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Home Healthcare

By Dr Gerald C H Koh

WHAT IS HOME HEALTHCARE?

Home Healthcare is the provision of healthcare services to homebound patients at their place of residence. (The Singapore Family Physician, Vol 28(4):12) A person is considered homebound if leaving the home will require considerable and taxing effort due to a condition that limits his/her mobility, and he/she requires aids or assistance. This usually applies to older persons aged 60 and above but also includes younger patients with chronic conditions or disabilities. Examples of such conditions include stroke, Parkinson's disease, severe frailty and end-stage cancer.

WHO ARE THE PEOPLE INVOLVED **IN HOME HEALTHCARE?**

The people involved in Home Healthcare can be classified into 2 groups: professionals and skilled volunteers. Professionals include doctors (who provide Home Medical Care), nurses (who provide Home Nursing Care), rehabilitation therapists and social workers/case managers. Skilled volunteers are often the actual providers of social support services such as befriending, laundry, housekeeping, food delivery, transport and escort services. They are usually managed under a Voluntary Welfare Organisation (VWO) which will either highly or fully subsidise the costs of such services depending on the client's means to pay.

WHAT ARE THE AIMS OF HOME **HEALTHCARE?**

The aims of Home Healthcare are to provide the patient and family (or caregiver) with medical, nursing, rehabilitative and social support so as to maximise the patient's physical, psychological and social functions, and to achieve the best possible quality of life. This is achieved by secondary and tertiary prevention of illnesses and problems, caregiver education and coordination of community resources. This is to help the patient remain in his/her home with the family as far as possible, which is what most patients desire.

WHAT DOES EACH MEMBER **OF THE HOME HEALTHCARE TEAM DO?**

The Ministry of Health (MOH) has come up with guidelines on the admission criteria and service requirements for approved providers of Home Medical and Home Nursing Care. For example,

the Home Care Nurse should be a registered nurse usually with community nursing or gerontology nursing training. He/She provides home nursing services such as wound care, maintenance of tubes (e.g. urinary catheters, feeding tubes), injections and monitoring the patient's medical conditions (e.g. blood pressure, capillary blood sugar). The Home Care Doctor needs to be a registered medical practitioner, usually with geriatric or family medicine experience. He/She is tasked to provide medical assessments (e.g. geriatric assessments), post-hospitalisation care, maintenance care and palliative care.

The Rehabilitation Therapist provides expertise in rehabilitation of patients to restore their physical functions and mobility as far as possible. A common misconception is that only the therapist should do rehabilitation exercises on

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Home Healthcare

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the patient. Rehabilitation is usually carried out by caregivers (e.g. maid) but the specific exercises are prescribed and taught by therapists. Unfortunately, currently in Singapore, home rehabilitation therapy is only provided by private groups of therapists. However, VWO day rehabilitation centres can provide transport services from patients' homes (even if they live on non-landing floors), as long as they are not bed-bound.

The Social Worker usually has some training in medical social services and provides counselling, social assessments, linkage to social support services, coordination of services, needs assessments and financial aid arrangements. The Home Case Manager is slightly different. He/She may be a trained social worker or a nurse and his/her role is to assess the needs of elderly patients at home, and coordinate and manage referrals to appropriate community services.

THE COST OF HOME HEALTHCARE

Since last year, all approved Home Healthcare services in Singapore under MOH, are managed by VWOs and depend on public donations to fund their activities, with partial subventions from the government. In addition, all patients accessing these services need to be means-tested. This involves the patient or his/her family disclosing their financial situation to determine whether they qualify for subsidies from the government. It is a 4-tier system where the percentage of subsidy could be 75%, 50%, 25% or 0%. The patient is expected to co-pay the rest of the costs.

Home Healthcare is not a cheap service. Conservative estimates of the costs of providing basic home medical and nursing care range between \$300 to \$600 per patient per month. (*The Singapore Family Physician, Vol 28(4):13*) Besides Home Healthcare services, families may also have to pay for other items such as medications and expendables (e.g. diapers, aids, appliances and special feeds). Moreover, the main caregiver may formerly be an economicallyactive person and the loss of income is an added burden. Compounding this problem, most elderly people are retired and no longer have a steady income. Lastly, with decreasing marriage and fertility rates, there will be fewer young people to support the aged financially.

Thus, there is a need in Singapore to find cost-effective and appropriate financing schemes to help finance the elderly's future needs for Home Healthcare. Eldershield is one such scheme.

HOW DO I ACCESS THESE HOME HEALTHCARE PROVIDERS?

Home Care Nurses can be referred by a hospital, medical practitioner or medical social worker. However, unlike Home Nursing Services, approved Home Medical Services under the MOH Integrated Framework for Elderly Health Services require that a referral be made by a medical practitioner. As the list of care providers is too long to be printed here, please refer to the MOH website http://www.moh.gov.sg for the complete list. Just click on the **Programmes** icon and it will directly bring you to the webpage on programmes for the elderly.

Private family physicians are also in a good position to provide Home Medical Services. However, they often lack access to home nurses, therapy and social worker support. Fortunately, most Home Medical Services such as Tsao Foundation's Hua Mei Mobile Clinic, CODE 4 Medical Services and Touch Home Care are ready to work with family physicians and other doctors to provide home medical support.

As mentioned, currently in Singapore, home rehabilitation therapy is only provided by private therapy groups. Their contacts can be found in the Buying Guide of the Singapore Yellow Pages under **Therapists**. However, if your patient is not bed-bound and can sit on a wheelchair, he/she can be referred to day rehabilitation centres which provide transport services from patients' homes. If your patient lives on a non-landing floor, choose a day rehabilitation centre which offers a stair-crawl service. Medical social workers are usually limited to VWOs providing stepdown elderly care services. However, doctors can access Home Care Management Services who are able to conduct an assessment of your patient in his/her home, and coordinate and follow-up on referrals to appropriate community social support services. Social support services currently available in Singapore include befriending, laundry. housekeeping, food delivery, transport and escort services.

Details of day rehabilitation centres and social support services are found on the MCDS (Ministry of Community Development and Sports) webpage http://www.mcds.gov.sg. Just click on the yellow Families icon at the top of the page and enter the relevant webpage. Then click on the yellow Supporting Families icon on the left menu bar and enter the next webpage. Finally, click on the yellow Caring for the Elderly icon under the heading of Supporting Families.

Home Case Managers can be contacted at the Home Care Management Service serving your patient's residential area:

- Hua Mei Care Management Service (Western region) [(O): 6471-6059]
- Moral Care Management Service (Eastern Region) [(O): 6489-8707]
- SWAMI Care Management Service (Central Region) [(O): 6257-6117]

CONCLUSION

Home Healthcare is a growing area of need in the spectrum of healthcare delivery in Singapore. Our country's ageing population is a major driving force in the establishment and utilisation of such services. There are still many areas for improvements in the organisation of Home Healthcare in Singapore. One of the key areas for action is to educate the public and healthcare professionals on the services available, their roles and how to access them. Hopefully, this article has helped increase our awareness of Home Healthcare services. ■

About the Author

Dr Gerald C H Koh MBBS(S)(1995), MMed (Family Medicine), MCFP(S), GDGM, is currently a Registrar at the Ang Mo Kio Hospital.

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