

A HEALTHY STATE OF MIND



According to the World Health Organisation's report in 2001, one in four people in the world will be affected by mental or neurological disorders at some point in their life. Mental illness often manifests itself in the form of dementia or depression and Singapore, being one of the fastest ageing populations in the world, will see an increase in the lifetime prevalence of dementia. Therefore it is vital to develop an integrated healthcare network, including the development of community-based care.

Care in the Community: General Practitioners

In 2011, a survey of some 500 General Practitioners (GPs) by the Agency for Integrated Care (AIC) found that one to five per cent of the patients of more than half the GPs polled had sought help for mental illness. This finding shows the importance of GPs as the first line of support for those seeking treatment and to detect people with mental health illness early. As family doctors and trusted medical advisors, they are thus in a good position to help such people seek

appropriate treatment and to re-integrate with society.

In 2012, AIC augmented its Mental Health GP Partnership Programme to manage new and/or existing patients with stable mental illnesses in the community. The programme enables GPs to provide more holistic care to patients with chronic physical and/or mental illnesses; to encourage patients to seek help early as they are more familiar with their neighbourhood GPs; and to encourage patients to continue with follow-up consultations.

The programme also seeks to recruit GPs who are keen to manage the different mental health conditions. Customised training on common mental health illnesses and ways to manage them are also provided.

Enhancing the GP Partnership Programme: Special Interest Group (SIG)

To support and sustain the interest of the GPs, AIC has formed a Special Interest Group (Mental Health) for GPs. The GP SIG aims to:

- Build a supportive network for

mental health by encouraging GPs to seek and recruit more of their peers to manage new/existing/at-risk cases;

- Act as a peer-support platform, facilitating the sharing and learning of best practices in the management of cases

It also advocates for a better community mental health service system by developing a standardised training curriculum to enhance GPs' skills and knowledge in mental health areas; a structured clinical protocol to enable and empower GPs to better manage the clients; and to facilitate new mental health initiatives for the community.

The 11-member SIG team is currently made up of the following GPs:

- Dr Alvin Lum (Chairman)
Shenton Family Medical Clinic
- Dr Rodney Lim
Healthlink Medical Clinic and Surgery
- Dr Kwek Thiam Soo
Bukit Batok Medical Clinic
- Dr Gregory Ko
Ko Family Clinic

- Dr Mark Yap
Cashew Medical and Surgery Clinic Pte Ltd
- Dr Yeap Eng Hooi
Bedok Life Clinic
- Dr Chua Teo Ngee
Chua Medical Centre Pte Ltd
- Dr Grace Cheng
Joy Health Medical Clinic and Surgery
- Dr Peter Yeo
Fullerton Healthcare Group @ARC
- Dr Eugene Ung
Meridian Medical Centre
- Dr Vincent Tan
Tan Clinic and Surgery and Viva Medical Clinic

Becoming part of the programme

The GP Partnership Programme engages and enhances the capability of GPs to manage persons with mental health conditions. Being part of the programme not only means GPs are a part of a growing integrated healthcare network, it also enables them to provide holistic care to patients. GPs will be linked to the public hospitals in their region to facilitate knowledge sharing and the right-siting of chronic but stable patients. The programme includes:

- Access to community allied health services such as COMIT* (Community Intervention Team for psychotherapy services) and for those requiring further assessment and support, they will be referred to the physician-led multidisciplinary teams (ASCAT)
- Training in the management of mental health cases through RHs
- Drug procurement support for GPs to obtain drugs at subsidised rates so that patients can better afford treatment
- Liaison coordination support at each RH to coordinate patients to and from RHs to GPs to allied community health care providers or vice versa

*Presently, service providers are O'Joy Care Services, Clarity Singapore Limited and Community Health Centre by Easter Health Alliance (EHA). GPs are kept updated on their patients' progress when they undergo psychotherapy treatment at these centres.

TO FIND OUT MORE ABOUT BECOMING A MENTAL HEALTH GP PARTNER, EMAIL GP@AIC.SG

We spoke to Dr Kwek Thiam Soo, one of the SIG members, on his participation in the GP Partnership Programme.



thoughts to the regional hospital and ensure he is attended to by calling the psychiatrist-on-call.

Why should GPs be a part of this programme?

I have gained a new perspective of the significance of the role of the GP in a community-based mental healthcare delivery system. Located in the neighbourhoods, GPs are within easy reach of patients and they are also usually the first point-of-contact for patients' health care needs in the community. As family

What made you want to be a part of this programme?

As a family physician, I have come across patients with mental health issues at my clinic. It was therefore a natural step to participate in the programme, so that I can provide holistic care to my patients. I can also stay updated and am aware of the available resources that I can refer my patients to for relevant treatment on top of the medical care I provide. There are still some misconceptions towards mental illness. As such, the issue of mental health is multi-faceted and requires the efforts of multiple parties – government, GPs, community and allied healthcare services, families and friends to address them. As a GP, I believe I can do my part to educate my patients and their caregivers and to provide care to those who have mental care needs.

How does the partnership work?

With the programme in place at my clinic, if need be, I can quickly refer a patient with mental illness to COMIT for more specialised care or I can contact a psychiatrist for advice. This reduces the extended consultation time that mental health patients typically require. I can also refer a patient with signs of suicidal

doctors, I feel we should provide comprehensive care to our patients – including for those with mental health conditions. We can also play a role in ensuring that patients adhere to their treatment through follow-up consultations, thus preventing relapses.

How has the mental health support network benefitted you and your work?

It has enabled my clinic to be integrated with the available psychological and social services in the community. Where I was previously functioning independently or as a one-man unit, I now have access to the necessary knowledge and services to manage new/existing/at-risk cases. Take as an example, the monthly meetings I have with the Psychological Medicine team at Jurong Health (Alexandra Hospital). The group consists of psychiatrists, counsellors, social workers and case managers. Their expertise and our regular case discussions have helped me gain more confidence in managing mental health cases. The programme thus provides good network support and I, as a GP, am able to advise and help my patients toward achieving the best care outcomes.