



# Clinician-led **Multidisciplinary** **Disease** Management Community Programmes

*Heart-to-Heart Programme*

*Early Supported Discharge for **Stroke***

***Respiratory Collaborative Care Team***





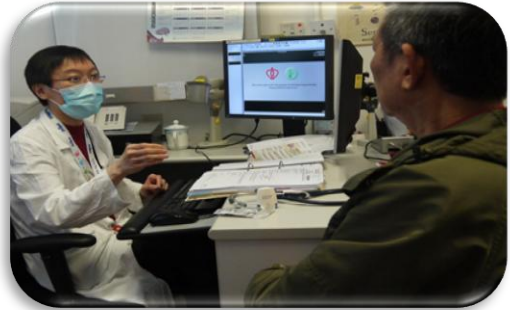
# Community Care



# Telemonitoring



# supported by Hospital





## Levels of telemonitoring

- Chronic obstructive pulmonary disease (COPD) patients
  - **Self-monitor** symptoms via COPD Assessment Test (**CAT**)
  - **Self-management** information provided according to severity of symptom score



- Patients at risk of **hypoxia** receive continuous pulse oximetry monitoring (**SpO<sub>2</sub>**)
- Patients on home non-invasive ventilation (**NIV**)



NIV



SpO<sub>2</sub>

Point of contact for patients

Patient education & problem-solving

CAT scores

|   |                    |                          | 26/1 | 27/1 | 28/1 | 29/1 |    |
|---|--------------------|--------------------------|------|------|------|------|----|
| 1 | 我沒有咳嗽              | 0-5 我不停咳嗽                | 1    | 4    | 3    | 3    |    |
| 2 | 我肺內完全沒有痰液          | 0-5 我肺內完全充滿痰液            | 1    | 5    | 3    | 3    |    |
| 3 | 我胸口完全沒有繃緊的感覺       | 0-5 我胸口感到十分繃緊            | 1    | 5    | 3    | 3    |    |
| 4 | 當我上斜路或上一層樓梯時,我沒有氣喘 | 0-5 當我上斜路或上一層樓梯時,我感到十分氣喘 | 1    | 4    | 4    | 5    |    |
| 5 | 我在家中的活動不受限制        | 0-5 我在家中的活動十分受限制         | 1    | 4    | 3    | 3    |    |
| 6 | 儘管我的肺部情況,我仍有信心離家外出 | 0-5 因為我的肺部情況,我完全沒有信心離家外出 | 1    | 3    | 3    | 4    |    |
| 7 | 我睡得很好              | 0-5 我因肺部情況而睡得不好          | 1    | 4    | 4    | 3    |    |
| 8 | 我精力充沛              | 0-5 我完全沒有精力              | 1    | 2    | 4    | 3    |    |
|   |                    |                          | 總分   | 8    | 31   | 27   | 27 |

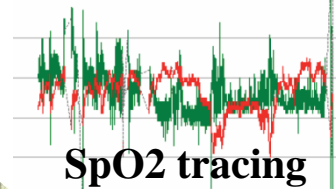
Modern communication technology



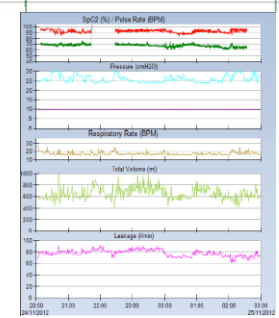
CAT

Prompt response to technical difficulties

Monitoring Staff (Nurse/Allied Health)



Doctor



Set working protocol Determine treatment approach

Monitoring of data

Transfer of information

Maintain web server

Inform on changes in patient condition



TeleTREK

# *Key Successes*

## Use of **technology**

- Support patients requiring **complex care**
  - Mechanical ventilation
  - Oxygen therapy
- Empower patients to self-monitor symptoms and learn disease **self-management**
- **Clinical decisions based on data** (SpO<sub>2</sub>, NIV parameters, CAT scores)

# *Obstacles*

- **Information sharing**

- Web data cannot be accessed via CMS or ePR
- Only Drs can read entries of staff from different disciplines
- Nurse cannot read physiotherapist's entries and vice versa

- **Patient load**

- Telemonitored patients are not considered as patient loads
- Timely management requires a dedicated team that monitors & responds to patients

- **No incentive** for hospital admission avoidance in current system

- Telemonitoring requires **partnership with external equipment supplier** that provides technical support

# *Way forward*

- **Information sharing**
  - Allow **access** to telemonitoring website on CMS
  - Open up access right to both nurses and allied health colleagues on CMS (**common electronic platform**)
- **Patient load**
  - Patients under telemonitoring or Hospital@Home care should be **recognised as a “patient episode”**
  - Set up a **dedicated telemonitoring Hospital@Home team**
- **Provide incentive** to hospitals to encourage avoidance of admission or early discharge to home care
- **Close liaison** with telemonitoring equipment provider