

GP's roles in preventive, long-term & step-down care

Dr Lily Neo, Chairperson of the Government Parliamentary Committee on Health and Member of Parliament gave the keynote address as Guest-of-Honour at the FM Convocation 2003. The College Mirror provides a brief report on aspects pertinent to General Practitioners (GPs). The full text of her speech would be published in the Singapore Family Physician.



In her address, Dr Neo said that she has 'no doubt that good primary healthcare should be prioritized in the healthcare system for Singapore. Primary healthcare provides for convenience and affordability to the population that is so essential in our continuing pursuit to contain our healthcare cost escalation. "She believes that to achieve a good and affordable healthcare system, we should keep our population healthy and the elderly independent for as long as possible. We should also ensure that the healthcare services are utilised appropriately." She added that "GPs are most befitted to facilitate us to achieve that healthcare system by their roles in preventive, long-term healthcare and step-down care".

PREVENTIVE HEALTHCARE

Dr Neo noted that GP clinics are geographically well located, GPs' fees affordable, they deliver competent healthcare and have close rapport with their patients. As such she felt that "involvement of the primary care doctors in preventive care will be the way to go in promoting this important area of healthcare because they are looking after 80% of patients at this level of care". She added that "The Ministry of Health (MOH) should prioritize harnessing our doctors in both the private and public sectors and have an integrated effort towards enhancement of preventive healthcare". She provided some examples on how this could be achieved.

LONG-TERM HEALTHCARE

Dr Neo pointed out that Singapore population is ageing and that "a recent NUS/IPS study commissioned by MOH indicates that Singapore's national health expenditure, at the current level of health servicing, will rise to 7% of GDP by 2030" from the present 3% as the elderly would constitute 20% of the population. She observed that "Our current healthcare system has been very much orientated for a young population" and "We have to be more pro-active to meet the needs of a 'mature population' in the planning for long term healthcare."

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She noted that the "GP's involvement is crucial to enable the chronic ill patients to stay in the community as much as possible. Upon this basis, it is necessary to ensure that those with diagnosed chronic diseases can get their regular long-term medications. Good control of chronic diseases will prevent disabilities that need more hospitalizations, inconvenience to patients and their families and higher costs." She then elaborated on the ten basic tenets of long-term care.

STEP-DOWN CARE

Dr Neo noted that "Since voluntary groups run the majority of our nursing homes, the government may have to review the present

method of funding to make it easier to encourage more voluntary groups to build more and reduce our shortfall. Some of our present sharing of running costs and the capital sharing by government may have to be reviewed as well." She went on to talk about the "training of more healthcare professionals and other informal caregivers for the elderly. Training in geriatrics for doctors has to be accelerated and the opportunity for such training must be extended to all doctors."

Under step-down care, GPs can play a bigger role for example in the area of rehabilitation. Other relevant therapists are also needed to provide comprehensive assessments, followed by implementation of individual care plans"

She pointed out that "Our homecare services are almost non-existent at present. We need to make this service available quickly in order to lessen the need for high cost stay in the tertiary institutions, especially the acute hospital." And the need

for "Effective rehabilitation" which "has to be purposeful with the involvement of a number of agencies and disciplines" and readily available.

Dr Neo concluded by outlining two issues that she has raised in Parliament. The first is the concept of "health risk pooling" through insurance as (a risk-transfer mechanism) may be better than plain dependence on savings alone. The other is the "need for both public and private sectors to come together, preferably through integration" to realise Singapore as the regional Medical Hub. Hopefully, there is the will and the tenacity to see to it that we succeed before it is too late.