

The 9th ASEAN & Japan High Level Officials Meeting on Caring Societies

COUNTRY REPORT: SINGAPORE

Human resource development in the sectors of Welfare and Health - with a focus on capacity building of service providers and employability promotion of vulnerable people

I Follow-up from the 8th High Level Officials Meeting, “Poverty alleviation with a focus on vulnerable people”

1 The measures undertaken by Singapore according to the recommendations of the 8th High Level Officials Meeting are summarised as follows:

- Continued Investment of our ComCare Endowment Fund, which is the primary fund through which Singapore funds our social assistance programmes to help alleviate the situation of those affected by poverty. The fund has grown to about S\$1.3billion out of its expected target of S\$1.5billion since its establishment in 2005
- Regular reviews of existing social assistance policies and schemes in order to improve coverage and delivery
- Regular inter-agencies meetings among social assistance agencies to improve policy-operations integration
- Participation at ASEAN-related forums such as the 7th SOMRDPE (Jan 2011) and Seminar on Policies and Practices of Rural Poverty Reduction in China and ASEAN Countries (Oct 2011), and the AMMRDPE (Nov 2011), where Singapore will continue to learn from our partners and share our best practices where possible on the delivery of social assistance.

II Introduction

2 Singapore marks its 46th year of independence this year. As a small city state without any natural resources, our population comprises about 5 million people, wherein the resident population is 3.77 million people. The rate of increase of population is 1.8% per annum while the rate of natural increase of population (excess of live-births over death) is 0.4%. The labour force participation rate in 2010 was 66.2%, where the participation rates among males and females were 76.5% and 56.5% respectively. In the same year, our GDP per capita was US\$43,867 (or S\$59,813) and adult literacy rate is 95.9%.

3 The crude death and birth rate are 4.4 and 9.3 per 1,000 people respectively. Infant mortality rate stands at 2.0 per 1000 infants and the under-five mortality rate is 2.5. The total fertility rate is 1.15 per female. Life expectancy at birth is 81.8 years, specifically 79.3 for males and 84.1 for females. The unemployment rate as of 2011 is 2.1%.

4 We invest heavily in developing human capital through education, training and skills upgrading. The Singapore government focuses on building self-reliance and resilience among citizens, maintaining the institution of the family as a basic building block of society, and maximising human capital for community development. We also build social capital through initiatives that employ the Many Helping Hands approach and through encouraging 3P (public-people-private) partnerships. The FY11 budget for the Ministry of Community Development, Youth

and Sports, Ministry of Health and Ministry of Manpower is S\$1.83 billion, S\$4.1 billion and S\$1.046 billion respectively.

III Human Resource Development in Health and Social Service Sectors

Health Sector

5 Healthcare comes under the purview of the Ministry of Health while social issues are under the purview of the Ministry of Community Development, Youth and Sports. Recognising the synergies in handling ageing issues, which lie at the intersection of social and health issues, the Ministerial Committee on Ageing was set up in 2007 to ensure a holistic approach in meeting the needs of an ageing population. Currently, the Minister for Health Mr Gan Kim Yong, is also concurrently the Minister in charge of ageing issues.

Intermediate and long-term care

6 With the ageing population, many of our patients will be older and more frail. They will need more rehabilitative, convalescent, and other forms of aged care at both the institutional and community levels. More attention needs to be paid to care outside of acute hospitals – in particular, we need to develop the intermediate and long-term care (ILTC) sector to cater to the needs of our elderly and chronically-ill patients.

Intermediate & Long-Term Care Services

- 6 Community Hospitals, 3 Chronic Sick Hospitals
- 64 Nursing Homes
- 4 Inpatient Hospices, 5 Hospice Home Care providers
- 44 Day Rehabilitation, Dementia Day Care and Psychiatric Day Care Centres
- 10 Home Care Providers
- Complemented by 22 funded Social Day Care Centres for Seniors and other social care services

7 The ILTC needs of elderly patients discharged from acute hospitals and community hospitals (CHs) are diverse, ranging from home care, centre-based services, nursing homes, and hospices. The majority of the workers in the sector are nursing staff (both registered and enrolled nurses, and support care staff such as nursing aides and healthcare assistants), with the rest comprising allied health professionals (including physiotherapists, speech therapists, occupational therapists) and allied health support staff, doctors and administrative staff.

8 About 65% of the institutions in the ILTC sector are led by Voluntary Welfare Organisations (VWOs), many of which tend to be smaller in scale. The rest are run by private providers.

9 The Singapore Government has been investing heavily in the development of this sector in recent years. Some of the major initiatives put in place included the building of new community hospitals and nursing homes to meet growing demand. In the area of manpower, we are supporting the sector in a few areas:

- Funding for improvements in staffing norms to enable the sector to build up their capacity and capabilities.
- Supporting training and upgrading through the Health Manpower Development Programme-ILTC (HMDP-ILTC) and Learning Institute. The HMDP-ILTC is a training grant to support advanced skills training. It was started in 2002 in recognition of the need to support healthcare professionals upgrade in specialised areas needed for the ILTC sector. Since 2002, the Government has invested close to \$9 million in this

training programme to upgrade and hone the skills of over 400 ILTC professionals, through local and overseas training and attachments. The Agency for Integrated Care, set up by the Ministry of Health to coordinate and facilitate efforts in care integration at the national level, has set up a Learning Institute (LI) to facilitate training to address sector-specific skills gaps of healthcare workers within the ILTC sector.

- Setting up a central employment scheme known as Career Resourcing and Development of Allied Health Talents or CREATE, to provide an additional option for smaller ILTC institutions to hire therapists. Recognising that some ILTC institutions may be more limited in scale and scope, the scheme will enable these institutions to better attract and retain therapists. The therapists employed under the scheme will benefit from career deployment opportunities across the acute and ILTC sectors. The scheme will start off with Allied Health Professionals such as Physiotherapists, Occupational Therapists and Speech Therapists.
- Bringing the industry together to work on solutions to challenges common to the sector. The ILTC Manpower Council in an industry-led platform where ILTC institutions come together to discuss and address manpower issues collaboratively. The Council works on the key issues of leadership development, skills and career development and promoting the image of the sector.

10 Going forward, the Singapore Government will do more to support the elderly for them to age gracefully and receive the care they need. In particular, we are looking at providing more health and social care facilities and services in the community, and to build a network of support for caregivers and family members. With the expansion of facilities and services, one human resource challenge is to ensure sufficient numbers of professional and support staff to deliver the services.

11 Besides expanding capacity, another challenge is building up manpower capability in the ILTC sector. The sector needs a pool of committed, competent and caring professionals and support staff who work together to provide high quality care to the elderly. We are looking at how to encourage continual upgrading of knowledge and skills across the ILTC workforce so as to raise the professionalism and productivity of the sector.

Planning for human resources

12 The Ministry of Health conducts medium to long-term manpower demand assessment for the key healthcare professions to ascertain the appropriate level of healthcare manpower required to meet national healthcare needs. We have been growing our healthcare professional base through both increasing training pipelines and overseas recruitment. Singapore maintains a relatively low healthcare manpower to population ratio, while delivering good healthcare outcomes (see Table below).

Country	Doctors to Population		Nurses to Population		Dentists to Population	
	Year	Ratio	Year	Ratio	Year	Ratio
Germany	2008	1:281	2008	1:94	2003	1:1282
Australia	2007	1:337	2007	1:99	2004	1:2000
UK	2009	1:369	2009	1:103	2004	1:1786
Japan	2008	1:465	2008	1:105	2004	1:1351
Hong Kong	2009	1:566	2009	1:181	2008	1:3333
Malaysia	2009	1:927	2009	1:476	2008	1:7692
Singapore	2010	1:580	2010	1:173	2010	1:3240

Table:
Comparison of
Healthcare
Professionals to
Population Ratios

Source: Figures for doctors and nurses from OECD Health Data, Malaysia Ministry of Health and HK Department of Health; Figures for dentists from the respective Chief Dental Officers of the different countries

13 In terms of the training of doctors, the Yong Loo Lin School of Medicine in the National University of Singapore (NUS) is responsible for training most of our medical students. It was ranked first in Asia and 18th globally in the field of medicine in the new QS World University Rankings in 2011. To meet growing needs, the Duke-NUS Graduate School of Medicine was established in 2007 to train a new generation of physician-scientists. A third medical school – the Lee Kong Chian School of Medicine – will be set up in 2013, through a collaboration between the Nanyang Technological University (NTU) of Singapore and Imperial College in the United Kingdom. Together, the three medical schools will train 500 doctors annually at steady state.

14 We are also enhancing training opportunities for other healthcare professionals. The entry level training for Enrolled Nurses (ENs) starts with the Institute of Technical Education (ITE) at the certificate level. Beyond this, there are diploma-level nursing courses available in two of our polytechnics (Nanyang Polytechnic and Ngee Ann Polytechnic). With the Diploma in Health Sciences (Nursing), they can register with the Singapore Nursing Board and be employed as Registered Nurses (RNs). The Alice Lee Centre for Nursing Studies (ALCNS) at the National University of Singapore offers programmes at the Bachelor of Science (Nursing), the Master of Nursing (MN) and the Doctor of Philosophy levels. We have also started a nursing degree upgrading programme through a collaboration between the Singapore Institute of Technology and the University of Manchester.

15 To upgrade diploma-level physiotherapists and other allied health professionals, the Ministry is also working with the Singapore Institute of Technology on a new allied health degree conversion programme. Recognising that we may not be able to train all the healthcare professionals that we need, the Ministry also supplements local training pipelines with foreign recruitment of trained professionals.

Social Service Sector

16 There are a total of 9,300 social service personnel in the social service sector¹. They are employed in voluntary welfare organisations carrying out a variety of services including family services, eldercare services, disability services, welfare homes and children homes.

¹Survey on voluntary welfare organizations and the Community Sector conducted by the National Council of Social Service in 2009.

17 The Ministry of Community Development Youth and Sports has taken a multi-pronged approach to improve the supply and retention of critical professionals e.g social workers in the social service sector. We are working with the Institutes of Higher Learning and training institutes to increase the supply of trained social work professionals. At the same time, we are improving the image and professionalism of the sector by introducing accreditation while providing opportunities for training and upgrading. We are improving the working conditions in the sector by ensuring competitive remuneration, enhancing recognition of social work professionals, and restructuring of jobs and service delivery models.

18 A fund to build the capabilities of voluntary welfare organisations was launched by the Ministry in 2002 to ensure that voluntary welfare organisations are equipped with resources, trained personnel, professional management and board expertise to run their organisations effectively. A total of S\$53 million from this fund, the VWOs-Charities Capability Fund (VCF), is available for staff in charities and the social service sector to tap on for funding support for training and upgrading efforts from FY07 to FY11. From April 2007 to March 2011, a total of 22,600 applications for VCF funds were received. Moving forward, the Ministry is reviewing the VCF to ensure that it continues to meet the capability building needs of the voluntary welfare organisations and their staff.

19 An accreditation framework for social workers and social service practitioners was developed in July 2008 to ensure standards of practice with base entry requirements and continual professional education. Applications for accreditation were open in April 2009. As at 12 Sep 2011, there were 1,029 accredited personnel.

20 Moving forward, we are working with our partner, the National Council of Social Service, to introduce a new scheme to identify professionals with leadership potential and to prepare them for key leadership positions in the sector. The scheme will involve putting candidates through structured leadership and professional development courses. They will also be expected to contribute to inter-agency assignments and be given exposure to different areas of work through job rotations across voluntary welfare organisations or even to the Ministry of Community Development, Youth and Sports and the National Council of Social Service. Mentors will also be assigned to these leader-potentials to guide and support them.

21 We are also looking into strengthening professional competencies on the ground to ensure that the sector continues to be staffed by high calibre professionals. The Professional and Leadership Development Scheme will be enhanced to support social workers who wish to develop their careers along a “specialist” path to become senior social workers. This will help to develop a pool of highly-skilled senior social workers who can be deployed to the sector to help boost the capability of the sector.

22 Other initiatives that will be rolled out include supporting young social workers with clinical supervision to meet social worker accreditation criteria, improving research-based practice as well as providing more structured and sustained training to improve social work practice.

23 We are committed to continually invest in the professional development of social service professionals. We will continue our partnership with voluntary welfare organisations, educational

institutions and professional bodies to further enhance the professionalism of social workers and other social service professionals to enable them to help our families meet future challenges.

Employment Sector

24 Employment is key to ensuring that persons with disabilities (PWDs) maximise their potential and live as independently as possible. PWDs will achieve self reliance through work. In this regard, the Steering Committee of the Enabling Masterplan 2007 – 2011 (a five-year disability national plan) decided that disability employment should be based on a market-driven approach. Employers should recognise the merits and abilities of PWDs and how they can effectively contribute to the company as productively as possible. Employment for PWDs should be made on a business case. It should not be because of compassion or corporate social responsibility. This could devalue the contribution of PWDs and would not ensure their employability in a sustainable manner. Details of specific initiatives to facilitate employment opportunities for the disabled are elaborated in Case Study 2.

25 With falling birth rates and rising life expectancy, Singapore's population and workforce will grow older. To ensure continued economic growth and retirement adequacy of the employees, Singapore needs to keep the older workers in the labour force and is taking steps to enhance the employability of older workers. In March 2005, the Tripartite Committee on Employability of Older Workers, with representation from the trade union, employer and government, was set up to recommend measures to:

- Enhance the employability of older workers and help them stay employed longer so as to raise the effective retirement age beyond 62 years (prevailing statutory retirement age); and
- Positively shape perceptions and mindsets of employers, employees and the public towards the employment of older workers.

26 The Tripartite Committee released its interim and final report in January 2006 and May 2007 respectively, adopting 4 key thrusts:

- Thrust 1: Expand employment opportunities for older workers – to encourage employers to recruit and retain workers beyond the age of 62 years by identifying new sectors and jobs suitable for older workers, or jobs that could be redesigned to facilitate the employment of older workers.
- Thrust 2: Enhance cost competitiveness of older workers– to address concerns regarding the cost of employing and retaining older workers.
- Thrust 3: Raise skills and value of older workers – to encourage and help mature workers to continually upgrade their skills.
- Thrust 4: Shape positive perceptions towards older workers – to address practices of discrimination and negative perceptions of older workers among employers, workers and the public; as well as to reach out to older workers to encourage them to accept necessary adjustments to allow them to stay employable for a longer time.

27 The key recommendations of the Tripartite Committee included the introduction of Re-employment Legislation (known as “Retirement and Re-employment Act”) effective from 1

January 2012 requiring employers to re-employ workers up to the age of 65 on terms and conditions agreed between the company and the workers². To encourage early adopters, the ADVANTAGE! Scheme was introduced under the Singapore Workforce Development Agency to provide companies with a financial grant of up to \$400,000 per company covering 4 areas including job redesign, employees' training, placement services and retention incentive. In May 2006, the Tripartite Alliance on Fair Employment Practices, comprising representatives from the National Trades Union Congress, the Singapore National Employers' Federation and the Ministry of Manpower, was set up to promote mindset change among employers, employees and the general public to adopt approaches and practices which are fair and equitable to all employees. To date, over 1,700 companies have signed the Employer's Pledge of Fair Employment Practices which covers recruiting and treating employees on the basis of merit, such as skills, experience or ability to perform the job regardless of age, race, gender, religion, family status or disability.

IV Case Studies

Case Study 1: Community Silver Trust

28 The Singapore Government put in place a \$1 billion Community Silver Trust ('CST') in 2011, to help build the capabilities of volunteer welfare organisations (VWOs) that provide long-term care to the elderly. Under CST, the Government provides a matching grant of one dollar for every donation dollar raised by the VWO. The objective of the CST is to encourage donations and provide additional resources for the service providers in the intermediate and long-term care ("ILTC") sector to enhance their capabilities to provide quality step-down care.

29 The matching grants under CST are ringfenced for capability-building in 3 key areas:

- Service development: to enable the VWOs to expand and widen the range of services that they provide, to reach a certain critical mass which will allow for economies of scale and scope.
- Manpower development- to support the VWOs in developing and retaining their staff
- Organisational development- to help the VWOs in building up their organisational capability (e.g. planning, process design, IT systems).

Case Study 2: Facilitating Employment Opportunities for the Disabled

30 The Enabling Masterplan 2007 – 2011 put in place a value-chain employment framework to place more PWDs in open employment. An integral component of the framework is the involvement of private sector employers to hire and provide industry-relevant knowledge. The Enabling Employers Network (EEN) is an alliance of like-minded employers who seek to champion and advance the employment opportunities for PWDs. In addition, customised job placement and job support services were provided to PWDs of differing disability types.

31 The Open Door Fund (ODF) was set up by MCYS in 2007 that provides a grant of up to \$100,000 per company to encourage employers to hire PWDs by funding the costs of job redesign,

² Many Singapore companies operate on a seniority based wage system. To address the concerns of cost competitiveness, companies may make adjustments to the terms and conditions of employment taking into consideration reasonable factors such as the wage system, productivity, duties and responsibilities and performance.

workplace medication and internships. In 2009, the ODF was enhanced to include apprenticeship training scheme for PWDs and enhanced job support from employers. Since the ODF was launched in May 2007, more than 450 persons have found employment under the scheme and over 110 companies have come on board.

V Conclusion

32 Moving forward, Singapore remains committed to invest in developing human resources through providing opportunities for training and upgrading, improving working conditions, raising standards and promoting the image and professionalism of the health and social sectors. The government and industry partners will work closely together to further develop the capacity and capabilities of the health and social sector, and to promote the employability of persons with disability and elderly.”