

Project Title

Post-implementation Review of Programme SALVE (Skin Aid for the Vulnerable and Elderly) – Lessons gleaned two and a half years on

Project Lead and Members

Project lead: Dr Joel Lim

Project members: Agnes Chong, Jolyna Lee, Brenda Lim, Xu Jing

Organisation(s) Involved

National Skin Centre

Healthcare Family Group(s) Involved in this Project

Medical, Nursing, Care and Counselling

Applicable Specialty or Discipline

Dermatology

Project Period

Start date: January 2020

Completed date: On-going

Aims

To prevent unnecessary frequent preventable re-admissions for patients with extensive dermatosis that responds quickly to intensive skin directed treatment

Background

We team identified a group of patients who are re-admitted on a regular basis into the Dermatology Ward, bearing similar traits. They have extensive dermatoses, which respond well within a few days solely with intensive skin directed therapy (e.g. double pyjama treatment) and good skin care administered by nurses over several days. Unfortunately, as most of these patients are frail, they have visuo-auditory deficits and cognitive impairment

which impede their adherence to topical medications independently back in the community. They tend to not have a social support network they can tap on and are also financially strapped. In addition, they have poor insight into their skin condition and thus are often unmotivated in self-directed skin care. As such, they have a low threshold to “admit themselves” for care. It is unsurprising that these patients decompensate and are re-admitted weeks later as no long-term solution is available to address the constellation of the aforementioned problems. Current national home nursing services cannot cater to the daily need for skin care that these group of patients require. Programme SALVE (Skin Aid for the Vulnerable and Elderly) was conceived by NSC, and with funding from the Healthcare Endowment fund, aims to target this underserved demographic of patients so as to reduce the unnecessary re-admissions that will eventuate in cost savings and improved resource allocation.

Methods

Programme SALVE will cover the transport cost to and from the patients’ home to the National Skin Centre, outpatient day care treatment cost, and cost of “standard” topical medications and wet wraps. This is achieved with funding and through the efforts of a multidisciplinary team comprising doctors, nurses, medical social workers, pharmacists, and administrative support staff.

Results

See poster appended/ below

Lessons Learnt

Programme SALVE has demonstrated a proof of concept of a multidisciplinary outpatient based skincare programme in preventing avoidable re admissions while bringing cost savings and value to unique subset of frail and vulnerable patients.

Conclusion

Topical care has always been the fundamental bedrock of therapeutics in dermatology. This is predicated on compliance which is in itself, dependant on various factors such as social, financial and psychological aspects. During clinical care, we may encounter, from time to time, patients that may fit the profile of the aforementioned patient. Such occurrences may not be

frequent as some may have the financial means to enlist the services of a dedicated caregiver, whilst others have good social support which allows for mobilisation of family members to help. However, if these are not available to the patient, he or she would be “in limbo” and frankly, helpless as the clinician continues to escalate treatment based on the therapeutic ladder without addressing the “non-medical factors”. We highlight the effectiveness of an outpatient-based model in aiding such susceptible groups with timely skin care, whilst achieve cost savings, prevent avoidable re-admissions and improve quality of life for the patient.

Additional Information

Singapore Health & Biomedical Congress (SHBC) 2022: Best Poster Award (Nursing)
(Posters category) – (Merit Award)

Project Category

Care Continuum

Intermediate and Long Term Care & Community Care, Home Care

Keywords

Dermatology, Value, Intensive Skin Care, Topical Therapy, Wet Wraps

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Post-implementation Review of Programme SALVE (Skin Aid for the Vulnerable and Elderly) – Lessons gleaned two and a half years on

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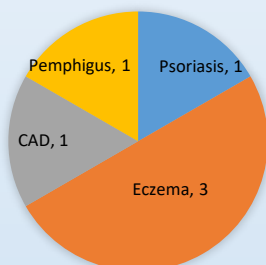
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BACKGROUND

- Skin Aid for the Vulnerable and Elderly (SALVE) Programme was conceptualized to circumvent preventable re-admissions.
- A Subset of elderly/frail patients with extensive dermatoses who respond well to inpatient skin care.
- Review of 30 months Programme SALVE was performed to ascertain effectiveness.

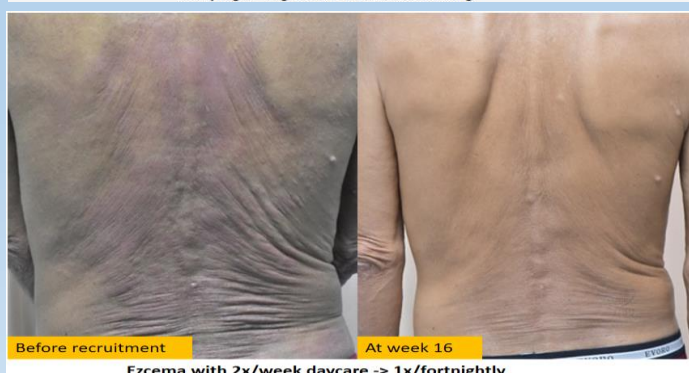
RESULTS

- N = 6
- 5 (83%) were male
- Mean age of 73 years.
- 291 treatment visits
- Primary Outcome:- 0 re-admissions
- Secondary Outcome:-
 - 61% -100% improvement in skin conditions
 - Approximately \$7000 was saved per patient per year from the intervention.



No.	Age/Gender	Diagnosis	Disease Severity at recruitment	Best Score achieved	No. of sessions required	(%) Skin improvement seen
1	60/M	Psoriasis	24.6 (PASI)	9.6 (PASI)	7 (1x/week)	61%
2	81/M	Chronic Actinic Dermatitis	53 (SCORAD)	5.7 (SCORAD)	36 (3x/week)	90%
3	72/F	Pemphigus Vulgaris	3-4% (Body Surface Area)	0% (Body Surface Area)	11 (1x/week)	100%
4	66/M	Eczema	22.3 (SCORAD)	4.7 (SCORAD)	31 (2x/week)	79%
5	81/M	Eczema	82.6 (SCORAD)	14.9 (SCORAD)	28 (2x/week)	82%
6	76/M	Eczema	72 (SCORAD)	24.7 (SCORAD)	13 (2x/week)	66%

Most of the patients were successfully discharged from the programme subsequently due sustained improvement upon serial clinical reviews. A patient who requires frequent maintenance topical treatment was referred to Home Nursing Foundation for subsequent continuity of care.



METHODS

- Patients who fulfilled enrolment criteria into Programme SALVE identified by clinician
 - ✓ Extensive or medically significant skin disease burden that responds well to skin directed therapy
 - ✓ Contraindication(s) to phototherapy or is not an ideal candidate for systemic immunosuppressive treatment
 - ✓ Not eligible / not keen for placement in a healthcare institution
 - ✓ Existing home conditions and/or care givers unable to support level of care needed for skin care.
- Assessed for suitability to receive subsidies from NSC Health Fund by the social worker
- Period of study: 1 January 2020 till 30 June 2022
- Demographic data and clinical response were tracked.
- Primary outcome was to assess frequency of dermatology-related readmissions and secondarily determine (i) improvement in skin disease over time and (ii) cost savings.



CONCLUSIONS

This Programme SALVE has demonstrated a proof of concept of a multidisciplinary outpatient-based skincare programme in preventing avoidable re-admissions while bringing cost savings and value to unique subset of patients.

ACKNOWLEDGMENT

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