Implementing a “Community for Successful Ageing”

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Singapore
MILESTONES OF COMSA

2009  ‘Seed’ of Whole-of-Community Approach to Integrated Care
2011  MOH CFAA initiative
2013  CFAA Committee and Phase I
2014  Community Development
2015  Care System Development
2016  ComSA Centre
2017  Engaging Community and the Youth
2018  Dementia Care System
2019  One Stop ComSA Central
PRINCIPLES

1. Proactive population health approach
   - Population needs survey
   - Neighbourhood outreach

2. Preventive intervention across the life course
   - Vulnerable elders detected earlier and guided into the care system
   - Primary care integrated with community-based long term care

3. Emphasis on growth and resilience
   - Self-care groups based on learning and development
   - Galvanized into community action groups

4. Dynamic biopsychosocial model of health
   - ‘PCMH’ model of primary care integrated with care management and behavioural health practice
   - Supported caregiving

5. Building sustainable eco-systems
   - ‘Concentric circles’ of system development from the older person, families, community, formal health and social care services, care network and integration with the Regional Health System
   - Research and evaluation to study cost, outcomes and implementation
COMMUNITY NEEDS SURVEY
AUG 2014

Population

Number of residents older than 60 years = 5000, out of 30000. 7 precincts (prior to 2015 GE)

Findings:
1. 10% Cognitive impairment risk
2. 53% LSNS Social Isolation +ve
3. 3% ‘feels threatened or harrassed’
4. 36% never married, widowed or divorced
5. 9% live alone
6. *25.6% may not see a doctor even if they have to

(Whampoa CFAA Committee)
### Perceptions of Physical, Psychological and Social Health

<table>
<thead>
<tr>
<th>Physical Health</th>
<th>Psychological Health</th>
<th>Social Health</th>
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<tbody>
<tr>
<td>Slowing down – self awareness of changes in mobility, increased pain and memory problems</td>
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### Relationship Harmony
- Family, Social, Spouse

### Financial harmony
- Dependence, conflict, strain, independence

### Social connectedness
- Sharing and caring
- Caring and no sharing
- Sharing is caring
- No caring, no sharing

### Eating together

### Adaptation and self-management strategies

- **Keep Moving** (exercise, eating healthy)
- **Keep Learning** (active learning new technological advances)

- **Avoidant coping** (distraction, excessive sleeping, watching tv)
- **It feels good to do good** (finding meaning in life by helping others)
- **Power of Prayer** (relegating power to higher power beyond their control)

- **Social participation**
  - Active community participation
  - Religious/spiritual participation

Shiraz et al 2020 (under review)
PROGRAMMING TO SUPPORT SELF-MANAGEMENT
BASED ON ABOVE FINDINGS

Healthy lifestyle and disease management (SCOPE)

Guided autobiography (Life Review)

Bio-P

Bio

Relationship building activities

Psych

Psychosocial

Social

Adaptive capability

Community, Services, Housing and Infrastructure

Hildon et al 2016
Self Care and Community Development

- SCOPE
- GAB (Guided Autobiography)
- SWING (Sharing Wellness and Initiatives Group)
- BIG SWING – Be Involved & Grow!
- ComSA Champions
- Community Health & Wellness Trainers
- IDOP
- Self Care Day
- SOTA Arts exhibition
- Curating Whampoa – a Community Museum Project
- Longevity Parties
- Volunteer Carnival

Self care and healthy lifestyle
Social capital
Positive ageing
Patient-centred Medical Home’ PLUS Centre-based Long-term Care For Seniors With High Institutionalisation Risk

Dementia Care System

Centre-based Long Term Care (‘EPICC’)

PwID and aging caregivers

Hua Mei Clinic

Care Management

Behavioural Health Intervention
(Counseling and Coaching; SCOPE, SCOPE DM)

The Learning Room

Community
FROM A MUSIC ROOM IN A BOMB SHELTER TO A PATIENT-CENTRED MEDICAL HOME WITH LTC FACILITIES
Primary care and community services integration

Integration with the Healthcare Clusters (Regional Health Systems, RHS)

a) Patient transfers
b) Information flow
c) Resources

“Health-social” integration

a) Novena-Kallang Network
b) Community Network for Seniors (CNS) and the Silver Generation Office (SGO)
EVALUATION AND SHARING

• Research
  • ComSA Realist Evaluation (Panaxea, Netherlands)
  • “The ComSA Patient-Centered Care (COPACC) Study” (GERI)
  • “Caring for Persons with Dementia and their Caregivers in the Community: Towards a Sustainable Community Based Dementia Care system” (CARE)
  • ComSA BPS Risk Screener – further research (In discussion with SSHSPH)
  • EMPOWER Initiative (Massey U, NZ)
  • SCOPE DM (SSHSPH)
  • Impact of Baduanjin on Frailty Reversal (GERI)

• Sharing
  • Use of ComSA BPS Risk Screener for population health
  • Clinical Training Centre for Community Nursing
## Components of ComSA

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<th>ComSA</th>
<th>Care System Development</th>
<th>Self Development</th>
<th>Evaluation</th>
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<td>• Community needs survey</td>
<td>• ‘Realist Evaluation Approach’: What works for whom and why.</td>
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<td>• Long-term care facilities in ‘stealth’</td>
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<td>• Age-friendly transport</td>
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<td>• Person-centred universal design</td>
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<td>• Food, shopping and recreation</td>
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<td>• Enabling technology</td>
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<td>• Capacity Building</td>
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<td>• Intergenerational collaboration</td>
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