



Higher National Unit specification

General information for centres

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Unit code: F567 33

Unit purpose: This Unit is designed to develop the background knowledge and understanding of the role of the specialist health care administrator in supporting and co-ordinating the work of the multi-disciplinary team (MDT) involved in the care of cancer patients. This will include a basic knowledge and understanding of the causes and treatment of cancer, the administrative procedures involved in co-ordinating MDT activity and effective communication with MDT members, patients and carers.

On completion of the Unit the candidate should be able to:

- 1 Explain the role of the Multi-disciplinary Team Co-ordinator.
- 2 Communicate effectively with the health care team, patients and their carers.
- 3 Identify the common types and causes of cancer in their geographical work area and demonstrate an understanding of the importance of early detection of cancer.
- 4 Explain the purpose and processes of staging cancer.
- 5 Demonstrate an understanding of the common methods used in the treatment of cancer.

Credit points and level: 2 HN credits at SCQF level 6: (16 SCQF credit points at SCQF level 6*)

**SCQF credit points are used to allocate credit to qualifications in the Scottish Credit and Qualifications Framework (SCQF). Each qualification in the Framework is allocated a number of SCQF credit points at an SCQF level. There are 12 SCQF levels, ranging from Access 1 to Doctorates.*

Recommended prior knowledge and skills: While access to this Unit will be at the discretion of the centre, candidates would benefit from having administrative experience in their area of administrative work.

Core Skills: There are opportunities to develop the Core Skills of *Communication* and *Working with Others* at SCQF level 6 in this Unit although there is no automatic certification of Core Skills or Core Skills components.

Context for delivery: If this Unit is delivered as part of a Group Award, it is recommended that it should be taught and assessed within the subject area of the Group Award to which it contributes.

Assessment: Outcomes in the Unit may be assessed individually or integrated through the Unit or with Outcomes from other Units within the Group Award to which it contributes.

Higher National Unit specification: statement of standards

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The sections of the Unit stating the Outcomes, Knowledge and/or Skills, and Evidence Requirements are mandatory.

Where evidence for Outcomes is assessed on a sample basis, the whole of the content listed in the Knowledge and/or Skills section must be taught and available for assessment. Candidates should not know in advance the items on which they will be assessed and different items should be sampled on each assessment occasion.

Outcome 1

Explain the role and responsibilities of the Multi-disciplinary Team Co-ordinator (MDT)

Knowledge and/or Skills

- ◆ Roles and responsibilities of individual multi-disciplinary team members
- ◆ Administrative procedures through which the MDT Co-ordinator supports the MDT
- ◆ Significance of the MDT co-ordinator's role in supporting the MDT

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing they can explain the roles and responsibilities of each of the multi-disciplinary team members they work with and their relationship with them. Using a patient scenario, they should outline the administrative procedures used to support the MDT in the care of the patient and explain the role they played, the significance of the work they provide and its impact on the care of the patient. Oral or observed evidence should be supported by an assessor observation schedule.

Assessment Guidelines

Candidates could gather evidence from their workplace or through role plays/simulations in a realistic working situation. A record of the procedures involved may be supported by use of a log or diary. Overall the evidence in the log or diary should provide examples of how their role has supported at least two different members of the MDT team.

Outcome 2

Communicate effectively with the health care team, patients and their carers

Knowledge and/or Skills

- ◆ Communication styles and methods
- ◆ Features of effective and ineffective communication
- ◆ Factors which may affect communication with patients and carers
- ◆ Factors which may affect multiprofessional team communication
- ◆ Confidentiality issues
- ◆ Data protection

Higher National Unit specification: statement of standards (cont)

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can: demonstrate effective communication skills to deal with a minimum of five patient situations and five professional situations with differing circumstances. Within these 10 situations there should be evidence of the candidate dealing appropriately with:

- ◆ confidential information which is not to be revealed to the patient by the candidate
- ◆ direct patient questions which have to be dealt with and referred correctly to the most appropriate member of the multi-disciplinary team, by the candidate
- ◆ face-to-face communication, telephone communication and e-mail communication

Overall the evidence must include the candidate demonstrating an awareness of the impact a cancer diagnosis and treatment can have on both the individual and their families before, during and after treatment.

Candidate performance should be recorded on an observation schedule which should include comments on the candidate's tone, choice of language and manner as well as methods of dealing with patient questions. Each situation should include candidate notes of the circumstances of the situation as well as the candidate's own reflections of what he/she felt went well in the individual communication experience and also what he/she thought could have been done better and could be improved next time. Candidates should demonstrate sympathetic understanding of the patient's problem as well as the limitations of the NHS systems in all situations. Throughout the role plays candidates should demonstrate an awareness of the Data Protection Act and security procedures for access to patient records.

Assessment Guidelines

Candidates could gather evidence from their workplace or could accumulate evidence through role plays which are set up in a realistic working situation or a mixture of both. Evidence of each situation or role play could be gathered into a portfolio. Centres may wish to produce a pro-forma sheet for completion by candidates to log the situation and their reflections on their own performance or this could be achieved through a storyboard approach.

Higher National Unit specification: statement of standards (cont)

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Outcome 3

Identify the common types and causes of cancer in the geographical work area and demonstrate an understanding of the importance of early detection of cancer

Knowledge and/or Skills

- ◆ Types of cancer
- ◆ Difference between malignant and non-malignant cells
- ◆ Causes of cancer
- ◆ Early detection methods

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can accurately describe at least one difference between a malignant and a non-malignant cell and can summarise the importance of detecting cancer as early as possible. Candidates must list a minimum of four types of cancer which they would expect to come across in their geographical area of work and identify any established causes of two of these cancers.

Candidates should accurately reference any sources of information used and should gather their assessment evidence in a logical order.

Assessment Guidelines

In addition to the clear description of the basic differences between a malignant and a non-malignant cell, candidates could be asked to provide a portfolio of evidence of four types of cancer which they regularly come across in their local geographical area, detailing the causes and importance of early detection of two of these cancers. Candidates could submit the sources of evidences such as useful websites or articles from medical journals or NHS statistics to help ensure the validity of their evidence. The evidence could take the form of a report compiled from the candidate's workplace.

Higher National Unit specification: statement of standards (cont)

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Outcome 4

Explain the purpose and processes of staging cancer

Knowledge and/or Skills

- ◆ Purpose of staging cancer
- ◆ Common processes used to stage cancer
- ◆ Common preparation for treatment commencement

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can describe the common pathway a patient will take before treatment. This explanation should include an outline of the role of administrative procedures prior to treatment commencement including:

- ◆ an appreciation of the purpose of cancer staging
- ◆ the processes used to stage cancer
- ◆ the importance of timelines

Assessment Guidelines

It is recommended that assessment for this Outcome is integrated with Outcome 5 in a task covering the stages before treatment through to after treatment. Assessment could be carried out by providing candidates with stimulus materials which may or may not be linked. The candidate could be asked to read through materials provided, identify any crucial timelines and potential problems which would impact on the staging and treatment process and identify any possible sources of support available for the patient.

Outcome 5

Demonstrate an understanding of the methods commonly used in the treatment of cancer

Knowledge and/or Skills

- ◆ Common treatment modalities
- ◆ Impact of cancer treatment
- ◆ Support agencies
- ◆ Administrative procedures to support cancer staging

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can describe the common pathway a patient will take before, during and after treatment.

Higher National Unit specification: statement of standards (cont)

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

This explanation should include:

- ◆ an identification of common treatment modalities used in cancer
- ◆ accurate identification of three possible common side effects of treatment
- ◆ demonstration of awareness of the help available from support agencies

Assessment Guidelines

It is recommended that assessment for this Outcome is integrated with Outcome 4 in a task covering the stages before treatment through to after treatment. Assessment could be carried out by providing candidates with stimulus materials which may or may not be linked. The candidate could be asked to read through materials provided, identify any crucial timelines and potential problems which would impact on the staging and treatment process and identify any possible sources of support available for the patient.

Administrative Information

Unit code: F567 33

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Superclass category: PA

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Higher National Unit specification: support notes

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This part of the Unit specification is offered as guidance. The support notes are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 80 hours.

Guidance on the content and context for this Unit

This Unit is an Optional Unit in the Professional Development Award in Administrative Management (SCQF level 8). Because of the specialist nature of the Unit, it is recommended that it is undertaken after the mandatory Units have been achieved.

Outcome 1

The following topics should be covered:

- ◆ the roles and responsibilities of the different health care professionals commonly involved in the multidisciplinary team
- ◆ role boundaries of different members of the team
- ◆ the importance of the administrator's role in maintaining optimal internal communications between different health care professionals involved with the cancer patient
- ◆ the importance of the administrator's role in bridging rapid and accurate patient information between in-hospital and community services
- ◆ how to deal with confidential papers and information
- ◆ candidates should be aware of the main aspects of the Data Protection Act and how they relate to measures taken to ensure confidentiality of patient records
- ◆ administrative procedures required to ensure that relevant information is in place prior to the patient's appointments
- ◆ an understanding of routine procedures and their position in the clinical timelines needed to ensure a logical patient journey

Outcome 2

The following topics should be covered:

- ◆ the importance of clear written and verbal communication
- ◆ listening skills
- ◆ reflecting and clarification as useful communication skills for the administrator
- ◆ being aware of how common reactions to a cancer diagnosis may interact with communication eg stress, anger, denial, worry, overt and covert distress
- ◆ communication by telephone
- ◆ the advantages and possible disadvantages of e-mail as a method of communication in the health care context
- ◆ the role of the administrator as a key member of the multidisciplinary team in maintaining optimal communication
- ◆ a basic knowledge of the following words/jargon may be useful in order to maintain good communication for individuals in this administrative role (see list below)

Higher National Unit specification: support notes (cont)

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Common terms/professional jargon which may be used in the communication about the cancer patient:

Analgesics, Anti emetics, Benign, BDS (Beam Directed Shell), BMT (bone marrow transplant), Brachytherapy, Carcinoma, CHART (Continuous Hyperfractionated Accelerated Radiotherapy), Chemotherapy, Clinical Oncologist, Clinical Trial, CNP (clinical nurse practitioner), CNS (clinical nurse specialist), Deep Venous Thrombosis (DVT), Disease, Disease pathway, DNR (do not attempt resuscitation), Drugs, Emesis, ENT, Fluids (IV hydration), Haematologist, HDR (High Dose Radiotherapy), Hickman Line, Hormone Therapy, IMRT (Intensity Modulated Radiation Therapy), Malignant, Metastatic, Medical Oncologist, Mould Room, NFR (not for resus), Palmer Planter, Peripheral Neuropathy, PICC Line, Pleural Effusions (PE), Portacath, Radiotherapy, Radiation, SCC (Spinal cord compression), Secondaries, Simulator, Spread, SCT (stem cell transplant), Stridor, Surgical Oncologist, SVCO (superior vena cava obstruction), Trajectories, TNM (tumour, node, metastasis), Tumour.

Types of test:

Biopsy, Bloods (FBC, Tumour markers, LFT's, U& Es), Bone Marrow Biopsy, Bronchoscopy, Bone scan, Barium Enema, Colonoscopy, Creatinin clearance, CT scan, Cystoscope, ECG, Echocardiograph, Endoscopy, EUA, FNA (Fine Needle Aspirate), Isotope Scan, Linograms, Lymph node dissection, Mammogram, MRI, PET scan, Ultrasound, Venograms, X-ray.

Outcome 3

The following topics should be covered:

- ◆ a basic knowledge of the cancers which are commonly seen and treated in the administrators own geographical work area.
- ◆ a simple understanding of the differences between a malignant and a non-malignant cells (eg malignant cells carry on reproducing, they don't obey signals from other neighbouring cells, they don't stay beside similar cells but develop the ability to travel to other body sites, they do not become specialist but stay immature, they do not die or age in the normal fashion.)
- ◆ the importance of early detection of cancer in relation to improving the chances of curing the disease.
- ◆ the relevance of symptoms which may indicate the presence of cancer eg weight loss, change in bowel or bladder habit, any new lump or bump, persistent cough, change in a mole, difficulty swallowing, hoarse voice that does not get better.
- ◆ common tests and processes used to stage cancer eg blood tests including tumour markers, scans including MRI, CT, Bone scans and PET scans. Surgical staging including Lymph node sampling, Dukes staging, TNM staging.
- ◆ the importance of ensuring a direct pathway of pre-treatment tests and assessments.
- ◆ impact of a cancer diagnosis and treatment including brief epidemiology of positive shift towards better survival statistics.
- ◆ specific issues related to the types of cancers the candidate comes into contact within her/her work should be taken into account and discussed within the class by the tutor/assessor.

Higher National Unit specification: support notes (cont)

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

Outcomes 4 and 5

The following topics should be covered:

- ◆ preparation for treatment commencement, including the importance of clear, easily understood and accurate information
- ◆ common treatment modalities, surgery
- ◆ common treatment modalities, radiotherapy
- ◆ common treatment modalities, chemotherapy
- ◆ common side effects of treatment such as fatigue, weight loss, body image and confidence concerns, gastrointestinal symptoms
- ◆ cancer clinical trials
- ◆ support agencies which may be able to support the patient with cancer and their families eg Macmillan Cancer Support, local hospices, Maggie's Centres, cancer information centres, Cancer Support Scotland (Tak Tent), Marie Curie Cancer Care, and local support groups

Guidance on the delivery and assessment of this Unit

This Unit could be delivered through joint workplace and college delivery. If this is the case, then the appointment of a workplace mentor would be beneficial to the candidate to ensure that they are maintaining patient confidentiality while satisfying given assessment requirements. It is recommended that the person delivering this Unit has some practical experience of dealing with the administration of cancer care or dealing with cancer patients.

Outcome 2

This Outcome could be delivered through lectures, role play observation and videos. Assessors could record candidate responses on video and candidates could comment on how they could improve their face to face and telephone contact skills.

Existing videos /DVDs of team communication could also be used to promote discussion on good and poor team communication. Assessment could be undertaken through the use of role play activities or through candidates being observed in the workplace and building up a portfolio of evidence. Where workplace evidence is used, this should be authenticated by the assessor.

Candidates could be asked to compile their own Glossary of Terms which they could access using the Internet or medical reference books.

Outcome 3

This Outcome could be delivered through lectures, Internet research and information from local hospitals and Health Boards. For example, candidates could be asked to find the numbers of people diagnosed with different types of cancer in their area and the stage at which diagnosis was made. Candidates could also examine the different or similar treatment paths these patients will undergo or have followed.

Higher National Unit specification: support notes (cont)

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The assessment could take the form of a research task which the candidate can undertake in the workplace and present in the form of a report. This would have the advantage of making the assessment more relevant to the candidate.

Outcomes 4 and 5

These Outcomes could be delivered through lectures and research into local hospices, cancer support agencies and services on offer to patients in the local area. Information can also be sourced from local hospitals, Health Boards, doctor's surgeries, Citizen Advice Bureau and other organisations. Candidates could be given a series of short case studies/scenarios/stimulus materials and their response could include the following details:

- ◆ administrative procedures required at each stage
- ◆ timelines indicated for receipt of information prior to the patient's next appointment
- ◆ support available from support agencies for patients
- ◆ possible common side effects of treatment and where to refer patients for further information

Candidates could be given one complex case study which could address all of the knowledge and skills required or several smaller case studies.

Opportunities for developing Core Skills

There are opportunities to develop the Core Skills of *Communication* and *Working with Others* at SCQF level 6, although there is no automatic certification of Core Skills.

Communication Skills are developed throughout this unit. Both oral communication and written communications will be used in Outcome 1 when candidates are assessed on their ability to communicate by e-mail, telephone and person to person with both patients and with health care professionals. Candidates could use either written or oral skills in Outcome 2 and 3 to explain and identify and gather their evidence together into a logical format. The purpose of the Unit is to enhance the skills of the health-based administrator and improve their ability to communicate with those involved with the treatment of cancer.

Core Skills of *Working with Others* will also be developed in Outcomes through real work situations or role plays. Throughout the assessment of this Unit, candidates will be required to discuss the production of their portfolio of evidence with their assessor and if gathering the evidence from their workplace, also with a workplace mentor.

Higher National Unit specification: support notes (cont)

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Open Learning

Aspects of Outcome 2, 3 and 4 could be achieved by the candidate using an open-learning approach. For example candidates could undertake research using the Internet, NHS information and local Health Board information to identify common types of cancer in their locality and any established causes of these cancers. For Outcomes 3 and 4, different research materials and textbooks and the Internet could be relevant, eg for accessing up-to-date information on support agencies. Where a blended approach such as this is used, centres should ensure that assessments can be directly attributed to the candidate and that their work can be authenticated. This could be done through extensive questioning of the evidence submitted or through structured interviews with the candidate. It would also be helpful to have a workplace mentor.

Candidates with disabilities and/or additional support needs

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering alternative Outcomes for Units. Further advice can be found in the SQA document *Guidance on Assessment Arrangements for Candidates with Disabilities and/or Additional Support Needs* (www.sqa.org.uk).

General information for candidates

Unit title: Role of the Multi-disciplinary Team Co-ordinator in the Management of Cancer Care

In the course of this Unit you will learn about cancer, its stages, its treatment and the role of the specialist teams which deal with cancer patients. Additionally you will develop your communication skills to help you deal more effectively with patients who are undergoing treatment. You will also develop your communication skills to help you work more effectively with other health care professionals.

You will learn about the differences between malignant and non-malignant cells, different types of cancer and the causes of cancer. You will be asked to do some research into common types of cancer in your area and you will learn how important it is to detect cancer early. You will also learn about likely possible side effects of cancer treatment. All of this information will help you deal more effectively and sympathetically with patients. Studying this Unit will make you aware of the impact that a cancer diagnosis and treatment may have on both the individual and their families before, during and after treatment.

You will be assessed in a number of different ways, which may include oral, documentary and performance evidence. A key aspect of the Unit is effectively dealing with difficult or sensitive situations with patients and members of staff. You will be required to undertake research and present your findings in report form. You are likely to be encouraged to use the Internet as part of your research and you may on occasions use evidence from your workplace as part of your assessment but this will depend on your method of completing the Unit.

In completing this Unit you will not only learn more about your job in dealing with cancer patients but you will also develop your Communication skills and your skills in Working with Others.