



A multidisciplinary team approach to cancer care

General information
and support services

Cancer Council Helpline

13 11 20

www.cancersa.org.au

This brochure aims to help you and your family understand about the multidisciplinary, or team approach, to planning and managing cancer treatment and care. It explains the role of the care team and outlines some of the benefits of this approach to cancer care.

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How is cancer treated?

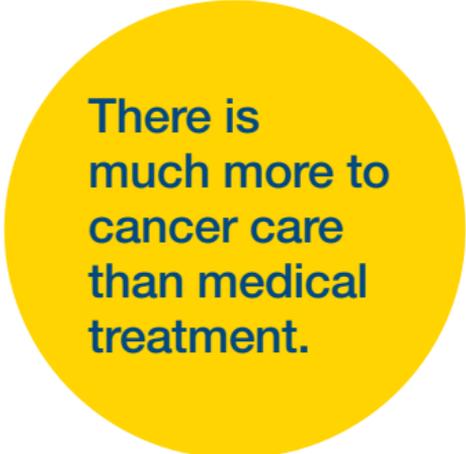
There are over 200 different types of cancer which are treated in quite different ways. Many cancers can be cured, others can be controlled and symptoms such as pain can be relieved by current treatments. Many factors will affect how any cancer will behave, including how early it is found and treated.

There is no single, reliable treatment that can be used for all types of cancer. Currently the main methods of treating cancer are:

- **surgery** – to remove the cancerous tissue
- **radiotherapy** – to destroy the cancerous cells by radiation
- **chemotherapy** – using drugs to destroy or slow the growth of cancer cells
- **hormone therapy** – used to control cancers sensitive to hormones.

These treatments may be used alone or in combination.

Having cancer affects more than just your physical health. It can cause worry and distress for you, your family and friends, as well as raising practical issues. Supportive care helps to meet the social, psychological, physical, informational and spiritual needs that occur during your illness.



There is much more to cancer care than medical treatment.

What is multidisciplinary cancer care?

Multidisciplinary or team care brings together a group of health professionals with appropriate skills to consider your treatment and care options. They develop the best care plan for you together, rather than each specialist seeing you individually to give their opinion. The team considers all of your medical, physical and supportive care needs, along with other factors that may affect you.

There is no one model of delivering team care. Factors that may influence your care include:

- the type of cancer you have
- the health professionals that are involved in your care
- the treatment services you need
- whether those services are provided in the private or public sector
- your personal choices.

A team approach to cancer care has been adopted in many countries and is recommended as best practice for Australia.¹

There is evidence that the team approach reduces delays in treatment and referral to services and improves patients' emotional well-being.²

You may wish to ask your doctor about a team approach to planning and coordinating your cancer treatment.

How can team care benefit me?

This approach gives you access to the right team of health professionals to plan the best treatment for your cancer type based on current research. Together they can review all the factors that may affect your treatment to help prevent unexpected health problems and identify your supportive care needs. Other benefits may include:

- faster access to treatment and referral to services
- improved care coordination meaning less duplication of medical tests and your health details
- less travel to Adelaide for treatment planning (for regional patients)
- greater opportunity to hear about clinical trials
- receiving appropriate, consistent information as the person giving it knows the team's plan for your care and your personal choices.

To make sure you receive the best possible care, the team will meet to review your case and decide on the most effective and suitable treatment for you.

Who makes up the care team?

The care team often first meets when your cancer is diagnosed. It includes all of the health professionals involved in:

- diagnosing and treating your cancer
- managing symptoms and side effects
- providing support to manage feelings or concerns that may arise during your care.

Your team may include surgeons, general practitioners (GPs), oncologists (cancer specialists), pathologists and radiologists, specialist nurses, psychological services, allied health and palliative care services.

The members of the team may change over time to provide the most appropriate care at each stage of your cancer experience. Different health professionals may be involved at diagnosis and treatment and continue as needed through to survivorship or palliative care.

What happens before the meeting?

Your treating specialist or GP will ask for your consent before discussing your ongoing cancer care and treatment at a team meeting. Gaining your consent ensures that you understand:

- the purpose of the meeting and the areas to be discussed
- that team members will share information about you and how they will protect your privacy
- Medicare Benefit Scheme (MBS) billing processes and any relevant out-of-pocket costs
- how the information discussed will be stored and who can read it
- the review of medical records for quality improvement purposes.

You will have the chance to ask questions and to seek more information. By consenting, you are agreeing that the team can discuss and manage your ongoing care. You can withdraw your consent at any time.

You can ask a team member to represent your views and needs at these meetings. This may be your GP, treating specialist or specialist nurse.

What happens at the meeting?

The team will review your medical history and your test results. Any team member can share relevant health or personal information they know about you at the meeting unless you request otherwise.

Everyone at the meeting must follow the same rules for confidentiality as they would if meeting with you in person.



The team will discuss all the information that is important in developing the best care and treatment plan for you.

What happens after the meeting?

After the meeting, the team will write down their recommendations for your treatment and document them in your medical records. The person managing your care will discuss this proposed treatment plan with you at your next appointment. You will have the chance to ask questions and to discuss your wishes about the treatment options.

Ideally the team will meet regularly to plan your ongoing care. Through this process each team member understands the care plan and knows who to refer you to. Importantly, you remain central to all care the team provides.

Depending on the type of cancer you have, the team may only advise on and plan the best treatment for you. Your GP, oncologist or surgeon may then manage your ongoing care.

If a cure is no longer possible, or if you choose not to continue treatment, you may wish to discuss your future care with your GP. This may include referral to local health and community nursing services or palliative care.

My care team:

Care coordinator

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Name:

Phone:

.....

Other team members

.....

Name:

Phone:

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For more information

Call **Cancer Council Helpline 13 11 20** if you want to talk with a nurse counsellor, for general information about cancer and its treatment, for information about services and resources available in your local community or if you want to borrow books or other resources.

For information in languages other than English, call the Translating and Interpreting Service on 131 450 and ask them to phone the health professional managing your cancer care. This is a free service.

If you have a speech or hearing impairment, contact the National Relay Service and ask for **Cancer Council Helpline 13 11 20** or the service you require by:

- TTY speech and hearing impaired users: phone 133 677
- Speak and listen users: phone 1300 555 727
- Internet relay users: connect to the NRS www.iprelay.com.au/call/index.aspx

References

- 1 CanNET. Multidisciplinary Care: Overview. [2007; cited]; Available from <<http://www.canceraustralia.gov.au/canet-homepage/multidisciplinary-care/overview.aspx>>
- 2 Victorian Government Department of Human Services. Achieving best practice cancer care: A guide for implementing multidisciplinary care. Melbourne: Metropolitan Health and Aged Care Services Division. 2007. <<http://www.health.vic.gov.au/cancer/docs/mdcare/multidisciplinarypolicy0702.pdf>>.