

Guidelines for the Referral to Psychology Services for Adults with Cancer, their Carers and Family.

Version History

Version	Date	Summary of change/ process
0.1	10.03.10	Document draft developed by Robin Paijmans
0.2	15.3.10	Following consultation with the Psychological Support NSSG. With comments from Lara Barnish, Inigo Tolosa Re-circulated to the Lead Cancer Nurses and the Psychologists.
0.3	08.04.10	Following consultation and for comment by the Supportive and Palliative Care NSSG
0.4		Following consultation. Resubmitted to the Psychological Support NSSG for final approval 04.05.10
0.5	27.05.10	With Walsall details added. For submission to the clinical governance sub group.
0.6	02.06.10	Comments from Governance Committee Sub-Group
1.0	24.11.10	Approved by Governance Committee Sub Group

Date Approved by Network Governance	November 2010
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Date for Review	November 2013
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1. Scope of the Guideline

This guidance has been produced to support the following:

- The referral of patients affected by cancer to psychology services.
- The referral of family or carers of patients affected by cancer to psychology services.

2. Guideline Background

2.1 It is well recognised that some cancer patients benefit from access to a clinical psychology team specialising in cancer and palliative care. The Supportive and Palliative Care Improving Outcomes Guidance (2005) outlines the 'levels' of care patients should be able to expect, and also the numbers of patients likely to benefit from specialist intervention.

- 2.2 Within Pan Birmingham Cancer Network cancer psychology services are currently provided at the following NHS Hospital Trust sites:
- a. *Sandwell and West Birmingham Hospitals NHS Trust:*
Sandwell Hospital (inpatient and outpatients)
City Hospital (outpatients)
 - b. *University Hospitals Birmingham NHS Foundation Trust:*
Queen Elizabeth Hospital (inpatients and outpatients)
 - c. *Heart of England NHS Foundation Trust:*
Birmingham Heartlands Hospital (inpatients and outpatients)
Good Hope Hospital (inpatients and outpatients)
 - d. *Walsall Community Health Trust:*
Greybury House, Bridge Street, Walsall (out-patients)
Manor Hospital (in-patients)
Little Bloxwich day hospice
Cancer Information Support Services, Hatherton Road, Walsall
Home visits

Guideline Statements

3 Screening

- 3.1 All staff referring to cancer services should be familiar with the accompanying document: *Background to the Cancer Psychology Referral Guidelines* (www.birminghamcancer.nhs.uk) .
- 3.2 All patients should have access to all levels of psychological support at all parts of the pathway of care, from diagnosis onwards, and by referral from primary, secondary and tertiary health care services.
- 3.3 All health professionals working with cancer patients should regularly screen patients for distress and elicit their concerns. In many cases such distress and concerns can be contained and addressed before a referral to the cancer psychology service is required.
- 3.4 As a minimum, patients should have a holistic needs assessments (HNA) as outlined below, however many patients will have a need for assessment identified in between these times.
- 3.5 All patients should have a HNA at regular intervals in their cancer care pathway and access to a level 2 psychological support trained person throughout. HNA should occur:
 - a. Around (but not at) the time of diagnosis;
 - b. Around the start of treatment; (these two often form one screening A & B)
 - c. At the end of treatment;
 - d. Around the time of diagnosis of recurrence;
 - e. Around the time of recognition of incurability;
 - f. Around the time at which dying is diagnosed;
 - g. At times when the patient requests it.

- 3.6 Each person must be assessed with reference to their own norms and expectations, as well as those of their family and cultural background.
- 3.7 HNA assessment should be performed by staff at, or working towards, level 2 (psychological support), or others trained in HNA, and experienced in cancer care.

4 Referral to the Cancer Psychology Services

4.1 Who to refer

- 4.1.1 Patient or family members who are significantly distressed should be referred to the cancer psychology services. **(That is, to the extent that engagement in treatment, maintenance or resumption of activities of daily living or important relationships are threatened, and this cannot be sufficiently addressed by level 1 or level 2 intervention).**

Examples of significant distress can be found in 4.1.2 - 4.1.4 below.

4.1.2 Complex challenges may arise when:

- a. The patient feels unable to prepare for treatment because (s)he does not get enough information or does not understand it;
- b. The patient does not feel able to establish a relationship of trust with the professionals who treat them;
- c. The patient or family already has (had) other serious problems and stresses in their life that make significant demands on their coping resources;
- d. The patient does not have enough support from family or friends during the cancer journey;
- e. Problems in maintaining daily life functioning (e.g. work, finances, shopping, household tasks, looking after the children) are not addressed.

Such issues are more likely to warrant psychological intervention at level 3.

4.1.3 Other risk factors include:

a. In the patient/family:

- A history of psychiatric disorder
- Social isolation
- Dissatisfaction with past medical care
- Passive coping (i.e. not seeking information/not talking to friends/family)

b. In the cancer:

- Limitation of daily life activities
- Disfigurement
- Poor prognosis/survival rates

c. *In the treatment:*

- Disfigurement
- Isolation (such as in e.g. bone marrow transplant or thyroid radiation therapy)
- Debilitating or distressing side effects
- PTSD following surgery/treatment

Such issues are more likely to warrant psychological intervention at level 4.

4.1.4 The cancer psychology Service provides assessment, intervention and support for patients/families who are struggling to cope with:

- a. Understanding, engaging in, and coping with cancer treatment ;
- b. Pain, discomfort, fatigue and other side-effects;
- c. Feelings of depression, hopelessness, anxiety and anger;
- d. Managing the demands of home, working and family life while caring for themselves;
- e. Adjustment to loss and change in physical functioning;
- f. Adjustment to loss and change in physical appearance;
- g. Adjustment to loss and change in self-esteem and sense of self;
- h. Adjustment to loss and change in sexual functioning and intimacy;
- i. How cancer affects personal and social relationships;
- j. Adjustment to loss and change in life roles and aspirations;
- k. A sense of uncertainty about the future and life expectancy.

4.1.5 The above list should not be regarded as an exhaustive or mutually exclusive list of adjustment difficulties that cancer patients and their families may encounter. Rather, it is more reflective of reality to view the above challenges as often interconnected and overlapping, and occurring against a backdrop of people's cultural, spiritual, practical and socio-economic circumstances.

4.1.6 For support with patients whose psychological distress warrants intervention at level 1 or level 2, or for those patients who refuse a referral to the cancer psychology services, the health professional can contact the service for advice and support. The cancer psychology services supports health care professionals by co-working and by offering advice, training, supervision, case discussion and consultation either 1:1 or in group meetings, workshops and presentations.

4.2 How to Refer

- 4.2.1 Referrals to the service in Birmingham* can be made by all hospital cancer care staff, and to the Walsall service via Consultants, CNS' or Macmillan Nurses.
- 4.2.2 Before making a referral to the Cancer Psychology Service this should be discussed with the patient to ensure that they have understood the purpose and agreed to the referral.
- 4.2.3 To make a referral in **Birmingham** the referral form in appendix 1 should be used. These can be downloaded from the Pan Birmingham Cancer Network website <http://www.birminghamcancer.nhs.uk> / or from the local hospital intranet. A copy can also be requested from the cancer psychology service directly by email : cancerpsychology.birmingham@nhs.net or telephone (0121 - 627 5758). It can be completed on the computer and sent as an e-mail attachment to:cancerpsychology.birmingham@nhs.net or alternatively printed and posted to: *Cancer Psychology Services, Cancer Centre, University Hospital Birmingham B15 2TH.*
- 4.2.4 To make a referral in **Walsall** the referral form in appendix 2 should be used. A copy of this form can be requested from the Walsall Community Health psychology services by telephone (01922 - 858450). It can be completed on the computer and sent as an e-mail attachment to: tracy.russell@dwmh.nhs.uk. **Please note this is not a secure account. For referrals sent from outside of this organisation please use the fax number provided below.** Alternatively it can be printed and posted to: *Psychology Services (Walsall Community Health), Greybury House, Bridge Street, Walsall, WS1 1EP* or faxed to fax number: 01922 858453.
- 4.2.5 The Network patient information for referral to psychological services (appendix 3) should be offered to patients being referred.

4.3 Exclusions

The cancer psychology service would not normally accept referrals of:

- a. People with expectable and manageable short-term (transient) distress;
- b. Pre-existing addictions (refer to Advice and Counselling on Alcohol and Drugs);
- c. Psychotic or bipolar (manic depression) episodes, although advice can be given on the support of patients with these diagnoses. It is important to maintain contact with existing mental health support services;
- d. Pre-existing psychological problems that are not related to, and do not significantly interact with the cancer experience. For example phobias will generally not affect the cancer experience, but a needle phobia or

* Birmingham includes all of PBCN catchment except Walsall; i.e. Birmingham, Solihull and Sandwell areas.

- blood/injury phobia may do so. This can be hard to judge so if in doubt a psychologist should be consulted;
- e. Those demonstrating severe anti-social, violent or criminal behaviour;
 - f. People below the age of 18 (although exceptions can be made if appropriate, e.g. Young Persons' Unit and 16 or 17 year olds).

The cancer psychology service cannot offer an emergency crisis service. In case of an emergency mental health referral please contact the Hospital Liaison Psychiatry Team (in-patients) or the GP (out-patients).

4.4 What to expect after Referral

On receipt of the form an out-patient will be offered an appointment within a week, with a waiting time no longer than 31 days. In-patients are seen within 2 working days. Out-patients or family members are contacted both by telephone (where possible) to offer a choice of appointments and venues, and also in writing. The referrer and the patient's GP are informed of the appointment in writing. In principle the patient or family member can be seen at any hospital of their choice where a cancer psychologist is based.

Authors

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Approval Date of the Governance Committee Date: November 2010

Approval Signatures

Pan Birmingham Cancer Network Governance Committee Chair

Name: Doug Wulff



Signature: Date: November 2010

Pan Birmingham Cancer Network Manager


Name: Karen Metcalf

Signature: 

Date: November 2010

Network Site Specific Group Clinical Chair

Name: Inigo Tolosa

Signature: 

Date: November 2010



Pan-Birmingham Cancer Psychology Services Referral Form

Hospital:

Patient Details:

Surname:		Forename:		Title:
D.O.B:		Sex:	Ethnicity:	
NHS number:		PID/V/RXK number:		
Address:				
City/Town:				
Postcode:		Phone Number:		
GP Name:				
GP Address:				
City/Town:				
Post Code:		Telephone Number:		

Referrer Details:

Date of referral:		Referred by:		
Referrer Profession:		Specialty:		
Referrer address:				
City/Town:				
Postcode:		Phone Number:		

Referral Details:

<i>In- or Out-patient:</i>	<i>Cancer site:</i>	<i>Current status:</i>
Diagnosis:		
Reasons for referral? What are the patient's psychological difficulties?		<i>Patient knows about referral and agrees to it?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
Any other details that would be helpful for us to know? (including mobility status/other health professionals and services involved) or any issues of risk		



Cancer Psychology Service - Referral Route & Criteria

Referral Route:

This service is available for patients, their families and carers. Referrals can be made by all cancer and palliative care nurses, doctors and surgeons. Referrals need to be made with this form. Fill it out on screen and then save the result to your computer. Then send the form you just saved as an e-mail attachment to: cancerpsychology.birmingham@nhs.net

Alternatively, the saved form can also be printed out and sent by post or fax to:

Ms Karen Bassett

**Cancer Psychology Service Secretary
Cancer Centre, Queen Elizabeth Hospital
University Hospital Birmingham, B15 2TH**

For any queries please call: **0121 627 5758** (or inside Queen Elizabeth Hospital ext. **6358**)

If you are unsure whether a referral to psychology is appropriate, please contact your local cancer psychologist by telephone or e-mail. If you are unsure how/where, please contact the cancer psychology secretary and she can tell you who covers your hospital.

Referral Criteria:

This service is funded to provide a specialist level of support in helping people (both patients and partners/relatives) cope with cancer, its treatment and its consequences. Some examples of the issues we work with are:

- coping with a sense that the future is uncertain;
- coping with how cancer affects relationships;
- managing the demands of home and family life while caring for oneself;
- feelings of depression, anxiety and anger;
- coping with disfigurement and disability;
- coping with adjustment, change, loss;
- coping with pain, discomfort, fatigue and treatment side-effects;
- coping with how cancer affects sexual functioning;
- coping with how cancer affects self-esteem and sense of self.

It is important that the patient agrees to being referred to a psychologist. Patients will generally be offered appointments at the Hospital, although some adjustments can be made if they are medically unfit to travel. The cancer psychology service cannot offer an emergency service. In case of an emergency mental health referral, please contact liaison psychiatry.

Other Services:

In addition to helping patients, families and carers, we support health care professionals by co-working and by offering advice, training, case discussion, supervision and consultation either one to one or in peer group meetings, workshops and presentations.



Cancer Psychology Services Referral Form

Referral Date:

Priority: Urgent (within 7 days) Moderate (within 2 weeks)
 Mild (within 1 month) Low (within 1 – 2 months)

Appointment Type: Home Visit Out Patient/Clinic In Patient (if applicable)
(Home Visits are for patients with mobility issues or terminal diagnosis)

Patient Details:

Surname:		Forename:		Title:
D.O.B:		Sex:	Ethnicity:	
NHS number:		P/V/RXK number:		
Address:				
City/Town:				
Postcode:		Phone Number:		
GP Name:				
GP Address:				
City/Town:				
Post Code:		Telephone Number:		

Referrer Details:

Date of referral:		Referred by:
Referrer Profession:		Specialty:
Referrer address:		
City/Town:		
Postcode:		Phone Number:

Referral Details:

Cancer site:	Current status:
Diagnosis:	
Reasons for referral? <i>Patient knows about referral and agrees to it?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
What are the patient's psychological difficulties?	
Any other details that would be helpful for us to know? (including mobility status/other health professionals and services involved) or any issues of risk)	

Cancer Psychology Service - Referral Route & Criteria

Referral Route:

This service is available for patients, their families and carers. Referrals can be made by all cancer and palliative care nurses, doctors and surgeons. Referrals need to be made with this form which can be sent by post, faxed or e-mailed as an attachment (more referral forms are available from the cancer psychology department). Please send referrals as follows:

For Community Home Visits/Hospice to: Dr Helen Guy
Macmillan Clinical Psychologist

For Out Patients/In Patients to: Dr Shradha Lakhani
Lead Clinical Psychologist
Palliative Care/Oncology

Psychology Services (Walsall Community Health) Greybury House, Bridge Street, Walsall, WS1 1EP

Telephone: 01922 - 858 450 Fax: 01922 - 858 453

[e-mail: tracy.russell@dwmh.nhs.uk](mailto:tracy.russell@dwmh.nhs.uk) **Please note this is not a secure account. For referrals sent from outside of this organisation please use the fax number provided above.**

For any queries please call: **01922 858 450** and ask for Barbara or Tracy (secretaries).

If you are unsure whether a referral to psychology is appropriate, please contact your local cancer psychologist by telephone or email. If you are unsure how/where, please contact the cancer psychology secretaries and they can tell you who covers your area.

Referral Criteria:

This service is funded to work with people (both patients and partners/relatives) struggling to cope with cancer, or issues arising as a result of their cancer, where the health professionals involved feel it is necessary to provide a specialist level of support. Some examples of the issues we work with are:

- coping with a sense that your future is uncertain;
- coping with how cancer affects your relationships;
- managing the demands of home and family life while caring for yourself;
- feelings of depression, anxiety and anger;
- coping with adjustment, change and loss;
- coping with pain, discomfort, fatigue and treatment side-effects;
- coping with how cancer affects your sexual functioning;
- coping with how cancer affects self-esteem and sense of self.

It is important that the patient agrees to being referred to a psychologist. Patients can be offered out patient appointments, in patient appointments or home visits but only if the patient is unable to travel due to ill health. **The cancer psychology service cannot offer an emergency crisis service.** In case of an emergency mental health referral please contact: Dorothy Pattison Hospital (out of working hours) on: **01922 - 858 000**.

Other Services:

In addition to helping patients, families and carers, we support staff by co-working and by offering advice, training, case discussion, supervision and consultation either one to one or in peer group meetings, workshops and presentations.



Psychology Services

for people with cancer and their

What is this leaflet about?

Your doctor, nurse or other health care professional who knows you well, may suggest you talk to a cancer psychologist. Cancer affects the whole person, not just the body, and they know you may benefit from talking about the emotional effects of your illness. Cancer also affects the family, so even if it is not you who has cancer but someone close to you, you may still feel affected and could benefit from talking to someone in confidence.

This leaflet explains what a cancer psychologist is, what difficulties they can help you with, and how you can be referred to this service.

What do psychologists do?

Psychology is the science of human behaviour: what makes people think and feel and behave the way they think and feel and behave.

Clinical psychology is concerned with how the way that somebody thinks and feels and behaves may cause them serious problems in their daily life functioning. It is a common belief that Clinical Psychologists only work with people who have mental health problems, but this is not the case. They also specialise in helping people cope with extraordinary circumstances.

Cancer psychologists specialise in helping people cope with and adjust to the emotional stresses and strains that can accompany serious physical illness. It is the situation that is abnormal, NOT the person or their reaction.

What is the role of psychologists working with cancer patients?

You may have talked to a number of health care professionals, family members and friends about your illness and its impact, your worries and concerns, your feelings, how you try to manage carrying on with your daily life or about how treatment affects

you. You can talk to a psychologist about these issues also, in a confidential setting. The sorts of difficulties they can help you with include:

- coping with a sense that your future is uncertain;
- coping with how cancer affects your relationships;
- managing the demands of home and family life while caring for yourself;
- feelings of depression, anxiety and anger;
- feeling unhappy about the way you look;
- coping with adjustment, change and loss;
- coping with pain, discomfort, fatigue and treatment side-effects;
- coping with how cancer affects your sexual functioning;
- coping with how cancer affects self-esteem and sense of self.

Seeing a psychologist is just like seeing any other health professional. It is an opportunity to talk with someone trained in emotional well being. It does *not* mean that you are weak or mentally ill. You can think together about different and perhaps more effective ways of coping with your issues and concerns about having cancer. Many people who have seen a psychologist say it is helpful to discuss their situation in confidence with someone outside of the family.

Where can I find a psychologist?

Every Hospital Trust in Birmingham has access to the cancer psychology service. This is based at the Cancer Centre of the Queen Elizabeth Hospital in Birmingham, but its psychologists also work in Sandwell General Hospital, City Hospital, Heartlands Hospital and Good Hope Hospital. The service employs qualified *Clinical Psychologists* and *Counselling Psychologists* who specialise in how cancer affects people's psychological functioning and wellbeing. Some of these posts have been funded by Macmillan Cancer Support.

The cancer psychology service does not only see patients but also supports, trains and advises other health professionals working with cancer patients. It also supervises *trainee clinical psychologists* as part of their professional training and experience.

How can I get to see a psychologist?

If you want to talk to a psychologist, but this opportunity has not yet been offered to you, you can ask for this yourself. Simply ask the consultant or cancer nurse to refer you to the cancer psychology service.



What happens once I have been referred to a psychologist?

If you agree to see a psychologist, you will be sent an appointment letter. The appointment will normally be at the hospital closest to where you live; the appointment letter will tell you exactly where this will be. If it is easier for you to travel to another hospital, it can generally be arranged for you to see a psychologist there instead.

Chartered Psychologists are qualified psychologists who have had a minimum of six years of accredited training, and are approved by the **British Psychological Society** as professionally competent practitioners. Psychologists are NOT medical doctors like Psychiatrists; they do not prescribe medication, and do not admit people into hospital.



The
British
Psychological
Society

Chartered Psychologist

<http://www.bps.org.uk/>

What will happen at the appointment?

The first meeting is an opportunity for you to get to know the psychologist, to discuss the problems you would like help with, and to see if you would like to meet again. The appointment will usually last between 30 and 60 minutes. You can be seen by yourself, with your partner, or even with your whole family – the choice is yours.

After the first meeting you agree together whether to meet again, how often and for how many sessions. You will normally be offered between 1 and 6 appointments, or more if necessary. Appointments can be arranged for any time between 9am and 4pm on normal working days. Appointments may be on a regular basis e.g. weekly, fortnightly, monthly or just every now and again, depending on what you need. You can decide at any time that you no longer need an appointment, but please do let them know so that the available time can be given to another patient.

Some patients have found it particularly useful and supportive to share experiences with others going through similar difficulties, so group sessions are also regularly offered.

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CANCER SUPPORT**

Macmillan Cancerline:
0808 - 808 2020
www.macmillan.org.uk

Your Psychologist:

Telephone:

Cancer Psychology Services:

Telephone: 0121 - 627 5758

e-mail: cancerpsychology.birmingham@nhs.net

