

### **Project Title**

Ramping Up Clinical Skills Capabilities in Dover Park Hospice to Care for End of Life Patients requiring Portable Ventilatory Support

### **Project Lead and Members**

- L.K., Goo
- M.Koh
- A.Tan
- T. Sun
- L.Quah

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

Tan Tock Seng Hospital, Dover Park Hospice

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

Medical, Nursing

### **Applicable Specialty or Discipline**

Palliative Care

### **Aim(s)**

- Appropriate resource utilisation so as to continue with systematic right siting of patients to prevent unnecessary use of costly acute hospital resources.
- Enhance the accessibility to care: Mitigation of the high bed occupancy rate in TTSH by facilitating patients' outflow and thereby allowing in flow of patients who require more complex care
- Optimal patient care outcomes where community partners are equipped with the clinical skills to manage patients effectively in the community.

### **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Lessons Learnt**

See poster appended/ below

## **Conclusion**

See poster appended/ below

## **Additional Information**

This project was featured at the Central Health Action & Learning Kampung (CHALK) Poster Showcase 2022.

## **Project Category**

Care Continuum

Hospice care

## **Keywords**

Hospice Care, Training, Mechanical Ventilation

## **Name and Email of Project Contact Person(s)**

Name: TTSH Network Development (Partnerships)

Email: [partnerships@ttsh.com.sg](mailto:partnerships@ttsh.com.sg)

# Ramping Up Clinical Skills Capabilities in Dover Park Hospice to Care for End of Life Patients Requiring Portable Ventilatory Support

## Team Members

J.Goo | M.Koh. | A.Tan. | T. Sun. | L.Quah. | M. Lim | P. Koh | Y.Y. Chang | Y.T. Quek



## Project Synopsis

It is indeed a meaningful clinical collaborative initiative where TTSH had actively engaged Dover Park Hospice (DPH) to co-develop clinical skills capabilities through the support of Central Health Enabling Fund (CHEF) to seamlessly transit end of life patients requiring portable ventilatory support into the community.

## Background

In the transition of care of the patients from the hospital to the community, the TTSH team shared that they encountered various challenges in clinical placement of end-of-life patients requiring ventilatory support back to the community. Some of the other identified clinical focus also include:

- 🎯 Appropriate resource utilisation so as to continue with systematic right siting of patients to prevent unnecessary use of costly acute hospital resources;
- 🎯 Enhance the accessibility to care: Mitigation of the high bed occupancy rate in TTSH by facilitating patients' outflow and thereby allowing inflow of patients who require more complex care
- 🎯 Optimal patient care outcomes where community partners are equipped with the clinical skills to manage patients effectively in the community

## Project Details

The project was made possible with the support initiated with the Home Ventilatory Support Services and Community Health (Training) who crafted a four half days hands-on workshop to train 10 DPH clinical team (Both Inpatient and Home Care Teams) on managing end of life patients requiring portable ventilatory support;



It was facilitated during last November and December 2021. The content of the workshop encompassed various learning components ranging from principles of portable ventilatory support to various modes of ventilatory support set up, interfaces, routine care, potential complications and emergencies. The face-to-face workshop sessions were then continued with simulated practicum hands on sessions, followed by theory assessment and skills competency assessments.



In early 2022, DPH Clinical team then continued to develop our SOP, patient monitoring form, learning materials, theory assessment and competency assessment tools. Following that, the Core Trained clinical team continued to train another 20 of our fellow colleagues (from both inpatient and home care team), to be competent in caring for patients requiring portable ventilatory support before we receive our first inpatient transfer from TTSH.



It was in early September this year that DPH received a TTSH inpatient who transferred here and is still with us currently.

## Project Outcomes



In general, our DPH Clinical Inpatient Team felt very empowered, confident and competent that we are able to care for a patient requiring portable ventilatory support in our Hospice setting. Though the level of care needs for our patient remains extremely high, we valued the knowledge and skills shared and learnt from TTSH Team. At the same time, we also felt that we could make a difference in facilitating seamless care transition for our patients.



From the patient's perspective, he verbalised that he and his family members do have more privacy and holistic care when he is currently in DPH. At the same time, it has also enabled the patient's family members to receive some level of respite care when the patient is residing in DPH.



As for the Health Ecosystem, it has enabled DPH to achieve clinical skills capabilities to care for end of life patients not limited to Inpatient Hospice setting, but also in the community (Home Care settings).

## Conclusion

Dover Park Hospice valued the active engagement, training opportunities and resources supported by Central Health to come together for this collaborative clinical initiative and to benefit our end of life patients requiring portable ventilatory support.

DPH will continue to receive and care for our end of life inpatients requiring portable ventilatory support in Inpatient Hospice settings and also to continue seeking opportunities to scale caring for patients in the community.