

### **1.2.4 Process of responding to written enquiries (electronic and paper)**

Email and letter enquiries are triaged by one of the nurse team. The nurse decides whether the enquiry needs to be;

- Answered individually by a nurse
- Forwarded to another department
- Sent a standard reply

A member of the admin team sends out all standard responses once a decision has been made.

There are a number of electronic media through which email enquiries may be sent to us. Users may choose to contact us through their portable mobile device (Blackberry, Iphone, Ipad etc), or request us reply to the messaging inbox of their facebook account.

As long as the enquiry is still an email it should be treated as such and answered in the same way.

We respond to publicly viewable question and answers posted in the 'ask the nurses' section of our support forum Cancer Chat.

We may from time to time be asked by the social media team to answer enquires that have come via the organisations facebookpage, blog or twitter accounts.

Decisions about whether to answer these fully or suggest the user contact the helpline or email service can be made on a case by case basis

If a user contacts us through one channel and asks for a response though a different communication channel, we may choose not to respond, especially if that channel is a publically viewable one.

### **Sending standard replies**

Most enquiries are likely to need an individualised response from the nurse team. However, in some situations a standard reply will answer their question. Sending a standard reply to these enquirers ensures they receive a timely response to their enquiry.

Standard replies should be used if;

- More information is needed from the enquirer to answer their enquiry
- We are unable to answer the enquiry as the enquirer is contacting us from outside the UK
- We are unsure if the enquirer is contacting us from within the UK
- The enquirer is a student or researcher
- The enquirer is enquiring about being recruited on to a clinical trial
- The question will be answered entirely by sending a link to a specific page on Cancerhelp UK

- Someone overseas wants to access treatment in the UK

The triaging nurse informs the admin team of the action that needs to be taken including the standard reply to be used, and any page numbers for links to appropriate sections of the website.

For enquiries that cover commonly answered questions but have an issue that needs input from a nurse a selection of standard phrases are available to help maintain consistency

### **Prioritising written enquiries**

Most email enquiries will be answered in the order that they were received. The triage nurse may prioritise a specific enquiry if;

- The enquirer is about to have a hospital appointment or treatment and is asking for information prior to that.
- The enquiry is related to someone who needs more immediate medical assistance, or if there has already been a long delay in the enquiry being passed to us from another department.

### **Holding emails**

Holding replies should be sent to enquirers if;

- Necessary research will delay getting a response to the enquirer
- There is likely to be long delay in replying due to excessive work load or a public holiday

### **Establishing a rapport**

Our written replies broadly follow a letter format opening with “Dear enquirer (substitute their name when known)”. We thank the enquirer for contacting us and acknowledge their situation. Often this is a good point at which to acknowledge the emotional impact of their situation and to empathise about them needing information to help them cope or understand what is happening.

### **The body of the enquiry**

Often enquirers will be asking us about complex issues that may cover a number of different aspects of their situation. It can be helpful to reiterate individual questions before answering them. 16% of the population do not have literacy skills that are more advanced than that of an 11 year old. Many people affected by cancer are older and may have problems with their eye sight. To account for these factors written replies should adhere to the following principles;

- Use Plain English
- Use correct grammar\*
- Logically structure the reply in relation to the questions asked
- Address one subject at a time and be systematic in your answer

- Be concise, bearing in mind what has been asked
- Keep sentences short whenever possible
- Break the information down into short paragraphs using plenty of white space
- Acknowledge emotional distress empathetically
- Explain all medical terms and jargon
- Correct any misconceptions
- Answer or address all the questions that are asked
- Don't include unasked for information unless it helps to contextualise the answer
- Acknowledge areas of uncertainty and unanswerable questions
- Link to additional information but don't duplicate this in the text unnecessarily
- Use Arial font in size 12 or 14 and check that font size is consistent before sending

\*From time to time there may be differences of opinion about correct punctuation. Commas only need to be inserted during the checking process if leaving them out changes the sentence's meaning. If a checker believes commas do need to be inserted this could be an indication that the sentence is too long.

### **Linking to other sources of information and copyright issues**

When linking to electronic information, CancerHelp UK should take priority over other websites. Links may go directly to the information that has been requested (either to a page or section within a page), but sometimes it might be more appropriate to link to the opening part of the section so that the enquirer can be directed to other information that might be helpful.

When appropriate, we may direct service users to other websites. We only include links to other websites if we are confident that the content is from a reliable source, and mindful of cultural differences if the website is hosted in another country.

When linking to information we should make it clear where the link will take the enquirer to. Put in hyperlinks where possible, and use phrases like the following;

“There is more information on our website at this [link](#) (hyperlink to word link);”

Or

“There is more information on the (insert name of other organisation as a hyperlink)'s website;”

From time to time it may be appropriate to cut and paste information from one of Cancer Research UK's websites or from an existing email. When doing this it is important to ensure that the text still reads well with the rest of the email.

We should avoid cutting and pasting information from other sources, paraphrasing where ever possible. If a direct quote is taken from another website or source, this should be in quotation marks and the source fully acknowledged.

### **Ending the enquiry**

After all the questions have been answered it may be appropriate to once again acknowledge the impact that the situation has had on the enquirer. In most cases we invite the enquirer to contact us again and suggest that it may be helpful to talk things through with us on the telephone service. We may choose not to invite inappropriate enquirers to contact us again.

A standard disclaimer is included with our signature details. Email enquiries should include the name of the nurse replying in the signature and the initials of the checking nurse after the disclaimer

### **Checking written enquiries**

A colleague reads all written replies sent out from the service before they are sent. This is to check spelling and grammar, for clarity and tone and to check that the enquirer's questions have been fully addressed. It is expected that draft emails will be accurate. However, from time to time the nurse checking may want to check the provenance. If the author of the email disagrees with the comments made by the checking nurse, a consensus should be reached before the reply is sent out. If a consensus cannot be reached the head information nurse should be consulted. Before sending the email the checking nurse's initials are added below the standard signature for auditing purposes.

Email enquiries with their replies are stored by month in sub folders in the [cancer.info@cancer.org.uk](mailto:cancer.info@cancer.org.uk) "sent" folder for 12 months and then deleted. Replies to letters are kept for 12 months together with the original enquiry and then disposed of securely.

Process for managing emails through the email folders

1. A member of the administrative staff or the triage nurse if the administrative staff are unavailable accesses the cancer.info inbox (also checking the spam filter box), deletes obvious spam and prints all other emails for the designated nurse to triage.
2. The triage nurse decides whether each email needs a standard reply or should be answered by a nurse
3. The admin staff responds to standard replies and moves the ones for the nurses to answer into the "enquiries waiting to be answered" folder.
4. When a nurse selects an email they move it from "enquiries waiting to be answered" into "enquiries taken off the tray" before they start to answer it so that no one else picks it up while you are answering it.
5. To reply, the nurse clicks on reply and removes the senders email address from the "to" box to avoid the reply being inadvertently sent before it is finished. By clicking on "reply" we ensure that the sender also receives their original question as well as our response, this also helps to keep our records complete. If the email was forwarded from another department, messages from the department that have forwarded it to us should also be deleted from the reply before it is sent. When replying emails should be saved in drafts and moved to the shared drafts folder

6. It is important to move emails from folder to folder to avoid duplication. Also emails that we answer should not be deleted from any of the cancer.info folders so that we have a clear record of what has been processed.
7. If the nurse does not complete an email reply during their shift they should save it in the cancer.info “drafts” folder. Emails in the process of being answered should not be saved in the nurse’s personal drafts folder.
8. After the reply has been checked and agreed, the service user’s email address is put back into the “to” box and the reply is sent. The sent reply should be moved to the “sent” folder in cancer.info. Identifiable copies of the reply should not be saved in the nurse’s personal folders.

### **1.2.5 Process of answering email enquiries remotely**

Email enquiries are accessed at the following link

<https://webmail.cancerresearchuk.org>

The login and password will be supplied to the remote worker by telephone.

The remote worker selects emails from the folder called “enquiries waiting to be answered” and moves them into the “home worker” folder in the [cancer.info@cancer.org.uk](mailto:cancer.info@cancer.org.uk) mailbox. When choosing emails remotely, it is better not to select the emails that have been in the inbox the longest. This is because office based staff may have already selected some of these but not yet moved them electronically.

The remote worker must not copy or save any personal details of enquirers on the remote computer they are working on. Emails must not be forwarded to a personal address for people to work on at home.

The remote worker then calls the office or emails [informationnurses@cancer.org.uk](mailto:informationnurses@cancer.org.uk) and lets the staff know which ones they have taken, so that the paper copies can be put to one side. The nurse triaging emails that week will liaise with the remote worker to do this.

To work on an enquiry in the “home worker” folder, the home worker selects it and clicks on “reply”. Before starting to draft a response, the home worker deletes the email address, so that the email cannot be sent accidentally until it is completed and checked.

When the first draft of the reply is ready to be checked, it is saved in the drafts box. The remote worker changes “the subject” to “Reply ready to be checked”. When a number of emails are ready to be checked, they can call or email the nurses to let them know.

From time to time the triage nurse distributes emails to the team to check. If an email needs no changes or only needs typos correcting, the checking nurse changes the subject line to “Reply from Cancer Research UK” and sends it. If amendments need making, comments are added in a contrasting colour and the subject box amended to read “see comments”.

Once the remote worker has made amendments they change the subject box to read "ready to send". It is the checking nurse's responsibility to do a final read through and send the email to the enquirer. It is important to ensure that any notes have been removed and that the subject box has been amended appropriately.

The checking nurse databases the remote worker's emails.

### **1.2.6 Requests to answer enquiries received by the organisation through other electronic media channels (Facebook, Twitter, Bloggs etc.)**

New electronic channels for communication are developing all the time. Often other departments will use these channels to engage with supporters or the public at large. These channels include, blogging, facebook and message boards. As a rule we do not respond individually to enquiries posted through these media. The reasons for this are, that we do not have the resource to respond individually to demand generated through unplanned for access points. Also in most cases it will be inappropriate to answer sensitive medical question in a public forum.

However we work with other departments to develop standard responses which signpost users to appropriate patient information communication channels. As a department we may wish to use some new channels ourselves or choose to work closely with other departments who are doing this. This will be done in a planned way and appropriate procedures developed accordingly.

We can also offer input to other departments if they consult us on how to respond to a specific post on another channel.

### **1.2.7 Face to face enquiries**

As a rule we do not give face to face consultations. If a member of the public arrives at the CR-UK office, requesting a face to face enquiry we ask reception or security staff to recommend that they phone the freephone number and explain that we don't have the facilities on site to hold face to face consultations.

If we receive an internal request for a nurse to talk to a Cancer Research UK employee we would encourage them to use the helpline anonymously and explain the value of anonymous consultation.

If an employee is brought directly to, or turns up at our office we may choose to see the person face to face if a suitable room can be found.

In situations where a member of staff comes to us for help, it is important for us to know our boundaries and identify when it might be more appropriate for the staff member to contact Employee Support Service, or if they have a medical problem a first aider, emergency services or Occupational Health.

### **1.2.8 Procedure for answering Q and As on the Cancer Chat Forum** **Rational**

The advantage of the nurses answering questions on Cancer Chat, is that as the questions and answers are publically viewable, more people could potentially benefit from the answers we give to specific questions. As we increasingly work in a multi channel environment, it is likely that our users may want to communicate with us through different online media as well as on the telephone and by email.

From survey work carried out in 2010, we know that a proportion of our users already move between our different services. But it is likely that there are still many who don't, and who may be unaware of or not think about accessing the expert information we have available. On line contact with a nurse may have the added benefit of drawing attention to the Cancer Chat users of the other services we have on offer.

Currently members can post questions at any time on the 'ask the nurses' topic area , On the site we tell users that we will answer questions posted as soon as we can but that this may not be immediately. The procedure for answering enquiries is described below.

- When someone posts in the nurses' topic area, an email alert goes into [cancer.info@cancer.org.uk](mailto:cancer.info@cancer.org.uk) . Put them on the pile with the emails in the normal way. Unless the triaging nurse thinks they are urgent we should not treat them as a priority.
- If one of the community asks the nurses a question on another area of the forum, or asks a question that is probably best answered by us rather than another member of the community, the moderators will identify this and alert us. They check all new posts twice a day. Don't go looking for these; the moderators will identify them for us.
- When answering posts feel free to link through to CancerHelp UK, keep your answers short where you can and the tone chatty where appropriate. Perhaps go into a little less detail than you would in an email, remember this is a public forum.
- Try not to be tempted to look at other threads the person has posted on. Focus on what they are asking us now
- If they are asking lots of personal or detailed questions about a specific situation, you may judge that the forum is not an appropriate place to answer their question. In this situation you can state this in your reply and suggest they phone or email us.
- If you are going to need to research an answer, post a reply that tells the questioner that you may need to get back to them in a few days.