IMPLEMENTING A NATIONAL ADVANCE CARE PLANNING (ACP) PROGRAMME IN SINGAPORE

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Background Since its inception in 2011, ACP has steadily gained traction among healthcare providers in rapidly ageing Singapore. Efforts to implement ACP, beginning with public hospitals, are spearheaded by a National ACP Steering Committee, in collaboration with service providers and government agencies. However public awareness remains low. This poster examines the key thrusts, outcomes, and challenges in assimilating ACP in our system of care.

Aim To share Singapore's experience in implementing ACP nationally, with considerations such as its diverse cultural and ethnic composition, family structures that tend to place familial harmony over autonomy, and lack of communication on end of life matters.

Methods ACP is implemented along 3 thrusts: (i) Increasing ACP awareness among healthcare professionals, community and religious leaders, and the public; (ii) Training more ACP facilitators in health and social care organisations to assist with ACP conversations; and (iii) Building and strengthening systems to support ACP implementation, including a national ACP IT system.

Results Over 450 facilitators have been trained. Pilots are on-going in five public hospitals, in departments such as Palliative Medicine, Cardiology, Oncology and Respiratory Medicine.

Discussion With plans to improve health and social support for aged persons in the community, greater emphasis must be placed on developing ACP services among providers of intermediate and long-term care. Community engagement, media advocacy and publicity also need to be in place to raise awareness and normalise conversations in care planning.

Conclusion In tandem with the growth of ACP at acute and community settings, greater engagement and empowerment of providers and the public must also happen.