Evolution, Revolution, Devolution and Volution of Singapore’s Healthcare System

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Over the years, Singapore’s healthcare system has evolved from the British colonial welfare healthcare system in the 1900s to today’s current Regional Healthcare Systems (RHS) and an upcoming reform into 3 clusters.

The revolution of healthcare was evident after Singapore gained independence in 1965. It moved from a welfare, centralized healthcare system comprising of only one General Hospital to a decentralized network of 26 satellite hospitals/clinics whose main aim was to provide basic healthcare for its people and also eliminate infectious diseases like smallpox and measles. The move away from welfare state was to shift the costs of healthcare burden from the government to the people.

In 2000, evolution of Singapore’s healthcare system began. Public healthcare institutions were organised into 2 healthcare clusters which further evolved into 6 regional healthcare clusters. The purpose of restructuring the healthcare system into Regional Healthcare Systems (RHS) was to cater to the people’s needs in a more localised manner, enhance and strengthen integrated care across the care continuum in view of the challenges posed by increasing demands of healthcare needed by the greying population. The RHS framework comprised of general practitioners (GPs) restructured hospitals (RHs), community hospitals (CHs), nursing homes (NHs) and home care providers within each region.

The process of restructuring the hospitals also sees a devolution of power from the government to the hospital, giving them autonomy to make decisions. The purpose of this is to ensure high standards and quality of care by competing against each other in a free market setting.

In 2017, the government decided that a 3-cluster healthcare system (Volution of healthcare) would better optimise resources and capabilities to provide more comprehensive and patient-centered care to meet Singaporeans’ evolving needs.

The convolution of Singapore healthcare’s system is responsive and adaptive to the changing needs of the population. Singapore’s healthcare system has been changing to better cater to the needs of the population. From providing basic healthcare in the 1960s to providing better integrated care to meet the needs of the ageing population and increased chronic burden.
through the 2-cluster system then the 6 RHS to better localised healthcare within the regions and to the upcoming 3-cluster healthcare system to better optimise and focus our resources to inch closer to our aim of providing accessible, affordable and quality health care.

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