CHI Learning & Development (CHILD) System



Project Title

Lab Tests @ Home

Project Lead and Members

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Organisation(s) Involved

Active Global Home & Community Care

Healthcare Family Group(s) Involved in this Project

Nursing

Project Period

Start date: Aug 2022

Aim(s)

- To better serve homebound elderly patients who require blood test monitoring by bringing venepuncture services into their homes
- To save time and costs for patients and caregivers who would otherwise have to travel to, and queue at GP/polyclinics/SOCs for lab tests
- To reduce the burden of hospital SOC visits and primary care visits, especially when wait times are at an unprecedented high
- To reduce infection risk of vulnerable elderly by cutting down visits to high risk areas like hospitals and primary care clinics

Background

See poster appended/below

Methods

See poster appended/below





Results

See poster appended/ below

Conclusion

See poster appended/ below

Additional Information

This project was featured at the Central Health Action & Learning Kampung (CHALK) Poster Showcase 2022.

Project Category

Care Continuum

Intermediate and Long Term Care, Home Care

Care & Process Redesign

Access to Care

Keywords

Homebound, Blood Test, Venepuncture

Name and Email of Project Contact Person(s)

Name: TTSH Network Development (Partnerships)

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CHALK 2022 - Poster #1

Lab Tests @ Home

Team Members

Nora Bte SALLEH (RN) | YAP Mei Kei (RN) | Diana Puteri RAZMARA (RN) | Dr Adriel Rao



Active Global has secured the necessary licenses and capabilities to help patients with limited mobility have their blood taken at home and results conveyed to patient's primary physicians.

Primary Objective:

To better serve homebound elderly patients who require blood test monitoring by bringing venepuncture services into their homes

Secondary Objectives:

- To save time and costs for patients and caregivers who would otherwise have to travel to, and queue at GP/polyclinics/SOCs for lab tests
- To reduce the burden of hospital SOC visits and primary care visits, especially when wait times are at an unprecedented high
- To reduce infection risk of vulnerable elderly by cutting down visits to high-risk areas like hospitals and primary care clinics

Project Details

- The project is led by Active Global's Medical Director and in house Nursing Team
- Service started third quarter of 2022 after successful application to MOH for off-site clinic licence
- Awareness of the service was raised to hospital teams we have been working with, and referral process shared
- A "Home Nursing" referral will be raised in IRMS (AIC portal) by the referring team
- Hospital contact to receive results will be indicated via a secondary email reminder to the nursing team
- Service provided by our in house nurses' team, and nurse visits usually happen within days after referral is received

- We work with an accredited local medical laboratory where results are conveyed via a secure Biomark platform
- With the patient's consent, the lab results are then shared to the relevant hospital team within 24-48 hours
- In the event of a critical lab result, Active Global will be contacted first by phone, followed by the emergency contact person

Common use cases thus far:

- Monitoring of INR for patients on warfarin
- Monitoring of renal panel for patients on medications that can affect electrolyte levels
- Ad hoc bloods as requested by patient's primary physician

Cost of service:

- Service provided under the "Subsidised Home Nursing" framework, meaning that it is very affordable for most patients
- For example, patients above 75% subsidy on means testing pay \$0 out-of-pocket for the nurse visit (88% of AG's clients pay zero OOP for their Home Nursing visit)
- · Patients end up usually paying for only the cost of the lab tests:
 - ▶ FBC ~ S\$10.
 - ▶ Renal panel ~ S\$18,
 - Coagulation Profile ~ S\$27

Conclusion

- This service started in August 2022 and was very well received by the hospital teams whom we contacted, and by patients.
- Cost and time savings are not easily quantifiable thus far, however we believe that this is a huge value-add to the RHS ecosystem that is a win-win for both providers and patients.

