Letter to Editor

Response to "I Am Lee Chong Hiok" (SMA News May 2002)

t warms my heart to read of Dr Tan Poh Kiang's experience in providing home care to a homebound elderly patient. I must applaud Dr Tan for attempting to single-handedly provide home health care to "Madam Lee".

Dr Tan's article could not have come at a more opportune time as now when there is so much attention on communitybased home health care, Casemix, and the rising cost of healthcare with an increasing ageing population.

I can readily identify with the sense of overwhelming responsibility that Dr Tan must have felt in being the sole care-provider for the health needs of "Madam Lee". When the Tsao Foundation first began our home medical care service for homebound elderly in 1993, home medical care was largely an untrodden field of practice. We didn't know what to expect as our team of doctor, nurse and social worker went from home to home trying to provide a reasonable standard of health care to the single, elderly patients living in the Chinatown area. Though we had a geriatrician to guide us in the then new area of geriatric medicine, we still had to re-condition our thinking and learn to adapt what we were taught in the hospital setting to suit the home care setting.

Today, eight years on, we have gained considerable experience to understand and better appreciate the special needs of doctors and nurses who provide home care. Together with other doctors of nonprofit home medical care organisations, we are working out a special curriculum with the College on the additional training and skills that a GP will require in order to comfortably provide home medical service to our elderly homebound patients.

As Singapore ages, the family physicians of tomorrow will need to be better schooled in geriatric medicine and be prepared to provide home care.

I am also happy to share that family physicians who provide home care need not despair if they need to link their patients with other community support services like rehabilitation, mealson-wheels, transport and escort to hospital specialist appointments, etc. The Community Care Management Services (CCMS) provide the expertise to assess patients and to link them with the relevant support services. There are currently three CCMS providers in Singapore and we are exploring how we can work together with family physicians so that patients can continue to be seen by their GPs and tap on the community support services in an integrated and seamless fashion.

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(For more information on the Tsao Foundation, please visit its website at www.tsaofoundation.org)