THE 2nd ASEAN AND JAPAN HIGH LEVEL OFFICIALS MEETING ON CARING SOCIETIES: DEVELOPMENT OF HUMAN RESOURCES AND IMPLICATIONS OF AGING SOCIETIES
29 AUGUST -3 SEPTEMBER (TOKYO)

COUNTRY PAPER – SINGAPORE

HEALTHCARE AND SOCIAL SERVICES

Introduction

Ageing Population of Singapore

1 Singapore is one of the fastest ageing populations in the world. Sweden took more than 85 years to double the number of elderly (aged above over 65) from 7% to 14% of its population. Singapore will take about 24 years to do so.

2 The Singapore population is still relatively young today, but this will change significantly over the next 20-30 years (See Table 1). We had about 237, 600 elderly (or 7.3% of the population in 2000). This will increase more than three-fold to 796,000 (or about 19% of the population) by the year 2003. Almost 1 in 5 Singaporeans will be at least 65 years old then.

Table 1: Number and Proportion of Elderly

YEAR	1990	2000	2010	2020	2030
Number (thousands)	164.5	237.6	311.8	529.4	795.9
Proportion of elderly[1]	6.0	7.3	8.4	13.1	18.9
Median Age (years)	30	34	36.9	39.3	41.2
Dependency Ratio[2]	40.8	40.4	38.7	44.9	56.4
Young (0-14)	32.3	30.1	27.1	25.9	26.9
Old (65+)	8.5	10.2	11.6	19.0	29.5

Source: Census of Population 2000, Singapore Department of Statistics
Projection figures adapted from report of
Inter-Ministerial Committee (IMC) on the Ageing Population.

[1] As a percentage of resident population.
[2] Citizens/ Permanent Residents aged 0-14 and 65 and over, per 100 of those aged between 15 and 64.

3 The current old age dependency ratio (see Table 1) is 1 elderly person to 10 working adults. This is expected to increase to 3 elderly persons per 10 working adults in 2030. This means that in 2030, we have only 3 working adults supporting 1 elderly person.

4 Over the past decade (1990-2000), our elderly population (aged 65 years and above) has increased by about 3.7% per annum. However, the average growth rate per annum of the old-old group (those aged 85 and over) was significantly higher than the young-old groups. The growth rate of the old-old group was 6.1% compared to 4.1% for those aged 65-74 and 2.4% for the 75-84 group (see Table 2).

Table 2: Resident Population by Age Group

	Number		**Per Cent**		**Average Annual Growth**
Age Group	**1990**	**2000**	**1990**	**2000**	**(%)**
65-74	104,943	157,183	3.8	4.8	4.1
75-84	49,862	62,969	1.8	1.9	2.4
85 & Above	9,645	17,474	0.4	0.5	6.1

Source: Census of Population 2000, Singapore Department of Statistics

Changes in Family Structure, Pattern of Ageing Population Disease Prevalence

5 The elderly of the future will be more educated, more independent and have different needs and aspirations. The group aged 65-74 years with at least a secondary education is projected to increase from about 19% in year 2000 to 62% in 2030 (see Table 3).

Table 3: Education Profile of Persons Aged 65-74 Years

Educational Qualification	**2000**		**2010**		**2030**	
	No.	%	No.	%	No.	%
TOTAL	**151,874**	**100.0**	**196,000**	**100.0**	**506,400**	**100.0**
Primary & Below	122,677	80.8	139,600	71.2	191,200	37.8
Secondary	20,085	13.2	32,100	16.4	161,100	31.8
Upper Secondary/ Polytechnic	6,432	4.2	16,700	8.5	87,600	17.3
University	2,679	1.8	7,600	3.9	66,500	13.1

Source: Census of Population 2000, Singapore Department of Statistics
Projection figures adapted from report of Inter-Ministerial Committee (IMC) on the Ageing Population

6 For the same group of elderly (aged 65-74 years), there will also be a higher proportion who never married. In 2000, it was about 3.8%; by 2020, it is likely to be 10%.

7 The labour force participation rate among the older Singaporeans (in the 55-64 age group) is low compared with older persons in other newly-industrialised economies and developed countries (see Table 4). The labour force participation rate of elderly persons aged 65 and above was 11 % in 2003.

Table 4: Labour Force Participation Rates of Older Persons Aged 55-64, 2001

Country	Total (%)	Males (%)	Females (%)
Singapore	45.1	64.2	27.6
Taiwan	41.8	61.7	22.5
Hong Kong	43.2	62.0	21.4
South Korea	59.2	71.3	47.9
United States	60.2	68.1	53.0
Japan	65.8	83.4	49.2

Source: Report on Labour Force in Singapore 2002, Ministry of Manpower

8 According to the Census of Population 2000, 87.6% of our elderly still live with their families, either with their spouses and/or with their children (See Table 5). Only 6.6% of our elderly lived alone. Notwithstanding this, there is notable increase in the number of all-elderly households over the past decade (Table 6). Although this group constitutes only a small percentage (2.8%) of the total households, if this trend continues, the sheer number will have an impact on the types of community services and care arrangements necessary to support these elderly.

Table 5: Living Arrangement of Older Persons aged 65 years and above

	Total (%)	By Gender		By Age	
		Male (%)	Female (%)	65-74 (%)	75+ (%)
TOTAL	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**
Living with Spouse	**50.4**	**73.7**	**32.0**	**58.5**	**35.0**
No Children in Household	13.9	19.7	9.3	15.8	10.3
With Working Children in Household	33.1	48.9	20.7	38.9	22.2
With Non-working Children in Household	3.4	5.1	2.0	3.9	2.4
Living with Children only	**37.2**	**15.2**	**54.7**	**29.8**	**51.4**
With Working Children in Household	33.2	13.7	48.6	27.6	43.8
With Non-Working Children in Household	4.1	1.5	6.1	2.2	7.6
Not living with Spouse/ Children	**12.3**	**11.1**	**13.3**	**11.7**	**13.6**
Alone	6.6	5.8	7.3	6.5	6.9
With other Elderly Persons only	1.2	1.5	1.0	1.3	1.1
Others	4.5	3.8	5.0	3.9	5.7

Source: Census of Population 2000, Singapore Department of Statistics

Table 6: Resident Households with Elderly Persons

	Number		%	
	1990	**2000**	**1990**	**2000**
Households with				
At least 1 person aged 65 and above	136,700	197,800	20.7	21.4
All Persons aged 65 and above	10,400	25,700	1.6	2.8

Source: Census of Population 2000, Singapore Department of Statistics.

9 The overall life-expectancy at birth for Singaporean residents was 78.9 years in 2003, with males having a lower life expectancy at birth of 76.9 compared to 80.9 for females. Crude death rate for 2003 remained at 4.4 per 1000 population.

Chronic disease conditions like cancer, ischaemic heart disease and cerebrovascular disease were among the top 5 conditions of hospitalization in Singapore, accounting for 11.6% of all hospitalizations in 2003.

10 The top five causes of death among Singaporeans are Cancer, Ischaemic Heart Disease, Pneumonia, Cerebrovascular Disease and other heart diseases. Together they accounted for about three quarters of all deaths. Cancer and heart diseases alone accounted for half of all deaths.

11 The prevalence of risk factors for cardiovascular diseases among Singaporeans is given as follows:

Table 7: Prevalence of Risk Factors for Cardiovascular Diseases

Prevalence of	**1992**	**1998**
Diabetes	8.6%	9.0%
Hypertension	22.2%	27.3%
Daily smoking	18.3%	15.0%
Regular exercise	13.6%	16.8%
Obesity (BMI≥30)	5.1%	6.0%

Source: National Health Surveys 1992 and 1998, Singapore

Overview of Healthcare and Social Services in Singapore

12 In Singapore, there is a dual system of healthcare delivery. The public system is managed by the Government while the private system is provided by the private hospitals and general practitioners. Patients are free to choose the providers within the dual healthcare delivery system and can walk in for a consultation at any private clinic or any government polyclinic

13 The Singapore health care delivery system is based on individual responsibility, coupled with Government subsidies to keep basic health care affordable.
The Singapore healthcare philosophy emphasises the building of a healthy population through preventive healthcare programmes and the promotion of healthy living. The population is encouraged through the public health education programme to adopt a healthy lifestyle and be responsible for his own health

14 The provision and delivery of social services is achieved through the combined effort of the government and voluntary welfare organizations. The "many helping hands" approach ensures sustainable social service provision to all Singaporeans. The government gives direction and supports key partners within the community in developing a network of social services to the needy. This ensures that the social services are accessible and responsive to the needs of the less fortunate.

Nature of healthcare and social services

15 While the healthcare field is characterized by public and private sector players, long term care services for the elderly are mostly provided by voluntary welfare organizations (VWOs). The social services are provided by VWOs, Community Development Councils (CDCs) and self-help groups.

16 The healthcare delivery system comprises primary health care provision at private medical practitioners' clinics and outpatient polyclinics, and secondary and tertiary specialist care in the private and public hospitals. In 1999, the public healthcare delivery system was re-organised into two vertically integrated delivery networks, National Healthcare Group (NHG) and Singapore Health Services (SHS). This is to enable more integrated and better quality healthcare services through greater co-operation and collaboration among public sector healthcare providers.

17 Social service delivery is decentralized to community-based voluntary welfare organizations (VWOs). The government encourages VWOs to work closely with Community Development Councils and self-help groups. Services to the elderly, youth, children and families, disabled, and welfare homes cut across race and religion to serve all Singaporeans.

Healthcare and welfare services to the elderly
Healthcare Services to the Elderly

18 The elderly use more health care than the general population, as they are more prone to disease and disability and their complications, and are more likely to need continuous long term care. Public sector hospital admission rate was 263 per 1000 elderly males and 230 per 1000 elderly females. This is more than 3 times the public sector hospital admission rate for the general population.

19 Care for the elderly in Singapore emphasizes health promotion and disease prevention, so as to enable the elderly to remain healthy and active in the community for as long as possible. Institutionalisation should be considered only as the last resort.

20 Community health services like day rehabilitation centres, dementia day centres, home medical and home nursing services are available in Singapore. Subsidized community health services are provided to older persons to encourage them to continue staying within their own homes in the community for as long as possible.

21 For those who need long term residential care, nursing homes provide care for older persons with medical conditions requiring long term daily nursing care. There are two types of nursing homes available in Singapore - managed by Voluntary Welfare Organisation and private organizations. There were a total of 54 nursing homes as at end 2003, half of which were Voluntary Welfare Organisation nursing homes and the other half, private nursing homes.

22 There are also 5 Community Hospitals which provide intermediate care facilities between the acute hospitals and community-based healthcare facilities, with continuation of care during the period of recovery from a health-related problem.

23 In 2002, the Ministry of Health (MOH) introduced **ElderShield**, an affordable insurance scheme aimed at helping residents defray their long-term care expenses if they become severely disabled. A monthly cash payout is given if the policyholder becomes disabled. "Disability" under the ElderShield scheme is defined as not being able to perform 3 or more of the 6 activities of daily living. Ministry of Health (MOH) also launched the **Primary Care Partnership Scheme** in 2000, where private general practitioners are contracted to provide subsidized medical services to lower-income elderly Singaporeans. The scheme was expanded to dental care in Mar 2002.

Welfare Services to the Elderly

24 Our community-based eldercare services and programmes are designed to support families in caregiving, provide opportunities for the elderly to be engaged in society and share their talents and knowledge with the younger generation. In April 2001, the **Eldercare Masterplan** was conceived. This is a blueprint for the development of a range of community-based eldercare services over the next five years. The Ministry of Community Development and Sports (MCDS) introduced **Neighbourhood Links** and the

Active Seniors Programme to provide opportunities for elderly to be engaged in society while also promoting intergenerational bonding and cohesion.

25 Eldercare programmes and services focus on building a strong network of quality services and opportunities for the elderly that enable them to continue to live within and contribute to the community. A summary of programmes for the well elderly and frail elderly is provided in Annex A (see Annex A).

Inter-sector collaboration

Inter-Ministerial Committee (IMC) on the Ageing Population

26 The Inter-ministerial Committee on Ageing was formed to study the impact of the shifts in the social and economic landscape on the ageing population. The key areas of concern were taken up by the relevant ministries and discussed with community leaders at public consultation sessions. The following initiatives have been implemented.

Financial Security, Employment and Employability

27 Our social security system is based on the individual being responsible for planning and saving for his financial security in old age. Individuals are encouraged to decide on the standard of living they can realistically sustain after retirement and to work toward that goal. In recent years, the Government has taken steps to **re-focus the Central Provident Fund (CPF) system**, based on the recommendations from the IMC and the Economic Review Committee (ERC), to serve its primary social objectives of providing for retirement, medical needs and housing, while at the same time minimising the statutory burden on employers. Some of the CPF changes include increasing the Special Account contribution rates as well as the Minimum Sum.

28 Financial planning has to start early. To complement the CPF system, the Ministry of Finance (MOF) introduced the voluntary **Supplementary Retirement Scheme (SRS)** with tax concessions for contributions to encourage Singaporeans to plan and save more for their old age.

Housing and Barrier-Free Accessibility

29 The 'Ageing in Place' principle guides our housing and land use policies to enable the elderly to live in familiar settings, amidst family and community support. To provide another housing option for older persons to age-in-place, the Housing and Development Board (HDB) launched the **Studio Apartment (SA) Scheme** in 1998. The scheme allows elderly households to move from their bigger flats to these smaller apartments and use the balance sales proceeds for their old age needs. These apartment units are purpose built with the elderly in mind and are specially equipped with elderly-friendly features.

30 To enhance the accessibility of HDB flats, the Ministry of National Development (MND) introduced the **Lift Upgrading Programme** in 2001 to allow lifts to be provided

at every level of high-rise HDB blocks where feasible. This programme has benefited elderly residents in particular and provided them with barrier free accessibility and improved mobility.

31 The **revised code on barrier-free accessibility** in buildings has taken effect in 2003 to cater to the needs of the greying population as well as the disabled. The Land Transport Authority (LTA) has embarked on a programme to retrofit existing Mass Rapid Transit (MRT) stations to enhance their accessibility. In addition to the provision of lifts, all the MRT stations will be retrofitted with other barrier free facilities and/or redesigned to meet the needs of the elderly, mobility impaired and wheelchair users. The introduction of elder-friendly low-floor buses is one such initiative.

Public Education on Ageing

32 A strong public education programme to shape appreciation of the elderly is important for successful ageing. The Family Matters! Singapore committee has stepped up its public education programme to a year round effort to promote positive mindset towards older Singaporeans and strengthen intergenerational bonds. The programme also inculcates a culture of personal responsibility and life-long planning for old age. In addition, the Ministry of Education (MOE) had incorporated messages on ageing and the aged in the instructional packages for some subjects. To provide students with experiential learning opportunities, many schools have also leveraged on the Community Involvement Programme, Co-Curricular Activities and Learning Journeys, to engage students in meaningful activities with the elderly.

Professional development and support of services for the elderly

33 To meet the high standards of professionalism and accountability by the public, the Ministry of Community Development and Sports (MCDS) together with National Council of Social Service (NCSS[3]) have set up a Programme Evaluation System (PES) and Best Practice Guidelines (BPG) to assist Voluntary Welfare Organisations (VWOs) in the management of their organisation. MCDS and NCSS have also set up the Social Service Training Institute to train the leadership at VWOs on board governance and management skills. The institute also provides training for professional development of personnel in the sector to raise the level of service and care provided to clients.

Curriculum development, manpower planning and financing

34 In order to develop manpower capability to support the range of programmes and services to the elderly, the Eldercare Masterplan has made provisions that the quality and professionalism of these services keep pace with the increasing expectations of Singaporeans. To this end, the eldercare service providers are trained to deliver quality services to the elderly and their family members. Efforts have been made to improve the public image of the eldercare services sector to reflect professionalism, progressiveness and dynamism.

[3] For more information on NCSS, log on to http://www.ncss.org.sg

Strategies for Upgrading the Community-based Eldercare Services Sector

35 The Elderly Development Division in MCDS is looking at manpower development strategies to upgrade and professionalise the eldercare sector. The key development milestones in manpower development are to develop a training roadmap with relevant competencies and appropriate courses and to bring the training framework under the National Skills Recognition System.

36 Based on the data gathered from a training needs analysis survey we conducted in 2001, MCDS developed a training roadmap for all eldercare programmes/services. The roadmap spells out the key competencies required of staff working in our facilities at various levels (centre managers, programme coordinators/therapy aides, drivers/cooks/home-helpers).

37 MCDS is then working with various training providers to develop the needed training in the specified areas for the different levels of personnel within the agecare sector.

38 Currently, there is a disparity in the standards of care and service in the community based eldercare facilities. In order to upgrade the sector, MCDS will bring our training framework under the ambit of the National Skills Recognition System (NSRS). The NSRS is national framework that was spearheaded in the eldercare services sector in August 2003 to develop, update and review work skills and standards. The initiative is targeted towards training and certifying the 450 eldercare services staff within the next 3 years.

Workforce Size and Make-up

39 The 282 Voluntary Welfare Organisations in the social service sector employ a total of 5,159 personnel, an increase of 5% from 2003 (4,896 personnel). The Self Help Groups, Community Development Councils and People's Association employ another 2,177 personnel. Childcare services and student care centres employ 5,617 personnel. This puts the total workforce size in the social service and community sector at 12,953 personnel, a decrease of 4% over 2003 (See Table 8).

Table 8: Number of Organisations in the Community and Social Service Sector

Type of Organisation	**No. of Organisations**	**Manpower Strength**
Family, Children and Youth Services (Inclusive of Childcare and Student Care Services)	216	7,102
Elderly Services	105	1,832
Disabled Services	60	1,842
Self-help Groups, CDCs & PA	11	2,177
TOTAL	**392**	**12,953**

Source : MCDS Survey 2004

40 23% of the workforce in the social service sector comprises foreigners; a 3% drop from the previous year. The bulk of the foreigners are employed as healthcare attendants and nursing aides/assistants in the welfare service sector and age care sector. They make up 56% and 48% of the respective sector's workforce. 14% each of the disability sector's and children's sector workforce is made up of foreign workers. The family services sector has the lowest number of foreign workers at 3%.

Professional Qualifications and Training Providers

41 The professional qualifications required for the different types of personnel and the respective training providers are indicated in Annex B. The national training providers include National University of Singapore (Social Work and Psychology training), National Institute of Education (Special Education Teachers training), Nanyang Polytechnic (Therapists, Nurses and Programme Support Staff training), Ngee Ann Polytechnic (Child Care Teachers training) and Institute of Technical Education (Nurses, Nursing Aides/ Attendants, Healthcare Attendants training). The public schools also provide personnel who only require general qualifications to work in the sector such as the Primary School Leaving Certificate, General Certificate of Education (Normal level (N), Ordinary Level (O) and Advanced Level (A) For specialised skills required by counsellors and child care teachers, the training providers are accredited private training providers.

Annual Intake Numbers for National Training Providers

42 The National University of Singapore (NUS) takes in a cohort of about 120 students for Social Work and Psychology training. Nanyang Polytechnic takes in a cohort of 800 students for nursing and 30-40 students each for the Diploma in Community Services (to train programme support staff), Diploma in Physiotherapy and Diploma in Occupational Therapy. Ngee Ann Polytechnic takes in a cohort of 30 students for Early Childhood Education (to train childcare teachers). The Institute of Technical Education (ITE) takes in a cohort of about 400 to be trained as Nurses (lower level of nursing qualification as compared to the diploma cohort of nurses from the polytechnics). NUS, the two polytechnics and ITE provide a total of 1,600 personnel for employment in the health, community and social services annually.

43 The national training providers such as the National University of Singapore and the Institute of Technical Education also permit matured students who would like to upgrade themselves with proper qualification in areas such as Social Work, and Nursing training on a part-time basis. The Post-Graduate Diploma in Social Work at NUS has an annual intake of 30 students. The nursing training on the other hand from ITE has an annual intake of 200 students. The part-time programs supplement the personnel available for employment in the health, community and social service by an additional 230 people.

Professional Health and Welfare Support for Adults, Elderly & Disabled with the Increase of Chronic & Degenerative Diseases and Conditions

44 The Ministry of Health places great emphasis on health promotion & preventive health services as key strategies to reduce illness and improve the health of Singaporeans. Among adults and the elderly, chronic non-communicable diseases such as coronary heart disease, stroke and cancer are the main causes of morbidity and mortality. Behavioural risk factors such as a sedentary lifestyle, unhealthy diets, obesity, smoking and stress have been linked to these diseases are modifiable, and can be reduced through the adoption of healthy lifestyle practices. In Singapore, the National Healthy Lifestyle Programme which started in 1992, encourages healthy living among Singaporeans by creating a supportive social and physical environment and fostering community participation in these efforts.

45 As chronic non-communicable diseases arises from long standing exposure to risk factors which may start from young, health promotion programmes have targeted the entire range of the population:

- the young (e.g. the Trim and Fit Programme in Schools),
- the working adult (e.g. the Workplace Health Promotion Programme), and
- the community at large (e.g. nutrition programmes like the Nutrition Labeling Programme, & National Smoking Control Programme)

46 Apart from primary prevention measures, secondary prevention measures like health screening have also been introduced. The Check Your Health programme is a community health screening programme to screen Singaporeans aged 50 years and older for diabetes, hypertension and hyperlipidaemia.

47 Most older Singaporeans are healthy and they should be encouraged to continue to contribute and remain active in the society. We need to tap on this pool of talent, knowledge and experience to meet our manpower needs and economic development. However, given the fast-changing economy, some of the skills of the current cohort of older workers have become less relevant or obsolete before their productive years are over. It has become important to address the issues of lifelong training as a means of sustaining employability and long-term financial security. In 2001, the Ministry of Manpower (MOM) launched the **People-for-Jobs Traineeship Programme** to help older job seekers who are prepared to switch their careers to a different sector. The programme provides financial support to companies that put in place traineeship arrangements aimed at helping older workers to better prepare themselves to take on new job requirements.

48 Should the elderly become disabled, there are schemes to assist. IDAPE is a government assistance scheme to provide financial help to needy Singapore citizens who become disabled and need to some cash to cope with their care expenses. IDAPE is for Singapore citizens who are not eligible for ElderShield because of their age or pre-existing disabilities.

Engaging the Elderly as Manpower

49 In lieu of economic restructuring, an ageing population and the demand for more personnel, the Ministry of Community Development and Sports (MCDS) is now tapping on mid-career entrants (those who have been retrenched due to structural unemployment or those embarking on a second career) as a potential source of manpower. The Ministry together with the Ministry of Manpower (MOM) and National Council of Social Service has introduced two schemes to assist mid-career entrants to be trained for the sector. The Strategic Manpower Conversion Programme (SMCP[4]) permits the training of social workers and social work assistants while the Training for Employment in Social Services (TESS[5]) permits the training of Healthcare Attendants, Nursing Aides/assistants, Therapy Aides, Home Care Workers and Welfare Officers. Both schemes offer course fee subsidy to reskill the worker and TESS offers wage subsidy to the employer hiring mid-career entrants. This is to encourage employers to hire mid-career entrants and to encourage Singaporeans to take up jobs that were predominantly held by foreign workers. There are also scholarships to encourage both youth and mid-career entrants to take up professional qualifications that are required in the sector (See Annex C for a list of scholarships).

50 In addition, the Workforce Development Agency (WDA) provides training subsidies for retrenched or unemployed workers who participate in the **Skills Training and Employability Enhancement for the Retrenched and unemployed workers programme (STEER)**. STEER is an extension of the Skills Redevelopment Programme (SRP) for retrenched and unemployed workers, and links full-time SRP training to job placement.

Conclusion

51 The ageing society is a social phenomenon that requires the combined efforts of the local government and non-government agencies to manage. Through inter-ministry collaboration and partnerships with the community services, the elderly person and their families will receive the necessary support to remain healthy and active within the community. The network of healthcare and social services provides a safety-net for elderly who require additional support and services to grow old with dignity.

Prepared By: Ministry of Community Development and Sports, and Ministry of Health

[4] For more information on SMCP, log on to http://www.ncss.org.sg

[5] For more information on TESS, log on to http://www.ncss.org.sg

Annex A

ELDERCARE PROGRAMMES & SERVICES

Programmes and services
Eldercare Masterplan Desired Outcome: Strong network of quality services and ample engagement opportunities for the elderly hat enable them to continue to live within and contribute to the community
Programmes for Well Elderly
PA Retirees' Club and Senior Citizens' Club Organise recreational programmes, health screening, keep-fit programmes, sports activities, cultural activities, continuing education courses, talks and ad hoc events such as health screening and community service. The objective is to help senior citizens lead an active, healthy and meaningful life within the family and the community.
Mutual Help Scheme (MHS) Provides opportunities for mutual exchange of help and care among our seniors through structured and informal activities. This scheme is available at Senior Citizens' Clubs (SCCs) which are run by grassroots organisations. **Befriender Service** - Recruits and trains volunteers (including the healthy elderly) to befriend, advise and assist lonely senior citizens who are homebound or who have no family support. The main target group is the elderly who live on their own or with other elderly in one- or two- room HDB rental flats. The volunteers visit these elderly on a regular basis and help them in simple household chores and running of errands. Where possible, the volunteers also accompany these elderly persons for group outings or to participate in social and recreational activities.

Programmes and services

Seniors Activity Centres

- These are centres set up under the joint MCDS-HDB project to improve the living conditions of the elderly residing in one-room rental blocks. The selected rental blocks have a high concentration of elderly persons. HDB refurbishes the physical environment of the blocks, incorporating elder-friendly features such as retiling to non-slip tiles, modifying the lifts to stop at every floor, installing grab bars, replacing squat pan toilets with sitting types, and installing an Alert Alarm System which is activated by residents pulling the pull cords during emergency. MCDS works with voluntary welfare organisations to set up and manage the Seniors Activity Centres. The objective of the Seniors Activity Centres is to provide a support network for the elderly residents. The services provided include maintaining a register of elderly persons, managing the alert alarm system, forming mutual help groups, providing information and referral services and promoting social interaction

Neighbourhood Links

- these are physical nodes in the community where the elderly can obtain information on social services, volunteer their services, , interact and form mutual help groups.
- Provide a broad array of programmes to promote inter-generational interaction.

Active Seniors Programme

- creates more avenues to tap senior citizens' talents and experiences. The objective is to develop an active senior volunteer movement in Singapore.

Programmes for Frail Elderly

Day Care Centres for Senior Citizens

provide day care services to those frail elderly who require supervision when their family members need to attend to other engagements such as work or school. The centres provide meals, self-care maintenance programmes, social and recreational activities.

Home Help Service

- supports the frail elderly in their own homes by providing meal delivery, laundry service, help in personal care hygiene, transport and escort service to hospitals/clinics.

Counselling Service (Islandwide service run by SAGE Counselling Centre)

- is an avenue for elderly persons to settle their personal and family problems and disputes

- provides face to face counselling on family relationships, psychological and emotional problems, as well as information and referral assistance to the elderly and their caregivers. Its telephone counselling is operated by older volunteers trained in para-counselling.

Programmes and services
<u>Community Case Management Service</u> - serves to co-ordinate the provision of a range of services to meet the multiple and complex needs of an elderly without the need for him/ her to go to different service providers for consultation.

Annex B

Professional Qualifications for Personnel and Training Providers

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
1	**Social Worker**	Bachelor of Arts (Social Work)	National University of Singapore(NUS)	3 years	GCE 'A' level
		Graduate Diploma in Social Work	National University of Singapore (NUS)	**Full-time** Min:12mths Max 24 mths.	**a)** A Bachelor's degree in Social Work or related field; or **b)** A Bachelor's degree and at least 1 year of working experience in the social services; or **c)** Such other qualifications and experience as the Senate may approve.
				Part-time Min: 18 mths Max: 36 mths	
2	**Social Work Assistant**	Specialist Diploma in Human Services	Singapore Institute of Management (SIM)	12 months (part-time)	**a)** Min 5 GCE 'O' level credits including English Language as a first language with at least 2 years' work experience. **b)** Applicants with other qualifications and relevant work experience will be considered on a case-by-case basis.

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
3	**Counsellor**	**1)** Diploma in Counselling Skills	Academy of Human Development Pte Ltd	**1)** 18 months (part-time) Classroom Teachings: 240 hours Supervised Practicum: 300 hours	**1)** Min 5 GCE 'O' level credits including English Language as a first language
		2) Masters in Social Science (Counselling)	Counselling & Care Centre	**2)** 2 years Classroom Teachings: 450 hours Supervised Practicum: 320 hours	**2)** A Bachelor's degree from a recognised institution with 3 years relevant working experience
		3) Diploma in Counselling Practice		**3)** 1 year Classroom Teachings: 133 hours Supervised Practicum: 167 hours	**3a)** A Diploma or Bachelor's degree in one of the helping related disciplines. **b)** Applicants currently involved in counselling work but without the specified qualifications in a non helping-related field may also apply.

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
4	**Psychologist**	Degree in Psychology	National University of Singapore (NUS)	3 years	GCE 'A' level
			Singapore Institute of Management (SIM)	3 years (part-time)	**a)** At least 2 GCE 'A' levels (or its equivalent) OR **b)** A diploma from SIM, polytechnics, EDB training institutes, Singapore Institute of Labour Studies, National Institute of Education and PSB corporation **c)** At least 2 years' work experience **d)** At least 21 years old

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
5	**Physiotherapist**	Diploma in Physiotherapy	Nanyang Polytechnic (NYP)	3 years	GCE 'A' level **a)** General Paper at 'AO' level Gr 1-6 or English (EL1) at 'O' level Gr 1-7; **b)** A Science subject at 'A' level Gr A-E **c)** Mathematics at 'A' level Gr A-E (or any other 'A' level subject Gr A-E, plus 'O' level Mathematics Gr 1-6)
6	**Occupational Therapist**	Diploma in Occupational Therapy	Nanyang Polytechnic (NYP)	3 years	GCE 'A' level **a)** General Paper at 'AO' level Gr 1-6 or English (EL1) at 'O' level Gr 1-7; **b)** A Science subject at 'A' level Gr A-E **c)** Mathematics at 'A' level Gr A-E (or any other 'A' level subject Gr A-E, plus 'O' level Mathematics Gr 1-6)

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
7	**Speech Therapist**	Degree in Speech Pathology	Courses available in universities overseas	4 years	
8	**Special Education Teacher**	Diploma in Special Education (DISE)	National Institute of Education (NIE)	2 years (part-time)	**a)** At least 2 'A' level and 2 'AO' level passes including a pass in General Paper obtained at the GCE 'A' Level (English) Singapore-Cambridge Examination; **b)** Have at least 3 months teaching experience in a special school setting; and **c)** Be employed full-time by a voluntary welfare organisation in a special school setting.

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
9	**Home Care Worker/ Healthcare Attendant/ Nursing Aide**	Certificate in Human Services	**1)** Nanyang Polytechnic	**1)** 60 hours of classroom teaching and supervised practicum	**1)** Personnel working with frail older persons in Day Care Centres for Senior Citizens, Sheltered Homes, Befrienders Service, Home Help Service Counselling Centre etc
10	**Health Care Attendant/ Nursing Aide**	ITE Skills Certificate (Home Care)	ITE, Dept of Health Sciences	6 months for those with a nursing cert from their country) 1 year for those with no nursing cert. One year working experience in the home Theory: 120 hours Practicum: 880 hours (for those with a foreign nursing cert) Practicum: 1760 hrs (with no nursing cert and for health attendants)	Foreign nursing aides working in nursing homes for the aged Healthcare attendants working in nursing homes for the aged Participants must have at least Sec 2 and able to write and speak English

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
11	**House Parents/ Welfare Officers (Children's Homes)**	Certificate in Rehabilitation and Residential Care	Social Service Training Institute (SSTI)	Classroom Teaching: 100 hours Supervised Practicum: 200 hours	Welfare officers, house parents and other care personnel employed under social service agencies
12	**Therapy Aides**	Certificate in Basic Therapy Aide	Ren-Ci Hospital and Medicare Centre	Classroom Teaching: 63 hours Tutorial: 10 hours Practicum: 50 hours (Including attachment to centres)	**1)** Caregivers, personnel employed under social and health agencies and individuals who are preparing to take on the responsibilities of a therapy aide **2)** Mature Students with previous work experience, and with Secondary 2 qualification. **3)** Fresh school leavers with 'N' level.

	Positions	Course name	Educational Institution	Course Duration	Entry Requirements
13	**Student Care Centres Teachers**	Certificate in Children Services (Out of School Hours Programme)	Family Resource & Training Centre	Approx. 7 months part time Total 180 hours including 20 hours of practicum	Min 5 GCE 'O' level credits including English Language as a first language or at least three years of relevant experience.

Annex C

SCHOLARSHIPS

Organisation	Title of Scholarship	Course/Disciplines	Universities/Institutions	Value	Requirements
Ministry of Health	Overseas Specialist Awards (Paramedical)	Diagnostic Radiography, Dietetics, Nursing, Occupational Therapy, Physiotherapy, Podiatry, Prosthetics/Orthotics, Speech Therapy	Overseas universities with relevant programmes, eg. UK, Australian Universities	Full scholarship allowance, return airfare, tuition fees, compulsory fees, maintenance allowance, warm clothing allowance, baggage and clinical placement allowances	Citizenship Requirements Singapore Citizen or Singapore Permanent Resident Academic Requirements GCE 'A' level science students with good GCE 'O' and 'A' level results No 'S' papers required. Top Polytechnic graduates in the relevant disciplines Other Requirements Posses good co-curricular (CCA) record
National Healthcare Group & SingHealth	Health Science Scholarship	Occupational Therapy, Physiotherapy, Radiation Therapy, Diagnostic Radiography, Nursing	For all Health Science courses, except Nursing: First 3 years in Nanyang Polytechnic & final year in University of Sydney For Nursing course: First 3 years in Nanyang Polytechnic & final year in La Trobe University	Allowance for the first 3 years are $900, $950 and $1,000 respectively. Full scholarship allowance, return airfare, tuition fees, compulsory fees, maintenance allowance, warm clothing allowance, baggage and clinical placement allowances.	Citizenship Requirements Singapore Citizen or Singapore Permanent Resident Academic Requirements GCE 'A' level science students with good GCE 'O' and 'A' level results No 'S' papers required. Other Requirements Posses good co-curricular (CCA) record
National Healthcare Group, SingHealth, Community Hospitals & Parkway Group Healthcare (PGH)	Nursing Bursary	Nursing	Nanyang Polytechnic (NYP)	For those with GCE 'O' level, a monthly allowance of $850 in the 1st year, $900 in the 2nd year and $950 in the 3rd year. For those with GCE 'A' level, a monthly allowance of $900 in the 1st year, $950 in the 2nd year and $1,000 in the 3rd year.	Good GCE 'O' or 'A' level results
National Healthcare Group & SingHealth	Allied Health Bursary	Occupational Therapy, Physiotherapy, Diagnostic Radiography, Radiation Therapy	NYP	A monthly allowance of $900. $950 and $1,000 in the lst , 2nd and 3rd year respectively.	Good GCE 'A' level results

Organisation	Title of Scholarship	Course/Disciplines	Universities/Institutions	Value	Requirements
National Healthcare Grou SingHealth, Community Hospitals & Parkway Group Healthcare (PGH)	Nursing Bursary	Enrolled Nursing	Institute of Technical Education (ITE)	For those with GCE 'N' level, a monthly allowance of $670 in the 1st year, $700 in the 2nd year. For those with GCE 'O' level, a monthly allowance of $700 in the 1st year and $730 in the 2nd year	Good GCE 'N' or 'O' level results
Parkway Group Healthcare (PGH)	Overseas Scholarships	Nursing (Specialised modules), Physiotherapy, Speech Therapy, Diagnostic Radiography	Universities with relevant programmes	Full scholarship allowance, return airfare, tuition fees, compulsory fees, maintenance allowance, warm clothing allowance, baggage and clinical placement allowances	Academic Requirements GCE 'A' level science students with good GCE 'O' and 'A' level results Top NYP students. Other Requirements Posses good co-curricular (CCA) record