# Change of healthcare providers' perceptions after CAncer REhabilitation (CARE) program

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## **Purpose**

To investigate the perceptions that healthcare providers face while implementing cancer rehabilitation and to find changes after receiving CAncer REhabilitation (CARE) program.

### **Methods**

All healthcare providers participating the CAncer of REhabilitation (CARE) program were surveyed immediate after program and invited to complete an online survey at 1 month after program. The questionnaire was developed by a focus group of physiatrists, physical therapist and public health specialist based on the National Coalition of Cancer Survivorship (NCCS)'s Quality Cancer Care—Declaration of Principles. The survey covered the following domains: experience of receiving educational program of cancer rehabilitation, importance and knowledges about specific rehabilitation services, usability & applicability of program and activation plan. On the second survey, change of knowledge and confidence about caner rehabilitation, usability & applicability and causes of limitation of application were included.

#### **Results**

A Total of 52 healthcare providers (men 14.9%) in Korea completed the survey. Of these, 53.8% reported they did not provide rehabilitation services to cancer patients because of limitation of knowledge and information (40.4%), manpower (25.5%), guideline (19.1%), financial support (12.8%) and lack of time (2.1%). Healthcare providers with employment history longer than 5 years perceived more importance and knowledge of cancer rehabilitation compared to those less than 5 years. Respondents reported the prior activation plans might be policy of certified licensing professionals in cancer rehabilitation (19.5%), improvement of educational standards (16.2%), communication with other experts about cancer survivorship (16.2%). After 1 month, the confidence of knowledge about cancer rehabilitation significantly improved. The main cause of limitation of application was that they had no cancer patient referred by oncologists.

#### **Conclusions**

Healthcare providers in the field of cancer rehabilitation suggested the policy of certified licensing professionals in cancer rehabilitation, development of standards and manual for education, communication with other experts about cancer survivorship for activating cancer rehabilitation program.