Survey on Rare Cancer policies

Dear healthcare professionals,

The following survey investigates policies in the field of rare cancers. Rare cancers are a group of diseases that affect less than six out of every 100,000 individuals per year. These cancers are often difficult to diagnose and treat, which can result in delayed diagnosis and limited treatment options.

The goal of this survey is to collect data on **policies and practices relating to rare cancer prevention, treatment, and care**, specifically from the **perspective of healthcare professionals**. It is encouraged that you respond to all questions to the best of your ability and experience, as your valuable insights and experiences can make significant contributions while also highlighting areas for improvement. The collected information will be used as part of a PhD thesis research.

Your participation is entirely voluntary, and you may opt out at any time. This survey is expected to take approximately <u>15</u> <u>minutes to complete</u>. We appreciate your time and effort.

If you have any questions or concerns about the survey, please do not hesitate to contact

Sincerely,

Kostadin Kostadinov MD,

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There are 33 questions in this survey.

INFORMED CONSENT

I have had enough time to consider my participation in the study.
I have received <u>sufficient information</u> about my rights and purpose of the study and its implementation, as well as about the possible benefits and disadvantages related to it.
I have not been pressured or persuaded to participate in the study.
I know that my information will be treated <u>confidentially</u> .
I understand that my participation is <u>voluntary</u> .
By clicking Yes , I confirm my participation in this study and agree to be a voluntary research subject.
*
Please choose only one of the following:
Yes
○ No
Are you responsible for the diagnosis, prevention, research, or clinical management of patients with rare cancers ?
*
Please choose only one of the following:
Yes
○ No

RESPONDER PROFILE

Please answer the follow	ing questions about <u>yourself</u> : *
Only answer this question if the following ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK	
Please write your answer(s) here:	
Age (years)	
Country	
What is the duration of your personal involvement in the field rare cancers? /in years/ What is the duration of your overall working experience? /in years/	
Working experience: /iii years/	
What is your gender? * Only answer this question if the following	conditions are met:
((Q0Q1.NAOK == "Y") and (G0Q2.NAOK	== "Y"))
Please choose only one of the following:	
Female	
Male	
Workplace type: *	
Only answer this question if the following ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK	
Select all that apply Please choose all that apply:	
Medical establishment	
Health authority	
University	
Research organisation	
Other:	

What is your <u>specialty</u> ? *
Only answer this question if the following conditions are met:
((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))
Select all that apply
Please choose all that apply:
Oncology
Hematology
Surgery
Radiotherapy
Nuclear medicine (Madical) genetic
(Medical) genetic
☐ Histopathologists ☐ Not a medical doctor
Other:
Which are great of patients with rare turners is the feets of your
Which <u>age group</u> of patients with rare tumors is the focus of your work? *
Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))
Choose one of the following answers Please choose only one of the following:
Company one of the formation of the form
Children
Adults ■ Management Adults ■ Management ■
Both
Both

In what <u>area(s) of rare cancers</u> are you specialized? *
Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))
Select all that apply Please choose all that apply:
Central nervous system rare cancers (CNS)
Digestive rare cancers
Endocrine organ rare cancers
Female genital rare cancers
Haematological rare cancers
Head & neck rare cancers
Male genital & urogenital rare cancers
Neuroendocrine tumours (net) rare cancers
Paediatric cancers
Sarcomas
Skin rare cancers
Thoracic rare cancers
Other:
In which of the following ERNs are you and your organization involved? * Only answer this question if the following conditions are met: ((QQQ1.NAOK == "Y") and (GQQ2.NAOK == "Y")) Select all that apply Please choose all that apply: EURACAN ERN PaedCan ERN-EuroBloodNet ERN GENTURIS None Other:

What is the	e <u>main focus</u> ers? *	of your pro	ofessional	activities i	n the field	of
•	question if the following = "Y") and (G0Q2.NAO	_	:			
	e following answers nly one of the following	j :				
C Laboratory, o	enetic or histopatholog	ical diagnosis				
Clinical diag	nosis and management					
Research an	d innovation					
Prevention						
Social suppo	rt, rehabilitation and pa	lliative care				
Other (pleas	e specify in the commer	nt box)				
Make a commen	on your choice here:					
OVERALL F	OLICIES IN	THE FIELD	OF RAR	E CANCE	RS	
	OLICIES IN					
Is there a Only answer this		n of rare ca	ncers in y			
Is there a Only answer this ((Q0Q1.NAOK =	legal definitio	on of rare cange conditions are met	ncers in y			
Is there a Only answer this ((Q0Q1.NAOK =	legal definitio question if the following = "Y") and (G0Q2.NAO) e following answers	on of rare cange conditions are met	ncers in y			
Is there a Only answer this ((Q0Q1.NAOK =: Choose one of the Please choose of the please cho	legal definitio question if the following = "Y") and (G0Q2.NAO) e following answers	on of rare carge conditions are met K == "Y"))	ncers in y			
Is there a Only answer this ((Q0Q1.NAOK =: Choose one of the Please choose of the please cho	legal definitio question if the following = "Y") and (G0Q2.NAO) e following answers nly one of the following	on of rare carge conditions are met K == "Y"))	ncers in y			

Is there <u>currently</u> an adopted <u>national cancer plan</u> in place in your country? * Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y")) Please choose only one of the following:
✓ Yes✓ No
Are rare cancers defined as a priority group in the national cancer plan? * Only answer this question if the following conditions are met: Answer was 'Yes' at question ' [Q0Q1]' (I have had enough time to consider my participation in the study. I have received sufficient information about my rights and purpose of the study and its implementation, as well as about the possible benefits and disadvantages related to it. I have not been pressured or persuaded to participate in the study. I know that my information will be treated confidentially. I understand that my participation is voluntary. By clicking Yes, I confirm my participation in this study and agree to be a voluntary research subject.) and Answer was 'Yes' at question ' [G0Q2]' (Are you responsible for the diagnosis, prevention, research, or clinical management of patients with rare cancers?) and Answer was 'Yes' at question ' [G2Q12]' (Is there currently an adopted national cancer plan in place in your country?)
Please choose only one of the following:
YesNo

How would you assess the <u>role and relative impact of the National</u> <u>Cancer Plan</u> based on the following criteria in your country? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y") and (G2Q12.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
GOALS AND OBJECTIVES: The plan has a clear, achievable and measurable goals and objectives that are aligned with the overall strategy.					
STAKEHOLDER ENGAGEMNT: The plan involves a broad range of stakeholders, including patients, healthcare providers, researchers, policymakers, and advocacy groups.					
EVIDENCE-BASED INTERVENTIONS: The plan includes interventions that have been shown to be effective in reducing the burden of cancer.					
IMPLEMENTATION STRATEGY: The plan has a clear implementation strategy that outlines how the goals and objectives will be achieved.					
MONITORING AND EVALUATION: The plan includes a framework to track progress towards the goals and objectives.					
EQUITY: The plan addresses health disparities and includes strategies to reduce barriers to care, such as geographic or financial barriers.					
FUNDING: The plan is adequately funded to ensure that the goals and objectives are achieved.		\bigcirc	\bigcirc		
EFFICIENCY: The financing of the plan is efficient, ensuring that resources are used effectively to achieve the goals and objectives of the plan.					

Please assess each criterion on a scale of 1 to 5, with 1 indicating strongly disagree and 5 indicating strongly agree.

How would you assess the importance of different <u>funding sources for</u> the National Cancer Plan in your country? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y") and (G2Q12.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Public - Goverment funding	\bigcirc	\circ	\circ	\circ	0
Public - Health insurance funding	\bigcirc	\bigcirc	\bigcirc	\circ	\bigcirc
Private - Voluntary health insurance funding	\bigcirc	\circ	\circ	\circ	\bigcirc
Private - Household out-of- pocket expenditure	\bigcirc	\circ	\circ	\circ	\bigcirc
Other - Non-profit institutions serving households	\bigcirc	\circ	\circ	0	\circ
Other - EU financing project lines	\bigcirc	\circ	\circ	\circ	\circ
Other - Industry	\bigcirc	\circ	\circ	\circ	\circ

This question is not asking for your subjective opinion but rather about the active cancer plan. Please rate each source on a scale of 1 to 5, with 1 indicating that the <u>resource is not contributing</u> to the plan and 5 indicating that the resource is a <u>primary source of funding</u>.

Which of the following approaches for rare <u>cancer policies</u> <u>integration</u> do you find most suitable? *
Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))
Choose one of the following answers Please choose only one of the following:
Aligning rare cancer policies with all other cancer-related policies
Aligning rare cancer policies with other policies related to <u>rare diseases</u>
Establishing rare cancer policies as a <u>distinct</u> area of policies
Make a comment on your choice here:

PREVENTION POLICIES

How would you assess the <u>effectiveness</u> of the established cancer prevention policies (including those for rare cancers) in your country based on the following criteria? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
KNOWLEDGE: There is a basic understanding of what rare cancers are, how they differ from common cancers, and their impact on individuals and society.					
PERCEPTION: Rare cancers are perceived as a significant health issue. The unique challenges faced by patients with rare cancers are understood. The need for increased research, funding, and policy support is recognized.					
ATTITUDE: The attitude towards patients with rare cancers is supportive. The society is open to learning more about rare cancers and advocating for increased awareness and support.					
COMMUNICATION: Effective communication strategies are in place to educate society about rare cancers.					
REACH: Awareness campaigns reach a broad range of society, including different age groups, genders, socioeconomic backgrounds, and geographic locations.					
IMPACT: The impact of prevention campaigns is measured through indicators such as changes in incidence and mortality from rare cancers. The campaigns have an impact on the allocation of resources, policy development, and healthcare delivery for patients with rare cancers.					

Please use the scale from 1 to 5, where 1 indicates strongly disagree and 5 indicates strongly agree

How would you assess the <u>effectiveness of the national cancer</u> <u>registry</u> in your country based on the following criteria? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
COMPLETENESS: The registry includes all cases of cancer diagnosed within a defined population and time period.	0		\circ		
CONTEMPORARY: The registry has up-to-date and timely data on cancer cases.			\bigcirc	\bigcirc	
ACCURACY: The data collected in the registry is accurate and reliable.					
<u>VALIDITY:</u> The registry is able to produce valid statistics on cancer incidence, mortality, and survival.					
REPRESENTATIVNESS: The registry is representative of the population it serves.					
CONFIDENTIALITY: The registry ensures the confidentiality and privacy of the individuals whose data are collected					
PATIENT OUTCOMES: The registry demonstrates a positive impact on patient outcomes, such as earlier diagnosis, more effective treatment, and improved survival rates.					
INFLUENCE : The registry informs cancer policy decisions.	\circ	\circ	\bigcirc	\bigcirc	\circ
RESEARCH: The registry facilitates cancer research by providing data and resources for investigators					
COST-EFFECTIVNESS: The registry demonstrates that its benefits outweigh its costs.			\bigcirc	\bigcirc	
AWARENESS: The registry increases public awareness of cancer and its impact on the population.		0	\bigcirc	0	
COLLABORATION: The registry facilitates collaboration among			\bigcirc	\bigcirc	\circ

	1	2	3	4	5
healthcare providers, researchers, and public health officials.					

Please use the scale from 1 to 5, where 1 indicates strongly disagree and 5 indicates strongly agree. If there is no national but only a regional registry in place, answer accordingly.

How would you assess the <u>importance of different funding sources</u> for screening programs in your country for patients with rare cancers? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Public - Goverment funding	\bigcirc	\circ	\circ	\circ	\circ
Public - Health insurance funding	\bigcirc	\circ	\bigcirc	\bigcirc	\bigcirc
Private - Voluntary health insurance funding	\bigcirc	\circ	\bigcirc	\circ	\circ
Private - Household out-of- pocket expenditure	\bigcirc	\circ	\circ	\circ	\circ
Other - Non-profit institutions serving households	\circ	\circ	\circ	\circ	\circ
Other - EU financing project lines	\circ	0	\circ	\circ	\circ
Other - Industry	\bigcirc	\circ	\circ	\circ	\circ

This question is <u>not seeking your subjective opinion but is about the current screening programs</u>. Please rate each source on a scale of 1 to 5, with 1 indicating that the resource is not used and 5 indicating that the resource is a primary source of funding.

How would you assess the implementation of the following <u>screening</u> <u>programs established by the EU Council recommendation</u> on strengthening prevention through early detection in your country?

*

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Breast cancer screening with mammography for women aged 50 to 69, and suggested for women from 45 to 74 years old				0	0
Testing for human papilloma virus (HPV) as a tool for cervical cancer screening for women aged 30 to 65, with an interval of five years or more					
Quantitative faecal immunochemical testing (FIT) as a screening test for colorectal cancer before referring individuals between 50 and 74 years old to follow-up colonoscopy					
Low-dose computed tomography as a screening test for individuals at high risk for <u>lung cancer</u> , including heavy smokers and exsmokers					
Prostate cancer screening for men, on the basis of prostate-specific antigen (PSA) testing in combination with magnetic resonance imaging (MRI) scanning as follow-up					
Screen-and-test strategies for Helicobacter pylori for gastric cancer.		\bigcirc	\bigcirc	\circ	

The implementation of a screening program refers to the process of putting into action a planned and organized set of activities aimed at identifying a specific disease or condition in a target population through the use of a specific screening intervention. Please use the scale from 1 to 5, with 1 denoting no implementation and 5 denoting complete implementation.

How would you assess the <u>relevance</u> of the following preventive EU cancer plan recommendations, specifically <u>in the field of rare</u> <u>cancers</u>? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Creation of a Knowledge Centre on Cancer to facilitate the coordination of scientific and technical cancer-related initiatives at EU level			0		
Enabling cancer patients to securely access and share electronic health records for prevention and treatment across borders through the European Health Data Space					
Elimination of cancers caused by human papillomaviruses through EU support for Member States on vaccination with the aim to vaccinate at least 90% of the EU target population of girls and to significantly increase the vaccination of boys					
Improvement of <u>health literacy on</u> <u>cancer risk</u> by updating the European Code against cancer	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Creation of a <u>'Tobacco-Free</u> <u>Generation'</u> , including reviewing the Tobacco Products and the Tobacco Taxation Directives and the legal framework on cross- border purchases of tobacco					
Reducing the harmful alcohol consumption through support to capacity-building and best practice; reduce young people's exposure to online marketing and advertising of alcohol products; implement evidence-based brief interventions					
Addressing unhealthy diets, obesity and physical inactivity by reducing carcinogenic contaminants in food		\bigcirc	\bigcirc		0
Alignment of the EU's <u>air quality</u> standards more closely with the					

	1	2	3	4	5
WHO guidelines and promote sustainable and smart mobility					
Adoption of a new Occupational Safety and Health Strategic Framework to further reduce workers' exposure to chemicals					
Developing a new <u>EU Cancer</u> <u>Screening Scheme</u> to ensure that 90% of the target population is offered breast, cervical and colorectal cancer screening					
Please use a scale of 1 to 5. A score of 1 indicates that the recommendation is not relevant for rare cancers, while a score of 5 indicates strong relevance for rare cancers.					

CLINICAL MANAGMENT, RESEARCH AND INOVATION

To what extent are **evidence-based treatment guidelines for rare tumors available** at your center? *

Only answer this question if the following conditions are met:

Answer was 'Yes' at question ' [Q0Q1]' (I have had enough time to consider my participation in the study. I have received sufficient information about my rights and purpose of the study and its implementation, as well as about the possible benefits and disadvantages related to it. I have not been pressured or persuaded to participate in the study. I know that my information will be treated confidentially. I understand that my participation is voluntary. By clicking Yes, I confirm my participation in this study and agree to be a voluntary research subject.) and Answer was 'Yes' at question ' [G0Q2]' (Are you responsible for the diagnosis, prevention, research, or clinical management of patients with rare cancers?) and Answer was 'Clinical diagnosis and management ' at question ' [G1Q10]' (What is the main focus of your professional activities in the field of rare cancers?)

Answer was 'Clinical diagnosis and management ' at question ' [G1Q10]' (What is the main focus of your professional activities in the field of rare cancers?)
Please choose only one of the following:
<u> </u>
<u>2</u>
<u>3</u>
\bigcirc 4
<u>5</u>
Use a scale of 1 to 5, with 1 indicating there are no evidence-based treatment guidelines and 5 indicating the availability of

Use a scale of 1 to 5, with <u>1 indicating there are no evidence-based treatment guidelines</u> and 5 indicating the availability of treatment guidelines for all rare cancer patients at the center.

How would you assess the <u>usability of the available treatment</u> <u>guidelines</u> for rare cancers in your clinical unit based on the following criteria? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y") and (G1Q10.NAOK == "AO02"))

Please choose the appropriate response for each item:

	1	2	3	4	5
EFFICACY: Guidelines have demonstrated the ability to effectively treat the specific rare cancer for which they were developed.					
SAFETY : Guidelines have a favorable safety profile with minimal side effects, and any risks are clearly communicated to patients.					
FEASIBILITY : Guidelines are feasible to administer in clinical settings and do not require excessive resources or specialized equipment.					
PATIENT-CENTERDNESS: Guidelines take into account the unique needs and preferences of patients with rare cancers, considering quality of life and shared decision-making.					
NOVELTY: Guidelines offer a new or innovative approach to treating rare cancers, such as targeted therapies or personalized medicine.					
COST-EFFECTIVNESS: Guidelines are cost-effective, taking into account the potential benefits and harms of the treatment and the costs associated with it.					
EVIDENCE BASE: Guidelines are supported by a strong evidence base, including preclinical and clinical data.				\bigcirc	

Please use the scale from 1 to 5, where 1 indicates <u>strongly disagree</u> and 5 indicates <u>strongly agree</u>.

How would you assess the <u>effectiveness of the clinical</u> <u>collaboration</u> in the field of rare cancers in your clinical centre based on the following criteria? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y") and (G1Q10.NAOK == "AO02"))

Please choose the appropriate response for each item:

	1	2	3	4	5
INTERDISCIPLINARY APPROACH: Collaboration involves healthcare professionals from different disciplines.					
COMMUNICATION: The healthcare team has open lines of communication to ensure that all team members are up-to-date on the patient's condition, treatment plan, and status.					
SHARED DECISION-MAKING: Collaboration involves shared decision-making between the patient, their family, and the healthcare team.					
EXPERTISE: Collaboration involves healthcare professionals with expertise in treating rare cancers.					
ACCESSIBILITY: Collaboration is accessible to patients with rare cancers, regardless of their geographic location or financial circumstances.					
IMPROVEMENT: Collaboration involves a continuous improvement process with regular evaluation of the effectiveness of the treatment plan.					

Please use the scale from 1 to 5, where 1 indicates strongly disagree and 5 indicates strongly agree.

How would you assess the <u>importance</u> of each of the following factors in the decision-making process for <u>reimbursement / coverage</u> of new therapies for rare cancers? *

Only answer this question if the following conditions are met:

((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Disease severity/clinical burden	\bigcirc	\circ	\circ	\circ	\bigcirc
Value for money and budget impact	\bigcirc	\circ	\circ	\circ	\circ
Unmet need/lack of active treatment alternatives	\circ	\circ	\circ	\circ	\circ
Strength/robustness/quality of evidence	\circ	0	0	0	0
Therapeutic value (clinical efficacy/effectiveness and significance of additional benefit)		0	0	0	

Use a scale of 1 to 5, with 1 being of minor importance and 5 being of major importance.

How would you assess the <u>effectiveness of the clinical trials for</u> <u>patient enrollment</u> in the field of rare cancers in your country based on the following criteria? *

Only answer this question if the following conditions are met:

((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
AVAILABILITY: There are numerous clinical trials available for different rare cancers, as well as trials for different stages of the diseases.					
COVERAGE: Patients have access to clinical trials regardless of where they live in the country. Trials are available in different regions, or appropriate travel and accommodation support is provided.					
INCLUSIVITY: Clinical trials are inclusive, with patients from diverse social backgrounds and demographics being able to participate.					
AFFORDABILITY: Clinical trials are affordable for all patients, regardless of their financial circumstances.					
CONTEMPORARY: Clinical trials are characterized by a shorter duration of time between trial registration and trial initiation.		0			

Please use the scale from 1 to 5, where 1 indicates strongly disagree and 5 indicates strongly agree.

How would you assess the <u>relevance</u> of the following clinical management EU cancer plan recommendations, <u>specifically in the</u> <u>field of rare cancers</u>? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Establishing a group of new Reference Networks on specific cancer types	0	0	0	0	0
Creation of an EU platform to support the <u>repurposing of</u> <u>existing medicines</u>	\bigcirc			\bigcirc	
Seting up a <u>Partnership on</u> <u>Personalised Medicine</u>	\circ	\circ	\circ	\circ	\circ
Developing a <u>roadmap towards</u> <u>personalised prevention</u>	\circ	0	0	\circ	\circ
Launching a new project using High-Performance Computing to rapidly test existing molecules and new drug combinations					
Assistance of researchers working on personalised cancer treatments through tailored support and new digital platforms					
Supporting collaborative projects on cancer diagnostics and treatment using <u>High- Performance</u> Computing and Al					
Addressing fair access for cancer survivors to financial services (including insurance), via a code of conduct and a reflection on long-term solutions		0			
Launching a <u>Cancer Inequalities</u> <u>Registry</u> to map trends in key cancer data identifying inequalities between Member States and regions					
Strengthening and integration of telemedicine and remote monitoring in health and care systems; promote the virtual consultation model of the ERNs					
Establishing an 'EU Network of Youth Cancer Survivors	\circ	\circ	\circ	\circ	\circ

Please use a scale of 1 to 5. A score of 1 indicates that the recommendation <u>is not relevant for rare cancers</u>, while a score of 5 indicates <u>strong relevance for rare cancers</u>.

How would you assess the importance of different <u>funding sources for</u> <u>inovate therapy</u> in your country for patients with rare cancers? *

Only answer this question if the following conditions are met:

((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Public - Goverment funding	\bigcirc	\circ	\circ	\circ	\circ
Public - Health insurance funding	\bigcirc	\bigcirc	\circ	\bigcirc	\bigcirc
Private - Voluntary health insurance funding	\bigcirc	\circ	\circ	\circ	\bigcirc
Private - Household out-of- pocket expenditure	\bigcirc	\circ	\circ	\circ	\circ
Other - Non-profit institutions serving households	\bigcirc	\circ	0	\circ	\circ
Other - EU financing project lines	\bigcirc	\circ	\circ	\circ	\circ
Other - Industry	\bigcirc	\circ	\circ	\circ	\circ

This question is <u>not seeking your subjective opinion but is about the current financing mechanisms for innovative therapy</u>. Please rate each source on a scale of 1 to 5, with 1 indicating that the source <u>is not used</u> and 5 indicating that the source is a <u>primary source</u> of funding.

PALLIATIVE AND SOCIAL CARE

Is palliative care includ for patients with rare ca		<u>ır organi</u> z	zation's r	<u>nanagen</u>	<u>nent plan</u>
Only answer this question if the followin ((Q0Q1.NAOK == "Y") and (G0Q2.NAO	•		"AO02"))		
Choose one of the following answers Please choose only one of the following	g:				
Yes, provided at site					
Yes, provided by other facilities					
○ No					
Make a comment on your choice here:					
How would you assess to medico-social support. Only answer this question if the followin ((Q0Q1.NAOK == "Y") and (G0Q2.NAO). Please choose the appropriate response.	t services g conditions are r K == "Y"))	s _for patie			_
	1	2	3	4	5
Psychosocial support	0	0	0	\circ	0
Financial support	\circ	\circ	\circ	\bigcirc	\circ
Occupational support	\circ	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Additional medical support (art therapy, music therapy)	\circ	\bigcirc	\circ	\bigcirc	\circ
Spiritual and religious support	\circ	\bigcirc	0	\bigcirc	\bigcirc
Legal support	\circ	\bigcirc	\circ	\bigcirc	\bigcirc
Diet and nutrition support	\bigcirc	\circ	0	\circ	\bigcirc
Use a scale of 1 to 5, with 1 being of mi	nor importance o	nd 5 boing of ma	vior importance		

How would you assess the <u>effectiveness of palliative care</u> in the field of <u>rare cancers</u> based on the following criteria in your county? *

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	Adults rare cancer patients			Pediatric rare cancer patients						
	1	2	3	4	5	1	2	3	4	5
AVAILABILITY: Palliative care services are available for patients with rare cancers, including from a number of providers of hospice services and specialized palliative care teams.	0	0	0	0	0	0	0	0	0	0
ACCESS: Palliative care services are accessible, including the ability of patients to access them regardless of their geographic location or financial circumstances.	0	0	0	0	0	0	0	0	0	
QUALITY OF CARE: Palliative care is provided by interdisciplinary teams based on evidence-based guidelines, and comprehensive supportive care is provided.	0	0	0	0	0	0	0	0	0	0
TIMING: The initiation of palliative services is at the appropriate time in the disease trajectory, including early integration of palliative care in the management plan.	0	0	0	0	0	0	0	0	0	0
PATIENT-CENTEREDNESS: Palliative care services provide personalized care plans, shared decision-making, and attention to cultural and social factors.	0	0	0	0	0	0	0	0	0	0
SYMPTOMS MANAGEMENT: Palliative care services provide effective management of pain, nausea, fatigue, and other symptoms commonly associated with advanced cancer.	0	0	0	0	0	0	0	0	0	
GRIEVING SUPPORT: Palliative care services provide grief counseling and support groups.	0	\circ	0	0	0	0	0	0	\circ	0

Please use the scale from 1 to 5, where 1 indicates strongly disagree and 5 indicates strongly agree.

How would you assess the importance of different funding sources for
social support and palliative care for patient with rare cancers in
your country? *

Only answer this	question if th	e following	conditions are	met:
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((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please choose the appropriate response for each item:

	1	2	3	4	5
Public - Goverment funding	\bigcirc	\bigcirc	\circ	\circ	
Public - Health insurance funding	\bigcirc	\circ	\circ	\circ	\bigcirc
Private - Voluntary health insurance funding	\bigcirc	\circ	\circ	\circ	\circ
Private - Household out-of- pocket expenditure	\bigcirc	\circ	\circ	\circ	\circ
Other - Non-profit institutions serving households	\bigcirc	\circ	\circ	\circ	\bigcirc
Other - EU financing project lines	\bigcirc	\circ	\bigcirc	\circ	\circ
Other - Industry	\bigcirc	\circ	\circ	\circ	\circ

This question is <u>not asking for your subjective opinion but rather pertains to the current state of social support and palliative care</u>. Please rate each resource on a scale of 1 to 5, with 1 indicating that the source <u>is not used</u> and 5 indicating that the source <u>is a primary source</u> of funding.

If you have any **comments or suggestions**, please feel free to share them in the box below. We appreciate your time and effort in providing feedback.

Only answer this question if the following conditions are met: ((Q0Q1.NAOK == "Y") and (G0Q2.NAOK == "Y"))

Please write your answer here:

Thank you for taking the time to complete this survey.

For additional inquiries or comments, please contact Kostadin Kostadinov, MD (kostadinr.kostadinov@mu-plovdiv.bg).

04-11-2024 – 12:25

Submit your survey.

Thank you for completing this survey.