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Telehealth programme by CGH and Philips empowers heart failure patients

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As a result of this programme, the length of stay for heart failure related readmissions shortened by 67 per cent.



Singapore - The positive one-year results of a Heart Failure Telehealth programme, piloted by Changi General Hospital (CGH) and Royal Philips showed a 67 percent reduction in length of hospital stay for heart failure-related readmissions, a 42 percent reduction in costs of care, and an enhanced quality of care. The heart failure patients enrolled in the telehealth programme benefitted from increased knowledge of their condition and improved self-care abilities, resulting in a greater confidence in managing their heart condition.

The experience obtained from this pilot contributes to the design and development of the national telehealth vital signs monitoring (VSM) project initiated by the Ministry of Health. Following the pilot, CGH will be participating in the national VSM project to enable CGH patients to receive care after discharge from hospital, as they return to their homes and the community.

150 heart failure patients from CGH were enrolled in the programme between November 2014 and March 2016. They received tele monitoring support for one year and their results were compared against a group that received support only via phone calls.

As a result of the telehealth programme, patients had improved knowledge, improved confidence and ability to maintain their heart failure condition. In addition to the timely detection of changes in their clinical condition, the average length of stay for heart failure-related readmission over 12 months was reduced by 67 per cent for heart failure patients under tele monitoring support compared to the group that only received support via phone calls (2.2 days vs 6.6 days).

With reduced heart failure related readmission, this translated to cost savings for both patients and hospitals. The bill size for heart failure related admissions in a year for heart failure patients in the tele monitoring group was 42 per cent (S$ 2,514) lower compared to patients that received support via telephone calls.

“It is important for patients with chronic conditions to feel that they are empowered and in control of their own health as it increases their capacity to take action,” said Dr. Sheldon Lee, Programme Director and Consultant, Cardiology, CGH. Patients with greater knowledge of their conditions are more confident about self-care, and are more likely to comply with treatment

plans. This naturally leads to reduced risk of complications that may necessitate readmission to CGH. We are delighted to see these encouraging results in the pilot and will continue to look into enhancing the programme further so as to provide sustainable benefits for our patients in the long run.”