### **Cancer Support:**

### **Psychology and Social Work**



Service Information

#### What does the Cancer Support Team do?

The Cancer Support Team is a team of psychologists and social workers. The team aims to provide psychological and social support for patients and their whanau, from the point of high suspicion of cancer through to end of cancer treatment. The team will refer on to other support agencies outside of this timeframe, or if they believe that the patient will be better supported by another service.

#### Who can refer to the Team?

Referrals will only be accepted from healthcare providers (DHBs, GPs, PHOs) and cancer-related NGOs.

#### Who can I refer to the Team?

A patient can be referred if they fit the following criteria:

- 16+ years, or being treated under adult cancer services
- Patient of Capital & Coast DHB, Hutt Valley DHB or Wairarapa DHB (this includes people relocated to these DHBs for treatment)
- Have a high suspicion of cancer, or a new diagnosis of cancer (or recurrence) and are undergoing hospital-provided treatment (can include palliative treatment of a new diagnosis)
- Have a significant psychological or social need that is impacting on their ability to access diagnostics or treatment, or where their diagnosis/treatment is impacting on their social, cultural, emotional, and/or family wellbeing
- Patient consents to a referral

**Note:** Patients who do not meet these criteria can still be referred to their DHB Social Work Department.

# For what kind of issues should people be referred?

Our focus is on supporting people with high and/or complex needs. People who have more than one concern (as outlined below) are our top priority.

#### **Social Work:**

- Significant financial hardship (e.g., loss of income, increased expenses)
- Significant impact on family/children/relationships (e.g., caregiving responsibilities, family violence, caregiver stress)
- Anxiety/emotional distress
- Suspected or disclosed family violence
- Difficulty engaging with treatment because of various social stressors (e.g., socio-economic challenges, cultural/spiritual beliefs, language barriers, geographical isolation, limited support, dependent others).
- Co-existing issues (e.g., personal/physical/mental health) impacting on the ability to engage with health and social support services
- Difficulties managing the impact of change, loss and grief associated with the diagnosis and treatment
- Practical support (e.g., accommodation, maintaining independence, home supports)
- Planning for the future (e.g., wills, advanced care planning, child care)

#### **Psychology:**

- Mood disorder, major adjustment and anxiety related to diagnosis/prognosis
- Significant anxiety, panic or worrying a lot
- Difficulty engaging in, or making decisions about treatment
- Difficulty with sleep, pain, nausea, fatigue
- Difficulty communicating with whanau/friends and colleagues

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#### [continued]

- Significant impact on family members and relationship issues
- Grief and loss relating to their cancer diagnosis (e.g., loss of a body part, function or future hope)
- Distress about body image/appearance

# Can whanau/family members be seen by the Team?

Yes, whanau can be seen <u>with the patient</u>. If appropriate, and if the patient consents, we are able to see whanau without the patient present. If whanau members need their own individual support we will help them find an appropriate service.

#### Do patients need to consent to a referral?

Yes, patients need to understand that they are being referred to the Team and give their consent to this.

## What if my patient has a concern that isn't related to cancer?

We are unable to see people whose issues do not relate to cancer. Their psychological or social issue must be resulting from their cancer, or having an impact on their cancer treatment. If a patient is not appropriate for our service, we are happy to help them find the right service for them.

#### Who won't be seen by the Team?

There are some situations in which patients <u>will not</u> be seen by the Team. These include:

- Someone who has not consented to a referral
- Acute mental health issues (e.g., psychosis, delirium)
- Patients who are displaying acute risk of harm to themselves or others. Use existing referral pathways for these patients (e.g., Te Haika, Consult Liaison)
  - We will work collaboratively with primary mental health providers (e.g., Adult Mental Health Service, Addiction Service or Pain

- Service) for patients who also have cancerrelated issues; but will not be the primary support
- Patients having private treatment without shared care
- Patients who have finished hospital-provided treatment (i.e., surveillance, maintenance or palliative care)
- Normal grief reactions to cancer diagnosis
- Patients being treated in the paediatric cancer service
- Neuropsychological assessments
- Patients referred for psychological support who are already receiving counselling through the Cancer Society. The Cancer Society are able to refer to the service if they feel additional psychological support is needed

In these situations, we are happy to discuss where a patient might be best supported.

#### How do I refer a patient to the Team?

- 1. Obtain the patient's consent.
- Capital & Coast & Hutt Valley DHB referrers Complete the electronic referral form on
  MAP/Concerto or fax the paper referral form to
  the appropriate destination indicated on the
  form.
- Other referrers Fax the paper referral form to the appropriate destination indicated on the form.

### Can I refer via phone, email, or clinic letter?

We prefer that you complete the referral form. These forms are designed to give us the information we need to appropriately triage the patient and therefore give the patient the best care we can offer. We are happy to discuss a referral over the phone or via email; however the discussion needs to be followed up with a completed referral form.

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# How do I know whether to refer to Social Work or Psychology?

The social workers and psychologists in our team use the same referral form. If you are unsure whether to refer to psychology or social work, please provide as much information as you can about the patient's needs and the team will allocate the patient to the appropriate clinician.

### What happens when a referral is made to the Team?

Referrals are received by the Cancer Support Team between Monday-Friday. These are read, clarified as appropriate and followed up in a timely manner. The referrer will be emailed to let them know the outcome.

### How quickly will a patient be seen by the Team?

We aim to contact patients within 5 days of receiving a referral. Depending on the service demands an appointment is usually offered within 1-3 weeks.

# How do I talk to a patient about seeing a psychologist or social worker?

How you talk with a patient about seeing a psychologist or social worker will affect how they see the service and whether or not they want to engage.

First, it is important to explain to the patient that you would like to refer them to the Cancer Support Team. You could then say something like "the Cancer Support Team is a team of social workers and psychologists. It's their job to help people cope with the emotional and practical challenges that go along with having cancer".

Second, it's also important to normalise a patient's distress as often they feel as if they should not be distressed, or being distressed means they aren't coping. You might say something like "lots of

people find it a stressful time and like to get some support from somebody outside their immediate family and friends".

#### Where are patients seen?

We try to see patients at a convenient location for them. Depending on where they are, it could be at the hospital, a medical practice, the Cancer Society, or a community centre. In some circumstances we may offer them a home visit.

#### How do I contact the team?

The team welcomes any queries, thoughts or concerns you may have. Please contact us using the 'Contacting the Cancer Support Team' details below.

#### **Contacting the Cancer Support Team**

#### **Capital & Coast DHB**

**Phone:** (04) 806 2780

or

**Phone:** (04) 806 2786

#### **Hutt Valley DHB**

**Phone:** (04) 570 9620 ext.8981

or

**Phone:** (04) 570 9620 ext.8355

#### Wairarapa DHB

Phone: (06) 946 9800 ext.4334

or

**Phone:** (04) 570 9620 ext.8355