Bigger role for Govt in care of the dying

More hospice places to be provided; more staff to be trained for palliative care

The Government is set to play a bigger role in end-of-life issues and in the care of the dying.

It will expand hospice care, rope nursing homes into caring for the dying and ramp up the number of doctors and nurses trained in palliative care.

It will also make it easier for people to make Advance Medical Directives or living wills, so doctors know what to do when these individuals become terminally ill.

Opening the Lien Centre for Palliative Care yesterday, Health Minister Khaw Boon Wan acknowledged that the state has so far played a limited role in this aspect.

But the country has come a long way from the depressing Sago Lane death houses of the 60s, where the sick were taken to die and then immediately removed for burial.

With advances in medical science, and in view of the ageing population here, he said the Government was now in a position to do much more to raise the quality of life of the dying, to ease their pain, to preserve their dignity and to support their care.

So even as he lauded the efforts of volunteers who pioneered hospice care here, he made it clear that the State had come round to accepting it should play a bigger role.

"Fortunately, the limited support from the Health Ministry has not been disastrous, as our population is still young. But we cannot stay young forever," he said.

He plans to increase the 125 hospice places now available by 20 per cent over the next five to seven years. The four hospices, which are run by voluntary groups, are about 70 per cent full and had 1,200 patients last year. Another 3,200 patients were cared for through five home-hospice services.

About $5 million in subsidies went to 4,400 patients, an amount which Mr Khaw conceded as small, given the 17,000 deaths here every year.

He also wants to involve nursing homes which look after the elderly and chronically ill in "end-of-life planning" so that their patients' wishes are more easily respected.

Dr Noreen Chan, medical director of Dover Park Hospice, said that more than half of nursing home patients are sent to hospitals to die. Many could be living out their last days in these homes instead.

Next year, a pilot project will start with six nursing homes near Tan Tock Seng Hospital. Their staff will be trained in palliative care, which includes how to give pain relief to patients when conventional pain killers will no longer do. They can call a specialist to assess if a deteriorating patient needs hospital care before he is rushed there.

Also on the cards are "die-logues" - a term Mr Khaw borrowed from Singapore's "Mr Charity" Gerard Ee - to get people thinking about what they want for the end of their lives. It was time to talk about death and "not sweep it under the carpet", he said.

"Western countries are beginning to come to grips with an ageing population, and Singapore would have to confront this too.

The Lien Centre will produce courses to equip doctors and nurses to deal with the dying. It will also generate essential data, such as where people live out their last days, so it is clear where resources are most needed.

"Everybody should be able to die with dignity, without pain, surrounded by loved ones. Where do we stand today? I don't know. Let's find out," he said.

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Palliative care gets a booster shot

A TWO-YEAR diploma course that teaches doctors how to care for terminally-ill patients will debut next year as health officials look to bolster palliative services in Singapore.

The course aims to equip doctors with the skills to handle palliative emergencies, manage pain, deal with depressed patients and console grieving relatives.

"Palliative care is a relatively new discipline and we are only just beginning to build up our professionally-trained workforce," said Dr Cynthia Goh, the director of the newly-opened Lien Centre for Palliative Care, which will help run the course.

"It is breaking new ground and those of us in the field have to learn new skills to look after this group of patients."

About 3,500 terminally-ill patients end up in community palliative care every year and their numbers are growing as Singapore's population ages.

But attracting trained and committed doctors to the field is a challenge, said Dr Goh. There are currently different courses in palliative care for nurses and doctors, including a specialist course for nurses.

The new diploma course is designed for doctors interested in palliative care but who do not want to specialise in the field.

It is one of several new training programmes designed to beef up manpower in this field.

The Lien Centre, a collaboration between the Duke-NUS Medical School and the Lien Foundation, aims to collect data on palliative care, including the number of terminally-ill people here, where they are dying and whether they receive palliative support.

Meanwhile, the Ministry of Health (MOH) has said it will amend the regulations to recognise palliative care as a sub-speciality.

The move would create a pool of recognised specialists who can pass on their knowledge to other doctors, an MOH spokesman said earlier.

When the amendment is in force, about 15 doctors currently working in the area will be registered as specialists, said Dr Goh.

At the official opening of the Lien Centre yesterday, Health Minister Khaw Boon Wan said he was pleased that young doctors are pursuing post-graduate degrees with a view to working with terminally-ill patients.