

# HAPPY HEARTS, HEALTHY MINDS

#### BY AGENCY FOR INTEGRATED CARE

Thanks to the Mental Health General Practitioner (GP) Partnership programme, mental health patients can now seek treatment and medication easily and conveniently from GPs near their home. The programme was augmented by the Agency for Integrated Care (AIC) in 2012 to engage and enhance GPs' capabilities in managing new and/or existing patients with stable mental illnesses in the community. Through the programme, GPs become part of an integrated healthcare network and will be linked to public hospitals in their region to facilitate knowledge-sharing and right-siting of stable patients.

AIC speaks to Dr Mark Yap of Cashew Medical & Surgery and Dr Tammy Chan of TC Family Clinic about their involvements in the programme.

#### How did you become interested in mental health, and joining the Mental Health GP Partnership programme?

DR YAP: Mental health conditions may give rise to social and medical issues, so they are all interrelated. I feel that in providing holistic care, you have to look into both physical, mental, as well as the social well-being of the patient.

DR CHAN: The state of a person's mind can influence his or her physical health. I'm passionate about building relationships with my patients and I believe that helping my patients work on psychosocial issues will make a very big difference to the quality of their lives.

### What are some common mental health conditions you see among patients?

**DR YAP:** I've treated patients with panic attacks, generalised anxiety disorder, depressive moods, and early dementia — I call these the "cough and cold" of psychiatry. The Institute of Mental Health (IMH) and Singapore General Hospital (SGH) also refer stable patients, who mostly require pharmacotherapy, to me.

**DR CHAN:** I partner with JurongHealth in treating patients with anxiety, depression and mood disorders. Patients with chronic health conditions may also develop mental illness. For instance, diabetes causes fluctuations in blood sugar, which affects moods, and low moods in turn affect diabetes.

#### Tell us about your experience in the programme.

DR YAP: We, GPs, get a lot of support. I often call IMH and SGH liaison coordinators for assistance on matters such as queries on drugs, care coordination and/or fast-tracking of appointments to the hospital. Procurement of drugs for my patients through the centralised pharmacy services is smooth and affordable too. I also work very closely with AIC for my patients who require community support services like counselling. AIC helps to coordinate the referrals between the counsellors and patients, and the sessions are free. What's great is that the counsellors will update both the AIC coordinator and me on the patient's progress after the sessions.

**DR CHAN:** When you're part of the programme, there's always someone you can call for support. I meet regularly with the JurongHealth's community mental health team and they offer great peer support — the dedicated case manager's help in coordinating patients' appointments and following up with them has been invaluable! JurongHealth's allied health services support me to better manage the patients in the community.

Do you feel that the Community Health Assist Scheme (CHAS) complements the programme in supporting both GPs and patients? DR YAP: CHAS has been very useful as it allows patients to benefit from their existing drug subsidies when seeking treatment from their GPs. Patients need not go all the way to a hospital to seek psychiatric help, so they do not feel stigmatised when seeking treatment for mental health issues. They can also save on travel expenses. My clinic participates in

both CHAS and the Mental Health GP Partnership programme and I've seen an increase of about 20% in mental health consults.

**DR CHAN:** Most of the patients who are referred to me through the programme would see polyclinics for their chronic conditions, e.g hypertension or diabetes. However, they would tap on CHAS subsidies at GP clinics like mine for their psychiatric treatment and medication. As such, GPs complement polyclinics in managing these patients and apply CHAS subsidies for treatment of their mental conditions.

## How would you say that managing mental health has changed your outlook on medicine?

DR YAP: Managing patients' mental health is also a form of preventive medicine; we try to pick up such cases before they become bigger issues. These cases may increase in time to come, due to our ageing population and the increasing challenges in our competitive society. For example, there may be more cases of depression and dementia amongst the elderly, and anxiety and depression amongst children, teenagers and working adults.

**DR CHAN:** Managing patients with mental health conditions is a constant learning process. As you become more reflective about your daily interactions with patients, you learn how to influence patients for the better, and hence become a more effective physician. The skills I've learnt from managing mental health have enabled me to serve the community better.

## HOSPITALS SUPPORTING THE MENTAL HEALTH GP PARTNERSHIP PROGRAMME

Institute of Mental Health JurongHealth Singapore General Hospital Tan Tock Seng Hospital

## SUPPORT FOR GPS IN MANAGING PATIENTS WITH MENTAL CONDITIONS

- Psychiatrist serving as a single point of contact for clinical assistance
- Liaison coordinator to facilitate patient's care matters
- Drug procurement support to purchase psychiatric drugs at a lower cost
- Community support services
- ... and more!

For more information about the Mental Health GP Partnership programme, please contact the Agency for Integrated Care (AIC) at 6603 6860 or email us at gp@aic.sg.



Are you currently enrolled in Mental Health General Practitioner (GP) Partnership programme? Share with us how this programme has assisted you to manage your patients. SMS your < NAME >, < MCR number >, < Your thoughts > by 15 October to AIC @ 9125 4665 and receive a 2GB thumb drive/stylus pen!