



REORGANISATION OF HEALTHCARE SYSTEM INTO THREE INTEGRATED CLUSTERS TO BETTER MEET FUTURE HEALTHCARE NEEDS

*Primary care system integrated in each cluster,
for more patient-centric care deeper into community*

The Ministry of Health (MOH) will reorganise the public healthcare system into three integrated clusters to better meet Singaporeans' future healthcare needs.

2 The three integrated clusters formed will be as follows. The list of the institutions within each cluster can be found in [Annex A](#).

- **Central region** – National Healthcare Group (NHG) and Alexandra Health System (AHS) will be merged.
- **Eastern region** – Singapore Health Services (SingHealth) and Eastern Health Alliance (EHA) will be merged.
- **Western region** – National University Health System (NUHS) and Jurong Health Services (JurongHealth) will be merged.

3 The polyclinics will also be reorganised, in line with the three new clusters. The National University Polyclinics group will be formed under NUHS, joining SingHealth Polyclinics and NHG Polyclinics as Singapore's third polyclinic group.

4 The integrated clusters will each be headed by a Group Chief Executive Officer (CEO), namely Prof Philip Choo (Group CEO, NHG); Prof Ivy Ng (Group CEO, SingHealth); and Prof John Wong Eu Li (Group CEO, NUHS). Dr Lew Yii Jen (currently Senior Director, Clinical Services, NHG Polyclinics) will be the CEO for the new National University Polyclinics.

5 Our public healthcare system is currently organised into six regional health systems - Alexandra Health System, Eastern Health Alliance, Jurong Health Services, National Healthcare Group, National University Health System and Singapore Health Services. They operate a range of healthcare institutions, and build partnerships among healthcare providers in their respective region, including acute and community hospitals, primary care providers, nursing homes and other long term care providers. Over time, each of them has developed unique strengths, in areas such as health promotion, primary care networks, clinical capabilities, education and research, and community partnerships.



6 While the system has served us well, we have to transform our healthcare system and delivery to be future ready. Our future healthcare needs will grow in volume and complexity due to our ageing population and increased chronic disease burden. The implementation of the Healthcare 2020 Masterplan, to expand capacity, improve quality and enhance affordability of healthcare, is in progress. Last year, the Ministry of Health further outlined three key shifts in our healthcare system beyond 2020: from Hospital to Community, from Quality to Value and from Healthcare to Health. This reorganisation will put us in a better position to carry out the necessary changes and shifts within our clusters and across the healthcare system more swiftly and decisively.

7 Each new integrated cluster will have a fuller range of facilities, capabilities, services and networks across different care settings. They will be able to draw from the combined strengths and talents of their two original clusters to deliver more comprehensive and person-centred health promotion, disease prevention, curative and rehabilitative care for the population in their respective regions. MOH will also work with them to ensure cross-cluster information flow and coordinated services so that together, we can serve as one public healthcare system for Singaporeans.

8 Primary care, offered by polyclinics and General Practitioners, plays an increasingly critical role in the provision of patient-centred care in the community. With the reorganisation, each cluster will bring together the capabilities of their polyclinics and partnering General Practitioners as well as community service providers to drive primary care transformation and anchor care in the community as a collective force.

9 The reorganisation will enable our public healthcare institutions to deploy their resources and capabilities more efficiently. They will also be able to offer employees a wider and deeper range of professional development opportunities, and a broader platform for cross-learning that will benefit staff and our patients. This will in turn build a stronger healthcare workforce to serve Singaporeans. The needs in the healthcare sector are expanding, and all our public healthcare employees will continue to play important roles with the reorganisation.

10 The reorganisation is expected to be completed by early 2018. Patients will not need to make any changes, and can continue with their existing healthcare arrangements and appointments.

Quotes

“Over the last few years, MOH has significantly improved the accessibility, affordability and quality of healthcare in Singapore under our Healthcare 2020 Masterplan. Nevertheless, we cannot afford to stay still as there remain many challenges ahead, such as our ageing population, increased chronic disease burden and the need to manage future growth in healthcare manpower and spending. This reorganisation of the public healthcare clusters will enable us to meet our future healthcare challenges. I am confident that we will be able to better optimise resources and capabilities, and provide more comprehensive and patient-centred care to meet Singaporeans’ evolving needs.”

-- Mr Gan Kim Yong, Minister for Health



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“I am confident that this reorganisation will provide more integrated care for patients, care providers and the community. There will also be more primary care networks and health promotion, wider career development opportunities for staff, cross-learning and dialogue across institutions and clusters, more knowledge sharing of new innovations, best practices, research and education. As with any reorganisation, change can understandably be uncomfortable and unsettling for some. That said, I strongly believe our patients will benefit, so will most of us, as we are served by a public healthcare system which cares enough to constantly revitalise itself to meet the healthcare needs of our population, now and in the future.”

-- Prof Philip Choo, Group CEO, National Healthcare Group (NHG)

“This reorganisation allows long standing partners in the western part of Singapore to come together as a fully integrated team to provide seamless care from prevention to home care, and with our academic institutions, to continue to develop solutions for Singapore’s healthcare challenges, and nurture the next generation of healthcare professionals.”

-- Prof John Wong Eu Li, Group CEO, National University Health System (NUHS)

“This merger of SingHealth and EHA will be beneficial for patients. SingHealth will benefit from the strengths of CGH and EHA. They are pioneers in developing the regional health system (RHS) for residents in the East - building strong partnerships with nearby healthcare providers and the community. The merger will facilitate the sharing of best practices across all our institutions. CGH's leadership in disciplines like Geriatrics, Sports Medicine, Emergency Medicine and others will complement SingHealth's range of clinical services. Our Geylang and Queenstown Polyclinics have contributed much to how primary care has evolved in SingHealth's continuum of care. They are in good stead to bring value to their new clusters in transforming the primary care landscape. These changes in SingHealth and EHA augur well for our patients and Singaporeans.”

-- Prof Ivy Ng, Group CEO, SingHealth

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List of Institutions¹

	<u>Central:</u> <u>NHG and AHS</u>	<u>Eastern:</u> <u>SingHealth and</u> <u>EHA</u>	<u>Western:</u> <u>NUHS and JHS</u>
Acute Hospitals	<ul style="list-style-type: none"> • Khoo Teck Puat Hospital • Tan Tock Seng Hospital • <i>Woodlands General Hospital (name tbc)</i> 	<ul style="list-style-type: none"> • Changi General Hospital • Singapore General Hospital • <i>Sengkang General Hospital</i> 	<ul style="list-style-type: none"> • National University Hospital • Ng Teng Fong General Hospital
Community Hospitals	<ul style="list-style-type: none"> • Yishun Community Hospital • <i>Woodlands Community Hospital (name tbc)</i> 	<ul style="list-style-type: none"> • Bright Vision Community Hospital • <i>Outram Community Hospital</i> • <i>Sengkang Community Hospital</i> 	<ul style="list-style-type: none"> • Jurong Community Hospital
Primary Care	<ul style="list-style-type: none"> • Ang Mo Kio Polyclinic • Geylang Polyclinic • Hougang Polyclinic • Toa Payoh Polyclinic • Woodlands Polyclinic • Yishun Polyclinic • <i>Sembawang Primary Care Centre</i> 	<ul style="list-style-type: none"> • Bedok Polyclinic • Bukit Merah Polyclinic • Marine Parade Polyclinic • Outram Polyclinic • Pasir Ris Polyclinic • Sengkang Polyclinic • Tampines Polyclinic • <i>Eunos Polyclinic</i> • <i>Punggol Polyclinic</i> 	<ul style="list-style-type: none"> • Bukit Batok Polyclinic • Choa Chu Kang Polyclinic • Clementi Polyclinic • Jurong Polyclinic • Queenstown Polyclinic • <i>Bukit Panjang Polyclinic</i> • <i>Pioneer Polyclinic</i>

(Upcoming developments in italics)

¹ Note: National Specialty Centres and specialised hospitals (i.e. Institute of Mental Health, KK Women's and Children's Hospital) will remain with their existing clusters