

Again, here there are a lot of questions, there is no right or wrong answer and every person is different. We just want to hear what you think.

This section is asking about how well your needs have been met.

To help us plan better support services, we are interested in whether or not your needs, which you may have faced as a result of having cancer, have been met.

Work through Booklet with patient (pages 1 to 3)

For every question, tell me whether you have needed help with this issue **within the last month** as a result of having cancer. There are 2 possible answers to choose from **YES** or **NO**.

If you answered YES, tell me which number best shows how much help you needed.

1	<u>Satisfied</u> with help received	I did need help with this, but my need for help was <u>satisfied</u> at the time.
2	<u>Needed a little more</u> help	This caused me concern or discomfort. I had <u>a little need</u> for additional help.
3	<u>Needed some more</u> help	This caused me concern or discomfort. I had <u>some need</u> for additional help.
4	<u>Needed a lot more</u> help	This caused me concern or discomfort. I had <u>a strong need</u> for additional help.

In the last month, did you need any help with

If you answered YES,
How much help did you need?

<u>Satisfied</u> with help received	<u>Needed a little more</u> help	<u>Needed some more</u> help	<u>Needed a lot more</u> help
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1 Physical pain (hurt)

No No Yes

1

2

3

4