Central Regional Health System

Sharing @ ComSA Launch
11 Apr 2015
Assigned Regions by Planning Area & Population (as at 2013)

Total Pop: 5.18M (2011)

- SGH (0.68M) Incl Punggol (88K) & Sengkang (234K)
- TTSH (1.40M) Incl Hougang (297K) & Serangoon (169K)
- NUH (1.46M)
- AH
- KTPH (0.69M)
- CGH (0.94M)

Legend:
- Central (TTSH)
- East (CGH)
- East2 (BGH)
- North (KTPH)
- North2 (WLGH)
- NthEast (SKGH)
- South (SGH)
- SthWest (NUH)
- West (NTFGH)
- West2 (XGH)

Source: Ministry of Health, 4 Feb 2013
For Healthcare Clusters Planning Use Only
Climate – Why RHS?

- Ageing
- Increasing expectations
- Changing social support
- Manpower constraints
- Rising costs
- Knowledge explosion
- Increasing complexities
- Inconsistency and unsafe care
- Narrow window of opportunities
Goal

RHS: Relationship Based – Healthcare that is Sustainable
RHS Formula

- Focus on the 20:80
- Majority of Future Needs are Preventable
- Better Detection and Earlier Intervention
- Stabilize the Population ‘You Know’
- Shift to a Lower Cost Model
  - Away from hospital centric
  - Away from doctor centric
  - Away from face to face
  - Away from variations
  - Patient receiving care to self-care
- Integrate for efficiency, convenient and coordinated care
Segmenting Our Population

Outreach Approach
1. Lower SES: Case finding for residents of rental flats (Priority 5)
2. School kids: Partner with HPB School Health
3. Working adults: Workplace Health/Partner with MOM
4. General population: Community & opportunistic screening

Known – Approx 320,000 in Central Region (20-30%)

Health Status
- Well / At Risk
- Pre-Clinical
- Chronic Illness ➔ Progression/Complication
- End of Life

Led by
- Community
- Primary Care
- Hospital
- Palliative

Health Co-ordination
- Automated reminders at set intervals
- Automated monitoring, escalation when needed
- Care Co-ord by Healthcare Professional
- Case Management

Goal(s)
- Maintain health
- Prevent onset
- Delay progression
- Maintain function, rationalise care (FP, SOC), pre-empt complications, avoid admission
- Stabilise, restore function where possible, avoid admission
- Minimise pain, avoid admission
RHS Build Out Phases

Phase 1
Coordinating & Integrating Care
1. Build capability
2. Integrate care for frail and complex
3. Develop pilots and new models

Phase 2
Developing Care Packages for the Known
1. Stratify into sub-population
2. Understand needs
3. Develop appropriate care bundles
4. Pilot
5. Spread

Phase 3
Understanding the Unknown
1. Opportunistic screening
2. Targeted population case finding/interventions
   - School going age
   - Employee health
   - Lower social economic status

Optimise Current Care System
Optimise Current Patients
Optimise Future Populations
Our Current Programs at a Glance

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Programs:
- ACTION / Interim Care Giver
- Project CARE
- PACH / Home Ventilator Service
- Project PreCARE
- Team Based Primary Care
- FA Capitation Pilot
- Home Care
- FMC / CHC / GP Partnerships
- Opportunistic Health Screening @ Polyclinics
- Rental Flats Case Finding/CHEP
(Mobile) Community Health Centre

• Wider geographical coverage and hence nearer to residents and GP Clinics – Bishan-Toa Payoh, Hougang-Serangoon, Whampoa-Kallang
• Operating on board 24-seater
• Started Nov 2014

Services Offered:

- Diabetic Retinal Photography
- Diabetic Foot Screening
- Nurse Counselling for Chronic Diseases
Access to Drugs

ComSA Doctor:
1. To fill in prescription slips and faxed over to TPY Pharmacy at the end of each consultation

TPY- Pharmacy:
1. To check Rx is completed and do quick reg. in epos
2. To register patient as subsidized outpatient
3. To process and dispense prescriptions
4. To prepare medications for same week batch collection

TPY- Clinic Ops:
1. To tag patients as “ComSA”
2. To close bill

ComSA Staff/Volunteer:
1. To bring original prescription slips
2. To collect medication and invoices (payment via Giro)
Supporting the Frail

- Health managers at acute, primary & community care act as the care co-ordinator for each resident
- Pairing the FA resident with trained volunteers: to keep patients well in the community