

Needs Assessment

Welcome

How **important do you feel it is** for a patient impacted by cancer to be informed about potential sexual health side effects?

At diagnosis / before initiating treatment

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

After completing treatment

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

Maintenance/ Chronic Treatment/ Metastatic

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

Surveillance phase

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

Long-term survival phase

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

In your practice setting how confident are you that sexual health concerns are actively discussed with patients impacted by cancer?

At diagnosis / before initiating treatment

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

After completing treatment

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

Maintenance/ Chronic Treatment/ Metastatic

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

Surveillance phase

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

Long-term survival phase

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

When a patient is impacted by cancer, how important do you feel it is to ...?

Identifying sexual health care concerns

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

Know how to initiate a conversation about sexual health concerns

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

Provide resources and/or refer for sexual health care concerns

☐ Not at all important ☐ Slightly important ☐ Important ☐ Very important

In your practice setting how confident are you that sexual health concerns are actively discussed with patients impacted by cancer?

Identifying sexual health care concerns

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

Know how to initiate a conversation about sexual health concerns

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

Provide resources and/or refer for sexual health care concerns

☐ Not at all confident ☐ Slightly confident ☐ Confident ☐ Very confident

Is there a process in your practice setting to identify sexual health concerns of patients impacted by cancer?

☐ Yes ☐ No ☐ Unsure

Does your practice setting use an assessment questionnaire to identify the sexual health concerns of patients impacted by cancer?

☐ Yes ☐ No ☐ Unsure

How are patients impacted by cancer informed of available resources and services for their sexual health concerns? (Select all that apply)

☐ Provider ☐ Through EMR
☐ Nurse Navigator ☐ Literature Packet
☐ Patient Navigator ☐ Other _____
☐ Social Worker ☐ Unsure

☐ For my patients I actively address cancer related sexual concerns.

☐ I have easily accessible resources and referrals for patients with cancer related sexual health concerns. (ie. sex counselors, therapists, books, websites).

☐ The cancer related sexual health care concerns of patients are met by the services offered at my facility.

Having a script to introduce the topic of sexual health would improve my ability to initiate conversations with patients impacted by cancer.

☐ Yes ☐ No ☐ Unsure

I would attend an educational seminar focused on sexual health concerns of patients impacted by cancer.

☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree

What patient facing educational materials and resources would be beneficial for your practice setting? (check all that apply):

☐ Patient Psycho-social concerns ☐ Fertility Considerations ☐ Health and Cancer
☐ Intimacy Following an Ostomy ☐ LGBTQ+ Sexual Health ☐ Anal Intimacy
☐ Breast Cancer & Lymphedema ☐ Young Adults & Sexual Health ☐ Pelvic Floor Therapy
☐ Lubricants ☐ Challenges ☐ Minimize Symptoms of ADT
☐ Tackling Low Libido ☐ New Patient Brochure on Sexual (Androgen Deprivation Therapy)

What provider resources, topics, and communication aids would be beneficial for your practice setting? (check all that apply)

☐ Welcoming LGBTQ+ Patients ☐ Signage and Messaging for Patient Waiting Areas
☐ Trauma Informed Care Approach ☐ Guide for Developing a Referral Roadmap for Your Patients
☐ How to Perform a Pain Focused Pelvic Exam

What are the systemic barriers you face when caring for individuals impacted by cancer with sexual health concerns? (Check all that apply)

☐ Lacking educational handouts/ resources for patients ☐ Lack of sexual health care training
☐ Availability of providers ☐ Allotted time with patient
☐ Privacy/ designated clinic space ☐ Lack of support from the healthcare system
☐ Adequate staffing ☐ Billing Issues
☐ No formal referral process ☐ Other
☐ Availability of interpreter services

What are the personal barriers when caring for individuals impacted by cancer with sexual health concerns? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Primary site of cancer | <input type="checkbox"/> Relationship status |
| <input type="checkbox"/> Type of treatment received | <input type="checkbox"/> Religious and / or cultural differences |
| <input type="checkbox"/> Patient age | <input type="checkbox"/> Presence of a third party |
| <input type="checkbox"/> Patient Sex/ gender | <input type="checkbox"/> Other |
| <input type="checkbox"/> Patient Sexual orientation | |

Profession:

- | | | |
|---|---|--|
| <input type="checkbox"/> Nurse Navigator | <input type="checkbox"/> Surgical Nurse | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Radiation Therapist | <input type="checkbox"/> Social Worker | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Advanced Practice Provider | <input type="checkbox"/> Physical Therapist | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Oncology Nurse | <input type="checkbox"/> Mental Health Provider | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Radiation Nurse | <input type="checkbox"/> Medical Assistant | |

How long have you worked in oncology or a related field ?

Please provide any comments, concerns, or feedback related to providing sexual health care for patients impacted by cancer:

Are you interested in someone contacting you regarding sexual health care in patients impacted by cancer?

- | | | | |
|-------------------------------------|--------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> 1 -5 years | <input type="checkbox"/> 6 -10 years | <input type="checkbox"/> 11-15 years | <input type="checkbox"/> > 15 years |
|-------------------------------------|--------------------------------------|--------------------------------------|-------------------------------------|