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## Inter-disciplinary and Multi-sectoral Collaborations for Impactful Population Health and Societal Outcomes

#### Assoc Prof Low Lian Leng

Director, SingHealth Centre for Population Health Research and Implementation Director, Population Health and Integrated Care Office, Singapore General Hospital Medical Director & Senior Consultant, Outram Community Hospital



Changi

General Hospita

Sengkang

General Hospital

Singapore

General Hospital

NMRC Awards Ceremony and Research Symposium 2023 27 April 2023

National Dental

Centre Singapor

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National Heart

Centre Singapore

National

Neuroscience Institute

KK Women's and

Children's Hospital

National Cancer

Centre Singapore



**Community Hospitals** 

Polyclinics

SingHealth

SingHealth

Singapore National

Eye Centre

# Presentation outline



01

Opportunities and Challenges in Population Health

SingHealth Centre for Population Health Research and Implementation



Inter-disciplinary and Multi-sectoral Collaborative Teaming for Greater Impact

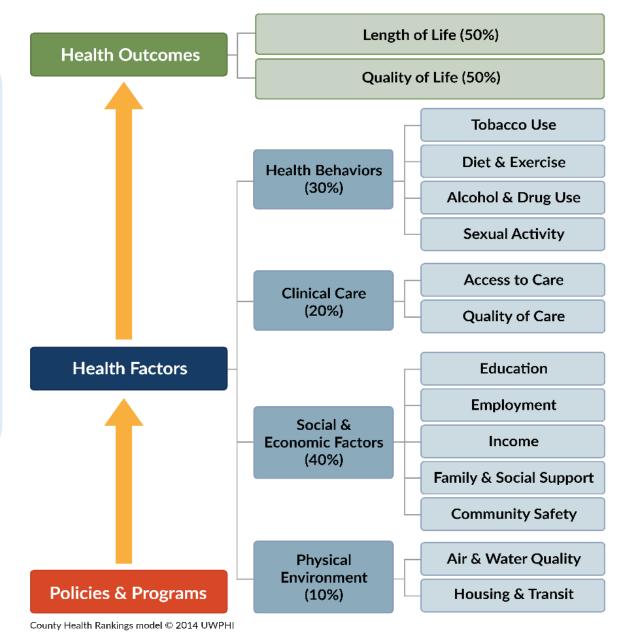
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### **Population Health Definitions**

"The health outcomes of a group of individuals, including the distribution of such outcomes within the group and the policies and interventions that link outcomes and patterns of health determinants."

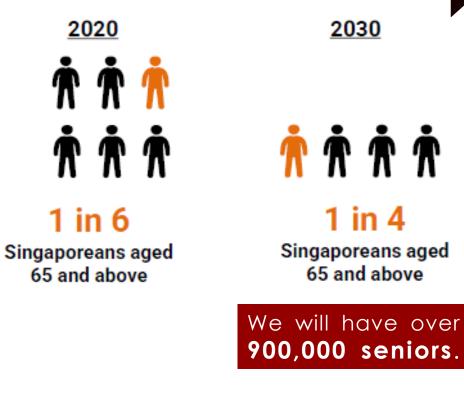
David Kindig & Greg Stoddart





## Challenges and Opportunities with an Ageing Population

# 1 in 4 Singaporeans $\geq$ 65 y.o. in 2030, from around 1 in 6 in 2020



Source: Ministerial Committee on Ageing "I Feel Young SG" website

## Resident old age support ratio falling

DECLINING OLD-AGE SUPPO	RT RATIO		
Residents 🛉 65 years	s and over	<b>i 20-64</b> years old	
Years 1970	1990	2010	2019
	<b>1</b> * * * * * * * * * * * * i	<b>* * * * * *</b> <b>* *</b> i	<b>1 1 1 1 1</b>
Ratio 13.5	10.5	7.4	4.5
Source: Department of Household size more d	ze is also		
Average Resident Household Size		 3.50	<u>2020</u> 3.22

<u>Source:</u> MSF study on Families and Households in Singapore, 2010-2020

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# Presentation outline

01

Opportunities and Challenges in Population Health



## SingHealth Centre for Population Health Research and Implementation



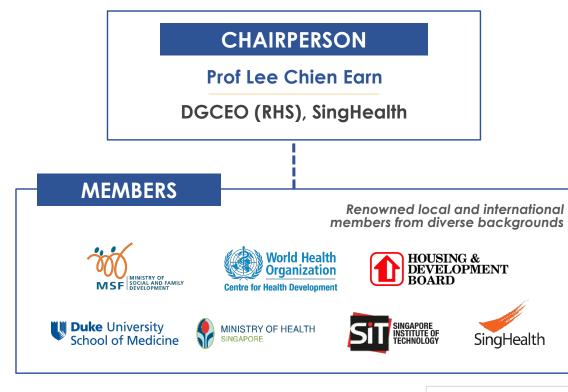
Inter-disciplinary and Multi-sectoral Collaborative Teaming for Greater Impact

## SingHealth Centre for Population Health Research and Implementation (CPHRI)

Nexus for Population Health Research & Implementation in SingHealth and Nationally Accelerate translation of research findings to care delivery

SingHealth Population Health Academic Advisory Panel

To provide independent advice and guidance for the development, implementation and evaluation of population health research and initiatives in SingHealth



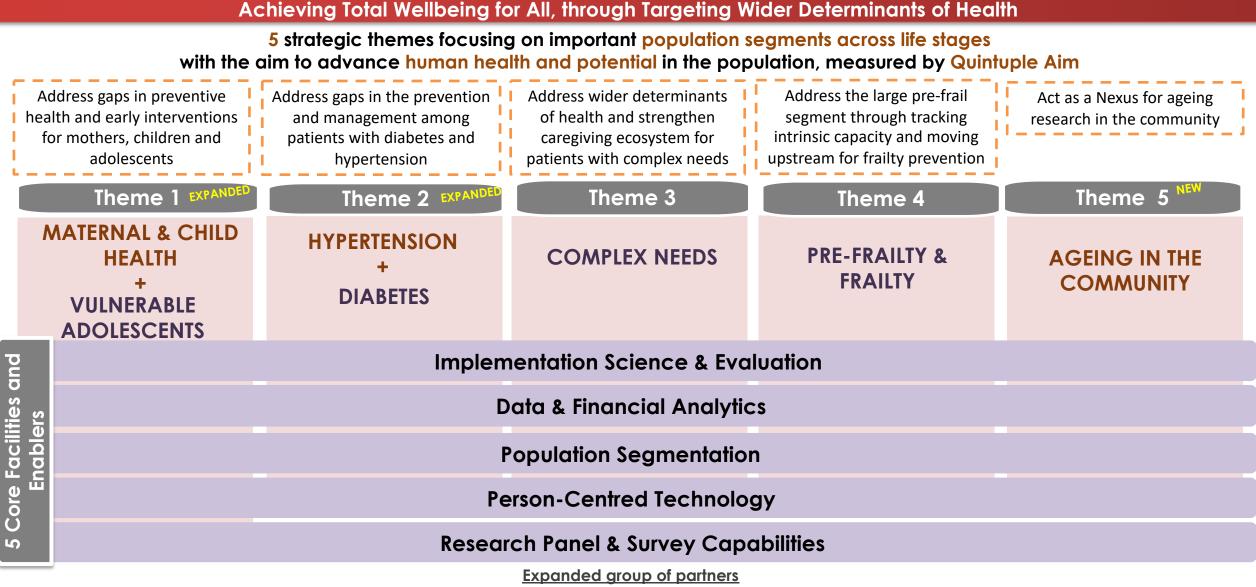
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#### CPHRI's wide range of collaborators



## **PULSES II Centre Grant**

(Awarded \$14M from Apr 2022 to Mar 2026)



Healthcare: SGH, SKH, CGH, SHP, SCH, KKH, NDCS, NHCS, NNI, IMH Research and IHLs: Duke-NUS, Duke Durham, NUS, SUTD, SUSS, SIT, GERI

Government: MOHT AIC, URA, MSF, HPB | Industry and community partners

## **Overview of CPHRI's Signature Research Programmes**

EMPOWER	EASE*	SCREENII	Project Pensieve	INFINITY-ICOPE+	Build & Care		
A/Prof Low Lian Leng	Lead PI: A/Prof Ng Yee Sien (SKH, SGH)	Lead PI: Dr Pua Yong Hao (SGH)	Lead PI: Dr Liew Tau Ming (SGH)	Lead PI: A/Prof Laura Tay (SKH)	Lead PI: A/Prof Low Lian Leng (SGH, OCH)		
Innovation Challenge (NIC) Grant, AI.SG Grand Challenge Stage 2, NMRC HCSA ( <u>\$4.765M</u> ) Key Outcome(s): • Build on AI engine to deliver personalized nudges and gamification • Sustainable & cost- effective behavioural change in chronic disease patients	<ul> <li>Funding: URA Cities of Tomorrow R&amp;D Programme (<u>\$2.43M</u>)</li> <li>Key Outcome(s):</li> <li>Determine impact of Environment, Health and Social factors on Life Spaces in the Community- Dwelling Elderly</li> <li>Policy Impact:</li> <li>Policies &amp; urban recommendations that are senior- friendly</li> </ul>	Funding: National Health Innovation Centre and National Medical Research Council Transition Award ( <u>\$0.25M</u> ) Key Outcome(s): • Develop and validate an automated tool to enable feasible and accurate pre- frailty screening in the community Status: • PoC completed. Ongoing prototype refinement and Commercialisation	<ul> <li>Funding: National AI Office (Prime Minister Office) (\$1.826M)</li> <li>Key Outcome(s):</li> <li>Develop an Al- enabled digital tool for early detection of dementia</li> <li>Policy Impact:</li> <li>Transform community screening to be done by lay personnel</li> </ul>	<ul> <li>Funding: MOH NIC Grant Call on Frailty (\$3.17M)</li> <li>Key Outcome(s):</li> <li>To maintain functional independence in older adults, represented by life- space mobility reflecting their community participation</li> <li>To implement INFINITY-ICOPE with high fidelity, penetration and sustainability within the community</li> </ul>	<ul> <li>Requesting NMRC PHRG Funding with support from MND</li> <li>Key Outcome(s):</li> <li>To intervene in environmental &amp; social determinants to support healthy ageing and assisted living</li> <li>Policy Impact:</li> <li>Understand the trajectory of ageing and health</li> <li>guide policy on HDB built architecture and quantity</li> </ul>		

\*EASE: The Elderly Life Activity-Space Project

\*INFINITY-ICOPE - Optimising INtrinsic Capacity for Functional INdependence and to Impede FrailTY in Older Adults: Adaptation of the WHO-ICOPE for Healthy Ageing in Singapore

# Presentation outline



Opportunities and Challenges in Population Health



SingHealth Centre for Population Health Research and Implementation



Inter-disciplinary and Multi-sectoral Collaborative Teaming for Greater Impact



#### Lead PI: A/Prof Low Lian Leng

Funding: MOH National Innovation Challenge Grant, AI.SG Grand Challenge Stage 2, NMRC HCSA



- Build on AI engine to deliver **personalized nudges** and **gamification**
- Sustainable & cost-effective behavioural change in chronic disease patients
- <u>Current status</u>: successfully completed trials among 1000 DM patients



#### Key Plans in the next 3 Years

- Complete trial among patients with Diabetes, Hypertension and Hyperlipidemia (Jarvis-EMPOWER)
- Text effectiveness of App-based and Health Coach delivered Motivational Interviewing (EMPOWER – PLUS)
- Seek commercialisation opportunities:
  - Private healthcare and insurer are interested in commercialising AI modules and algorithms
- Scaling up through Health Buddy







- App development
- AI & Machine learning for nudges
- Predictive modelling



**74.7%** in predicting if a user will reach 4,000 steps for a given day Median accuracy: 77.9%



86.8% in predicting if a user will enter an activity log for a given day Median accuracy: 96.7%



**83.5%** in predicting if a user will reach 150 mins of MVPA for 2 consecutive weeks *Median accuracy:* 86.7%

## 

- Expertise in qualitative research, implementation science

89.9%

**Duke Psychiatry & Behavioral Sciences** Duke University School of Medicine

- Expertise in Behavioural science
- Expertise in motivational interviewing



in predicting if a user will enter an activity log for 3 consecutive days Median accuracy: 100%

**Tapping on Complementary Strengths** 



85% in predicting if a user will reach 30 mins of MVPA for a given day Median accuracy: 92.9%

The ANN model is accurate in predicting users' behaviors and can deliver personalized nudges.

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## The Elderly Life Activity-Space Project (EASE)

The Environmental, Health and Social Factors Determining Seniors' Life Spaces in the Community

Lead PI: A/Prof Ng Yee Sien

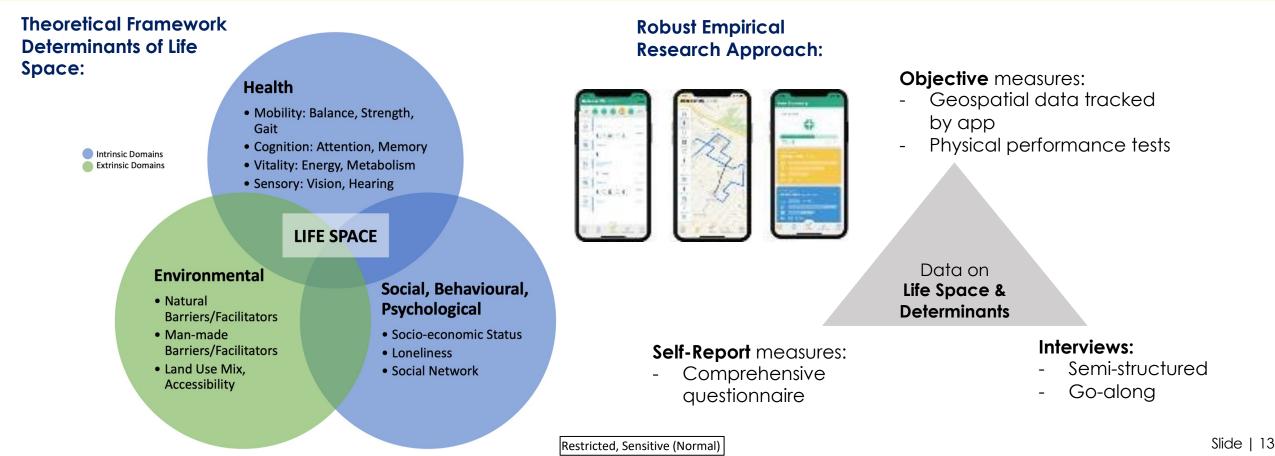
Funding: URA Cities of Tomorrow Grant

Life Space: The area through which a person moves, over a specified time period, through his community and its environment, to achieve life-goals of self-care, employment, social and recreational needs

Has significant health consequences if not maintained

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Limited research conducted in Asia

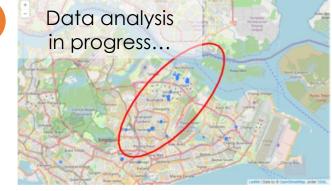


## **Progress and Plans**

Recruited >1000 seniors within the SHS catchment area

Frailty screening conducted in tandem with data collection 1





Triangulation of data → Holistic knowledge of local seniors' life spaces & their determinants



Participant filling out the study questionnaire



Measuring muscle mass with a bioelectrical impedance analyzer

3



Data collection will continue for more robust data  $\rightarrow$ 

recruitment target upped from 900 to 1300



Measuring blood pressure

## Multi-disciplinary and Multi-sectorial Collaboration

Government/Advisory Partners	Academic/Industry Partners	Community Partners
<section-header><text><image/><image/><image/></text></section-header>	Academic/Industry Partners • Qualitative expertise • Qualitative expertise • Ceriatric expertise • Geriatric Education & Research Institute • Urban design expertise • Urban design expertise • Geospatial analysis expertise	<section-header><section-header><section-header><section-header><text><image/><image/><image/></text></section-header></section-header></section-header></section-header>
	- Data collection app	

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### Innovate & Co-create a Community Ageing-in-Place Ecosystem

#### @ Marine Parade & Bedok Brownfield sites

#### intervene in environmental & social determinants to Hypothesis: support healthy ageing and assisted living Built environment interventions and technology enhance the integrated health and social care programs' capabilities to support healthy ageing and assisted living Pillar 3: Built environment Pillar 1: Care model **Segmented** based on needs "Physical and social characteristics in which Hybrid implementation - effectiveness Focus on integrated health people live" and social care Guide the deliberate implementation strategies of "common Enhance **safety**, promote elements" by anticipating/addressing barriers and facilitating Multi-Disciplinary team of social cohesion and adoption SingHealth Integrated physical activity Community Care Team and community partners Built Environment health/well-being framework Study the causation between built environment and health Pillar 2: Technology at the neighbourhood/precinct level Help seniors to age safely, independently and comfortably Facilitate preventive care, and early detection and response to health issues Understand the trajectory of ageing and health $\rightarrow$ guide Empower seniors to maintain autonomy policy on HDB built architecture and quantity

Requesting NMRC PHRG funding from MOH. Supported by MND

will

What we will study

## Multi-level Interventions to Address Environmental and Social Determinants

#### **Residential Level Interventions**

Technology projects/systems to allow convenient access to readily available help, self-monitoring of health and conditions, improve safety and reduce caregiving burden





Sensei (Docking Station with Blood Pressure Machine)



Personal Assisted Non-Invasive Radar Living Solutions Monitoring System Senior Concierae



PwDementia Location Tracker



#### **Repurposing Level Interventions**

Adaptive use of HDB units to facilitate easy-to-access care, social interaction, physical and cognitive activities



Community Kitchen unit

Day Care Centre unit



Rehabilitation Services unit

Interactive IT unit

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#### **Neighbourhood Level interventions**





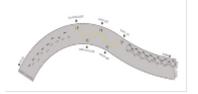
Wayfinding cues & graphic signs



Community gardens



Memory building features





Aesthetic sound



Inclusive social spaces



Active Health Fitness Trail



Agility paths

Attractive staircase design





## **Collaborative Partnerships Across Sectors**

#### **Built Environment**

- Provide recommendations to ٠ align with **national needs** and interest
- Expertise in urban design ٠
- Retrofitting, built environment • modifications











SINGAPORE UNIVERSITY OF TECHNOLOGY AND DESIGN





#### Technology

Provide co-test and ٠ senior-friendly technological products & systems



#### Care Models

- Offer health social 2 services & programmes in the community
- Facilitate trials and • recruitment of participants
- Care needs analysis



**MontfortCare** 

## **Collaboration with Institutes of Higher Learning**

### - Tapping on Complementary Strengths



#### **AREAS OF COLLABORATION**

- Light weight and breathable
   wearables for seniors
- Solutioning for implementation challenges e.g. using thermal cameras to monitor movements of patients
- Protein-enriched food for seniors
- Gamification for heathy food options and healthy eating



Joyful Village Project @ Jalan Pelatok Park (collaboration with SUTD)

- Evaluation of Built Environment with health
- Environmental-evolutionary psychological ideas for designing the living environment to make it more psychologicallyconducive for elderly
- Addressing environmental, health and social determinants to improve seniors' Life Spaces in the community
- SingHealth-SUTD Population Health
   Innovation Fund Joint Grants

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## Collaborations with Institutes of Higher Learning

### - Tapping on Complementary Strengths

	Department of Population Health Sciences Duke University School of Medicine	SUSS SINGAPORE UNIVERSITY OF SOCIAL SCIENCES										
STRENGTHS												
Mixed-method Research Health Economics & Impact And	Implementation Science & Evaluation Ilysis Ageing	Behavioural & Social Sciences g Research										
AREAS OF COLLABORATION												
<ul> <li>Capability building and bridge the Knowledge-Do gaps</li> </ul>	<ul> <li>Validation and application of social profiling tools among seniors</li> </ul>	<ul> <li>Caregiving needs assessment and interventions</li> </ul>										
<ul> <li>Community of Practice of Implementation Science</li> </ul>	<ul> <li>Co-design nudge mechanism for behavioural interventions</li> </ul>	Social Prescribing research and capability building in the community										
<ul> <li>Community engagement &amp; qualitative research</li> </ul>	<ul> <li>Evaluation of Primary Care Enrolment</li> <li>Co-validation of evaluation toolkit</li> </ul>											

## **Growing Impact of Population Health Research**

#### Harmonized Population Segmentation Framework with NUHS & HPB

Healthy and Non-Healthcare Utilisers Utilization			Healthy with Inpatient Admission			Low Complex Chronic Conditions	Medium Complex Chronic Conditions	Frail in the Community	Mental Health Condition	High Complex Chronic Conditions	Frail in Community with High Complex	Cancer	Frail in Care (Residential Care)	End of Life			
Healthy Non-User - With no known	With one or clinical and risk factors	/or social	With non-chronic conditions, but with ≈1 polyclinic or SOC visits and no inpatient admissions			With non-chronic conditions, but with ≥1 inpatient admissions			Diabetes; Hypertension; Osteoporosis; Osteoarthritis; Asthma; Epilepsy;	Angina; COPD; Pre dialysis CKD; CHD;	Require home and community center services	With mental health condition(s)	Dementia; Heart Failure; Kidney Transplant; Severe Liver	In both Frail in Community and High Complex Chronic	Cancer; Metastatic Cancer	Utilise services in nursing homes and chronic sick	Utilise home palliative or inpatient hospice services
condition and neither clinical nor social risk factors*	Children & Adults with no known condition [0 -64	known condition	Child & Youth [18 years and below]	Adults [19 - 64 years]	and	Child & Youth [18 years and below]	Adults [19 - 64 years]	Seniors [65 years and above]	Hyperthyroidism; Hypothyroidism; BPH; Lipid disorder; Episodic Depression	Rheumatoid Arthritis; Parkinsons; Moderate Liver Disease; PVD	(except for palliative home services)		Disease;	Conditions groups		hospitals	
									In Registr	y for this Combin	ation						
										Osteoporosis & Spine Fracture; Osteoporosis & Hip Fracture; Diabetes & Depression; Hypertension & Osteoarthritis & Osteoporosis; Rheumatoid Arthritis & Osteoporosis			Angina & COPD; AMI & Pre- dialysis CKD; Diabetes, Hypertension & Osteoarthritis;				
									Had this	Event or Interven	tion						
										Coronary Artery Bypass Graft (CABG); AMI (Heart Attack); PCI; LEA			Stroke; CKD on Dialysis				

#### Joint Resident Profiling & Segmentation with HPB and NUHS



Al4HealthyCities Singapore: Harnessing the Power of Data to Improve Cardiovascular Health Outcomes and Equity

Multi-agency and cross-cluster effort, in collaboration with Novartis Foundation (AI for Health Cities)

#### Building on **national and cluster databases**:

- National Diabetes Database
- SingCLOUD
- MOH Omnibus
- HPB National Step Challenge
- MOH TRUST Platform





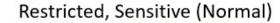






## Summary

- Inter-disciplinary, multi-sectoral and whole of system approach for population health research is key to achieve greater societal impact
- Leverage **complimentary strengths** to build population health research capabilities
- Further strengthen 'public-private' partnerships for innovative solutions to improve population health outcomes





## Thank You & Acknowledgements to all our CPHRI team and partners

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