

Health Care of the Elderly in Singapore

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INTRODUCTION

In 1997, there was an estimated 217,400 elderly persons aged 65 years and above forming 7.0% of the population. By year 2030, the figures will increase to 798,700 elderly, forming 18.4% of the population.

The elderly are disproportionate users of healthcare. Currently, while comprising 7% of the population, they utilise some 20% of public sector primary care and hospital services. It has been estimated that there will be a four-fold increase in the utilisation of health resources in 2030, based on the increased numbers of elderly and assuming the same utilisation rate.

Healthcare of the elderly in Singapore is multi-sectoral, involving the individual himself, the family, the community, certain non-profit organisations, the commercial sector, and the government. The government Ministries that play significant roles in the care of the elderly are the Ministry of Community Development and the Ministry of Health. However, the government prefers not to take a hands-on "provider" role in long-term care of the elderly, but more of a policy maker, a planner, funder and regulator role.

Principle

The principle of care of the elderly is that we would like to use health promotion and disease prevention strategies to enable the elderly to remain fit and active in the community. When disease and disability set in, they should be cared for in the community for as long as possible. Institutionalisation should be a measure of last resort.

Range of elderly care services

The elderly require a whole spectrum of services and facilities, which should be adequate and be readily available and accessible. They range from:-

- healthy lifestyle education (no smoking, exercise, healthy diet, etc);
- early detection and treatment of diseases;
- community-based support services (daycare, counselling service);
- home care (home nursing, home medical, home help, home hospice);
- institutional care services (acute geriatric care, general hospital care, community hospital, hospice, nursing home, institutional respite care).

Government's policy for provision of elderly services

The government's strategy is for non-governmental organisations to be service providers. The government will continue to be involved in health education and the provision of acute care in the outpatient and inpatient settings, including the provision of specialised geriatric services in regional hospitals. There are currently 3 geriatric departments in the 3 regional hospitals, providing a total of 141 beds.

Voluntary welfare organisations (VWOs) in Singapore play a vital role in the health care of the elderly. The government's policy in the provision of elderly services is to provide the direction, and to encourage and support VWOs to provide the majority of these services rather than for the government to provide the services. This is because of 2 main reasons:

- (a) Anything provided by the government is considered a "right" by the people. This invariably leads to more being demanded by the people.
- (b) These services often require a level of motivation and compassion by caregivers for which money cannot harness. In addition, VWOs can garner voluntary support, and because there is "heart" in the provision of care, there is more warmth and better service. Recipients of care provided by VWOs are grateful for the public service provided.

The government's assistance to VWOs is in funding and other areas, to co-ordinate with other government agencies, and to facilitate the provision of such services.

Types of health services provided by VWOs

The VWOs have a long tradition of providing health services in Singapore which include the following :-

- Community hospitals
Community hospitals are for patients, especially elderly patients, who require longer inpatient care, but who do not require the high technology and sophisticated care of acute hospitals. The patients admitted should also have rehabilitation potential. There are currently 4 hospitals providing a total of 426 community hospital beds.
- Chronic sick hospitals
Chronic sick hospitals admit long stay patients who have no rehabilitation potential but require medical and nursing care. Two such hospitals are currently in place, with 218 beds.

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- **Nursing homes & hospices**
Nursing homes provide primary nursing care, with little or no medical care. Hospices are for the terminally ill and they provide medical and nursing care as well as social support (religious support and bereavement counselling). There are 47 nursing homes with 4,705 beds, with 23 homes being run by VWOs (3,241 beds) and 24 homes by the commercial sector (1,464 beds).
- **Day Care Centres**
These are rehabilitation centres for the elderly suffering from senile dementia, the terminally ill and frail elderly. Seventeen day rehabilitation centres provide 700 places for frail and sick elderly, while 3 day care centres provide 86 places for elderly with senile dementia.
- **Home care**
These are home nursing services, home medical and home help services available to the home-bound elderly. About 4% of the elderly in Singapore receive some form of help care services.

There is still a shortage in the provision of elderly care services, which results in beds in the acute hospitals getting "blocked" because of the difficulty in discharging the elderly to more appropriate (but currently inadequately provided) 'step down' facilities.

Government's assistance to VWOs

In Singapore, the government supports the VWOs through the following:

- (a) **Financial assistance**
 - Up to 90% for capital expenditure;
 - Up to 90% for cyclical maintenance costs for existing building;
 - Up to 50% for operating/recurrent expenditure;
 - Up to 100% rental subsidy for use of government premises or stateland;
 - 100% rebate for input GST.

- (b) **Manpower assistance**
 - Secondment of doctors and nurses to work in VWO facilities;
 - Facilitate the allocation of foreign workers permits. The foreign worker's levy is waived for VWOs;
 - Training of nursing aides.
- (c) Facilitate the allocation of stateland and premises.
- (d) Exemption for COE for vehicles used in providing services run by the VWOs;
- (e) Issue medical fee exemption cards to needy residents of residential care.
- (f) Provision of guidelines on nursing home standards and care requirements.

Legislation

The only piece of legislation under MOH that directly impacts the elderly is the Private Hospitals and Medical Clinics Act, which amongst other things, spells out minimum standards required of nursing homes.

Challenges

The major challenges we face in a rapidly ageing population include:-

- (a) Adequate provision of the whole range of services required by the elderly, that is being provided in a seamless manner. This requires more VWOs to establish services especially in areas of service gaps, and for good networking and integration among service providers;
- (b) The need for adequate standards of elderly care services. Standards and guidelines for all types of elderly care services have to be drawn up. Implementation will be through monitoring using regulatory means.
- (c) Adequate means to pay for long-term care of the elderly, through a combination of responsibilities by the government, the community and the individuals.