

BACKGROUND

To improve quality of cancer care, screening for distress and supportive care needs is recommended. In the clinical field, screening is preferred to be short to be easy implementable in the busy everyday practice. However, it should be considered if this is sufficient to contribute to comprehensive and quality care. In this study data obtained with 'one single help-question' is compared to the results of more extensive and differentiated needs assessment.

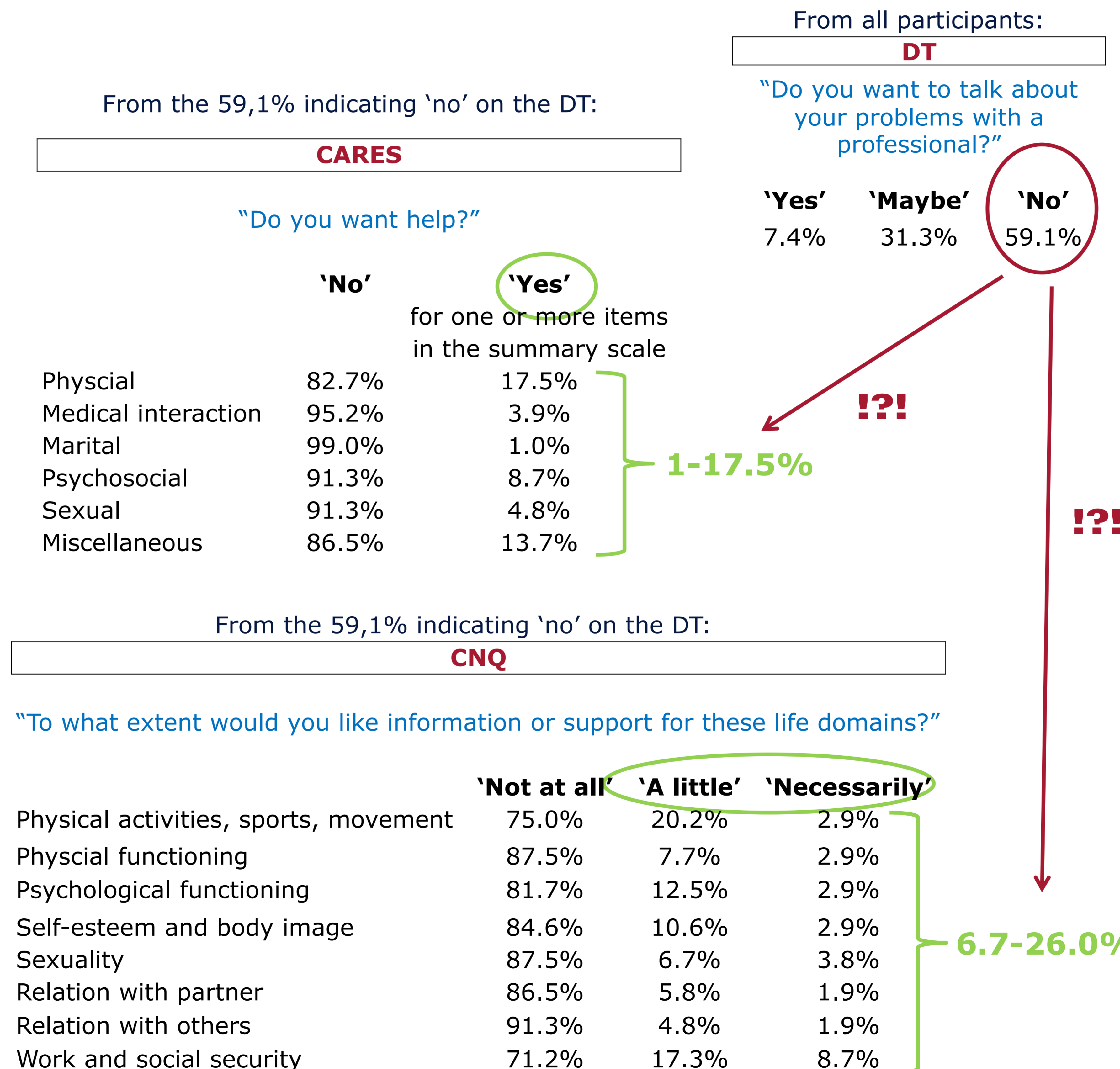
METHODS



▪ Socio-demographic and medical data

- **Distress Thermometer (DT)** and a problem list on practical problems, family problems, emotional problems, spiritual concerns and physical problems and **one single help-question** 'Do you want to talk about your problems with a professional?'
- **Care Needs Questionnaire from Pauwels and Van Hoof (CNQ)** the **question** 'Do you want information or support?' for **8 domains of life**: physical activities/sports/movement, physical functioning, psychological functioning, self-esteem and body image, sexuality, relation with partner, relation with others, work and social security.
- **Cancer Rehabilitation Evaluation System (CARES)** the **question** 'Do you want help?' following **all 139 problem statements** (min.93-max.132), taken together in 6 sum scores: physical, medical interaction, marital, psychosocial, sexual, miscellaneous.

RESULTS



CONCLUSION

Participants indicating not to be in need for help when answering 'one single help-question', at the same time mention several care needs when 'differentiated needs assessment' is applied.

RESEARCH AND PRACTICE IMPLICATIONS

In research and in clinical practice a balancing act takes place in the development and choice of patient reported outcome tools (PRO). Completeness and time investment for patients and staff to work with the instrument both play a major role in needs assessment. Although screening with one single help-question is interesting according to the time-criterion, results of this study seem to indicate that differentiated needs assessment could give more accurate input for the organization of comprehensive quality cancer care.

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