

Post-implementation Review of Programme SALVE (Skin Aid for the Vulnerable and Elderly) – Lessons gleaned two and a half years on

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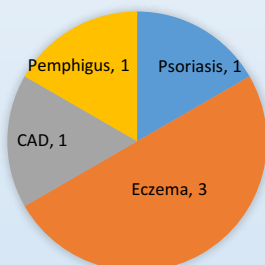
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BACKGROUND

- Skin Aid for the Vulnerable and Elderly (SALVE) Programme was conceptualized to circumvent preventable re-admissions.
- A Subset of elderly/frail patients with extensive dermatoses who respond well to inpatient skin care.
- Review of 30 months Programme SALVE was performed to ascertain effectiveness.

RESULTS

- N = 6
- 5 (83%) were male
- Mean age of 73 years.
- 291 treatment visits
- Primary Outcome:- 0 re-admissions
- Secondary Outcome:-
 - 61% -100% improvement in skin conditions
 - Approximately \$7000 was saved per patient per year from the intervention.



No.	Age/Gender	Diagnosis	Disease Severity at recruitment	Best Score achieved	No. of sessions required	(%) Skin improvement seen
1	60/M	Psoriasis	24.6 (PASI)	9.6 (PASI)	7 (1x/week)	61%
2	81/M	Chronic Actinic Dermatitis	53 (SCORAD)	5.7 (SCORAD)	36 (3x/week)	90%
3	72/F	Pemphigus Vulgaris	3-4% (Body Surface Area)	0% (Body Surface Area)	11 (1x/week)	100%
4	66/M	Eczema	22.3 (SCOARD)	4.7 (SCORAD)	31 (2x/week)	79%
5	81/M	Eczema	82.6 (SCORAD)	14.9 (SCORAD)	28 (2x/week)	82%
6	76/M	Eczema	72 (SCORAD)	24.7 (SCORAD)	13 (2x/week)	66%

Most of the patients were successfully discharged from the programme subsequently due sustained improvement upon serial clinical reviews. A patient who requires frequent maintenance topical treatment was referred to Home Nursing Foundation for subsequent continuity of care.



METHODS

- Patients who fulfilled enrolment criteria into Programme SALVE identified by clinician
 - ✓ Extensive or medically significant skin disease burden that responds well to skin directed therapy
 - ✓ Contraindication(s) to phototherapy or is not an ideal candidate for systemic immunosuppressive treatment
 - ✓ Not eligible / not keen for placement in a healthcare institution
 - ✓ Existing home conditions and/or care givers unable to support level of care needed for skin care.
- Assessed for suitability to receive subsidies from NSC Health Fund by the social worker
- Period of study: 1 January 2020 till 30 June 2022
- Demographic data and clinical response were tracked.
- Primary outcome was to assess frequency of dermatology-related readmissions and secondarily determine (i) improvement in skin disease over time and (ii) cost savings.



CONCLUSIONS

This Programme SALVE has demonstrated a proof of concept of a multidisciplinary outpatient-based skincare programme in preventing avoidable re-admissions while bringing cost savings and value to unique subset of patients.

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