# CHI Learning & Development (CHILD) System



### **Project Title**

Palliative Response Team: Increasing Compassionate Discharges (ComD) Success

### **Project Lead and Members**

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### **Organisation(s) Involved**

Alexandra Hospital

### **Healthcare Family Group(s) Involved in this Project**

Ancillary Care, Pharmacy, Nursing

### **Applicable Specialty or Discipline**

Palliative Medicine

#### **Project Period**

Start date: Jul 2020

Completed date: Jun 2023

#### Aims

- To set up a transitional care ComD program to support patients who express a wish to die at home.
- To form a multidisciplinary team to provide seamless care transition for ComD.
- Our program aims to support ComD outside of office hours to address gap in current hospice services in Singapore.



### **Background**

Singapore has a rapidly aging population, with a significant gap between the desire to die at home (77%) and actual home deaths (27%). The Ministry of Health aims to reduce in-hospital deaths from 61% to 51% by 2027. Many hospital deaths occur due to discharge delays and limited after-hours hospice support. Alexandra Hospital's Palliative Response Team was initiated to provide palliative transitional care and ComD services, including after-hours support.

#### Methods

- 1. Establishment of the Palliative Response Team at Alexandra Hospital.
- 2. Provision of palliative transitional care and ComD services during and outside office hours.
- 3. Enhanced ComD process with Pharmacy's standardized ComD prescription order for simple and complex ComD with infusors.
- 4. Nursing interventions including accompanying patients home, home visits, telephonic support, and coordination of care with community partners.
- 5. Physicians provided telephonic support for symptom escalation and home visits.
- 6. Operation team managed patient scheduling, developed administrative protocols, coordinated communication, and ensured smooth patient transitions.

#### Results

- 1. From July 2020 to July 2023, there were 64 successful ComDs, averaging 21 per year.
- 2. Patient wishes to die at home were honored 100% of the time.
- 3. Positive qualitative feedback from families regarding the service.
- 4. The program successfully supported AH ComDs and scaled up to NUH ICU, Emergency Department, and NUHS@Home.



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- 5. ComD increased from 1.0% to 7.4%.
- 6. Reduced average length of stay (ALOS) by 3.5 days.
- 7. Average lifespan post-discharge was 8 days.
- 8. Total gross inpatient bill avoided: \$98,046.29.
- 9. Total CAPEX in bed building avoided: \$7,395,556.

#### **Lesson Learnt**

The successful end-of-life care program at Alexandra Hospital offers valuable lessons. First, collaboration between different healthcare professionals (doctors, nurses, pharmacists, operation) is crucial for smooth patient discharge and addressing the needs. The program has effectively addressed the lack of after-hours support to fulfil patient wishes to pass away at home. While standardization of protocols ensures consistent care, flexibility is needed to adapt to specific patients' needs. By considering these lessons and potential challenges, future compassionate discharge programs can be expanded and scaled up to equip other healthcare partners to implement ComD more effectively to support the patients' wish to die at home.

As healthcare policies and partners change rapidly, there is a need for the team to remain agile and adaptable.

- 1. A multidisciplinary team approach with standard ComD guides is crucial to prevent delays in the inpatient ComD process.
- 2. The Palliative Response Team Program can support patients' wishes to die at home outside of office hours when home hospice resources are limited.
- 3. More studies can track hospital deaths to determine if ComD can be offered as an option if home care arrangements are feasible.

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**Additional Information** 

National Healthcare Innovation & Productivity (NHIP) 2024 - Excellence Champion

(Care Redesign category)

Conclusion

The Palliative Response Team Program at Alexandra Hospital successfully increased

the number of compassionate discharges, honored patient wishes to die at home,

and provided significant cost savings. The multidisciplinary approach and

standardized ComD processes were key to the program's success, demonstrating the

importance of seamless care transitions and effective resource management.

**Project Category** 

Care Continuum

End-of-Life Care, Palliative Care

**Keywords** 

Compassionate Discharge, Palliative Care, End-of-Life Care, Home Hospice,

Multidisciplinary Team, Cost Saving

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