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Conference Abstract

Implementation of a COPD Integrated Care Pathway (ICP) programme to improve outcomes of COPD Patients

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Abstract

Objectives: JurongHealth implemented a COPD ICP programme in April 2012, involving primary, hospital-based, community-based and palliative care, to provide comprehensive care for COPD patients at different stages of the disease.

Methodology: Case managers initiate 'high touch' case management, contacting the patients admitted for exacerbations within 48 hours of discharge. They act as liaison between patients and their primary care and specialist physicians, social services, home visit services and palliative care. The team holds monthly inter-disciplinary meetings to discuss possible gaps in clinical care and unmet social needs of patients who re-admit in the preceding month. The quality of life of the patients is measured using the COPD assessment tool (CAT) at baseline and during their follow-up visits within the first year of enrolment.

Results: 123 patients were enrolled between April 2012 and March 2013. The overall COPD 30-day readmission rate has improved from 39.8% in FY2011 to 31.5% in FY2012. 70.2% of Group B and D patients with baseline line score >10 showed >10% improvement in CAT score from their baseline.

Conclusion: Our programme has shown improvement in the overall 30-day re-admission rate and quality of life for the COPD patients.

Keywords:

integrated, case management
