Australian Cancer Survivorship Centre
A Richard Pratt Legacy

A multi-site cancer survivorship clinical placement program for primary care practitioners
Presented by Georgina Wiley on behalf of the project team:
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Context

• Cancer patients have significant engagement with general practice after completing cancer treatments
• There are increasing calls for formalised models of shared care
• General Practitioners indicate a need for further training to undertake survivorship care
Background

• In 2015 Victorian Department of Health and Human Services (DHHS) funded a pilot clinical placement program:
  – 16 GPs, 12 GP nurses and 9 oncologists participated
  – Participants found the program clinically and professionally valuable

• In 2016 the DHHS provided further funds for an expanded placement program
Program development

We built the second program to enable:

- Enhanced knowledge regarding cancer diagnosis, treatment and follow-up
- Greater understanding of discipline-specific roles
- Enhanced linkages and confidence in shared care arrangements
- Greater workforce capacity
Program Development

- Expression of Interest process
- Representative advisory committee
- Placements
  - 10 hour placements (made up of MDM/outpatient and follow up clinics
  - CPD points
  - Financial stipend
- Supporting materials
  - Toolkit
  - Videos
- Evaluation
  - Pre–and post placement questionnaires
  - Focus group
  - Interviews with site based coordinators
Results

Collaborating sites

• Austin Health
• Royal Melbourne/Women’s
• Western Health
• Peter Mac

Participants

• 47 generalists: 33 GPs and 16 GPNs
• 29 hospital-based specialists
Pre-placement survey data (generalists)

- Top learning priorities for generalists included:
  - knowledge of issues that patients can experience after completing cancer treatments (n=37, 76%)
  - knowledge of recommended post treatment care (n=37, 76%)
  - develop links to promote shared care (n=23, 47%)
  - a general understanding of hospital-based oncology care (n=22, 41%)
Pre-placement survey data (specialists)

Perceived benefits

• Specialists considered benefits from participation to be:
  ▪ developing links with general practice (n=17, 59%)
  ▪ improved patient care (n=15, 52%)
  ▪ improved communication with general practitioners (n=15, 52%)
Post-placement survey data

• 100% of generalists felt knowledge gained would be used in practice
• 98% of generalists and 91% of specialists felt the program was relevant to their practice
### Post-placement survey data (generalists)

<table>
<thead>
<tr>
<th>Generalists (n=49)</th>
<th>Post placement knowledge</th>
<th>Post placement confidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychosocial support e.g. fear of recurrence</td>
<td>↑</td>
<td>↑</td>
</tr>
<tr>
<td>Physical e.g., fatigue</td>
<td>↑</td>
<td>↑</td>
</tr>
<tr>
<td><strong>Practical e.g. advice re: work, finances</strong></td>
<td>No change</td>
<td>No change</td>
</tr>
<tr>
<td>Providing information on cancer survivorship</td>
<td>↑</td>
<td>↑</td>
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<tr>
<td>Adjusting to life after treatment</td>
<td>↑</td>
<td>↑</td>
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<tr>
<td>Surveillance for cancer recurrence</td>
<td>↑</td>
<td>↑</td>
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<tr>
<td>Follow up cancer care including the management of comorbidities</td>
<td>↑</td>
<td>↑</td>
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<tr>
<td>Coordinating complex care between multiple health disciplines and care settings</td>
<td>↑</td>
<td>↑</td>
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<tr>
<td>Secondary preventative strategies e.g. healthy weight and regular exercise</td>
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- Self rated knowledge and confidence
- All of the participants’ median scores for all increased during the placement period, with the exception of one item
Post-placement survey data (specialists)

- Specialists self-reported high baseline levels of knowledge and confidence (pre-placement)
- The majority of median knowledge and confidence scores remained the same following the placement period.
Challenges

• Recruiting sites outside metropolitan areas
• Difficulty recruiting GPN
• Creating an environment for specialists to learn
• Program administration
How will you discuss this? That we didn’t engage with them for pre placement or that they didn’t engage?

Piper Amanda, 31/01/2017
Discussion

• Participants overwhelmingly indicated that the program was relevant to practice, met learning outcomes, was well organised, and they would recommend the placement to colleagues
• Generalists reported improved knowledge and confidence regarding survivorship care
• Specialists reported limited education opportunities
Conclusions

• Clinically and professionally valuable
• Feasible across multiple acute care sites
• Generalists and specialists are willing to engage in shared care models
• The program evaluation revealed enablers and barriers to shared care
Next steps

- Explore an ongoing placement program
- Develop resources, protocols, guidelines to support shared care of survivors
- Develop other education about cancer, cancer treatments and cancer survivorship for generalists
The ACSC would like to thank the Victorian Department of Health and Human Services for funding both the initial pilot and the second program

For further details please contact georgina.wiley@petermac.org or https://www.petermac.org/scancersurvivorship