Editorial



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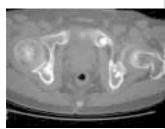
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73-year-old man with prostatic carcinoma. Axial CT scan of the lower pelvis shows several sclerotic metastases. (Refer to page 101-105)

Nursing Homes in Singapore: A Quiet Evolution

YY Sitoh

Nursing homes have traditionally been regarded in less than favourable terms, with both professionals and patients alike considering nursing home placement as a matter of last resort. The unattractive aura associated with nursing homes includes the stereotyped impression that such institutions are "physically unattractive, often smelly, and populated with people who are frail and often demented" (1). In addition to the unfortunate prejudice held by the public towards residential aged care institutions, members of the health-care profession have likewise been often guilty of a proclivity towards placing less importance on nursing home patients, the general opinion being that care of such patients is likely to be of little benefit. Further review of media accounts from different countries suggests that such perceptions are not altogether unfounded, with multiple media reports of sub-standard care, neglect and even abuse of the frail elderly residing in nursing homes (2,3).

Fortunately, when the development of residential aged care in the United States, the United Kingdom and Australia is examined from the historical perspective, the story is one of relative success both in terms of welfare and regulation(2,4,5). In terms of the physical environs and structure of care, the institutions of today are a far cry from the almshouses and poor houses of the late 19th century and the early 20th century. In terms of the quality of care, the evolution of Geriatric Medicine as a medical specialty is testament to the success of the pioneering work by Dr Marjory Warren in a Public Assistance Institution in the 1930s⁽⁶⁾. While the media reports alluding to a "crisis of care" are reminders of the pitfalls that may yet remain in residential aged care, there is a constant effort towards further improvement in the quality of care available for the frail elderly. In particular, regulatory bodies are increasingly cognizant of the need for closer accountability and regulation⁽⁵⁾, and professional bodies (such as the Australian Society for Geriatric Medicine) have taken the initiative to be actively engaged in supporting the care of frail nursing home residents(7,8).

What about the nursing home scene in Singapore? The past thirty years have borne witness to a gradual but unmistakable progress in the provision of care for frail older Singaporeans. From the humble beginnings of a limited number of Homes for the Aged in the 1970s, we now have over 6,400 nursing home beds, with 75% provided by 28 nursing homes run by voluntary welfare organisations (VWOs) and the remainder catered for by privately run nursing homes⁽⁹⁾. Apart from the notable increase in nursing home beds, the focus of care in residential aged care facilities has changed over the past three decades. In the 1970s, Homes for the Aged catered largely to providing basic shelter and care for the aged destitute, with the aged sick being cared for by the chronic

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Correspondence to: Y Y Sitoh Tel: (65) 6357 7858 Fax: (65) 6357 7837 Email: Yih_Yiow_Sitoh @ttsh.com.sg sick unit⁽¹⁰⁾. Since then, residential aged care facilities have gradually taken over the care of frail and sick older persons requiring more intensive nursing and medical care. In addition, the nursing homes of today are being encouraged to take on the role of providing a range of services beyond basic nursing care for residential patients. The aim of this development is to create 'nodal points' within each community whereby a full range of eldercare services may be obtained, ranging from home help, home nursing to home medical care for older persons who are able to be cared for within their homes with support from community support services, to respite and residential care for those who are too frail to be cared for at home. The establishment of such 'multi-service' centres and the move towards locating Aged Care facilities within housing estates are in line with the over-riding objective of creating a truly seamless continuum of care for older Singaporeans⁽⁹⁾ and serve to keep our elderly within the community for as long as is possible.

Further to this, the recent announcement of the intention of the Ministry of Health (MOH) to avail government subsidy to suitably accredited private nursing homes as a means of increasing the availability and choice of nursing homes for families that are financially challenged is an important step forward⁽⁹⁾.

Alongside this growth in the scope and depth of eldercare services, MOH has, over the past two years, established a Framework for Integrated Healthcare for the Elderly. Apart from helping to plan for the integration and coordination of services, the Framework has, through the input of clinicians (geriatricians, psycho-geriatricians, orthopaedic surgeons, surgeons and nurse clinicians), helped to raise the quality of training and care provision, thus laying the groundwork for the establishment of an accreditation standard.

In this respect, the article "Who are the residents of a nursing home in Singapore?" by LKP Yap et al⁽¹¹⁾ in this issue of the journal is especially pertinent. In this article describing the socio-demographic profile and attributes of residents within a nursing home in Singapore, the authors have identified malnutrition, urinary incontinence, falls, functional decline and impaired vision/hearing as common issues that may potentially be amenable to intervention and treatment. This is an important first step in helping health-care professionals and policy makers to understand the true needs faced by our nursing home residents. Future local studies focusing on indicators that accurately reflect resource utilisation and preference-driven outcomes that encompass health, welfare and quality-of-life^(1,4,5,12) are sorely needed to help further our understanding of the requirements for establishing a credible and sustainable climate of quality care for nursing homes in Singapore.

The development of residential aged care services in Singapore over the past thirty years has been a success story in terms of the progressive improvement in the quality of services rendered in nursing homes. While we are as yet far from achieving perfection, the recognition of the need for accountability, accreditation and transparency⁽⁹⁾ bodes well for the future. It may well be that the ensuing years may bear witness to the transcendence of nursing homes from marginalised providers of nursing care to thriving centres of activity that are integral to the community. This will not only enhance the quality of life of the frail elderly who have contributed much to the growth of this nation but also pave the way for better sharing of the responsibility of care by members of the community.

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