Silver tsunami and the shift in care models
Singapore is on the brink of a “Silver Tsunami” — the number of citizens above 65 years old is growing. As the population ages, there will be an increased chronic disease burden. This change in the demographic spread will bring challenges to our healthcare system. Through policies and initiatives, MOH is looking at anticipating and overcoming these challenges before they affect Singaporeans.

To handle the chronic disease burden, our healthcare system needs to evolve. There is a need to shift the care model from the acute and specialist settings to the primary care setting. To do this, primary care physicians need to be empowered with the right tools to help make the transition to a shared care model.

Enabling integrated and seamless healthcare delivery
Information Technology (IT) should be used as a tool to support the new care models. The National Electronic Health Record (NEHR) is an IT system set up to achieve the vision of “One Patient, One Health Record”. The NEHR is a national-level system aimed at creating a holistic and longitudinal view of a patient’s health record across different healthcare settings in Singapore. While the NEHR is being progressively deployed among the GP clinics in Singapore allowing the GPs to view the data from other care settings, there is not much information from the primary care space in the NEHR at the moment.

The current IT landscape among the GP clinics in Singapore is very fragmented. Some GPs use an IT system for billing and medication prescription (Clinic Management Systems or CMS) while others may use Electronic Medical Record (EMR) systems for electronic documentation (diagnoses, allergies, etc.). Yet there are also some who still rely on a pen-and-paper system. With such a disparate range of IT capabilities, it is difficult to share information from GP clinics with the NEHR. Even for GP clinics with IT systems, their existing systems will need changes before they can send information to the NEHR.

Whilst work is being done to make the patient’s record in the NEHR more holistic, MOH Holdings will equip GPs with IT systems to further improve on the shared care model. One such system, would be an alternative to existing CMS/EMR solutions. With integration of this with the NEHR and other national systems such as the CHAS claims system, it will allow for a more seamless experience for the GPs when caring for their patients.

In parallel, since 30 May 2015, selected clinical data from the CHAS database is being contributed to the NEHR. Financial information is not shared. The CHAS database contains data such as the diagnoses from the CHAS submissions and this would be complementary to the other clinical data in the NEHR. Having this data could be useful to the patients as well as their healthcare providers. Healthcare providers can now be aware of their patients’ visits made for their claimable chronic conditions at CHAS (Medical) clinics. Participating hospitals would be able to discharge and direct patients back to their referring or regular CHAS (Medical) provider for follow-up care in the community. For patients, this sharing of CHAS information with the NEHR means enhanced safety and quality of care, and greater care continuity across healthcare settings.

Through such initiatives, we hope to empower the GPs and enable them with the additional information and systems to facilitate patient care.

This article is brought to you by AIC and MOHH.