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Community Therapeutics Programme - Delivering Specialist Treatments in the Community

Introduction and Problem statement

Specialist therapeutic infusions and subcutaneous injections are important treatments for rheumatology patients. The Immunology Hub infusion centre and the Autoimmunity & Rheumatology Centre at SGH offers these therapeutic services, respectively. However, the average waiting time was 6-8 weeks for infusions so that many of these patients were admitted to the wards. This impacts bed occupancy and contributes to a critical bed crunch. Furthermore, patients who receive subcutaneous injections in the Autoimmunity & Rheumatology Centre (ARC) mostly require caregivers to travel and escort them which has monetary implications since they require time off work.

Aims

To **establish a new model of care** for delivery of specialist therapeutic infusions and subcutaneous injections in **the community**

To **reduce waiting time** to procedure and optimize inpatient bed use and Specialist outpatient clinic visits

change

In Phase 2 of the

will be offered at

Tiong Bahru

Project, the service

Community Health

which will serve as

Centre (TBCHC),

our 1st satellite

infusion centre

To reduce traveling time, transport cost and time off work for patients and their caregivers

Methodology

Create urgency

The waiting time to

procedure was up

to 8 weeks, which

control and patient

can negatively

affect disease

outcomes

We adopted **Kotter's 8-stage of change model** to cause a paradigm shift in our treatment delivery strategy. The process is delineated in the schematic below:

Form a powerful

coalition among

healthcare

leadership

We engaged and

formed coalitions

Pharmacy, Finance

with Nursing,

MOH Office for

Transformation

management and

obtained approval from the Medical

Healthcare

and Senior

Board

Create a vision for change

among

stakeholders

We discussed our vision, engaged our

collaborators, set

objectives and

plans on how to

achieve our goals

Communicate the vision to all healthcare workers

Various plans were

logistical, medical

contingency, staff

Data methodology

& analytics were

discussed

communications

executed;

manpower,

operational,

Remove

We obtained

funding from

Foundation so that

the services from

model would not

patients financially

this new care

impact our

Temasek

obstacles for

frontline staff

Build on the

Create short-

term wins for

healthcare

Waiting time to

procedure was

reduced from an

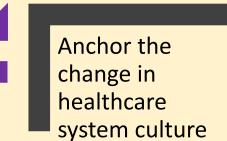
average of 8 weeks

months of the CTP

to around 1 week

in the first 3

teams



In Phase 3 of the

Project, the CTP

will be offered at

specified DOT-GPs,

and Singhealth

Polyclinics

Workflow for the CTP

- Eligible patients are recruited by Doctors. **Exclusion** criteria include:
- Poor venous access
- History of unauthorized IV usePsychiatric conditions



Contingency workflows are in place to ensure:

- Continuity in treatments
- > Safety for the patient and CTP nurse
- Ability to mark-task procedures
- ➤ That the necessary medications were prepared and delivered in time for the procedure



Created a "Virtual Room" in the Outpatient Administration System to differentiate CTP resource from the other normal resources



We removed the **location indicator** from the default SMS reminder template to avoid any confusion to patients



A **FormSG** survey was created to collate patient feedback and is sent via SMS following the service

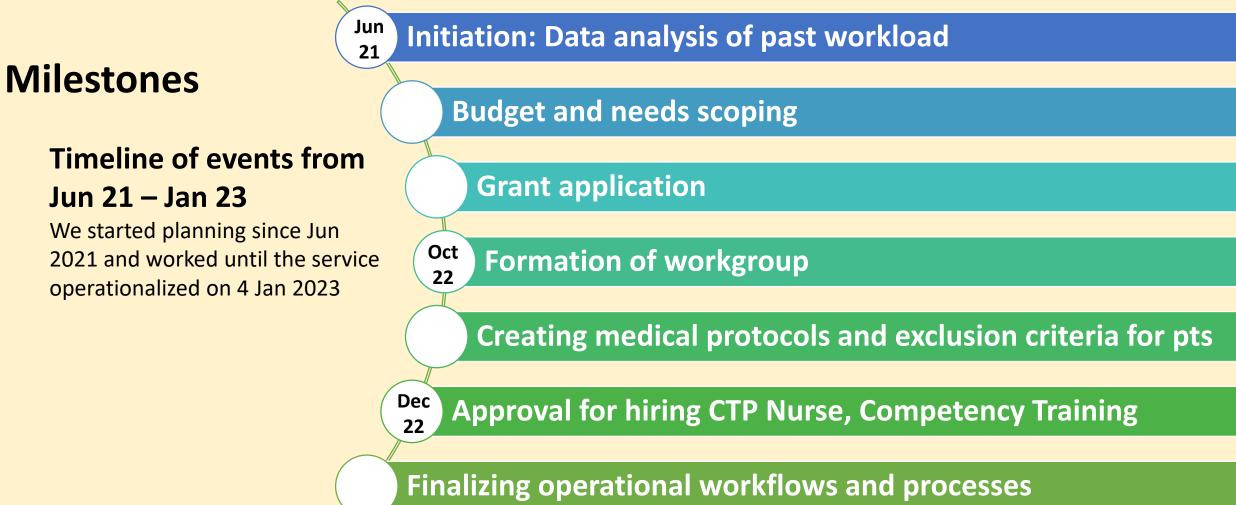
Our CTP nurse also offers a printed **QR code** (shown on the left) in case of difficulties accessing the link

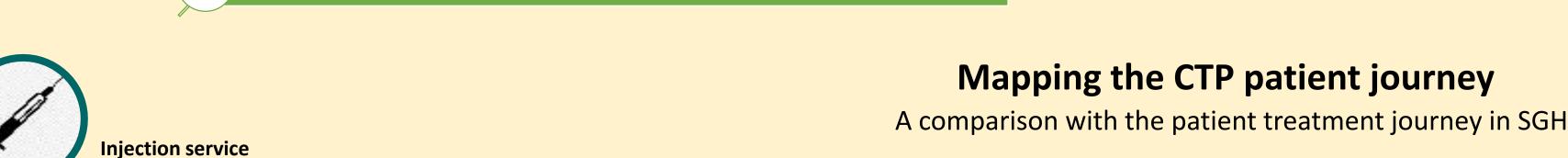


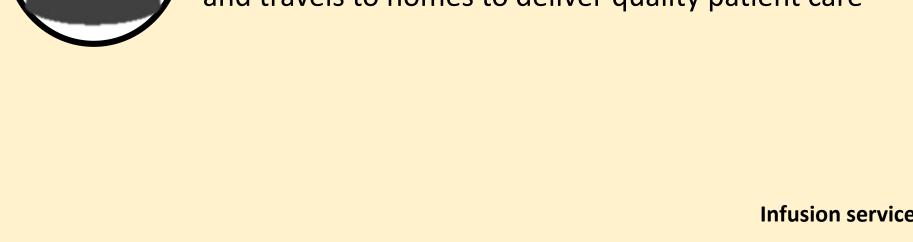
Staff collects

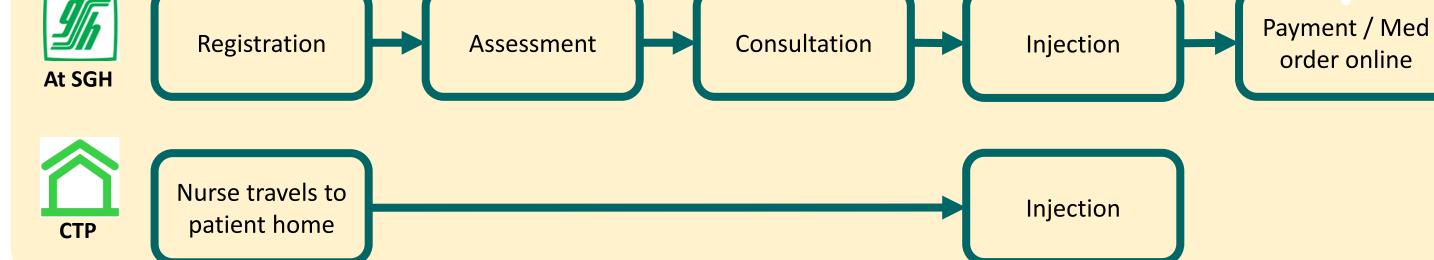
Our CTP Nurse is the **Core** of the new model of care She coordinates resources; appointment, equipment, consumables and travels to homes to deliver quality patient care

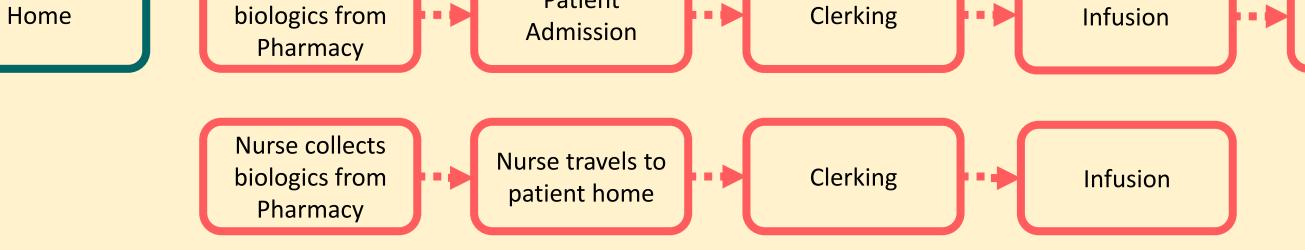
Discharge



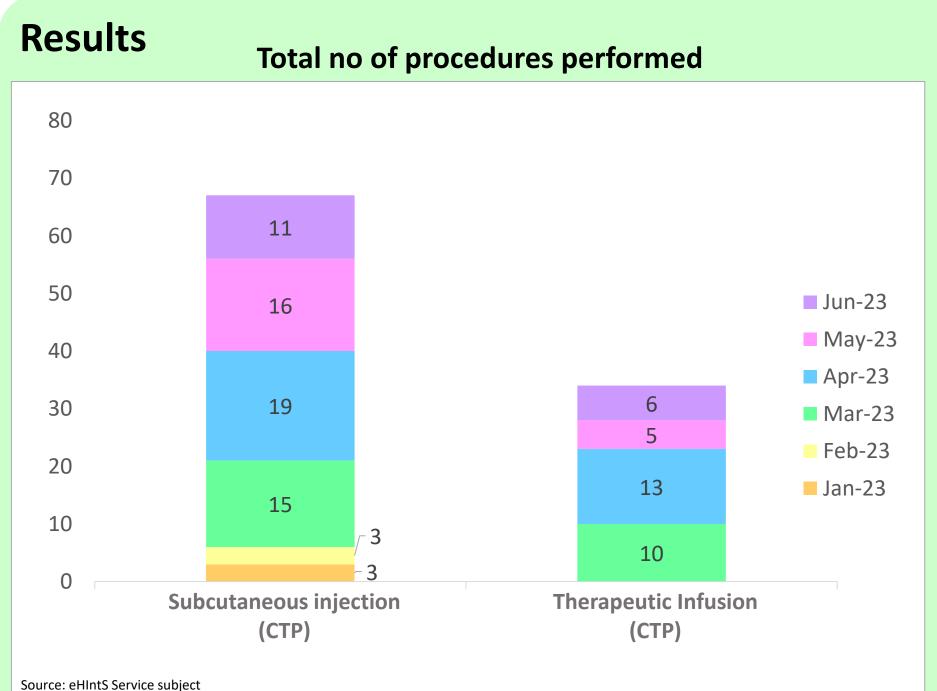








Patient



Updated data for number of procedures performed to **19 June 2023**. Our target number of procedures performed under the CTP is **1000 procedures** (injections and infusions) by 2026.

Lower average waiting time for infusion services after CTP was introduced

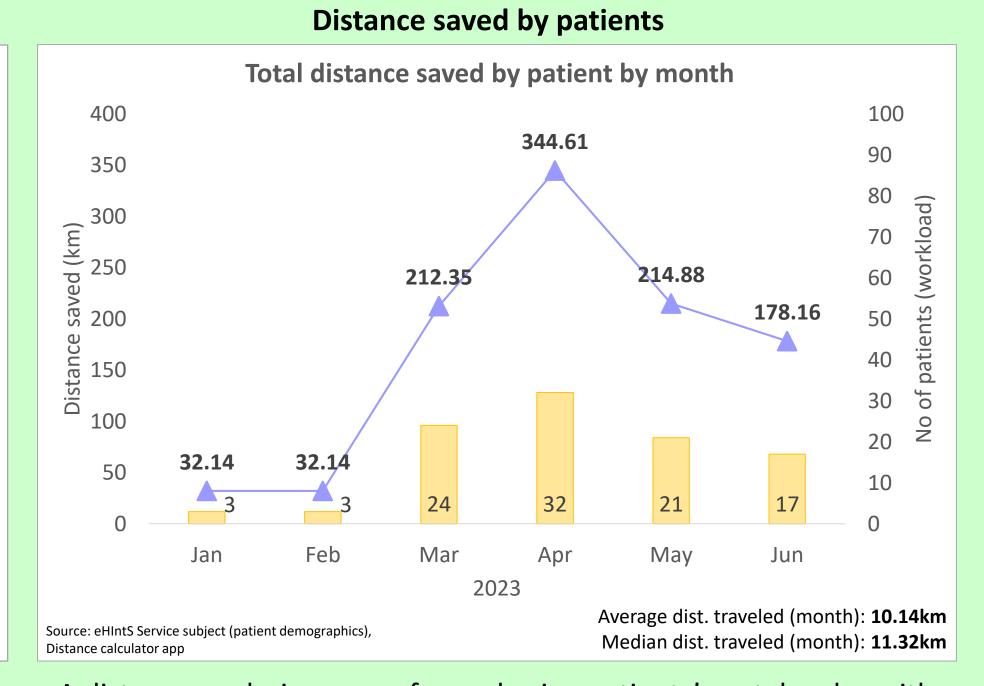
Filters: Movement count = 0, Appt date reason = Earliest date + Dr request + expected unknown, Appointment status = actualized + no-show

The average number of waiting days for infusion services at the Immunology Hub was

57 days (approx. 8 weeks) in Dec 2022.

The CTP has reduced average waiting days to 7 days (approx. 1 week) in Jun 2022.

The CTP has reduced average waiting days to 7 days (approx. 1 week) in Jun 2023.



A distance analysis was performed using patients' postal codes with a specific online app.

The table shows total distance sayed by patients who used the CTP.

The table shows total distance saved by patients who used the CTP.

maps.singaporeexpats.com/distance-calculator.htm



 We successfully crafted and implemented a
 model of care which delivers specialist therapeutics in the community in a relatively short time of under 2 years.

Conclusion / Future planning