

00204 Comparison of Perception and Effectiveness of Teamlet and Usual Care Models for Patients With Chronic Conditions in the Jurong West Community

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Aims: The role of primary care is increasingly emphasised to meet our ageing population's rising healthcare demands. The Teamlet model seeks to improve this by enhancing patient-provider relationships through empanelment, via increased contact time, holistic management and patient ownership. This study aims to assess the perception and effectiveness of this model compared to usual models of chronic disease management in polyclinics.

Methodology: A cross-sectional study involving Singaporeans/Permanent residents ≥ 40 -years old from Jurong West was conducted. Respondents had chronic conditions under the Chronic Disease Management Programme for ≥ 6 months, which they had consulted their primary care physician ≥ 2 times for. Patients unwilling/unable to consent verbally, cognitively impaired and/or pregnant were excluded. Interviewer-administered questionnaires were used. Perceptions were assessed using a modified Primary Care Assessment Tool (PCAT) questionnaire. Effectiveness was evaluated via knowledge questions adapted from a previous study on hypertension and Ministry of Health's patient education resources for hyperlipidemia and diabetes. Results were analysed using multivariable ordinal and multivariable binomial logistic regression respectively.

Result: 554 respondents (51.3% Teamlet, 48.7% non-Teamlet) were interviewed. Teamlet patients scored higher than non-Teamlet patients across all PCAT subdomains, most significantly Continuity of Care/Ongoing Care (OR 5.79, 95%CI 4.14-8.11), First Contact (Utilisation) (OR [odds ratio] 1.87, 95%CI [confidence interval] 1.37-2.56), Coordination (Services) (OR 1.72, 95%CI 1.13-2.63), and Comprehensiveness (Services Provided) (OR 1.70, 95%CI 1.25- 2.32). Internationally, this places Singapore's Teamlet model above Shanghai and Hong Kong's primary healthcare models in the latter three subdomains. Teamlet patients with hypertension (OR 1.52, 95%CI 0.96-2.42) and diabetes mellitus (OR 1.48, 95%CI 0.79-2.80) possibly demonstrated better knowledge of their chronic conditions compared to similar patients under non-Teamlet care.

Conclusion: Better perceptions of primary care by patients with chronic conditions under the Teamlet model affirm Ministry of Health's shift toward such care. We hope these insights will be useful in shaping Singapore's future healthcare landscape.