Less than 2 years
- 2 to 5 years
- 6 to 10 years
- 11 to 15 years
- 16 to 20 years
- 20 to 25 years
- 26 to 30 years
- more than 30 years

10.8 Which province do you work in?

Thank you for completing the survey.