Evaluating patient experience of a shared care model for patients with low risk haematological conditions

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Aim
To evaluate patient experience of a model of shared care between haematologists and general practitioners (GPs).

Methods
We recruited patients with:
- chronic lymphocytic leukaemia;
- monoclonal gammopathy of undetermined significance; or
- myelodysplastic syndromes

Patients were placed on an appointment cycle beginning with one haematologist appointment; followed by three GP appointments. Patients and their GP receive a disease specific care pathway outlining:
- appointment frequency and suggested care;
- indicators for escalation; and
- contact details for support.

Patients were asked to complete a written survey about their care experience following the first haematologist and GP appointments.

Results (to date)
✓ 26 patients enrolled
✓ 78 appointments transferred to GPs
✗ 7 patients declined to participate
✓ 15 post-haematologist surveys completed
✓ 9 post-GP surveys completed

Reported travel time to appointment:

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<tr>
<th></th>
<th>GP</th>
<th>Haematologist</th>
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<tbody>
<tr>
<td>Under 15 minutes</td>
<td>67%</td>
<td>40%</td>
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<tr>
<td>Under 30 minutes</td>
<td>33%</td>
<td>60%</td>
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Proportion of patients reporting they waited less than 15 minutes after the scheduled start time:

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<tr>
<th></th>
<th>GP</th>
<th>Haematologist</th>
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<tr>
<td>89%</td>
<td></td>
<td>50%</td>
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Out-of-pocket expenses:
- 100% of patients reported $0 to $10 out-of-pocket expenses related to the GP appointment
- 60% of patients reported more than $20 out-of-pocket expenses related to the haematologist appointment

Conclusions
This pilot project demonstrates the feasibility of sharing care between haematologists and GPs. The benefits of the project include alleviating pressure on specialist haematology outpatient services and improving patient experience for in domains such as travel time, wait time and out-of-pocket expenses.

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