



C3: Cancer Care Journeys and Clinical Decision-making

PHASE 1
Clinical Decision-making in MDTs

PHASE 2
Patient & Clinician
Responses to the
Consultation

PHASE 3
Patient Understandings of their Journey

PHASE 4 ntervention Development

- What impact do comorbidities have on treatment decision-making in cancer consultations with Māori patients/whānau?
- What other factors influence treatment decision-making in cancer consultations with Māori patients/whānau?

Methodology

- Māori Centred Research
- Case Study
- Methods: audio-recorded
 - consultations
 - specialist debrief
 - semi-structured patient interview
- Data transcribed and thematically analysed







Patient decision-making



- Specialist: rapport, expert, treatment recommendation
 - "Doctor, you're the expert" (Waiti, con)
- Patient: wairua (spiritual wellbeing) & hinengaro (mental wellbeing), use of traditional, complementary and alternative medicines
- Whānau: present, participate, influence, motivation, consideration

"And I just need to let you know now ..., she wants to be involved, I want her to be involved, so we need to involve her so she can get time off work and come home" (Nuku, con)

Specialist decision-making



- Patient: motivation, fitness for treatment
- Disease and treatment: symptoms, progression, safety and efficacy
- Health care system: multidisciplinary teams (MDT), colleagues, treatment protocols

"...the standard protocol would be a more classic protocol [which] would be surgical resection, but because of the size of the tumour, neo-adjuvant therapy is recommended" (MS 3, Wai)

Comorbidities



Influenced patient and specialist decision-making

- · Impacted on patient lives going into the consultation
- Diagnosis
- Treatment options & treatment protocols
- Side-effects
- Adds complexity to treatment decision-making
- Unique case

Communication

"He's a very nice man, and very open.

Straight up. Love it....very informative." (Waitī, IV)

- Rapport/style
- Information:
 - load and complexity
 - Medical jargon lay language
 - Process and understanding



Decision-making

Complications Pre-decision?

Type

- Patient led decision-making √?
- Shared Decision-making X
- Medical decision-making V
- Informed decision-making?
- Delayed decision-making V



Conclusion

- Whānau are a key factor and should be acknowledged
- Quality interventions and resources are needed
- **Comorbidities** add additional complexity
- Further development of culturally appropriate care and support is needed
 Review the cancer care system and processes to enable informed decisionmaking and informed consent
- Māori centred research is a culturally appropriate research method able to be successfully used in the hospital setting

More work is needed to identify determinants of cancer inequities experienced by Māori – look upstream

Mihi whakamutunga

To the patients, whanau, specialists, nurses, workers and researchers who enabled this study to be undertaken



tēnā koutou, tēnā koutou katoa