

VALUE-BASED HEALTHCARE CONFERENCE 2024

22-23 AUGUST 2024

Open Access 24-Hr Holter Monitoring – a Piloting Initiative between National Healthcare Group Polyclinics and Khoo Teck Puat Hospital, Singapore

Authors: Sze Kai Ping, FCFP(S), Lim Ziliang, FCFP(S), Lee Wei Zhen Candice, MMed (FM), Nicholas Tan Wen Jie BBA (Singapore), Patrick Lim Zhan Yun, MRCP (UK)

AIM

1. KTPH Open Access 24-Hr Holter Monitoring is part of a new co-management care model for low-risk patients with recurrent palpitations piloted in 2023.
2. We aim to increase its uptake in Yishun and Woodlands Polyclinic to 100% of eligible patients over 6 months from October 2023 to March 2024.

BACKGROUND

1. The burgeoning demands of the aging population in Singapore underscore a pressing need for heightened efficiency in healthcare resource allocation and value-based care.
2. A significant proportion of Cardiology outpatient visits for palpitations does not require specialist expertise, thus emphasising the imperative for judicious right-siting of suitable palpitation cases towards primary care.

METHODOLOGY

1. Referral processes were streamlined between primary care and KTPH cardiology department to ensure efficient communication and coordination.
2. Educational sessions were provided for polyclinic doctors on the right-siting processes and patient educational materials were disseminated to facilitate doctors' consultations regarding 24-hour Holter monitoring.
3. Through monthly auditing, wrongly sited referrals, administrative lapses and incomplete laboratory work-ups were identified and addressed individually
4. The Co-ordinating Advisory Care Team (CoACT) platform facilitated the co-management of patients with KTPH Cardiologists.

RESULTS

1. Uptake rates in Yishun and Woodlands Polyclinics steadily increased to 80% by December 2023.
2. Proportion of complete laboratory work-ups reached 100% in March and April 2024.
3. Proportion of wrongly sited referrals and administrative lapses decreased.
4. Average lead time for tertiary investigations decreased amongst the referred cases for palpitations from 49 days to the first specialist outpatient consultation to 19 days to open access 24-Hr Holter monitoring appointment.
5. Right-siting of care, through reduced cardiology specialty outpatient clinic (SOC) visits, optimised resource allocation.
6. Empowering primary care doctors to co-manage cardiac conditions comprehensively with cardiologists enhanced patient care.

CONCLUSION

1. The **systematic implementation** of open access 24-hour Holter Monitoring **improves quality of healthcare services** through direct access to care, highest patient safety, improved access to care, optimised cost efficiency and patient-centred care.
2. It has proven to be an **effective value-driven care model** for appropriately managing low-risk patients with recurrent palpitations. It can also be feasibly **scaled across all NHGP polyclinics** in near future.
3. **Effective communication and collaboration** between primary care and specialty teams are crucial.
4. This collaborative approach not only **optimises resource utilisation** but also ensures **timely management**, thereby **enhancing overall patient care and satisfaction**.