

Multidisciplinary team members views about MDT working:

Results from a survey commissioned by the National Cancer Action Team

ANALYSIS REPORT

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Introduction

This is the full analysis report of data resulting from an on-line survey commissioned by the National Cancer Action Team and undertaken by Business Boffins Ltd. The survey aimed to assess multidisciplinary team (MDT) members' perceptions regarding: what parameters are essential for an effective MDT, how best to measure MDT effectiveness, and what support or tools MDTs may need to become or remain effective.

Development of the survey

The survey questions were designed with input from a steering group consisting of 32 cancer professionals, including representatives from all core disciplines in cancer MDTs. The survey comprised a total of 52 questions: 5 questions assessed the respondents background (professional group, membership of MDT and tumour types); 22 questions were multiple-choice questions assessing team members' perceptions about MDT working; 4 questions were fact-based questions, collecting information about the current status of MDT working (e.g. Does your team have a designated MDT coordinator?); and 21 questions were free-text (open) questions.

This report contains all analysis conducted on the responses to 18 of the multiple choice questions regarding team members' perceptions and the 4 facts-based questions, covering the following aspects of MDT working:

1. Domains that are important for effective MDT working

- Structure
 - Membership/attendance
 - Technology (availability and use)
 - Physical environment of the meeting venue
 - Preparation for MDT meetings
 - Organisation/administration during MDT meetings
 - Clinical decision-making
 - Case management and clinical decision-making process
 - Teamworking
 - Patient-centred care/coordination of service
- Team governance
 - Leadership
 - Data collection, analysis and audit of outcomes
 - Clinical governance
- Professional development and education of team members
 - Development and training
- 2. Outcomes from effective MDT working
- 3. Measuring MDT effectiveness/performance
- 4. Supporting MDTs to work effectively

Participants

MDT members were identified by contacting a variety of sources including the cancer networks, the MDT coordinators forum, and the Network Development Programme forum for Informatics and Pharmacy. Invitations to participate in the survey were mailed to MDT members via cancer networks, and in some areas via cancer service managers. Survey recipients were encouraged to circulate the survey broadly amongst other MDT members. A link to the survey was also provided on the National Cancer Intelligence Network website. The sampling method (allowing anyone to complete a survey via a variety of different methods) was designed to reach as many team members as possible. The anonymous nature of the survey, designed to encourage responses from all team members, means that the representativeness of participants cannot be determined and thereby the findings cannot be generalised to all cancer MDT members.

Participants were categorised according to professional group and by discipline as follows:

Professional Group	Discipline				
Doctors	Surgeons				
	Radiologists				
	Histo-cytopathologists				
	Oncologists (clinical and medical)				
	Haematologists				
	Other doctors (e.g. physicians, GP)				
	Palliative care specialists				
Nurses	Clinical nurse specialists				
	Other nurses (e.g. nurse consultants,				
	matrons, ward nurses etc)				
Allied Health Professionals	Allied Health Professionals				
MDT coordinators	MDT coordinators				
Other (admin/clerical and managerial)	Other (admin/clerical and managerial)				

Procedure

Surveys were completed on-line between 30th January and 16th March 2009. Team members participated on a confidential anonymised basis. Team members who belonged to more than one MDT were instructed to aggregate their experience into one single response where possible.

Analysis

Prior to analysing responses to survey questions, the data were examined to ensure that all team members were correctly classified in terms of the discipline in which they worked, the tumour types covered by any MDTs they attended, and whether or not they were an MDT member. Any responses to questions where 'other' was selected and/or an open text description was provided were examined and recategorised as appropriate. This procedure also resulted in the creation of some new categories (e.g. a separate discipline grouping for haematologists).

In order to ensure the most robust analysis and interpretation of responses the following rules were applied:

 All analysis presented in this report is based upon the responses from health professionals classified as being MDT members (n=2054). MDT membership was defined as any team members stating that they were either a core or extended member of at least one cancer MDT. One exception to this rule was MDT coordinators who, by definition, were defined as MDT members.

- Analysis of facts-based questions about MDTs was either conducted on a sub-sample of team members that only belonged to one team, or findings are presented for the overall sample but with a reminder that the answers represent aggregate responses across multiple teams for some team members. This is because team members were only able to provide one answer but may have belonged to more than one MDT.
- In the survey, team members were given one combined option for 'not applicable' or 'don't know'. All such responses are therefore treated as 'not applicable' and excluded from analysis.
- The majority of questions offered team members a choice of 4 categories (e.g. strongly agree, agree, disagree, strongly disagree). These response categories were dichotomised in order to simplify data presentation ("strongly agree or agree" compared to "disagree or strongly disagree"). Examination of the data using the original four categories revealed that doctors, on the whole, were less likely to opt for the extreme responses: 'strongly agree' or 'very important', and more likely instead to opt for 'agree' or 'important'.
- Responses were analysed and are presented as follows:
 - o overall sample of all MDT members
 - o by professional group
 - \circ by discipline
 - o by tumour type

In order to provide the most robust analysis by tumour type, the analysis is based upon a sub-sample of 1339 (65%) of team members who stated that they only work within one tumour type. This sub-sample is inevitably biased by discipline, half of whom are surgeons or clinical nurse specialists. As expected, there were more team members for the common tumour types and very small numbers for some of the less common tumour types.

• The completion rates for individual questions varied. All percentages presented in this report are the proportion of valid responses from the total number of MDT members answering each question. The number of team members on which each percentage is based is provided in every table.

Part One: Sample Characteristics

Characteristics of respondents

In total, responses were received by 2256 respondents. Of these, 2054 were defined as MDT members.

A: Professional group of respondents

Over half of respondents were doctors, a quarter were nurses and 15% were MDT coordinators (table A1).

Professional group	Frequency	Percent
Doctors	1093	53
Nurses	532	26
AHPs	85	4
MDT coordinators	302	15
Other (admin/managerial)	42	2
Total	2054	100.0

Table A1: Professional group of respondents

B: Discipline of respondents

The disciplines of respondents are shown in table B1. The majority were clinical nurse specialists (24%), MDT coordinators (15%) and surgeons (16%).

Table B1:	Disci	plines	of	res	pondents

Discipline	Frequency	Percent
Doctors:		
Surgeon	325	16
Radiologist	127	6
Histo/cytopathologist	126	6
Oncologist (clinical and medical)	164	8
Haematologist	98	5
Other doctor (Physician, GP etc)	188	9
Palliative care specialist	65	3
Nurses:		
Clinical Nurse Specialist	498	24
Nursing (other)	34	2
Allied Health Professional	85	4
MDT coordinator	302	15
Other (admin/clerical and managerial)	42	2
Total	2054	100.0

C: MDT membership

Just over half of respondents were core or extended members of only one MDT (51%), and just over a quarter were core or extended members of two MDTs (27%). A minority of 5% were members of 5 or more MDTs (table C1).

When examined by discipline, over half of the CNSs (62%), AHPs (84%), MDT coordinators (51%), surgeons (62%), haematologists (52%) and 'other doctors' (69%) were members of only one MDT, whereas over half of histopathologists (56%), radiologists (53%) and palliative care specialists (52%) who responded were members of between 2-3 MDTs, and over half of oncologists (54%) were members of between 3–4 MDTs (table C2).

The minority who were members of 5 or more MDTs were most likely to be histo/cytopathologists (17%), oncologists (17%), other team members (admin/managerial, 17%) or palliative care specialists (14%).

Table C1 : How many different MDTs (either for the same or different tumour types) are	
you a member of?	

Table 3: How many different MDTs(either for the same or differenttumour types) are you a memberof?	Frequency	Percent
1	1025	51
2	539	27
3	232	12
4	127	6
5+MDTs	96	5

		Discipline To									Total			
Numl MDTs	5	Surgeo n	Radiologi st	Histo/ cytopatholog ist	Oncologi st (clinical and medical)	Haematolog ist	Other Doctor (Physicia n, GP etc)	Palliativ e care speciali st	Clinical Nurse Speciali st	Nursin g (other)	Allied Health Professio nal	MDT coordinat or	Other (admin/cleri cal and managerial)	
1	Cou nt %	201	43	19	18	51	129	14	308	16	71	137	18	1025
		61.8%	33.9%	15.1%	11.0%	52.0%	68.6%	21.5%	61.8%	47.1%	83.5%	51.3%	42.9%	50.8%
2	Cou nt %	94	42	34	31	35	38	19	134	12	8	83	9	539
		28.9%	33.1%	27.0%	18.9%	35.7%	20.2%	29.2%	26.9%	35.3%	9.4%	31.1%	21.4%	26.7%
3	Cou nt %	22	25	36	45	8	13	15	38	2	3	21	4	232
		6.8%	19.7%	28.6%	27.4%	8.2%	6.9%	23.1%	7.6%	5.9%	3.5%	7.9%	9.5%	11.5%
4	Cou nt %	5	14	16	43	1	6	8	13	1	1	15	4	127
		1.5%	11.0%	12.7%	26.2%	1.0%	3.2%	12.3%	2.6%	2.9%	1.2%	5.6%	9.5%	6.3%
5+	Cou nt %	3	3	21	27	3	2	9	5	3	2	11	7	96
		.9%	2.4%	16.7%	16.5%	3.1%	1.1%	13.8%	1.0%	8.8%	2.4%	4.1%	16.7%	4.8%
Tota I	Cou nt	325	127	126	164	98	188	65	498	34	85	267	42	2019

Table C2: Number of different MDTs a member of by discipline

		%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0 %
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D: Tumour types

In total, 1339 (65%) respondents worked in teams that only covered one tumour type. The distribution by tumour type is shown in table D1.

As expected, there are more respondents for the more common tumour types (breast, colorectal, lung, gynae, head and neck, upper GI, urological and haematological) than there are for any of the other tumour types. The small numbers of respondents for some tumour types makes interpretation difficult. Analysis by tumour will be conducted across all tumour types but interpretation will focus only on the common tumour types.

Tumour type		Frequency	Percent
	Breast		
		204	15
	Colorectal	134	10
	Lung	146	11
Common tumour	Gynae	116	9
types	Head and Neck	109	8
	Upper GI	124	9
	Urological	134	10
	Haematological	174	13
	Skin	90	7
	Supportive and Palliative Care	46	3
Less common	Brain/CNS	30	2
tumour types	Sarcoma	16	1
	Children/Young People	14	1
	Endocrine	2	0
	Total	1339	100.0
Excluded	More than one tumour type	715	
Total		2054	

The disciplines of respondents that work across only one tumour type are shown in table D2. The sample is dominated by clinical nurse specialists, surgeons and MDT coordinators.

		-
	Frequency	Percent
Surgeon	262	19.6
Radiologist	57	4.3
Histo/cytopathologist	32	2.4
Oncologist (clinical and medical)	31	2.3
Haematologist	93	6.9
Other Doctor (Physician, GP etc)	151	11.3
Palliative care specialist	21	1.6
Clinical Nurse Specialist	412	30.8
Nursing (other)	16	1.2
Allied Health Professional	68	5.1
MDT coordinator	176	13.1
Other (admin/clerical and managerial)	20	1.5
Total	1339	100.0

Part Two: Analysis of survey responses

Except where otherwise stated, all data is presented as follows:

- Percentages for overall sample (n=2054)
- Percentages by professional group (n=2054, 5 categories: doctors, nurses, AHPs, MDT coordinators, other)
- Percentages by discipline (n=2054, 12 categories: surgeon, radiologist, histo/cytopathologist, oncologist, haematologist, other doctor, palliative care specialist, clinical nurse specialist, nursing (other), AHP, MDT coordinator, other)
- Percentages by tumour type (n=1339)

Domains that are important for effective MDT working

A: Importance of domains to effective MDT working

	N (valid% - adjusting for missing data)		
Table A1: The following domains/themes are suggestedas being important for effective MDT functioning. Pleaseassess each statement in turn:	Very important/ Important	Somewhat important/ Not important	
Structure			
Membership & Attendance	1932 (99)	22 (1)	
Technology (availability and use)	1815 (93)	136 (7)	
Physical environment of meeting venue	1526 (78)	427 (22)	
Preparation prior to MDT meeting	1887 (96)	70 (4)	
Organisation/administration during MDT meeting	1904 (98)	44 (2)	
Clinical Decision Making			
Case management and clinical decision-making process	1934 (99)	16 (1)	
Teamworking	1928 (99)	28 (1)	
Patient-centred care/co-ordination of service	1809 (93)	135 (7)	
Team Governance			
Leadership	1851 (95)	99 (5)	
Data collection, analysis and audit of outcomes	1749 (90)	205 (11)	
Clinical governance	1629 (84)	306 (16)	
Professional development and education of team			
members			
Development and training	1512 (78)	433 (22)	

Structure

A1: Membership and Attendance

Table A2: Importance of membership and attendance to effective MDT functioning: by professional group

		Membership and	attendance	Total
Professional Group		very important/important	somewhat/not important	
Doctors	Count	1026	19	1045
	%	98.2%	1.8%	100.0%
Nurses	Count	510	1	511
	%	99.8%	.2%	100.0%
AHPs	Count	81	0	81
	%	100.0%	.0%	100.0%
MDT coordinators	Count	275	2	277
	%	99.3%	.7%	100.0%
Other (admin/managerial)	Count	40	0	40
	%	100.0%	.0%	100.0%
Total	Count	1932	22	1954
	%	98.9%	1.1%	100.0%

		Manakanakin and		Tatal
Discipline		Membership and	attendance	Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	298	7	305
	%	97.7%	2.3%	100.0%
Radiologist	Count	118	1	119
	%	99.2%	.8%	100.0%
Histo/cytopathologist	Count	119	1	120
	%	99.2%	.8%	100.0%
Oncologist (clinical and medical)	Count	160	2	162
	%	98.8%	1.2%	100.0%
Haematologist	Count	91	3	94
Other Doctor (Physician, GP etc)	% Count	96.8% 178	3.2% 4	100.0% 182
GF elc)	%	97.8%	2.2%	100.0%
Palliative care specialist	Count	62	2.270	63
	%	98.4%	1.6%	100.0%
Clinical Nurse Specialist	Count	477	1	478
	%	99.8%	.2%	100.0%
Nursing (other)	Count	33	,0	33
,	%	100.0%	.0%	100.0%
Allied Health Professional	Count	81	0	81
	%	100.0%	.0%	100.0%
MDT coordinator	Count	275	2	277
	%	99.3%	.7%	100.0%
Other (admin/clerical and managerial)	Count	40	0	40
J ,	%	100.0%	.0%	100.0%
Total	Count	1932	22	1954
	%			
		98.9%	1.1%	100.0%

Table A3: Importance of membership and attendance to the effectiveness of MDT functioning: by discipline

		Membership and	attendance	Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	191	2	193
	%	99.0%	1.0%	100.0%
Colorectal	Count	122	1	123
	%	99.2%	.8%	100.0%
Lung	Count	140	0	140
_	%	100.0%	.0%	100.0%
Gynae	Count	105	1	106
	%	99.1%	.9%	100.0%
Head and Neck	Count	102	0	102
	%	100.0%	.0%	100.0%
Upper GI	Count	120	0	120
	%	100.0%	.0%	100.0%
Urological	Count	127	1	128
	%	99.2%	.8%	100.0%
Haematological	Count	165	3	168
	%	98.2%	1.8%	100.0%
Skin	Count	83	2	85
	%	97.6%	2.4%	100.0%
Supportive and Palliative Care	Count	44	0	44
	%	100.0%	.0%	100.0%
Brain/CNS	Count	29	0	29
	%	100.0%	.0%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	13	0	13
0 1 -	%	100.0%	.0%	100.0%
Endocrine	Count	2	.070	2
	%	100.0%	.0%	100.0%
Total	Count	1259	10	1269
	%	1200	10	1203
		99.2%	.8%	100.0%

Table A4: Importance of membership and attendance: by tumour type

A2: Technology

Table A5: Importance of technology (availability and use) to effectiveness of MDTs: by professional group

		Technology (availability and use)		Total
Professional Group	Professional Group		somewhat/not important	
Doctors	Count	969	75	1044
	%	92.8%	7.2%	100.0%
Nurses	Count	483	27	510
	%	94.7%	5.3%	100.0%
AHPs	Count	62	19	81
	%	76.5%	23.5%	100.0%
MDT coordinators	Count	266	10	276
	%	96.4%	3.6%	100.0%
Other (admin/managerial)	Count	35	5	40
%	87.5%	12.5%	100.0%	
Total	Count	1815	136	1951
	%	93.0%	7.0%	100.0%

		Tashralan (availa		Tatal
Discipline		Technology (availa very	somewhat/not	Total
		important/important	important	
Surgeon	Count	279	26	305
	%	91.5%	8.5%	100.0%
Radiologist	Count	114	5	119
	%	95.8%	4.2%	100.0%
Histo/cytopathologist	Count	112	8	120
	%	93.3%	6.7%	100.0%
Oncologist (clinical and medical)	Count	157	5	162
	%	96.9%	3.1%	100.0%
Haematologist	Count	92	2	94
	%	97.9%	2.1%	100.0%
Other Doctor (Physician, GP etc)	Count	164	18	182
,	%	90.1%	9.9%	100.0%
Palliative care specialist	Count	51	11	62
	%	82.3%	17.7%	100.0%
Clinical Nurse Specialist	Count	451	26	477
	%	94.5%	5.5%	100.0%
Nursing (other)	Count	32	1	33
	%	97.0%	3.0%	100.0%
Allied Health Professional	Count	62	19	81
	%	76.5%	23.5%	100.0%
MDT coordinator	Count	266	10	276
	%	96.4%	3.6%	100.0%
Other (admin/clerical and managerial)	Count	35	5	40
- ·	%	87.5%	12.5%	100.0%
Total	Count	1815	136	1951
	%	93.0%	7.0%	100.0%

Table A6: Importance of technology (availability and use) to effectiveness of MDTs: by discipline

_		Technology (availa	Technology (availability and use)	
Tumour type		very important/important	somewhat/not important	
Breast	Count	179	14	193
	%	92.7%	7.3%	100.0%
Colorectal	Count	120	4	124
	%	96.8%	3.2%	100.0%
Lung	Count	130	8	138
	%	94.2%	5.8%	100.0%
Gynae	Count	103	4	107
	%	96.3%	3.7%	100.0%
Head and Neck	Count	96	6	102
	%	94.1%	5.9%	100.0%
Upper GI	Count	114	6	120
	%	95.0%	5.0%	100.0%
Urological	Count	121	7	128
	%	94.5%	5.5%	100.0%
Haematological	Count	163	5	168
	%	97.0%	3.0%	100.0%
Skin	Count	72	11	83
	%	86.7%	13.3%	100.0%
Supportive and Palliative Care	Count	22	22	44
	%	50.0%	50.0%	100.0%
Brain/CNS	Count	27	2	29
	%	93.1%	6.9%	100.0%
Sarcoma	Count	14	2	16
	%	87.5%	12.5%	100.0%
Children/Young People	Count	8	5	13
	%	61.5%	38.5%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1171	96	1267
	%	92.4%	7.6%	100.0%

Table A7: Importance of technology (availability and use) to effectiveness of MDTs: by tumour type

A3: Physical environment of meeting venue

		Physical environment of meeting venue		Total
Professional Group		very important/important	somewhat/not important	
Doctors	Count	801	243	1044
	%	76.7%	23.3%	100.0%
Nurses	Count	425	87	512
	%	83.0%	17.0%	100.0%
AHPs	Count	52	29	81
	%	64.2%	35.8%	100.0%
MDT coordinators	Count	222	54	276
	%	80.4%	19.6%	100.0%
Other (admin/managerial)	Count	26	14	40
	%	65.0%	35.0%	100.0%
Total	Count	1526	427	1953
	%	78.1%	21.9%	100.0%

Table A8: Importance of physical environment of meeting venue to effectiveness ofMDTs: by professional group

Discipline		Physical environme venue		Total
		very important/important	somewhat/not important	
Surgeon	Count	230	75	305
	%	75.4%	24.6%	100.0%
Radiologist	Count	99	20	119
	%	83.2%	16.8%	100.0%
Histo/cytopathologist	Count	95	24	119
	%	79.8%	20.2%	100.0%
Oncologist (clinical and medical)	Count	118	43	161
,	%	73.3%	26.7%	100.0%
Haematologist	Count	73	21	94
	%	77.7%	22.3%	100.0%
Other Doctor (Physician, GP etc)	Count	140	43	183
·	%	76.5%	23.5%	100.0%
Palliative care specialist	Count	46	17	63
	%	73.0%	27.0%	100.0%
Clinical Nurse Specialist	Count	403	76	479
	%	84.1%	15.9%	100.0%
Nursing (other)	Count	22	11	33
	%	66.7%	33.3%	100.0%
Allied Health Professional	Count	52	29	81
	%	64.2%	35.8%	100.0%
MDT coordinator	Count	222	54	276
	%	80.4%	19.6%	100.0%
Other (admin/clerical and managerial)	Count	26	14	40
	%	65.0%	35.0%	100.0%
Total	Count	1526	427	1953
	%	78.1%	21.9%	100.0%

Table A9: Importance of physical environment of meeting venue to effectiveness of MDTs: by discipline

Tumour type		Physical environm venue		Total
		very important/important	somewhat/not important	
Breast	Count	154	39	193
	%	79.8%	20.2%	100.0%
Colorectal	Count	102	22	124
	%	82.3%	17.7%	100.0%
Lung	Count	116	23	139
	%	83.5%	16.5%	100.0%
Gynae	Count	91	16	107
	%	85.0%	15.0%	100.0%
Head and Neck	Count	78	24	102
	%	76.5%	23.5%	100.0%
Upper GI	Count	99	21	120
	%	82.5%	17.5%	100.0%
Urological	Count	97	31	128
	%	75.8%	24.2%	100.0%
Haematological	Count	130	38	168
	%	77.4%	22.6%	100.0%
Skin	Count	54	31	85
	%	63.5%	36.5%	100.0%
Supportive and Palliative Care	Count	21	23	44
	%	47.7%	52.3%	100.0%
Brain/CNS	Count	24	5	29
	%	82.8%	17.2%	100.0%
Sarcoma	Count	14	2	16
	%	87.5%	12.5%	100.0%
Children/Young People	Count	6	7	13
	%	46.2%	53.8%	100.0%
Endocrine	Count	0	2	2
	%	.0%	100.0%	100.0%
Total	Count	986	284	1270
	%	77.6%	22.4%	100.0%

Table A10: Importance of physical environment of meeting venue to effectiveness of MDTs: by tumour group

A4: Preparation prior to MDT meetings

Professional Group		Preparation prior to MDT meeting		Total
		very important/important	somewhat/not important	
Doctors	Count	993	53	1046
	%	94.9%	5.1%	100.0%
Nurses	Count	508	5	513
	%	99.0%	1.0%	100.0%
AHPs	Count	71	10	81
	%	87.7%	12.3%	100.0%
MDT coordinators	Count	277	0	277
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	38	2	40
	%	95.0%	5.0%	100.0%
Total	Count	1887	70	1957
	%	96.4%	3.6%	100.0%

 Table A11: Importance of preparation prior to MDT meeting to effectiveness of MDTs:

 by professional group

.		Preparation prior to	MDT meeting	Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	289	16	305
	%	94.8%	5.2%	100.0%
Radiologist	Count	117	2	119
	%	98.3%	1.7%	100.0%
Histo/cytopathologist	Count	114	6	120
	%	95.0%	5.0%	100.0%
Oncologist (clinical and medical)	Count	150	12	162
	%	92.6%	7.4%	100.0%
Haematologist	Count	89	5	94
	%	94.7%	5.3%	100.0%
Other Doctor (Physician, GP etc)	Count	173	10	183
	%	94.5%	5.5%	100.0%
Palliative care specialist	Count	61	2	63
	%	96.8%	3.2%	100.0%
Clinical Nurse Specialist	Count	475	5	480
	%	99.0%	1.0%	100.0%
Nursing (other)	Count	33	0	33
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	71	10	81
	%	87.7%	12.3%	100.0%
MDT coordinator	Count	277	0	277
	%	100.0%	.0%	100.0%
Other (admin/clerical and managerial)	Count	38	2	40
	%	95.0%	5.0%	100.0%
Total	Count	1887	70	1957
	%	96.4%	3.6%	100.0%

Table A12: Importance of preparation prior to MDT meeting to effectiveness of MDTs: by discipline

		Preparation prior to	MDT meeting	Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	187	6	193
	%	96.9%	3.1%	100.0%
Colorectal	Count	121	3	124
	%	97.6%	2.4%	100.0%
Lung	Count	137	3	140
	%	97.9%	2.1%	100.0%
Gynae	Count	106	1	107
	%	99.1%	.9%	100.0%
Head and Neck	Count	94	8	102
	%	92.2%	7.8%	100.0%
Upper GI	Count	116	4	120
	%	96.7%	3.3%	100.0%
Urological	Count	126	2	128
-	%	98.4%	1.6%	100.0%
Haematological	Count	162	6	168
C C	%	96.4%	3.6%	100.0%
Skin	Count	79	6	85
	%	92.9%	7.1%	100.0%
Supportive and Palliative Care	Count	39	5	44
	%	88.6%	11.4%	100.0%
Brain/CNS	Count	29	0	29
	%	100.0%	.0%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	12	1	13
	%	92.3%	7.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1226	45	1271
	%	96.5%	3.5%	100.0%

Table A13: Importance of preparation prior to MDT meeting: by tumour type

A5: Organisation and administration during MDT meetings

		Organisation/admin during MDT meeting		Total
Professional group	Professional group		somewhat/not important	
Doctors	Count	1013	28	1041
	%	97.3%	2.7%	100.0%
Nurses	Count	505	6	511
	%	98.8%	1.2%	100.0%
AHPs	Count	77	4	81
	%	95.1%	4.9%	100.0%
MDT coordinators	Count	271	4	275
	%	98.5%	1.5%	100.0%
Other (admin/managerial)	Count	38	2	40
(damin/managenal)	%	95.0%	5.0%	100.0%
Total	Count	1904	44	1948
	%	97.7%	2.3%	100.0%

 Table A14: Importance of organisation/administration during MDT meeting to the effectiveness of MDTs: by professional group

			Organisation/admin during MDT meeting	
Discipline			somewhat/not important	
Surgeon	Count	295	10	305
	%	96.7%	3.3%	100.0%
Radiologist	Count	115	2	117
	%	98.3%	1.7%	100.0%
Histo/cytopathologist	Count	118	2	120
	%	98.3%	1.7%	100.0%
Oncologist (clinical and medical)	Count	157	3	160
,	%	98.1%	1.9%	100.0%
Haematologist	Count	89	5	94
	%	94.7%	5.3%	100.0%
Other Doctor (Physician, GP etc)	Count	177	5	182
,	%	97.3%	2.7%	100.0%
Palliative care specialist	Count	62	1	63
	%	98.4%	1.6%	100.0%
Clinical Nurse Specialist	Count	473	5	478
	%	99.0%	1.0%	100.0%
Nursing (other)	Count	32	1	33
	%	97.0%	3.0%	100.0%
Allied Health Professional	Count	77	4	81
	%	95.1%	4.9%	100.0%
MDT coordinator	Count	271	4	275
	%	98.5%	1.5%	100.0%
Other (admin/clerical and managerial)	Count	38	2	40
,	%	95.0%	5.0%	100.0%
Total	Count	1904	44	1948
	%	97.7%	2.3%	100.0%

Table A15: Importance of organisation/administration during MDT meeting to effectiveness of MDT: by discipline

			ing MDT meeting	Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	190	3	193
	%	98.4%	1.6%	100.0%
Colorectal	Count	120	3	123
	%	97.6%	2.4%	100.0%
Lung	Count	137	2	139
	%	98.6%	1.4%	100.0%
Gynae	Count	107	0	107
	%	100.0%	.0%	100.0%
Head and Neck	Count	100	2	102
	%	98.0%	2.0%	100.0%
Upper GI	Count	116	4	120
	%	96.7%	3.3%	100.0%
Urological	Count	126	2	128
	%	98.4%	1.6%	100.0%
Haematological	Count	162	6	168
	%	96.4%	3.6%	100.0%
Skin	Count	81	2	83
	%	97.6%	2.4%	100.0%
Supportive and Palliative Care	Count	41	3	44
	%	93.2%	6.8%	100.0%
Brain/CNS	Count	27	2	29
	%	93.1%	6.9%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	12	1	13
·	%	92.3%	7.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1237	30	1267
	%	97.6%	2.4%	100.0%

Table A16: Importance of organisation/administration during MDT meeting to effectiveness of MDTs: by tumour type

Clinical decision-making

A6: Case management and clinical-decision-making

 Table A17: Importance of case management and clinical decision-making process to

 effectiveness of MDTs: by professional group

Professional Group			Case management and clinical decision-making process	
Professional Group				
		very important/important	somewhat/not important	
Doctors	Count	1030	13	1043
	%	98.8%	1.2%	100.0%
Nurses	Count	511	1	512
	%	99.8%	.2%	100.0%
AHPs	Count	79	1	80
	%	98.8%	1.3%	100.0%
MDT coordinators	Count	275	0	275
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1934	16	1950
	%	99.2%	.8%	100.0%

Discipline		Case managemer decision-makin		Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	298	6	304
	%	98.0%	2.0%	100.0%
Radiologist	Count	117	2	119
	%	98.3%	1.7%	100.0%
Histo/cytopathologist	Count	120	0	120
	%	100.0%	.0%	100.0%
Oncologist (clinical and medical)	Count	161	1	162
	%	99.4%	.6%	100.0%
Haematologist	Count	92	1	93
	%	98.9%	1.1%	100.0%
Other Doctor (Physician, GP etc)	Count	179	3	182
	%	98.4%	1.6%	100.0%
Palliative care specialist	Count	63	0	63
	%	100.0%	.0%	100.0%
Clinical Nurse Specialist	Count	478	1	479
	%	99.8%	.2%	100.0%
Nursing (other)	Count	33	0	33
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	79	1	80
	%	98.8%	1.3%	100.0%
MDT coordinator	Count	275	0	275
	%	100.0%	.0%	100.0%
Other (admin/clerical and managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1934	16	1950
	%	99.2%	.8%	100.0%

Table A18: Importance of case management and clinical decision-making process to effectiveness of MDTs: by discipline

		Case managemer		
Tumour type		decision-makin	g process	Total
		very important/important	somewhat/not important	
Breast	Count	192	0	192
	%	100.0%	.0%	100.0%
Colorectal	Count	123	1	124
	%	99.2%	.8%	100.0%
Lung	Count	137	2	139
	%	98.6%	1.4%	100.0%
Gynae	Count	107	0	107
	%	100.0%	.0%	100.0%
Head and Neck	Count	100	0	100
	%	100.0%	.0%	100.0%
Upper GI	Count	118	2	120
	%	98.3%	1.7%	100.0%
Urological	Count	128	0	128
	%	100.0%	.0%	100.0%
Haematological	Count	166	1	167
	%	99.4%	.6%	100.0%
Skin	Count	82	2	84
	%	97.6%	2.4%	100.0%
Supportive and Palliative Care	Count	42	2	44
	%	95.5%	4.5%	100.0%
Brain/CNS	Count	29	0	29
	%	100.0%	.0%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	13	0	13
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1255	10	1265
	%	99.2%	.8%	100.0%

Table A19: Importance of case management and clinical decision-making process to the effectiveness of MDTs: by tumour group

A7: Teamworking

Table A20: Importance of teamworking to effectiveness of MDTs: by professional
group

Professional Group		Teamworking		Total
		very important/important	somewhat/not important	
Doctors	Count	1022	24	1046
	%	97.7%	2.3%	100.0%
Nurses	Count	511	2	513
	%	99.6%	.4%	100.0%
AHPs	Count	81	0	81
	%	100.0%	.0%	100.0%
MDT coordinators	Count	275	1	276
	%	99.6%	.4%	100.0%
Other (admin/managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1928	28	1956
	%	98.6%	1.4%	100.0%

Discipline		Teamwor	rking	Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	295	10	305
	%	96.7%	3.3%	100.0%
Radiologist	Count	116	3	119
	%	97.5%	2.5%	100.0%
Histo/cytopathologist	Count	118	2	120
	%	98.3%	1.7%	100.0%
Oncologist (clinical and medical)	Count	161	1	162
	%	99.4%	.6%	100.0%
Haematologist	Count	90	4	94
	%	95.7%	4.3%	100.0%
Other Doctor (Physician, GP etc)	Count	180	3	183
	%	98.4%	1.6%	100.0%
Palliative care specialist	Count	62	1	63
	%	98.4%	1.6%	100.0%
Clinical Nurse Specialist	Count	478	2	480
	%	99.6%	.4%	100.0%
Nursing (other)	Count	33	0	33
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	81	0	81
	%	100.0%	.0%	100.0%
MDT coordinator	Count	275	1	276
	%	99.6%	.4%	100.0%
Other (admin/clerical and managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1928	28	1956
	%	98.6%	1.4%	100.0%

Table: A21 Importance of teamworking to effectiveness of teams: by discipline

Tumour tupo		Teamworking		Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	193	0	193
	%	100.0%	.0%	100.0%
Colorectal	Count	119	5	124
	%	96.0%	4.0%	100.0%
Lung	Count	139	0	139
	%	100.0%	.0%	100.0%
Gynae	Count	106	1	107
	%	99.1%	.9%	100.0%
Head and Neck	Count	102	0	102
	%	100.0%	.0%	100.0%
Upper GI	Count	118	2	120
	%	98.3%	1.7%	100.0%
Urological	Count	128	0	12
	%	100.0%	.0%	100.0%
Haematological	Count	161	7	168
	%	95.8%	4.2%	100.0%
Skin	Count	84	1	8
	%	98.8%	1.2%	100.0%
Supportive and Palliative Care	Count	44	0	4
	%	100.0%	.0%	100.0%
Brain/CNS	Count	28	1	2
	%	96.6%	3.4%	100.0%
Sarcoma	Count	16	0	1
	%	100.0%	.0%	100.0%
Children/Young People	Count	13	0	1
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	:
	%	100.0%	.0%	100.0%
Total	Count	1253	17	127
	%	98.7%	1.3%	100.0%

Table:A22 Importance of teamworking to effectiveness of MDTs: by tumour type

A8: Patient-centred care/coordination of service

Professional Group		Patient-centred care/coordination of service		Total
		very important/important	somewhat/not important	
Doctors	Count	916	123	1039
	%	88.2%	11.8%	100.0%
Nurses	Count	506	6	512
	%	98.8%	1.2%	100.0%
AHPs	Count	80	0	80
	%	100.0%	.0%	100.0%
MDT coordinators	Count	270	4	274
	%	98.5%	1.5%	100.0%
Other (admin/managerial)	Count	37	2	39
	%	94.9%	5.1%	100.0%
Total	Count	1809	135	1944
	%	93.1%	6.9%	100.0%

 Table: A23 Importance of patient-centred care/coordination of service to effectiveness

 of MDTs: by professional group

Dissipling		Patient-centred care servic		Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	266	38	304
	%	87.5%	12.5%	100.0%
Radiologist	Count	98	19	117
	%	83.8%	16.2%	100.0%
Histo/cytopathologist	Count	104	13	117
	%	88.9%	11.1%	100.0%
Oncologist (clinical and medical)	Count	141	20	161
	%	87.6%	12.4%	100.0%
Haematologist		80	14	94
	%	85.1%	14.9%	100.0%
Other Doctor (Physician, GP etc)	Count	165	18	183
,	%	90.2%	9.8%	100.0%
Palliative care specialist	Count	62	1	63
	%	98.4%	1.6%	100.0%
Clinical Nurse Specialist	Count	475	4	479
	%	99.2%	.8%	100.0%
Nursing (other)	Count	31	2	33
	%	93.9%	6.1%	100.0%
Allied Health Professional	Count	80	0	80
	%	100.0%	.0%	100.0%
MDT coordinator	Count	270	4	274
	%	98.5%	1.5%	100.0%
Other (admin/clerical and managerial)	Count	37	2	39
	%	94.9%	5.1%	100.0%
Total		1809	135	1944
	%	93.1%	6.9%	100.0%

Table: A24 Importance of patient-centred care/coordination of service to effectiveness of MDTs: by discipline

. .		Patient-centred care servic		Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	184	6	190
	%	96.8%	3.2%	100.0%
Colorectal	Count	113	11	124
	%	91.1%	8.9%	100.0%
Lung	Count	131	7	138
	%	94.9%	5.1%	100.0%
Gynae	Count	102	4	106
	%	96.2%	3.8%	100.0%
Head and Neck	Count	98	3	101
	%	97.0%	3.0%	100.0%
Upper GI	Count	114	6	120
	%	95.0%	5.0%	100.0%
Urological	Count	118	10	128
	%	92.2%	7.8%	100.0%
Haematological	Count	147	20	167
	%	88.0%	12.0%	100.0%
Skin	Count	76	9	85
	%	89.4%	10.6%	100.0%
Supportive and Palliative Care	Count	44	0	44
	%	100.0%	.0%	100.0%
Brain/CNS	Count	27	2	29
	%	93.1%	6.9%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	12	1	13
	%	92.3%	7.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1184	79	1263
	%	93.7%	6.3%	100.0%

Table: A25 Importance of patient-centred care/coordination of service to effectiveness of MDTs: by tumour type

Team Governance

A9: Leadership

Table: A26 Importance of leadership to effectiveness of MDTs: by professional group

Professional Group		Leaders	hip	Total
		very important/important	somewhat/not important	
Doctors	Count	972	71	1043
	%	93.2%	6.8%	100.0%
Nurses	Count	501	11	512
	%	97.9%	2.1%	100.0%
AHPs	Count	78	3	81
	%	96.3%	3.7%	100.0%
MDT coordinators	Count	264	10	274
	%	96.4%	3.6%	100.0%
Other (admin/managerial)	Count	36	4	40
	%	90.0%	10.0%	100.0%
Total	Count	1851	99	1950
	%	94.9%	5.1%	100.0%

Discipline		Leaders	hip	Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	277	28	305
	%	90.8%	9.2%	100.0%
Radiologist	Count	111	8	119
	%	93.3%	6.7%	100.0%
Histo/cytopathologist	Count	109	9	118
	%	92.4%	7.6%	100.0%
Oncologist (clinical and medical)	Count	157	5	162
	%	96.9%	3.1%	100.0%
Haematologist	Count	89	5	94
	%	94.7%	5.3%	100.0%
Other Doctor (Physician, GP etc)	Count	167	15	182
	%	91.8%	8.2%	100.0%
Palliative care specialist	Count	62	1	63
	%	98.4%	1.6%	100.0%
Clinical Nurse Specialist	Count	468	11	479
	%	97.7%	2.3%	100.0%
Nursing (other)	Count	33	0	33
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	78	3	81
	%	96.3%	3.7%	100.0%
MDT coordinator	Count	264	10	274
	%	96.4%	3.6%	100.0%
Other (admin/clerical and managerial)	Count	36	4	40
	%	90.0%	10.0%	100.0%
Total	Count	1851	99	1950
	%	94.9%	5.1%	100.0%

Table: A27 Importance of leadership to effectiveness of MDTs: by discipline

Turnersteine		Leaders	ship	Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	180	11	19
	%	94.2%	5.8%	100.0%
Colorectal	Count	116	8	12
	%	93.5%	6.5%	100.0%
Lung	Count	136	3	13
	%	97.8%	2.2%	100.09
Gynae	Count	103	4	10
	%	96.3%	3.7%	100.09
Head and Neck	Count	98	2	10
	%	98.0%	2.0%	100.09
Upper GI	Count	111	9	12
	%	92.5%	7.5%	100.09
Urological	Count	119	8	12
-	%	93.7%	6.3%	100.0
Haematological	Count	156	12	16
-	%	92.9%	7.1%	100.0
Skin	Count	78	7	8
	%	91.8%	8.2%	100.0
Supportive and Palliative Care	Count	41	3	2
	%	93.2%	6.8%	100.0
Brain/CNS		26	3	2
	%	89.7%	10.3%	100.0
Sarcoma	Count	15	1	1
	%	93.8%	6.3%	100.0
Children/Young People	Count	12	1	1
	%	92.3%	7.7%	100.0
Endocrine	Count	2	0	
	%	100.0%	.0%	100.09
otal	Count	1193	72	126
	%	94.3%	5.7%	100.0

Table: A28 Importance of leadership to effectiveness of MDTs: by tumour type

A10: Data collection, analysis and audit of outcomes

Drafassianal Crown		Data collection, analysis and audit of outcomes		Total
Professional Group		very important/important	somewhat/not important	
Doctors	Count	905	140	1045
	%	86.6%	13.4%	100.0%
Nurses	Count	484	28	512
	%	94.5%	5.5%	100.0%
AHPs	Count	73	8	81
	%	90.1%	9.9%	100.0%
MDT coordinators	Count	250	26	276
	%	90.6%	9.4%	100.0%
Other (admin/managerial)	Count	37	3	40
	%	92.5%	7.5%	100.0%
Total	Count	1749	205	1954
	%	89.5%	10.5%	100.0%

Table: A29 Importance of data collection, analysis and audit of outcomes to effectiveness of MDTs: by professional group

			Data collection, analysis and audit of outcomes	
Discipline		very important/important	somewhat/not important	
Surgeon	Count	275	30	305
	%	90.2%	9.8%	100.0%
Radiologist	Count	101	18	119
	%	84.9%	15.1%	100.0%
Histo/cytopathologist	Count	96	24	120
	%	80.0%	20.0%	100.0%
Oncologist (clinical and medical)	Count	143	18	161
	%	88.8%	11.2%	100.0%
Haematologist	Count	82	12	94
	%	87.2%	12.8%	100.0%
Other Doctor (Physician, GP etc)	Count	153	30	183
·	%	83.6%	16.4%	100.0%
Palliative care specialist	Count	55	8	63
	%	87.3%	12.7%	100.0%
Clinical Nurse Specialist	Count	455	24	479
	%	95.0%	5.0%	100.0%
Nursing (other)	Count	29	4	33
	%	87.9%	12.1%	100.0%
Allied Health Professional	Count	73	8	81
	%	90.1%	9.9%	100.0%
MDT coordinator	Count	250	26	276
	%	90.6%	9.4%	100.0%
Other (admin/clerical and managerial)	Count	37	3	40
- ·	%	92.5%	7.5%	100.0%
Total	Count	1749	205	1954
	%	89.5%	10.5%	100.0%

Table: A30 Importance of data collection, analysis and audit of outcomes to MDT effectiveness: by discipline

Tumour type		Data collection, ana of outcor		Total
		very important/important	somewhat/not important	
Breast	Count	182	11	193
	%	94.3%	5.7%	100.0%
Colorectal	Count	118	6	124
	%	95.2%	4.8%	100.0%
Lung	Count	122	17	139
	%	87.8%	12.2%	100.0%
Gynae	Count	98	9	107
	%	91.6%	8.4%	100.0%
Head and Neck	Count	94	7	101
	%	93.1%	6.9%	100.0%
Upper GI	Count	108	12	120
	%	90.0%	10.0%	100.0%
Urological	Count	117	11	128
	%	91.4%	8.6%	100.0%
Haematological	Count	150	18	168
	%	89.3%	10.7%	100.0%
Skin	Count	74	11	85
	%	87.1%	12.9%	100.0%
Supportive and Palliative Care	Count	35	9	44
	%	79.5%	20.5%	100.0%
Brain/CNS	Count	27	2	29
	%	93.1%	6.9%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	10	3	13
	%	76.9%	23.1%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	1152	117	1269
	%	90.8%	9.2%	100.0%

Table: A31 Importance of data collection, analysis and audit of outcomes to MDT effectiveness: by tumour type

A11: Clinical Governance

Table: A32 Importance of clinical governance to MDT effectiveness: by professional	
group	

Professional Group		Clinical gove	ernance	Total
Professional Group		very important/important	somewhat/not important	
Doctors	Count	819	220	1039
	%	78.8%	21.2%	100.0%
Nurses	Count	470	36	506
	%	92.9%	7.1%	100.0%
AHPs	Count	70	9	79
	%	88.6%	11.4%	100.0%
MDT coordinators	Count	233	38	271
	%	86.0%	14.0%	100.0%
Other (admin/managerial)	Count	37	3	40
	%	92.5%	7.5%	100.0%
Total	Count	1629	306	1935
	%	84.2%	15.8%	100.0%

Discipline		Clinical gove	ernance	Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	239	66	305
	%	78.4%	21.6%	100.0%
Radiologist	Count	94	24	118
	%	79.7%	20.3%	100.0%
Histo/cytopathologist	Count	92	27	119
	%	77.3%	22.7%	100.0%
Oncologist (clinical and medical)	Count	122	38	160
	%	76.3%	23.8%	100.0%
Haematologist	Count	71	22	93
	%	76.3%	23.7%	100.0%
Other Doctor (Physician, GP etc)	Count	149	33	182
	%	81.9%	18.1%	100.0%
Palliative care specialist	Count	52	10	62
	%	83.9%	16.1%	100.0%
Clinical Nurse Specialist	Count	442	31	473
	%	93.4%	6.6%	100.0%
Nursing (other)	Count	28	5	33
	%	84.8%	15.2%	100.0%
Allied Health Professional	Count	70	9	79
	%	88.6%	11.4%	100.0%
MDT coordinator	Count	233	38	271
	%	86.0%	14.0%	100.0%
Other (admin/clerical and managerial)	Count	37	3	40
	%	92.5%	7.5%	100.0%
Total	Count	1629	306	1935
	%	84.2%	15.8%	100.0%

Table: A33 Importance of clinical governance to MDT effectiveness: by discipline

Turnerstand		Clinical gove	ernance	Total
Tumour type		very important/important	somewhat/not important	
Breast	Count	162	30	192
	%	84.4%	15.6%	100.0%
Colorectal	Count	104	17	121
	%	86.0%	14.0%	100.0%
Lung	Count	116	21	137
	%	84.7%	15.3%	100.0%
Gynae	Count	89	17	106
	%	84.0%	16.0%	100.0%
Head and Neck	Count	84	16	100
	%	84.0%	16.0%	100.0%
Upper GI	Count	105	14	119
	%	88.2%	11.8%	100.0%
Urological	Count	111	17	128
	%	86.7%	13.3%	100.0%
Haematological	Count	138	30	168
	%	82.1%	17.9%	100.0%
Skin	Count	69	14	83
	%	83.1%	16.9%	100.0%
Supportive and Palliative Care	Count	37	6	43
	%	86.0%	14.0%	100.0%
Brain/CNS	Count	24	5	29
	%	82.8%	17.2%	100.0%
Sarcoma	Count	15	1	16
	%	93.8%	6.3%	100.0%
Children/Young People	Count	10	3	13
	%	76.9%	23.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1066	191	1257
	%	84.8%	15.2%	100.0%

Table: A34 Importance of clinical governance to MDT effectiveness: by tumour type

Professional development and education of team members

A12: Development and training

Table: A35 Importance of development and training to effectiveness of MDTs: by: professional group

		Development a	nd training	Total
Professional Group		very important/important	somewhat/not important	Total
Doctors	Count	703	336	1039
	%	67.7%	32.3%	100.0%
Nurses	Count	464	46	510
	%	91.0%	9.0%	100.0%
AHPs	Count	69	12	81
	%	85.2%	14.8%	100.0%
MDT coordinators	Count	244	31	275
	%	88.7%	11.3%	100.0%
Other (admin/managerial)	Count	32	8	40
	%	80.0%	20.0%	100.0%
Total	Count	1512	433	1945
	%	77.7%	22.3%	100.0%

Discipline		Development a	nd training	Total
Discipline		very important/important	somewhat/not important	
Surgeon	Count	213	89	30
	%	70.5%	29.5%	100.0%
Radiologist	Count	76	42	11
	%	64.4%	35.6%	100.0%
Histo/cytopathologist	Count	66	53	11
	%	55.5%	44.5%	100.0%
Oncologist (clinical and medical)	Count	113	48	16
	%	70.2%	29.8%	100.09
Haematologist	Count	62	32	9
	%	66.0%	34.0%	100.09
Other Doctor (Physician, GP etc)	Count	125	57	18
	%	68.7%	31.3%	100.09
Palliative care specialist	Count	48	15	6
	%	76.2%	23.8%	100.0
Clinical Nurse Specialist	Count	438	39	47
	%	91.8%	8.2%	100.0
Nursing (other)	Count	26	7	3
	%	78.8%	21.2%	100.0
Allied Health Professional	Count	69	12	8
	%	85.2%	14.8%	100.0
MDT coordinator	Count	244	31	27
	%	88.7%	11.3%	100.0
Other (admin/clerical and managerial)	Count	32	8	2
	%	80.0%	20.0%	100.0
Total	Count	1512	433	194
	%	77.7%	22.3%	100.0

Table: A36 Importance of development and training to effectiveness of MDTs: by discipline

Tumour type		Development a	nd training	Total
rumour type		very important/important	somewhat/not important	
Breast	Count	152	39	191
	%	79.6%	20.4%	100.0%
Colorectal	Count	104	19	123
	%	84.6%	15.4%	100.0%
Lung	Count	109	30	139
	%	78.4%	21.6%	100.0%
Gynae	Count	84	23	107
	%	78.5%	21.5%	100.0%
Head and Neck	Count	84	17	101
	%	83.2%	16.8%	100.0%
Upper GI	Count	98	22	120
	%	81.7%	18.3%	100.0%
Urological	Count	102	24	126
	%	81.0%	19.0%	100.0%
Haematological	Count	121	46	167
	%	72.5%	27.5%	100.0%
Skin	Count	60	25	85
	%	70.6%	29.4%	100.0%
Supportive and Palliative Care	Count	34	10	44
	%	77.3%	22.7%	100.0%
Brain/CNS	Count	25	4	29
	%	86.2%	13.8%	100.0%
Sarcoma	Count	10	6	10
	%	62.5%	37.5%	100.0%
Children/Young People	Count	10	3	10
	%	76.9%	23.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	995	268	1263
	%	78.8%	21.2%	100.0%

Table: A37 Importance of development and training to effectiveness of MDTs: by tumour type

B: Components of the domains that are important for effective team working

Structure

B1: Membership and attendance

Table: B1 Availability of a designated MDT coordinator and data collector	Yes	No	Don't know/ not applicable
		N(%)	
Does your MDT have a designated MDT co- ordinator?	969 (95)	41 (4)	10 (1)
Does your MDT have a designated data collector?	605 (60)	274 (27)	132 (13)

95% of respondents stated that their MDT had a designated MDT coordinator (table 8). Only 56% of respondents stated that their MDT had a designated data collector (table 9). Interestingly, despite this sample consisting only of respondents that defined themselves as members of at least one MDT, 17 respondents said they did not know or felt it to be appropriate for them to have an MDT coordinator, and 288 respondents stated 'don't know/not applicable' regarding data collector.

There is an important caveat with regard to this data however. Due to the anonymous nature of the survey and thereby not knowing which respondents belong to which teams, we cannot make any claims of generalisability for these findings as we do not know how many teams this corresponds to, or which MDT they were referring to. We therefore examined responses from a sub-sample of respondents who stated they were a member of only one MDT (tables 10 and 11) and found that they reported very similar proportions.

			MDT have	a designated ator?	Total
Tumour type		yes	no	don't know/not applicable	
Breast	Count	155	6	1	162
	%	95.7%	3.7%	.6%	100.0%
Colorectal	Count	103	2	0	105
	%	98.1%	1.9%	.0%	100.0%
Lung	Count	114	0	0	114
	%	100.0%	.0%	.0%	100.0%
Gynae	Count	82	3	2	87
	%	94.3%	3.4%	2.3%	100.0%
Head and Neck	Count	72	2	2	76
	%	94.7%	2.6%	2.6%	100.0%
Upper GI	Count	89	2	1	92
	%	96.7%	2.2%	1.1%	100.0%
Urological	Count	87	1	0	88
	%	98.9%	1.1%	.0%	100.0%
Haematological	Count	103	2	1	106
	%	97.2%	1.9%	.9%	100.0%
Skin	Count	63	3	1	67
	%	94.0%	4.5%	1.5%	100.0%
Supportive and Palliative Care	Count	23	8	1	32
	%	71.9%	25.0%	3.1%	100.0%
Brain/CNS	Count	18	3	0	21
	%	85.7%	14.3%	.0%	100.0%
Sarcoma	Count	14	1	0	15
	%	93.3%	6.7%	.0%	100.0%
Children/Young People	Count	5	3	0	8
	%	62.5%	37.5%	.0%	100.0%
Endocrine	Count	2	0	0	2
	%	100.0%	.0%	.0%	100.0%
Total	Count	930	36	9	975
	%	95.4%	3.7%	.9%	100.0%

Table: B1 Does your MDT have a designated MDT Co-ordinator: by tumour type

			r MDT have data collecte	a designated or?	Total
Tumour type		yes	no	don't know/not applicable	
Breast	Count	104	36	19	159
	%	65.4%	22.6%	11.9%	100.0%
Colorectal	Count	61	33	10	104
	%	58.7%	31.7%	9.6%	100.0%
Lung	Count	77	29	7	113
	%	68.1%	25.7%	6.2%	100.0%
Gynae	Count	53	21	12	86
	%	61.6%	24.4%	14.0%	100.0%
Head and Neck	Count	46	11	19	76
	%	60.5%	14.5%	25.0%	100.0%
Upper GI	Count	54	22	16	92
	%	58.7%	23.9%	17.4%	100.0%
Urological	Count	58	24	7	89
	%	65.2%	27.0%	7.9%	100.0%
Haematological	Count	49	42	15	106
	%	46.2%	39.6%	14.2%	100.0%
Skin	Count	40	15	11	66
	%	60.6%	22.7%	16.7%	100.0%
Supportive and Palliative Care	Count	15	15	1	31
	%	48.4%	48.4%	3.2%	100.0%
Brain/CNS	Count	10	7	4	21
	%	47.6%	33.3%	19.0%	100.0%
Sarcoma	Count	14	1	0	15
	%	93.3%	6.7%	.0%	100.0%
Children/Young People	Count	2	4	2	8
	%	25.0%	50.0%	25.0%	100.0%
Endocrine	Count	0	2	0	2
	%	.0%	100.0%	.0%	100.0%
Total	Count	583	262	123	968
	%	60.2%	27.1%	12.7%	100.0%

Table: B2 Does your MDT have a designated data collector: by tumour type

B2: Technology (availability and use)

Table: B3 Team members	N (valid% - adjustin	g for missing data)
perceptions about the	Strongly agree/	Disagree/
technology required for	Agree	Strongly disagree
effective MDT functioning		
MDT meeting rooms should have	1780 (100)	3 (0)
equipment for projecting and		
viewing radiology images		
MDT meeting rooms need facilities	1640 (94)	110 (6)
for projecting and viewing		
specimen biopsies, e.g. projection		
microscopes		
Meetings need to have access to	1753 (99)	14 (1)
retrospective images during the		
meeting		
MDTs need to be able to access	1728 (98)	40 (2)
retrospective pathology reports		
MDT meeting rooms should be	1748 (99)	10 (1)
connected to PACS		
Decisions should be documented	1669 (96)	77 (4)
in real time on a database or		
proforma		
Documented decisions should be	1310 (81)	315 (19)
projected for members to view		

Summary: virtually all respondents agreed with all statements. The largest proportion disagreeing was in relation to whether documented decisions should be projected for members to view – 19% disagreed with this.

Due to the fact that the vast majority of respondents agreed with the all but one of these statements, analysis is only provided by professional group (not by discipline or tumour type) as very small numbers of respondents disagree.

Professional Group		MDT meetir have equipm and viewing	Total	
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	972	1	973
	%	99.9%	.1%	100.0%
Nurses	Count	464	1	465
	%	99.8%	.2%	100.0%
AHPs	Count	69	0	69
	%	100.0%	.0%	100.0%
MDT coordinators	Count	244	0	244
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	31	1	32
	%	96.9%	3.1%	100.0%
Total	Count	1780	3	1783
	%	99.8%	.2%	100.0%

Table B4: MDT meeting rooms should have equipment for projecting and viewing radiology images: by professional group

Table: B5 MDT meeting rooms need facilities for projecting and viewing specimen biopsies (e.g. projection microscopes): by professional group

Professional group		MDT meeting rooms need facilities for projecting and viewing specimen biopsies (e.g. projection microscopes)		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	893	69	962
	%	92.8%	7.2%	100.0%
Nurses	Count	426	28	454
	%	93.8%	6.2%	100.0%
AHPs	Count	57	5	62
	%	91.9%	8.1%	100.0%
MDT coordinators	Count	237	5	242
	%	97.9%	2.1%	100.0%
Other (admin/managerial)	Count	27	3	30
	%	90.0%	10.0%	100.0%
Total	Count	1640	110	1750
	%	93.7%	6.3%	100.0%

Professional Group		to retrospecti	ed to have access ve images during meeting	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	961	8	969
	%	99.2%	.8%	100.0%
Nurses	Count	455	3	458
	%	99.3%	.7%	100.0%
AHPs	Count	65	2	67
	%	97.0%	3.0%	100.0%
MDT coordinators	Count	241	0	241
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	31	1	32
	%	96.9%	3.1%	100.0%
Total	Count	1753	14	1767
	%	99.2%	.8%	100.0%

Table: B6Meetings need to have access to retrospective images during the meeting: by professional group

Table: B7 MDTs need to be able to access retrospective pathology reports: by professional group

Professional Group			be able to access pathology reports	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	949	22	971
	%	97.7%	2.3%	100.0%
Nurses	Count	449	8	457
	%	98.2%	1.8%	100.0%
AHPs	Count	63	2	65
	%	96.9%	3.1%	100.0%
MDT coordinators	Count	237	5	242
	%	97.9%	2.1%	100.0%
Other (admin/managerial)	Count	30	3	33
	%	90.9%	9.1%	100.0%
Total	Count	1728	40	1768
	%	97.7%	2.3%	100.0%

Professional Group		MDT meeting rooms should be connected to PACS		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	965	3	968
	%	99.7%	.3%	100.0%
Nurses	Count	449	3	452
	%	99.3%	.7%	100.0%
AHPs	Count	63	1	64
	%	98.4%	1.6%	100.0%
MDT coordinators	Count	240	1	241
	%	99.6%	.4%	100.0%
Other (admin/managerial)	Count	31	2	33
	%	93.9%	6.1%	100.0%
Total	Count	1748	10	1758
	%	99.4%	.6%	100.0%

Table: B8 MDT meeting rooms should be connected to PACS: by professional group

Table: B9 Decisions should be documented in real time on a database or proforma: by professional group

		Decisior documented database	Total	
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	921	43	964
	%	95.5%	4.5%	100.0%
Nurses	Count	445	6	451
	%	98.7%	1.3%	100.0%
AHPs	Count	62	0	62
	%	100.0%	.0%	100.0%
MDT coordinators	Count	212	25	237
	%	89.5%	10.5%	100.0%
Other (admin/managerial)	Count	29	3	32
	%	90.6%	9.4%	100.0%
Total	Count	1669	77	1746
	%	95.6%	4.4%	100.0%

			decisions should I for members to	
			view	Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	700	191	891
	%	78.6%	21.4%	100.0%
Nurses	Count	369	53	422
	%	87.4%	12.6%	100.0%
AHPs	Count	51	8	59
	%	86.4%	13.6%	100.0%
MDT coordinators	Count	165	55	220
	%	75.0%	25.0%	100.0%
Other (admin/managerial)	Count	25	8	33
	%	75.8%	24.2%	100.0%
Total	Count	1310	315	1625
	%	80.6%	19.4%	100.0%

Table: B10 Documented decisions should be projected for members to view: by professional group

	be p		decisions should I for members to view	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	214	60	274
	%	78.1%	21.9%	100.0%
Radiologist	Count	86	13	99
	%	86.9%	13.1%	100.0%
Histo/cytopathologist	Count	81	26	107
	%	75.7%	24.3%	100.0%
Oncologist (clinical and medical)	Count	115	29	144
	%	79.9%	20.1%	100.0%
Haematologist	Count	51	20	71
	%	71.8%	28.2%	100.0%
Other Doctor (Physician, GP etc)	Count	112	34	146
	%	76.7%	23.3%	100.0%
Palliative care specialist	Count	41	9	50
	%	82.0%	18.0%	100.0%
Clinical Nurse Specialist	Count	341	50	391
	%	87.2%	12.8%	100.0%
Nursing (other)	Count	28	3	31
	%	90.3%	9.7%	100.0%
Allied Health Professional	Count	51	8	59
	%	86.4%	13.6%	100.0%
MDT coordinator	Count	165	55	220
	%	75.0%	25.0%	100.0%
Other (admin/clerical and managerial)	Count	25	8	33
	%	75.8%	24.2%	100.0%
Total	Count	1310	315	1625
	%	80.6%	19.4%	100.0%

Table: B11 Documented decisions should be projected for members to view: by discipline

	Documented decisions should be projected for members to view			
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	140	26	166
	%	84.3%	15.7%	100.0%
Colorectal	Count	77	28	105
	%	73.3%	26.7%	100.0%
Lung	Count	83	26	109
	%	76.1%	23.9%	100.0%
Gynae	Count	78	17	95
	%	82.1%	17.9%	100.0%
Head and Neck	Count	77	12	89
	%	86.5%	13.5%	100.0%
Upper GI	Count	77	22	99
	%	77.8%	22.2%	100.0%
Urological	Count	97	13	110
	%	88.2%	11.8%	100.0%
Haematological	Count	100	35	135
	%	74.1%	25.9%	100.0%
Skin	Count	58	14	72
	%	80.6%	19.4%	100.0%
Supportive and Palliative Care	Count	17	6	23
	%	73.9%	26.1%	100.0%
Brain/CNS	Count	19	4	23
	%	82.6%	17.4%	100.0%
Sarcoma	Count	11	3	14
	%	78.6%	21.4%	100.0%
Children/Young People	Count	5	3	8
	%	62.5%	37.5%	100.0%
Endocrine	Count	1	0	1
	%	100.0%	.0%	100.0%
Total	Count	840	209	1049
	%	80.1%	19.9%	100.0%

Table: B12 Documented decisions should be projected for members to view: by tumour type

B2.1 Availability of Technology

Table: B13 If you are an MDT	N (valid% - adjusting for missing data)					
member, does your MDT have	Always	Sometimes	Never	Not		
access to the following technology?				required		
Projection for radiology images	1532 (86)	158 (9)	53 (3)	35 (2)		
Projection for pathology samples	1320 (74)	264 (15)	145 (8)	46 (3)		
PACS connectivity	1405 (81)	214 (12)	96 (6)	22 (1)		
Video-conferencing facilities	768 (45)	420 (25)	321 (19)	184 (11)		
Real-time recording of treatment proposals	649 (39)	286 (17)	674 (41)	43 (3)		
to database						
Projection of treatment decisions so all	409 (24)	245 (14)	955 (56)	90 (5)		
members can view them						

Availability of technology by tumour type

Turney for a	Does you	ir MDT have a radiology		ojection for	Total	
Tumour type		always	sometimes	never	not required	
Breast	Count	167	9	3	1	180
	%	92.8%	5.0%	1.7%	.6%	100.0%
Colorectal	Count	112	5	0	0	117
	%	95.7%	4.3%	.0%	.0%	100.0%
Lung	Count	128	1	0	0	129
	%	99.2%	.8%	.0%	.0%	100.0%
Gynae	Count	94	7	1	0	102
	%	92.2%	6.9%	1.0%	.0%	100.0%
Head and Neck	Count	76	15	2	0	93
	%	81.7%	16.1%	2.2%	.0%	100.0%
Upper GI	Count	101	5	0	1	107
	%	94.4%	4.7%	.0%	.9%	100.0%
Urological	Count	112	7	1	1	121
	%	92.6%	5.8%	.8%	.8%	100.0%
Haematological	Count	123	24	9	2	158
	%	77.8%	15.2%	5.7%	1.3%	100.0%
Skin	Count	35	8	19	5	67
	%	52.2%	11.9%	28.4%	7.5%	100.0%
Supportive and Palliative Care	Count	7	1	9	11	28
	%	25.0%	3.6%	32.1%	39.3%	100.0%
Brain/CNS	Count	23	2	0	0	25
	%	92.0%	8.0%	.0%	.0%	100.0%
Sarcoma	Count	15	0	0	0	15
	%	100.0%	.0%	.0%	.0%	100.0%
Children/Young People	Count	5	2	2	3	12
	%	41.7%	16.7%	16.7%	25.0%	100.0%
Endocrine	Count	2	0	0	0	2
	%	100.0%	.0%	.0%	.0%	100.0%
Total	Count	1000	86	46	24	1156
	%	86.5%	7.4%	4.0%	2.1%	100.0%

Table: B14 Access to projection for radiology images: by tumour type

		Does you	r MDT have a pathology		ojection for	Total
Tumour type		always	sometimes	never	not required	
Breast	Count	146	21	11	2	180
	%	81.1%	11.7%	6.1%	1.1%	100.0%
Colorectal	Count	91	12	13	0	116
	%	78.4%	10.3%	11.2%	.0%	100.0%
Lung	Count	87	11	27	4	129
0	%	67.4%	8.5%	20.9%	3.1%	100.0%
Gynae	Count	89	11	2	0	102
	%	87.3%	10.8%	2.0%	.0%	100.0%
Head and Neck	Count	65	18	6	0	89
	%	73.0%	20.2%	6.7%	.0%	100.0%
Upper GI	Count	89	6	10	2	107
	%	83.2%	5.6%	9.3%	1.9%	100.0%
Urological	Count	96	17	7	0	120
	%	80.0%	14.2%	5.8%	.0%	100.0%
Haematological	Count	113	31	10	2	156
	%	72.4%	19.9%	6.4%	1.3%	100.0%
Skin	Count	64	10	6	1	81
	%	79.0%	12.3%	7.4%	1.2%	100.0%
Supportive and Palliative Care	Count	5	1	9	11	26
	%	19.2%	3.8%	34.6%	42.3%	100.0%
Brain/CNS	Count	23	2	0	0	25
	%	92.0%	8.0%	.0%	.0%	100.0%
Sarcoma	Count	9	3	3	0	15
	%	60.0%	20.0%	20.0%	.0%	100.0%
Children/Young People	Count	2	1	4	4	11
	%	18.2%	9.1%	36.4%	36.4%	100.0%
Endocrine	Count	0	0	1	1	2
	%	.0%	.0%	50.0%	50.0%	100.0%
Total	Count	879	144	109	27	1159
	%	75.8%	12.4%	9.4%	2.3%	100.0%

Table: B15 Access to projection for pathology samples: by tumour type

		Does	your MDT hav conne		o PACS	Total
Tumour type		always	sometimes	never	not required	
Breast	Count	145	15	14	1	175
	%	82.9%	8.6%	8.0%	.6%	100.0%
Colorectal	Count	104	6	3	0	113
	%	92.0%	5.3%	2.7%	.0%	100.0%
Lung	Count	123	3	2	0	128
	%	96.1%	2.3%	1.6%	.0%	100.0%
Gynae	Count	90	10	1	0	101
	%	89.1%	9.9%	1.0%	.0%	100.0%
Head and Neck	Count	71	15	2	0	88
	%	80.7%	17.0%	2.3%	.0%	100.0%
Upper GI	Count	96	8	1	0	105
	%	91.4%	7.6%	1.0%	.0%	100.0%
Urological	Count	105	10	2	0	117
	%	89.7%	8.5%	1.7%	.0%	100.0%
Haematological	Count	117	23	14	1	155
	%	75.5%	14.8%	9.0%	.6%	100.0%
Skin	Count	31	11	19	0	61
	%	50.8%	18.0%	31.1%	.0%	100.0%
Supportive and Palliative Care	Count	6	1	13	8	28
	%	21.4%	3.6%	46.4%	28.6%	100.0%
Brain/CNS	Count	21	4	0	0	25
	%	84.0%	16.0%	.0%	.0%	100.0%
Sarcoma	Count	14	1	0	0	15
	%	93.3%	6.7%	.0%	.0%	100.0%
Children/Young People	Count	6	3	2	2	13
	%	46.2%	23.1%	15.4%	15.4%	100.0%
Endocrine	Count	1	0	0	0	1
	%	100.0%	.0%	.0%	.0%	100.0%
Total	Count	930	110	73	12	1125
	%	82.7%	9.8%	6.5%	1.1%	100.0%

Table: B16 Access to PACS connectivity: by tumour type

		Does	your MDT hav conferencir		o video-	Total
Tumour type	Tumour type			ig raointioo	not	Total
		always	sometimes	never	required	
Breast	Count	35	31	48	39	153
	%	22.9%	20.3%	31.4%	25.5%	100.0%
Colorectal	Count	50	27	18	13	108
	%	46.3%	25.0%	16.7%	12.0%	100.0%
Lung	Count	43	23	33	24	123
	%	35.0%	18.7%	26.8%	19.5%	100.0%
Gynae	Count	57	14	20	6	97
	%	58.8%	14.4%	20.6%	6.2%	100.0%
Head and Neck	Count	55	15	13	6	89
	%	61.8%	16.9%	14.6%	6.7%	100.0%
Upper GI	Count	55	14	26	6	101
	%	54.5%	13.9%	25.7%	5.9%	100.0%
Urological	Count	62	27	16	10	115
	%	53.9%	23.5%	13.9%	8.7%	100.0%
Haematological	Count	93	33	16	9	151
	%	61.6%	21.9%	10.6%	6.0%	100.0%
Skin	Count	31	13	28	9	81
	%	38.3%	16.0%	34.6%	11.1%	100.0%
Supportive and Palliative Care	Count	2	6	12	10	30
	%	6.7%	20.0%	40.0%	33.3%	100.0%
Brain/CNS	Count	6	3	9	3	21
	%	28.6%	14.3%	42.9%	14.3%	100.0%
Sarcoma	Count	8	4	1	1	14
	%	57.1%	28.6%	7.1%	7.1%	100.0%
Children/Young People	Count	0	1	7	3	11
•	%	.0%	9.1%	63.6%	27.3%	100.0%
Endocrine	Count	2	0	0	0	2
	%	100.0%	.0%	.0%	.0%	100.0%
Total	Count	499	211	247	139	1096
	%	45.5%	19.3%	22.5%	12.7%	100.0%

Table: B17 Access to video-conferencing facilities: by tumour type

_			our MDT have of treatment			Total
Tumour type		always	sometimes	never	not required	
Breast	Count	75	16	73	3	167
	%	44.9%	9.6%	43.7%	1.8%	100.0%
Colorectal	Count	45	9	51	2	107
	%	42.1%	8.4%	47.7%	1.9%	100.0%
Lung	Count	53	16	54	1	124
	%	42.7%	12.9%	43.5%	.8%	100.0%
Gynae	Count	53	13	29	1	96
	%	55.2%	13.5%	30.2%	1.0%	100.0%
Head and Neck	Count	27	15	34	0	76
	%	35.5%	19.7%	44.7%	.0%	100.0%
Upper GI	Count	37	18	36	2	93
	%	39.8%	19.4%	38.7%	2.2%	100.0%
Urological	Count	41	22	48	2	113
	%	36.3%	19.5%	42.5%	1.8%	100.0%
Haematological	Count	59	18	68	2	147
	%	40.1%	12.2%	46.3%	1.4%	100.0%
Skin	Count	28	3	33	3	67
	%	41.8%	4.5%	49.3%	4.5%	100.0%
Supportive and Palliative Care	Count	7	4	12	8	31
	%	22.6%	12.9%	38.7%	25.8%	100.0%
Brain/CNS	Count	6	3	14	0	23
	%	26.1%	13.0%	60.9%	.0%	100.0%
Sarcoma	Count	10	1	3	0	14
	%	71.4%	7.1%	21.4%	.0%	100.0%
Children/Young People	Count	2	1	5	3	11
	%	18.2%	9.1%	45.5%	27.3%	100.0%
Endocrine	Count	0	0	2	0	2
	%	.0%	.0%	100.0%	.0%	100.0%
Total	Count	443	139	462	27	1071
	%	41.4%	13.0%	43.1%	2.5%	100.0%

Table: B18 Access to real-time recording of treatment proposals to database: by tumour type

Tumour type		ur MDT have a t decisions so the	all membe		Total	
rumour type		always	sometimes	never	not required	
Breast	Count	49	16	98	8	171
	%	28.7%	9.4%	57.3%	4.7%	100.0%
Colorectal	Count	34	11	57	6	108
	%	31.5%	10.2%	52.8%	5.6%	100.0%
Lung	Count	29	15	78	5	127
	%	22.8%	11.8%	61.4%	3.9%	100.0%
Gynae	Count	31	15	46	6	98
	%	31.6%	15.3%	46.9%	6.1%	100.0%
Head and Neck	Count	16	15	48	1	80
	%	20.0%	18.8%	60.0%	1.3%	100.0%
Upper GI	Count	23	12	62	7	104
	%	22.1%	11.5%	59.6%	6.7%	100.0%
Urological	Count	31	12	67	6	116
	%	26.7%	10.3%	57.8%	5.2%	100.0%
Haematological	Count	37	16	94	4	151
	%	24.5%	10.6%	62.3%	2.6%	100.0%
Skin	Count	19	3	45	6	73
	%	26.0%	4.1%	61.6%	8.2%	100.0%
Supportive and Palliative Care	Count	5	2	16	5	28
	%	17.9%	7.1%	57.1%	17.9%	100.0%
Brain/CNS	Count	4	3	17	1	25
	%	16.0%	12.0%	68.0%	4.0%	100.0%
Sarcoma	Count	5	1	7	1	14
	%	35.7%	7.1%	50.0%	7.1%	100.0%
Children/Young People	Count	0	2	7	4	13
	%	.0%	15.4%	53.8%	30.8%	100.0%
Endocrine	Count	0	0	1	0	1
	%	.0%	.0%	100.0%	.0%	100.0%
Total	Count	283	123	643	60	1109
	%	25.5%	11.1%	58.0%	5.4%	100.0%

Table: B19 Access to projection of treatment decisions so all members can view them: by tumour type

B3: Physical environment of meeting venue

Table: B20 What style of room layout best facilitates effectiveMDT working?	Frequency	Percent
Boardroom style (seating in horseshoe/circle with or without a table)	1039	62
Theatre style (seating in rows)	386	23
Cabaret style (seating around separate groups of tables)	16	1
Layout is unimportant	184	11
Other - mixed - boardroom and theatre (large teams)	23	1
- comments	29	2

Table: B21 What style of room layout best facilitates effective MDT working: by professional group

		What st	vle of room	a lavout best	facilitates eff	octivo MD	T working?	Total
Professional group		What St	cabaret style (seating					Total
		theatr e style	around separat e	boardroo m style (seating		other (pleas	mixed - boardroo m and	
		(chair s in rows)	groups of tables)	around one large table)	layout is unimporta nt	e specify)	theatre (large teams)	
Doctors	Coun t	230	11	513	114	16	12	896
	%	25.7%	1.2%	57.3%	12.7%	1.8%	1.3%	100.0%
Nurses	Coun t	76	3	305	47	7	5	443
	%	17.2%	.7%	68.8%	10.6%	1.6%	1.1%	100.0%
AHPs	Coun t	10	0	48	3	1	1	63
	%	15.9%	.0%	76.2%	4.8%	1.6%	1.6%	100.0%
MDT coordinators	Coun t	63	2	148	16	5	5	239
	%	26.4%	.8%	61.9%	6.7%	2.1%	2.1%	100.0%
Other (admin/manageri al)	Coun t	7	0	25	4	0	0	36
	%	19.4%	.0%	69.4%	11.1%	.0%	.0%	100.0%
Total	Coun t	386	16	1039	184	29	23	1677
	%	23.0 %	1.0%	62.0%	11.0%	1.7%	1.4%	100.0 %

Table: B22 What style of room layout best facilitates effective MDT working: by discipline

		Wh	nat style of		best facilitate	es effectiv	e MDT	T ()
			cabaret style (seatin	wo	rking?			Total
Discipline		theatr e style (chair s in rows)	g around separat e groups of tables)	boardroo m style (seating around one large table)	layout is unimporta nt	other (pleas e specify)	mixed - boardroo m and theatre (large teams)	
Surgeon	Coun	67	1	150	31	6	4	259
	t %	25.9 %	.4%	57.9%	12.0%	2.3%	1.5%	100.0 %
Radiologist	Coun t	36	3	53	9	3	3	107
	%	33.6 %	2.8%	49.5%	8.4%	2.8%	2.8%	100.0 %
Histo/cytopatholog ist	Coun t	40	2	50	13	2	1	108
	%	37.0 %	1.9%	46.3%	12.0%	1.9%	.9%	100.0 %
Oncologist (clinical and medical)	Coun t	27	2	86	20	0	3	138
	%	19.6 %	1.4%	62.3%	14.5%	.0%	2.2%	100.0 %
Haematologist	Coun t	16	2	46	14	1	0	79
	%	20.3 %	2.5%	58.2%	17.7%	1.3%	.0%	100.0 %
Other Doctor (Physician, GP etc)	Coun t	36	1	80	24	4	1	146
	%	24.7 %	.7%	54.8%	16.4%	2.7%	.7%	100.0 %
Palliative care specialist	Coun t	8	0	48	3	0	0	59
	%	13.6 %	.0%	81.4%	5.1%	.0%	.0%	100.0 %
Clinical Nurse Specialist	Coun t	74	3	282	44	7	5	415
Numeric et (ethere)	%	17.8 %	.7%	68.0%	10.6%	1.7%	1.2%	100.0 %
Nursing (other)	Coun t	2	0	23	3	0	0	28
	%	7.1%	.0%	82.1%	10.7%	.0%	.0%	100.0 %
Allied Health Professional	Coun t	10	0	48	3	1	1	63
	%	15.9 %	.0%	76.2%	4.8%	1.6%	1.6%	100.0 %
MDT coordinator	Coun t	63	2	148	16	5	5	239
	%	26.4 %	.8%	61.9%	6.7%	2.1%	2.1%	100.0 %
Other (admin/clerical and managerial)	Coun t	7	0	25	4	0	0	36
	%	19.4	.0%	69.4%	11.1%	.0%	.0%	100.0

		%						%
Total	Coun t	386	16	1039	184	29	23	1677
	%	23.0 %	1.0%	62.0%	11.0%	1.7%	1.4%	100.0 %

Table: B23 What style of room layout best facilitates effective MDT working: by tumourtype

		What s		n layout best	facilitates effe	ective MD	T working?	Total
Tumour type		theatr e style (chair s in rows)	cabaret style (seating around separat e groups of tables)	boardroo m style (seating around one large table)	layout is unimportan t	other (please specify)	mixed - boardroo m and theatre (large teams)	
Breast	Coun t	53	2	93	13	4	2	167
	%	31.7%	1.2%	55.7%	7.8%	2.4%	1.2%	100.0 %
Colorectal	Coun t	20	1	70	12	1	3	107
	%	18.7%	.9%	65.4%	11.2%	.9%	2.8%	100.0 %
Lung	Coun t	26	0	64	18	4	1	113
	%	23.0%	.0%	56.6%	15.9%	3.5%	.9%	100.0 %
Gynae	Coun t	23	0	55	12	2	3	95
	%	24.2%	.0%	57.9%	12.6%	2.1%	3.2%	100.0 %
Head and Neck	Coun t	18	0	53	11	0	0	82
	%	22.0%	.0%	64.6%	13.4%	.0%	.0%	100.0 %
Upper GI	Coun t	28	0	65	8	0	1	102
l las la sis e l	%	27.5%	.0%	63.7%	7.8%	.0%	1.0%	100.0 %
Urological	Coun t	26	2	71	13	1	1	114
	%	22.8%	1.8%	62.3%	11.4%	.9%	.9%	100.0 %
Haematologic al	Coun t	32	2	78	26	1	0	139
	%	23.0%	1.4%	56.1%	18.7%	.7%	.0%	100.0 %
Skin	Coun t	14	2	46	12	3	0	77
Supportivo	% Coun	18.2%	2.6%	59.7%	15.6%	3.9%	.0%	100.0 %
Supportive and Palliative Care	t	3	0	33	1	1	0	38
	%	7.9%	.0%	86.8%	2.6%	2.6%	.0%	100.0 %
Brain/CNS	Coun t	11	0	10	2	1	0	24
	%	45.8%	.0%	41.7%	8.3%	4.2%	.0%	100.0 %
Sarcoma	Coun t	5	0	9	0	1	0	15
	%	33.3%	.0%	60.0%	.0%	6.7%	.0%	100.0 %
Children/Youn	Coun	1	0	7	2	1	0	11

g People	t							
	%	9.1%	.0%	63.6%	18.2%	9.1%	.0%	100.0 %
Endocrine	Coun t	1	0	1	0	0	0	2
	%	50.0%	.0%	50.0%	.0%	.0%	.0%	100.0 %
Total	Coun t	261	9	655	130	20	11	1086
	%	24.0%	.8%	60.3%	12.0%	1.8%	1.0%	100.0 %

B4: Preparation for MDT meetings

Table: B24 Team members perceptions about preparation	N (valid% - adjusting for missing data)			
for MDT meetings	Strongly agree/ Agree	Disagree/ Strongly disagree		
Preparation time for MDT meetings should be recognised in job plans	1821 (97)	48 (3)		
All MDT core members need to do some preparation prior to the meeting	1519 (81)	357 (19)		
The agenda and patient lists should be circulated prior to the meeting	1782 (96)	83 (5)		
Case summaries should be circulated prior to the meeting	1082 (62)	677 (39)		
Information about patients to be discussed should be collated and summarised prior to the MDT meeting	1763 (94)	106 (6)		
Late additions to the agenda should not be allowed unless clinically urgent	1359 (73)	504 (27)		
All case notes/reports/images, past and present, should be available at the meeting	1769 (95)	93 (5)		

		Preparation time for MDT meetings should be recognised in job plans		Total
Professional Group		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	972	34	1006
	%	96.6%	3.4%	100.0%
Nurses	Count	479	9	488
	%	98.2%	1.8%	100.0%
AHPs	Count	74	1	75
	%	98.7%	1.3%	100.0%
MDT coordinators	Count	258	4	262
	%	98.5%	1.5%	100.0%
Other (admin/managerial)	Count	38	0	38
	%	100.0%	.0%	100.0%
Total	Count	1821	48	1869
	%	97.4%	2.6%	100.0%

Table: B25 Preparation time for MDT meetings should be recognised in job plans: by professional group

Dissisting		meetings shoul	n time for MDT d be recognised in plans	Total
Discipline		agree/strongly agree	disagree/strongly disagree	
Surgeon	Count	269	22	291
	%	92.4%	7.6%	100.0%
Radiologist	Count	115	0	115
	%	100.0%	.0%	100.0%
Histo/cytopathologist	Count	118	0	118
	%	100.0%	.0%	100.0%
Oncologist (clinical and medical)	Count	154	2	156
	%	98.7%	1.3%	100.0%
Haematologist	Count	89	2	91
	%	97.8%	2.2%	100.0%
Other Doctor (Physician, GP etc)	Count	166	8	174
	%	95.4%	4.6%	100.0%
Palliative care specialist	Count	61	0	61
	%	100.0%	.0%	100.0%
Clinical Nurse Specialist	Count	447	9	456
	%	98.0%	2.0%	100.0%
Nursing (other)	Count	32	0	32
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	74	1	75
	%	98.7%	1.3%	100.0%
MDT coordinator	Count	258	4	262
	%	98.5%	1.5%	100.0%
Other (admin/clerical and managerial)	Count	38	0	38
	%	100.0%	.0%	100.0%
Total	Count	1821	48	1869
	%	97.4%	2.6%	100.0%

Table: B26 Preparation time for MDT meetings should be recognised in job plans: by discipline

Tumourtumo		meetings shoul	n time for MDT d be recognised in plans	Total
Tumour type		agree/strongly agree	disagree/strongly disagree	
Breast	Count	183	5	188
	%	97.3%	2.7%	100.0%
Colorectal	Count	117	3	120
	%	97.5%	2.5%	100.0%
Lung	Count	130	3	133
	%	97.7%	2.3%	100.0%
Gynae	Count	97	6	103
	%	94.2%	5.8%	100.0%
Head and Neck	Count	89	3	92
	%	96.7%	3.3%	100.0%
Upper GI	Count	111	3	114
	%	97.4%	2.6%	100.0%
Urological	Count	119	3	122
	%	97.5%	2.5%	100.0%
Haematological	Count	160	5	165
	%	97.0%	3.0%	100.0%
Skin	Count	80	2	82
	%	97.6%	2.4%	100.0%
Supportive and Palliative Care	Count	39	0	39
	%	100.0%	.0%	100.0%
Brain/CNS	Count	23	3	26
	%	88.5%	11.5%	100.0%
Sarcoma	Count	14	2	16
	%	87.5%	12.5%	100.0%
Children/Young People	Count	13	0	13
•	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1177	38	1215
	%	96.9%	3.1%	100.0%

Table: B27 Preparation time for MDT meetings should be recognised in job plans: by tumour type

		All MDT core members need to do some preparation prior to the meeting		Total
Professional Group		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	764	246	1010
	%	75.6%	24.4%	100.0%
Nurses	Count	424	66	490
	%	86.5%	13.5%	100.0%
AHPs	Count	69	8	77
	%	89.6%	10.4%	100.0%
MDT coordinators	Count	224	36	260
	%	86.2%	13.8%	100.0%
Other (admin/managerial)	Count	38	1	39
	%	97.4%	2.6%	100.0%
Total	Count	1519	357	1876
	%	81.0%	19.0%	100.0%

Table: B28 All MDT core members need to do some preparation prior to the meeting: by professional group

Dissipling		All MDT core members need to do some preparation prior to the meeting		Total
Discipline		agree/strongly agree	disagree/strongly disagree	
Surgeon	Count	204	89	293
	%	69.6%	30.4%	100.0%
Radiologist	Count	102	15	117
	%	87.2%	12.8%	100.0%
Histo/cytopathologist	Count	105	11	116
	%	90.5%	9.5%	100.0%
Oncologist (clinical and medical)	Count	100	56	156
	%	64.1%	35.9%	100.0%
Haematologist	Count	84	8	92
	%	91.3%	8.7%	100.0%
Other Doctor (Physician, GP etc)	Count	121	53	174
,	%	69.5%	30.5%	100.0%
Palliative care specialist	Count	48	14	62
	%	77.4%	22.6%	100.0%
Clinical Nurse Specialist	Count	395	62	457
	%	86.4%	13.6%	100.0%
Nursing (other)	Count	29	4	33
	%	87.9%	12.1%	100.0%
Allied Health Professional	Count	69	8	77
	%	89.6%	10.4%	100.0%
MDT coordinator	Count	224	36	260
	%	86.2%	13.8%	100.0%
Other (admin/clerical and managerial)	Count	38	1	39
	%	97.4%	2.6%	100.0%
Total	Count	1519	357	1876
	%	81.0%	19.0%	100.0%

Table: B29 All MDT core members need to do some preparation prior to the meeting: by discipline

			members need to aration prior to the	
			eeting	Total
Tumour type				
		agree/strongly	disagree/strongly	
		agree	disagree	
Breast	Count	155	32	187
	%	82.9%	17.1%	100.0%
Colorectal	Count	94	28	122
	%	77.0%	23.0%	100.0%
Lung	Count	110	23	133
	%	82.7%	17.3%	100.0%
Gynae	Count	85	21	106
	%	80.2%	19.8%	100.0%
Head and Neck	Count	82	12	94
	%	87.2%	12.8%	100.0%
Upper GI	Count	91	22	113
	%	80.5%	19.5%	100.0%
Urological	Count	90	32	122
	%	73.8%	26.2%	100.0%
Haematological	Count	149	16	165
	%	90.3%	9.7%	100.0%
Skin	Count	51	27	78
	%	65.4%	34.6%	100.0%
Supportive and	Count	39	3	42
Palliative Care			_	
	%	92.9%	7.1%	100.0%
Brain/CNS	Count	22	4	26
	%	84.6%	15.4%	100.0%
Sarcoma	Count	12	4	16
	%	75.0%	25.0%	100.0%
Children/Young People	Count	12	1	13
·	%	92.3%	7.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	994	225	1219
	%	81.5%	18.5%	100.0%

Table: B30 All MDT core members need to do some preparation prior to the meeting:by tumour type

Professional Group		The agenda should be circ me	Total	
		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	955	55	1010
	%	94.6%	5.4%	100.0%
Nurses	Count	475	13	488
	%	97.3%	2.7%	100.0%
AHPs	Count	64	7	71
	%	90.1%	9.9%	100.0%
MDT coordinators	Count	252	7	259
	%	97.3%	2.7%	100.0%
Other (admin/managerial)	Count	36	1	37
	%	97.3%	2.7%	100.0%
Total	Count	1782	83	1865
	%	95.5%	4.5%	100.0%

Table: B31 The agenda and patient lists should be circulated prior to the meeting: by professional group

		should be circ	and patient lists ulated prior to the eeting	Total
Discipline		agree/strongly agree	disagree/strongly disagree	
Surgeon	Count	273	21	294
	%	92.9%	7.1%	100.0%
Radiologist	Count	116	1	117
	%	99.1%	.9%	100.0%
Histo/cytopathologist	Count	117	1	118
	%	99.2%	.8%	100.0%
Oncologist (clinical and medical)	Count	139	16	155
	%	89.7%	10.3%	100.0%
Haematologist	Count	90	1	91
	%	98.9%	1.1%	100.0%
Other Doctor (Physician, GP etc)	Count	169	7	176
	%	96.0%	4.0%	100.0%
Palliative care specialist	Count	51	8	59
	%	86.4%	13.6%	100.0%
Clinical Nurse Specialist	Count	444	12	456
	%	97.4%	2.6%	100.0%
Nursing (other)	Count	31	1	32
	%	96.9%	3.1%	100.0%
Allied Health Professional	Count	64	7	71
	%	90.1%	9.9%	100.0%
MDT coordinator	Count	252	7	259
	%	97.3%	2.7%	100.0%
Other (admin/clerical and managerial)	Count	36	1	37
	%	97.3%	2.7%	100.0%
Total	Count	1782	83	1865
	%	95.5%	4.5%	100.0%

Table: B32 The agenda and patient lists should be circulated prior to the meeting: by discipline

Tumouture	Tumour type		and patient lists ulated prior to the eeting	Total
Tumour type		agree/strongly agree	disagree/strongly disagree	
Breast	Count	167	16	183
	%	91.3%	8.7%	100.0%
Colorectal	Count	119	5	124
	%	96.0%	4.0%	100.0%
Lung	Count	129	4	133
	%	97.0%	3.0%	100.0%
Gynae	Count	102	2	104
	%	98.1%	1.9%	100.0%
Head and Neck	Count	93	1	94
	%	98.9%	1.1%	100.0%
Upper GI	Count	109	3	112
	%	97.3%	2.7%	100.0%
Urological	Count	120	4	124
	%	96.8%	3.2%	100.0%
Haematological	Count	163	1	164
	%	99.4%	.6%	100.0%
Skin	Count	78	4	82
	%	95.1%	4.9%	100.0%
Supportive and Palliative Care	Count	25	12	37
	%	67.6%	32.4%	100.0%
Brain/CNS	Count	27	0	27
	%	100.0%	.0%	100.0%
Sarcoma	Count	14	2	16
	%	87.5%	12.5%	100.0%
Children/Young People	Count	11	1	12
	%	91.7%	8.3%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	1158	56	1214
	%	95.4%	4.6%	100.0%

Table: B33 The agenda and patient lists should be circulated prior to the meeting: by tumour type

Professional Group			aries should be or to the meeting	Total
		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	547	425	972
	%	56.3%	43.7%	100.0%
Nurses	Count	305	147	452
	%	67.5%	32.5%	100.0%
AHPs	Count	46	21	67
	%	68.7%	31.3%	100.0%
MDT coordinators	Count	158	75	233
	%	67.8%	32.2%	100.0%
Other (admin/managerial)	Count	26	9	35
	%	74.3%	25.7%	100.0%
Total	Count	1082	677	1759
	%	61.5%	38.5%	100.0%

Table: B34 Case summaries should be circulated prior to the meeting: by professional group

Discipline			aries should be or to the meeting	Total
Dioopinio		agree/strongly agree	disagree/strongly disagree	
Surgeon	Count	142	145	287
	%	49.5%	50.5%	100.0%
Radiologist	Count	88	23	111
	%	79.3%	20.7%	100.0%
Histo/cytopathologist	Count	72	39	111
	%	64.9%	35.1%	100.0%
Oncologist (clinical and medical)	Count	77	70	147
	%	52.4%	47.6%	100.0%
Haematologist	Count	47	42	89
	%	52.8%	47.2%	100.0%
Other Doctor (Physician, GP etc)	Count	88	79	167
	%	52.7%	47.3%	100.0%
Palliative care specialist	Count	33	27	60
·	%	55.0%	45.0%	100.0%
Clinical Nurse Specialist	Count	283	139	422
	%	67.1%	32.9%	100.0%
Nursing (other)	Count	22	8	30
5()	%	73.3%	26.7%	100.0%
Allied Health Professional	Count	46	21	67
1 loloolonal	%	68.7%	31.3%	100.0%
MDT coordinator	Count	158	75	233
	%	67.8%	32.2%	100.0%
Other (admin/clerical and	Count	26	9	35
managerial)	0/	74.00/		400.00/
T _4_1	%	74.3%	25.7%	100.0%
Total	Count	1082	677	1759
	%	61.5%	38.5%	100.0%

Table: B35 Case summaries should be circulated prior to the meeting: by discipline

Tumour type	Tumour type		aries should be or to the meeting	Total
ramour type		agree/strongly agree	disagree/strongly disagree	
Breast	Count	84	85	169
	%	49.7%	50.3%	100.0%
Colorectal	Count	57	57	114
	%	50.0%	50.0%	100.0%
Lung	Count	66	57	123
	%	53.7%	46.3%	100.0%
Gynae	Count	67	30	97
	%	69.1%	30.9%	100.0%
Head and Neck	Count	68	20	88
	%	77.3%	22.7%	100.0%
Upper GI	Count	72	35	107
	%	67.3%	32.7%	100.0%
Urological	Count	67	49	116
	%	57.8%	42.2%	100.0%
Haematological	Count	102	56	158
	%	64.6%	35.4%	100.0%
Skin	Count	47	31	78
	%	60.3%	39.7%	100.0%
Supportive and Palliative Care	Count	20	19	39
	%	51.3%	48.7%	100.0%
Brain/CNS	Count	20	7	27
	%	74.1%	25.9%	100.0%
Sarcoma	Count	9	7	16
	%	56.3%	43.8%	100.0%
Children/Young People	Count	10	2	12
	%	83.3%	16.7%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	690	456	1146
	%	60.2%	39.8%	100.0%

Table: B36 Case summaries should be circulated prior to the meeting: by tumour type

Professional Group		discussed shou summarised	out patients to be Id be collated and prior to the MDT eeting	Total
		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	942	66	1008
	%	93.5%	6.5%	100.0%
Nurses	Count	469	20	489
	%	95.9%	4.1%	100.0%
AHPs	Count	68	8	76
	%	89.5%	10.5%	100.0%
MDT coordinators	Count	247	12	259
	%	95.4%	4.6%	100.0%
Other (admin/managerial)	Count	37	0	37
	%	100.0%	.0%	100.0%
Total	Count	1763	106	1869
	%	94.3%	5.7%	100.0%

Table: B37 Information about patients to be discussed should be collated andsummarised prior to the meeting: by professional group

Discipline		discussed shou summarised	Information about patients to be discussed should be collated and summarised prior to the MDT meeting	
		agree/strongly agree	disagree/strongly disagree	
Surgeon	Count %	276 94.5%	16 5.5%	292 100.0%
Radiologist	Count %	109 94.8%	6 5.2%	100.0% 115 100.0%
Histo/cytopathologist	70 Count %	94.8% 108 94.7%	5.2% 6 5.3%	100.0% 114 100.0%
Oncologist (clinical and medical)	Count	147	11	158
,	%	93.0%	7.0%	100.0%
Haematologist	Count %	89 96.7%	3 3.3%	92 100.0%
Other Doctor (Physician, GP etc)	Count	158	18	176
·	%	89.8%	10.2%	100.0%
Palliative care specialist	Count %	55 90.2%	6 9.8%	61 100.0%
Clinical Nurse Specialist	Count	436	20	456
Nursing (other)	% Count	95.6% 33	4.4%	100.0% 33
	%	100.0%	.0%	100.0%
Allied Health Professional	Count %	68 89.5%	8 10.5%	76 100.0%
MDT coordinator	70 Count %	09.3% 247 95.4%	10.5% 12 4.6%	259 100.0%
Other (admin/clerical and managerial)	Count	37	4.0 <i>%</i>	37
	%	100.0%	.0%	100.0%
Total	Count %	1763 94.3%	106 5.7%	1869 100.0%

Table: B38 Information about patients to be discussed should be collated and summarised prior to the MDT meeting: by discipline

		discussed shou summarised	Information about patients to be discussed should be collated and summarised prior to the MDT meeting	
Tumour type				
		agree/strongly	disagree/strongly	
		agree	disagree	
Breast	Count	168	13	181
	%	92.8%	7.2%	100.0%
Colorectal	Count	115	7	122
	%	94.3%	5.7%	100.0%
Lung	Count	125	7	132
	%	94.7%	5.3%	100.0%
Gynae	Count	105	0	105
	%	100.0%	.0%	100.0%
Head and Neck	Count	92	2	94
	%	97.9%	2.1%	100.0%
Upper GI	Count	105	6	111
	%	94.6%	5.4%	100.0%
Urological	Count	116	7	123
	%	94.3%	5.7%	100.0%
Haematological	Count	160	6	166
	%	96.4%	3.6%	100.0%
Skin	Count	76	6	82
	%	92.7%	7.3%	100.0%
Supportive and Palliative Care	Count	35	6	41
	%	85.4%	14.6%	100.0%
Brain/CNS	Count	27	0	27
	%	100.0%	.0%	100.0%
Sarcoma	Count	14	2	16
	%	87.5%	12.5%	100.0%
Children/Young People	Count	11	2	13
	%	84.6%	15.4%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1151	64	1215
	%	94.7%	5.3%	100.0%

Table: B39 Information about patients to be discussed should be collated and summarised prior to the MDT meeting: by tumour type

		should not be	s to the agenda allowed unless lly urgent	Total
Professional Group		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	707	296	1003
	%	70.5%	29.5%	100.0%
Nurses	Count	350	139	489
	%	71.6%	28.4%	100.0%
AHPs	Count	49	23	72
	%	68.1%	31.9%	100.0%
MDT coordinators	Count	224	37	261
	%	85.8%	14.2%	100.0%
Other (admin/managerial)	Count	29	9	38
	%	76.3%	23.7%	100.0%
Total	Count	1359	504	1863
	%	72.9%	27.1%	100.0%

Table: B40 Late additions to the agenda should not be allowed unless clinically urgent: by professional group

		should not be	s to the agenda allowed unless lly urgent	Total
Discipline		agree/strongly agree	disagree/strongly disagree	
Surgeon	Count	185	104	289
2	%	64.0%	36.0%	100.0%
Radiologist	Count	104	12	116
_	%	89.7%	10.3%	100.0%
Histo/cytopathologist	Count	101	15	116
	%	87.1%	12.9%	100.0%
Oncologist (clinical and medical)	Count	108	48	156
	%	69.2%	30.8%	100.0%
Haematologist	Count	70	21	91
5	%	76.9%	23.1%	100.0%
Other Doctor (Physician, GP etc)	Count	99	77	176
,	%	56.3%	43.8%	100.0%
Palliative care specialist	Count	40	19	59
·	%	67.8%	32.2%	100.0%
Clinical Nurse Specialist	Count	329	127	456
	%	72.1%	27.9%	100.0%
Nursing (other)	Count	21	12	33
	%	63.6%	36.4%	100.0%
Allied Health Professional	Count	49	23	72
	%	68.1%	31.9%	100.0%
MDT coordinator	Count	224	37	261
	%	85.8%	14.2%	100.0%
Other (admin/clerical and managerial)	Count	29	9	38
C ,	%	76.3%	23.7%	100.0%
Total	Count	1359	504	1863
	%	72.9%	27.1%	100.0%

Table: B41 Late additions to the agenda should not be allowed unless clinically urgent: by discipline

			is to the agenda	
			e allowed unless	
		clinica	Ily urgent	Total
Tumour type				
		agree/strongly	disagree/strongly	
		agree	disagree	
Breast	Count	136	49	185
	%	73.5%	26.5%	100.0%
Colorectal	Count	74	47	121
	%	61.2%	38.8%	100.0%
Lung	Count	84	49	133
_	%	63.2%	36.8%	100.0%
Gynae	Count	80	25	105
-	%	76.2%	23.8%	100.0%
Head and Neck	Count	68	24	92
	%	73.9%	26.1%	100.0%
Upper GI	Count	86	26	112
	%	76.8%	23.2%	100.0%
Urological	Count	102	22	124
5	%	82.3%	17.7%	100.0%
Haematological	Count	128	37	165
5	%	77.6%	22.4%	100.0%
Skin	Count	50	31	81
	%	61.7%	38.3%	100.0%
Supportive and	Count			
Palliative Care		15	23	38
	%	39.5%	60.5%	100.0%
Brain/CNS	Count	19	7	26
	%	73.1%	26.9%	100.0%
Sarcoma	Count	15	1	16
	%	93.8%	6.3%	100.0%
Children/Young	Count			
People	oount	10	3	13
1.00010	%	76.9%	23.1%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	868	345	1213
10101	%	71.6%	28.4%	100.0%

Table: B42 Late additions to the agenda should not be allowed unless clinically urgent: by tumour type

		All case notes/reports/images, past and present, should be available at the meeting		Total
Professional Group		agree/strongly agree	disagree/strongly disagree	
Doctors	Count	934	73	1007
	%	92.8%	7.2%	100.0%
Nurses	Count	479	8	487
	%	98.4%	1.6%	100.0%
AHPs	Count	68	4	72
	%	94.4%	5.6%	100.0%
MDT coordinators	Count	252	7	259
	%	97.3%	2.7%	100.0%
Other (admin/managerial)	Count	36	1	37
	%	97.3%	2.7%	100.0%
Total	Count	1769	93	1862
	%	95.0%	5.0%	100.0%

Table: B43 All case notes/reports/images, past and present, should be available at the meeting: by professional group

		past and pre	s/reports/images, sent, should be at the meeting	Total
Discipline		agree/strongly	disagree/strongly disagree	
Surgeon	Count	agree 278	uisagree 15	293
Surgeon	%	94.9%	5.1%	100.0%
Radiologist	Count	112	4	116
Realition	%	96.6%	3.4%	100.0%
Histo/cytopathologist	Count	106	8	114
	%	93.0%	7.0%	100.0%
Oncologist (clinical and medical)	Count	147	11	158
	%	93.0%	7.0%	100.0%
Haematologist	Count	70	21	91
2	%	76.9%	23.1%	100.0%
Other Doctor (Physician, GP etc)	Count	168	10	178
,	%	94.4%	5.6%	100.0%
Palliative care specialist	Count	53	4	57
	%	93.0%	7.0%	100.0%
Clinical Nurse Specialist	Count	447	8	455
	%	98.2%	1.8%	100.0%
Nursing (other)	Count	32	0	32
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	68	4	72
	%	94.4%	5.6%	100.0%
MDT coordinator	Count	252	7	259
	%	97.3%	2.7%	100.0%
Other (admin/clerical and managerial)	Count	36	1	37
	%	97.3%	2.7%	100.0%
Total	Count	1769	93	1862
	%	95.0%	5.0%	100.0%

Table: B44 All case notes/reports/images, past and present, should be available at the meeting: by discipline

			s/reports/images, esent, should be	
			at the meeting	Total
Tumour type			Ŭ	
		agree/strongly	disagree/strongly	
		agree	disagree	
Breast	Count	182	3	185
	%	98.4%	1.6%	100.0%
Colorectal	Count	120	4	124
	%	96.8%	3.2%	100.0%
Lung	Count	127	6	133
	%	95.5%	4.5%	100.0%
Gynae	Count	101	4	105
	%	96.2%	3.8%	100.0%
Head and Neck	Count	93	2	95
	%	97.9%	2.1%	100.0%
Upper GI	Count	108	4	112
	%	96.4%	3.6%	100.0%
Urological	Count	123	1	124
	%	99.2%	.8%	100.0%
Haematological	Count	142	22	164
	%	86.6%	13.4%	100.0%
Skin	Count	79	4	83
	%	95.2%	4.8%	100.0%
Supportive and	Count	31	6	37
Palliative Care				
	%	83.8%	16.2%	100.0%
Brain/CNS	Count	21	6	27
	%	77.8%	22.2%	100.0%
Sarcoma	Count	15	1	16
	%	93.8%	6.3%	100.0%
Children/Young	Count	10	2	12
People				. –
	%	83.3%	16.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1154	65	1219
	%	94.7%	5.3%	100.0%

Table: B45 All case notes/reports/images, past and present, should be available at the meeting: by tumour type

B4.1: Time spent preparing for MDT meetings

Table: B46 If you are an MDTmember, how much time do youspend on preparation for each	_	
meeting?	Frequency	Percent
none	155	9
less than 30 minutes	622	35
between 30-60 minutes	467	26
between 60-90 minutes	178	10
more than 90 minutes	355	20

Table: B47 If you are an MDT member, how much time do you spend on preparation for each meeting: by professional group

		-			how much		Tatal
Professional Group		none	less than 30 minutes	between 30-60 minutes	for each me between 60-90 minutes	more than 90 minutes	Total
Doctors	Count	109	403	279	97	98	986
	%	11.1%	40.9%	28.3%	9.8%	9.9%	100.0%
Nurses	Count	37	159	159	56	50	461
	%	8.0%	34.5%	34.5%	12.1%	10.8%	100.0%
AHPs	Count	7	44	13	0	0	64
	%	10.9%	68.8%	20.3%	.0%	.0%	100.0%
MDT coordinators	Count	1	2	8	24	206	241
	%	.4%	.8%	3.3%	10.0%	85.5%	100.0%
Other (admin/managerial)	Count	1	14	8	1	1	25
	%	4.0%	56.0%	32.0%	4.0%	4.0%	100.0%
Total	Count	155	622	467	178	355	1777
	%	8.7%	35.0%	26.3%	10.0%	20.0%	100.0%

If you are an MDT member, how much time do you spend on preparation for each meeting?					Total		
Discipline		none	less than 30 minutes	between 30-60 minutes	between 60-90 minutes	more than 90 minutes	
Surgeon	Count	46	119	91	22	5	283
5	%	16.3%	42.0%	32.2%	7.8%	1.8%	100.0%
Radiologist	Count	6	17	33	28	30	114
	%	5.3%	14.9%	28.9%	24.6%	26.3%	100.0%
Histo/cytopathologist	Count	1	10	32	28	47	118
	%	.8%	8.5%	27.1%	23.7%	39.8%	100.0%
Oncologist (clinical and medical)	Count	26	101	24	4	0	155
	%	16.8%	65.2%	15.5%	2.6%	.0%	100.0%
Haematologist	Count	5	26	42	10	5	88
	%	5.7%	29.5%	47.7%	11.4%	5.7%	100.0%
Other Doctor (Physician, GP etc)	Count	18	93	48	4	10	173
	%	10.4%	53.8%	27.7%	2.3%	5.8%	100.0%
Palliative care specialist	Count	7	37	9	1	1	55
	%	12.7%	67.3%	16.4%	1.8%	1.8%	100.0%
Clinical Nurse Specialist	Count	33	145	152	55	50	435
	%	7.6%	33.3%	34.9%	12.6%	11.5%	100.0%
Nursing (other)	Count	4	14	7	1	0	26
	%	15.4%	53.8%	26.9%	3.8%	.0%	100.0%
Allied Health Professional	Count	7	44	13	0	0	64
	%	10.9%	68.8%	20.3%	.0%	.0%	100.0%
MDT coordinator	Count	1	2	8	24	206	241
	%	.4%	.8%	3.3%	10.0%	85.5%	100.0%
Other (admin/clerical and managerial)	Count	1	14	8	1	1	25
	%	4.0%	56.0%	32.0%	4.0%	4.0%	100.0%
Total	Count	155	622	467	178	355	1777
	%	8.7%	35.0%	26.3%	10.0%	20.0%	100.0%

Table: B48 If you are an MDT member, how much time do you spend on preparation for each meeting: by discipline

			re an MDT r end on prep				Total
Tumour type			less than	between	between	more	
		none	30 minutes	30-60 minutes	60-90 minutes	than 90 minutes	
Breast	Count	24	61	41	18	24	168
	%	14.3%	36.3%	24.4%	10.7%	14.3%	100.0%
Colorectal	Count	11	36	33	14	26	120
	%	9.2%	30.0%	27.5%	11.7%	21.7%	100.0%
Lung	Count	8	49	40	4	29	130
	%	6.2%	37.7%	30.8%	3.1%	22.3%	100.0%
Gynae	Count	4	34	29	9	25	101
	%	4.0%	33.7%	28.7%	8.9%	24.8%	100.0%
Head and Neck	Count	8	40	23	5	14	90
	%	8.9%	44.4%	25.6%	5.6%	15.6%	100.0%
Upper GI	Count	6	29	28	17	30	110
	%	5.5%	26.4%	25.5%	15.5%	27.3%	100.0%
Urological	Count	20	35	27	10	25	117
	%	17.1%	29.9%	23.1%	8.5%	21.4%	100.0%
Haematological	Count	15	50	58	19	16	158
	%	9.5%	31.6%	36.7%	12.0%	10.1%	100.0%
Skin	Count	7	31	21	2	18	79
	%	8.9%	39.2%	26.6%	2.5%	22.8%	100.0%
Supportive and Palliative Care	Count	4	21	12	1	0	38
	%	10.5%	55.3%	31.6%	2.6%	.0%	100.0%
Brain/CNS	Count	0	8	8	4	6	26
	%	.0%	30.8%	30.8%	15.4%	23.1%	100.0%
Sarcoma	Count	2	3	1	1	8	15
	%	13.3%	20.0%	6.7%	6.7%	53.3%	100.0%
Children/Young People	Count	0	3	5	2	1	11
	%	.0%	27.3%	45.5%	18.2%	9.1%	100.0%
Endocrine	Count	0	0	0	0	2	2
	%	.0%	.0%	.0%	.0%	100.0%	100.0%
Total	Count	109	400	326	106	224	1165
	%	9.4%	34.3%	28.0%	9.1%	19.2%	100.0%

Table: B49 If you are an MDT member, how much time do you spend on preparation for each meeting: by tumour type

B5: Organisation/administration during MDT meetings

Table: B50 Team members	N (valid% - adjusting for missing data)				
perceptions about organisation and administration during MDT meetings	Strongly agree/ Agree	Disagree/ Strongly disagree			
MDT members need allocated protected time (including travel time) to attend meetings	1797 (98)	40 (2)			
Core members should attend for the full meeting and not just for the cases directly relevant to them	1695 (91)	163 (9)			
Non-core members should be able to attend just to discuss patients in their care	1616 (89)	203 (11)			
Meetings should not take place outside core hours	1551 (85)	281 (15)			
Meetings should not take place during the lunch period	1018 (57)	780 (43)			
Prioritisation of agenda is important so that more time can be spent discussing complex cases	1610 (89)	202 (11)			
Cases should be grouped on the agenda, e.g. new case, follow-up, by complexity, by tumour type etc	1354 (78)	389 (22)			
A minimum dataset of diagnostic information (pathology and radiology) should be presented for each patient	1712 (94)	104 (6)			
Standard pro-forma documentation should be used when electronic databases are not available	1697 (96)	66 (4)			
The relationship between the Chair and the MDT coordinator is key to ensuring the meeting runs effectively	1653 (93)	132 (7)			

Professional Group		MDT membe protected time time) to at	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	990	12	1002
	%	98.8%	1.2%	100.0%
Nurses	Count	467	16	483
	%	96.7%	3.3%	100.0%
AHPs	Count	71	1	72
	%	98.6%	1.4%	100.0%
MDT coordinators	Count	232	11	243
	%	95.5%	4.5%	100.0%
Other (admin/managerial)	Count	37	0	37
	%	100.0%	.0%	100.0%
Total	Count	1797	40	1837
	%	97.8%	2.2%	100.0%

Table: B51 MDT members need allocated protected time (including travel time) to attend meetings: by professional group

		protected time	rs need allocated e (including travel tend meetings	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	279	6	285
	%	97.9%	2.1%	100.0%
Radiologist	Count	115	1	116
	%	99.1%	.9%	100.0%
Histo/cytopathologist	Count	118	0	118
	%	100.0%	.0%	100.0%
Oncologist (clinical and medical)	Count	155	3	158
	%	98.1%	1.9%	100.0%
Haematologist	Count	90	0	90
	%	100.0%	.0%	100.0%
Other Doctor (Physician, GP etc)	Count	171	2	173
	%	98.8%	1.2%	100.0%
Palliative care specialist	Count	62	0	62
	%	100.0%	.0%	100.0%
Clinical Nurse Specialist	Count	438	13	451
	%	97.1%	2.9%	100.0%
Nursing (other)	Count	29	3	32
	%	90.6%	9.4%	100.0%
Allied Health Professional	Count	71	1	72
	%	98.6%	1.4%	100.0%
MDT coordinator	Count	232	11	243
	%	95.5%	4.5%	100.0%
Other (admin/clerical and managerial)	Count	37	0	37
j ,	%	100.0%	.0%	100.0%
Total	Count	1797	40	1837
	%	97.8%	2.2%	100.0%

Table: B52 MDT members need allocated protected time (including travel time) to attend meetings: by discipline

		protected time	MDT members need allocated protected time (including travel time) to attend meetings		
Tumour type		strongly agree/agree	disagree/strongly disagree		
Breast	Count	182	3	185	
	%	98.4%	1.6%	100.0%	
Colorectal	Count	111	5	116	
	%	95.7%	4.3%	100.0%	
Lung	Count	128	2	130	
	%	98.5%	1.5%	100.0%	
Gynae	Count	103	0	103	
	%	100.0%	.0%	100.0%	
Head and Neck	Count	89	4	93	
	%	95.7%	4.3%	100.0%	
Upper GI	Count	109	1	110	
	%	99.1%	.9%	100.0%	
Urological	Count	119	3	122	
	%	97.5%	2.5%	100.0%	
Haematological	Count	157	2	159	
	%	98.7%	1.3%	100.0%	
Skin	Count	79	2	81	
	%	97.5%	2.5%	100.0%	
Supportive and Palliative Care	Count	41	0	41	
	%	100.0%	.0%	100.0%	
Brain/CNS	Count	26	1	27	
	%	96.3%	3.7%	100.0%	
Sarcoma	Count	12	2	14	
	%	85.7%	14.3%	100.0%	
Children/Young People	Count	13	0	13	
	%	100.0%	.0%	100.0%	
Endocrine	Count	2	0	2	
	%	100.0%	.0%	100.0%	
Total	Count	1171	25	1196	
	%	97.9%	2.1%	100.0%	

Table: B53 MDT members need allocated protected time (including travel time) to attend meetings: by tumour type

Drafaggional Craup		Core members the full meetin the cases di	Total	
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	894	113	1007
	%	88.8%	11.2%	100.0%
Nurses	Count	459	29	488
	%	94.1%	5.9%	100.0%
AHPs	Count	66	7	73
	%	90.4%	9.6%	100.0%
MDT coordinators	Count	243	10	253
	%	96.0%	4.0%	100.0%
Other (admin/managerial)	Count	33	4	37
	%	89.2%	10.8%	100.0%
Total	Count	1695	163	1858
	%	91.2%	8.8%	100.0%

Table: B54 Core members should attend for the full meeting and not just for the casesdirectly relevant to them: by professional group

Discipline		the full meetir the cases dir	s should attend for ng and not just for ectly relevant to hem	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	274	19	293
	%	93.5%	6.5%	100.0%
Radiologist	Count	91	25	116
	%	78.4%	21.6%	100.0%
Histo/cytopathologist	Count	94	22	116
	%	81.0%	19.0%	100.0%
Oncologist (clinical and medical)	Count	137	20	157
	%	87.3%	12.7%	100.0%
Haematologist	Count	76	13	89
	%	85.4%	14.6%	100.0%
Other Doctor (Physician, GP etc)	Count	165	9	174
	%	94.8%	5.2%	100.0%
Palliative care specialist	Count	57	5	62
	%	91.9%	8.1%	100.0%
Clinical Nurse Specialist	Count	430	26	456
	%	94.3%	5.7%	100.0%
Nursing (other)	Count	29	3	32
	%	90.6%	9.4%	100.0%
Allied Health Professional	Count	66	7	73
	%	90.4%	9.6%	100.0%
MDT coordinator	Count	243	10	253
	%	96.0%	4.0%	100.0%
Other (admin/clerical and managerial)	Count	33	4	37
	%	89.2%	10.8%	100.0%
Total	Count	1695	163	1858
	%	91.2%	8.8%	100.0%

Table: B55 Core members should attend for the full meeting and not just for the cases directly relevant to them: by discipline

		the full meetir the cases di	s should attend for ng and not just for rectly relevant to	Tatal
Tumour type		1	hem	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	172	13	185
	%	93.0%	7.0%	100.0%
Colorectal	Count	114	5	119
	%	95.8%	4.2%	100.0%
Lung	Count	127	6	133
	%	95.5%	4.5%	100.0%
Gynae	Count	97	8	105
	%	92.4%	7.6%	100.0%
Head and Neck	Count	90	6	96
	%	93.8%	6.3%	100.0%
Upper GI	Count	99	13	112
	%	88.4%	11.6%	100.0%
Urological	Count	115	7	122
	%	94.3%	5.7%	100.0%
Haematological	Count	140	20	160
	%	87.5%	12.5%	100.0%
Skin	Count	76	6	82
	%	92.7%	7.3%	100.0%
Supportive and Palliative Care	Count	40	1	41
	%	97.6%	2.4%	100.0%
Brain/CNS	Count	25	2	27
	%	92.6%	7.4%	100.0%
Sarcoma	Count	15	1	16
	%	93.8%	6.3%	100.0%
Children/Young People	Count	12	1	13
	%	92.3%	7.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1124	89	1213
	%	92.7%	7.3%	100.0%

Table: B56 Core members should attend for the full meeting and not just for the casesdirectly relevant to them: tumour type

		Non-core me able to atten patients	Total	
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	873	108	981
	%	89.0%	11.0%	100.0%
Nurses	Count	434	48	482
	%	90.0%	10.0%	100.0%
AHPs	Count	63	13	76
	%	82.9%	17.1%	100.0%
MDT coordinators	Count	213	31	244
	%	87.3%	12.7%	100.0%
Other (admin/managerial)	Count	33	3	36
	%	91.7%	8.3%	100.0%
Total	Count	1616	203	1819
	%	88.8%	11.2%	100.0%

Table: B57 Non-core members should be able to attend just to discuss patients in their care: by professional group

		able to atten	mbers should be d just to discuss in their care	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	244	41	285
	%	85.6%	14.4%	100.0%
Radiologist	Count	96	14	110
	%	87.3%	12.7%	100.0%
Histo/cytopathologist	Count	102	9	111
	%	91.9%	8.1%	100.0%
Oncologist (clinical and medical)	Count	145	10	155
	%	93.5%	6.5%	100.0%
Haematologist	Count	81	7	88
	%	92.0%	8.0%	100.0%
Other Doctor (Physician, GP etc)	Count	154	16	170
	%	90.6%	9.4%	100.0%
Palliative care specialist	Count	51	11	62
	%	82.3%	17.7%	100.0%
Clinical Nurse Specialist	Count	404	47	451
	%	89.6%	10.4%	100.0%
Nursing (other)	Count	30	1	31
	%	96.8%	3.2%	100.0%
Allied Health Professional	Count	63	13	76
	%	82.9%	17.1%	100.0%
MDT coordinator	Count	213	31	244
	%	87.3%	12.7%	100.0%
Other (admin/clerical and managerial)	Count	33	3	36
	%	91.7%	8.3%	100.0%
Total	Count	1616	203	1819
	%	88.8%	11.2%	100.0%

Table: B58 Non-core members should be able to attend just to discuss patients in their care: by discipline

		Non-core members should be able to attend just to discuss patients in their care		Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	155	23	178
	%	87.1%	12.9%	100.0%
Colorectal	Count	100	18	118
	%	84.7%	15.3%	100.0%
Lung	Count	122	6	128
	%	95.3%	4.7%	100.0%
Gynae	Count	98	4	102
	%	96.1%	3.9%	100.0%
Head and Neck	Count	82	13	95
	%	86.3%	13.7%	100.0%
Upper GI	Count	99	12	111
	%	89.2%	10.8%	100.0%
Urological	Count	104	16	120
	%	86.7%	13.3%	100.0%
Haematological	Count	142	16	158
	%	89.9%	10.1%	100.0%
Skin	Count	66	14	80
	%	82.5%	17.5%	100.0%
Supportive and Palliative Care	Count	31	9	40
	%	77.5%	22.5%	100.0%
Brain/CNS	Count	24	2	26
	%	92.3%	7.7%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	13	0	13
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1054	133	1187
	%	88.8%	11.2%	100.0%

Table: B59 Non-core members should be able to attend just to discuss patients in their care: by tumour type

Professional Group		Meetings should not take place outside core hours		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	831	170	1001
	%	83.0%	17.0%	100.0%
Nurses	Count	443	41	484
	%	91.5%	8.5%	100.0%
AHPs	Count	67	7	74
	%	90.5%	9.5%	100.0%
MDT coordinators	Count	183	53	236
	%	77.5%	22.5%	100.0%
Other (admin/managerial)	Count	27	10	37
	%	73.0%	27.0%	100.0%
Total	Count	1551	281	1832
	%	84.7%	15.3%	100.0%

Table: B60 Meetings should not take place outside core hours: by professional group

Discipline			uld not take place core hours	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	241	48	289
	%	83.4%	16.6%	100.0%
Radiologist	Count	93	21	114
	%	81.6%	18.4%	100.0%
Histo/cytopathologist	Count	91	24	115
	%	79.1%	20.9%	100.0%
Oncologist (clinical and medical)	Count	122	34	156
,	%	78.2%	21.8%	100.0%
Haematologist	Count	85	6	91
-	%	93.4%	6.6%	100.0%
Other Doctor (Physician, GP etc)	Count	141	32	173
	%	81.5%	18.5%	100.0%
Palliative care specialist	Count	58	5	63
	%	92.1%	7.9%	100.0%
Clinical Nurse Specialist	Count	416	36	452
·	%	92.0%	8.0%	100.0%
Nursing (other)	Count	27	5	32
	%	84.4%	15.6%	100.0%
Allied Health Professional	Count	67	7	74
	%	90.5%	9.5%	100.0%
MDT coordinator	Count	183	53	236
	%	77.5%	22.5%	100.0%
Other (admin/clerical and managerial)	Count	27	10	37
	%	73.0%	27.0%	100.0%
Total	Count	1551	281	1832
	%	84.7%	15.3%	100.0%

Table: B61 Meetings should not take place outside core hours: by discipline

Tumour type			uld not take place core hours	Total
rumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	159	27	186
	%	85.5%	14.5%	100.0%
Colorectal	Count	103	15	118
	%	87.3%	12.7%	100.0%
Lung	Count	110	19	129
	%	85.3%	14.7%	100.0%
Gynae	Count	85	18	103
	%	82.5%	17.5%	100.0%
Head and Neck	Count	79	14	93
	%	84.9%	15.1%	100.0%
Upper GI	Count	102	9	111
	%	91.9%	8.1%	100.0%
Urological	Count	106	15	121
2	%	87.6%	12.4%	100.0%
Haematological	Count	151	11	162
E	%	93.2%	6.8%	100.0%
Skin	Count	61	15	76
	%	80.3%	19.7%	100.0%
Supportive and Palliative Care	Count	38	4	42
Pallative Care	%	00 59/	9.5%	100.0%
Drain (CNC		90.5% 21		
Brain/CNS	Count		6	27
0	%	77.8%	22.2%	100.0%
Sarcoma	Count	12	3	15
	%	80.0%	20.0%	100.0%
Children/Young People	Count	12	1	13
Europeania e	%	92.3%	7.7%	100.0%
Endocrine	Count	2	0	2
-	%	100.0%	.0%	100.0%
Total	Count	1041	157	1198
	%	86.9%	13.1%	100.0%

Table: B62 Meetings should not take place outside core hours: by tumour type

Professional group			uld not take place e lunch period	Total
i roiessional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	498	479	977
	%	51.0%	49.0%	100.0%
Nurses	Count	336	134	470
	%	71.5%	28.5%	100.0%
AHPs	Count	57	18	75
	%	76.0%	24.0%	100.0%
MDT coordinators	Count	109	130	239
	%	45.6%	54.4%	100.0%
Other (admin/managerial)	Count	18	19	37
	%	48.6%	51.4%	100.0%
Total	Count	1018	780	1798
	%	56.6%	43.4%	100.0%

Table: B63 Meetings should not take place during the lunch period: by professional group

Discipline			uld not take place lunch period	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	172	107	279
	%	61.6%	38.4%	100.0%
Radiologist	Count	50	65	115
	%	43.5%	56.5%	100.0%
Histo/cytopathologist	Count	45	66	111
	%	40.5%	59.5%	100.0%
Oncologist (clinical and medical)	Count	58	95	153
	%	37.9%	62.1%	100.0%
Haematologist	Count	51	35	86
Ũ	%	59.3%	40.7%	100.0%
Other Doctor (Physician, GP etc)	Count	94	76	170
,	%	55.3%	44.7%	100.0%
Palliative care specialist	Count	28	35	63
	%	44.4%	55.6%	100.0%
Clinical Nurse Specialist	Count	314	124	438
	%	71.7%	28.3%	100.0%
Nursing (other)	Count	22	10	32
3 ()	%	68.8%	31.3%	100.0%
Allied Health Professional	Count	57	18	75
	%	76.0%	24.0%	100.0%
MDT coordinator	Count	109	130	239
	%	45.6%	54.4%	100.0%
Other (admin/clerical and managerial)	Count	18	19	37
	%	48.6%	51.4%	100.0%
Total	Count	1018	780	1798
	%	56.6%	43.4%	100.0%

Table: B64 Meetings should not take place during the lunch period: by discipline

Tumour type			uld not take place lunch period	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	104	75	179
	%	58.1%	41.9%	100.0%
Colorectal	Count	74	42	116
	%	63.8%	36.2%	100.0%
Lung	Count	68	57	125
	%	54.4%	45.6%	100.0%
Gynae	Count	66	37	103
	%	64.1%	35.9%	100.0%
Head and Neck	Count	64	28	92
	%	69.6%	30.4%	100.0%
Upper GI	Count	76	33	109
	%	69.7%	30.3%	100.0%
Urological	Count	83	34	117
5	%	70.9%	29.1%	100.0%
Haematological	Count	105	51	156
5	%	67.3%	32.7%	100.0%
Skin	Count	39	38	77
	%	50.6%	49.4%	100.0%
Supportive and Palliative Care	Count	29	11	40
r allative Care	%	72.5%	27.5%	100.0%
Brain/CNS	Count	14	12	26
Diali/CNS	%	53.8%	46.2%	100.0%
Sarcoma	Count	9	-0.2 %	14
Sarcoma	%	64.3%	35.7%	100.0%
Children/Young People	70 Count	04.3%	55.7 %	13
Children/Tourig Feople	%	53.8%	46.2%	100.0%
Endocrine	% Count	53.8%	40.2% 0	100.0%
Endochine	%	ے 100.0%	.0%	ے 100.0%
Total	% Count	740	.0% 429	100.0%
Total			-	
	%	63.3%	36.7%	100.0%

Table: B65 Meetings should not take place during the lunch period: by tumour type

Profossional Group		Prioritisation of agenda is important so that more time can be spent discussing complex cases		Total
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	880	105	985
	%	89.3%	10.7%	100.0%
Nurses	Count	420	51	471
	%	89.2%	10.8%	100.0%
AHPs	Count	69	6	75
	%	92.0%	8.0%	100.0%
MDT coordinators	Count	210	36	246
	%	85.4%	14.6%	100.0%
Other (admin/managerial)	Count	31	4	35
	%	88.6%	11.4%	100.0%
Total	Count	1610	202	1812
	%	88.9%	11.1%	100.0%

Table: B66 Prioritisation of agenda is important so that more time can be spent discussing complex cases: by professional group

		important so t be spent dis	on of agenda is hat more time can cussing complex cases	Total
Discipline	Discipline			Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	251	37	288
	%	87.2%	12.8%	100.0%
Radiologist	Count	99	14	113
	%	87.6%	12.4%	100.0%
Histo/cytopathologist	Count	102	10	112
	%	91.1%	8.9%	100.0%
Oncologist (clinical and medical)	Count	141	15	156
	%	90.4%	9.6%	100.0%
Haematologist	Count	83	8	91
	%	91.2%	8.8%	100.0%
Other Doctor (Physician, GP etc)	Count	146	18	164
	%	89.0%	11.0%	100.0%
Palliative care specialist	Count	58	3	61
	%	95.1%	4.9%	100.0%
Clinical Nurse Specialist	Count	395	47	442
	%	89.4%	10.6%	100.0%
Nursing (other)	Count	25	4	29
	%	86.2%	13.8%	100.0%
Allied Health Professional	Count	69	6	75
	%	92.0%	8.0%	100.0%
MDT coordinator	Count	210	36	246
	%	85.4%	14.6%	100.0%
Other (admin/clerical and managerial)	Count	31	4	35
, , , , , , , , , , , , , , , , , , ,	%	88.6%	11.4%	100.0%
Total	Count	1610	202	1812
	%	88.9%	11.1%	100.0%

Table: B67 Prioritisation of agenda is important so that more time can be spent discussing complex cases: by discipline

Tumour type		Prioritisation of agenda is important so that more time can be spent discussing complex cases		Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	154	26	180
Colorectal	% Count	85.6% 102	14.4% 17	100.0% 119
Colorodal	%	85.7%	14.3%	100.0%
Lung	Count	100	26	126
	%	79.4%	20.6%	100.0%
Gynae	Count	94	9	103
-	%	91.3%	8.7%	100.0%
Head and Neck	Count	84	8	92
	%	91.3%	8.7%	100.0%
Upper GI	Count	87	22	109
	%	79.8%	20.2%	100.0%
Urological	Count	110	10	120
	%	91.7%	8.3%	100.0%
Haematological	Count	144	15	159
	%	90.6%	9.4%	100.0%
Skin	Count	69	4	73
Currenting and	%	94.5%	5.5%	100.0%
Supportive and Palliative Care	Count	36	5	41
	%	87.8%	12.2%	100.0%
Brain/CNS	Count	23	3	26
	%	88.5%	11.5%	100.0%
Sarcoma	Count	15	1	16
	%	93.8%	6.3%	100.0%
Children/Young People	Count	11	1	12
	%	91.7%	8.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1031	147	1178
	%	87.5%	12.5%	100.0%

Table: B68 Prioritisation of agenda is important so that more time can be spent discussing complex cases: by tumour type

Professional Group		Cases should be grouped on the agenda, e.g. new cases, follow-up, by complexity, by tumour type etc		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	729	210	939
	%	77.6%	22.4%	100.0%
Nurses	Count	360	102	462
	%	77.9%	22.1%	100.0%
AHPs	Count	59	8	67
	%	88.1%	11.9%	100.0%
MDT coordinators	Count	177	65	242
	%	73.1%	26.9%	100.0%
Other (admin/managerial)	Count	29	4	33
	%	87.9%	12.1%	100.0%
Total	Count	1354	389	1743
	%	77.7%	22.3%	100.0%

Table: B69 Cases should be grouped on the agenda, e.g. new cases, follow-up, by complexity, by tumour type etc: by professional group

		Cases should be grouped on the agenda, e.g. new cases, follow- up, by complexity, by tumour type etc		Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count %	207 72.9%	77 27.1%	284 100.0%
Radiologist	Count %	92 86.8%	14 13.2%	106 100.0%
Histo/cytopathologist	Count %	84 79.2%	22	106.0% 106 100.0%
Oncologist (clinical and medical)	Count	122	24	146
Haematologist	% Count	83.6% 63	16.4% 20	100.0% 83
Other Doctor (Physician, GP etc)	% Count	75.9% 112	24.1% 48	100.0% 160
,	%	70.0%	30.0%	100.0%
Palliative care specialist	Count %	49 90.7%	5 9.3%	54 100.0%
Clinical Nurse Specialist	Count %	339 78.5%	93 21.5%	432 100.0%
Nursing (other)	Count %	21 70.0%	9	30 100.0%
Allied Health Professional	Count	59	8	67
MDT coordinator	% Count %	88.1% 177 73.1%	11.9% 65 26.9%	100.0% 242 100.0%
Other (admin/clerical and managerial)	% Count	29	4	33
<u> </u>	%	87.9%	12.1%	100.0%
Total	Count %	1354 77.7%	389 22.3%	1743 100.0%

Table: B70 Cases should be grouped on the agenda, e.g. new cases, follow-up, by complexity, by tumour type etc: by discipline

			be grouped on the	
			agenda, e.g. new cases, follow-	
		up, by complexity, by tumour		
Tumour type		ty	pe etc	Total
rumour type				
		strongly	disagree/strongly	
		agree/agree	disagree	
Breast	Count	155	24	179
Diodot	%	86.6%	13.4%	100.0%
Colorectal	Count	81	36	117
	%	69.2%	30.8%	100.0%
Lung	Count	71	48	119
5	%	59.7%	40.3%	100.0%
Gynae	Count	63	33	96
,	%	65.6%	34.4%	100.0%
Head and Neck	Count	75	16	91
	%	82.4%	17.6%	100.0%
Upper GI	Count	76	29	105
	%	72.4%	27.6%	100.0%
Urological	Count	89	31	120
-	%	74.2%	25.8%	100.0%
Haematological	Count	108	42	150
	%	72.0%	28.0%	100.0%
Skin	Count	58	17	75
	%	77.3%	22.7%	100.0%
Supportive and	Count	29	4	33
Palliative Care		29	4	
	%	87.9%	12.1%	100.0%
Brain/CNS	Count	21	4	25
	%	84.0%	16.0%	100.0%
Sarcoma	Count	13	2	15
	%	86.7%	13.3%	100.0%
Children/Young People	Count	7	4	11
	%	63.6%	36.4%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	848	290	1138
	%	74.5%	25.5%	100.0%

Table: B71 Cases should be grouped on the agenda, e.g. new cases, follow-up, by complexity, by tumour type etc: by tumour type

Professional Group		A minimum da information radiology) sho for ea	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	920	70	990
	%	92.9%	7.1%	100.0%
Nurses	Count	457	18	475
	%	96.2%	3.8%	100.0%
AHPs	Count %	65	2	67
	70	97.0%	3.0%	100.0%
MDT coordinators	Count %	237	12	249
	%	95.2%	4.8%	100.0%
Other (admin/managerial)	Count %	33	2	35
		94.3%	5.7%	100.0%
Total	Count	1712	104	1816
	%	94.3%	5.7%	100.0%

Table: B72 A minimum dataset of diagnostic information (pathology and radiology) should be presented for each patient: by professional group

		A minimum da information radiology) sho for ea	Total	
Discipline				Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	272	20	292
	%	93.2%	6.8%	100.0%
Radiologist	Count	101	10	111
	%	91.0%	9.0%	100.0%
Histo/cytopathologist	Count	106	11	117
	%	90.6%	9.4%	100.0%
Oncologist (clinical and medical)	Count	148	10	158
	%	93.7%	6.3%	100.0%
Haematologist	Count	88	1	89
	%	98.9%	1.1%	100.0%
Other Doctor (Physician, GP etc)	Count	158	14	172
	%	91.9%	8.1%	100.0%
Palliative care specialist	Count	47	4	51
	%	92.2%	7.8%	100.0%
Clinical Nurse Specialist	Count	425	18	443
	%	95.9%	4.1%	100.0%
Nursing (other)	Count	32	0	32
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	65	2	67
	%	97.0%	3.0%	100.0%
MDT coordinator	Count	237	12	249
	%	95.2%	4.8%	100.0%
Other (admin/clerical and managerial)	Count	33	2	35
	%	94.3%	5.7%	100.0%
Total	Count	1712	104	1816
	%	94.3%	5.7%	100.0%

Table: B73 A minimum dataset of diagnostic information (pathology and radiology) should be presented for each patient: by discipline

		information radiology) sho	A minimum dataset of diagnostic information (pathology and radiology) should be presented for each patient		
Tumour type				Total	
		strongly agree/agree	disagree/strongly disagree		
Breast	Count	180	6	186	
	%	96.8%	3.2%	100.0%	
Colorectal	Count	111	6	117	
	%	94.9%	5.1%	100.0%	
Lung	Count	120	10	130	
	%	92.3%	7.7%	100.0%	
Gynae	Count	89	14	103	
	%	86.4%	13.6%	100.0%	
Head and Neck	Count	90	6	96	
	%	93.8%	6.3%	100.0%	
Upper GI	Count	106	6	112	
	%	94.6%	5.4%	100.0%	
Urological	Count	118	4	122	
	%	96.7%	3.3%	100.0%	
Haematological	Count	153	6	159	
	%	96.2%	3.8%	100.0%	
Skin	Count	79	3	82	
	%	96.3%	3.7%	100.0%	
Supportive and Palliative Care	Count	24	0	24	
	%	100.0%	.0%	100.0%	
Brain/CNS	Count	24	2	26	
	%	92.3%	7.7%	100.0%	
Sarcoma	Count	16	0	16	
	%	100.0%	.0%	100.0%	
Children/Young People	Count	11	0	11	
	%	100.0%	.0%	100.0%	
Endocrine	Count	2	0	2	
	%	100.0%	.0%	100.0%	
Total	Count	1123	63	1186	
	%	94.7%	5.3%	100.0%	

Table: B74 A minimum dataset of diagnostic information (pathology and radiology) should be presented for each patient: by tumour type

Professional Group		Standar documentatio when electror not a	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	905	52	957
	%	94.6%	5.4%	100.0%
Nurses	Count	453	8	461
	%	98.3%	1.7%	100.0%
AHPs	Count	64	1	65
	%	98.5%	1.5%	100.0%
MDT coordinators	Count	241	4	245
	%	98.4%	1.6%	100.0%
Other (admin/managerial)	Count	34	1	35
	%	97.1%	2.9%	100.0%
Total	Count	1697	66	1763
	%	96.3%	3.7%	100.0%

Table: B75 Standard pro-forma documentation should be used when electronic databases are not available: by professional group

		documentatic when electron	Standard pro-forma documentation should be used when electronic databases are not available		
Discipline	Discipline			Total	
		strongly agree/agree	disagree/strongly disagree		
Surgeon	Count	268	14	282	
	%	95.0%	5.0%	100.0%	
Radiologist	Count	99	4	103	
	%	96.1%	3.9%	100.0%	
Histo/cytopathologist	Count	90	13	103	
	%	87.4%	12.6%	100.0%	
Oncologist (clinical and medical)	Count	149	5	154	
	%	96.8%	3.2%	100.0%	
Haematologist	Count	87	2	89	
	%	97.8%	2.2%	100.0%	
Other Doctor (Physician, GP etc)	Count	156	12	168	
	%	92.9%	7.1%	100.0%	
Palliative care specialist	Count	56	2	58	
	%	96.6%	3.4%	100.0%	
Clinical Nurse Specialist	Count	423	8	431	
	%	98.1%	1.9%	100.0%	
Nursing (other)	Count	30	0	30	
	%	100.0%	.0%	100.0%	
Allied Health Professional	Count	64	1	65	
	%	98.5%	1.5%	100.0%	
MDT coordinator	Count	241	4	245	
	%	98.4%	1.6%	100.0%	
Other (admin/clerical and managerial)	Count	34	1	35	
	%	97.1%	2.9%	100.0%	
Total	Count	1697	66	1763	
	%	96.3%	3.7%	100.0%	

Table: B76 Standard pro-forma documentation should be used when electronic databases are not available: by discipline

		documentation when electron	Standard pro-forma documentation should be used when electronic databases are not available			
Tumour type				Total		
		strongly agree/agree	disagree/strongly disagree			
Breast	Count	177	4	181		
	%	97.8%	2.2%	100.0%		
Colorectal	Count	106	4	110		
	%	96.4%	3.6%	100.0%		
Lung	Count	117	5	122		
	%	95.9%	4.1%	100.0%		
Gynae	Count	95	4	99		
	%	96.0%	4.0%	100.0%		
Head and Neck	Count	86	2	88		
	%	97.7%	2.3%	100.0%		
Upper GI	Count	102	5	107		
	%	95.3%	4.7%	100.0%		
Urological	Count	117	3	120		
	%	97.5%	2.5%	100.0%		
Haematological	Count	152	3	155		
	%	98.1%	1.9%	100.0%		
Skin	Count	78	2	80		
	%	97.5%	2.5%	100.0%		
Supportive and Palliative Care	Count	35	1	36		
	%	97.2%	2.8%	100.0%		
Brain/CNS	Count	24	1	25		
	%	96.0%	4.0%	100.0%		
Sarcoma	Count	13	0	13		
	%	100.0%	.0%	100.0%		
Children/Young People	Count	12	0	12		
	%	100.0%	.0%	100.0%		
Endocrine	Count	2	0	2		
	%	100.0%	.0%	100.0%		
Total	Count	1116	34	1150		
	%	97.0%	3.0%	100.0%		

Table: B77 Standard pro-forma documentation should be used when electronic databases are not available: by tumour type

Professional group		The relations Chair and the is key to ensu runs e	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	868	87	955
	%	90.9%	9.1%	100.0%
Nurses	Count	437	34	471
	%	92.8%	7.2%	100.0%
AHPs	Count	66	2	68
	%	97.1%	2.9%	100.0%
MDT coordinators	Count	248	6	254
	%	97.6%	2.4%	100.0%
Other (admin/managerial)	Count	34	3	37
	%	91.9%	8.1%	100.0%
Total	Count	1653	132	1785
	%	92.6%	7.4%	100.0%

Table: B78The relationship between the Chair and the MDT coordinator is key to ensuring the meeting runs effectively: by professional group

		Chair and the MDT key to ensuring the	The relationship between the Chair and the MDT coordinator is key to ensuring the meeting runs effectively		
Discipline		enectiv	eiy	Total	
		strongly agree/agree	disagree/stro ngly disagree		
Surgeon	Count	252	30	282	
	%	89.4%	10.6%	100.0%	
Radiologist	Count	97	9	106	
	%	91.5%	8.5%	100.0%	
Histo/cytopathologist	Count	94	15	109	
	%	86.2%	13.8%	100.0%	
Oncologist (clinical and medical)	Count	141	7	148	
	%	95.3%	4.7%	100.0%	
Haematologist	Count	82	8	90	
	%	91.1%	8.9%	100.0%	
Other Doctor (Physician, GP etc)	Count	147	18	165	
	%	89.1%	10.9%	100.0%	
Palliative care specialist	Count	55	0	55	
	%	100.0%	.0%	100.0%	
Clinical Nurse Specialist	Count	407	33	440	
	%	92.5%	7.5%	100.0%	
Nursing (other)	Count	30	1	31	
	%	96.8%	3.2%	100.0%	
Allied Health Professional	Count	66	2	68	
	%	97.1%	2.9%	100.0%	
MDT coordinator	Count	248	6	254	
	%	97.6%	2.4%	100.0%	
Other (admin/clerical and managerial)	Count	34	3	37	
	%	91.9%	8.1%	100.0%	
Total	Count	1653	132	1785	
	%	92.6%	7.4%	100.0%	

Table: B79 The relationship between the Chair and the MDT coordinator is key to ensuring the meeting runs effectively: by discipline

		Chair and the is key to ensu	The relationship between the Chair and the MDT coordinator is key to ensuring the meeting runs effectively		
Tumour type		strongly agree/agree	disagree/strongly disagree	Total	
Breast	Count	158	18	176	
	%	89.8%	10.2%	100.0%	
Colorectal	Count	103	15	118	
	%	87.3%	12.7%	100.0%	
Lung	Count	117	10	127	
	%	92.1%	7.9%	100.0%	
Gynae	Count	97	6	103	
	%	94.2%	5.8%	100.0%	
Head and Neck	Count	88	5	93	
	%	94.6%	5.4%	100.0%	
Upper GI	Count	98	13	111	
	%	88.3%	11.7%	100.0%	
Urological	Count	113	8	121	
	%	93.4%	6.6%	100.0%	
Haematological	Count	145	12	157	
	%	92.4%	7.6%	100.0%	
Skin	Count	72	5	77	
	%	93.5%	6.5%	100.0%	
Supportive and Palliative Care	Count	35	0	35	
	%	100.0%	.0%	100.0%	
Brain/CNS	Count	23	2	25	
	%	92.0%	8.0%	100.0%	
Sarcoma	Count	14	1	15	
	%	93.3%	6.7%	100.0%	
Children/Young People	Count	11	0	11	
	%	100.0%	.0%	100.0%	
Endocrine	Count	2	0	2	
	%	100.0%	.0%	100.0%	
Total	Count	1076	95	1171	
	%	91.9%	8.1%	100.0%	

Table: B80The relationship between the Chair and the MDT coordinator is key to ensuring the meeting runs effectively: by tumour type

B5.1: Maximum length of MDT meetings

Table: B81 What is the maximum length of time an MDT meeting should last?	Frequency	Percent
up to one hour	294	16
60-90 mins	660	36
90-120 mins	390	21
up to 3 hours	90	5
as long as is required to complete the reviews	415	22

		What is	the maxir	num length last?	of time an	MDT should	Total
Professional Group						as long as is required to	
		up to one hour	60-90 mins	90-120 mins	up to 3 hours	complete the reviews	
Doctors	Count	184	335	220	63	200	1002
	%	18.4%	33.4%	22.0%	6.3%	20.0%	100.0%
Nurses	Count	79	203	95	15	95	487
	%	16.2%	41.7%	19.5%	3.1%	19.5%	100.0%
AHPs	Count	13	27	14	2	15	71
	%	18.3%	38.0%	19.7%	2.8%	21.1%	100.0%
MDT coordinators	Count	13	78	55	8	99	253
	%	5.1%	30.8%	21.7%	3.2%	39.1%	100.0%
Other (admin/managerial)	Count	5	17	6	2	6	36
	%	13.9%	47.2%	16.7%	5.6%	16.7%	100.0%
Total	Count	294	660	390	90	415	1849
	%	15.9%	35.7%	21.1%	4.9%	22.4%	100.0%

Table: B82 What is the maximum length of time an MDT meeting should last: by professional group

		What is	the maxim	um length o last?	f time an M	DT should	Total
Discipline						as long as is required to	
		up to one hour	60-90 mins	90-120 mins	up to 3 hours	complete the reviews	
Surgeon	Count	43	68	63	27	86	287
	%	15.0%	23.7%	22.0%	9.4%	30.0%	100.0%
Radiologist	Count	20	41	36	2	16	115
	%	17.4%	35.7%	31.3%	1.7%	13.9%	100.0%
Histo/cytopathologist	Count	23	37	21	7	29	117
	%	19.7%	31.6%	17.9%	6.0%	24.8%	100.0%
Oncologist (clinical and medical)	Count	23	65	33	11	25	157
	%	14.6%	41.4%	21.0%	7.0%	15.9%	100.0%
Haematologist	Count	12	27	30	8	13	90
	%	13.3%	30.0%	33.3%	8.9%	14.4%	100.0%
Other Doctor (Physician, GP etc)	Count	53	66	26	6	24	175
	%	30.3%	37.7%	14.9%	3.4%	13.7%	100.0%
Palliative care specialist	Count	10	31	11	2	7	61
	%	16.4%	50.8%	18.0%	3.3%	11.5%	100.0%
Clinical Nurse Specialist	Count	73	187	91	15	89	455
	%	16.0%	41.1%	20.0%	3.3%	19.6%	100.0%
Nursing (other)	Count	6	16	4	0	6	32
	%	18.8%	50.0%	12.5%	.0%	18.8%	100.0%
Allied Health Professional	Count	13	27	14	2	15	71
	%	18.3%	38.0%	19.7%	2.8%	21.1%	100.0%
MDT coordinator	Count	13	78	55	8	99	253
	%	5.1%	30.8%	21.7%	3.2%	39.1%	100.0%
Other (admin/clerical and managerial)	Count	5	17	6	2	6	36
	%	13.9%	47.2%	16.7%	5.6%	16.7%	100.0%
Total	Count	294	660	390	90	415	1849
	%	15.9%	35.7%	21.1%	4.9%	22.4%	100.0%

Table: B83 What is the maximum length of time an MDT meeting should last: by discipline

		What is	the maxim	um length o last?	f time an MI	DT should	Total
Tumour type						as long as is required to	
		up to one hour	60-90 mins	90-120 mins	up to 3 hours	complete the reviews	
Breast	Count	19	67	46	13	40	185
	%	10.3%	36.2%	24.9%	7.0%	21.6%	100.0%
Colorectal	Count	26	36	21	2	35	120
	%	21.7%	30.0%	17.5%	1.7%	29.2%	100.0%
Lung	Count	22	62	20	4	25	133
	%	16.5%	46.6%	15.0%	3.0%	18.8%	100.0%
Gynae	Count	11	28	24	8	34	105
	%	10.5%	26.7%	22.9%	7.6%	32.4%	100.0%
Head and Neck	Count	11	39	12	2	25	89
	%	12.4%	43.8%	13.5%	2.2%	28.1%	100.0%
Upper GI	Count	26	32	22	6	27	113
	%	23.0%	28.3%	19.5%	5.3%	23.9%	100.0%
Urological	Count	9	28	43	9	34	123
	%	7.3%	22.8%	35.0%	7.3%	27.6%	100.0%
Haematological	Count	18	53	50	14	25	160
	%	11.3%	33.1%	31.3%	8.8%	15.6%	100.0%
Skin	Count	24	30	9	2	17	82
	%	29.3%	36.6%	11.0%	2.4%	20.7%	100.0%
Supportive and Palliative Care	Count	3	20	11	1	4	39
	%	7.7%	51.3%	28.2%	2.6%	10.3%	100.0%
Brain/CNS	Count	4	7	7	1	8	27
	%	14.8%	25.9%	25.9%	3.7%	29.6%	100.0%
Sarcoma	Count	2	2	7	0	5	16
	%	12.5%	12.5%	43.8%	.0%	31.3%	100.0%
Children/Young People	Count	2	8	2	0	0	12
	%	16.7%	66.7%	16.7%	.0%	.0%	100.0%
Endocrine	Count	1	1	0	0	0	2
	%	50.0%	50.0%	.0%	.0%	.0%	100.0%
Total	Count	178	413	274	62	279	1206
	%	14.8%	34.2%	22.7%	5.1%	23.1%	100.0%

Table: B84 What is the maximum length of time an MDT meeting should last? By tumour type

B5.2: Optimum number of cases discussed in each meeting

Table: B85 What is the optimum number of cases your MDT candiscuss during the course of a single meeting?	Frequency	Percent
up to 15	623	36
16-25	646	37
26-35	298	17
36-45	103	6
more than 45	71	4

Table: B86 What is the optimum number of cases your MDT can discuss during the course of a single meeting: by professional group

			s your MDT a single				
Professional Group		-		meeting	?	I	Total
		up to				more than	
	-	15	16-25	26-35	36-45	45	-
Doctors	Count	376	357	143	47	30	953
	%	39.5%	37.5%	15.0%	4.9%	3.1%	100.0%
Nurses	Count %	147	171	86	25	23	452
	%	32.5%	37.8%	19.0%	5.5%	5.1%	100.0%
AHPs	Count	33	22	5	1	0	61
	%	54.1%	36.1%	8.2%	1.6%	.0%	100.0%
MDT coordinators	Count %	54	87	56	28	18	243
	70	22.2%	35.8%	23.0%	11.5%	7.4%	100.0%
Other (admin/managerial)	Count	13	9	8	2	0	32
	%	40.6%	28.1%	25.0%	6.3%	.0%	100.0%
Total	Count	623	646	298	103	71	1741
	%	35.8%	37.1%	17.1%	5.9%	4.1%	100.0%

Discipline						your MDT le meeting?	Total
Discipline		up to 15	16-25	26-35	36-45	more than 45	
Surgeon	Count	95	90	49	24	11	269
	%	35.3%	33.5%	18.2%	8.9%	4.1%	100.0%
Radiologist	Count	35	52	18	4	4	113
	%	31.0%	46.0%	15.9%	3.5%	3.5%	100.0%
Histo/cytopathologist	Count	42	39	19	5	6	111
	%	37.8%	35.1%	17.1%	4.5%	5.4%	100.0%
Oncologist (clinical and medical)	Count	39	73	27	6	6	151
	%	25.8%	48.3%	17.9%	4.0%	4.0%	100.0%
Haematologist	Count	46	31	7	2	0	86
	%	53.5%	36.0%	8.1%	2.3%	.0%	100.0%
Other Doctor (Physician, GP etc)	Count	92	50	16	3	3	164
	%	56.1%	30.5%	9.8%	1.8%	1.8%	100.0%
Palliative care specialist	Count	27	22	7	3	0	59
	%	45.8%	37.3%	11.9%	5.1%	.0%	100.0%
Clinical Nurse Specialist	Count	136	161	83	23	23	426
	%	31.9%	37.8%	19.5%	5.4%	5.4%	100.0%
Nursing (other)	Count	11	10	3	2	0	26
	%	42.3%	38.5%	11.5%	7.7%	.0%	100.0%
Allied Health Professional	Count	33	22	5	1	0	61
	%	54.1%	36.1%	8.2%	1.6%	.0%	100.0%
MDT coordinator	Count	54	87	56	28	18	243
	%	22.2%	35.8%	23.0%	11.5%	7.4%	100.0%
Other (admin/clerical and managerial)	Count	13	9	8	2	0	32
	%	40.6%	28.1%	25.0%	6.3%	.0%	100.0%
Total	Count	623	646	298	103	71	1741
	%	35.8%	37.1%	17.1%	5.9%	4.1%	100.0%

Table: B87 What is the optimum number of cases your MDT can discuss during the course of a single meeting: b discipline

_				uring the c	ourse of a	s your MDT a single	
Tumour type	up to		meeting	?	more than	Total	
		15	16-25	26-35	36-45		
Breast	Count	15	74	56	21	13	179
	%	8.4%	41.3%	31.3%	11.7%	7.3%	100.0%
Colorectal	Count	39	54	12	9	4	118
	%	33.1%	45.8%	10.2%	7.6%	3.4%	100.0%
Lung	Count	64	43	16	1	4	128
	%	50.0%	33.6%	12.5%	.8%	3.1%	100.0%
Gynae	Count	43	28	11	11	1	94
	%	45.7%	29.8%	11.7%	11.7%	1.1%	100.0%
Head and Neck	Count	49	32	6	0	0	87
	%	56.3%	36.8%	6.9%	.0%	.0%	100.0%
Upper GI	Count	45	29	17	8	7	106
	%	42.5%	27.4%	16.0%	7.5%	6.6%	100.0%
Urological	Count	21	38	28	15	12	114
	%	18.4%	33.3%	24.6%	13.2%	10.5%	100.0%
Haematological	Count	69	55	20	5	1	150
	%	46.0%	36.7%	13.3%	3.3%	.7%	100.0%
Skin	Count	33	22	20	1	2	78
	%	42.3%	28.2%	25.6%	1.3%	2.6%	100.0%
Supportive and Palliative Care	Count	19	12	6	1	1	39
	%	48.7%	30.8%	15.4%	2.6%	2.6%	100.0%
Brain/CNS	Count	7	10	3	1	2	23
	%	30.4%	43.5%	13.0%	4.3%	8.7%	100.0%
Sarcoma	Count	2	5	6	1	1	15
	%	13.3%	33.3%	40.0%	6.7%	6.7%	100.0%
Children/Young People	Count	7	2	2	0	0	11
	%	63.6%	18.2%	18.2%	.0%	.0%	100.0%
Endocrine	Count	2	0	0	0	0	2
	%	100.0%	.0%	.0%	.0%	.0%	100.0%
Total	Count	415	404	203	74	48	1144
	%	36.3%	35.3%	17.7%	6.5%	4.2%	100.0%

Table: B88 What is the optimum number of cases your MDT can discuss during thecourse of a single meeting: by tumour type

Clinical decision-making

B6: Case management and clinical decision-making

Table: B89 Team members perceptions about case management and clinical decision-making	missir	adjusting for ng data)
	Strongly	Disagree/
	agree/	Strongly
MDTs should consider all aliginally appropriate treatment	Agree 1689 (99)	disagree 25 (2)
MDTs should consider all clinically appropriate treatment options even if they cannot offer/provide them locally	1009 (99)	25 (2)
A patient's suitability for trials should always be considered	1635 (98)	35 (2)
Standard treatment protocols for patients should be used	1571 (94)	98 (6)
whenever possible	1071 (04)	30 (0)
Formal protocols are needed to manage referral of patient	1523 (92)	142 (9)
cases between MDTs	~ /	ζ,
A clinician should be able to bring the case of a private patient	1394 (87)	216 (13)
to the MDT for discussion at the meeting		
All patients with recurrence/progressive disease should be	1391 (83)	291 (17)
discussed by an MDT		
Oncologists should not make treatment decisions on patients	975 (62)	598 (38)
with recurrence/progressive disease without MDT support	4007 (00)	00 (0)
Care plans should be communicated to other health	1667 (99)	26 (2)
professionals in the treatment pathway within a locally agreed timeframe		
MDTs should always be notified if their treatment	1475 (90)	167 (10)
recommendations are not adopted	1473 (30)	107 (10)
Requests for tests and treatments should be booked during the	1103 (68)	531 (33)
MDT		
The MDT as a whole has a role in tracking patients through the	1318 (81)	318 (19)
care pathway	× ,	· · ·
The MDT coordinator should be solely responsible for tracking	667 (42)	935 (58)
patients through the care pathway		
Specialist palliative care attendance is not needed if there are	1253 (75)	420 (25)
agreed mechanisms for the MDT to access/contact the		
specialist palliative care team for advice when needed	==== (12)	
Specialist palliative care representation is essential at every MDT meeting	702 (43)	923 (57)
In principle, GPs should be involved in MDT discussions about	836 (54)	709 (46)
their patients		
It is practical for GPs to be involved in MDT discussions about	181 (12)	1368 (88)
their patients		

Professional group		MDTs sho clinically app options eve offer/provid	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	942	14	956
	%	98.5%	1.5%	100.0%
Nurses	Count	443	3	446
	%	99.3%	.7%	100.0%
AHPs	Count	55	3	58
	%	94.8%	5.2%	100.0%
MDT coordinators	Count	218	4	222
	%	98.2%	1.8%	100.0%
Other (admin/managerial)	Count	31	1	32
	%	96.9%	3.1%	100.0%
Total	Count	1689	25	1714
	%	98.5%	1.5%	100.0%

Table: B90 MDTs should consider all clinically appropriate treatment options even if they cannot offer/provide them locally: by professional group

Professional Group		A patient's s should alway	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	917	27	944
	%	97.1%	2.9%	100.0%
Nurses	Count	433	3	436
	%	99.3%	.7%	100.0%
AHPs	Count	54	2	56
	%	96.4%	3.6%	100.0%
MDT coordinators	Count	203	3	206
	%	98.5%	1.5%	100.0%
Other (admin/managerial)	Count	28	0	28
	%	100.0%	.0%	100.0%
Total	Count	1635	35	1670
	%	97.9%	2.1%	100.0%

Table: B91 A patient's suitability for trials should always be considered: by professional group

Table: B92 Standard treatment protocols for patients should be used wheneverpossible: by professional group

Professional group		Standard trea patients s whene	Total	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	878	61	939
	%	93.5%	6.5%	100.0%
Nurses	Count	411	20	431
	%	95.4%	4.6%	100.0%
AHPs	Count	56	4	60
	%	93.3%	6.7%	100.0%
MDT coordinators	Count	197	12	209
	%	94.3%	5.7%	100.0%
Other (admin/managerial)	Count	29	1	30
	%	96.7%	3.3%	100.0%
Total	Count	1571	98	1669
	%	94.1%	5.9%	100.0%

		Formal protoc manage re cases be	Total	
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	797	116	913
	%	87.3%	12.7%	100.0%
Nurses	Count	423	13	436
	%	97.0%	3.0%	100.0%
AHPs	Count	55	2	57
	%	96.5%	3.5%	100.0%
MDT coordinators	Count	221	7	228
	%	96.9%	3.1%	100.0%
Other (admin/managerial)	Count	27	4	31
	%	87.1%	12.9%	100.0%
Total	Count	1523	142	1665
	%	91.5%	8.5%	100.0%

Table: B93 Formal protocols are needed to manage referral of patient cases between MDTs: by professional group

		manage referr	Formal protocols are needed to manage referral of patient cases between MDTs		
Discipline		strongly agree/agree	disagree/strongly disagree		
Surgeon	Count	231	39	270	
	%	85.6%	14.4%	100.0%	
Radiologist	Count	96	9	105	
	%	91.4%	8.6%	100.0%	
Histo/cytopathologist	Count	96	6	102	
	%	94.1%	5.9%	100.0%	
Oncologist (clinical and medical)	Count	125	19	144	
	%	86.8%	13.2%	100.0%	
Haematologist	Count	64	17	81	
	%	79.0%	21.0%	100.0%	
Other Doctor (Physician, GP etc)	Count	135	25	160	
	%	84.4%	15.6%	100.0%	
Palliative care specialist	Count	50	1	51	
	%	98.0%	2.0%	100.0%	
Clinical Nurse Specialist	Count	397	12	409	
	%	97.1%	2.9%	100.0%	
Nursing (other)	Count	26	1	27	
	%	96.3%	3.7%	100.0%	
Allied Health Professional	Count	55	2	57	
	%	96.5%	3.5%	100.0%	
MDT coordinator	Count	221	7	228	
	%	96.9%	3.1%	100.0%	
Other (admin/clerical and managerial)	Count	27	4	31	
	%	87.1%	12.9%	100.0%	
Total	Count	1523	142	1665	
	%	91.5%	8.5%	100.0%	

Table: B94 Formal protocols are needed to manage referral of patient cases between MDTs: by discipline

T		manage referr	ols are needed to al of patient cases een MDTs	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	155	14	169
	%	91.7%	8.3%	100.0%
Colorectal	Count	96	11	107
	%	89.7%	10.3%	100.0%
Lung	Count	109	11	120
	%	90.8%	9.2%	100.0%
Gynae	Count	93	7	100
	%	93.0%	7.0%	100.0%
Head and Neck	Count	78	4	82
	%	95.1%	4.9%	100.0%
Upper GI	Count	95	9	104
	%	91.3%	8.7%	100.0%
Urological	Count	104	10	114
	%	91.2%	8.8%	100.0%
Haematological	Count	121	24	145
	%	83.4%	16.6%	100.0%
Skin	Count	66	8	74
	%	89.2%	10.8%	100.0%
Supportive and Palliative Care	Count	27	1	28
	%	96.4%	3.6%	100.0%
Brain/CNS	Count	24	1	25
	%	96.0%	4.0%	100.0%
Sarcoma	Count	13	0	13
	%	100.0%	.0%	100.0%
Children/Young People	Count	10	0	10
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	993	100	1093
	%	90.9%	9.1%	100.0%

Table: B95 Formal protocols are needed to manage referral of patient cases between MDTs: by tumour type

Professional group		A clinician should be able to bring the case of a private patient to the MDT for discussion at the meeting		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	834	76	910
	%	91.6%	8.4%	100.0%
Nurses	Count	360	63	423
	%	85.1%	14.9%	100.0%
AHPs	Count	38	7	45
	%	84.4%	15.6%	100.0%
MDT coordinators	Count	143	66	209
	%	68.4%	31.6%	100.0%
Other (admin/managerial)	Count	19	4	23
	%	82.6%	17.4%	100.0%
Total	Count	1394	216	1610
	%	86.6%	13.4%	100.0%

Table: B96 A clinician should be able to bring the case of a private patient to the MDT for discussion at the meeting: by professional group

Discipline		A clinical should be able to bring the case of a private patient to the MDT for discussion at the		
		meeting		Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	267	8	275
	%	97.1%	2.9%	100.0%
Radiologist	Count	99	6	105
	%	94.3%	5.7%	100.0%
Histo/cytopathologist	Count	92	11	103
	%	89.3%	10.7%	100.0%
Oncologist (clinical and medical)	Count	133	14	147
	%	90.5%	9.5%	100.0%
Haematologist	Count	63	12	75
	%	84.0%	16.0%	100.0%
Other Doctor (Physician, GP etc)	Count	139	18	157
	%	88.5%	11.5%	100.0%
Palliative care specialist	Count	41	7	48
	%	85.4%	14.6%	100.0%
Clinical Nurse Specialist	Count	336	60	396
	%	84.8%	15.2%	100.0%
Nursing (other)	Count	24	3	27
	%	88.9%	11.1%	100.0%
Allied Health Professional	Count	38	7	45
	%	84.4%	15.6%	100.0%
MDT coordinator	Count	143	66	209
	%	68.4%	31.6%	100.0%
Other (admin/clerical and managerial)	Count	19	4	23
C ,	%	82.6%	17.4%	100.0%
Total	Count	1394	216	1610
	%	86.6%	13.4%	100.0%

Table: B97 A clinician should be able to bring the case of a private patient to the MDT for discussion at the meeting: by discipline

Tumour type		the case of a the MDT for	ld be able to bring private patient to discussion at the eeting	Total
rumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	152	16	168
	%	90.5%	9.5%	100.0%
Colorectal	Count	99	9	108
	%	91.7%	8.3%	100.0%
Lung	Count	99	21	120
	%	82.5%	17.5%	100.0%
Gynae	Count	85	10	95
	%	89.5%	10.5%	100.0%
Head and Neck	Count	74	8	82
	%	90.2%	9.8%	100.0%
Upper GI	Count	88	10	98
	%	89.8%	10.2%	100.0%
Urological	Count	89	23	112
	%	79.5%	20.5%	100.0%
Haematological	Count	105	26	131
	%	80.2%	19.8%	100.0%
Skin	Count	64	10	74
	%	86.5%	13.5%	100.0%
Supportive and Palliative Care	Count	16	3	19
	%	84.2%	15.8%	100.0%
Brain/CNS	Count	20	4	24
	%	83.3%	16.7%	100.0%
Sarcoma	Count	9	3	12
	%	75.0%	25.0%	100.0%
Children/Young People	Count	6	1	7
	%	85.7%	14.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	908	144	1052
	%	86.3%	13.7%	100.0%

Table: B98 A clinician should be able to bring the case of a private patient to the MDT for discussion at the meeting: by tumour type

Professional group		recurrence/pr	tients with ogressive disease cussed by an MDT	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	700	237	937
	%	74.7%	25.3%	100.0%
Nurses	Count	406	33	439
	%	92.5%	7.5%	100.0%
AHPs	Count	57	2	59
	%	96.6%	3.4%	100.0%
MDT coordinators	Count	200	16	216
	%	92.6%	7.4%	100.0%
Other (admin/managerial)	Count	28	3	31
	%	90.3%	9.7%	100.0%
Total	Count	1391	291	1682
	%	82.7%	17.3%	100.0%

Table: B99 All patients with recurrence/progressive disease should be discussed by an MDT: by professional group

Dissipling	Discipline -		tients with ogressive disease cussed by an MDT	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	236	37	273
	%	86.4%	13.6%	100.0%
Radiologist	Count	87	22	109
	%	79.8%	20.2%	100.0%
Histo/cytopathologist	Count	83	17	100
	%	83.0%	17.0%	100.0%
Oncologist (clinical and medical)	Count	49	100	149
	%	32.9%	67.1%	100.0%
Haematologist	Count	63	23	86
	%	73.3%	26.7%	100.0%
Other Doctor (Physician, GP etc)	Count	130	32	162
	%	80.2%	19.8%	100.0%
Palliative care specialist	Count	52	6	58
	%	89.7%	10.3%	100.0%
Clinical Nurse Specialist	Count	380	32	412
	%	92.2%	7.8%	100.0%
Nursing (other)	Count	26	1	27
	%	96.3%	3.7%	100.0%
Allied Health Professional	Count	57	2	59
	%	96.6%	3.4%	100.0%
MDT coordinator	Count	200	16	216
	%	92.6%	7.4%	100.0%
Other (admin/clerical and managerial)	Count	28	3	31
	%	90.3%	9.7%	100.0%
Total	Count	1391	291	1682
	%	82.7%	17.3%	100.0%

Table: B100 All patients with recurrence/progressive disease should be discussed by an MDT: by discipline

Tumour type		recurrence/pr	tients with ogressive disease cussed by an MDT	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	159	14	173
	%	91.9%	8.1%	100.0%
Colorectal	Count	103	7	110
	%	93.6%	6.4%	100.0%
Lung	Count	80	39	119
	%	67.2%	32.8%	100.0%
Gynae	Count	85	13	98
	%	86.7%	13.3%	100.0%
Head and Neck	Count	86	2	88
	%	97.7%	2.3%	100.0%
Upper GI	Count	88	15	103
	%	85.4%	14.6%	100.0%
Urological	Count	89	24	113
	%	78.8%	21.2%	100.0%
Haematological	Count	121	28	149
	%	81.2%	18.8%	100.0%
Skin	Count	71	3	74
	%	95.9%	4.1%	100.0%
Supportive and Palliative Care	Count	30	2	32
	%	93.8%	6.3%	100.0%
Brain/CNS	Count	21	3	24
	%	87.5%	12.5%	100.0%
Sarcoma	Count	13	1	14
	%	92.9%	7.1%	100.0%
Children/Young People	Count	11	0	11
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	959	151	1110
	%	86.4%	13.6%	100.0%

Table: B101 All patients with recurrence/progressive disease should be discussed by an MDT: by tumour type

		treatment dec with recurre	should not make isions on patients nce/progressive out MDT support	Total
Professional group				
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	476	423	899
	%	52.9%	47.1%	100.0%
Nurses	Count	299	115	414
	%	72.2%	27.8%	100.0%
AHPs	Count	44	11	55
	%	80.0%	20.0%	100.0%
MDT coordinators	Count	137	43	180
	%	76.1%	23.9%	100.0%
Other (admin/managerial)	Count	19	6	25
	%	76.0%	24.0%	100.0%
Total	Count	975	598	1573
	%	62.0%	38.0%	100.0%

Table: B102 Oncologists should not make treatment decisions on patients with recurrence/progressive disease without MDT support: by professional group

		Oncologists should not make treatment decisions on patients with recurrence/progressive disease without MDT support		Total
Discipline				Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	190	79	269
	%	70.6%	29.4%	100.0%
Radiologist	Count	56	46	102
	%	54.9%	45.1%	100.0%
Histo/cytopathologist	Count	58	35	93
	%	62.4%	37.6%	100.0%
Oncologist (clinical and medical)	Count	20	128	148
	%	13.5%	86.5%	100.0%
Haematologist	Count	44	38	82
	%	53.7%	46.3%	100.0%
Other Doctor (Physician, GP etc)	Count	78	77	155
	%	50.3%	49.7%	100.0%
Palliative care specialist	Count	30	20	50
	%	60.0%	40.0%	100.0%
Clinical Nurse Specialist	Count	279	109	388
	%	71.9%	28.1%	100.0%
Nursing (other)	Count	20	6	26
	%	76.9%	23.1%	100.0%
Allied Health Professional	Count	44	11	55
	%	80.0%	20.0%	100.0%
MDT coordinator	Count	137	43	180
	%	76.1%	23.9%	100.0%
Other (admin/clerical and managerial)	Count	19	6	25
	%	76.0%	24.0%	100.0%
Total	Count	975	598	1573
	%	62.0%	38.0%	100.0%

Table: B103 Oncologists should not make treatment decisions on patients with recurrence/progressive disease without MDT support: by discipline

		treatment dec with recurre	should not make isions on patients nce/progressive out MDT support	Total
Tumour type				Total
		strongly	disagree/strongly	
-	-	agree/agree	disagree	
Breast	Count	105	61	166
	%	63.3%	36.7%	100.0%
Colorectal	Count	81	23	104
	%	77.9%	22.1%	100.0%
Lung	Count	47	71	118
	%	39.8%	60.2%	100.0%
Gynae	Count	65	26	91
	%	71.4%	28.6%	100.0%
Head and Neck	Count	77	7	84
	%	91.7%	8.3%	100.0%
Upper GI	Count	68	26	94
	%	72.3%	27.7%	100.0%
Urological	Count	62	39	101
	%	61.4%	38.6%	100.0%
Haematological	Count	91	51	142
	%	64.1%	35.9%	100.0%
Skin	Count	36	27	63
	%	57.1%	42.9%	100.0%
Supportive and Palliative Care	Count	18	4	22
	%	81.8%	18.2%	100.0%
Brain/CNS	Count	17	4	21
	%	81.0%	19.0%	100.0%
Sarcoma	Count	8	2	10
	%	80.0%	20.0%	100.0%
Children/Young People	Count	11	0	11
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	688	341	1029
	%	66.9%	33.1%	100.0%

Table: B104 Oncologists should not make treatment decisions on patients with recurrence/progressive disease without MDT support: by tumour type

Professional Group		communicate professionals pathway withi	Care plans should be communicated to other health professionals in the treatment pathway within a locally agreed timeframe	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	917	18	935
	%	98.1%	1.9%	100.0%
Nurses	Count	442	3	445
	%	99.3%	.7%	100.0%
AHPs	Count	63	0	63
	%	100.0%	.0%	100.0%
MDT coordinators	Count	214	4	218
	%	98.2%	1.8%	100.0%
Other (admin/managerial)	Count	31	1	32
	%	96.9%	3.1%	100.0%
Total	Count	1667	26	1693
	%	98.5%	1.5%	100.0%

Table: B105 Care plans should be communicated to other health professionals in the treatment pathway within a locally agreed timeframe: by professional group

Table: B106 MDTs should always be notified if their treatment recommendations are not adopted: by professional group

Professional Group		MDTs should always be notified if their treatment recommendations are not adopted		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	775	130	905
	%	85.6%	14.4%	100.0%
Nurses	Count	402	26	428
	%	93.9%	6.1%	100.0%
AHPs	Count	61	0	61
	%	100.0%	.0%	100.0%
MDT coordinators	Count	209	9	218
	%	95.9%	4.1%	100.0%
Other (admin/managerial)	Count	28	2	30
	%	93.3%	6.7%	100.0%
Total	Count	1475	167	1642
	%	89.8%	10.2%	100.0%

		if their recommene	always be notified treatment dations are not	
Discipline		ad	lopted	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	236	28	264
	%	89.4%	10.6%	100.0%
Radiologist	Count	92	10	102
	%	90.2%	9.8%	100.0%
Histo/cytopathologist	Count	88	15	103
	%	85.4%	14.6%	100.0%
Oncologist (clinical and medical)	Count	104	38	142
	%	73.2%	26.8%	100.0%
Haematologist	Count	66	14	80
	%	82.5%	17.5%	100.0%
Other Doctor (Physician, GP etc)	Count	135	23	158
	%	85.4%	14.6%	100.0%
Palliative care specialist	Count	54	2	56
	%	96.4%	3.6%	100.0%
Clinical Nurse Specialist	Count	379	22	401
	%	94.5%	5.5%	100.0%
Nursing (other)	Count	23	4	27
	%	85.2%	14.8%	100.0%
Allied Health Professional	Count	61	0	61
	%	100.0%	.0%	100.0%
MDT coordinator	Count	209	9	218
	%	95.9%	4.1%	100.0%
Other (admin/clerical and managerial)	Count	28	2	30
	%	93.3%	6.7%	100.0%
Total	Count	1475	167	1642
	%	89.8%	10.2%	100.0%

Table: B107 MDTs should always be notified if their treatment recommendations are not adopted: by discipline

		if their recommene	always be notified treatment dations are not lopted	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	152	14	166
	%	91.6%	8.4%	100.0%
Colorectal	Count	97	8	105
	%	92.4%	7.6%	100.0%
Lung	Count	102	15	117
	%	87.2%	12.8%	100.0%
Gynae	Count	90	6	96
	%	93.8%	6.3%	100.0%
Head and Neck	Count	85	1	86
	%	98.8%	1.2%	100.0%
Upper GI	Count	95	7	102
	%	93.1%	6.9%	100.0%
Urological	Count	91	20	111
	%	82.0%	18.0%	100.0%
Haematological	Count	124	18	142
	%	87.3%	12.7%	100.0%
Skin	Count	66	7	73
	%	90.4%	9.6%	100.0%
Supportive and Palliative Care	Count	28	0	28
	%	100.0%	.0%	100.0%
Brain/CNS	Count	23	0	23
	%	100.0%	.0%	100.0%
Sarcoma	Count	14	0	14
	%	100.0%	.0%	100.0%
Children/Young People	Count	10	0	10
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	979	96	1075
	%	91.1%	8.9%	100.0%

Table: B108 MDTs should always be notified if their treatment recommendations are not adopted: by tumour type

		Requests	s for tests and	
		treatments s	hould be booked	
			g the MDT	Total
Professional group				
		strongly	disagree/strongly	
		agree/agree	disagree	
Doctors	Count	576	328	904
	%	63.7%	36.3%	100.0%
Nurses	Count	292	133	425
	%	68.7%	31.3%	100.0%
AHPs	Count	40	15	55
	%	72.7%	27.3%	100.0%
MDT coordinators	Count	174	46	220
	%	79.1%	20.9%	100.0%
Other	Count	21	0	20
(admin/managerial)		21	9	30
	%	70.0%	30.0%	100.0%
Total	Count	1103	531	1634
	%	67.5%	32.5%	100.0%

Table: B109 Requests for tests and treatments should be booked during the MDT: by professional group

Dissipling		Requests for tests and treatments should be booked during the MDT		Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	199	72	271
_	%	73.4%	26.6%	100.0%
Radiologist	Count	63	43	106
-	%	59.4%	40.6%	100.0%
Histo/cytopathologist	Count	62	38	100
	%	62.0%	38.0%	100.0%
Oncologist (clinical and medical)	Count	94	51	145
	%	64.8%	35.2%	100.0%
Haematologist	Count	26	55	81
-	%	32.1%	67.9%	100.0%
Other Doctor (Physician, GP etc)	Count	101	55	156
,	%	64.7%	35.3%	100.0%
Palliative care specialist	Count	31	14	45
·	%	68.9%	31.1%	100.0%
Clinical Nurse Specialist	Count	273	126	399
	%	68.4%	31.6%	100.0%
Nursing (other)	Count	19	7	26
	%	73.1%	26.9%	100.0%
Allied Health Professional	Count	40	15	55
	%	72.7%	27.3%	100.0%
MDT coordinator	Count	174	46	220
	%	79.1%	20.9%	100.0%
Other (admin/clerical and managerial)	Count	21	9	30
/	%	70.0%	30.0%	100.0%
Total	Count	1103	531	1634
	%	67.5%	32.5%	100.0%

Table: B110 Requests for tests and treatments should be booked during the MDT: by discipline

			for tests and	
		treatments s	hould be booked	
		during	the MDT	Total
Tumour type				
		strongly	disagree/strongly	
		agree/agree	disagree	
Breast	Count	113	56	169
	%	66.9%	33.1%	100.0%
Colorectal	Count	85	26	111
	%	76.6%	23.4%	100.0%
Lung	Count	82	37	119
-	%	68.9%	31.1%	100.0%
Gynae	Count	72	26	98
	%	73.5%	26.5%	100.0%
Head and Neck	Count	57	22	79
	%	72.2%	27.8%	100.0%
Upper GI	Count	82	22	104
	%	78.8%	21.2%	100.0%
Urological	Count	89	25	114
5	%	78.1%	21.9%	100.0%
Haematological	Count	46	96	142
5	%	32.4%	67.6%	100.0%
Skin	Count	37	34	71
	%	52.1%	47.9%	100.0%
Supportive and	Count			47
Palliative Care		6	11	17
	%	35.3%	64.7%	100.0%
Brain/CNS	Count	13	11	24
	%	54.2%	45.8%	100.0%
Sarcoma	Count	7	5	12
	%	58.3%	41.7%	100.0%
Children/Young People	Count	3	5	8
	%	37.5%	62.5%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	694	376	1070
	%	64.9%	35.1%	100.0%

Table: B111 Requests for tests and treatments should be booked during the MDT: by tumour type

		The MDT as a whole has a role in tracking patients through the care pathway		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	678	229	907
	%	74.8%	25.2%	100.0%
Nurses	Count	368	55	423
	%	87.0%	13.0%	100.0%
AHPs	Count	44	7	51
	%	86.3%	13.7%	100.0%
MDT coordinators	Count	204	20	224
	%	91.1%	8.9%	100.0%
Other (admin/managerial)	Count	24	7	31
	%	77.4%	22.6%	100.0%
Total	Count	1318	318	1636
	%	80.6%	19.4%	100.0%

Table: B112 The MDT as a whole has a role in tracking patients through the care pathway: by professional group

		in tracking pa	a whole has a role tients through the pathway	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	204	65	269
	%	75.8%	24.2%	100.0%
Radiologist	Count	80	18	98
	%	81.6%	18.4%	100.0%
Histo/cytopathologist	Count	71	24	95
	%	74.7%	25.3%	100.0%
Oncologist (clinical and medical)	Count	103	43	146
	%	70.5%	29.5%	100.0%
Haematologist	Count	52	31	83
	%	62.7%	37.3%	100.0%
Other Doctor (Physician, GP etc)	Count	124	38	162
	%	76.5%	23.5%	100.0%
Palliative care specialist	Count	44	10	54
	%	81.5%	18.5%	100.0%
Clinical Nurse Specialist	Count	350	49	399
	%	87.7%	12.3%	100.0%
Nursing (other)	Count	18	6	24
	%	75.0%	25.0%	100.0%
Allied Health Professional	Count	44	7	51
	%	86.3%	13.7%	100.0%
MDT coordinator	Count	204	20	224
	%	91.1%	8.9%	100.0%
Other (admin/clerical and managerial)	Count	24	7	31
<u> </u>	%	77.4%	22.6%	100.0%
Total	Count	1318	318	1636
	%	80.6%	19.4%	100.0%

Table: B113 The MDT as a whole has a role in tracking patients through the carepathway: by discipline

			a whole has a role	
Tumour type		in tracking patients through the care pathway		Total
rumour type		care	patriway	Total
		strongly	disagree/strongly	
		agree/agree	disagree	
Breast	Count	148	18	166
	%	89.2%	10.8%	100.0%
Colorectal	Count	88	21	109
	%	80.7%	19.3%	100.0%
Lung	Count	96	22	118
5	%	81.4%	18.6%	100.0%
Gynae	Count	78	18	96
	%	81.3%	18.8%	100.0%
Head and Neck	Count	69	13	82
	%	84.1%	15.9%	100.0%
Upper GI	Count	87	18	105
	%	82.9%	17.1%	100.0%
Urological	Count	85	31	116
	%	73.3%	26.7%	100.0%
Haematological	Count	104	39	143
-	%	72.7%	27.3%	100.0%
Skin	Count	58	17	75
	%	77.3%	22.7%	100.0%
Supportive and Palliative Care	Count	23	4	27
Pallative Care	%	85.2%	14.8%	100.0%
Brain/CNS	⁷⁶ Count	23	14.0%	24
Brain/CNS	%	23 95.8%	4.2%	100.0%
Sarcoma	⁷⁶ Count	95.6%	4.2%	100.0%
Sarcoma	%	91.7%	8.3%	100.0%
Children/Young People	76 Count	91.7%	0.3%	100.0%
Children/ roung People	%	9 81.8%	2 18.2%	100.0%
Endocrine	76 Count	2	0	2
LINGCHINE	%	100.0%	.0%	ے 100.0%
Total	Count	881	205	1086
Total	%	81.1%	18.9%	100.0%
	/0	01.1%	10.9%	100.0%

Table: B114 The MDT as a whole has a role in tracking patients through the care pathway: by tumour type

Professional group		The MDT coordinator should be solely responsible for tracking patients through the care pathway		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	368	509	877
	%	42.0%	58.0%	100.0%
Nurses	Count	169	253	422
	%	40.0%	60.0%	100.0%
AHPs	Count	22	26	48
	%	45.8%	54.2%	100.0%
MDT coordinators	Count	101	124	225
	%	44.9%	55.1%	100.0%
Other (admin/managerial)	Count	7	23	30
	%	23.3%	76.7%	100.0%
Total	Count	667	935	1602
	%	41.6%	58.4%	100.0%

Table: B115 The MDT coordinator should be solely responsible for tracking patients through the care pathway: by professional group

Discipline		The MDT coordinator should be solely responsible for tracking patients through the care pathway		Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	122	144	266
	%	45.9%	54.1%	100.0%
Radiologist	Count	35	60	95
	%	36.8%	63.2%	100.0%
Histo/cytopathologist	Count	34	51	85
	%	40.0%	60.0%	100.0%
Oncologist (clinical and medical)	Count	52	90	142
	%	36.6%	63.4%	100.0%
Haematologist	Count	29	52	81
	%	35.8%	64.2%	100.0%
Other Doctor (Physician, GP etc)	Count	79	81	160
	%	49.4%	50.6%	100.0%
Palliative care specialist	Count	17	31	48
	%	35.4%	64.6%	100.0%
Clinical Nurse Specialist	Count	159	238	397
	%	40.1%	59.9%	100.0%
Nursing (other)	Count	10	15	25
	%	40.0%	60.0%	100.0%
Allied Health Professional	Count	22	26	48
	%	45.8%	54.2%	100.0%
MDT coordinator	Count	101	124	225
	%	44.9%	55.1%	100.0%
Other (admin/clerical and managerial)	Count	7	23	30
	%	23.3%	76.7%	100.0%
Total	Count	667	935	1602
	%	41.6%	58.4%	100.0%

Table: B116 The MDT coordinator should be solely responsible for tracking patients through the care pathway: by discipline

Tumour type		solely respons	dinator should be sible for tracking 1 the care pathway	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	63	99	162
	%	38.9%	61.1%	100.0%
Colorectal	Count	34	72	106
	%	32.1%	67.9%	100.0%
Lung	Count	45	72	117
	%	38.5%	61.5%	100.0%
Gynae	Count	53	44	97
	%	54.6%	45.4%	100.0%
Head and Neck	Count	38	41	79
	%	48.1%	51.9%	100.0%
Upper GI	Count	40	60	100
	%	40.0%	60.0%	100.0%
Urological	Count	55	58	113
	%	48.7%	51.3%	100.0%
Haematological	Count	50	92	142
	%	35.2%	64.8%	100.0%
Skin	Count	41	33	74
	%	55.4%	44.6%	100.0%
Supportive and Palliative Care	Count	6	17	23
	%	26.1%	73.9%	100.0%
Brain/CNS	Count	10	11	21
	%	47.6%	52.4%	100.0%
Sarcoma	Count	5	6	11
	%	45.5%	54.5%	100.0%
Children/Young People	Count	2	6	8
	%	25.0%	75.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	444	611	1055
	%	42.1%	57.9%	100.0%

Table: B117 The MDT coordinator should be solely responsible for tracking patients through the care pathway: by tumour group

Table: B118 Specialist palliative care attendance is not needed if there are agreed mechanisms for the MDT to access/contact the specialist palliative care team for advice when needed: by professional group

Professional group		Specialist palliative care attendance is not needed if there are agreed mechanisms for the MDT to access/contact the specialist palliative care team for advice when needed		Total
i loicesional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	700	236	936
	%	74.8%	25.2%	100.0%
Nurses	Count	346	94	440
	%	78.6%	21.4%	100.0%
AHPs	Count	45	16	61
	%	73.8%	26.2%	100.0%
MDT coordinators	Count	139	65	204
	%	68.1%	31.9%	100.0%
Other (admin/managerial)	Count	23	9	32
、 、 、 、	%	71.9%	28.1%	100.0%
Total	Count	1253	420	1673
	%	74.9%	25.1%	100.0%

		Specialist palliative care attendance is not needed if there are agreed mechanisms for the MDT to access/contact the specialist palliative care team for advice when needed		Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	211	61	272
	%	77.6%	22.4%	100.0%
Radiologist	Count	83	23	106
	%	78.3%	21.7%	100.0%
Histo/cytopathologist	Count	76	26	102
	%	74.5%	25.5%	100.0%
Oncologist (clinical and medical)	Count	115	37	152
	%	75.7%	24.3%	100.0%
Haematologist	Count	80	5	85
	%	94.1%	5.9%	100.0%
Other Doctor (Physician, GP etc)	Count	103	58	161
	%	64.0%	36.0%	100.0%
Palliative care specialist	Count	32	26	58
	%	55.2%	44.8%	100.0%
Clinical Nurse Specialist	Count	325	86	411
	%	79.1%	20.9%	100.0%
Nursing (other)	Count	21	8	29
	%	72.4%	27.6%	100.0%
Allied Health Professional	Count	45	16	61
MDT acordinator	%	73.8%	26.2%	100.0%
MDT coordinator	Count %	139 68.1%	65 31.9%	204 100.0%
Other (admin/clerical and managerial)	70 Count	23	9	32
managenary	%	71.9%	28.1%	100.0%
Total	Count	1253	420	1673
	%	74.9%	25.1%	100.0%

Table: B119 Specialist palliative care attendance is not needed if there are agreed mechanisms for the MDT to access/contact the specialist palliative care team for advice when needed: by discipline

Tumour type		attendance there are agr for the MDT the speciali	Specialist palliative care attendance is not needed if there are agreed mechanisms for the MDT to access/contact the specialist palliative care team for advice when needed	
		strongly	disagree/strongly	
		agree/agree	disagree	474
Breast	Count	161	10	171
Colorectal	% Count	94.2% 74	5.8% 34	100.0% 108
Colorectai	%	68.5%	31.5%	100.0%
Lung	Count	69	53	100.078
Early	%	56.6%	43.4%	100.0%
Gynae	Count	81	17	98
_ ,	%	82.7%	17.3%	100.0%
Head and Neck	Count	59	26	85
	%	69.4%	30.6%	100.0%
Upper GI	Count	60	42	102
	%	58.8%	41.2%	100.0%
Urological	Count	95	16	111
	%	85.6%	14.4%	100.0%
Haematological	Count	132	17	149
	%	88.6%	11.4%	100.0%
Skin	Count	63	9	72
Our set is set at	%	87.5%	12.5%	100.0%
Supportive and Palliative Care	Count	22	13	35
T allative Gale	%	62.9%	37.1%	100.0%
Brain/CNS	Count	18	7	25
	%	72.0%	28.0%	100.0%
Sarcoma	Count	13	1	14
	%	92.9%	7.1%	100.0%
Children/Young People	Count	8	1	9
	%	88.9%	11.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	857	246	1103
	%	77.7%	22.3%	100.0%

Table: B120 Specialist palliative care attendance is not needed if there are agreed mechanisms for the MDT to access/contact the specialist palliative care team for advice when needed: by tumour type

		Specialist palliative care representation is essential at every MDT meeting		Total
Professional group		strongly agree/agree	disagree/strong ly disagree	
Doctors	Count	327	578	905
	%	36.1%	63.9%	100.0%
Nurses	Count	197	235	432
	%	45.6%	54.4%	100.0%
AHPs	Count	28	28	56
	%	50.0%	50.0%	100.0%
MDT coordinators	Count	133	68	201
	%	66.2%	33.8%	100.0%
Other (admin/managerial)	Count	17	14	31
	%	54.8%	45.2%	100.0%
Total	Count	702	923	1625
	%	43.2%	56.8%	100.0%

Table: B121 Specialist palliative care representation is essential at every MDT meeting:by professional group

2		Specialist palliative care representation is essential at every MDT meeting		Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	100	166	266
	%	37.6%	62.4%	100.0%
Radiologist	Count	40	66	106
	%	37.7%	62.3%	100.0%
Histo/cytopathologist	Count	35	61	96
	%	36.5%	63.5%	100.0%
Oncologist (clinical and medical)	Count	45	97	142
	%	31.7%	68.3%	100.0%
Haematologist	Count	11	75	86
	%	12.8%	87.2%	100.0%
Other Doctor (Physician, GP etc)	Count	68	84	152
	%	44.7%	55.3%	100.0%
Palliative care specialist	Count	28	29	57
	%	49.1%	50.9%	100.0%
Clinical Nurse Specialist	Count	186	222	408
	%	45.6%	54.4%	100.0%
Nursing (other)	Count	11	13	24
	%	45.8%	54.2%	100.0%
Allied Health Professional	Count	28	28	56
	%	50.0%	50.0%	100.0%
MDT coordinator	Count	133	68	201
	%	66.2%	33.8%	100.0%
Other (admin/clerical and managerial)	Count	17	14	31
2 .	%	54.8%	45.2%	100.0%
Total	Count	702	923	1625
	%	43.2%	56.8%	100.0%

Table: B122 Specialist palliative care representation is essential at every MDT meeting: by discipline

Turney for a		representatio	Specialist palliative care representation is essential at every MDT meeting	
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	33	129	162
	%	20.4%	79.6%	100.0%
Colorectal	Count	58	51	109
	%	53.2%	46.8%	100.0%
Lung	Count	81	37	118
	%	68.6%	31.4%	100.0%
Gynae	Count	41	50	91
	%	45.1%	54.9%	100.0%
Head and Neck	Count	52	30	82
	%	63.4%	36.6%	100.0%
Upper GI	Count	69	34	103
	%	67.0%	33.0%	100.0%
Urological	Count	33	76	109
	%	30.3%	69.7%	100.0%
Haematological	Count	30	116	146
	%	20.5%	79.5%	100.0%
Skin	Count	8	58	66
	%	12.1%	87.9%	100.0%
Supportive and Palliative Care	Count	19	12	31
	%	61.3%	38.7%	100.0%
Brain/CNS	Count	11	13	24
	%	45.8%	54.2%	100.0%
Sarcoma	Count	2	12	14
	%	14.3%	85.7%	100.0%
Children/Young People	Count	2	5	7
	%	28.6%	71.4%	100.0%
Endocrine	Count	0	2	2
	%	.0%	100.0%	100.0%
Total	Count	439	625	1064
	%	41.3%	58.7%	100.0%

Table: B123 Specialist palliative care representation is essential at every MDT meeting:by tumour type

			involved in M	GPs should be DT discussions eir patients	Total
Professional group			strongly agree/agree	disagree/strong ly disagree	
Docto	ors	Count	424	452	876
		%	48.4%	51.6%	100.0%
Nurse	es	Count	275	139	414
		%	66.4%	33.6%	100.0%
AHPs	3	Count	31	15	46
		%	67.4%	32.6%	100.0%
MDT	coordinators	Count	90	92	182
		%	49.5%	50.5%	100.0%
Other	(admin/managerial)	Count	16	11	27
		%	59.3%	40.7%	100.0%
Total		Count	836	709	1545
		%	54.1%	45.9%	100.0%

Table: B124 In principle, GPs should be involved in MDT discussions about their patients: by professional group

			involved in MI	GPs should be DT discussions eir patients	Total
Discipline			strongly agree/agree	disagree/stron gly disagree	
Surgeon		Count	118	138	256
		%	46.1%	53.9%	100.0%
Radiologist		Count	45	54	99
		%	45.5%	54.5%	100.0%
Histo/cytopat	hologist	Count	41	54	95
		%	43.2%	56.8%	100.0%
Oncologist (c medical)	linical and	Count	61	77	138
		%	44.2%	55.8%	100.0%
Haematologi	st	Count	26	50	76
		%	34.2%	65.8%	100.0%
Other Doctor GP etc)	(Physician,	Count	86	72	158
,		%	54.4%	45.6%	100.0%
Palliative car	e specialist	Count	47	7	54
		%	87.0%	13.0%	100.0%
Clinical Nurse	e Specialist	Count	257	133	390
		%	65.9%	34.1%	100.0%
Nursing (othe	er)	Count	18	6	24
		%	75.0%	25.0%	100.0%
Allied Health	Professional	Count	31	15	46
		%	67.4%	32.6%	100.0%
MDT coordin	ator	Count	90	92	182
		%	49.5%	50.5%	100.0%
Other (admin managerial)	/clerical and	Count	16	11	27
, , , , , , , , , , , , , , , , , , ,		%	59.3%	40.7%	100.0%
Total		Count	836	709	1545
		%	54.1%	45.9%	100.0%

Table: B125 In principle, GPs should be involved in MDT discussions about their patients: by discipline

T		involved in M	GPs should be /IDT discussions neir patients	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	56	101	157
	%	35.7%	64.3%	100.0%
Colorectal	Count	56	47	103
	%	54.4%	45.6%	100.0%
Lung	Count	65	48	113
	%	57.5%	42.5%	100.0%
Gynae	Count	55	33	88
	%	62.5%	37.5%	100.0%
Head and Neck	Count	44	30	74
	%	59.5%	40.5%	100.0%
Upper GI	Count	49	49	98
	%	50.0%	50.0%	100.0%
Urological	Count	58	43	101
	%	57.4%	42.6%	100.0%
Haematological	Count	50	82	132
	%	37.9%	62.1%	100.0%
Skin	Count	47	28	75
	%	62.7%	37.3%	100.0%
Supportive and Palliative Care	Count	28	3	31
	%	90.3%	9.7%	100.0%
Brain/CNS	Count	16	7	23
	%	69.6%	30.4%	100.0%
Sarcoma	Count	5	8	13
	%	38.5%	61.5%	100.0%
Children/Young People	Count	7	1	8
	%	87.5%	12.5%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	537	481	1018
	%	52.8%	47.2%	100.0%

Table: B126 In principle, GPs should be involved in MDT discussions about their patients: by tumour type

		It is practical for GPs to be involved in MDT discussions about their patients		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	62	830	892
	%	7.0%	93.0%	100.0%
Nurses	Count	72	318	390
	%	18.5%	81.5%	100.0%
AHPs	Count	3	50	53
	%	5.7%	94.3%	100.0%
MDT coordinators	Count	41	146	187
	%	21.9%	78.1%	100.0%
Other (admin/managerial)	Count	3	24	27
	%	11.1%	88.9%	100.0%
Total	Count	181	1368	1549
	%	11.7%	88.3%	100.0%

Table: B127 It is practical for GPs to be involved in MDT discussions about their patients: by professional group

		involved in N	al for GPs to be /IDT discussions neir patients	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	22	236	258
	%	8.5%	91.5%	100.0%
Radiologist	Count	4	98	102
	%	3.9%	96.1%	100.0%
Histo/cytopathologist	Count	10	85	95
	%	10.5%	89.5%	100.0%
Oncologist (clinical and medical)	Count	5	142	147
	%	3.4%	96.6%	100.0%
Haematologist	Count	2	79	81
	%	2.5%	97.5%	100.0%
Other Doctor (Physician, GP etc)	Count	15	142	157
	%	9.6%	90.4%	100.0%
Palliative care specialist	Count	4	48	52
	%	7.7%	92.3%	100.0%
Clinical Nurse Specialist	Count	65	302	367
	%	17.7%	82.3%	100.0%
Nursing (other)	Count	7	16	23
	%	30.4%	69.6%	100.0%
Allied Health Professional	Count	3	50	53
	%	5.7%	94.3%	100.0%
MDT coordinator	Count	41	146	187
	%	21.9%	78.1%	100.0%
Other (admin/clerical and managerial)	Count	3	24	27
	%	11.1%	88.9%	100.0%
Total	Count	181	1368	1549
	%	11.7%	88.3%	100.0%

Table: B128 It is practical for GPs to be involved in MDT discussions about their patients: by discipline

- .		involved in N	al for GPs to be /IDT discussions neir patients	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	12	148	160
	%	7.5%	92.5%	100.0%
Colorectal	Count	13	92	105
	%	12.4%	87.6%	100.0%
Lung	Count	13	98	111
	%	11.7%	88.3%	100.0%
Gynae	Count	10	79	89
	%	11.2%	88.8%	100.0%
Head and Neck	Count	7	70	77
	%	9.1%	90.9%	100.0%
Upper GI	Count	15	80	95
	%	15.8%	84.2%	100.0%
Urological	Count	15	83	98
	%	15.3%	84.7%	100.0%
Haematological	Count	10	127	137
	%	7.3%	92.7%	100.0%
Skin	Count	14	56	70
	%	20.0%	80.0%	100.0%
Supportive and Palliative Care	Count	6	24	30
	%	20.0%	80.0%	100.0%
Brain/CNS	Count	3	18	21
	%	14.3%	85.7%	100.0%
Sarcoma	Count	1	12	13
	%	7.7%	92.3%	100.0%
Children/Young People	Count	1	7	8
	%	12.5%	87.5%	100.0%
Endocrine	Count	0	2	2
	%	.0%	100.0%	100.0%
Total	Count	120	896	1016
	%	11.8%	88.2%	100.0%

Table: B129 It is practical for GPs to be involved in MDT discussions about their patients: by tumour type

B7: Team-working

Table: B130 Team members perceptions about team- working	missing data)	
	Strongly agree/ Agree	Disagree/ Strongly disagree
Being an MDT member is not solely confined to attendance at meetings	1572 (96)	66 (4)
A good MDT can save you time elsewhere in the period between meetings	1390 (88)	192 (12)
A team can be highly effective irrespective of personalities	1200 (74)	419 (26)
Professional support (i.e. from peers) for MDT working is important	1614 (99)	20 (1)
Professional support is readily available	1197 (77)	361 (23)
Organisational support (i.e. from employers) for MDT working is important	1608 (98)	41 (3)
Organisational support is readily available	941 (60)	631 (40)
No amount of training or learning experiences can improve team working if there are interpersonal problems	828 (53)	737 (47)

		Being an MDT member is not solely confined to attendance at meetings		Total
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	884	30	914
	%	96.7%	3.3%	100.0%
Nurses	Count	400	18	418
	%	95.7%	4.3%	100.0%
AHPs	Count	62	1	63
	%	98.4%	1.6%	100.0%
MDT coordinators	Count	198	16	214
	%	92.5%	7.5%	100.0%
Other (admin/managerial)	Count	28	1	29
	%	96.6%	3.4%	100.0%
Total	Count	1572	66	1638
	%	96.0%	4.0%	100.0%

Table: B131 Being an MDT member is not solely confined to attendance at meetings: by professional group

Table: B132 A good MDT can save you time elsewhere in the period between meetings: by professional group

		A good MDT can save you time elsewhere in the period between meetings		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	720	164	884
	%	81.4%	18.6%	100.0%
Nurses	Count	379	18	397
	%	95.5%	4.5%	100.0%
AHPs	Count	59	0	59
	%	100.0%	.0%	100.0%
MDT coordinators	Count	204	8	212
	%	96.2%	3.8%	100.0%
Other (admin/managerial)	Count	28	2	30
	%	93.3%	6.7%	100.0%
Total	Count	1390	192	1582
	%	87.9%	12.1%	100.0%

		elsewhere in t	can save you time he period between eetings	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	226	29	255
	%	88.6%	11.4%	100.0%
Radiologist	Count	76	22	98
	%	77.6%	22.4%	100.0%
Histo/cytopathologist	Count	70	32	102
	%	68.6%	31.4%	100.0%
Oncologist (clinical and medical)	Count	122	20	142
	%	85.9%	14.1%	100.0%
Haematologist	Count	50	28	78
	%	64.1%	35.9%	100.0%
Other Doctor (Physician, GP etc)	Count	126	29	155
	%	81.3%	18.7%	100.0%
Palliative care specialist	Count	50	4	54
	%	92.6%	7.4%	100.0%
Clinical Nurse Specialist	Count	354	18	372
	%	95.2%	4.8%	100.0%
Nursing (other)	Count	25	0	25
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	59	0	59
	%	100.0%	.0%	100.0%
MDT coordinator	Count	204	8	212
	%	96.2%	3.8%	100.0%
Other (admin/clerical and managerial)	Count	28	2	30
_ /	%	93.3%	6.7%	100.0%
Total	Count	1390	192	1582
	%	87.9%	12.1%	100.0%

Table: B133 A good MDT can save you time elsewhere in the period between meetings: by discipline

		A good MDT can save you time elsewhere in the period between meetings		Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	153	10	163
	%	93.9%	6.1%	100.0%
Colorectal	Count	90	12	102
	%	88.2%	11.8%	100.0%
Lung	Count	108	9	117
	%	92.3%	7.7%	100.0%
Gynae	Count	86	6	92
	%	93.5%	6.5%	100.0%
Head and Neck	Count	76	5	81
	%	93.8%	6.2%	100.0%
Upper GI	Count	87	9	96
	%	90.6%	9.4%	100.0%
Urological	Count	93	9	102
	%	91.2%	8.8%	100.0%
Haematological	Count	99	35	134
	%	73.9%	26.1%	100.0%
Skin	Count	51	13	64
	%	79.7%	20.3%	100.0%
Supportive and Palliative Care	Count	33	1	34
	%	97.1%	2.9%	100.0%
Brain/CNS	Count	21	2	23
	%	91.3%	8.7%	100.0%
Sarcoma	Count	12	2	14
	%	85.7%	14.3%	100.0%
Children/Young People	Count	9	1	10
	%	90.0%	10.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	920	114	1034
	%	89.0%	11.0%	100.0%

Table: B134 A good MDT can save you time elsewhere in the period between meetings:by tumour type

Professional Group		A team can be highly effective irrespective of personalities		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	590	308	898
	%	65.7%	34.3%	100.0%
Nurses	Count	347	69	416
	%	83.4%	16.6%	100.0%
AHPs	Count	53	8	61
	%	86.9%	13.1%	100.0%
MDT coordinators	Count	183	31	214
	%	85.5%	14.5%	100.0%
Other (admin/managerial)	Count	27	3	30
	%	90.0%	10.0%	100.0%
Total	Count	1200	419	1619
	%	74.1%	25.9%	100.0%

Table: B135 A team can be highly effective irrespective of personalities: by professional group

			e highly effective of personalities	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	175	84	259
	%	67.6%	32.4%	100.0%
Radiologist	Count	61	40	101
	%	60.4%	39.6%	100.0%
Histo/cytopathologist	Count	61	41	102
	%	59.8%	40.2%	100.0%
Oncologist (clinical and medical)	Count	95	48	143
	%	66.4%	33.6%	100.0%
Haematologist	Count	42	37	79
	%	53.2%	46.8%	100.0%
Other Doctor (Physician, GP etc)	Count	114	44	158
	%	72.2%	27.8%	100.0%
Palliative care specialist	Count	42	14	56
	%	75.0%	25.0%	100.0%
Clinical Nurse Specialist	Count	323	66	389
	%	83.0%	17.0%	100.0%
Nursing (other)	Count	24	3	27
	%	88.9%	11.1%	100.0%
Allied Health Professional	Count	53	8	61
	%	86.9%	13.1%	100.0%
MDT coordinator	Count	183	31	214
	%	85.5%	14.5%	100.0%
Other (admin/clerical and managerial)	Count	27	3	30
	%	90.0%	10.0%	100.0%
Total	Count	1200	419	1619
	%	74.1%	25.9%	100.0%

Table: B136 A team can be highly effective irrespective of personalities: by discipline

			e highly effective of personalities	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	121	43	164
	%	73.8%	26.2%	100.0%
Colorectal	Count	81	26	107
	%	75.7%	24.3%	100.0%
Lung	Count	90	25	115
	%	78.3%	21.7%	100.0%
Gynae	Count	74	23	97
	%	76.3%	23.7%	100.0%
Head and Neck	Count	62	19	81
	%	76.5%	23.5%	100.0%
Upper GI	Count	81	17	98
	%	82.7%	17.3%	100.0%
Urological	Count	81	25	106
	%	76.4%	23.6%	100.0%
Haematological	Count	88	49	137
	%	64.2%	35.8%	100.0%
Skin	Count	47	21	68
	%	69.1%	30.9%	100.0%
Supportive and Palliative Care	Count	32	4	36
	%	88.9%	11.1%	100.0%
Brain/CNS	Count	14	8	22
	%	63.6%	36.4%	100.0%
Sarcoma	Count	12	1	13
	%	92.3%	7.7%	100.0%
Children/Young People	Count	8	3	11
	%	72.7%	27.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	793	264	1057
	%	75.0%	25.0%	100.0%

Table: B137 A team can be highly effective irrespective of personalities: by tumour type

		Professional support (i.e. from peers) for MDT working is important		Total
Professional support		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	890	18	908
	%	98.0%	2.0%	100.0%
Nurses	Count	419	1	420
	%	99.8%	.2%	100.0%
AHPs	Count	62	0	62
	%	100.0%	.0%	100.0%
MDT coordinators	Count	212	1	213
	%	99.5%	.5%	100.0%
Other (admin/managerial)	Count	31	0	31
	%	100.0%	.0%	100.0%
Total	Count	1614	20	1634
	%	98.8%	1.2%	100.0%

Table: B138 Professional support (i.e. from peers) for MDT working is important: byprofessional group

Table: B139 Professional support is readily available: by professional group

Professional Group		Professional support is readily available		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	647	222	869
	%	74.5%	25.5%	100.0%
Nurses	Count	315	92	407
	%	77.4%	22.6%	100.0%
AHPs	Count	47	10	57
	%	82.5%	17.5%	100.0%
MDT coordinators	Count	166	33	199
	%	83.4%	16.6%	100.0%
Other (admin/managerial)	Count	22	4	26
	%	84.6%	15.4%	100.0%
Total	Count	1197	361	1558
	%	76.8%	23.2%	100.0%

Discipline			upport is readily ilable	Total
Dissipline		strongly agree/agree	disagree/strong ly disagree	
Surgeon	Count	194	58	252
	%	77.0%	23.0%	100.0%
Radiologist	Count	73	22	95
	%	76.8%	23.2%	100.0%
Histo/cytopathologist	Count	80	25	105
	%	76.2%	23.8%	100.0%
Oncologist (clinical and medical)	Count	91	44	135
	%	67.4%	32.6%	100.0%
Haematologist	Count	60	20	80
	%	75.0%	25.0%	100.0%
Other Doctor (Physician, GP etc)	Count	106	44	150
	%	70.7%	29.3%	100.0%
Palliative care specialist	Count	43	9	52
	%	82.7%	17.3%	100.0%
Clinical Nurse Specialist	Count	296	85	381
	%	77.7%	22.3%	100.0%
Nursing (other)	Count	19	7	26
	%	73.1%	26.9%	100.0%
Allied Health Professional	Count	47	10	57
	%	82.5%	17.5%	100.0%
MDT coordinator	Count	166	33	199
	%	83.4%	16.6%	100.0%
Other (admin/clerical and managerial)	Count	22	4	26
	%	84.6%	15.4%	100.0%
Total	Count	1197	361	1558
	%	76.8%	23.2%	100.0%

Table: B140 Professional support is readily available: by discipline

Tumour type		Professional av	support is readily ailable	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	127	32	159
	%	79.9%	20.1%	100.0%
Colorectal	Count	88	19	107
	%	82.2%	17.8%	100.0%
Lung	Count	76	30	106
	%	71.7%	28.3%	100.0%
Gynae	Count	69	22	91
	%	75.8%	24.2%	100.0%
Head and Neck	Count	59	20	79
	%	74.7%	25.3%	100.0%
Upper GI	Count	75	20	95
	%	78.9%	21.1%	100.0%
Urological	Count	82	20	102
	%	80.4%	19.6%	100.0%
Haematological	Count	105	35	140
	%	75.0%	25.0%	100.0%
Skin	Count	49	16	65
	%	75.4%	24.6%	100.0%
Supportive and Palliative Care	Count	22	11	33
	%	66.7%	33.3%	100.0%
Brain/CNS	Count	19	5	24
	%	79.2%	20.8%	100.0%
Sarcoma	Count	9	1	10
	%	90.0%	10.0%	100.0%
Children/Young People	Count	8	4	12
	%	66.7%	33.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	790	235	1025
	%	77.1%	22.9%	100.0%

Table: B141 Professional support is readily available: by tumour type

		Organisational support (i.e. from employers) for MDT working is important		Total
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	908	18	926
	%	98.1%	1.9%	100.0%
Nurses	Count	407	16	423
	%	96.2%	3.8%	100.0%
AHPs	Count	60	1	61
	%	98.4%	1.6%	100.0%
MDT coordinators	Count	202	6	208
	%	97.1%	2.9%	100.0%
Other (admin/managerial)	Count	31	0	31
	%	100.0%	.0%	100.0%
Total	Count	1608	41	1649
	%	97.5%	2.5%	100.0%

Table: B142 Organisational support (i.e. from employers) for MDT working is important:by professional group

Table: B143 Organisational support is readily available: by professional group

Professional group		Organisational support is readily available		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	467	425	892
	%	52.4%	47.6%	100.0%
Nurses	Count	261	139	400
	%	65.3%	34.8%	100.0%
AHPs	Count	43	11	54
	%	79.6%	20.4%	100.0%
MDT coordinators	Count	145	53	198
	%	73.2%	26.8%	100.0%
Other (admin/managerial)	Count	25	3	28
	%	89.3%	10.7%	100.0%
Total	Count	941	631	1572
	%	59.9%	40.1%	100.0%

			l support is readily ailable	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	136	119	255
	%	53.3%	46.7%	100.0%
Radiologist	Count	47	54	101
	%	46.5%	53.5%	100.0%
Histo/cytopathologist	Count	53	51	104
	%	51.0%	49.0%	100.0%
Oncologist (clinical and medical)	Count	70	72	142
·	%	49.3%	50.7%	100.0%
Haematologist	Count	37	44	81
	%	45.7%	54.3%	100.0%
Other Doctor (Physician, GP etc)	Count	90	66	156
	%	57.7%	42.3%	100.0%
Palliative care specialist	Count	34	19	53
	%	64.2%	35.8%	100.0%
Clinical Nurse Specialist	Count	245	131	376
	%	65.2%	34.8%	100.0%
Nursing (other)	Count	16	8	24
	%	66.7%	33.3%	100.0%
Allied Health Professional	Count	43	11	54
	%	79.6%	20.4%	100.0%
MDT coordinator	Count	145	53	198
	%	73.2%	26.8%	100.0%
Other (admin/clerical and managerial)	Count	25	3	28
	%	89.3%	10.7%	100.0%
Total	Count	941	631	1572
	%	59.9%	40.1%	100.0%

Table: B144 Organisational support is readily available: by discipline

-			Organisational support is readily available	
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	87	72	159
	%	54.7%	45.3%	100.0%
Colorectal	Count	64	37	101
	%	63.4%	36.6%	100.0%
Lung	Count	76	36	112
	%	67.9%	32.1%	100.0%
Gynae	Count	68	23	91
	%	74.7%	25.3%	100.0%
Head and Neck	Count	49	30	79
	%	62.0%	38.0%	100.0%
Upper GI	Count	55	38	93
	%	59.1%	40.9%	100.0%
Urological	Count	70	37	107
	%	65.4%	34.6%	100.0%
Haematological	Count	82	60	142
	%	57.7%	42.3%	100.0%
Skin	Count	39	26	65
	%	60.0%	40.0%	100.0%
Supportive and Palliative Care	Count	22	11	33
	%	66.7%	33.3%	100.0%
Brain/CNS	Count	10	12	22
	%	45.5%	54.5%	100.0%
Sarcoma	Count	10	3	13
	%	76.9%	23.1%	100.0%
Children/Young People	Count	3	7	10
	%	30.0%	70.0%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	636	393	1029
	%	61.8%	38.2%	100.0%

Table: B145 Organisational support is readily available: by tumour type

Professional group		learning ex improve tean	nt of training or experiences can n-working if there rsonal problems disagree/strongly disagree	Total
Doctors	Count	466	401	867
	%	53.7%	46.3%	100.0%
Nurses	Count	199	210	409
	%	48.7%	51.3%	100.0%
AHPs	Count	25	32	57
	%	43.9%	56.1%	100.0%
MDT coordinators	Count	126	76	202
	% s	62.4%	37.6%	100.0%
Other (admin/managerial)	Count	12	18	30
	%	40.0%	60.0%	100.0%
Total	Count	828	737	1565
	%	52.9%	47.1%	100.0%

Table: B146 No amount of training or learning experiences can improve team-workingif there are interpersonal problems: by professional group

Discipline		experiences c working if there	No amount of training or learning experiences can improve team- working if there are interpersonal problems	
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	144	105	249
	%	57.8%	42.2%	100.0%
Radiologist	Count	54	44	98
	%	55.1%	44.9%	100.0%
Histo/cytopathologist	Count	61	34	95
	%	64.2%	35.8%	100.0%
Oncologist (clinical and medical)	Count	66	74	140
,	%	47.1%	52.9%	100.0%
Haematologist	Count	45	34	79
	%	57.0%	43.0%	100.0%
Other Doctor (Physician, GP etc)	Count	75	77	152
	%	49.3%	50.7%	100.0%
Palliative care specialist	Count	21	33	54
	%	38.9%	61.1%	100.0%
Clinical Nurse Specialist	Count	188	196	384
	%	49.0%	51.0%	100.0%
Nursing (other)	Count	11	14	25
	%	44.0%	56.0%	100.0%
Allied Health Professional	Count	25	32	57
	%	43.9%	56.1%	100.0%
MDT coordinator	Count	126	76	202
	%	62.4%	37.6%	100.0%
Other (admin/clerical and managerial)	Count	12	18	30
	%	40.0%	60.0%	100.0%
Total	Count	828	737	1565
	%	52.9%	47.1%	100.0%

Table: B147 No amount of training or learning experiences can improve team-workingif there are interpersonal problems: by discipline

		learning ex improve team	nt of training or operiences can n-working if there rsonal problems	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	89	72	161
	%	55.3%	44.7%	100.0%
Colorectal	Count	59	45	104
	%	56.7%	43.3%	100.0%
Lung	Count	50	60	110
	%	45.5%	54.5%	100.0%
Gynae	Count	57	35	92
	%	62.0%	38.0%	100.0%
Head and Neck	Count	35	44	79
	%	44.3%	55.7%	100.0%
Upper GI	Count	53	40	93
	%	57.0%	43.0%	100.0%
Urological	Count	54	51	105
	%	51.4%	48.6%	100.0%
Haematological	Count	77	62	139
	%	55.4%	44.6%	100.0%
Skin	Count	38	29	67
	%	56.7%	43.3%	100.0%
Supportive and Palliative Care	Count	14	20	34
	%	41.2%	58.8%	100.0%
Brain/CNS	Count	11	11	22
	%	50.0%	50.0%	100.0%
Sarcoma	Count	2	10	12
	%	16.7%	83.3%	100.0%
Children/Young People	Count	4	5	9
	%	44.4%	55.6%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	545	484	1029
	%	53.0%	47.0%	100.0%

Table: B148 No amount of training or learning experiences can improve team-working if there are interpersonal problems: by tumour type

B8: Patient-centred care and co-ordination of service

Table: B149 Team members perceptions about patient-		adjusting for ng data)
centred care/coordination of service	Strongly agree/ Agree	Disagree/ Strongly disagree
Patients should be made aware that an MDT will be advising on their treatment/care	1612 (96)	75 (4)
A named individual at the MDT should take responsibility for identifying a key worker for the patient	1362 (88)	194 (13)
A patient's case should not be discussed unless someone is present who has been involved in assessing the patient	1138 (68)	537 (32)
Patient demography and co-morbidities should always be considered	1678 (99)	14 (1)
Patient psychosocial, supportive and palliative care issues should always be considered	1660 (98)	31 (2)
Patient views should always inform the decision-making process	1592 (95)	86 (5)
Patient views/preferences should be presented to the MDT meeting by someone who has met the patient	1606 (95)	85 (5)
In principle, patients should have the opportunity to attend MDT discussion of their case	275 (17)	1317 (83)
It is practical for patients to attend MDT discussions of their case	73 (5)	1537 (96)

Professional group		Patients should be made aware that an MDT will be advising on their treatment/care		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	867	56	923
	%	93.9%	6.1%	100.0%
Nurses	Count	442	5	447
	%	98.9%	1.1%	100.0%
AHPs	Count	63	1	64
	%	98.4%	1.6%	100.0%
MDT coordinators	Count	208	13	221
	%	94.1%	5.9%	100.0%
Other (admin/managerial)	Count	32	0	32
, G,	%	100.0%	.0%	100.0%
Total	Count	1612	75	1687
	%	95.6%	4.4%	100.0%

Table: B150 Patients should be made aware that an MDT will be advising on their treatment/care: by professional group

Table: B151 A named individual at the MDT should take responsibility for identifying a key worker for the patient: by professional group

Professional group		A named individual at the MDT should take responsibility for identifying a key worker for the patient		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	712	130	842
	%	84.6%	15.4%	100.0%
Nurses	Count	398	32	430
	%	92.6%	7.4%	100.0%
AHPs	Count	55	4	59
	%	93.2%	6.8%	100.0%
MDT coordinators	Count	175	23	198
	%	88.4%	11.6%	100.0%
Other (admin/managerial)	Count	22	5	27
	%	81.5%	18.5%	100.0%
Total	Count	1362	194	1556
	%	87.5%	12.5%	100.0%

		should take identifying a k	vidual at the MDT responsibility for ey worker for the	Tatal
Discipline		pa	atient	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	210	46	256
	%	82.0%	18.0%	100.0%
Radiologist	Count	81	11	92
	%	88.0%	12.0%	100.0%
Histo/cytopathologist	Count	63	15	78
	%	80.8%	19.2%	100.0%
Oncologist (clinical and medical)	Count	118	18	136
	%	86.8%	13.2%	100.0%
Haematologist	Count	63	16	79
	%	79.7%	20.3%	100.0%
Other Doctor (Physician, GP etc)	Count	129	19	148
	%	87.2%	12.8%	100.0%
Palliative care specialist	Count	48	5	53
	%	90.6%	9.4%	100.0%
Clinical Nurse Specialist	Count	371	31	402
	%	92.3%	7.7%	100.0%
Nursing (other)	Count	27	1	28
	%	96.4%	3.6%	100.0%
Allied Health Professional	Count	55	4	59
	%	93.2%	6.8%	100.0%
MDT coordinator	Count	175	23	198
	%	88.4%	11.6%	100.0%
Other (admin/clerical and managerial)	Count	22	5	27
	%	81.5%	18.5%	100.0%
Total	Count	1362	194	1556
	%	87.5%	12.5%	100.0%

Table: B152 A named individual at the MDT should take responsibility for identifying a key worker for the patient: by discipline

Tumour type		should take re identifying a ke	dual at the MDT esponsibility for ey worker for the tient	Total
		strongly agree/agree	disagree/ strongly disagree	
Breast	Count	122	37	159
	%	76.7%	23.3%	100.0%
Colorectal	Count	96	10	106
	%	90.6%	9.4%	100.0%
Lung	Count	97	17	114
	%	85.1%	14.9%	100.0%
Gynae	Count	81	11	92
	%	88.0%	12.0%	100.0%
Head and Neck	Count	76	7	83
	%	91.6%	8.4%	100.0%
Upper GI	Count	81	12	93
	%	87.1%	12.9%	100.0%
Urological	Count	84	19	103
	%	81.6%	18.4%	100.0%
Haematological	Count	119	23	142
	%	83.8%	16.2%	100.0%
Skin	Count	60	7	67
	%	89.6%	10.4%	100.0%
Supportive and Palliative Care	Count	31	1	32
	%	96.9%	3.1%	100.0%
Brain/CNS	Count	22	0	22
	%	100.0%	.0%	100.0%
Sarcoma	Count	10	1	11
	%	90.9%	9.1%	100.0%
Children/Young People	Count	11	0	11
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	892	145	1037
	%	86.0%	14.0%	100.0%

Table: B153 A named individual at the MDT should take responsibility for identifying a key worker for the patient: tumour type

		A patient's case should not be discussed unless someone is present who has been involved in assessing the patient		Total
Professional Group				
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	585	343	928
	%	63.0%	37.0%	100.0%
Nurses	Count	318	119	437
	%	72.8%	27.2%	100.0%
AHPs	Count	50	9	59
	%	84.7%	15.3%	100.0%
MDT coordinators	Count	160	59	219
	%	73.1%	26.9%	100.0%
Other (admin/managerial)	Count	25	7	32
	%	78.1%	21.9%	100.0%
Total	Count	1138	537	1675
	%	67.9%	32.1%	100.0%

Table: B154 A patient's case should not be discussed unless someone is present who has been involved in assessing the patient: by professional group

		discussed un present who h	ise should not be iless someone is has been involved ng the patient	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	142	125	267
	%	53.2%	46.8%	100.0%
Radiologist	Count	75	33	108
	%	69.4%	30.6%	100.0%
Histo/cytopathologist	Count	75	33	108
	%	69.4%	30.6%	100.0%
Oncologist (clinical and medical)	Count	81	64	145
	%	55.9%	44.1%	100.0%
Haematologist	Count	72	14	86
	%	83.7%	16.3%	100.0%
Other Doctor (Physician, GP etc)	Count	95	61	156
	%	60.9%	39.1%	100.0%
Palliative care specialist	Count	45	13	58
	%	77.6%	22.4%	100.0%
Clinical Nurse Specialist	Count	298	111	409
	%	72.9%	27.1%	100.0%
Nursing (other)	Count	20	8	28
	%	71.4%	28.6%	100.0%
Allied Health Professional	Count	50	9	59
	%	84.7%	15.3%	100.0%
MDT coordinator	Count	160	59	219
	%	73.1%	26.9%	100.0%
Other (admin/clerical and managerial)	Count	25	7	32
	%	78.1%	21.9%	100.0%
Total	Count	1138	537	1675
	%	67.9%	32.1%	100.0%

Table: B155 A patient's case should not be discussed unless someone is present who has been involved in assessing the patient: by discipline

		discussed ur present who h	ase should not be nless someone is nas been involved	T
Tumour type		in assessi	ng the patient	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	111	59	170
	%	65.3%	34.7%	100.0%
Colorectal	Count	75	36	111
	%	67.6%	32.4%	100.0%
Lung	Count	85	34	119
	%	71.4%	28.6%	100.0%
Gynae	Count	55	41	96
	%	57.3%	42.7%	100.0%
Head and Neck	Count	68	15	83
	%	81.9%	18.1%	100.0%
Upper GI	Count	55	48	103
	%	53.4%	46.6%	100.0%
Urological	Count	72	40	112
	%	64.3%	35.7%	100.0%
Haematological	Count	125	26	151
	%	82.8%	17.2%	100.0%
Skin	Count	40	30	70
	%	57.1%	42.9%	100.0%
Supportive and Palliative Care	Count	28	5	33
	%	84.8%	15.2%	100.0%
Brain/CNS	Count	18	8	26
	%	69.2%	30.8%	100.0%
Sarcoma	Count	9	5	14
	%	64.3%	35.7%	100.0%
Children/Young People	Count	8	2	10
	%	80.0%	20.0%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	750	350	1100
	%	68.2%	31.8%	100.0%

Table: B156 A patient's case should not be discussed unless someone is present who has been involved in assessing the patient: tumour type

		Patient demography and co- morbidities should always be considered		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	938	7	945
	%	99.3%	.7%	100.0%
Nurses	Count	435	6	441
	%	98.6%	1.4%	100.0%
AHPs	Count	63	0	63
	%	100.0%	.0%	100.0%
MDT coordinators	Count	211	1	212
	%	99.5%	.5%	100.0%
Other (admin/managerial)	Count	31	0	31
	%	100.0%	.0%	100.0%
Total	Count	1678	14	1692
	%	99.2%	.8%	100.0%

Table: B157 Patient demography and co-morbidities should always be considered: by professional group

Table: B158 Patient psychosocial, supportive and palliative care issues should alwaysbe considered: by professional group

Professional Group		Patient psychosocial, supportive and palliative care issues should always be considered		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	906	28	934
	%	97.0%	3.0%	100.0%
Nurses	Count	441	3	444
	%	99.3%	.7%	100.0%
AHPs	Count	64	0	64
	%	100.0%	.0%	100.0%
MDT coordinators	Count	217	0	217
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	32	0	32
	%	100.0%	.0%	100.0%
Total	Count	1660	31	1691
	%	98.2%	1.8%	100.0%

		Patient views should always inform the decision-making process		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	871	60	931
	%	93.6%	6.4%	100.0%
Nurses	Count	425	14	439
	%	96.8%	3.2%	100.0%
AHPs	Count	58	4	62
	%	93.5%	6.5%	100.0%
MDT coordinators	Count	210	6	216
	%	97.2%	2.8%	100.0%
Other (admin/managerial)	Count	28	2	30
	%	93.3%	6.7%	100.0%
Total	Count	1592	86	1678
	%	94.9%	5.1%	100.0%

Table: B159 Patient views should always inform the decision-making process: by professional group

Table: B160 Patient views/preferences should be presented to the MDT meeting by someone who has met the patient: by professional group

Professional Group		Patient views/preferences should be presented to the MDT meeting by someone who has met the patient		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	869	57	926
	%	93.8%	6.2%	100.0%
Nurses	Count	432	13	445
	%	97.1%	2.9%	100.0%
AHPs	Count	60	3	63
	%	95.2%	4.8%	100.0%
MDT coordinators	Count	215	9	224
	%	96.0%	4.0%	100.0%
Other (admin/managerial)	Count	30	3	33
	%	90.9%	9.1%	100.0%
Total	Count	1606	85	1691
	%	95.0%	5.0%	100.0%

		In principle, patients should have the opportunity to attend MDT discussion of their case		Total
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	130	771	901
	%	14.4%	85.6%	100.0%
Nurses	Count	89	304	393
	%	22.6%	77.4%	100.0%
AHPs	Count	17	35	52
	%	32.7%	67.3%	100.0%
MDT coordinators	Count	32	182	214
	%	15.0%	85.0%	100.0%
Other (admin/managerial)	Count	7	25	32
	%	21.9%	78.1%	100.0%
Total	Count	275	1317	1592
	%	17.3%	82.7%	100.0%

Table: B161 In principle, patients should have the opportunity to attend MDT discussion of their case: by professional group

		the opportuni	tients should have ty to attend MDT of their case	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	33	225	258
	%	12.8%	87.2%	100.0%
Radiologist	Count	6	101	107
	%	5.6%	94.4%	100.0%
Histo/cytopathologist	Count	13	90	103
	%	12.6%	87.4%	100.0%
Oncologist (clinical and medical)	Count	18	126	144
	%	12.5%	87.5%	100.0%
Haematologist	Count	7	77	84
	%	8.3%	91.7%	100.0%
Other Doctor (Physician, GP etc)	Count	33	120	153
	%	21.6%	78.4%	100.0%
Palliative care specialist	Count	20	32	52
	%	38.5%	61.5%	100.0%
Clinical Nurse Specialist	Count	83	285	368
	%	22.6%	77.4%	100.0%
Nursing (other)	Count	6	19	25
	%	24.0%	76.0%	100.0%
Allied Health Professional	Count	17	35	52
	%	32.7%	67.3%	100.0%
MDT coordinator	Count	32	182	214
	%	15.0%	85.0%	100.0%
Other (admin/clerical and managerial)	Count	7	25	32
	%	21.9%	78.1%	100.0%
Total	Count	275	1317	1592
	%	17.3%	82.7%	100.0%

Table: B162 In principle, patients should have the opportunity to attend MDT discussion of their case: by discipline

		the opportuni	tients should have ity to attend MDT n of their case	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	29	129	158
	%	18.4%	81.6%	100.0%
Colorectal	Count	14	92	106
	%	13.2%	86.8%	100.0%
Lung	Count	18	95	113
	%	15.9%	84.1%	100.0%
Gynae	Count	14	75	89
	%	15.7%	84.3%	100.0%
Head and Neck	Count	23	58	81
	%	28.4%	71.6%	100.0%
Upper GI	Count	18	78	96
	%	18.8%	81.3%	100.0%
Urological	Count	25	84	109
	%	22.9%	77.1%	100.0%
Haematological	Count	16	127	143
	%	11.2%	88.8%	100.0%
Skin	Count	15	53	68
	%	22.1%	77.9%	100.0%
Supportive and Palliative Care	Count	12	17	29
	%	41.4%	58.6%	100.0%
Brain/CNS	Count	6	19	25
	%	24.0%	76.0%	100.0%
Sarcoma	Count	1	13	14
	%	7.1%	92.9%	100.0%
Children/Young People	Count	0	7	7
	%	.0%	100.0%	100.0%
Endocrine	Count	0	2	2
	%	.0%	100.0%	100.0%
Total	Count	191	849	1040
	%	18.4%	81.6%	100.0%

Table: B163 In principle, patients should have the opportunity to attend MDT discussion of their case: by tumour type

		It is practical for patients to attend MDT discussions of their case		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	23	880	903
	%	2.5%	97.5%	100.0%
Nurses	Count	30	380	410
	%	7.3%	92.7%	100.0%
AHPs	Count	5	50	55
	%	9.1%	90.9%	100.0%
MDT coordinators	Count	12	201	213
	%	5.6%	94.4%	100.0%
Other (admin/managerial)	Count	3	26	29
	%	10.3%	89.7%	100.0%
Total	Count	73	1537	1610
	%	4.5%	95.5%	100.0%

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Table: B164 It is practical for patients to attend MDT discussions of their case: by professional group

Dissipling		attend MDT di	al for patients to scussions of their case	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	6	256	262
	%	2.3%	97.7%	100.0%
Radiologist	Count	3	105	108
	%	2.8%	97.2%	100.0%
Histo/cytopathologist	Count	2	99	101
	%	2.0%	98.0%	100.0%
Oncologist (clinical and medical)	Count	3	141	144
	%	2.1%	97.9%	100.0%
Haematologist	Count	1	82	83
	%	1.2%	98.8%	100.0%
Other Doctor (Physician, GP etc)	Count	7	149	156
	%	4.5%	95.5%	100.0%
Palliative care specialist	Count	1	48	49
	%	2.0%	98.0%	100.0%
Clinical Nurse Specialist	Count	28	356	384
	%	7.3%	92.7%	100.0%
Nursing (other)	Count	2	24	26
	%	7.7%	92.3%	100.0%
Allied Health Professional	Count	5	50	55
	%	9.1%	90.9%	100.0%
MDT coordinator	Count	12	201	213
	%	5.6%	94.4%	100.0%
Other (admin/clerical and managerial)	Count	3	26	29
	%	10.3%	89.7%	100.0%
Total	Count	73	1537	1610
	%	4.5%	95.5%	100.0%

Table: B165 It is practical for patients to attend MDT discussions of their case: by discipline

Turney turney		attend MDT d	al for patients to iscussions of their case	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	9	155	164
	%	5.5%	94.5%	100.0%
Colorectal	Count	5	99	104
	%	4.8%	95.2%	100.0%
Lung	Count	3	114	117
	%	2.6%	97.4%	100.0%
Gynae	Count	2	91	93
	%	2.2%	97.8%	100.0%
Head and Neck	Count	8	72	80
	%	10.0%	90.0%	100.0%
Upper GI	Count	2	97	99
	%	2.0%	98.0%	100.0%
Urological	Count	7	103	110
	%	6.4%	93.6%	100.0%
Haematological	Count	3	143	146
	%	2.1%	97.9%	100.0%
Skin	Count	7	62	69
	%	10.1%	89.9%	100.0%
Supportive and Palliative Care	Count	2	24	26
	%	7.7%	92.3%	100.0%
Brain/CNS	Count	2	24	26
	%	7.7%	92.3%	100.0%
Sarcoma	Count	2	11	13
	%	15.4%	84.6%	100.0%
Children/Young People	Count	0	8	8
	%	.0%	100.0%	100.0%
Endocrine	Count	0	2	2
	%	.0%	100.0%	100.0%
Total	Count	52	1005	1057
	%	4.9%	95.1%	100.0%

Table: B166 It is practical for patients to attend MDT discussions of their case: by tumour type

Team governance

B9: Leadership

Table: B167 Team members perceptions about leadership	N (valid% - adjusting for missing data)	
	Strongly agree/ Agree	Disagree/ Strongly disagree
Good leadership is a pre-requisite for effective teamwork within the MDT environment	1668 (98)	27 (2)
The same individual should chair the MDT meeting on a regular basis	1353 (81)	311 (19)
Any core member of the MDT could be the chair/lead	1127 (68)	523 (32)
The chair/MDT lead should be a doctor	935 (58)	675 (42)
The MDT chair/lead individual should receive specific training to support them in this role	1197 (77)	355 (23)

Table: B168 Good leadership is a pre-requisite for effective teamwork within the MDT environment: by professional group

Professional group		Good leadership is a pre- requisite for effective teamwork within the MDT environment		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	916	22	938
	%	97.7%	2.3%	100.0%
Nurses	Count	433	3	436
	%	99.3%	.7%	100.0%
AHPs	Count	63	1	64
	%	98.4%	1.6%	100.0%
MDT coordinators	Count	224	0	224
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	32	1	33
	%	97.0%	3.0%	100.0%
Total	Count	1668	27	1695
	%	98.4%	1.6%	100.0%

		The same individual should chair the MDT meeting on a regular basis		Total
Professional group	Professional group		disagree/strongly disagree	
Doctors	Count	722	199	
	%	78.4%	21.6%	100.0%
Nurses	Count	357	73	430
	%	83.0%	17.0%	100.0%
AHPs	Count	52	7	59
	%	88.1%	11.9%	100.0%
MDT coordinators	Count	196	26	222
	%	88.3%	11.7%	100.0%
Other (admin/managerial)	Count	26	6	32
	%	81.3%	18.8%	100.0%
Total	Count	1353	311	1664
	%	81.3%	18.7%	100.0%

Table: B169 The same individual should chair the MDT meeting on a regular basis: by professional group

		the MDT mee	vidual should chair eting on a regular pasis	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	198	63	261
	%	75.9%	24.1%	100.0%
Radiologist	Count	77	27	104
	%	74.0%	26.0%	100.0%
Histo/cytopathologist	Count	86	24	110
	%	78.2%	21.8%	100.0%
Oncologist (clinical and medical)	Count	120	24	144
	%	83.3%	16.7%	100.0%
Haematologist	Count	63	23	86
	%	73.3%	26.7%	100.0%
Other Doctor (Physician, GP etc)	Count	137	22	159
,	%	86.2%	13.8%	100.0%
Palliative care specialist	Count	41	16	57
	%	71.9%	28.1%	100.0%
Clinical Nurse Specialist	Count	329	72	401
	%	82.0%	18.0%	100.0%
Nursing (other)	Count	28	1	29
	%	96.6%	3.4%	100.0%
Allied Health Professional	Count	52	7	59
	%	88.1%	11.9%	100.0%
MDT coordinator	Count	196	26	222
	%	88.3%	11.7%	100.0%
Other (admin/clerical and managerial)	Count	26	6	32
U ,	%	81.3%	18.8%	100.0%
Total	Count	1353	311	1664
	%	81.3%	18.7%	100.0%

Table: B170 The same individual should chair the MDT meeting on a regular basis: by discipline

Tumour tuno		The same individual should chair the MDT meeting on a regular basis		Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	123	44	167
	%	73.7%	26.3%	100.0%
Colorectal	Count	86	19	105
	%	81.9%	18.1%	100.0%
Lung	Count	108	13	121
	%	89.3%	10.7%	100.0%
Gynae	Count	78	19	97
	%	80.4%	19.6%	100.0%
Head and Neck	Count	79	7	86
	%	91.9%	8.1%	100.0%
Upper GI	Count	86	13	99
	%	86.9%	13.1%	100.0%
Urological	Count	87	22	109
	%	79.8%	20.2%	100.0%
Haematological	Count	107	42	149
	%	71.8%	28.2%	100.0%
Skin	Count	64	6	70
	%	91.4%	8.6%	100.0%
Supportive and Palliative Care	Count	20	13	33
	%	60.6%	39.4%	100.0%
Brain/CNS	Count	21	5	26
	%	80.8%	19.2%	100.0%
Sarcoma	Count	11	3	14
	%	78.6%	21.4%	100.0%
Children/Young People	Count	10	2	12
	%	83.3%	16.7%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	882	208	1090
	%	80.9%	19.1%	100.0%

Table: B171 The same individual should chair the MDT meeting on a regular basis: by tumour type

Professional group		Any core member of the MDT could be the chair/lead		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	611	310	921
	%	66.3%	33.7%	100.0%
Nurses	Count	335	87	422
	%	79.4%	20.6%	100.0%
AHPs	Count	49	10	59
	%	83.1%	16.9%	100.0%
MDT coordinators	Count	109	106	215
	%	50.7%	49.3%	100.0%
Other (admin/managerial)	Count	23	10	33
	%	69.7%	30.3%	100.0%
Total	Count	1127	523	1650
	%	68.3%	31.7%	100.0%

Table: B172 Any core member of the MDT could be the chair/lead: by professional group

Discipline		Any core member of the MDT could be the chair/lead		Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	190	76	266
	%	71.4%	28.6%	100.0%
Radiologist	Count	61	42	103
	%	59.2%	40.8%	100.0%
Histo/cytopathologist	Count	53	55	108
	%	49.1%	50.9%	100.0%
Oncologist (clinical and medical)	Count	97	44	141
	%	68.8%	31.2%	100.0%
Haematologist	Count	62	24	86
	%	72.1%	27.9%	100.0%
Other Doctor (Physician, GP etc)	Count	101	59	160
	%	63.1%	36.9%	100.0%
Palliative care specialist	Count	47	10	57
	%	82.5%	17.5%	100.0%
Clinical Nurse Specialist	Count	313	83	396
	%	79.0%	21.0%	100.0%
Nursing (other)	Count	22	4	26
	%	84.6%	15.4%	100.0%
Allied Health Professional	Count	49	10	59
	%	83.1%	16.9%	100.0%
MDT coordinator	Count	109	106	215
	%	50.7%	49.3%	100.0%
Other (admin/clerical and managerial)	Count	23	10	33
	%	69.7%	30.3%	100.0%
Total	Count	1127	523	1650
	%	68.3%	31.7%	100.0%

Table: B173 Any core member of the MDT could be the chair/lead: by discipline

Tumour type		Any core member of the MDT could be the chair/lead		Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	113	53	166
	%	68.1%	31.9%	100.0%
Colorectal	Count	73	31	104
	%	70.2%	29.8%	100.0%
Lung	Count	78	42	120
	%	65.0%	35.0%	100.0%
Gynae	Count	60	34	94
	%	63.8%	36.2%	100.0%
Head and Neck	Count	63	19	82
	%	76.8%	23.2%	100.0%
Upper GI	Count	71	29	100
	%	71.0%	29.0%	100.0%
Urological	Count	80	31	111
	%	72.1%	27.9%	100.0%
Haematological	Count	105	42	147
	%	71.4%	28.6%	100.0%
Skin	Count	54	19	73
	%	74.0%	26.0%	100.0%
Supportive and Palliative Care	Count	34	2	36
	%	94.4%	5.6%	100.0%
Brain/CNS	Count	16	7	23
	%	69.6%	30.4%	100.0%
Sarcoma	Count	10	4	14
	%	71.4%	28.6%	100.0%
Children/Young People	Count	9	3	12
	%	75.0%	25.0%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	767	317	1084
	%	70.8%	29.2%	100.0%

Table: B174 Any core member of the MDT could be the chair/lead: by tumour type

Professional group		The chair/MDT lead should be a doctor		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	596	287	883
	%	67.5%	32.5%	100.0%
Nurses	Count	146	275	421
	%	34.7%	65.3%	100.0%
AHPs	Count	15	40	55
	%	27.3%	72.7%	100.0%
MDT coordinators	Count	161	57	218
	%	73.9%	26.1%	100.0%
Other (admin/managerial)	Count	17	16	33
	%	51.5%	48.5%	100.0%
Total	Count	935	675	1610
	%	58.1%	41.9%	100.0%

Table: B175 The chair/MDT lead should be a doctor: by professional group

Tumour type		The chair/MDT lead should be a doctor		Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	160	94	254
	%	63.0%	37.0%	100.0%
Radiologist	Count	81	20	101
	%	80.2%	19.8%	100.0%
Histo/cytopathologist	Count	91	16	107
	%	85.0%	15.0%	100.0%
Oncologist (clinical and medical)	Count	84	52	136
	%	61.8%	38.2%	100.0%
Haematologist	Count	50	29	79
	%	63.3%	36.7%	100.0%
Other Doctor (Physician, GP etc)	Count	114	37	151
	%	75.5%	24.5%	100.0%
Palliative care specialist	Count	16	39	55
	%	29.1%	70.9%	100.0%
Clinical Nurse Specialist	Count	137	257	394
	%	34.8%	65.2%	100.0%
Nursing (other)	Count	9	18	27
	%	33.3%	66.7%	100.0%
Allied Health Professional	Count	15	40	55
	%	27.3%	72.7%	100.0%
MDT coordinator	Count	161	57	218
	%	73.9%	26.1%	100.0%
Other (admin/clerical and managerial)	Count	17	16	33
	%	51.5%	48.5%	100.0%
Total	Count	935	675	1610
	%	58.1%	41.9%	100.0%

Table: B176 The chair/MDT lead should be a doctor: by tumour type

Tumour type		The chair/MDT lead should be a doctor		Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	97	68	165
	%	58.8%	41.2%	100.0%
Colorectal	Count	55	51	106
	%	51.9%	48.1%	100.0%
Lung	Count	68	50	118
	%	57.6%	42.4%	100.0%
Gynae	Count	61	36	97
	%	62.9%	37.1%	100.0%
Head and Neck	Count	37	45	82
	% e	45.1%	54.9%	100.0%
Upper GI	Count	55	40	95
	%	57.9%	42.1%	100.0%
Urological	Count	62	48	110
	%	56.4%	43.6%	100.0%
Haematological	Count	83	56	139
	%	59.7%	40.3%	100.0%
Skin	Count	44	23	67
	%	65.7%	34.3%	100.0%
Supportive and Palliative Care	Count	4	29	33
	%	12.1%	87.9%	100.0%
Brain/CNS	Count	17	5	22
	%	77.3%	22.7%	100.0%
Sarcoma	Count	11	3	14
	%	78.6%	21.4%	100.0%
Children/Young People	Count	3	8	11
	%	27.3%	72.7%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	598	463	1061
	%	56.4%	43.6%	100.0%

Table: B177 The chair/MDT lead should be a doctor: by tumour type

Professional group		The MDT chair/lead individual should receive specific training to support them in this role		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	610	240	850
	%	71.8%	28.2%	100.0%
Nurses	Count	348	59	407
	%	85.5%	14.5%	100.0%
AHPs	Count	55	5	60
	%	91.7%	8.3%	100.0%
MDT coordinators	Count	158	47	205
	%	77.1%	22.9%	100.0%
Other (admin/managerial)	Count	26	4	30
	%	86.7%	13.3%	100.0%
Total	Count	1197	355	1552
	%	77.1%	22.9%	100.0%

Table: B178 The MDT chair/lead individual should receive specific training to supportthem in this role: by professional group

Discipline		should receive	air/lead individual specific training to em in this role	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	166	76	242
	%	68.6%	31.4%	100.0%
Radiologist	Count	70	26	96
	%	72.9%	27.1%	100.0%
Histo/cytopathologist	Count	69	31	100
	%	69.0%	31.0%	100.0%
Oncologist (clinical and medical)	Count	98	34	132
	%	74.2%	25.8%	100.0%
Haematologist	Count	48	29	77
	%	62.3%	37.7%	100.0%
Other Doctor (Physician, GP etc)	Count	111	39	150
	%	74.0%	26.0%	100.0%
Palliative care specialist	Count	48	5	53
	%	90.6%	9.4%	100.0%
Clinical Nurse Specialist	Count	323	58	381
	%	84.8%	15.2%	100.0%
Nursing (other)	Count	25	1	26
	%	96.2%	3.8%	100.0%
Allied Health Professional	Count	55	5	60
	%	91.7%	8.3%	100.0%
MDT coordinator	Count	158	47	205
	%	77.1%	22.9%	100.0%
Other (admin/clerical and managerial)	Count	26	4	30
	%	86.7%	13.3%	100.0%
Total	Count	1197	355	1552
	%	77.1%	22.9%	100.0%

Table: B179 The MDT chair/lead individual should receive specific training to support them in this role: by discipline

Tumour type	Tumour type		air/lead individual e specific training hem in this role	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	119	34	153
	%	77.8%	22.2%	100.0%
Colorectal	Count	73	27	100
	%	73.0%	27.0%	100.0%
Lung	Count	77	35	112
	%	68.8%	31.3%	100.0%
Gynae	Count	72	19	91
	%	79.1%	20.9%	100.0%
Head and Neck	Count	68	9	77
	%	88.3%	11.7%	100.0%
Upper GI	Count	74	18	92
	%	80.4%	19.6%	100.0%
Urological	Count	85	19	104
	%	81.7%	18.3%	100.0%
Haematological	Count	94	39	133
	%	70.7%	29.3%	100.0%
Skin	Count	53	14	67
	%	79.1%	20.9%	100.0%
Supportive and Palliative Care	Count	27	8	35
	%	77.1%	22.9%	100.0%
Brain/CNS	Count	15	8	23
	%	65.2%	34.8%	100.0%
Sarcoma	Count	10	3	13
	%	76.9%	23.1%	100.0%
Children/Young People	Count	8	3	11
	%	72.7%	27.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	777	236	1013
	%	76.7%	23.3%	100.0%

Table: B180 The MDT chair/lead individual should receive specific training to support them in this role: by tumour type

B10: Data collection, analysis and audit

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Table: B181 Team members perceptions about datacollection, analysis and audit of outcomes	N (valid% - adjusting for missing data)	
	Strongly agree/ Agree	Disagree/ Strongly disagree
MDTs should be responsible for collecting key information that directly affects treatment decisions (e.g. staging and co- morbidity)	1551 (97)	47 (3)
MDTs must collect and use defined national minimum datasets (e.g. cancer registration)	1491 (96)	63 (4)
MDTs have a role in the management of cancer waits	1348 (86)	224 (14)
Interactive electronic data systems should support MDT meetings	1464 (97)	51 (3)
MDTs should have processes to review audit data	1502 (96)	61 (4)
Internal audit should be used to confirm that treatment decisions match current best practice	1506 (97)	43 (3)
MDTs should be alerted to serious treatment complications or death in treatment	1527 (96)	65 (4)
MDTs should review treatment recommendations after notification of complications or death in treatment	1392 (93)	132 (9)
Data collection and audit should be managed within MDT resources	1121 (76)	362 (24)
Data collection and audit can be managed within existing MDT resources	442 (31)	992 (69)

		collecting key directly aff decisions (e.g	be responsible for y information that ects treatment g. staging and co- prbidity)	Total
Professional group				
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	861	30	891
	%	96.6%	3.4%	100.0%
Nurses	Count	408	9	417
	%	97.8%	2.2%	100.0%
AHPs	Count	52	2	54
	%	96.3%	3.7%	100.0%
MDT coordinators	Count	201	6	207
	%	97.1%	2.9%	100.0%
Other (admin/managerial)	Count	29	0	29
	%	100.0%	.0%	100.0%
Total	Count	1551	47	1598
	%	97.1%	2.9%	100.0%

Table: B182 MDTs should be responsible for collecting key information that directly affects treatment decisions (e.g. staging and co-morbidity): by professional group

Table: B183 MDTs must collect and use defined national minimum datasets (e.g cancer registration): by professional group

Professional group		defined na datasets	collect and use tional minimum s (e.g cancer stration)	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	820	47	867
	%	94.6%	5.4%	100.0%
Nurses	Count	404	8	412
	%	98.1%	1.9%	100.0%
AHPs	Count	49	0	49
	%	100.0%	.0%	100.0%
MDT coordinators	Count	191	7	198
	%	96.5%	3.5%	100.0%
Other (admin/managerial)	Count	27	1	28
	%	96.4%	3.6%	100.0%
Total	Count	1491	63	1554
	%	95.9%	4.1%	100.0%

Professional group		MDTs have a role in the management of cancer waits		Total
i Torocolonal group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	682	185	867
	%	78.7%	21.3%	100.0%
Nurses	Count	387	27	414
	%	93.5%	6.5%	100.0%
AHPs	Count	47	3	50
	%	94.0%	6.0%	100.0%
MDT coordinators	Count	206	7	213
	%	96.7%	3.3%	100.0%
Other (admin/managerial)	Count	26	2	28
	%	92.9%	7.1%	100.0%
Total	Count	1348	224	1572
	%	85.8%	14.2%	100.0%

Table: B184 MDTs have a role in the management of cancer waits: by professional group

Discipline			e a role in the t of cancer waits	Total
2.00.p0		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	202	54	256
	%	78.9%	21.1%	100.0%
Radiologist	Count	73	25	98
	%	74.5%	25.5%	100.0%
Histo/cytopathologist	Count	83	14	97
	%	85.6%	14.4%	100.0%
Oncologist (clinical and medical)	Count	122	20	142
	%	85.9%	14.1%	100.0%
Haematologist	Count	54	25	79
	%	68.4%	31.6%	100.0%
Other Doctor (Physician, GP etc)	Count	107	44	151
	%	70.9%	29.1%	100.0%
Palliative care specialist	Count	41	3	44
	%	93.2%	6.8%	100.0%
Clinical Nurse Specialist	Count	362	25	387
	%	93.5%	6.5%	100.0%
Nursing (other)	Count	25	2	27
	%	92.6%	7.4%	100.0%
Allied Health Professional	Count	47	3	50
	%	94.0%	6.0%	100.0%
MDT coordinator	Count	206	7	213
	%	96.7%	3.3%	100.0%
Other (admin/clerical and managerial)	Count	26	2	28
	%	92.9%	7.1%	100.0%
Total	Count	1348	224	1572
	%	85.8%	14.2%	100.0%

Table: B185 MDTs have a role in the management of cancer waits: by discipline

Tumour type			ve a role in the t of cancer waits	Total
ramour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	131	27	158
	%	82.9%	17.1%	100.0%
Colorectal	Count	96	10	106
	%	90.6%	9.4%	100.0%
Lung	Count	97	17	114
	%	85.1%	14.9%	100.0%
Gynae	Count	88	6	94
	%	93.6%	6.4%	100.0%
Head and Neck	Count	70	12	82
	%	85.4%	14.6%	100.0%
Upper GI	Count	88	11	99
	%	88.9%	11.1%	100.0%
Urological	Count	94	13	107
	%	87.9%	12.1%	100.0%
Haematological	Count	103	32	135
	%	76.3%	23.7%	100.0%
Skin	Count	55	17	72
	%	76.4%	23.6%	100.0%
Supportive and Palliative Care	Count	16	3	19
	%	84.2%	15.8%	100.0%
Brain/CNS	Count	21	2	23
	%	91.3%	8.7%	100.0%
Sarcoma	Count	11	2	13
	%	84.6%	15.4%	100.0%
Children/Young People	Count	8	1	9
	%	88.9%	11.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	880	153	1033
	%	85.2%	14.8%	100.0%

Table: B186 MDTs have a role in the management of cancer waits: by tumour type

		Interactive electronic data systems should support MDT meetings		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	821	32	853
	%	96.2%	3.8%	100.0%
Nurses	Count	379	5	384
	%	98.7%	1.3%	100.0%
AHPs	Count	46	2	48
	%	95.8%	4.2%	100.0%
MDT coordinators	Count	190	10	200
	%	95.0%	5.0%	100.0%
Other (admin/managerial)	Count	28	2	30
	%	93.3%	6.7%	100.0%
Total	Count	1464	51	1515
	%	96.6%	3.4%	100.0%

Table: B187 Interactive electronic data systems should support MDT meetings: by professional group

Table: B188 MDTs should have processes to review audit data: by professional group

Professional group			have processes to audit data	Total
i Torobolonal group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	847	43	890
	%	95.2%	4.8%	100.0%
Nurses	Count	395	5	400
	%	98.8%	1.3%	100.0%
AHPs	Count	55	1	56
	%	98.2%	1.8%	100.0%
MDT coordinators	Count	174	12	186
	%	93.5%	6.5%	100.0%
Other (admin/managerial)	Count	31	0	31
	%	100.0%	.0%	100.0%
Total	Count	1502	61	1563
	%	96.1%	3.9%	100.0%

Professional group		confirm that tr	should be used to eatment decisions ent best practice	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	839	31	870
	%	96.4%	3.6%	100.0%
Nurses	Count	404	5	409
	%	98.8%	1.2%	100.0%
AHPs	Count	54	0	54
	%	100.0%	.0%	100.0%
MDT coordinators	Count	177	7	184
	%	96.2%	3.8%	100.0%
Other (admin/managerial)	Count	32	0	32
	%	100.0%	.0%	100.0%
Total	Count	1506	43	1549
	%	97.2%	2.8%	100.0%

Table: B189 Internal audit should be used to confirm that treatment decisions match current best practice: by professional group

Table: B190 MDTs should be alerted to serious treatment complications or death in treatments: by professional group

Professional group		MDTs should be alerted to serious treatment complications or death in treatments		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	833	47	880
	%	94.7%	5.3%	100.0%
Nurses	Count	405	12	417
	%	97.1%	2.9%	100.0%
AHPs	Count	56	0	56
	%	100.0%	.0%	100.0%
MDT coordinators	Count	202	6	208
	%	97.1%	2.9%	100.0%
Other (admin/managerial)	Count	31	0	31
	%	100.0%	.0%	100.0%
Total	Count	1527	65	1592
	%	95.9%	4.1%	100.0%

Professional group		MDT should review treatment recommendations after notification of complications or death in treatment		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	761	90	851
	%	89.4%	10.6%	100.0%
Nurses	Count	374	25	399
	%	93.7%	6.3%	100.0%
AHPs	Count	54	0	54
	%	100.0%	.0%	100.0%
MDT coordinators	Count	177	14	191
	%	92.7%	7.3%	100.0%
Other (admin/managerial)	Count	26	3	29
	%	89.7%	10.3%	100.0%
Total	Count	1392	132	1524
	%	91.3%	8.7%	100.0%

Table: B191 MDTs should review treatment recommendations after notification of complications or death in treatment: by professional group

		recomme notification of	review treatment ndations after f complications or	T -4-1
Discipline		death l	n treatment	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	233	20	253
	%	92.1%	7.9%	100.0%
Radiologist	Count	91	9	100
	%	91.0%	9.0%	100.0%
Histo/cytopathologist	Count	86	10	96
	%	89.6%	10.4%	100.0%
Oncologist (clinical and medical)	Count	113	17	130
	%	86.9%	13.1%	100.0%
Haematologist	Count	56	17	73
	%	76.7%	23.3%	100.0%
Other Doctor (Physician, GP etc)	Count	134	15	149
	%	89.9%	10.1%	100.0%
Palliative care specialist	Count	48	2	50
	%	96.0%	4.0%	100.0%
Clinical Nurse Specialist	Count	347	24	371
	%	93.5%	6.5%	100.0%
Nursing (other)	Count	27	1	28
	%	96.4%	3.6%	100.0%
Allied Health Professional	Count	54	0	54
	%	100.0%	.0%	100.0%
MDT coordinator	Count	177	14	191
	%	92.7%	7.3%	100.0%
Other (admin/clerical and managerial)	Count	26	3	29
	%	89.7%	10.3%	100.0%
Total	Count	1392	132	1524
	%	91.3%	8.7%	100.0%

Table: B192 MDT should review treatment recommendations after notification of complications or death in treatment: by discipline

Tumour type		recomme notification of	review treatment ndations after complications or n treatment	Total
l umour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	142	15	157
	%	90.4%	9.6%	100.0%
Colorectal	Count	98	5	103
	%	95.1%	4.9%	100.0%
Lung	Count	91	18	109
	%	83.5%	16.5%	100.0%
Gynae	Count	87	5	92
	%	94.6%	5.4%	100.0%
Head and Neck	Count	78	2	80
	%	97.5%	2.5%	100.0%
Upper GI	Count	86	10	96
	%	89.6%	10.4%	100.0%
Urological	Count	86	11	97
	%	88.7%	11.3%	100.0%
Haematological	Count	110	20	130
	%	84.6%	15.4%	100.0%
Skin	Count	60	4	64
	%	93.8%	6.3%	100.0%
Supportive and Palliative Care	Count	26	1	27
	%	96.3%	3.7%	100.0%
Brain/CNS	Count	21	1	22
	%	95.5%	4.5%	100.0%
Sarcoma	Count	12	0	12
	%	100.0%	.0%	100.0%
Children/Young People	Count	11	0	11
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	910	92	1002
	%	90.8%	9.2%	100.0%

Table: B193 MDT should review treatment recommendations after notification of complications or death in treatment: by tumour type

		Data collection and audit should be managed within MDT resources		Total
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	591	247	838
	%	70.5%	29.5%	100.0%
Nurses	Count	320	65	385
	%	83.1%	16.9%	100.0%
AHPs	Count	38	10	48
	%	79.2%	20.8%	100.0%
MDT coordinators	Count	151	33	184
	%	82.1%	17.9%	100.0%
Other (admin/managerial)	Count	21	7	28
	%	75.0%	25.0%	100.0%
Total	Count	1121	362	1483
	%	75.6%	24.4%	100.0%

Table: B194 Data collection and audit should be managed within MDT resources: by professional group

		be manage	n and audit should ed within MDT ources	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	181	72	253
	%	71.5%	28.5%	100.0%
Radiologist	Count	58	29	87
	%	66.7%	33.3%	100.0%
Histo/cytopathologist	Count	68	29	97
	%	70.1%	29.9%	100.0%
Oncologist (clinical and medical)	Count	91	39	130
	%	70.0%	30.0%	100.0%
Haematologist	Count	50	25	75
	%	66.7%	33.3%	100.0%
Other Doctor (Physician, GP etc)	Count	107	38	145
	%	73.8%	26.2%	100.0%
Palliative care specialist	Count	36	15	51
	%	70.6%	29.4%	100.0%
Clinical Nurse Specialist	Count	300	61	361
	%	83.1%	16.9%	100.0%
Nursing (other)	Count	20	4	24
	%	83.3%	16.7%	100.0%
Allied Health Professional	Count	38	10	48
	%	79.2%	20.8%	100.0%
MDT coordinator	Count	151	33	184
	%	82.1%	17.9%	100.0%
Other (admin/clerical and managerial)	Count	21	7	28
5 /	%	75.0%	25.0%	100.0%
Total	Count	1121	362	1483
	%	75.6%	24.4%	100.0%

Table: B195 Data collection and audit should be managed within MDT resources: by discipline

- .		be manag	n and audit should ed within MDT sources	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	115	29	144
	%	79.9%	20.1%	100.0%
Colorectal	Count	71	26	97
	%	73.2%	26.8%	100.0%
Lung	Count	80	26	106
	%	75.5%	24.5%	100.0%
Gynae	Count	73	18	91
	%	80.2%	19.8%	100.0%
Head and Neck	Count	63	14	77
	%	81.8%	18.2%	100.0%
Upper GI	Count	66	26	92
	%	71.7%	28.3%	100.0%
Urological	Count	85	17	102
	%	83.3%	16.7%	100.0%
Haematological	Count	90	38	128
	%	70.3%	29.7%	100.0%
Skin	Count	56	14	70
	%	80.0%	20.0%	100.0%
Supportive and Palliative Care	Count	19	10	29
	%	65.5%	34.5%	100.0%
Brain/CNS	Count	19	3	22
	%	86.4%	13.6%	100.0%
Sarcoma	Count	9	3	12
	%	75.0%	25.0%	100.0%
Children/Young People	Count	3	5	8
	%	37.5%	62.5%	100.0%
Endocrine	Count	1	0	1
	%	100.0%	.0%	100.0%
Total	Count	750	229	979
	%	76.6%	23.4%	100.0%

Table: B196 Data collection and audit should be managed within MDT resources: by tumour type

		Data collection and audit can be managed within existing MDT resources		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count %	162 19.5%	670 80.5%	832 100.0%
Nurses	% Count %	19.5% 156 43.3%	80.5% 204 56.7%	360 100.0%
AHPs	Count	12	30	42
MDT coordinators	% Count	28.6% 101	71.4% 70	100.0% 171
Other (admin/managerial)	% Count	59.1% 11	40.9% 18	100.0% 29
Total	% Count	37.9% 442	62.1% 992	100.0% 1434
	%	30.8%	69.2%	100.0%

Table: B197 Data collection and audit can be managed within existing MDT resources:by professional group

		managed wit	n and audit can be hin existing MDT ources	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	57	190	247
5	%	23.1%	76.9%	100.0%
Radiologist	Count	14	77	91
	%	15.4%	84.6%	100.0%
Histo/cytopathologist	Count	14	80	94
	%	14.9%	85.1%	100.0%
Oncologist (clinical and medical)	Count	21	112	133
,	%	15.8%	84.2%	100.0%
Haematologist	Count	13	66	79
5	%	16.5%	83.5%	100.0%
Other Doctor (Physician, GP etc)	Count	33	106	139
,	%	23.7%	76.3%	100.0%
Palliative care specialist	Count	10	39	49
·	%	20.4%	79.6%	100.0%
Clinical Nurse Specialist	Count	145	194	339
	%	42.8%	57.2%	100.0%
Nursing (other)	Count	11	10	21
	%	52.4%	47.6%	100.0%
Allied Health Professional	Count	12	30	42
	%	28.6%	71.4%	100.0%
MDT coordinator	Count	101	70	171
	%	59.1%	40.9%	100.0%
Other (admin/clerical and managerial)	Count	11	18	29
,	%	37.9%	62.1%	100.0%
Total	Count	442	992	1434
	%	30.8%	69.2%	100.0%

Table: B198 Data collection and audit can be managed within existing MDT resources: by discipline

			n and audit can be thin existing MDT	T ()
		res	sources	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	40	100	140
	%	28.6%	71.4%	100.0%
Colorectal	Count	35	57	92
	%	38.0%	62.0%	100.0%
Lung	Count	32	75	107
U U	%	29.9%	70.1%	100.0%
Gynae	Count	31	54	85
	%	36.5%	63.5%	100.0%
Head and Neck	Count	21	51	72
	%	29.2%	70.8%	100.0%
Upper GI	Count	30	56	86
	%	34.9%	65.1%	100.0%
Urological	Count	33	67	100
5	%	33.0%	67.0%	100.0%
Haematological	Count	36	95	131
_	%	27.5%	72.5%	100.0%
Skin	Count	25	36	61
	%	41.0%	59.0%	100.0%
Supportive and Palliative Care	Count	10	15	25
	%	40.0%	60.0%	100.0%
Brain/CNS	Count	7	14	21
	%	33.3%	66.7%	100.0%
Sarcoma	Count	8	5	13
	%	61.5%	38.5%	100.0%
Children/Young People	Count	1	7	8
	%	12.5%	87.5%	100.0%
Endocrine	Count	12.070	07.070	1
Endoonno	%	100.0%	.0%	100.0%
Total	Count	310	632	942
	%	32.9%	67.1%	100.0%

Table: B199 Data collection and audit can be managed within existing MDT resources:by tumour type

B11: Clinical Governance

Table: B200 Team members perceptions about clinical		adjusting for ng data)
governance	Strongly agree/ Agree	Disagree/ Strongly disagree
There should be agreed guidelines for how an MDT operates, how members work together etc.	1439 (90)	158 (10)
MDT members that are not employees of the host organisation should have honorary contracts	904 (81)	209 (19)
Majority agreement of a treatment recommendation is acceptable	1332 (89)	160 (11)
Accepting the legal responsibility of the treating clinician, MDTs should be accountable for treatment recommendations	1317 (88)	175 (12)
If a patient chooses a treatment that is not in line with MDT recommendations this should be recorded	1584 (99)	21 (1)
MDT decisions should be benchmarked against those of similar MDTs	1236 (88)	172 (12)
A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful	1186 (83)	250 (17)

Professional group		There should be agreed guidelines for how an MDT operates, how members work together etc.		Total
· · · · · · · · · · · · · · · · · · ·		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	738	143	881
	%	83.8%	16.2%	100.0%
Nurses	Count	411	5	416
	%	98.8%	1.2%	100.0%
AHPs	Count	56	1	57
	%	98.2%	1.8%	100.0%
MDT coordinators	Count	204	8	212
	%	96.2%	3.8%	100.0%
Other (admin/managerial)	Count	30	1	31
	%	96.8%	3.2%	100.0%
Total	Count	1439	158	1597
	%	90.1%	9.9%	100.0%

Table: B201There should be agreed guidelines for how an MDT operates, how members work together etc: by professional group

Table: B202 MDT members that are not employees of the host organisation should have honorary contracts: by professional group

Professional Group		employe organisati	bers that are not es of the host on should have ry contracts	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	554	140	694
	%	79.8%	20.2%	100.0%
Nurses	Count	239	44	283
	%	84.5%	15.5%	100.0%
AHPs	Count	25	6	31
	%	80.6%	19.4%	100.0%
MDT coordinators	Count	70	15	85
	%	82.4%	17.6%	100.0%
Other (admin/managerial)	Count	16	4	20
	%	80.0%	20.0%	100.0%
Total	Count	904	209	1113
	%	81.2%	18.8%	100.0%

Discipline		employee organisatic	ers that are not es of the host on should have ry contracts	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	177	45	222
	%	79.7%	20.3%	100.0%
Radiologist	Count	59	12	71
	%	83.1%	16.9%	100.0%
Histo/cytopathologist	Count	48	17	65
	%	73.8%	26.2%	100.0%
Oncologist (clinical and medical)	Count	87	26	113
	%	77.0%	23.0%	100.0%
Haematologist	Count	42	23	65
	%	64.6%	35.4%	100.0%
Other Doctor (Physician, GP etc)	Count	102	16	118
	%	86.4%	13.6%	100.0%
Palliative care specialist	Count	39	1	40
	%	97.5%	2.5%	100.0%
Clinical Nurse Specialist	Count	218	41	259
	%	84.2%	15.8%	100.0%
Nursing (other)	Count	21	3	24
	%	87.5%	12.5%	100.0%
Allied Health Professional	Count	25	6	31
	%	80.6%	19.4%	100.0%
MDT coordinator	Count	70	15	85
	%	82.4%	17.6%	100.0%
Other (admin/clerical and managerial)	Count	16	4	20
	%	80.0%	20.0%	100.0%
Total	Count	904	209	1113
	%	81.2%	18.8%	100.0%

Table: B203 MDT members that are not employees of the host organisation shouldhave honorary contracts: by discipline

		employee organisatio	bers that are not es of the host on should have	Total
Tumour type		nonora	ry contracts	TOLAI
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	99	16	115
	%	86.1%	13.9%	100.0%
Colorectal	Count	61	10	71
	%	85.9%	14.1%	100.0%
Lung	Count	68	10	78
	%	87.2%	12.8%	100.0%
Gynae	Count	53	15	68
	%	77.9%	22.1%	100.0%
Head and Neck	Count	53	5	58
	%	91.4%	8.6%	100.0%
Upper GI	Count	51	13	64
	%	79.7%	20.3%	100.0%
Urological	Count	61	19	80
	%	76.3%	23.8%	100.0%
Haematological	Count	75	33	108
	%	69.4%	30.6%	100.0%
Skin	Count	41	8	49
	%	83.7%	16.3%	100.0%
Supportive and Palliative Care	Count	18	1	19
	%	94.7%	5.3%	100.0%
Brain/CNS	Count	13	3	16
	%	81.3%	18.8%	100.0%
Sarcoma	Count	7	2	9
	%	77.8%	22.2%	100.0%
Children/Young People	Count	3	1	4
	%	75.0%	25.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	605	136	741
	%	81.6%	18.4%	100.0%

Table: B204 MDT members that are not employees of the host organisation should have honorary contracts: by tumour type

		treatment re	greement of a commendation is ceptable	Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	719	128	847
	%	84.9%	15.1%	100.0%
Nurses	Count	371	18	389
	%	95.4%	4.6%	100.0%
AHPs	Count	44	2	46
	%	95.7%	4.3%	100.0%
MDT coordinators	Count	178	9	187
	%	95.2%	4.8%	100.0%
Other (admin/managerial)	Count	20	3	23
, , , , , , , , , , , , , , , , , , ,	%	87.0%	13.0%	100.0%
Total	Count	1332	160	1492
	%	89.3%	10.7%	100.0%

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Table: B205 Majority agreement of a treatment recommendation is acceptable: by professional group

		treatment ree	greement of a commendation is eptable	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	214	31	245
	%	87.3%	12.7%	100.0%
Radiologist	Count	92	5	97
	%	94.8%	5.2%	100.0%
Histo/cytopathologist	Count	74	24	98
	%	75.5%	24.5%	100.0%
Oncologist (clinical and medical)	Count	107	26	133
	%	80.5%	19.5%	100.0%
Haematologist	Count	68	12	80
	%	85.0%	15.0%	100.0%
Other Doctor (Physician, GP etc)	Count	122	22	144
,	%	84.7%	15.3%	100.0%
Palliative care specialist	Count	42	8	50
	%	84.0%	16.0%	100.0%
Clinical Nurse Specialist	Count	344	17	361
	%	95.3%	4.7%	100.0%
Nursing (other)	Count	27	1	28
	%	96.4%	3.6%	100.0%
Allied Health Professional	Count	44	2	46
	%	95.7%	4.3%	100.0%
MDT coordinator	Count	178	9	187
	%	95.2%	4.8%	100.0%
Other (admin/clerical and managerial)	Count	20	3	23
	%	87.0%	13.0%	100.0%
Total	Count	1332	160	1492
	%	89.3%	10.7%	100.0%

Table: B206 Majority agreement of a treatment recommendation is acceptable: by discipline

		treatment rec	greement of a commendation is eptable	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	142	11	153
	%	92.8%	7.2%	100.0%
Colorectal	Count	92	8	100
	%	92.0%	8.0%	100.0%
Lung	Count	96	13	109
	%	88.1%	11.9%	100.0%
Gynae	Count	85	6	91
	%	93.4%	6.6%	100.0%
Head and Neck	Count	70	5	75
	%	93.3%	6.7%	100.0%
Upper GI	Count	76	9	85
	%	89.4%	10.6%	100.0%
Urological	Count	91	8	99
	%	91.9%	8.1%	100.0%
Haematological	Count	119	18	137
	%	86.9%	13.1%	100.0%
Skin	Count	61	5	66
	%	92.4%	7.6%	100.0%
Supportive and Palliative Care	Count	22	1	23
	%	95.7%	4.3%	100.0%
Brain/CNS	Count	22	1	23
	%	95.7%	4.3%	100.0%
Sarcoma	Count	12	0	12
	%	100.0%	.0%	100.0%
Children/Young People	Count	9	1	10
	%	90.0%	10.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	899	86	985
	%	91.3%	8.7%	100.0%

Table: B207 Majority agreement of a treatment recommendation is acceptable: by tumour type

Table: B208 Accepting the legal responsibility of accountable for treatment recommendations: b	U

Professional Group		responsibili clinician, M accountab	ng the legal ty of the treating IDTs should be le for treatment mendations	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	719	135	854
	%	84.2%	15.8%	100.0%
Nurses	Count	376	16	392
	%	95.9%	4.1%	100.0%
AHPs	Count	48	1	49
	%	98.0%	2.0%	100.0%
MDT coordinators	Count	153	21	174
	%	87.9%	12.1%	100.0%
Other (admin/managerial)	Count	21	2	23
	%	91.3%	8.7%	100.0%
Total	Count	1317	175	1492
	%	88.3%	11.7%	100.0%

		of the treating should be a	legal responsibility g clinician, MDTs accountable for commendations	Total
Discipline		liealmentre	commendations	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	218	34	252
	%	86.5%	13.5%	100.0%
Radiologist	Count	89	8	97
	%	91.8%	8.2%	100.0%
Histo/cytopathologist	Count	83	13	96
	%	86.5%	13.5%	100.0%
Oncologist (clinical and medical)	Count	108	28	136
	%	79.4%	20.6%	100.0%
Haematologist	Count	55	19	74
	%	74.3%	25.7%	100.0%
Other Doctor (Physician, GP etc)	Count	123	26	149
	%	82.6%	17.4%	100.0%
Palliative care specialist	Count	43	7	50
	%	86.0%	14.0%	100.0%
Clinical Nurse Specialist	Count	347	16	363
	%	95.6%	4.4%	100.0%
Nursing (other)	Count	29	0	29
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	48	1	49
	%	98.0%	2.0%	100.0%
MDT coordinator	Count	153	21	174
	%	87.9%	12.1%	100.0%
Other (admin/clerical and managerial)	Count	21	2	23
- ·	%	91.3%	8.7%	100.0%
Total	Count	1317	175	1492
	%	88.3%	11.7%	100.0%

Table: B209 Accepting the legal responsibility of the treating clinician, MDTs should be accountable for treatment recommendations: by discipline

Tumour type		Accepting the legal responsibility of the treating clinician, MDTs should be accountable for treatment recommendations		Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	136	16	152
	%	89.5%	10.5%	100.0%
Colorectal	Count	94	8	102
	%	92.2%	7.8%	100.0%
Lung	Count	95	16	111
	%	85.6%	14.4%	100.0%
Gynae	Count	85	3	88
	%	96.6%	3.4%	100.0%
Head and Neck	Count	70	4	74
	%	94.6%	5.4%	100.0%
Upper GI	Count	78	12	90
	%	86.7%	13.3%	100.0%
Urological	Count	84	13	97
	%	86.6%	13.4%	100.0%
Haematological	Count	106	25	131
	%	80.9%	19.1%	100.0%
Skin	Count	59	11	70
	%	84.3%	15.7%	100.0%
Supportive and Palliative Care	Count	23	1	24
	%	95.8%	4.2%	100.0%
Brain/CNS	Count	20	2	22
	%	90.9%	9.1%	100.0%
Sarcoma	Count	12	1	13
	%	92.3%	7.7%	100.0%
Children/Young People	Count	10	0	10
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	874	112	986
	%	88.6%	11.4%	100.0%

Table: B210 Accepting the legal responsibility of the treating clinician, MDTs should be accountable for treatment recommendations: by tumour type

Professional group		that is not i recommendat	ooses a treatment n line with MDT ions this should be corded	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	876	19	895
	%	97.9%	2.1%	100.0%
Nurses	Count	414	1	415
	%	99.8%	.2%	100.0%
AHPs	Count	60	0	60
	%	100.0%	.0%	100.0%
MDT coordinators	Count	203	1	204
	%	99.5%	.5%	100.0%
Other (admin/managerial)	Count	31	0	31
	%	100.0%	.0%	100.0%
Total	Count	1584	21	1605
	%	98.7%	1.3%	100.0%

Table: B211 If a patient chooses a treatment that is not in line with MDT recommendations this should be recorded: by professional group

Table: B212 MDT decisions should be benchmarked against those of similar MDTs: by professional group

		MDT decisions should be benchmarked against those of similar MDTs		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	686	116	802
	%	85.5%	14.5%	100.0%
Nurses	Count	359	22	381
	%	94.2%	5.8%	100.0%
AHPs	Count	48	1	49
	%	98.0%	2.0%	100.0%
MDT coordinators	Count	122	30	152
	%	80.3%	19.7%	100.0%
Other (admin/managerial)	Count	21	3	24
	%	87.5%	12.5%	100.0%
Total	Count	1236	172	1408
	%	87.8%	12.2%	100.0%

Discipline		MDT decisions should be benchmarked against those of similar MDTs		Total
		strongly agree/agree	disagree/strongly disagree	Total
Surgeon	Count	201	39	240
	%	83.8%	16.3%	100.0%
Radiologist	Count	84	8	92
	%	91.3%	8.7%	100.0%
Histo/cytopathologist	Count	71	14	85
	%	83.5%	16.5%	100.0%
Oncologist (clinical and medical)	Count	112	20	132
	%	84.8%	15.2%	100.0%
Haematologist	Count	52	18	70
	%	74.3%	25.7%	100.0%
Other Doctor (Physician, GP etc)	Count	125	12	137
	%	91.2%	8.8%	100.0%
Palliative care specialist	Count	41	5	46
	%	89.1%	10.9%	100.0%
Clinical Nurse Specialist	Count	335	21	356
	%	94.1%	5.9%	100.0%
Nursing (other)	Count	24	1	25
	%	96.0%	4.0%	100.0%
Allied Health Professional	Count	48	1	49
	%	98.0%	2.0%	100.0%
MDT coordinator	Count	122	30	152
	%	80.3%	19.7%	100.0%
Other (admin/clerical and managerial)	Count	21	3	24
	%	87.5%	12.5%	100.0%
Total	Count	1236	172	1408
	%	87.8%	12.2%	100.0%

Table: B213 MDT decisions should be benchmarked against those of similar MDTs: by discipline

Tumour type		MDT decisions should be benchmarked against those of similar MDTs		Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	122	20	142
	%	85.9%	14.1%	100.0%
Colorectal	Count	74	20	94
	%	78.7%	21.3%	100.0%
Lung	Count	96	7	103
	%	93.2%	6.8%	100.0%
Gynae	Count	73	6	79
	%	92.4%	7.6%	100.0%
Head and Neck	Count	73	2	75
	%	97.3%	2.7%	100.0%
Upper GI	Count	76	11	87
	%	87.4%	12.6%	100.0%
Urological	Count	88	10	98
	%	89.8%	10.2%	100.0%
Haematological	Count	101	25	126
	%	80.2%	19.8%	100.0%
Skin	Count	58	4	62
	%	93.5%	6.5%	100.0%
Supportive and Palliative Care	Count	18	2	20
	%	90.0%	10.0%	100.0%
Brain/CNS	Count	20	2	22
	%	90.9%	9.1%	100.0%
Sarcoma	Count	10	1	11
	%	90.9%	9.1%	100.0%
Children/Young People	Count	7	0	7
	%	100.0%	.0%	100.0%
Endocrine	Count	1	0	1
	%	100.0%	.0%	100.0%
Total	Count	817	110	927
	%	88.1%	11.9%	100.0%

Table: B214 MDT decisions should be benchmarked against those of similar MDTs: by tumour type

Professional Group		A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	606	197	803
	%	75.5%	24.5%	100.0%
Nurses	Count	349	27	376
	%	92.8%	7.2%	100.0%
AHPs	Count	44	7	51
	%	86.3%	13.7%	100.0%
MDT coordinators	Count	161	15	176
	%	91.5%	8.5%	100.0%
Other (admin/managerial)	Count	26	4	30
	%	86.7%	13.3%	100.0%
Total	Count	1186	250	1436
	%	82.6%	17.4%	100.0%

Table: B215 A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful: by professional group

Discipline		A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful		Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	181	55	236
	%	76.7%	23.3%	100.0%
Radiologist	Count	64	26	90
	%	71.1%	28.9%	100.0%
Histo/cytopathologist	Count	58	31	89
	%	65.2%	34.8%	100.0%
Oncologist (clinical and medical)	Count	103	24	127
	%	81.1%	18.9%	100.0%
Haematologist	Count	50	28	78
	%	64.1%	35.9%	100.0%
Other Doctor (Physician, GP etc)	Count	104	31	135
	%	77.0%	23.0%	100.0%
Palliative care specialist	Count	46	2	48
	%	95.8%	4.2%	100.0%
Clinical Nurse Specialist	Count	325	25	350
	%	92.9%	7.1%	100.0%
Nursing (other)	Count	24	2	26
	%	92.3%	7.7%	100.0%
Allied Health Professional	Count	44	7	51
	%	86.3%	13.7%	100.0%
MDT coordinator	Count	161	15	176
	%	91.5%	8.5%	100.0%
Other (admin/clerical and managerial)	Count	26	4	30
	%	86.7%	13.3%	100.0%
Total	Count	1186	250	1436
	%	82.6%	17.4%	100.0%

Table: B216 A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful: by discipline

		A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful		Total
Tumour type				Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	121	20	141
	%	85.8%	14.2%	100.0%
Colorectal	Count	81	17	98
	%	82.7%	17.3%	100.0%
Lung	Count	82	19	101
	%	81.2%	18.8%	100.0%
Gynae	Count	72	10	82
	%	87.8%	12.2%	100.0%
Head and Neck	Count	68	10	78
	%	87.2%	12.8%	100.0%
Upper GI	Count	75	14	89
	%	84.3%	15.7%	100.0%
Urological	Count	81	9	90
	%	90.0%	10.0%	100.0%
Haematological	Count	88	43	131
	%	67.2%	32.8%	100.0%
Skin	Count	44	16	60
	%	73.3%	26.7%	100.0%
Supportive and Palliative Care	Count	26	1	27
	%	96.3%	3.7%	100.0%
Brain/CNS	Count	18	3	21
	%	85.7%	14.3%	100.0%
Sarcoma	Count	11	1	12
	%	91.7%	8.3%	100.0%
Children/Young People	Count	6	1	7
	%	85.7%	14.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	775	164	939
	%	82.5%	17.5%	100.0%

Table: B217 A facilitated away-day to review and reflect on MDT strategies to improve performance would be helpful: by tumour type

Professional development and education of team members

B12: Development and training

Table: B218 Team members perceptions about	N (valid% - adjusting for missing data)		
development and training	Strongly agree/ Agree	Disagree/ Strongly disagree	
There should be a formal induction process for every new MDT member	799 (52)	740 (48)	
All MDT members should receive support to develop and consolidate skills associated with effective team working	1213 (78)	341 (22)	
Multi-disciplinary training will support the development of effective MDTs	1186 (80)	305 (21)	
MDTs have an important role in sharing learning and best practice with peers	1590 (97)	43 (3)	
Team working is beneficial to the mental health and wellbeing of members	1369 (90)	156 (10)	
Being an MDT member improves job satisfaction	1233 (81)	287 (19)	
The MDT should contribute to the continuing professional development of all members	1497 (95)	82 (5)	
MDTs provide an opportunity for education and learning for staff in all disciplines	1539 (95)	80 (5)	

Table: B219 There should be a formal induction process for every new MDT member:by professional group

Professional group		There should be a formal induction process for every new MDT member		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	314	556	870
	%	36.1%	63.9%	100.0%
Nurses	Count	283	107	390
	%	72.6%	27.4%	100.0%
AHPs	Count	27	22	49
	%	55.1%	44.9%	100.0%
MDT coordinators	Count	156	44	200
	%	78.0%	22.0%	100.0%
Other	Count	19	11	30
(admin/managerial)	0/	10		00
	%	63.3%	36.7%	100.0%
Total	Count	799	740	1539
	%	51.9%	48.1%	100.0%

		induction proce	d be a formal ss for every new nember	Total
Discipline		strongly agree/agree	disagree/strong ly disagree	
Surgeon	Count	90	164	254
	%	35.4%	64.6%	100.0%
Radiologist		38	61	99
	%	38.4%	61.6%	100.0%
Histo/cytopathologist	Count	37	66	103
	%	35.9%	64.1%	100.0%
Oncologist (clinical and medical)	Count	37	98	135
	%	27.4%	72.6%	100.0%
Haematologist	Count	28	50	78
	%	35.9%	64.1%	100.0%
Other Doctor (Physician, GP etc)	Count	49	97	146
	%	33.6%	66.4%	100.0%
Palliative care specialist	Count	35	20	55
	%	63.6%	36.4%	100.0%
Clinical Nurse Specialist	Count	269	95	364
	%	73.9%	26.1%	100.0%
Nursing (other)	Count	14	12	26
	%	53.8%	46.2%	100.0%
Allied Health Professional	Count	27	22	49
	%	55.1%	44.9%	100.0%
MDT coordinator	Count	156	44	200
	%	78.0%	22.0%	100.0%
Other (admin/clerical and managerial)	Count	19	11	30
	%	63.3%	36.7%	100.0%
Total	Count	799	740	1539
	%	51.9%	48.1%	100.0%

Table: B220 There should be a formal induction process for every new MDT member:by discipline

Tumour tupo		induction proc	uld be a formal cess for every new member	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	84	65	149
	%	56.4%	43.6%	100.0%
Colorectal	Count	48	51	99
	%	48.5%	51.5%	100.0%
Lung	Count	50	55	105
	%	47.6%	52.4%	100.0%
Gynae	Count	50	45	95
	%	52.6%	47.4%	100.0%
Head and Neck	Count	46	30	76
	%	60.5%	39.5%	100.0%
Upper GI	Count	57	36	93
	%	61.3%	38.7%	100.0%
Urological	Count	56	48	104
	%	53.8%	46.2%	100.0%
Haematological	Count	66	71	137
	%	48.2%	51.8%	100.0%
Skin	Count	27	35	62
	%	43.5%	56.5%	100.0%
Supportive and Palliative Care	Count	26	7	33
	%	78.8%	21.2%	100.0%
Brain/CNS	Count	11	11	22
	%	50.0%	50.0%	100.0%
Sarcoma	Count	8	6	14
	%	57.1%	42.9%	100.0%
Children/Young People	Count	4	5	9
	%	44.4%	55.6%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	535	465	1000
	%	53.5%	46.5%	100.0%

Table: B221 There should be a formal induction process for every new MDT member:by tumour type

Table: B222 All MDT members should receive support to develop and consolidate
skills associated with effective team working: by professional group

Professional group		All MDT members should receive support to develop and consolidate skills associated with effective team working		Total
		strongly agree/agree	disagree/strong ly disagree	
Doctors	Count	565	294	859
	%	65.8%	34.2%	100.0%
Nurses	Count	373	30	403
	%	92.6%	7.4%	100.0%
AHPs	Count	54	3	57
	%	94.7%	5.3%	100.0%
MDT coordinators	Count	195	9	204
	%	95.6%	4.4%	100.0%
Other (admin/managerial)	Count	26	5	31
	%	83.9%	16.1%	100.0%
Total	Count	1213	341	1554
	%	78.1%	21.9%	100.0%

		receive suppor consolidate sl	mbers should t to develop and kills associated team working	Total
Discipline				Total
		strongly agree/agree	disagree/stron gly disagree	
Surgeon	Count	160	85	245
	%	65.3%	34.7%	100.0%
Radiologist	Count	64	33	97
	%	66.0%	34.0%	100.0%
Histo/cytopathologist	Count	66	39	105
	%	62.9%	37.1%	100.0%
Oncologist (clinical and medical)	Count	86	49	135
	%	63.7%	36.3%	100.0%
Haematologist	Count	49	28	77
	%	63.6%	36.4%	100.0%
Other Doctor (Physician, GP etc)	Count	92	53	145
	%	63.4%	36.6%	100.0%
Palliative care specialist	Count	48	7	55
	%	87.3%	12.7%	100.0%
Clinical Nurse Specialist	Count	351	26	377
	%	93.1%	6.9%	100.0%
Nursing (other)	Count	22	4	26
	%	84.6%	15.4%	100.0%
Allied Health Professional	Count	54	3	57
	%	94.7%	5.3%	100.0%
MDT coordinator	Count	195	9	204
	%	95.6%	4.4%	100.0%
Other (admin/clerical and managerial)	Count	26	5	31
	%	83.9%	16.1%	100.0%
Total	Count	1213	341	1554
	%	78.1%	21.9%	100.0%

Table: B223 All MDT members should receive support to develop and consolidate skills associated with effective team working: by discipline

Tumour type		receive suppo consolidate sk	embers should ort to develop and ills associated with team working	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	133	25	158
	%	84.2%	15.8%	100.0%
Colorectal	Count	81	15	96
	%	84.4%	15.6%	100.0%
Lung	Count	80	30	110
	%	72.7%	27.3%	100.0%
Gynae	Count	75	17	92
	%	81.5%	18.5%	100.0%
Head and Neck	Count	65	12	77
	%	84.4%	15.6%	100.0%
Upper GI	Count	69	21	90
	%	76.7%	23.3%	100.0%
Urological	Count	82	19	101
	%	81.2%	18.8%	100.0%
Haematological	Count	97	41	138
	%	70.3%	29.7%	100.0%
Skin	Count	43	21	64
	%	67.2%	32.8%	100.0%
Supportive and Palliative Care	Count	33	3	36
	%	91.7%	8.3%	100.0%
Brain/CNS	Count	17	5	22
	%	77.3%	22.7%	100.0%
Sarcoma	Count	10	4	14
	%	71.4%	28.6%	100.0%
Children/Young People	Count	8	1	9
	%	88.9%	11.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	795	214	1009
	%	78.8%	21.2%	100.0%

Table: B224 All MDT members should receive support to develop and consolidateskills associated with effective team working: by tumour type

		Multi-disciplinary training will support the development of effective MDTs		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	554	263	817
	%	67.8%	32.2%	100.0%
Nurses	Count	359	30	389
	%	92.3%	7.7%	100.0%
AHPs	Count	54	2	56
	%	96.4%	3.6%	100.0%
MDT coordinators	Count	192	6	198
	%	97.0%	3.0%	100.0%
Other (admin/managerial)	Count	27	4	31
	%	87.1%	12.9%	100.0%
Total	Count	1186	305	1491
	%	79.5%	20.5%	100.0%

Table: B225 Multi-disciplinary training will support the development of effective MDTs: by professional group

		support the	nary training will development of ive MDTs	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	156	85	241
	%	64.7%	35.3%	100.0%
Radiologist	Count	68	21	89
	%	76.4%	23.6%	100.0%
Histo/cytopathologist	Count	57	36	93
	%	61.3%	38.7%	100.0%
Oncologist (clinical and medical)	Count	95	36	131
	%	72.5%	27.5%	100.0%
Haematologist	Count	42	31	73
	%	57.5%	42.5%	100.0%
Other Doctor (Physician, GP etc)	Count	87	48	135
	%	64.4%	35.6%	100.0%
Palliative care specialist	Count	49	6	55
	%	89.1%	10.9%	100.0%
Clinical Nurse Specialist	Count	336	25	361
	%	93.1%	6.9%	100.0%
Nursing (other)	Count	23	5	28
	%	82.1%	17.9%	100.0%
Allied Health Professional	Count	54	2	56
	%	96.4%	3.6%	100.0%
MDT coordinator	Count	192	6	198
	%	97.0%	3.0%	100.0%
Other (admin/clerical and managerial)	Count	27	4	31
	%	87.1%	12.9%	100.0%
Total	Count	1186	305	1491
	%	79.5%	20.5%	100.0%

Table: B226 Multi-disciplinary training will support the development of effective MDTs: by discipline

		support the	inary training will development of tive MDTs	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	127	23	150
	%	84.7%	15.3%	100.0%
Colorectal	Count	82	16	98
	%	83.7%	16.3%	100.0%
Lung	Count	78	25	103
	%	75.7%	24.3%	100.0%
Gynae	Count	69	20	89
	%	77.5%	22.5%	100.0%
Head and Neck	Count	65	8	73
	%	89.0%	11.0%	100.0%
Upper GI	Count	69	21	90
	%	76.7%	23.3%	100.0%
Urological	Count	84	15	99
	%	84.8%	15.2%	100.0%
Haematological	Count	90	41	131
	%	68.7%	31.3%	100.0%
Skin	Count	42	17	59
	%	71.2%	28.8%	100.0%
Supportive and Palliative Care	Count	32	3	35
	%	91.4%	8.6%	100.0%
Brain/CNS	Count	15	6	21
	%	71.4%	28.6%	100.0%
Sarcoma	Count	10	0	10
	%	100.0%	.0%	100.0%
Children/Young People	Count	6	1	7
	%	85.7%	14.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	771	196	967
	%	79.7%	20.3%	100.0%

Table: B227 Multi-disciplinary training will support the development of effective MDTs: by tumour type

		MDTs have an important role in sharing learning and best practice with peers		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	868	37	905
	%	95.9%	4.1%	100.0%
Nurses	Count	417	5	422
	%	98.8%	1.2%	100.0%
AHPs	Count	60	0	60
	%	100.0%	.0%	100.0%
MDT coordinators	Count	213	0	213
	%	100.0%	.0%	100.0%
Other (admin/managerial)	Count	32	1	33
	%	97.0%	3.0%	100.0%
Total	Count	1590	43	1633
	%	97.4%	2.6%	100.0%

Table: B228 MDTs have an important role in sharing learning and best practice with peers: by professional group

Table: B229Team working is beneficial to the mental health and wellbeing of members: by professional group

		Team working is beneficial to the mental health and wellbeing of members		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	707	125	832
	%	85.0%	15.0%	100.0%
Nurses	Count	394	14	408
	%	96.6%	3.4%	100.0%
AHPs	Count	55	2	57
	%	96.5%	3.5%	100.0%
MDT coordinators	Count	185	14	199
	%	93.0%	7.0%	100.0%
Other (admin/managerial)	Count	28	1	29
	%	96.6%	3.4%	100.0%
Total	Count	1369	156	1525
	%	89.8%	10.2%	100.0%

2		mental health	is beneficial to the and wellbeing of mbers	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	197	43	240
	%	82.1%	17.9%	100.0%
Radiologist	Count	88	13	101
	%	87.1%	12.9%	100.0%
Histo/cytopathologist	Count	79	13	92
	%	85.9%	14.1%	100.0%
Oncologist (clinical and medical)	Count	115	16	131
	%	87.8%	12.2%	100.0%
Haematologist	Count	60	14	74
	%	81.1%	18.9%	100.0%
Other Doctor (Physician, GP etc)	Count	117	23	140
	%	83.6%	16.4%	100.0%
Palliative care specialist	Count	51	3	54
	%	94.4%	5.6%	100.0%
Clinical Nurse Specialist	Count	369	13	382
	%	96.6%	3.4%	100.0%
Nursing (other)	Count	25	1	26
	%	96.2%	3.8%	100.0%
Allied Health Professional	Count	55	2	57
	%	96.5%	3.5%	100.0%
MDT coordinator	Count	185	14	199
	%	93.0%	7.0%	100.0%
Other (admin/clerical and managerial)	Count	28	1	29
	%	96.6%	3.4%	100.0%
Total	Count	1369	156	1525
	%		10.2%	100.0%

Table: B230 Team working is beneficial to the mental health and wellbeing of members: by discipline

		mental health	is beneficial to the and wellbeing of mbers	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	148	12	160
	%	92.5%	7.5%	100.0%
Colorectal	Count	90	10	100
	%	90.0%	10.0%	100.0%
Lung	Count	94	14	108
	%	87.0%	13.0%	100.0%
Gynae	Count	82	7	89
	%	92.1%	7.9%	100.0%
Head and Neck	Count	70	8	78
	%	89.7%	10.3%	100.0%
Upper GI	Count	80	13	93
	%	86.0%	14.0%	100.0%
Urological	Count	87	13	100
	%	87.0%	13.0%	100.0%
Haematological	Count	113	19	132
	%	85.6%	14.4%	100.0%
Skin	Count	55	6	61
	%	90.2%	9.8%	100.0%
Supportive and Palliative Care	Count	35	0	35
	%	100.0%	.0%	100.0%
Brain/CNS	Count	21	2	23
	%	91.3%	8.7%	100.0%
Sarcoma		12	1	13
	%	92.3%	7.7%	100.0%
Children/Young People	Count	9	1	10
	%	90.0%	10.0%	100.0%
Endocrine	Count	1	1	2
	%	50.0%	50.0%	100.0%
Total	Count	897	107	1004
	%	89.3%	10.7%	100.0%

Table: B231 Team working is beneficial to the mental health and wellbeing of members: by tumour type

Professional group		Being an MDT member improves job satisfaction		Total
T Toressional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	665	191	856
	%	77.7%	22.3%	100.0%
Nurses	Count	334	63	397
	%	84.1%	15.9%	100.0%
AHPs	Count	55	2	57
	%	96.5%	3.5%	100.0%
MDT coordinators	Count	155	27	182
	%	85.2%	14.8%	100.0%
Other (admin/managerial)	Count	24	4	28
	%	85.7%	14.3%	100.0%
Total	Count	1233	287	1520
	%	81.1%	18.9%	100.0%

Table: B232 Being an MDT member improves job satisfaction: by professional group

Disciplir	ne.			IDT member b satisfaction	Total
Biooipiii			strongly agree/agree	disagree/strong ly disagree	
-	Surgeon	Count	186	55	241
		%	77.2%	22.8%	100.0%
	Radiologist	Count	85	15	100
		%	85.0%	15.0%	100.0%
	Histo/cytopathologist	Count	87	17	104
		%	83.7%	16.3%	100.0%
	Oncologist (clinical and medical)	Count	103	30	133
		%	77.4%	22.6%	100.0%
	Haematologist	Count	49	30	79
		%	62.0%	38.0%	100.0%
	Other Doctor (Physician, GP etc)	Count	108	36	144
		%	75.0%	25.0%	100.0%
	Palliative care specialist	Count	47	8	55
		%	85.5%	14.5%	100.0%
	Clinical Nurse Specialist	Count	310	59	369
		%	84.0%	16.0%	100.0%
	Nursing (other)	Count	24	4	28
		%	85.7%	14.3%	100.0%
	Allied Health Professional	Count	55	2	57
		%	96.5%	3.5%	100.0%
	MDT coordinator	Count	155	27	182
		%	85.2%	14.8%	100.0%
	Other (admin/clerical and managerial)	Count	24	4	28
		%	85.7%	14.3%	100.0%
Total		Count	1233	287	1520
		%	81.1%	18.9%	100.0%

Table: B233 Being an MDT member improves job satisfaction: by discipline

Tumour type			IDT member b satisfaction	Total
,		strongly agree/agree	disagree/strong ly disagree	
Breast	Count	135	24	159
	%	84.9%	15.1%	100.0%
Colorectal	Count	78	19	97
	%	80.4%	19.6%	100.0%
Lung	Count	85	21	106
	%	80.2%	19.8%	100.0%
Gynae	Count	79	12	91
	%	86.8%	13.2%	100.0%
Head and Neck	Count	67	10	77
	%	87.0%	13.0%	100.0%
Upper GI	Count	72	19	91
	%	79.1%	20.9%	100.0%
Urological	Count	80	19	99
	%	80.8%	19.2%	100.0%
Haematological	Count	91	41	132
	%	68.9%	31.1%	100.0%
Skin	Count	49	14	63
	%	77.8%	22.2%	100.0%
Supportive and Palliative Care	Count	30	3	33
	%	90.9%	9.1%	100.0%
Brain/CNS	Count	19	1	20
	%	95.0%	5.0%	100.0%
Sarcoma	Count	12	1	13
	%	92.3%	7.7%	100.0%
Children/Young People	Count	8	2	10
	%	80.0%	20.0%	100.0%
Endocrine	Count	1	0	1
	%	100.0%	.0%	100.0%
Total	Count	806	186	992
	%	81.3%	18.8%	100.0%

Table: B234 Being an MDT member improves job satisfaction: by tumour type

		The MDT should contribute to the continuing professional development of all members		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	836	54	890
	%	93.9%	6.1%	100.0%
Nurses	Count	391	17	408
	%	95.8%	4.2%	100.0%
AHPs	Count	58	1	59
	%	98.3%	1.7%	100.0%
MDT coordinators	Count	186	6	192
	%	96.9%	3.1%	100.0%
Other (admin/managerial)	Count	26	4	30
,	%	86.7%	13.3%	100.0%
Total	Count	1497	82	1579
	%	94.8%	5.2%	100.0%

Table: B235 The MDT should contribute to the continuing professional development of all members: by professional group

Table: B236 MDTs provide an opportunity for education and learning for staff in all disciplines: by professional group

		MDTs provide an opportunity for education and learning for staff in all disciplines		Total
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	847	53	900
	%	94.1%	5.9%	100.0%
Nurses	Count	407	9	416
	%	97.8%	2.2%	100.0%
AHPs	Count	60	0	60
	%	100.0%	.0%	100.0%
MDT coordinators	Count	195	16	211
	%	92.4%	7.6%	100.0%
Other (admin/managerial)	Count	30	2	32
,	%	93.8%	6.3%	100.0%
Total	Count	1539	80	1619
	%	95.1%	4.9%	100.0%

C Outcomes from effective MDT working

Table: B237 Effective MDT working results in:	•	usting for missing ata)
	Strongly agree/ Agree	Disagree/ Strongly disagree
Improved clinical decision making	1878 (97)	52 (3)
More coordinated patient care	1854 (96)	73 (4)
Improvement to overall quality of care	1788 (94)	106 (6)
Evidence-based treatment decisions	1779 (93)	125 (7)
Improved treatment	1627 (90)	182 (10)
Increase in proportion of patients considered for trials	1502 (86)	241 (14)
Improved timeliness of tests/treatments	1566 (83)	329 (17)
Improved survival rates at appropriate intervals	1038 (80)	265 (20)
Increase in proportion of patients staged	1360 (79)	372 (22)
Improved patient choice	1130 (64)	638 (36)
Improved patient involvement in treatment decisions	990 (57)	761 (44)

Table: C1 Effective MDT working results in Improved clinical decision making: answers by professional group

Professional Group			linical decision aking	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	985	46	1031
	%	95.5%	4.5%	100.0%
Nurses	Count	507	4	511
	%	99.2%	.8%	100.0%
AHPs	Count	80	0	80
	%	100.0%	.0%	100.0%
MDT coordinators	Count	267	1	268
	%	99.6%	.4%	100.0%
Other (admin/managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1878	52	1930
	%	97.3%	2.7%	100.0%

Discipline			linical decision aking	Total
2.00.p		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	280	21	301
	%	93.0%	7.0%	100.0%
Radiologist	Count	117	1	118
	%	99.2%	.8%	100.0%
Histo/cytopathologist	Count	117	2	119
	%	98.3%	1.7%	100.0%
Oncologist (clinical and medical)	Count	156	5	161
	%	96.9%	3.1%	100.0%
Haematologist	Count	84	8	92
	%	91.3%	8.7%	100.0%
Other Doctor (Physician, GP etc)	Count	171	6	177
	%	96.6%	3.4%	100.0%
Palliative care specialist	Count	60	3	63
	%	95.2%	4.8%	100.0%
Clinical Nurse Specialist	Count	474	4	478
	%	99.2%	.8%	100.0%
Nursing (other)	Count	33	0	33
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	80	0	80
	%	100.0%	.0%	100.0%
MDT coordinator	Count	267	1	268
	%	99.6%	.4%	100.0%
Other (admin/clerical and managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1878	52	1930
	%	97.3%	2.7%	100.0%

Table: C2 Effective MDT working results in improved clinical decision making: by discipline

Tumour type			linical decision aking	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	190	1	191
	%	99.5%	.5%	100.0%
Colorectal	Count	122	2	124
	%	98.4%	1.6%	100.0%
Lung	Count	135	2	137
	%	98.5%	1.5%	100.0%
Gynae	Count	106	1	107
	%	99.1%	.9%	100.0%
Head and Neck	Count	100	1	101
	%	99.0%	1.0%	100.0%
Upper GI	Count	115	3	118
	%	97.5%	2.5%	100.0%
Urological	Count	121	7	128
	%	94.5%	5.5%	100.0%
Haematological	Count	156	10	166
	%	94.0%	6.0%	100.0%
Skin	Count	78	3	81
	%	96.3%	3.7%	100.0%
Supportive and Palliative Care	Count	43	0	43
	%	100.0%	.0%	100.0%
Brain/CNS	Count	29	0	29
	%	100.0%	.0%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	13	0	13
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1226	30	1256
	%	97.6%	2.4%	100.0%

Table: C3 Effective MDT working results in improved clinical decision making: by tumour type

Professional Group		Moro co ordir	nated patient care	Total
			disagree/strongly disagree	Total
Doctors	Count	968	61	1029
	%	94.1%	5.9%	100.0%
Nurses	Count	502	8	510
	%	98.4%	1.6%	100.0%
AHPs	Count	77	1	78
	%	98.7%	1.3%	100.0%
MDT coordinators	Count	268	2	270
	%	99.3%	.7%	100.0%
Other (admin/managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1854	73	1927
	%	96.2%	3.8%	100.0%

Table: C4 Effective MDT working results in more co-ordinated patient care – answers: by professional group

		More co-ordina	ted patient care	Total
Discipline		strongly agree/agree	disagree/ strongly disagree	
Surgeon	Count	279	22	301
	%	92.7%	7.3%	100.0%
Radiologist	Count	112	3	115
	%	97.4%	2.6%	100.0%
Histo/cytopathologist	Count	114	3	117
	%	97.4%	2.6%	100.0%
Oncologist (clinical and medical)	Count	154	6	160
	%	96.3%	3.8%	100.0%
Haematologist	Count	76	15	91
	%	83.5%	16.5%	100.0%
Other Doctor (Physician, GP etc)	Count	172	10	182
	%	94.5%	5.5%	100.0%
Palliative care specialist	Count	61	2	63
	%	96.8%	3.2%	100.0%
Clinical Nurse Specialist	Count	470	7	477
	%	98.5%	1.5%	100.0%
Nursing (other)	Count	32	1	33
	%	97.0%	3.0%	100.0%
Allied Health Professional	Count	77	1	78
	%	98.7%	1.3%	100.0%
MDT coordinator	Count	268	2	270
	%	99.3%	.7%	100.0%
Other (admin/clerical and managerial)	Count	39	1	40
	%	97.5%	2.5%	100.0%
Total	Count	1854	73	1927
	%	96.2%	3.8%	100.0%

Table: C5 Effective MDT working results in more co-ordinated patient care: answers: by discipline

Tumour type		More co-ordir	nated patient care	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	191	1	192
	%	99.5%	.5%	100.0%
Colorectal	Count	119	5	124
	%	96.0%	4.0%	100.0%
Lung	Count	134	3	137
	%	97.8%	2.2%	100.0%
Gynae	Count	103	3	106
	%	97.2%	2.8%	100.0%
Head and Neck	Count	96	4	100
	%	96.0%	4.0%	100.0%
Upper GI	Count	113	5	118
	%	95.8%	4.2%	100.0%
Urological	Count	120	5	125
	%	96.0%	4.0%	100.0%
Haematological	Count	144	19	163
	%	88.3%	11.7%	100.0%
Skin	Count	78	5	83
	%	94.0%	6.0%	100.0%
Supportive and Palliative Care	Count	43	1	44
	%	97.7%	2.3%	100.0%
Brain/CNS	Count	28	1	29
	%	96.6%	3.4%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	13	0	13
	%	100.0%	.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1200	52	1252
	%	95.8%	4.2%	100.0%

Table: C6 Effective MDT working results in more co-ordinated patient care: answers: by tumour type

Professional Group	Professional Group		ased treatment cisions	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	914	103	1017
	%	89.9%	10.1%	100.0%
Nurses	Count	497	12	509
	%	97.6%	2.4%	100.0%
AHPs	Count	75	2	77
	%	97.4%	2.6%	100.0%
MDT coordinators	Count	256	6	262
	%	97.7%	2.3%	100.0%
Other (admin/managerial)	Count	37	2	39
	%	94.9%	5.1%	100.0%
Total	Count	1779	125	1904
	%	93.4%	6.6%	100.0%

Table: C6 Effective MDT working results in evidence-based treatment decisions – answers: by professional group

Discipline			ased treatment cisions	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	257	42	299
	%	86.0%	14.0%	100.0%
Radiologist	Count	108	9	117
	%	92.3%	7.7%	100.0%
Histo/cytopathologist	Count	106	10	116
	%	91.4%	8.6%	100.0%
Oncologist (clinical and medical)	Count	147	11	158
		93.0%	7.0%	100.0%
Haematologist	Count	81	10	91
	%	89.0%	11.0%	100.0%
Other Doctor (Physician, GP etc)	Count	160	17	177
	%	90.4%	9.6%	100.0%
Palliative care specialist	Count	55	4	59
	%	93.2%	6.8%	100.0%
Clinical Nurse Specialist	Count	465	11	476
	%	97.7%	2.3%	100.0%
Nursing (other)	Count	32	1	33
	%	97.0%	3.0%	100.0%
Allied Health Professional	Count	75	2	77
	%	97.4%	2.6%	100.0%
MDT coordinator	Count	256	6	262
	%	97.7%	2.3%	100.0%
Other (admin/clerical and managerial)	Count	37	2	39
. ,	%	94.9%	5.1%	100.0%
Total	Count	1779	125	1904
	%	93.4%	6.6%	100.0%

Table: C7 Effective MDT working results in evidence-based treatment decisions: answers: by discipline

Tumour type			ased treatment cisions	Total
ramour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	187	4	191
	%	97.9%	2.1%	100.0%
Colorectal	Count	116	5	121
	%	95.9%	4.1%	100.0%
Lung	Count	134	4	138
	%	97.1%	2.9%	100.0%
Gynae	Count	102	4	106
	%	96.2%	3.8%	100.0%
Head and Neck	Count	87	9	96
	%	90.6%	9.4%	100.0%
Upper GI	Count	109	9	118
	%	92.4%	7.6%	100.0%
Urological	Count	121	7	128
	%	94.5%	5.5%	100.0%
Haematological	Count	150	14	164
	%	91.5%	8.5%	100.0%
Skin	Count	71	9	80
	%	88.8%	11.3%	100.0%
Supportive and Palliative Care	Count	37	5	42
	%	88.1%	11.9%	100.0%
Brain/CNS	Count	25	2	27
	%	92.6%	7.4%	100.0%
Sarcoma	Count	15	1	16
	%	93.8%	6.3%	100.0%
Children/Young People	Count	9	3	12
	%	75.0%	25.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1165	76	1241
	%	93.9%	6.1%	100.0%

Table: C8 Effective MDT working results in evidence-based treatment decisions: answers: by tumour type

Professional Group			timeliness of reatments	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	740	274	1014
	%	73.0%	27.0%	100.0%
Nurses	Count	460	40	500
	%	92.0%	8.0%	100.0%
AHPs	Count	76	1	77
	%	98.7%	1.3%	100.0%
MDT coordinators	Count	257	8	265
	%	97.0%	3.0%	100.0%
Other (admin/managerial)	Count	33	6	39
	%	84.6%	15.4%	100.0%
Total	Count	1566	329	1895
	%	82.6%	17.4%	100.0%

Table: C9 Effective MDT working results in Improved timeliness of tests/treatments:answers: by professional group

Discipline			timeliness of eatments	Total
Bioopino		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	224	72	296
	%	75.7%	24.3%	100.0%
Radiologist	Count	95	22	117
	%	81.2%	18.8%	100.0%
Histo/cytopathologist	Count	84	33	117
	%	71.8%	28.2%	100.0%
Oncologist (clinical and medical)	Count	120	38	158
	%	75.9%	24.1%	100.0%
Haematologist	Count	41	52	93
	%	44.1%	55.9%	100.0%
Other Doctor (Physician, GP etc)	Count	131	46	177
	%	74.0%	26.0%	100.0%
Palliative care specialist	Count	45	11	56
	%	80.4%	19.6%	100.0%
Clinical Nurse Specialist	Count	431	38	469
	%	91.9%	8.1%	100.0%
Nursing (other)	Count	29	2	31
	%	93.5%	6.5%	100.0%
Allied Health Professional	Count	76	1	77
	%	98.7%	1.3%	100.0%
MDT coordinator	Count	257	8	265
	%	97.0%	3.0%	100.0%
Other (admin/clerical and managerial)	Count	33	6	39
	%	84.6%	15.4%	100.0%
Total	Count	1566	329	1895
	%	82.6%	17.4%	100.0%

Table: C10 Effective MDT working results in improved timeliness of tests/treatments: answers: by discipline

Tumour type	Tumour type		timeliness of reatments	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	164	25	189
	%	86.8%	13.2%	100.0%
Colorectal	Count	107	14	121
	%	88.4%	11.6%	100.0%
Lung	Count	119	16	135
	%	88.1%	11.9%	100.0%
Gynae	Count	91	15	106
	%	85.8%	14.2%	100.0%
Head and Neck	Count	88	10	98
	%	89.8%	10.2%	100.0%
Upper GI	Count	101	14	115
	%	87.8%	12.2%	100.0%
Urological	Count	107	20	127
	%	84.3%	15.7%	100.0%
Haematological	Count	97	69	166
	%	58.4%	41.6%	100.0%
Skin	Count	62	17	79
	%	78.5%	21.5%	100.0%
Supportive and Palliative Care	Count	36	4	40
	%	90.0%	10.0%	100.0%
Brain/CNS	Count	19	7	26
	%	73.1%	26.9%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	9	3	12
	%	75.0%	25.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1018	214	1232
	%	82.6%	17.4%	100.0%

Table: C11 Effective MDT working results in improved timeliness of tests/treatments: answers: by tumour type

Professional Group		-	o overall quality of care	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	927	82	1009
	%	91.9%	8.1%	100.0%
Nurses	Count	490	15	505
	%	97.0%	3.0%	100.0%
AHPs	Count	80	1	81
	%	98.8%	1.2%	100.0%
MDT coordinators	Count	254	6	260
	%	97.7%	2.3%	100.0%
Other (admin/managerial)	Count	37	2	39
	%	94.9%	5.1%	100.0%
Total	Count	1788	106	1894
	%	94.4%	5.6%	100.0%

Table: C12 Effective MDT working results in Improvement to overall quality of care: answers: by professional group

Discipline			o overall quality of care	Total
Dissipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	264	34	298
	%	88.6%	11.4%	100.0%
Radiologist	Count	112	4	116
	%	96.6%	3.4%	100.0%
Histo/cytopathologist	Count	112	3	115
	%	97.4%	2.6%	100.0%
Oncologist (clinical and medical)	Count	154	6	160
	%	96.3%	3.8%	100.0%
Haematologist	Count	72	16	88
	%	81.8%	18.2%	100.0%
Other Doctor (Physician, GP etc)	Count	156	16	172
	%	90.7%	9.3%	100.0%
Palliative care specialist	Count	57	3	60
	%	95.0%	5.0%	100.0%
Clinical Nurse Specialist	Count	459	14	473
	%	97.0%	3.0%	100.0%
Nursing (other)	Count	31	1	32
	%	96.9%	3.1%	100.0%
Allied Health Professional	Count	80	1	81
	%	98.8%	1.2%	100.0%
MDT coordinator	Count	254	6	260
	%	97.7%	2.3%	100.0%
Other (admin/clerical and managerial)	Count	37	2	39
	%	94.9%	5.1%	100.0%
Total	Count	1788	106	1894
	%	94.4%	5.6%	100.0%

Table: C13 Effective MDT working results in improvement to overall quality of care: answers: by discipline

Tumour type			o overall quality of care	Total
rumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	188	3	191
	%	98.4%	1.6%	100.0%
Colorectal	Count	117	6	123
	%	95.1%	4.9%	100.0%
Lung	Count	129	4	133
	%	97.0%	3.0%	100.0%
Gynae	Count	101	5	106
	%	95.3%	4.7%	100.0%
Head and Neck	Count	95	5	100
	%	95.0%	5.0%	100.0%
Upper GI	Count	106	7	113
		93.8%	6.2%	100.0%
Urological	Count	114	13	127
	%	89.8%	10.2%	100.0%
Haematological	Count	139	23	162
	%	85.8%	14.2%	100.0%
Skin	Count	72	6	78
	%	92.3%	7.7%	100.0%
Supportive and Palliative Care	Count	41	1	42
	%	97.6%	2.4%	100.0%
Brain/CNS	Count	29	0	29
	%	100.0%	.0%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	10	1	11
	%	90.9%	9.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1159	74	1233
	%	94.0%	6.0%	100.0%

Table: C14 Effective MDT working results in improvement to overall quality of care:answers: by tumour type

Professional Group			patient choice	Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	425	508	933
	%	45.6%	54.4%	100.0%
Nurses	Count	404	82	486
	%	83.1%	16.9%	100.0%
AHPs	Count	64	9	73
	%	87.7%	12.3%	100.0%
MDT coordinators	Count	210	33	243
	%	86.4%	13.6%	100.0%
Other (admin/managerial)	Count	27	6	33
	%	81.8%	18.2%	100.0%
Total	Count	1130	638	1768
	%	63.9%	36.1%	100.0%

Table: C15 Effective MDT working results in improved patient choice: answers: by professional group

Dia sin lin s		Improved	patient choice	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	115	169	284
	%	40.5%	59.5%	100.0%
Radiologist	Count	56	44	100
	%	56.0%	44.0%	100.0%
Histo/cytopathologist	Count	48	45	93
	%	51.6%	48.4%	100.0%
Oncologist (clinical and medical)	Count	76	67	143
	%	53.1%	46.9%	100.0%
Haematologist	Count	21	69	90
	%	23.3%	76.7%	100.0%
Other Doctor (Physician, GP etc)	Count	77	92	169
	%	45.6%	54.4%	100.0%
Palliative care specialist	Count	32	22	54
	%	59.3%	40.7%	100.0%
Clinical Nurse Specialist	Count	380	76	456
	%	83.3%	16.7%	100.0%
Nursing (other)	Count	24	6	30
	%	80.0%	20.0%	100.0%
Allied Health Professional	Count	64	9	73
	%	87.7%	12.3%	100.0%
MDT coordinator	Count	210	33	243
	%	86.4%	13.6%	100.0%
Other (admin/clerical and managerial)	Count	27	6	33
	%	81.8%	18.2%	100.0%
Total	Count	1130	638	1768
	%	63.9%	36.1%	100.0%

Table: C16 Effective MDT working results in improved patient choice: answers: by discipline

		Improved patient choice		Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	136	43	179
	%	76.0%	24.0%	100.0%
Colorectal	Count	75	39	114
	%	65.8%	34.2%	100.0%
Lung	Count	90	38	12
	%	70.3%	29.7%	100.09
Gynae	Count	65	35	10
	%	65.0%	35.0%	100.09
Head and Neck	Count	68	24	9
	%	73.9%	26.1%	100.09
Upper GI	Count	74	39	11
	%	65.5%	34.5%	100.09
Urological	Count	87	36	12
	%	70.7%	29.3%	100.09
Haematological	Count	65	94	15
	%	40.9%	59.1%	100.09
Skin	Count	43	31	7
	%	58.1%	41.9%	100.0
Supportive and Palliative Care	Count	28	11	3
	%	71.8%	28.2%	100.0
Brain/CNS	Count	15	10	2
	%	60.0%	40.0%	100.0
Sarcoma	Count	12	3	1
	%	80.0%	20.0%	100.09
Children/Young People	Count	5	6	1
	%	45.5%	54.5%	100.09
Endocrine	Count	2	0	
	%	100.0%	.0%	100.09
Total	Count	765	409	117
	%	65.2%	34.8%	100.09

Table: C17 Effective MDT working results in improved patient choice: answers: by tumour type

Professional Group		Improved patient involvement in treatment decisions		Total
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	338	583	921
	%	36.7%	63.3%	100.0%
Nurses	Count	373	109	482
	%	77.4%	22.6%	100.0%
AHPs	Count	55	17	72
	%	76.4%	23.6%	100.0%
MDT coordinators	Count	204	41	245
	%	83.3%	16.7%	100.0%
Other (admin/managerial)	Count	20	11	31
	%	64.5%	35.5%	100.0%
Total	Count	990	761	1751
	%	56.5%	43.5%	100.0%

Table: C18 Effective MDT working results in improved patient involvement in treatment decisions: answers: by professional group cluster

Discipline		Improved patient involvement in treatment decisions		Total
Discipline	strongly disagree/strongly agree/agree disagree			
Surgeon	Count	108	179	287
	%	37.6%	62.4%	100.0%
Radiologist	Count	50	48	98
	%	51.0%	49.0%	100.0%
Histo/cytopathologist	Count	40	49	89
	%	44.9%	55.1%	100.0%
Oncologist (clinical and medical)	Count	42	95	137
	%	30.7%	69.3%	100.0%
Haematologist	Count	12	78	90
	%	13.3%	86.7%	100.0%
Other Doctor (Physician, GP etc)	Count	59	107	166
,	%	35.5%	64.5%	100.0%
Palliative care specialist	Count	27	27	54
	%	50.0%	50.0%	100.0%
Clinical Nurse Specialist	Count	351	102	453
	%	77.5%	22.5%	100.0%
Nursing (other)	Count	22	7	29
	%	75.9%	24.1%	100.0%
Allied Health Professional	Count	55	17	72
	%	76.4%	23.6%	100.0%
MDT coordinator	Count	204	41	245
	%	83.3%	16.7%	100.0%
Other (admin/clerical and managerial)	Count	20	11	31
	%	64.5%	35.5%	100.0%
Total	Count	990	761	1751
	%	56.5%	43.5%	100.0%

Table: C19 Effective MDT working results in improved patient involvement in treatment decisions: answers: by discipline

Tumour type		Improved patient involvement in treatment decisions		Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	127	48	175
	%	72.6%	27.4%	100.0%
Colorectal	Count	65	46	111
	%	58.6%	41.4%	100.0%
Lung	Count	74	56	130
	%	56.9%	43.1%	100.0%
Gynae	Count	56	42	98
	%	57.1%	42.9%	100.0%
Head and Neck	Count	66	27	93
	%	71.0%	29.0%	100.0%
Upper GI	Count	70	37	107
	%	65.4%	34.6%	100.0%
Urological	Count	72	51	123
	%	58.5%	41.5%	100.0%
Haematological	Count	54	107	161
	%	33.5%	66.5%	100.0%
Skin	Count	35	40	75
	%	46.7%	53.3%	100.0%
Supportive and Palliative Care	Count	26	12	38
	%	68.4%	31.6%	100.0%
Brain/CNS	Count	12	13	25
	%	48.0%	52.0%	100.0%
Sarcoma	Count	10	4	14
	%	71.4%	28.6%	100.0%
Children/Young People	Count	6	4	10
	%	60.0%	40.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	675	487	1162
	%	58.1%	41.9%	100.0%

Table: C20 Effective MDT working results in improved patient involvement in treatment decisions: answers: by tumour type

Professional Group		Increase in proportion of patients staged		Total
			disagree/strongly disagree	
Doctors	Count	685	261	946
	%	72.4%	27.6%	100.0%
Nurses	Count	387	85	472
	%	82.0%	18.0%	100.0%
AHPs	Count	49	4	53
	%	92.5%	7.5%	100.0%
MDT coordinators	Count	214	16	230
	%	93.0%	7.0%	100.0%
Other (admin/managerial)	Count	25	6	31
	%	80.6%	19.4%	100.0%
Total	Count	1360	372	1732
	%	78.5%	21.5%	100.0%

Table: C21 Effective MDT working results in Increase in proportion of patients staged: answers: by professional group cluster

Discipline			portion of patients aged	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	197	95	292
	%	67.5%	32.5%	100.0%
Radiologist	Count	91	20	111
	%	82.0%	18.0%	100.0%
Histo/cytopathologist	Count	83	20	103
	%	80.6%	19.4%	100.0%
Oncologist (clinical and medical)	Count	116	33	149
	%	77.9%	22.1%	100.0%
Haematologist		37	51	88
	%	42.0%	58.0%	100.0%
Other Doctor (Physician, GP etc)	Count	125	38	163
,	%	76.7%	23.3%	100.0%
Palliative care specialist	Count	36	4	40
	%	90.0%	10.0%	100.0%
Clinical Nurse Specialist	Count	362	82	444
	%	81.5%	18.5%	100.0%
Nursing (other)	Count	25	3	28
	%	89.3%	10.7%	100.0%
Allied Health Professional	Count	49	4	53
	%	92.5%	7.5%	100.0%
MDT coordinator	Count	214	16	230
	%	93.0%	7.0%	100.0%
Other (admin/clerical and managerial)	Count	25	6	31
	%	80.6%	19.4%	100.0%
Total	Count	1360	372	1732
	%	78.5%	21.5%	100.0%

Table: C22 Effective MDT working results in increase in proportion of patients staged: answers: by discipline

Tumour type			n proportion of hts staged	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	122	50	172
	%	70.9%	29.1%	100.0%
Colorectal	Count	94	27	121
	%	77.7%	22.3%	100.0%
Lung	Count	125	9	134
	%	93.3%	6.7%	100.0%
Gynae	Count	94	13	107
	%	87.9%	12.1%	100.0%
Head and Neck	Count	76	4	80
	%	95.0%	5.0%	100.0%
Upper GI	Count	87	25	112
	%	77.7%	22.3%	100.0%
Urological	Count	76	42	118
	%	64.4%	35.6%	100.0%
Haematological	Count	82	72	154
	%	53.2%	46.8%	100.0%
Skin	Count	47	25	72
	%	65.3%	34.7%	100.0%
Supportive and Palliative Care	Count	11	3	14
	%	78.6%	21.4%	100.0%
Brain/CNS	Count	18	5	23
	%	78.3%	21.7%	100.0%
Sarcoma	Count	13	2	15
	%	86.7%	13.3%	100.0%
Children/Young People	Count	6	4	10
	%	60.0%	40.0%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	853	281	1134
	%	75.2%	24.8%	100.0%

Table: C23 Effective MDT working results in increase in proportion of patients staged: answers: by tumour type

Professional Group	Professional Group		n proportion of sidered for trials	Total
			disagree/strongly disagree	
Doctors	Count	808	154	962
	%	84.0%	16.0%	100.0%
Nurses	Count	416	54	470
	%	88.5%	11.5%	100.0%
AHPs	Count	44	6	50
	%	88.0%	12.0%	100.0%
MDT coordinators	Count	205	20	225
	%	91.1%	8.9%	100.0%
Other (admin/managerial)	Count	29	7	36
	%	80.6%	19.4%	100.0%
Total	Count	1502	241	1743
	%	86.2%	13.8%	100.0%

Table: C24 Effective MDT working results in Increase in proportion of patients considered for trials: answers: by professional group cluster.

Discipline			portion of patients red for trials	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	248	43	291
	%	85.2%	14.8%	100.0%
Radiologist	Count	100	10	110
	%	90.9%	9.1%	100.0%
Histo/cytopathologist	Count	96	11	107
	%	89.7%	10.3%	100.0%
Oncologist (clinical and medical)	Count	135	23	158
	%	85.4%	14.6%	100.0%
Haematologist	Count	68	25	93
	%	73.1%	26.9%	100.0%
Other Doctor (Physician, GP etc)	Count	127	37	164
,	%	77.4%	22.6%	100.0%
Palliative care specialist	Count	34	5	39
	%	87.2%	12.8%	100.0%
Clinical Nurse Specialist	Count	385	52	437
	%	88.1%	11.9%	100.0%
Nursing (other)	Count	31	2	33
	%	93.9%	6.1%	100.0%
Allied Health Professional	Count	44	6	50
	%	88.0%	12.0%	100.0%
MDT coordinator	Count	205	20	225
	%	91.1%	8.9%	100.0%
Other (admin/clerical and managerial)	Count	29	7	36
	%	80.6%	19.4%	100.0%
Total	Count	1502	241	1743
	%	86.2%	13.8%	100.0%

Table: C25 Effective MDT working results in increase in proportion of patients considered for trials: answers: by discipline

Tumour type			portion of patients red for trials	Total
		strongly agree/agree	disagree/strongly disagree	
Breast	Count	167	19	186
	%	89.8%	10.2%	100.0%
Colorectal	Count	104	11	115
	%	90.4%	9.6%	100.0%
Lung	Count	114	15	129
	%	88.4%	11.6%	100.0%
Gynae	Count	81	17	98
	%	82.7%	17.3%	100.0%
Head and Neck	Count	63	15	78
	%	80.8%	19.2%	100.0%
Upper GI	Count	87	19	106
	%	82.1%	17.9%	100.0%
Urological	Count	111	8	119
	%	93.3%	6.7%	100.0%
Haematological	Count	123	35	158
	%	77.8%	22.2%	100.0%
Skin	Count	58	16	74
	%	78.4%	21.6%	100.0%
Supportive and Palliative Care	Count	14	3	17
	%	82.4%	17.6%	100.0%
Brain/CNS	Count	21	5	26
	%	80.8%	19.2%	100.0%
Sarcoma	Count	14	1	15
	%	93.3%	6.7%	100.0%
Children/Young People	Count	7	4	11
	%	63.6%	36.4%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	966	168	1134
	%	85.2%	14.8%	100.0%

Table: C26 Effective MDT working results in increase in proportion of patients considered for trials: answers: by tumour type

		Improve	ed treatment	Total
Professional Group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	835	129	964
	%	86.6%	13.4%	100.0%
Nurses	Count	456	34	490
	%	93.1%	6.9%	100.0%
AHPs	Count	73	2	75
	%	97.3%	2.7%	100.0%
MDT coordinators	Count	228	14	242
	%	94.2%	5.8%	100.0%
Other (admin/managerial)	Count	35	3	38
	%	92.1%	7.9%	100.0%
Total	Count	1627	182	1809
	%	89.9%	10.1%	100.0%

Table: C27 Effective MDT working results in improved treatment: answers: by professional group

		Improved	I treatment	Total
Discipline		strongly	disagree/strongl	
		agree/agree	y disagree	
Surgeon	Count	243	49	292
	%	83.2%	16.8%	100.0%
Radiologist	Count	102	8	11
	%	92.7%	7.3%	100.0%
Histo/cytopathologist	Count	100	8	10
	%	92.6%	7.4%	100.0%
Oncologist (clinical and medical)	Count	136	14	15
	%	90.7%	9.3%	100.09
Haematologist	Count	62	24	8
	%	72.1%	27.9%	100.09
Other Doctor (Physician, GP etc)	Count	140	23	16
	%	85.9%	14.1%	100.09
Palliative care specialist	Count	52	3	5
	%	94.5%	5.5%	100.09
Clinical Nurse Specialist	Count	427	32	45
	%?	93.0%	7.0%	100.09
Nursing (other)	Count	29	2	3
	%	93.5%	6.5%	100.09
Allied Health Professional	Count	73	2	7
	%	97.3%	2.7%	100.09
MDT coordinator	Count	228	14	24
	%	94.2%	5.8%	100.09
Other (admin/clerical and managerial)	Count	35	3	3
	%	92.1%	7.9%	100.09
Total	Count	1627	182	180
	%	89.9%	10.1%	100.0%

Table: C28 Effective MDT working results in improved treatment: answers: by discipline

		Improve	d treatment	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	172	10	182
	%	94.5%	5.5%	100.0%
Colorectal	Count	110	8	118
	%	93.2%	6.8%	100.0%
Lung	Count	118	9	127
	%	92.9%	7.1%	100.0%
Gynae	Count	92	6	98
	%	93.9%	6.1%	100.0%
Head and Neck	Count	89	5	94
	%	94.7%	5.3%	100.0%
Upper GI	Count	104	9	113
	%	92.0%	8.0%	100.0%
Urological	Count	96	25	121
	%	79.3%	20.7%	100.0%
Haematological	Count	119	34	153
	%	77.8%	22.2%	100.0%
Skin	Count	62	15	77
	%	80.5%	19.5%	100.0%
Supportive and Palliative Care	Count	38	1	39
	%	97.4%	2.6%	100.0%
Brain/CNS	Count	26	0	26
	%	100.0%	.0%	100.0%
Sarcoma	Count	16	0	16
	%	100.0%	.0%	100.0%
Children/Young People	Count	10	1	11
	%	90.9%	9.1%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	1054	123	1177
	%	89.5%	10.5%	100.0%

Table: C29 Effective MDT working results in improved treatment: answers: by tumour type

Professional Group	Professional Group		Improved survival rates at appropriate intervals	
		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	449	193	642
	%	69.9%	30.1%	100.0%
Nurses	Count	343	47	390
	%	87.9%	12.1%	100.0%
AHPs	Count	44	2	46
	%	95.7%	4.3%	100.0%
MDT coordinators	Count	180	18	198
	%	90.9%	9.1%	100.0%
Other (admin/managerial)	Count	22	5	27
	%	81.5%	18.5%	100.0%
Total	Count	1038	265	1303
	%	79.7%	20.3%	100.0%

Table: C30 Effective MDT working results in Improved survival rates at appropriateintervals: answers: by professional group

Discipline				rvival rates at te intervals	Total
Discipline			strongly agree/agree	disagree/stro ngly disagree	
	Surgeon	Count	146	76	222
		%	65.8%	34.2%	100.0%
	Radiologist	Count	61	13	74
		%	82.4%	17.6%	100.0%
	Histo/cytopathologist	Count	57	9	66
		%	86.4%	13.6%	100.0%
	Oncologist (clinical and medical)	Count	73	20	93
		%	78.5%	21.5%	100.0%
	Haematologist	Count	25	32	57
		%	43.9%	56.1%	100.0%
	Other Doctor (Physician, GP etc)	Count	68	39	107
		%	63.6%	36.4%	100.0%
	Palliative care specialist	Count	19	4	23
		%	82.6%	17.4%	100.0%
	Clinical Nurse Specialist	Count	326	43	369
		%	88.3%	11.7%	100.0%
	Nursing (other)	Count	17	4	21
		%	81.0%	19.0%	100.0%
	Allied Health Professional	Count	44	2	46
		%	95.7%	4.3%	100.0%
	MDT coordinator	Count	180	18	198
		%	90.9%	9.1%	100.0%
	Other (admin/clerical and managerial)	Count	22	5	27
		%	81.5%	18.5%	100.0%
Total		Count	1038	265	1303
		%	79.7%	20.3%	100.0%

Table: C31 Effective MDT working results in improved survival rates at appropriate intervals: answers: by discipline

Tumour type			survival rates at iate intervals	Total
rumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	123	19	142
	%	86.6%	13.4%	100.0%
Colorectal	Count	79	15	94
	%	84.0%	16.0%	100.0%
Lung	Count	76	22	98
	%	77.6%	22.4%	100.0%
Gynae	Count	66	15	81
	%	81.5%	18.5%	100.0%
Head and Neck	Count	57	6	63
	%	90.5%	9.5%	100.0%
Upper GI	Count	69	19	88
	%	78.4%	21.6%	100.0%
Urological	Count	69	22	91
	%	75.8%	24.2%	100.0%
Haematological	Count	59	43	102
	%	57.8%	42.2%	100.0%
Skin	Count	37	19	56
	%	66.1%	33.9%	100.0%
Supportive and Palliative Care	Count	12	3	15
	%	80.0%	20.0%	100.0%
Brain/CNS	Count	16	2	18
	%	88.9%	11.1%	100.0%
Sarcoma	Count	10	2	12
	%	83.3%	16.7%	100.0%
Children/Young People	Count	5	2	7
	%	71.4%	28.6%	100.0%
Endocrine	Count	1	0	1
	%	100.0%	.0%	100.0%
Total	Count	679	189	868
	%	78.2%	21.8%	100.0%

Table: C32 Effective MDT working results in improved survival rates at appropriate intervals: answers: by tumour type

D1: Measuring MDT effectiveness/performance

Table: D1 Team members	N (valid% - adjustir	ng for missing data)
perceptions about measuring MDT effectiveness/performance	Strongly agree/ Agree	Disagree/ Strongly disagree
MDTs need tools to support self- assessment and performance appraisal	1236 (86)	202 (14)
MDTs need performance measures	1230 (85)	222 (15)

Table: D2 MDTs need tools to support self-assessment and performance appraisal: by professional group

	MDTs need self-ass performa	Total		
Professional group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	639	156	795
	%	80.4%	19.6%	100.0%
Nurses	Count	359	21	380
	%	94.5%	5.5%	100.0%
AHPs	Count	40	6	46
	%	87.0%	13.0%	100.0%
MDT coordinators	Count	173	15	188
	%	92.0%	8.0%	100.0%
Other (admin/managerial)	Count	25	4	29
	%	86.2%	13.8%	100.0%
Total	Count	1236	202	1438
	%	86.0%	14.0%	100.0%

		assessment	ols to support self- and performance praisal	Total
Discipline		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	183	39	222
	%	82.4%	17.6%	100.0%
Radiologist	Count	71	18	89
	%	79.8%	20.2%	100.0%
Histo/cytopathologist	Count	66	24	90
	%	73.3%	26.7%	100.0%
Oncologist (clinical and medical)	Count	103	28	131
	%	78.6%	21.4%	100.0%
Haematologist	Count	57	15	72
	%	79.2%	20.8%	100.0%
Other Doctor (Physician, GP etc)	Count	114	26	140
,	%	81.4%	18.6%	100.0%
Palliative care specialist	Count	45	6	51
	%	88.2%	11.8%	100.0%
Clinical Nurse Specialist	Count	338	21	359
	%	94.2%	5.8%	100.0%
Nursing (other)	Count	21	0	21
	%	100.0%	.0%	100.0%
Allied Health Professional	Count	40	6	46
	%	87.0%	13.0%	100.0%
MDT coordinator	Count	173	15	188
	%	92.0%	8.0%	100.0%
Other (admin/clerical and managerial)	Count	25	4	29
U ,	%	86.2%	13.8%	100.0%
Total	Count	1236	202	1438
	%	86.0%	14.0%	100.0%

Table: D3 MDTs need tools to support self-assessment and performance appraisal: by discipline

-		assessment	ols to support self- and performance praisal	Total
Tumour type		strongly agree/agree	disagree/strongly disagree	
Breast	Count	113	25	138
	%	81.9%	18.1%	100.0%
Colorectal	Count	86	12	98
	%	87.8%	12.2%	100.0%
Lung	Count	92	14	106
	%	86.8%	13.2%	100.0%
Gynae	Count	72	10	82
	%	87.8%	12.2%	100.0%
Head and Neck	Count	66	5	71
	%	93.0%	7.0%	100.0%
Upper GI	Count	78	13	91
	%	85.7%	14.3%	100.0%
Urological	Count	86	9	95
	%	90.5%	9.5%	100.0%
Haematological	Count	99	26	125
	%	79.2%	20.8%	100.0%
Skin	Count	59	4	63
	%	93.7%	6.3%	100.0%
Supportive and Palliative Care	Count	26	2	28
	%	92.9%	7.1%	100.0%
Brain/CNS	Count	19	0	19
	%	100.0%	.0%	100.0%
Sarcoma	Count	10	0	10
	%	100.0%	.0%	100.0%
Children/Young People	Count	6	1	7
	%	85.7%	14.3%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	814	121	935
	%	87.1%	12.9%	100.0%

Table: D4 MDTs need tools to support self-assessment and performance appraisal: by tumour type

Professional group	Professional group		d performance asures	Total
i rorocolonial group		strongly agree/agree	disagree/strongly disagree	
Doctors	Count	618	185	803
	%	77.0%	23.0%	100.0%
Nurses	Count	369	14	383
	%	96.3%	3.7%	100.0%
AHPs	Count	43	5	48
	%	89.6%	10.4%	100.0%
MDT coordinators	Count	176	13	189
	%	93.1%	6.9%	100.0%
Other (admin/managerial)	Count	24	5	29
	%	82.8%	17.2%	100.0%
Total	Count	1230	222	1452
	%	84.7%	15.3%	100.0%

Table: D5 MDTs need performance measures: by professional group

Discipline			d performance asures	Total
		strongly agree/agree	disagree/strongly disagree	
Surgeon	Count	179	54	233
	%	76.8%	23.2%	100.0%
Radiologist	Count	72	18	90
	%	80.0%	20.0%	100.0%
Histo/cytopathologist	Count	65	29	94
	%	69.1%	30.9%	100.0%
Oncologist (clinical and medical)	Count	96	28	124
	%	77.4%	22.6%	100.0%
Haematologist	Count	54	18	72
	%	75.0%	25.0%	100.0%
Other Doctor (Physician, GP etc)	Count	115	27	142
	%	81.0%	19.0%	100.0%
Palliative care specialist	Count	37	11	48
	%	77.1%	22.9%	100.0%
Clinical Nurse Specialist	Count	346	13	359
	%	96.4%	3.6%	100.0%
Nursing (other)	Count	23	1	24
	%	95.8%	4.2%	100.0%
Allied Health Professional	Count	43	5	48
	%	89.6%	10.4%	100.0%
MDT coordinator	Count	176	13	189
	%	93.1%	6.9%	100.0%
Other (admin/clerical and managerial)	Count	24	5	29
	%	82.8%	17.2%	100.0%
Total	Count	1230	222	1452
	%	84.7%	15.3%	100.0%

Table: D6 MDTs need performance measures: by discipline

Tumour type			d performance easures	Total
· · · · · · · · · · · · · · · · · · ·		strongly agree/agree	disagree/strongly disagree	
Breast	Count	117	29	146
	%	80.1%	19.9%	100.0%
Colorectal	Count	84	16	100
	%	84.0%	16.0%	100.0%
Lung	Count	91	17	108
	%	84.3%	15.7%	100.0%
Gynae	Count	73	13	86
	%	84.9%	15.1%	100.0%
Head and Neck	Count	67	7	74
	%	90.5%	9.5%	100.0%
Upper GI	Count	85	7	92
	%	92.4%	7.6%	100.0%
Urological	Count	83	10	93
	%	89.2%	10.8%	100.0%
Haematological	Count	101	25	126
	%	80.2%	19.8%	100.0%
Skin	Count	60	6	66
	%	90.9%	9.1%	100.0%
Supportive and Palliative Care	Count	22	4	26
	%	84.6%	15.4%	100.0%
Brain/CNS	Count	20	0	20
	%	100.0%	.0%	100.0%
Sarcoma	Count	10	0	10
	%	100.0%	.0%	100.0%
Children/Young People	Count	7	1	8
	%	87.5%	12.5%	100.0%
Endocrine	Count	2	0	2
	%	100.0%	.0%	100.0%
Total	Count	822	135	957
	%	85.9%	14.1%	100.0%

Table: D7 MDTs need performance measures: by tumour type

D2: Ways to measure the effectiveness of an MDT

			Pro	fessiona	l group	
Table: D8 Ways of measuring effectiveness/performance	Overall sample	Doctors	Nurses	AHPs	MDT coordinators	Other
		%	rating i	n top t	hree	
Improved patient outcomes as defined by 1 year/5 year survival rates	1248 (80)	81	80	82	79	83
Improved ratings in patient satisfaction surveys	771 (50)	45	57	67	50	43
National cancer waiting times standards are achieved	712 (46)	34	57	44	75	60
Increased percentage of patients recommended for trials	446 (29)	37	18	14	22	17
Improvement in job satisfaction indices of MDT members	307 (20)	22	16	21	18	17
Benchmarking against other MDTs/networks	631 (41)	44	41	44	22	47
Reduction in percentage of MDT treatment recommendations not adopted	403 (26)	27	25	26	21	30

Team members perceptions about ways of measuring effectiveness/performance: overall and by professional group

1554 (76%) respondents provided an answer to this question. All percentages are calculated using this as a denominator and thereby reflect the percentage of respondents who answered the overall question who chose this as an outcome.

Table: D9 ways of measuring	Discipline % rating in top three											
effectiveness/performance by discipline	Surgeon	Radio- logist	Histo/ cyto path- ologist	Oncol- ogist	Haemat ologist	Othuld er doctor	Palliati ve care	CNS	Other nurse	AHPs	MDT coordin ators	Other
Improved patient outcomes as defined by 1 year/5 year survival rates	81	86	88	74	81	81	65	80	89	82	79	83
Improved ratings in patient satisfaction surveys	49	42	41	30	29	58	67	57	25	67	50	43
National cancer waiting times standards are achieved	29	36	32	36	34	41	29	57	50	44	75	60
Increased percentage of patients recommended for trials	33	31	36	53	64	26	14	17	36	15	22	17
Improvement in job satisfaction indices of MDT members	24	26	26	21	17	13	43	16	11	21	18	17
Benchmarking against other MDTs/networks	45	44	37	50	34	47	47	42	32	44	22	47
Reduction in percentage of MDT treatment recommendations not adopted	28	31	32	28	30	20	20	26	14	26	21	30

Table: D10 ways of measuring		Tumour type % rating in top three												
effectiveness/performance by tumour type	breast	Colo- rectal	lung	gynae	Head+ neck	Upper GI	Urolog ical	Haem atolog -ical	skin	SuPaC	Brain/ cns	Sar- coma	Child- ren/ young people	Endo- crine
Improved patient outcomes as defined by 1 year/5 year survival rates	79	81	74	88	94	86	83	80	74	52	92	69	80	50
Improved ratings in patient satisfaction surveys	39	53	70	43	53	53	58	41	6	79	54	85	70	0
National cancer waiting times standards are achieved	35	43	52	53	41	60	55	42	51	28	38	62	40	100
Increased percentage of patients recommended for trials	33	19	25	24	10	20	31	44	28	3	25	23	30	100
Improvement in job satisfaction indices of MDT members	24	20	14	22	15	14	10	19	24	48	21	23	10	50
Benchmarking against other MDTs/networks	44	40	43	37	53	34	38	38	40	41	42	15	30	0
Reduction in percentage of MDT treatment recommendations not adopted	37	35	16	26	30	20	17	25	19	31	21	23	30	0

	Drafoonianal group			Improved patient outcomes as defined by 1 year/5 year survival rates					
Professional group			2nd						
		1st highest	highest	3rd highest					
		importance	importance	importance					
Doctors	Count	587	64	43	694				
	%	68%	7%	5%	81%				
Nurses	Count	254	47	24	325				
	%	63%	12%	6%	80%				
AHPs	Count	41	6	0	47				
	%	72%	11%	0%	82%				
MDT coordinators	Count	114	35	8	157				
	%	57%	18%	4%	79%				
Other (admin/managerial)	Count	18	5	2	25				
	%	60%	17%	7%	83%				
Total	Count	1014	157	77	1248				
	%	65%	10%	5%	80%				

Table: D11 Improved patient outcomes as defined by 1 year/5 year survival rates

Table: D12 Improved ratings in patient satisfaction surveys: by professional group

		Improved ra	Improved ratings in patient satisfaction surveys						
Professional group			2nd						
		1st highest	highest	3rd highest					
		importance	importance	importance					
Doctors	Count	53	203	132	388				
	%	6%	24%	15%	45%				
Nurses	Count	50	108	74	232				
	%	12%	27%	18%	57%				
AHPs	Count	5	22	11	38				
	%	9%	39%	19%	67%				
MDT coordinators	Count	14	44	42	100				
	%	7%	22%	21%	50%				
Other (admin/managerial)	Count	5	4	4	13				
	%	17%	13%	13%	43%				
Total	Count	127	381	263	771				
	%	8%	25%	17%	50%				

Professional group		National can	National cancer waiting times standards are achieved			
i Torocoloriar group		1st highest importance	2nd highest importance	3rd highest importance		
Doctors	Count	29	133	127	289	
	%	3%	15%	15%	34%	
Nurses	Count	30	101	99	230	
	%	7%	25%	24%	57%	
AHPs	Count	2	15	8	25	
	%	4%	26%	14%	44%	
MDT coordinators	Count	48	58	44	150	
	%	24%	29%	22%	75%	
Other (admin/managerial)	Count	1	9	8	18	
	%	3%	30%	27%	60%	
Total	Count	110	316	286	712	
	%					

Table: D13 National cancer waiting times standards are achieved: by professional group

Table: D14 Increased percentage of patients recommended for trials: by professional group

			Increased percentage of patients recommended for trials			
Professional group			2nd			
		1st highest	highest	3rd highest		
		importance	importance	importance		
Doctors	Count	20	145	151	316	
	%	2%	17%	18%	37%	
Nurses	Count	4	29	41	74	
	%	1%	7%	10%	18%	
AHPs	Count	0	3	5	8	
	%	0%	5%	9%	14%	
MDT coordinators	Count	0	14	29	43	
	%	0%	7%	15%	22%	
Other (admin/managerial)	Count	0	2	3	5	
	%	0%	7%	10%	17%	
Total	Count	24	193	229	446	
	%					

			Improvement in job satisfaction indices of MDT members			
Professional group		1st highest	2nd highest	3rd highest		
	• _	importance	importance	importance		
Doctors	Count	25	54	113	192	
	%	3%	6%	13%	22%	
Nurses	Count	7	16	40	63	
	%	2%	4%	10%	16%	
AHPs	Count	0	1	11	12	
	%	0%	2%	19%	21%	
MDT coordinators	Count	9	9	17	35	
	%	5%	5%	9%	18%	
Other (admin/managerial)	Count	1	1	3	5	
	%	3%	3%	10%	17%	
Total	Count	42	81	184	307	
	%					

Table: D15 Improvement in job satisfaction indices of MDT members: by professional group

Table: D16 Benchmarking against other MDTs/networks: by professional group

			Benchmarking against other MDTs/networks			
Professional group			2nd			
		1st highest	highest	3rd highest		
		importance	importance	importance		
Doctors	Count	85	156	140	381	
	%	10%	18%	16%	44%	
Nurses	Count	40	65	62	167	
	%	10%	16%	15%	41%	
AHPs	Count	5	3	17	25	
	%	9%	5%	30%	44%	
MDT coordinators	Count	5	18	21	44	
	%	3%	9%	11%	22%	
Other (admin/managerial)	Count	4	5	5	14	
	%	13%	17%	17%	47%	
Total	Count	139	247	245	631	
	%					

Professional group		Reductio treatment rec	Total		
		1st highest importance	2nd highest importance	3rd highest importance	
Doctors	Count	60	77	98	235
	%	7%	9%	11%	27%
Nurses	Count	19	30	53	102
	%	5%	7%	13%	25%
AHPs	Count	4	7	4	15
	%	7%	12%	7%	26%
MDT coordinators	Count	7	13	22	42
	%	4%	7%	11%	21%
Other (admin/managerial)	Count	1	4	4	9
	%	3%	13%	13%	30%
Total	Count	91	131	181	403
	%				

Table: D17 Reduction in percentage of MDT treatment recommendations not adopted:by professional group

Discipline			atient outcome ar/5 year surviv		Total
Discipline		1st highest importance	2nd highest importance	3rd highest importance	
Surgeon	Count	178	17	7	202
	%	72%	7%	3%	81%
Radiologist	Count	75	4	5	84
	%	77%	4%	5%	86%
Histo/cytopathologist	Count	78	11	3	92
	%	74%	10%	3%	88%
Oncologist (clinical and medical)	Count	85	7	8	100
	%	63%	5%	6%	74%
Haematologist	Count	48	6	8	62
	%	62%	8%	10%	81%
Other Doctor (Physician, GP etc)	Count	97	15	10	122
	%	65%	10%	7%	81%
Palliative care specialist	Count	26	4	2	32
	%	53%	8%	4%	65%
Clinical Nurse Specialist	Count	234	44	22	300
	%	62%	12%	6%	80%
Nursing (other)	Count	20	3	2	25
	%	71%	11%	7%	89%
Allied Health Professional	Count	41	6	0	47
	%	72%	11%	0%	82%
MDT coordinator	Count	114	35	8	157
	%	57%	18%	4%	79%
Other (admin/clerical and managerial)	Count	18	5	2	25
	%	60%	17%	7%	83%
Total	Count %	1014	157	77	1248

Table: D18 Improved patient outcomes as defined by 1 year/5 year survival rates: by discipline

Discipline		Improved ra	tings in patient surveys	satisfaction	Total
Dissipline		1st highest importance	2nd highest importance	3rd highest importance	
Surgeon	Count	14	71	37	122
	%	6%	29%	15%	49%
Radiologist	Count	4	21	16	41
	%	4%	21%	16%	42%
Histo/cytopathologist	Count	4	20	19	43
	%	4%	19%	18%	41%
Oncologist (clinical and medical)	Count	6	21	13	40
	%	4%	16%	10%	30%
Haematologist	Count	2	12	8	22
	%	3%	16%	10%	29%
Other Doctor (Physician, GP etc)	Count	9	45	33	87
	%	6%	30%	22%	58%
Palliative care specialist	Count	14	13	6	33
	%	29%	27%	12%	67%
Clinical Nurse Specialist	Count	47	98	70	215
	%	12%	26%	19%	57%
Nursing (other)	Count	3	10	4	17
	%	11%	36%	14%	25%
Allied Health Professional	Count	5	22	11	38
	%	9%	39%	19%	67%
MDT coordinator	Count	14	44	42	100
	%	7%	22%	21%	50%
Other (admin/clerical and managerial)	Count	5	4	4	13
	%	17%	13%	13%	43%
Total	Count %	127	381	263	771

Table: D19 Improved ratings in patient satisfaction surveys: by discipline

			al cancer waitin dards are achi		Total
Discipline		1st highest importance	2nd highest importance	3rd highest importance	
Surgeon	Count	7	28	36	71
	%	3%	11%	15%	29%
Radiologist	Count	1	18	16	35
	%	1%	18%	16%	36%
Histo/cytopathologist	Count	4	19	11	34
	%	4%	18%	10%	32%
Oncologist (clinical and medical)	Count	3	23	22	48
	%	2%	17%	16%	36%
Haematologist	Count	5	9	12	26
	%	6%	12%	16%	34%
Other Doctor (Physician, GP etc)	Count	7	29	25	61
	%	5%	19%	17%	41%
Palliative care specialist	Count	2	7	5	14
	%	4%	14%	10%	29%
Clinical Nurse Specialist	Count	29	97	90	216
	%	8%	26%	24%	57%
Nursing (other)	Count	1	4	9	14
	%	4%	14%	32%	50%
Allied Health Professional	Count	2	15	8	25
	%	4%	26%	14%	44%
MDT coordinator	Count	48	58	44	150
	%	24%	29%	22%	75%
Other (admin/clerical and managerial)	Count	1	9	8	18
	%	3%	30%	27%	60%
Total	Count %	110	316	286	712

Table: D20 National cancer waiting times standards are achieved: by discipline

Discipline			d percentage o mmended for t		Total
Discipline			2nd highest importance	3rd highest importance	
Surgeon	Count	3	34	45	82
	%	1%	14%	18%	33%
Radiologist	Count	1	10	19	30
	%	1%	10%	19%	31%
Histo/cytopathologist	Count	1	23	14	38
	%	1%	22%	13%	36%
Oncologist (clinical and medical)	Count	3	38	30	71
	%	2%	28%	22%	53%
Haematologist	Count	8	25	16	49
	%	10%	32%	21%	64%
Other Doctor (Physician, GP etc)	Count	4	13	22	39
	%	3%	9%	15%	26%
Palliative care specialist	Count	0	2	5	7
	%	0%	4%	10%	14%
Clinical Nurse Specialist	Count	3	26	35	64
	%	1%	7%	9%	17%
Nursing (other)	Count	1	3	6	10
	%	4%	11%	21%	36%
Allied Health Professional	Count	0	3	5	8
	%	0%	5%	9%	15%
MDT coordinator	Count	0	14	29	43
	%	0%	7%	15%	22%
Other (admin/clerical and managerial)	Count	0	2	3	5
	%	0%	7%	10%	17%
Total	Count %	24	193	229	446

Table: D21 Increased percentage of patients recommended for trials: by discipline

Discipline			nt in job satisfa f MDT membe		Total
		1st highest importance	2nd highest importance	3rd highest importance	
Surgeon	Count	6	15	38	59
	%	2%	6%	15%	24%
Radiologist	Count	3	12	10	25
	%	3%	12%	10%	26%
Histo/cytopathologist	Count	1	7	19	27
	%	1%	7%	18%	26%
Oncologist (clinical and medical)	Count	7	3	18	28
	%	5%	2%	13%	21%
Haematologist	Count	1	6	6	13
	%	1%	8%	8%	17%
Other Doctor (Physician, GP etc)	Count	3	6	10	19
	%	2%	4%	7%	13%
Palliative care specialist	Count	4	5	12	21
	%	8%	10%	24%	43%
Clinical Nurse Specialist	Count	7	14	39	60
	%	2%	4%	10%	16%
Nursing (other)	Count	0	2	1	3
	%	0%	7%	4%	11%
Allied Health Professional	Count	0	1	11	12
	%	0%	2%	19%	21%
MDT coordinator	Count	9	9	17	35
	%	5%	5%	9%	18%
Other (admin/clerical and managerial)	Count	1	1	3	5
	%	3%	3%	10%	17%
Total	Count %	42	81	184	307

Table: D22 Improvement in job satisfaction indices of MDT members: by discipline

			marking agains MDTs/networks		Total
Discipline		1st highest	2nd highest	3rd highest	Total
Discipline		importance	importance	importance	
Surgeon	Count	. 19	48	45	112
	%	8%	19%	18%	45%
Radiologist	Count	9	20	14	43
	%	9%	20%	14%	44%
Histo/cytopathologist	Count	7	15	17	39
	%	7%	14%	16%	37%
Oncologist (clinical and medical)	Count	19	27	22	68
	%	14%	20%	16%	50%
Haematologist	Count	6	11	9	26
	%	8%	14%	12%	34%
Other Doctor (Physician, GP etc)	Count	22	24	24	70
	%	15%	16%	16%	47%
Palliative care specialist	Count	3	11	9	23
	%	6%	22%	18%	47%
Clinical Nurse Specialist	Count	37	62	59	158
	%	10%	16%	16%	42%
Nursing (other)	Count	3	3	3	ę
	%	11%	11%	11%	32%
Allied Health Professional	Count	5	3	17	25
	%	9%	5%	30%	44%
MDT coordinator	Count	5	18	21	44
	%	3%	9%	11%	22%
Other (admin/clerical and managerial)	Count	4	5	5	14
	%	13%	17%	17%	47%
Total	Count %	139	247	245	631

Table: D23 Benchmarking against other MDTs/networks: by discipline

Discipline			n in percentag it recommenda adopted		Total
Discipline			2nd highest importance	3rd highest importance	
Surgeon	Count	19	29	22	70
	%	8%	12%	9%	28%
Radiologist	Count	5	10	15	30
	%	5%	10%	15%	31%
Histo/cytopathologist	Count	10	8	16	34
	%	10%	8%	15%	32%
Oncologist (clinical and medical)	Count	11	11	16	38
	%	8%	8%	12%	28%
Haematologist	Count	7	4	12	23
	%	9%	5%	16%	30%
Other Doctor (Physician, GP etc)	Count	8	10	12	30
	%	5%	7%	8%	20%
Palliative care specialist	Count	0	5	5	10
	%	0%	10%	10%	20%
Clinical Nurse Specialist	Count	19	28	51	98
	%	5%	7%	14%	26%
Nursing (other)	Count	0	2	2	4
	%	0%	7%	7%	14%
Allied Health Professional	Count	4	7	4	15
	%	7%	12%	7%	26%
MDT coordinator	Count	7	13	22	42
	%	4%	7%	11%	21%
Other (admin/clerical and managerial)	Count	1	4	4	9
	%	3%	13%	13%	30%
Total	Count %	91	131	181	403

Table: D24 Reduction in percentage of MDT treatment recommendations not adopted: by discipline

Tumour type		Improved patient outcomes as defined by 1 year/5 year survival rates			Total
		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	103	13	5	121
	%	67%	8%	3%	79%
Colorectal	Count	76	3	5	84
	%	73%	3%	5%	81%
Lung	Count	65	12	4	81
	%	60%	11%	4%	74%
Gynae	Count	74	7	3	84
	%	78%	7%	3%	88%
Head and Neck	Count	59	14	2	75
	%	74%	18%	3%	94%
Upper GI	Count	62	10	4	76
	%	70%	11%	5%	86%
Urological	Count	66	14	5	85
	%	64%	14%	5%	83%
Haematological	Count	89	9	11	109
	%	65%	7%	8%	80%
Skin	Count	42	8	3	53
	%	58%	11%	4%	74%
Supportive and Palliative Care	Count	11	2	2	15
	%	38%	7%	7%	52%
Brain/CNS	Count	19	2	1	22
	%	79%	8%	4%	92%
Sarcoma	Count	7	2	0	9
	%	54%	15%	0%	69%
Children/Young People	Count	6	1	1	8
	%	60%	10%	10%	80%
Endocrine	Count	1	0	0	1
	%	50%	0%	0%	50%
Total	Count %	680	97	46	823

Table: D25 Improved patient outcomes as defined by 1 year/5 year survival rates: by tumour type

Tumour type		Improved ra	Total		
		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	8	27	24	59
	%	5%	18%	16%	39%
Colorectal	Count	6	32	17	55
	%	6%	31%	16%	53%
Lung	Count	13	36	26	75
	%	12%	33%	24%	70%
Gynae	Count	2	22	17	41
	%	2%	23%	18%	43%
Head and Neck	Count	6	19	17	42
	%	8%	24%	21%	53%
Upper GI	Count	8	23	16	47
	%	9%	26%	18%	53%
Urological	Count	12	30	18	60
	%	12%	29%	17%	58%
Haematological	Count	8	32	16	56
	%	6%	23%	12%	41%
Skin	Count	5	21	14	40
	%	7%	29%	19%	6%
Supportive and Palliative Care	Count	8	9	6	23
	%	28%	31%	21%	79%
Brain/CNS	Count	1	7	5	13
	%	4%	29%	21%	54%
Sarcoma	Count	2	5	4	11
	%	15%	38%	31%	85%
Children/Young People	Count	2	3	2	7
·	%	20%	30%	20%	70%
Total	Count %	81	266	182	529

Table: D26 Improved ratings in patient satisfaction surveys: by tumour type

Tumour type		National can	National cancer waiting times standards are achieved		
		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	7	29	18	54
	%	5%	19%	12%	35%
Colorectal	Count	4	20	21	45
	%	4%	19%	20%	43%
Lung	Count	8	21	28	57
	%	7%	19%	26%	52%
Gynae	Count	5	28	17	50
	%	5%	29%	18%	53%
Head and Neck	Count	3	19	11	33
	%	4%	24%	14%	41%
Upper GI	Count	7	27	19	53
	%	8%	31%	22%	60%
Urological	Count	9	21	27	57
	%	9%	20%	26%	55%
Haematological	Count	12	21	24	57
	%	9%	15%	18%	42%
Skin	Count	6	16	15	37
	%	8%	22%	21%	51%
Supportive and Palliative Care	Count	0	4	4	8
	%	0%	14%	14%	28%
Brain/CNS	Count	1	3	5	9
	%	4%	13%	21%	38%
Sarcoma	Count	2	3	3	8
	%	15%	23%	23%	62%
Children/Young People	Count	0	2	2	4
	%	0%	20%	20%	40%
Endocrine	Count	1	0	1	2
	%	50%	0%	50%	100%
Total	Count	65	214	195	474
	%				

Table: D27 National cancer waiting times standards are achieved: by tumour type

Tumour type		Increased percentage of patients recommended for trials			Total
		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	2	22	26	50
	%	1%	14%	17%	33%
Colorectal	Count	1	7	12	20
	%	1%	7%	12%	19%
Lung	Count	1	12	14	27
	%	1%	11%	13%	25%
Gynae	Count	1	5	18	23
	%	0%	5%	19%	24%
Head and Neck	Count	0	2	6	8
	%	0%	3%	8%	10%
Upper GI	Count	0	8	10	18
	%	0%	9%	11%	20%
Urological	Count	2	15	15	32
	%	2%	15%	15%	31%
Haematological	Count	7	31	22	60
	%	5%	23%	16%	44%
Skin	Count	2	4	14	20
	%	3%	6%	19%	28%
Supportive and Palliative Care	Count	0	0	1	1
	%	0%	0%	3%	3%
Brain/CNS	Count	0	4	2	6
	%	0%	17%	8%	25%
Sarcoma	Count	0	1	2	3
	%	0%	8%	15%	23%
Children/Young People	Count	0	2	1	3
	%	0%	20%	10%	30%
Endocrine	Count	0	2	0	2
	%	0%	100%	0%	100%
Total	Count	15	115	143	273
	%				

Table: D28 Increased percentage of patients recommended for trials: by tumour type

		Improvemen of	t in job satisfa MDT membe	ction indices rs	Total
Tumour type		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	5	9	22	36
	%	3%	6%	14%	24%
Colorectal	Count	3	7	11	21
	%	3%	7%	11%	20%
Lung	Count	2	4	9	15
	%	2%	4%	8%	14%
Gynae	Count	2	5	14	21
	%	2%	5%	15%	22%
Head and Neck	Count	1	4	7	12
	%	1%	5%	9%	15%
Upper GI	Count	3	3	6	12
	%	3%	3%	7%	14%
Urological	Count	0	2	8	10
	%	0%	2%	8%	10%
Haematological	Count	2	7	17	26
	%	5%	5%	12%	19%
Skin	Count	4	5	8	17
	%	6%	7%	11%	24%
Supportive and Palliative Care	Count	2	5	7	14
	%	7%	14%	24%	48%
Brain/CNS	Count	0	1	4	5
	%	0%	4%	17%	21%
Sarcoma	Count	0	0	3	3
	%	0%	0%	23%	23%
Children/Young People	Count	0	1	0	1
	%	0%	10%	0%	10%
Endocrine	Count	0	0	1	1
	%	0%	0%	50%	50%
Total	Count	24	53	117	194
	%				

Table: D29 Improvement in job satisfaction indices of MDT members: by tumour type

_			marking agains MDTs/networks		Total
Tumour type		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	14	27	26	67
	%	9%	18%	17%	44%
Colorectal	Count	9	13	20	42
	%	9%	13%	19%	40%
Lung	Count	12	18	17	47
	%	11%	17%	16%	43%
Gynae	Count	4	21	10	35
	%	4%	22%	11%	37%
Head and Neck	Count	7	15	20	42
	%	9%	19%	25%	53%
Upper GI	Count	6	7	17	30
	%	7%	8%	19%	34%
Urological	Count	11	10	18	39
	%	11%	10%	17%	38%
Haematological	Count	8	23	21	52
	%	6%	17%	15%	38%
Skin	Count	9	14	6	29
	%	13%	19%	8%	40%
Supportive and Palliative Care	Count	6	5	1	12
	%	21%	17%	3%	41%
Brain/CNS	Count	2	5	3	10
	%	8%	21%	13%	42%
Sarcoma	Count	1	0	1	2
	%	8%	0%	8%	15%
Children/Young People	Count	1	1	1	3
	%	10%	10%	10%	30%
Total	Count %	90	159	161	410

Table: D30 Benchmarking against other MDTs/networks: by tumour type

Endocrine = zero

Tumour type			n in percentage		Total
rumour type		1st highest importance	2nd highest importance	3rd highest importance	
Breast	Count	14	21	21	56
	%	9%	14%	14%	37%
Colorectal	Count	4	20	12	36
	%	4%	19%	12%	35%
Lung	Count	8	4	5	17
	%	7%	4%	5%	16%
Gynae	Count	7	7	11	25
	%	7%	7%	12%	26%
Head and Neck	Count	4	6	14	24
	%	5%	8%	18%	30%
Upper GI	Count	2	6	10	18
	%	2%	7%	13%	20%
Urological	Count	3	6	8	17
	%	3%	6%	8%	17%
Haematological	Count	10	7	17	34
	%	7%	5%	12%	25%
Skin	Count	4	3	7	14
	%	6%	4%	10%	19%
Supportive and Palliative Care	Count	1	3	5	9
	%	3%	10%	17%	31%
Brain/CNS	Count	1	1	3	5
	%	4%	4%	13%	21%
Sarcoma	Count	1	2	0	3
	%	8%	15%	0%	23%
Children/Young People	Count	1	0	2	3
	%	10%	0%	20%	30%
Total	Count	60	86	115	261
	%				

Table: D31 Reduction in percentage of MDT treatment recommendations not adopted: by tumour type

Endocrine = zero

E: Supporting MDTs to work effectively

Table: E1 Team members	N (valid% - adjusting for missing data)					
perceptions on the tools required to support MDTs to work effectively	Yes	Perhaps	No			
Written guidance and factsheets	960 (63)	337 (22)	221 (15)			
Awayday with own team	889 (59)	357 (24)	267 (18)			
Team training	853 (57)	393 (26)	249 (17)			
Team assessment tools	727 (51)	453 (32)	255 (18)			
Workshops (not necessarily with own team)	688 (47)	478 (33)	303 (21)			
E-learning packages	533 (37)	507 (35)	401 (28)			
Training videos/DVDs	414 (29)	572 (40)	446 (31)			
On-line discussion forum	313 (23)	502 (37)	556 (41)			
Personal psychometric testing	173 (14)	397 (32)	685 (55)			

Table: E2 Written guidance and factsheets: by professional group

Professional group		Written gui	idance and f	actsheets	Total
		Yes	No	Perhaps	
Doctors	Count	462	179	204	845
	%	54.7%	21.2%	24.1%	100.0%
Nurses	Count	281	30	76	387
	%	72.6%	7.8%	19.6%	100.0%
AHPs	Count	36	1	16	53
	%	67.9%	1.9%	30.2%	100.0%
MDT coordinators	Count	159	8	34	201
	%	79.1%	4.0%	16.9%	100.0%
Other (admin/managerial)	Count	22	3	7	32
	%	68.8%	9.4%	21.9%	100.0%
Total	Count	960	221	337	1518
	%	63.2%	14.6%	22.2%	100.0%

Discipline		Written gui	idance and f	actsheets	Total
Discipline		Yes	No	Perhaps	
Surgeon	Count	138	47	53	238
	%	58.0%	19.7%	22.3%	100.0%
Radiologist	Count	49	15	27	9
	%	53.8%	16.5%	29.7%	100.0%
Histo/cytopathologist	Count	49	23	29	10
	%	48.5%	22.8%	28.7%	100.09
Oncologist (clinical and medical)	Count	50	38	46	13
	%	37.3%	28.4%	34.3%	100.09
Haematologist	Count	39	23	14	7
	%	51.3%	30.3%	18.4%	100.09
Other Doctor (Physician, GP etc)	Count	97	27	27	15
	%	64.2%	17.9%	17.9%	100.09
Palliative care specialist	Count	40	6	8	5
	%	74.1%	11.1%	14.8%	100.0
Clinical Nurse Specialist	Count	261	30	71	36
	%	72.1%	8.3%	19.6%	100.0
Nursing (other)	Count	20	0	5	2
	%	80.0%	.0%	20.0%	100.0
Allied Health Professional	Count	36	1	16	5
	%	67.9%	1.9%	30.2%	100.0
MDT coordinator	Count	159	8	34	20
	%	79.1%	4.0%	16.9%	100.09
Other (admin/clerical and managerial)	Count	22	3	7	3
	%	68.8%	9.4%	21.9%	100.09
Total	Count	960	221	337	151
	%	63.2%	14.6%	22.2%	100.09

Table: E3 Written guidance and factsheets: by discipline

Tumour type		Written gu	idance and f	actsheets	Total
		Yes	No	Perhaps	
Breast	Count	95	19	34	148
	%	64.2%	12.8%	23.0%	100.0%
Colorectal	Count	64	11	18	93
	%	68.8%	11.8%	19.4%	100.0%
Lung	Count	71	18	19	108
	%	65.7%	16.7%	17.6%	100.0%
Gynae	Count	61	12	17	90
	%	67.8%	13.3%	18.9%	100.0%
Head and Neck	Count	49	5	23	77
	%	63.6%	6.5%	29.9%	100.0%
Upper GI	Count	63	10	19	92
	%	68.5%	10.9%	20.7%	100.0%
Urological	Count	61	17	23	101
	%	60.4%	16.8%	22.8%	100.0%
Haematological	Count	78	29	26	133
	%	58.6%	21.8%	19.5%	100.0%
Skin	Count	55	4	13	72
	%	76.4%	5.6%	18.1%	100.0%
Supportive and Palliative Care	Count	28	3	2	33
	%	84.8%	9.1%	6.1%	100.0%
Brain/CNS	Count	16	3	5	24
	%	66.7%	12.5%	20.8%	100.0%
Sarcoma	Count	5	1	5	11
	%	45.5%	9.1%	45.5%	100.0%
Children/Young People	Count	9	0	2	11
	%	81.8%	.0%	18.2%	100.0%
Endocrine	Count	2	0	0	2
	%	100.0%	.0%	.0%	100.0%
Total	Count	657	132	206	995
	%	66.0%	13.3%	20.7%	100.0%

Table: E4 Written guidance and factsheets: by tumour type

Professional group		Awayd	team	Total	
r rerecerentar group		Yes	No	Perhaps	
Doctors	Count	458	198	185	841
	%	54.5%	23.5%	22.0%	100.0%
Nurses	Count	260	36	101	397
	%	65.5%	9.1%	25.4%	100.0%
AHPs	Count	35	6	14	55
	%	63.6%	10.9%	25.5%	100.0%
MDT coordinators	Count	116	22	51	189
	%	61.4%	11.6%	27.0%	100.0%
Other (admin/managerial)	Count	20	5	6	31
ζ υ ,	%	64.5%	16.1%	19.4%	100.0%
Total	Count	889	267	357	1513
	%	58.8%	17.6%	23.6%	100.0%

Table: E5 Awayday with own team: by professional group

Table: E6 Awayday with own team: by discipline

Discipling		Awayd	ay with own	team	Total
Discipline		Yes	No	Perhaps	
Surgeon	Count	135	50	52	237
	%	57.0%	21.1%	21.9%	100.0%
Radiologist	Count	45	18	30	93
	%	48.4%	19.4%	32.3%	100.0%
Histo/cytopathologist	Count	46	30	20	96
	%	47.9%	31.3%	20.8%	100.0%
Oncologist (clinical and medical)	Count	88	29	22	139
	%	63.3%	20.9%	15.8%	100.0%
Haematologist	Count	35	28	15	78
	%	44.9%	35.9%	19.2%	100.0%
Other Doctor (Physician, GP etc)	Count	71	39	35	145
	%	49.0%	26.9%	24.1%	100.0%
Palliative care specialist	Count	38	4	11	53
	%	71.7%	7.5%	20.8%	100.0%
Clinical Nurse Specialist	Count	243	33	94	370
	%	65.7%	8.9%	25.4%	100.0%
Nursing (other)	Count	17	3	7	27
	%	63.0%	11.1%	25.9%	100.0%
Allied Health Professional	Count	35	6	14	55
	%	63.6%	10.9%	25.5%	100.0%
MDT coordinator	Count	116	22	51	189
	%	61.4%	11.6%	27.0%	100.0%
Other (admin/clerical and managerial)	Count	20	5	6	31
	%	64.5%	16.1%	19.4%	100.0%
Total	Count	889	267	357	1513
	%	58.8%	17.6%	23.6%	100.0%

Tumour type		Awayo	day with own	team	Total
ramoar type		Yes	No	Perhaps	
Breast	Count	93	20	38	151
	%	61.6%	13.2%	25.2%	100.0%
Colorectal	Count	70	13	17	100
	%	70.0%	13.0%	17.0%	100.0%
Lung	Count	57	25	27	109
	%	52.3%	22.9%	24.8%	100.0%
Gynae	Count	54	12	22	88
	%	61.4%	13.6%	25.0%	100.0%
Head and Neck	Count	56	8	15	79
	%	70.9%	10.1%	19.0%	100.0%
Upper GI	Count	54	14	22	90
	%	60.0%	15.6%	24.4%	100.0%
Urological	Count	56	13	27	96
	%	58.3%	13.5%	28.1%	100.0%
Haematological	Count	60	40	31	131
	%	45.8%	30.5%	23.7%	100.0%
Skin	Count	27	20	19	66
	%	40.9%	30.3%	28.8%	100.0%
Supportive and Palliative Care	Count	25	3	4	32
	%	78.1%	9.4%	12.5%	100.0%
Brain/CNS	Count	13	6	5	24
	%	54.2%	25.0%	20.8%	100.0%
Sarcoma	Count	7	1	3	11
	%	63.6%	9.1%	27.3%	100.0%
Children/Young People	Count	4	3	3	10
	%	40.0%	30.0%	30.0%	100.0%
Endocrine	Count	2	0	0	2
	%	100.0%	.0%	.0%	100.0%
Total	Count	578	178	233	989
	%	58.4%	18.0%	23.6%	100.0%

Table: E7 Awayday with own team: by tumour type

Professional group		Team training			Total
r rorocoronar group		Yes	No	Perhaps	
Doctors	Count	406	199	233	838
	%	48.4%	23.7%	27.8%	100.0%
Nurses	Count	261	28	93	382
	%	68.3%	7.3%	24.3%	100.0%
AHPs	Count	36	4	12	52
	%	69.2%	7.7%	23.1%	100.0%
MDT coordinators	Count	133	14	45	192
	%	69.3%	7.3%	23.4%	100.0%
Other (admin/managerial)	Count	17	4	10	31
(0)	%	54.8%	12.9%	32.3%	100.0%
Total	Count	853	249	393	1495
	%	57.1%	16.7%	26.3%	100.0%

Table: E8 Team training: by professional group

Table: E9 Team training: by discipline

Discip	line		Т	eam training	9	Total
Biooip			Yes	No	Perhaps	
	Surgeon	Count	119	56	64	239
		%	49.8%	23.4%	26.8%	100.0%
	Radiologist	Count	38	23	30	91
		%	41.8%	25.3%	33.0%	100.0%
	Histo/cytopathologist	Count	39	33	25	97
		%	40.2%	34.0%	25.8%	100.0%
	Oncologist (clinical and medical)	Count	74	24	38	136
		%	54.4%	17.6%	27.9%	100.0%
	Haematologist	Count	33	19	23	75
		%	44.0%	25.3%	30.7%	100.0%
	Other Doctor (Physician, GP etc)	Count	68	40	38	146
		%	46.6%	27.4%	26.0%	100.0%
	Palliative care specialist	Count	35	4	15	54
		%	64.8%	7.4%	27.8%	100.0%
	Clinical Nurse Specialist	Count	246	26	84	356
		%	69.1%	7.3%	23.6%	100.0%
	Nursing (other)	Count	15	2	9	26
		%	57.7%	7.7%	34.6%	100.0%
	Allied Health Professional	Count	36	4	12	52
		%	69.2%	7.7%	23.1%	100.0%
	MDT coordinator	Count	133	14	45	192
		%	69.3%	7.3%	23.4%	100.0%
	Other (admin/clerical and managerial)	Count	17	4	10	31
		%	54.8%	12.9%	32.3%	100.0%
Total		Count	853	249	393	1495
		%	57.1%	16.7%	26.3%	100.0%

Tumour type		Т	eam training)	Total
. aou .ype		Yes	No	Perhaps	
Breast	Count	76	26	44	146
	%	52.1%	17.8%	30.1%	100.0%
Colorectal	Count	65	18	13	96
	%	67.7%	18.8%	13.5%	100.0%
Lung	Count	57	26	21	104
	%	54.8%	25.0%	20.2%	100.0%
Gynae	Count	49	12	23	84
	%	58.3%	14.3%	27.4%	100.0%
Head and Neck	Count	52	6	18	76
	%	68.4%	7.9%	23.7%	100.0%
Upper GI	Count	51	11	26	88
	%	58.0%	12.5%	29.5%	100.0%
Urological	Count	63	4	31	98
	%	64.3%	4.1%	31.6%	100.0%
Haematological	Count	64	31	36	131
	%	48.9%	23.7%	27.5%	100.0%
Skin	Count	36	10	22	68
	%	52.9%	14.7%	32.4%	100.0%
Supportive and Palliative Care	Count	27	3	3	33
	%	81.8%	9.1%	9.1%	100.0%
Brain/CNS	Count	10	6	7	23
	%	43.5%	26.1%	30.4%	100.0%
Sarcoma	Count	5	2	4	11
	%	45.5%	18.2%	36.4%	100.0%
Children/Young People	Count	4	4	3	11
	%	36.4%	36.4%	27.3%	100.0%
Endocrine	Count	1	0	1	2
	%	50.0%	.0%	50.0%	100.0%
Total	Count	560	159	252	971
	%	57.7%	16.4%	26.0%	100.0%

Table: E10 Team training: by tumour type

Professional group		Team assessment tools			Total
r totoolondi group		Yes	No	Perhaps	
Doctors	Count	346	204	253	803
	%	43.1%	25.4%	31.5%	100.0%
Nurses	Count	229	29	113	371
	%	61.7%	7.8%	30.5%	100.0%
AHPs	Count	33	4	14	51
	%	64.7%	7.8%	27.5%	100.0%
MDT coordinators	Count	102	16	64	182
	%	56.0%	8.8%	35.2%	100.0%
Other (admin/managerial)	Count	17	2	9	28
, , ,	%	60.7%	7.1%	32.1%	100.0%
Total	Count	727	255	453	1435
	%	50.7%	17.8%	31.6%	100.0%

Table: E11 Team assessment tools: by professional group

Table: E12 Team assessment tools: by discipline

Discipline		Team	assessment	tools	Total
Discipline		Yes	No	Perhaps	
Surgeon	Count	97	56	75	228
	%	42.5%	24.6%	32.9%	100.0%
Radiologist	Count	37	20	27	84
	%	44.0%	23.8%	32.1%	100.0%
Histo/cytopathologist	Count	30	29	32	91
	%	33.0%	31.9%	35.2%	100.0%
Oncologist (clinical and medical)	Count	53	36	40	129
	%	41.1%	27.9%	31.0%	100.0%
Haematologist	Count	32	21	22	75
	%	42.7%	28.0%	29.3%	100.0%
Other Doctor (Physician, GP etc)	Count	64	38	41	143
	%	44.8%	26.6%	28.7%	100.0%
Palliative care specialist	Count	33	4	16	53
	%	62.3%	7.5%	30.2%	100.0%
Clinical Nurse Specialist	Count	216	27	104	347
	%	62.2%	7.8%	30.0%	100.0%
Nursing (other)	Count	13	2	9	24
	%	54.2%	8.3%	37.5%	100.0%
Allied Health Professional	Count	33	4	14	51
	%	64.7%	7.8%	27.5%	100.0%
MDT coordinator	Count	102	16	64	182
	%	56.0%	8.8%	35.2%	100.0%
Other (admin/clerical and managerial)	Count	17	2	9	28
	%	60.7%	7.1%	32.1%	100.0%
Total	Count	727	255	453	1435
	%	50.7%	17.8%	31.6%	100.0%

Tumour type		Team	assessment	tools	Total
rumour type		Yes	No	Perhaps	
Breast	Count	81	19	40	140
	%	57.9%	13.6%	28.6%	100.0%
Colorectal	Count	45	19	33	97
	%	46.4%	19.6%	34.0%	100.0%
Lung	Count	49	21	30	100
	%	49.0%	21.0%	30.0%	100.0%
Gynae	Count	40	12	34	86
	%	46.5%	14.0%	39.5%	100.0%
Head and Neck	Count	39	10	20	69
	%	56.5%	14.5%	29.0%	100.0%
Upper GI	Count	55	9	24	88
	%	62.5%	10.2%	27.3%	100.0%
Urological	Count	44	15	35	94
	%	46.8%	16.0%	37.2%	100.0%
Haematological	Count	59	32	34	125
	%	47.2%	25.6%	27.2%	100.0%
Skin	Count	31	14	21	66
	%	47.0%	21.2%	31.8%	100.0%
Supportive and Palliative Care	Count	26	2	5	33
	%	78.8%	6.1%	15.2%	100.0%
Brain/CNS	Count	12	6	5	23
	%	52.2%	26.1%	21.7%	100.0%
Sarcoma	Count	5	2	4	11
	%	45.5%	18.2%	36.4%	100.0%
Children/Young People	Count	5	1	4	10
	%	50.0%	10.0%	40.0%	100.0%
Endocrine	Count	1	0	1	2
	%	50.0%	.0%	50.0%	100.0%
Total	Count	492	162	290	944
	%	52.1%	17.2%	30.7%	100.0%

Table: E13 Team assessment tools: by tumour type

Professional group		Workshops (not necessarily with own team)			Total
Professional group		Yes	No	Perhaps	
Doctors	Count	336	227	258	821
	%	40.9%	27.6%	31.4%	100.0%
Nurses	Count	186	46	138	370
	%	50.3%	12.4%	37.3%	100.0%
AHPs	Count	28	5	21	54
	%	51.9%	9.3%	38.9%	100.0%
MDT coordinators	Count	123	20	50	193
	%	63.7%	10.4%	25.9%	100.0%
Other (admin/managerial)	Count	15	5	11	31
	%	48.4%	16.1%	35.5%	100.0%
Total	Count	688	303	478	1469
	%	46.8%	20.6%	32.5%	100.0%

Table: E14 Workshops (not necessarily with own team): by professional group

Discipline		Workshop	s (not necess own team)	sarily with	Total
		Yes	No	Perhaps	
Surgeon	Count	103	64	67	234
	%	44.0%	27.4%	28.6%	100.0%
Radiologist	Count	37	19	30	86
	%	43.0%	22.1%	34.9%	100.0%
Histo/cytopathologist	Count	30	32	36	98
	%	30.6%	32.7%	36.7%	100.0%
Oncologist (clinical and medical)	Count	48	40	45	133
	%	36.1%	30.1%	33.8%	100.0%
Haematologist	Count	28	23	23	74
	%	37.8%	31.1%	31.1%	100.0%
Other Doctor (Physician, GP etc)	Count	60	42	41	143
	%	42.0%	29.4%	28.7%	100.0%
Palliative care specialist	Count	30	7	16	53
	%	56.6%	13.2%	30.2%	100.0%
Clinical Nurse Specialist	Count	177	41	130	348
	%	50.9%	11.8%	37.4%	100.0%
Nursing (other)	Count	9	5	8	22
	%	40.9%	22.7%	36.4%	100.0%
Allied Health Professional	Count	28	5	21	54
	%	51.9%	9.3%	38.9%	100.0%
MDT coordinator	Count	123	20	50	193
	%	63.7%	10.4%	25.9%	100.0%
Other (admin/clerical and managerial)	Count	15	5	11	31
	%	48.4%	16.1%	35.5%	100.0%
Total	Count	688	303	478	1469
	%	46.8%	20.6%	32.5%	100.0%

Table: E15 Workshops (not necessarily with own team): by discipline

		Workshop	os (not neces own team)	sarily with	Total
Tumour type		Yes	No	Perhaps	
Breast	Count	69	26	48	143
	%	48.3%	18.2%	33.6%	100.0%
Colorectal	Count	53	20	19	92
	%	57.6%	21.7%	20.7%	100.0%
Lung	Count	40	28	34	102
	%	39.2%	27.5%	33.3%	100.0%
Gynae	Count	40	15	35	90
	%	44.4%	16.7%	38.9%	100.0%
Head and Neck	Count	37	9	29	75
	%	49.3%	12.0%	38.7%	100.0%
Upper GI	Count	46	14	25	85
	%	54.1%	16.5%	29.4%	100.0%
Urological	Count	50	17	29	96
	%	52.1%	17.7%	30.2%	100.0%
Haematological	Count	49	34	42	125
	%	39.2%	27.2%	33.6%	100.0%
Skin	Count	31	13	23	67
	%	46.3%	19.4%	34.3%	100.0%
Supportive and Palliative Care	Count	20	4	7	31
	%	64.5%	12.9%	22.6%	100.0%
Brain/CNS	Count	9	7	7	23
	%	39.1%	30.4%	30.4%	100.0%
Sarcoma	Count	4	2	5	11
	%	36.4%	18.2%	45.5%	100.0%
Children/Young People	Count	6	2	3	11
	%	54.5%	18.2%	27.3%	100.0%
Endocrine	Count	1	0	1	2
	%	50.0%	.0%	50.0%	100.0%
Total	Count	455	191	307	953
	%	47.7%	20.0%	32.2%	100.0%

Table: E16 Workshops (not necessarily with own team): by tumour type

Professional group		E-lea	rning packa	ges	Total
r rereccional group		Yes	No	Perhaps	
Doctors	Count	251	291	277	819
	%	30.6%	35.5%	33.8%	100.0%
Nurses	Count	142	72	145	359
	%	39.6%	20.1%	40.4%	100.0%
AHPs	Count	27	7	15	49
	%	55.1%	14.3%	30.6%	100.0%
MDT coordinators	Count	96	27	61	184
	%	52.2%	14.7%	33.2%	100.0%
Other (admin/managerial)	Count	17	4	9	30
(C)	%	56.7%	13.3%	30.0%	100.0%
Total	Count	533	401	507	1441
	%	37.0%	27.8%	35.2%	100.0%

Table: E17 E-learning packages: by professional group

Table: E18 E-learning packages: by discipline

		E-lea	arning packa	ges	Total
Discipline		Yes	No	Perhaps	
Surgeon	Count	70	89	73	232
	%	30.2%	38.4%	31.5%	100.0%
Radiologist	Count	30	22	31	83
	%	36.1%	26.5%	37.3%	100.0%
Histo/cytopathologist	Count	28	35	35	98
	%	28.6%	35.7%	35.7%	100.0%
Oncologist (clinical and medical)	Count	30	51	54	135
	%	22.2%	37.8%	40.0%	100.0%
Haematologist	Count	24	29	22	75
	%	32.0%	38.7%	29.3%	100.0%
Other Doctor (Physician, GP etc)	Count	53	50	44	147
	%	36.1%	34.0%	29.9%	100.0%
Palliative care specialist	Count	16	15	18	49
	%	32.7%	30.6%	36.7%	100.0%
Clinical Nurse Specialist	Count	128	66	140	334
	%	38.3%	19.8%	41.9%	100.0%
Nursing (other)	Count	14	6	5	25
	%	56.0%	24.0%	20.0%	100.0%
Allied Health Professional	Count	27	7	15	49
	%	55.1%	14.3%	30.6%	100.0%
MDT coordinator	Count	96	27	61	184
	%	52.2%	14.7%	33.2%	100.0%
Other (admin/clerical and managerial)	Count	17	4	9	30
	%	56.7%	13.3%	30.0%	100.0%
Total	Count	533	401	507	1441
	%	37.0%	27.8%	35.2%	100.0%

Tumour type		E-lea	arning packa	ges	Total
		Yes	No	Perhaps	
Breast	Count	53	30	53	136
	%	39.0%	22.1%	39.0%	100.0%
Colorectal	Count	34	27	32	93
	%	36.6%	29.0%	34.4%	100.0%
Lung	Count	33	30	39	102
	%	32.4%	29.4%	38.2%	100.0%
Gynae	Count	29	28	27	84
	%	34.5%	33.3%	32.1%	100.0%
Head and Neck	Count	23	16	26	65
	%	35.4%	24.6%	40.0%	100.0%
Upper GI	Count	30	24	35	89
	%	33.7%	27.0%	39.3%	100.0%
Urological	Count	36	24	33	93
	%	38.7%	25.8%	35.5%	100.0%
Haematological	Count	47	44	37	128
	%	36.7%	34.4%	28.9%	100.0%
Skin	Count	31	13	22	66
	%	47.0%	19.7%	33.3%	100.0%
Supportive and Palliative Care	Count	14	6	8	28
	%	50.0%	21.4%	28.6%	100.0%
Brain/CNS	Count	8	6	9	23
	%	34.8%	26.1%	39.1%	100.0%
Sarcoma	Count	4	3	3	1(
	%	40.0%	30.0%	30.0%	100.0%
Children/Young People	Count	6	1	4	11
	%	54.5%	9.1%	36.4%	100.0%
Endocrine	Count	2	0	0	2
	%	100.0%	.0%	.0%	100.0%
Total	Count	350	252	328	930
	%	37.6%	27.1%	35.3%	100.0%

Table: E19 E-learning packages: by tumour type

Professional group		Training videos/DVDs			Total
r toroolorial group		Yes	No	Perhaps	
Doctors	Count	209	311	291	811
	%	25.8%	38.3%	35.9%	100.0%
Nurses	Count	117	75	165	357
	%	32.8%	21.0%	46.2%	100.0%
AHPs	Count	19	7	23	49
	%	38.8%	14.3%	46.9%	100.0%
MDT coordinators	Count	61	45	78	184
	%	33.2%	24.5%	42.4%	100.0%
Other (admin/managerial)	Count	8	8	15	31
· · · · ·	%	25.8%	25.8%	48.4%	100.0%
Total	Count	414	446	572	1432
	%	28.9%	31.1%	39.9%	100.0%

Table: E20 Training videos/DVDs: by professional group

Doctors slightly more likely to say no to this – 38%, compared to less than a quarter of all other prof groups. AHPs least likely to say no.

Discipli	ne		Train	ing videos/D	VDs	Total
Biooipii			Yes	No	Perhaps	
	Surgeon	Count	83	82	68	233
		%	35.6%	35.2%	29.2%	100.0%
	Radiologist	Count	17	29	35	81
		%	21.0%	35.8%	43.2%	100.0%
	Histo/cytopathologist	Count	16	45	35	96
		%	16.7%	46.9%	36.5%	100.0%
	Oncologist (clinical and medical)	Count	24	55	54	133
		%	18.0%	41.4%	40.6%	100.0%
	Haematologist	Count	16	31	27	74
		%	21.6%	41.9%	36.5%	100.0%
	Other Doctor (Physician, GP etc)	Count	39	55	52	146
		%	26.7%	37.7%	35.6%	100.0%
	Palliative care specialist	Count	14	14	20	48
		%	29.2%	29.2%	41.7%	100.0%
	Clinical Nurse Specialist	Count	107	71	155	333
		%	32.1%	21.3%	46.5%	100.0%
	Nursing (other)	Count	10	4	10	24
		%	41.7%	16.7%	41.7%	100.0%
	Allied Health Professional	Count	19	7	23	49
		%	38.8%	14.3%	46.9%	100.0%
	MDT coordinator	Count	61	45	78	184
		%	33.2%	24.5%	42.4%	100.0%
	Other (admin/clerical and managerial)	Count	8	8	15	31
		%	25.8%	25.8%	48.4%	100.0%
Total		Count	414	446	572	1432
		%	28.9%	31.1%	39.9%	100.0%

Table: E21 Training videos/DVDs: by discipline

Tumour type		Trair	ning videos/D	VDs	Total
			No	Perhaps	
Breast	Count	53	34	50	137
	%	38.7%	24.8%	36.5%	100.0%
Colorectal	Count	26	30	35	91
	%	28.6%	33.0%	38.5%	100.0%
Lung	Count	25	38	42	105
	%	23.8%	36.2%	40.0%	100.0%
Gynae	Count	22	28	34	84
	%	26.2%	33.3%	40.5%	100.0%
Head and Neck	Count	26	10	38	74
	%	35.1%	13.5%	51.4%	100.0%
Upper GI	Count	30	20	34	84
	%	35.7%	23.8%	40.5%	100.0%
Urological	Count	30	26	38	94
	%	31.9%	27.7%	40.4%	100.0%
Haematological	Count	31	45	51	127
	%	24.4%	35.4%	40.2%	100.0%
Skin	Count	20	20	25	65
	%	30.8%	30.8%	38.5%	100.0%
Supportive and Palliative Care	Count	11	8	11	30
	%	36.7%	26.7%	36.7%	100.0%
Brain/CNS	Count	7	8	5	20
	%	35.0%	40.0%	25.0%	100.0%
Sarcoma	Count	2	5	4	11
	%	18.2%	45.5%	36.4%	100.0%
Children/Young People	Count	4	3	4	11
	%	36.4%	27.3%	36.4%	100.0%
Endocrine	Count	1	0	1	2
	%	50.0%	.0%	50.0%	100.0%
Total	Count	288	275	372	935
	%	30.8%	29.4%	39.8%	100.0%

Table: E22 Training videos/DVDs: by tumour type

Professional group		On-line discussion forum			Total
		Yes	No	Perhaps	
Doctors	Count	136	394	245	775
	%	17.5%	50.8%	31.6%	100.0%
Nurses	Count	75	107	154	336
	%	22.3%	31.8%	45.8%	100.0%
AHPs	Count	20	7	23	50
	%	40.0%	14.0%	46.0%	100.0%
MDT coordinators	Count	74	42	63	179
	%	41.3%	23.5%	35.2%	100.0%
Other (admin/managerial)	Count	8	6	17	31
	%	25.8%	19.4%	54.8%	100.0%
Total	Count	313	556	502	1371
	%	22.8%	40.6%	36.6%	100.0%

Table: E23 On-line discussion forum: by professional group

Table: E24 On-line discussion forum: by discipline

Discipline		On-lin	e discussion	forum	Total
			No	Perhaps	
Surgeon	Count	48	99	68	215
	%	22.3%	46.0%	31.6%	100.0%
Radiologist	Count	13	44	21	78
	%	16.7%	56.4%	26.9%	100.0%
Histo/cytopathologist	Count	13	46	32	91
	%	14.3%	50.5%	35.2%	100.0%
Oncologist (clinical and medical)	Count	19	74	37	130
	%	14.6%	56.9%	28.5%	100.0%
Haematologist	Count	11	38	22	71
	%	15.5%	53.5%	31.0%	100.0%
Other Doctor (Physician, GP etc)	Count	27	68	48	143
	%	18.9%	47.6%	33.6%	100.0%
Palliative care specialist	Count	5	25	17	47
	%	10.6%	53.2%	36.2%	100.0%
Clinical Nurse Specialist	Count	73	98	142	313
	%	23.3%	31.3%	45.4%	100.0%
Nursing (other)	Count	2	9	12	23
	%	8.7%	39.1%	52.2%	100.0%
Allied Health Professional	Count	20	7	23	50
	%	40.0%	14.0%	46.0%	100.0%
MDT coordinator	Count	74	42	63	179
	%	41.3%	23.5%	35.2%	100.0%
Other (admin/clerical and managerial)	Count	8	6	17	31
	%	25.8%	19.4%	54.8%	100.0%
Total	Count	313	556	502	1371
	%	22.8%	40.6%	36.6%	100.0%

umour type		On-line	discussion	forum	Total
		Yes	No	Perhaps	
Breast	Count	37	51	41	129
	%	28.7%	39.5%	31.8%	100.0%
Colorectal	Count	19	34	34	87
	%	21.8%	39.1%	39.1%	100.0%
Lung	Count	16	41	42	99
	%	16.2%	41.4%	42.4%	100.0%
Gynae	Count	22	27	31	8
	%	27.5%	33.8%	38.8%	100.0%
Head and Neck	Count	17	26	26	6
	%	24.6%	37.7%	37.7%	100.0%
Upper GI	Count	17	32	32	8
	%	21.0%	39.5%	39.5%	100.0%
Urological	Count	21	33	36	9
	%	23.3%	36.7%	40.0%	100.0%
Haematological	Count	18	55	45	11
	%	15.3%	46.6%	38.1%	100.09
Skin	Count	16	18	27	6
	%	26.2%	29.5%	44.3%	100.09
Supportive and Palliative Care	Count	9	10	9	2
	%	32.1%	35.7%	32.1%	100.0%
Brain/CNS	Count	8	6	7	2
	%	38.1%	28.6%	33.3%	100.0%
Sarcoma	Count	2	1	8	1
	%	18.2%	9.1%	72.7%	100.0%
Children/Young People	Count	2	3	5	1
	%	20.0%	30.0%	50.0%	100.0%
Endocrine	Count	0	1	1	
	%	.0%	50.0%	50.0%	100.0%
otal	Count	204	338	344	88
	%	23.0%	38.1%	38.8%	100.0%

Table: E26 On-line discussion forum: by tumour type

Professional group		Personal psychometric testing			Total
		Yes	No	Perhaps	
Doctors	Count	103	447	199	749
	%	13.8%	59.7%	26.6%	100.0%
Nurses	Count	35	141	125	301
	%	11.6%	46.8%	41.5%	100.0%
AHPs	Count	9	18	20	47
	%	19.1%	38.3%	42.6%	100.0%
MDT coordinators	Count	21	65	45	131
	%	16.0%	49.6%	34.4%	100.0%
Other (admin/managerial)	Count	5	14	8	27
	%	18.5%	51.9%	29.6%	100.0%
Total	Count	173	685	397	1255
	%	13.8%	54.6%	31.6%	100.0%

Table: E27 Personal psychometric testing: by professional group

Discipline		Personal	Personal psychometric testing		
		Yes	No	Perhaps	
Surgeon	Count	40	113	54	207
	%	19.3%	54.6%	26.1%	100.0%
Radiologist	Count	10	48	22	80
	%	12.5%	60.0%	27.5%	100.0%
Histo/cytopathologist	Count	9	57	17	83
	%	10.8%	68.7%	20.5%	100.0%
Oncologist (clinical and medical)	Count	17	78	29	124
	%	13.7%	62.9%	23.4%	100.0%
Haematologist	Count	7	49	15	71
	%	9.9%	69.0%	21.1%	100.0%
Other Doctor (Physician, GP etc)	Count	11	84	40	135
	%	8.1%	62.2%	29.6%	100.0%
Palliative care specialist	Count	9	18	22	49
	%	18.4%	36.7%	44.9%	100.0%
Clinical Nurse Specialist	Count	33	132	118	283
	%	11.7%	46.6%	41.7%	100.0%
Nursing (other)	Count	2	9	7	18
	%	11.1%	50.0%	38.9%	100.0%
Allied Health Professional	Count	9	18	20	47
	%	19.1%	38.3%	42.6%	100.0%
MDT coordinator	Count	21	65	45	131
	%	16.0%	49.6%	34.4%	100.0%
Other (admin/clerical and managerial)	Count	5	14	8	27
	%	18.5%	51.9%	29.6%	100.0%
Total	Count	173	685	397	1255
	%	13.8%	54.6%	31.6%	100.0%

Table: E27 Personal psychometric testing: by discipline

Tumour type		Personal psychometric testing			Total
· · · · · · · · · · · · · · · · · · ·			No	Perhaps	
Breast	Count	21	59	35	115
	%	18.3%	51.3%	30.4%	100.0%
Colorectal	Count	10	46	18	74
	%	13.5%	62.2%	24.3%	100.0%
Lung	Count	9	52	29	90
	%	10.0%	57.8%	32.2%	100.0%
Gynae	Count	10	40	19	69
	%	14.5%	58.0%	27.5%	100.0%
Head and Neck	Count	10	26	23	59
	%	16.9%	44.1%	39.0%	100.0%
Upper GI	Count	14	35	26	75
	%	18.7%	46.7%	34.7%	100.0%
Urological	Count	12	38	33	83
	%	14.5%	45.8%	39.8%	100.0%
Haematological	Count	9	74	27	110
	%	8.2%	67.3%	24.5%	100.0%
Skin	Count	7	32	19	58
	%	12.1%	55.2%	32.8%	100.0%
Supportive and Palliative Care	Count	4	11	15	30
	%	13.3%	36.7%	50.0%	100.0%
Brain/CNS	Count	5	8	6	19
	%	26.3%	42.1%	31.6%	100.0%
Sarcoma	Count	4	4	2	10
	%	40.0%	40.0%	20.0%	100.0%
Children/Young People	Count	0	5	3	8
	%	.0%	62.5%	37.5%	100.0%
Endocrine	Count	1	0	1	2
	%	50.0%	.0%	50.0%	100.0%
Total	Count	116	430	256	802
	%	14.5%	53.6%	31.9%	100.0%

Table: E28 Personal psychometric testing: by tumour type

Appendix I: Denominators for analysis of responses to Q49: ways of measuring the effectiveness of an MDT.

Denominators for analysis by professional group/discipline are:

Professional group	Denominator	Discipline	Denominator
Doctor	862	Surgeon	248
		Radiologist	98
		Histo/cytopathologist	105
		Oncologist	135
		Haematologist	77
		Other Doctor	150
		Palliative care specialist	49
Nurse	405	Clinical nurse specialist	377
		Other nurse	28
AHP	57	AHP	57
MDT coordinator	200	MDT coordinator	200
Other team member	30	Other team member 30	

Denominators for analysis by tumour type are:

Tumour type	Denominator
Breast	153
Colorectal	104
Lung	109
Gynae	95
Head and Neck	80
Upper GI	88
Urological	103
Haematological	137
Skin	72
SuPaC	29
Brain/CNS	24
Sarcoma	13
Children/Young People	10
Endocrine	2