

18 Months of „Mobile Oncologic Service“ in Lower Bavaria – a New Path of Ambulant Care for Tumor Patients

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Introduction

The „mobile oncologic service – MOD“ was established as a model of care for multimorbid, oncologic patients in the rural area. Highly specialized and trained assistants “Qualified person for oral and subcutaneous antitumor-therapy” take care of the supply of oral and subcutaneous antitumor-agents at patients’ homes. Main issues of the project contain transmitting of delegable, medical tasks and improvement of patients’ compliance. Quality of life, safety of therapies and patient satisfaction were considered as indicators.

Methods

The sample period of this descriptive study ranged from 08/2013-02/2015. Inclusion criteria were: malignant disease, considerably restricted mobility, high danger of infection and missing options for transport. The number of patients, the frequency of visits, the travel distance for the MOD-assistants and the length of visit per patient were recorded by standardized case report forms. The influence of MOD on quality of life, safety of the therapy and patient satisfaction were registered by a standardized questionnaire and rating scales, ranging from 1-6.

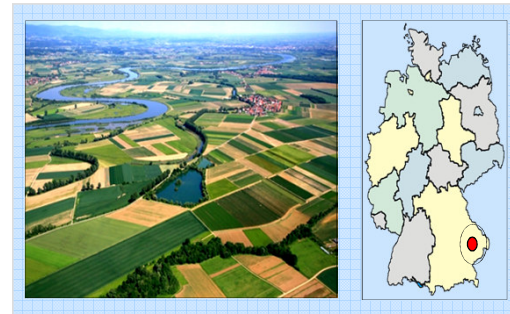
Results

Within 18 months, 97 patients were looked after in 791 ambulant visits. Per Quarter an average number of 32 patients were taken care of by 2-3 MOD assistants at an average of 4-5 visits at home. The mean distance per visit was 20 km, the mean duration of the visit was 63 minutes (24 minutes of travel, 29 minutes visiting time and 5 minutes of conferring a doctor and documentation, respectively). Overall, 65 patients were interviewed for evaluation: 92% of patients rated with “very good” for the reduced efforts for visiting a doctor’s practice, 58% for the reduction of distress for their relatives and 78,5% for an improvement of their quality of life. 92% of patients assessed the care by MOD as “very important” and 95% were very satisfied with MOD’s work.

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| | Average per quarter | | | | | Average per quarter |
|--|---------------------|---------|---------|---------|---------|---------------------|
| | 4/13 | 1/14 | 2/14 | 3/14 | 4/14 | |
| Visited patients per quarter | 22 | 44 | 29 | 36 | 29 | 32 |
| Total visits per quarter | 110 | 134 | 139 | 127 | 142 | 130 |
| Visits per patient | 5,00 | 3,05 | 4,79 | 3,53 | 4,9 | 4,3 |
| Total driven distance (all patients) in km | 2.009,3 | 2.459,2 | 2.440,5 | 3.198,1 | 3.004,3 | 2622 km |
| Total driving time (all patients) in min. | 2.489 | 3.103 | 2.881 | 3.845 | 3.704 | 3204 min |
| Average driven distance per patient in km | 91,33 | 55,89 | 84,16 | 88,84 | 103,60 | 86 km |
| Average driving time per patient in min. | 113,14 | 70,52 | 99,35 | 106,8 | 127,72 | 105 Min |
| Total visiting time (all patients) in min. | 2.640 | 4.010 | 4.215 | 3.815 | 4.305 | 3797 min |
| Average visiting time per patient in min. | 78,53 | 120,00 | 91,14 | 145,34 | 84,12 | 129,75 |

| | TOTAL (all quarters) | | | | | | Not known |
|--|----------------------|----|---|---|---|---------------|-----------|
| | 1 (very good) | 2 | 3 | 4 | 5 | 6 (very poor) | |
| Reduced efforts for visiting a doctor’s practice | 60 | 5 | 0 | 0 | 0 | 0 | 0 |
| Reduction of distress for the relatives | 38 | 27 | 0 | 0 | 0 | 0 | 0 |
| Improvement of therapy safety by the MOD | 49 | 16 | 0 | 0 | 0 | 0 | 0 |
| Improvement of quality of life | 51 | 14 | 0 | 0 | 0 | 0 | 0 |
| Importance of care by the MOD | 60 | 5 | 0 | 0 | 0 | 0 | 0 |
| Satification with the MOD | 62 | 3 | 0 | 0 | 0 | 0 | 0 |

Table 2 Patient-Survey of MOD

| | Average time per visit in min. |
|---------------|--------------------------------|
| Driving time | 24 |
| Visiting time | 29 |

Conclusions

The additional, ambulant care at home of selected hematologic/oncologic patients by specialized and trained assistants supports a high patient satisfaction. In special, long distances and frequent visits at a doctor’s practice can be avoided for multimorbid patients, substantially improving their quality of life. Compliance and therapy safety can substantially be improved. Two-weekly visits at home – with justifiable effort – seem to be lasting.

Declarations: no conflicts of interest.