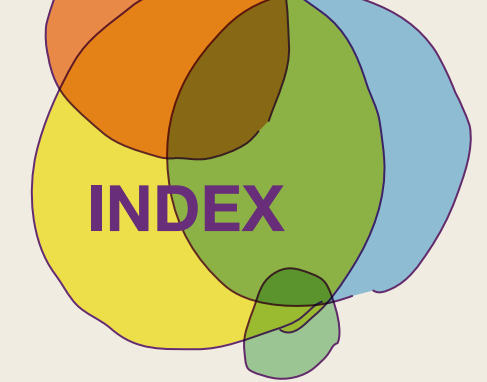




Guide for supporting cancer patients



1

Why have we written this guide?

2

Who has written it and how?

3

How do we understand support?

- Support: technique and attitude
- Resources:
 - Mentoring space
 - Training in cancer support

4

Key moments

- Informing others about the disease
- Period of sick leave
- Return to the workplace

5

Support process

- Diagnosis
- Sick leave
- Return to work
- Termination

6

Addresses of interest

How can we support people with cancer?



www.suara.coop/guia-cancer

Contact: cancerafeina@suara.coop

Written by: Suara Cooperativa

Advice and design: L'Apòstrof, SCCL

Edition: January 2019



This document is subject to a Creative Commons licence. You are free to share the material in any medium and format, provided that you acknowledge authorship appropriately, provide a link to the licence and indicate if you have made any changes. You cannot use the material for commercial purposes and if you mix, transform or create based on the material, you cannot disseminate the modified material.

01

WHY HAVE WE WRITTEN THIS GUIDE?

Any of us can develop cancer, because we are all vulnerable. We need to reflect on how we would like to be treated by others and act accordingly.

Our human condition is open to constant change: life goes through different phases, people become ill, and our expectations change.

When illness strikes it suddenly affects the person on many different levels: physically, emotionally, psychologically, socially and spiritually.

Each person is individual and unique, and how they experience the illness will be too. The recovery process includes medical treatment, the attitude the person has towards this change, the support they have around them and the resources available to them.

At Suara Cooperativa we have colleagues who have been diagnosed with cancer and

there is always a before, during and after in cancer. The disease is a non-transferable experience that changes us personally and modifies our social, family and intimate relationships.

These changes also affect the professional sphere, and it is important to make sure all the pieces fit. Work is not an isolated piece; it is part of the jigsaw, because we understand the person holistically.

When a colleague tells you they have cancer, a door to change opens. These changes can cause anguish, fear, concern, doubt and uncertainty. They are subjected to medical visits and bureaucratic procedures in the workplace. All of this can lead to more existential questions such as: Will I go back to being who I was? Will I die? What can happen to me?

At Suara Cooperativa we empathise with these situations and seek global answers for each professional during and after the disease: protocols are adapted so that the person feels supported in their most vulnerable moments.

The process of sick leave is very delicate, for the person and for the people surrounding them. The Cooperative is aware of this and

is interested in their health, respecting their intimacy and wishes at all times. It is a time of care and intimacy that belongs to each person.

When returning to work, uncertainty becomes present again: Will I be able to go back to normal? To ensure a person receives the support they need, the Cooperative seeks the best alternatives that ensure their well-being. We are all responsible for supporting our colleagues on this complex journey.

It is estimated that in Catalonia more than 110,000 people have beaten the disease or converted it into a chronic disease. This figure increases by 1.6% to 1.7% every year.

With these statistics, as an organisation we ask ourselves:

- **What are we doing that we need to continue doing?**
- **What are we doing that we should not do?**
- **What are we not doing that we should do?**

Suara's differential feature is how we look after people. How would we like to be treated by others? How do we understand practices oriented towards personal well-being? How are personal wishes respected in the life plans?

At Suara, an ethical and socially responsible company with values, we strive to ensure the well-being of all the people we relate to. This guide brings together the criteria for **supporting people from Suara with a serious and complicated disease such as cancer.**

Actions with clear objectives:

Provide support from when the person receives the diagnosis to when they are given sick leave. We accompany them in the procedures they have to go through, assigning them a contact person and explaining the procedures

Raise awareness about the importance of supporting a person as they return to the workplace after having cancer, with everyone's collaboration, creating mechanisms that help to raise collective awareness.

Provide information about the resources available in the Cooperative and the surroundings to provide support from when the disease is diagnosed to the return to work or termination.

Identify situations that can be improved in the professional and social sphere and be proactive about implementing changes.

02

WHO HAS WRITTEN IT AND HOW?

At Suara, we value people: we ensure we treat each other in a way that makes us happy.

With a view to analysing how support was being provided at Suara, and to write action proposals to facilitate it, two work sessions were conducted in which we performed empathy exercises with the different roles and determined possible solutions in the professional fields of communication, training, awareness-raising, resources, legal guidance and member area.

At Suara, people are what matters, and we follow a participation model that is committed to deciding and doing with others. That is why a work group was established with people who had suffered from cancer and others who had supported colleagues in this process: cancer survivors, people who have experienced the disease in their close circle, professionals who manage teams or, simply, people who have a personal interest.

The proposals that emerged from the group were in line with the current regulations and were agreed on with different professionals from the organisation.

This guide was written from the head but it comes from the heart, and it was made possible with the participation of the following members of Suara (in alphabetical order):

Pilar Alarcón, Núria Barbero, Aroa Becerra, Marifé Berrocoso, Víctor Buil, Esther Carabantes, Isabel Casado, Rosa Castillo, Àngels Cobo, Mohamed El Amrani, Isabel Fajardo, Sergi Fortià, Clara Fuentes, Rosa Fuertes, Agustí Gasque, Paula Iglesias, Rosa Lahuerta, Imma Lluva, Anna Mañosa, Teresa Martín, Maribel Martínez, Adela Martínez, Victoria Martínez, Jordi Masnou, Maite Mauricio, Mar Mestre, Montse Miró, Ainhoa Montalà, Emma Montoliu, Miquel Moré, Isabel Palmero, Laura Parra, Neus Pedret, Laura Peracaula, Jordi Picas, Núria Pintado, Elena Polanco, Montserrat Pujol, Dúnia Roselló, Rubén Rubio, Núria Sala, Marta Serrat, Elisabet Torrents, Vanesa Valladares, Mònica Vázquez, Uxue Vidaña, Andreu Villalba. We also appreciate the advice received from the Catalan Federation of Organisations Against Cancer (FECEC) and the cooperative L'Apòstrof.

03

HOW DO WE UNDERSTAND SUPPORT?

“Supporting someone is the act of walking by their side, sharing a part of their itinerant life.”

Jaume Funes, psychologist, educator, journalist

SUPPORT: TECHNIQUE AND ATTITUDE

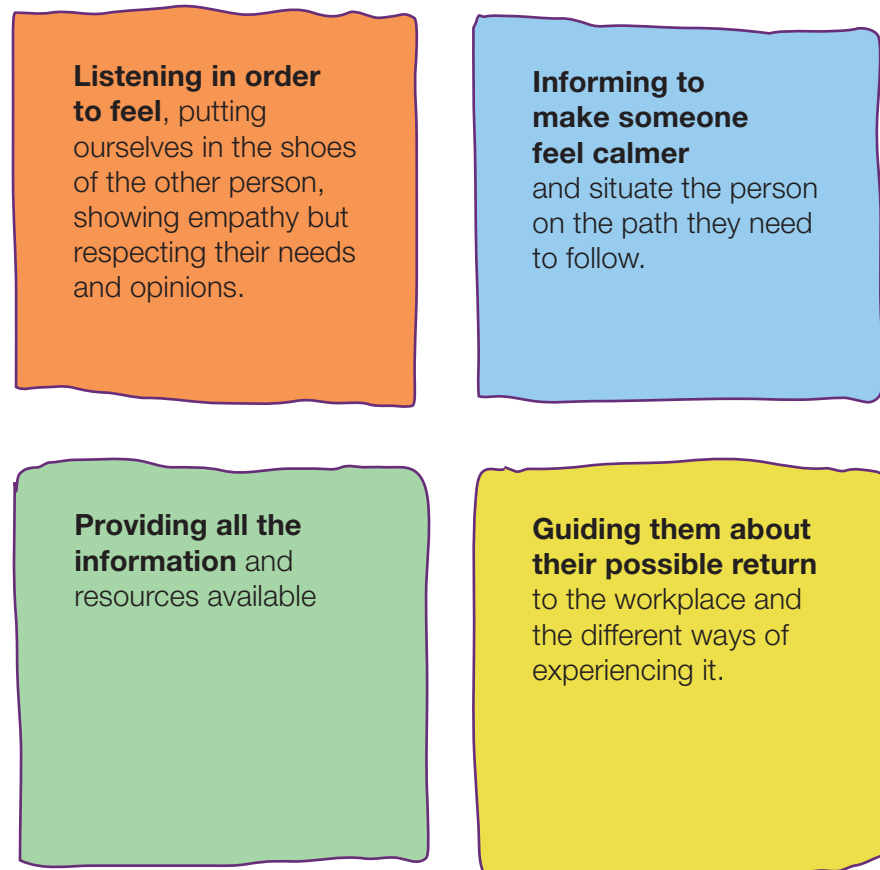
Supporting people is an engaging task, which requires authenticity and humility to avoid intrusive, directive or interruptive attitudes. It is helpful if people supporting others have mastered communication techniques such as active listening, inquiry and conversation enabling. The attitude towards the support is essential: being by the person's side, unhurried, respecting their decisions and avoiding egos and paternalism.

What attitude do we adopt when recognising the other person? Will we consider them from the perspective of the disease, of their need? Or will we adopt an approach from a perspective of acceptance and assistance? We need to leave behind prejudices and be receptive to what the person wants us to know: a person is much more than their disease.

At Suara we help people to regain their potential and their abilities, as well as their trust. This support seeks to ensure adequate verbal and non-verbal communication, providing the responses and help that are within our reach. It is important to look beyond what the person shows us and to focus on their personal and professional potential. We will break with the invisibility to which people with cancer are often subjected. We support them by following the person-focused model of attention: we start with their expectations and needs, respecting their rights and wishes.

Bearing in mind that personal situations are always difficult and unique, we strive to provide each person with the opportunity to choose and decide their actions and to be respected and looked after.

When we talk about supporting a person in our actions, it is important to bear in mind that we need to listen, inform, provide and guide. We mean:



To support the person who has suffered or is suffering from cancer, it is essential that we recognise their abilities, without forgetting their colleagues who make up the circle of trust where the person with the disease can develop their potential.

To provide this support and to do it properly, Suara offers resources and training.

Resources

MENTORING SPACE

It is a space for listening, supporting, sharing, expressing and above all being by the cancer patient's side.

They are not alone! At Suara we want to accompany them on the difficult path of living with cancer for the duration of the process: from their diagnosis to

their return to work, and throughout the evolution of the disease. It is a long and difficult process in which they must learn to live with the disease, to accept it and to seek resources to deal with this process. This all has a considerable emotional impact.

The support we provide will adapt to each person's rhythm, nature, way of thinking and living and will be based on respect to provide support in the creation of tools and resources to live with and accept cancer with all the fears, doubts and concerns it generates.

The mentoring space is designed both for people suffering from the disease and for people, managers or leaders who support them and experience it too, as the leaders, managers and teams also experience this process, concerned about knowing how to support them appropriately.

The mentors are people who have experienced the disease in first person or who have already supported someone in this process, and who:

- have very valuable experience for the person going through this process who needs to create their own path to fight cancer.
- can shed light on how to approach the support process for other leaders and teams.

TRAINING

The training programmes are aimed at leaders and team managers, to learn how to support and help to gauge what facing a cancer diagnosis means emotionally:

- How can we help, during the disease and upon returning to work?
- How can we listen actively?
- What is the best language to use?
- How can we respect the sick person's personal space?
- How can we manage our feelings?

FOLLOW-UP COMMITTEE

The aims of the committee are:

- Ensure the guide is used correctly and that the implementation is performed with quality.
- Collect information and feedback that can enrich the guide.
- Analyse the success of the implementation and of the benefits that it entails.
- Distribute the guide.
- Check the available resources:
 - Leaders: Empower leaders to ensure that all the people suffering from the disease are accompanied and looked after, if that is what they wish.
 - Mentors: Follow-up on the support provided by the voluntary mentors to ensure good quality support.
 - Training: Design and ensure the training is correctly carried out.

04

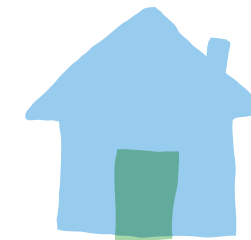
KEY
MOMENTS**“There is a healthy way to fall ill, recover and return to work.”**

Study to improve the incorporation and return to work of women who have had breast cancer. Report from the end of 2015. Catalan Federation of Organisations Against Cancer (FECEC).

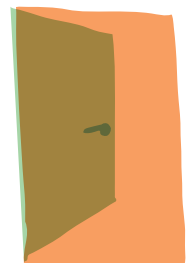
A person who falls ill and is fighting cancer goes through different phases which must be respected.



**Informing others
about the disease**



**Period of sick
leave**



**Return to the
workplace**



INFORMING OTHERS ABOUT THE DISEASE

This is the most important time for the person with the disease and also for the person supporting them at different times during the process.

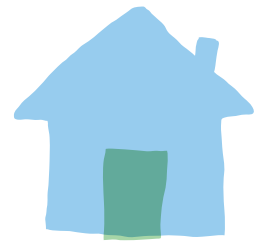
To begin to provide good support, communication must be direct and close: we must try to address the person or relative personally and respect the pace they set. For example, not everyone wants to be hugged. **Ask them.**

At this time, the person's emotions may go up and down and mingle together (fear, uncertainty, solitude, anguish...) and they might not yet know how to manage them. **Listen to them.**

The person has to outline how they want their support to be: we must listen to them and prioritise their expectations. **Respect them.**

“The first phrases I heard were ‘stay calm’, ‘it won’t be anything to worry about’, ‘I know a case’, ‘you’ll be fine in four days’ or ‘today everything is very well-researched’. I felt like replying: ‘I didn’t know you were psychic!’”.

Rosa Fuertes, employee at Suara

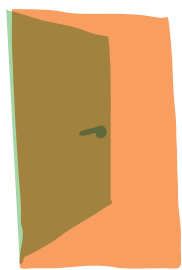


PERIOD OF SICK LEAVE

During the period of sick leave, there will be different moments and we need to be alert to any changes in order to adapt to them, bearing in mind the wishes expressed by the person who is suffering from the disease in relation to when, who and how they want to stay in contact. We must be alert to the changes in order to constantly adapt to them: what the person wants today may be different to what they want tomorrow. We need to ask respectful questions which help us to determine at all times what they expect of us. **Be present.**

“When I told others about my disease, a lot of colleagues rang me to give me their support: ‘don’t worry’, ‘stay calm’. As the treatment continued, I received fewer calls, but my leader didn’t forget to make room in her diary to continue supporting me during the whole process. I wasn’t alone.”

Elisabet Torrents, member of Suara



RETURN TO THE WORKPLACE

When the person returns to normality, aspects of their life need to be defined again, including in the professional sphere.

It is important to remember that cancer often leaves physical and emotional after-effects that the person must live with.

At Suara we provide resources to facilitate this return to work, bearing in mind the person's needs and expectations, and matching them with what the Cooperative can offer them. It is important to resolve doubts and anticipate the details of this return.

Talk about it.

“My leader told me: ‘fighting cancer is an obstacle course, you’ll jump them all and the last one will be your return to work. This is where you belong. We’re waiting for you’”.

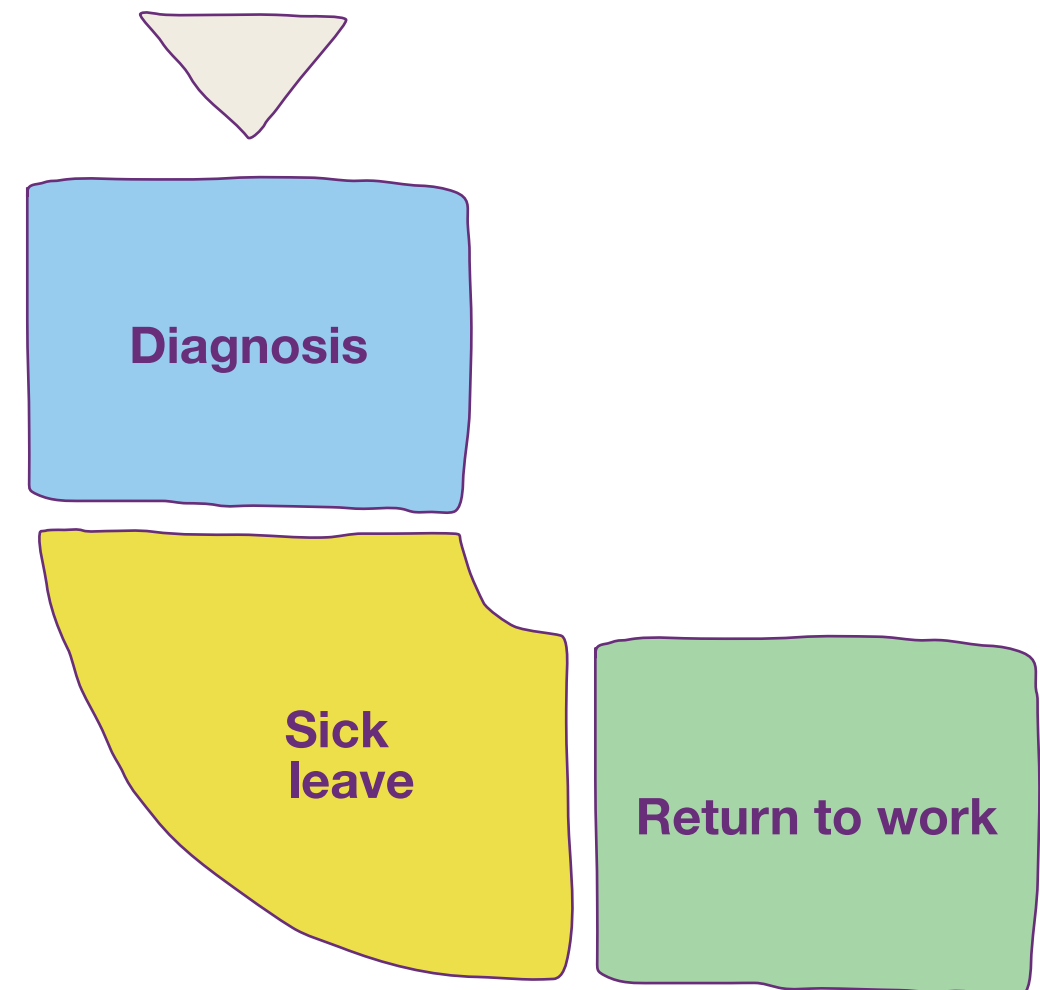
Isabel Casado, member of Suara

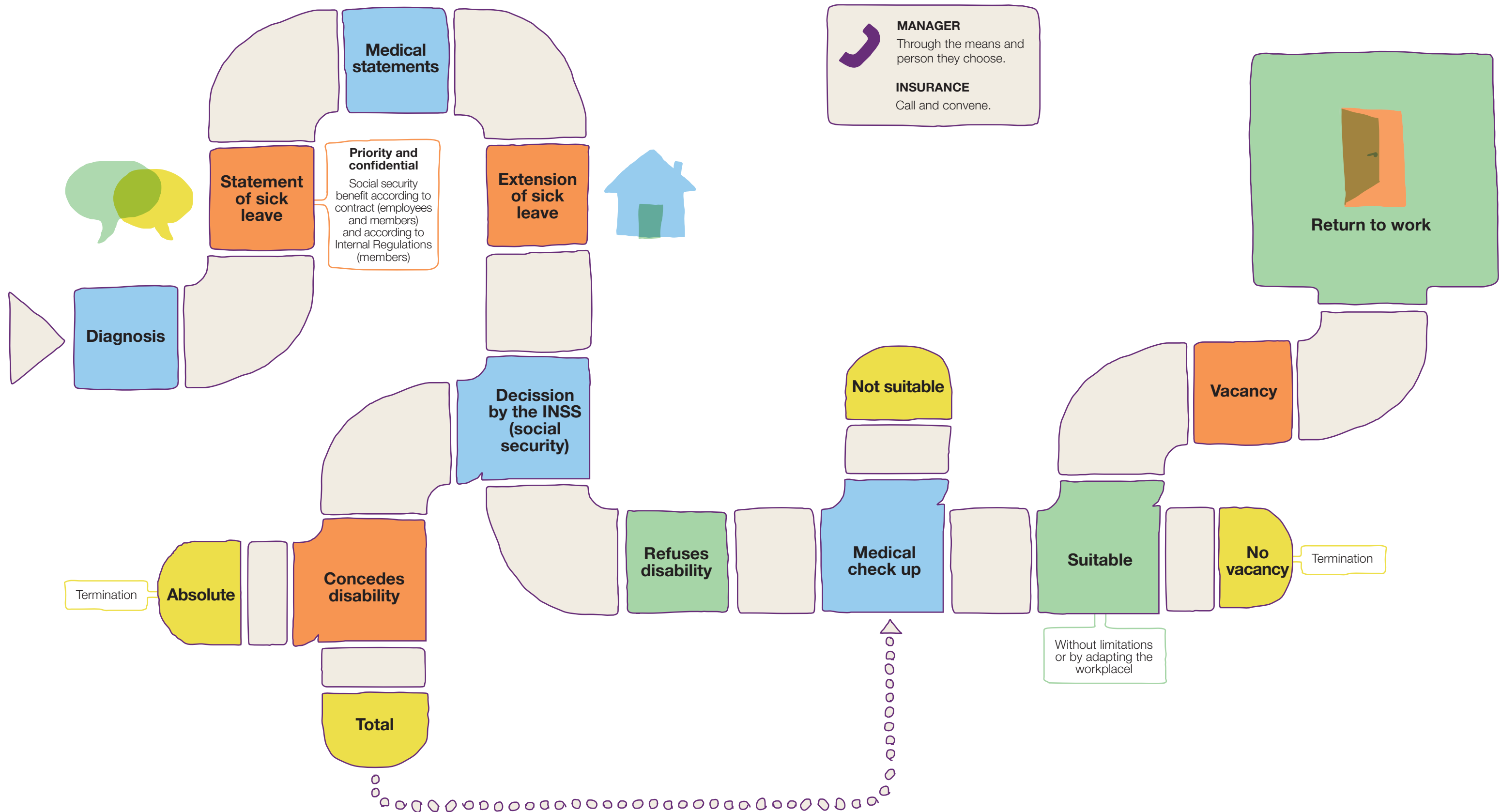
05

—
SUPPORT
PROCESS
—

It is important to anticipate the return to work, bearing in mind that specific needs will be studied as well as a possible adaptation of the workplace.

The person who is in charge of managing the support must know what they need to do at each moment, which aspects need to be considered and what stance should be taken.





DIAGNOSIS

When the person with the disease informs Suara, verbally or by presenting their sick leave, their direct manager **PRIORITISES** this situation and begins the support and follow-up process, which will continue until after their return to work.

It is important to remember that everything that is discussed will be **CONFIDENTIAL** and the sick person will decide what information they want to be shared (with the team, clients, people looked after...).

SICK LEAVE

In addition to providing all the necessary information for them to fill in and submit, first and most importantly, we will inform the person that:

- During the entire duration of their sick leave:
 - Their **WORKPLACE WILL BE RESERVED FOR THEM**.
 - If they are a member, their membership will continue and, therefore, if they wish, they can attend the assemblies.
- They decide with which team member they would like to stay in touch and via which medium (phone, email, meetings...).
- The initial leave can be a period of one year or less. During this time they must submit their **MEDICAL LEAVE STATEMENTS**, within 3 days of being issued. They can be submitted personally or by a third person, and they can be presented to service coordination or to management.
- The insurance company can be contacted in writing or by phone.
- The conditions of the sick leave will be in accordance to the corresponding collective agreement and, in the case of members, those indicated by the Internal Regulations. If any doubts arise, the work liaison officer can be contacted.
- Although it is not compulsory, we recommend sending all the documents and letters received (except medical reports or sensitive information) to be able to provide suitable advice and to facilitate the process.

AFTER ONE YEAR OF SICK LEAVE

After one year of sick leave, three situations can occur:

- **DISCHARGE:** the person can return to their workplace (see **RETURN TO WORK**).
- **CONTINUES ON SICK LEAVE:** they must continue to submit the confirmation medical statements until they are discharged or receive a statement to extend the sick leave.
- **EXTENDED SICK LEAVE:** they will be notified via a statement in which usually the date on which they will receive their payment directly from the insurance company is communicated (up to 18 months of sick leave). This statement can be received by the person (they must inform Suara) or by the cooperative (in this case, the person must go to the insurance company to do the necessary procedures). During this period:
 - The person's workplace is reserved.
 - They will not have to send confirmation medical statements and they will await the decision by the Social Security.

DECISION BY THE SOCIAL SECURITY IN THE EVENT OF EXTENDED SICK LEAVE

The Spanish Social Security Office, INSS, can accept or refuse permanent disability:

- If permanent disability is refused, the person will return to work (see **RETURN TO WORK**).
- If it is accepted, it can be:
 - **ABSOLUTE PERMANENT DISABILITY or SEVERE DISABILITY:**
 - This may or may not be subject to

review. If it is subject to review, the person's workplace will be reserved for 24 months.

- In any case, the person's contract must be terminated (see **TERMINATION**) until they can return to work if it is subject to review.
- **TOTAL PERMANENT DISABILITY:**
 - This means that they cannot return to the workplace they had and a suitable workplace must be arranged for them. Human Resources will assess if there is a vacancy in Suara that suits the professional profile and situation of disability:
 - If there are no possibilities of being transferred to another workplace, the person's contract will be terminated (see **TERMINATION**).
 - If the person can be transferred to another workplace, they will return to the new workplace (see **RETURN TO WORK**).
 - If it is subject to review, Suara will reserve the workplace for 24 months from the date of disability subject to review (indicated on the decision). In this review it will be determined whether the person will be discharged (see **RETURN TO WORK**) or they will continue with the disability status.

What happens if after 18 months of sick leave the INSS decision has not arrived?

In this case, the person continues receiving a payment from the insurance company until the INSS decision arrives, but Suara must give the person sick leave (see **TERMINATION**), reserving the workplace until the INSS decision arrives; consequently, the relevant process will follow according to whether disability has been refused or conceded.

RETURN TO WORK

During the process of returning to work, support and follow-up will be provided to match the person's needs with what Suara can offer them.

It is important to inform that:

- Depending on each case, this support process can last up to one year after returning to work.
- The annual leave generated in the past 18 months can be included as part of the return to work process (by allowing more flexible work days).
- Any other leave after the return to work must be assessed by the person's general practitioner and by the Catalan Institute of Medical Assessments (ICAM).

SPECIFIC MEDICAL CHECK-UP

- With the return to work, the Health Surveillance Service at Suara offers the possibility of performing a specific medical check-up in relation to the risks inherent in the workplace, in accordance with that stipulated by article 22 of the Law on the Prevention of Occupational Risks. This check-up must be performed when the person has returned to work, but it will be proposed two months in advance.
- It is a voluntary medical check-up, but it is important to detect any limitations and to make the necessary and possible adaptations to the workplace.
- Whether it is accepted or not, it will be recorded in the corresponding document that will be sent to Occupational Health so the visit can be organised with the corresponding Health Surveillance Centre.

- Even if the medical check-up is scheduled in advance, the results can take up to one month to arrive. During this period, the direct manager can assess the tasks to be performed in order to facilitate the adaptation to the workplace, depending on the service. It can be conducted by drawing up a professiogram or a study of tasks.
- The medical results from Health Surveillance can be:
 - **Suitable:** there is no limitation, and consequently, the person can fully return to their workplace.
 - **Suitable with limitations:** these could be definitive or temporary limitations. The tasks need to be adapted as well as any other aspect of the workplace so that the person is not at risk.
 - **Not suitable:** for their workplace and the tasks that need to be performed. In this case, the direct manager and Human Resources will study the different alternatives.

TERMINATION

At termination, the specific situation of each professional will be assessed, as well as all the people involved.

The processes need to be adjusted to the existing regulations, but each person's situation also needs to be studied to adapt these processes to their individual needs.

The termination may arise as a result of the following situations:

- **Voluntary termination by the sick person.**
- **Decision by the INSS:**
 - **Absolute disability or severe disability.**
 - **Total disability and no possibility of changing position.**
- **Lack of decision by the INSS within 18 months of sick leave.**

If the termination is on the grounds of disability or because of a lack of decision:

- The termination also entails termination as a member. If the reason is on the grounds of absolute disability or severe disability, an immediate return of capital can be requested as established in the Internal Regulations.
- The person will receive the INSS disability benefit. If the termination is on the grounds of lack of decision, until this occurs.
- If the disability is subject to review, the workplace will be reserved for 24 months from the date of disability status to the review.

06

ADDRESSES OF
INTEREST

In Catalonia there are several organisations that fight cancer and improve the quality of life of ill people.

**CATALAN FEDERATION OF
ORGANISATIONS AGAINST CANCER
(FECEC)**

www.juntscontraelcancer.cat

Established in 2001 with the aim of joining forces in the fight against cancer in Catalonia, it is a second-tier organisation that brings together the main organisations that work to improve the quality of life of cancer patients and their families, while promoting voluntary work in the oncology field and developing programmes in the areas of dissemination and prevention, survivors and psychosocial research.

**SPANISH ASSOCIATION AGAINST
CANCER (AECC)**

www.aecc.es

Founded in 1953, it is a non-profit organisation made up of patients, relatives, volunteers, collaborators and professionals.

It develops its activity all around Spain. It strives to show the reality of cancer in Spain, to detect areas for improvement and to implement a social transformation process that helps to correct them to obtain a comprehensive and multidisciplinary approach to cancer.

ONCOLLIGA FOUNDATION

www.oncolliga.cat

Non-profit organisation whose main aim is the psychosocial care of cancer patients and their families. It is active in the regions of Barcelona and is part of the Catalan Federation of Organisations Against Cancer (FECEC) and the Catalan Federation for Social Volunteering (FCVS).

In other provinces:

- Tarragona and Terres de l'Ebre: **www.lligacontraelcancer.cat**
- Girona: **www.oncolligagirona.cat**
- Lleida: **www.contraelcancer.org**

FOUNDATION AGAINST CANCER

www.fefoc.org

Private non-profit foundation that was founded with a view to contributing towards public education and information in cancer which, in addition to supporting the continuous training of health professionals, offers oncology consultations and psychological support to cancer patients and their relatives.



 [suaracoop](#)

 [@suaracoop](#)

 [suara-cooperativa](#)

Carrer Sancho de Ávila, 52-58 1r
08018 Barcelona
tel. +34 932547690
suara@suara.coop
www.suara.coop

