

LAUNCH OF THE COMMUNITY FOR SUCCESSFUL AGEING
AT WHAMPOA

IT TAKES A KAMPONG: THE BLUEPRINT FOR *ComSA*

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THE VISION



ComSA@Whampoa Community for Successful Ageing

Optimise opportunities in longevity through:

- Creating Integrated, Sustainable Care Systems for an Age-Friendly Community
- Promoting Healthy Ageing in the Community

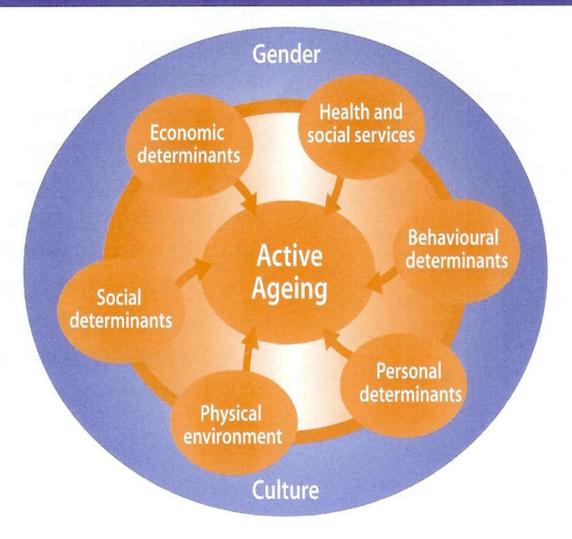
TO AGE IN PLACE... TO AGE IN THE COMMUNITY

Our Founding Vision

- Age in one's own home
- Be surrounded by loved ones
- Remain master of one's destiny
- Have access to affordable, quality care



Figure 8. The determinants of Active Ageing



Four Pillars:

- Health and Access to Care
- Participation
- Life-long Learning
- Income Security

Source:WHO

AGEING IN PLACE – SOME EXISTING MODELS

Naturally Occurring Retirement Communities CFAA, **Singapore**

The Village

Continuing Care Retirement **Communities**

Regional Health

Systems, Singapore

The Greenhouse

Homes



The Medical Neighbourhood

WHO Age Friendly **Cities**

Vermont SASH

THE PLACETO BE: AN INSPIRATION FOR COMSA

It is a place that enables people of all ages to actively participate in community activities. It is a place that treats everyone with respect, regardless of their age. It is a place that makes it easy to stay connected to those around you and those you love. It is a place that helps people stay healthy and active even at the oldest ages. And it is a place that helps those who can no longer look after themselves to live with dignity and enjoyment

Source: WHO: Age Friendly Cities

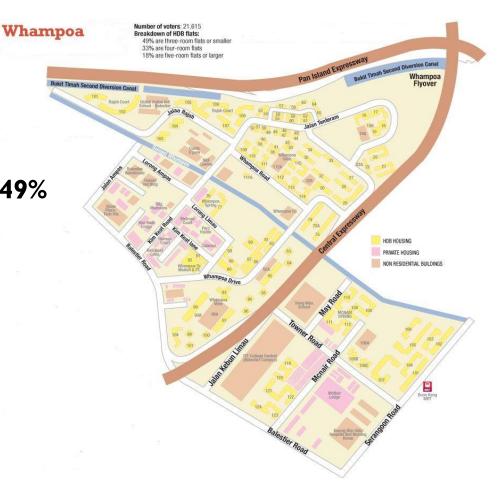
WHY WHAMPOA?

Number of residents older than 60 years = 5,500 (18% of total population)

Housing type:

HDB 3 room flats or smaller - 49% 4-room HDB flats - 33% 5-room flats and bigger - 18%

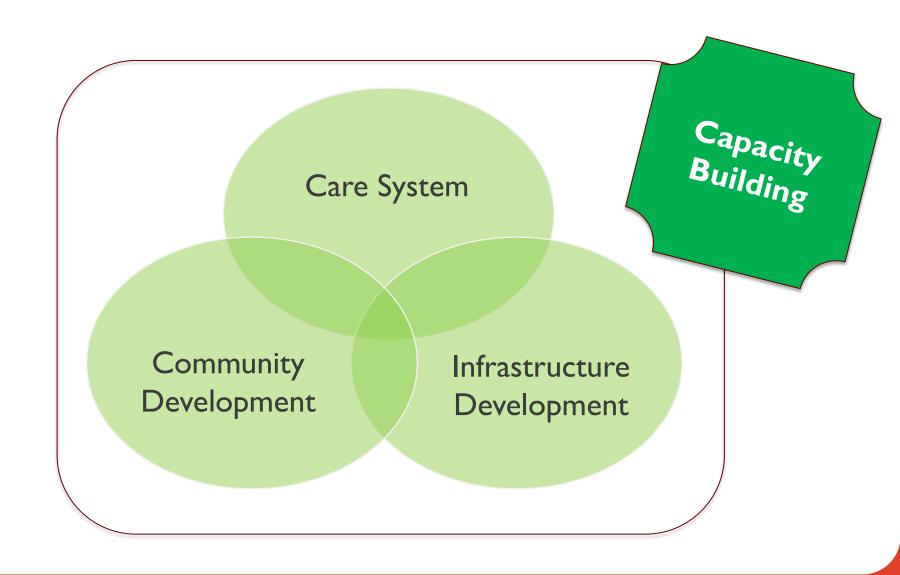
7 precincts





THE FORM

THE ComSA STRUCTURE



THE ComSA COMPONENTS

Housing and Transport

Infrastructure and neighbourhood

- Long-term care facilities in 'stealth'
- Person-centred universal design
- Food, shopping and recreation

ComSA

Care Management System

Patient-centred Medical Home (Primary Care) Risk-stratified Care Management Process

- Service Network
- VolunteerManagement
- Active Aging

Community Development

- Community stakeholders network
- Well elders engagement

Evaluation

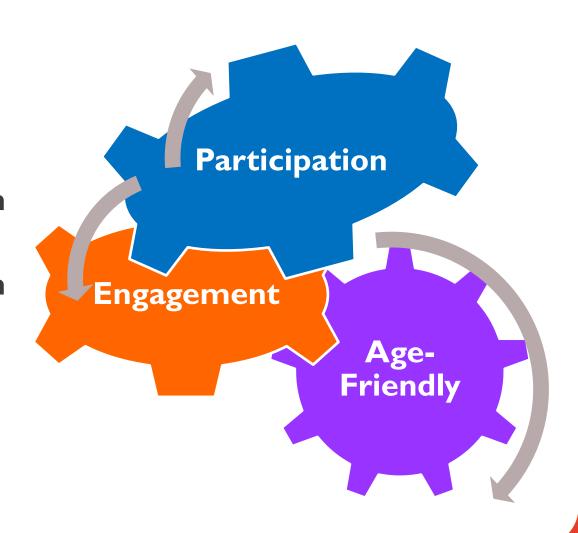
- Process
- Outcome

THE COMMUNITY-BASED CARE SYSTEM

- Community needs assessment
- Community risk screening and risk stratification algorithm
- Care management system catering for simple to complex care needs
- Para-care manager volunteer management system
- Advanced primary care model for complex, frail elders and their families working closely with care management – the 'Patient-Centred Medical Home'
- A service partners' network

COMMUNITY DEVELOPMENT

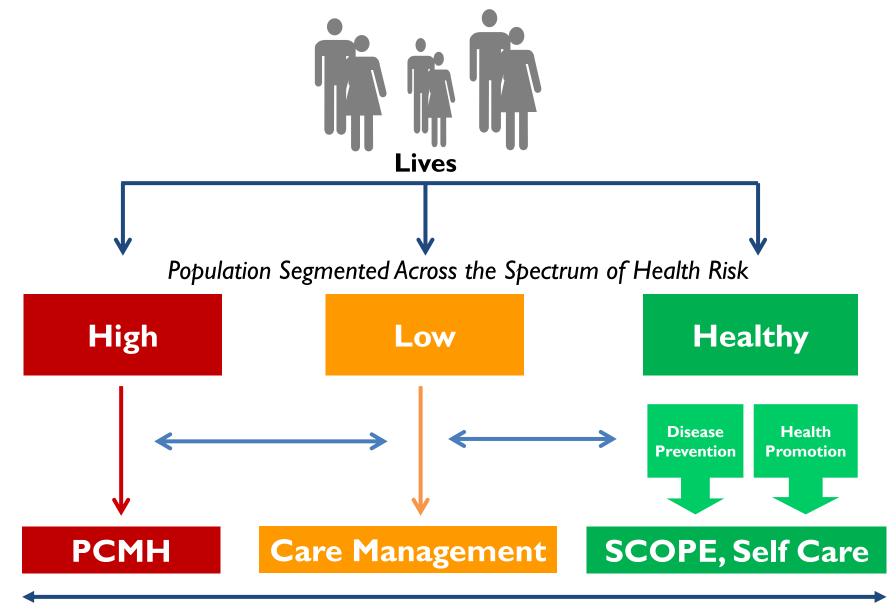
- Self Care and Wellness Interest Groups
- Community Health Champions
- Community Health Partners
- Community
 Outreach and
 Engagement





THE UNDERLYING PRINCIPLES

COMMUNITY WIDE, LIFE COURSE APPROACH TO WELLBEING

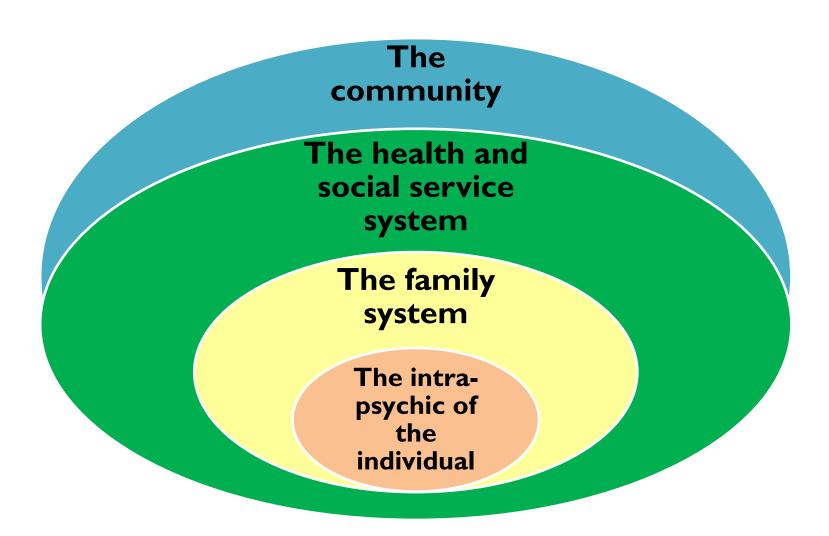


HEALTH AND PSYCHO-SOCIAL CARE

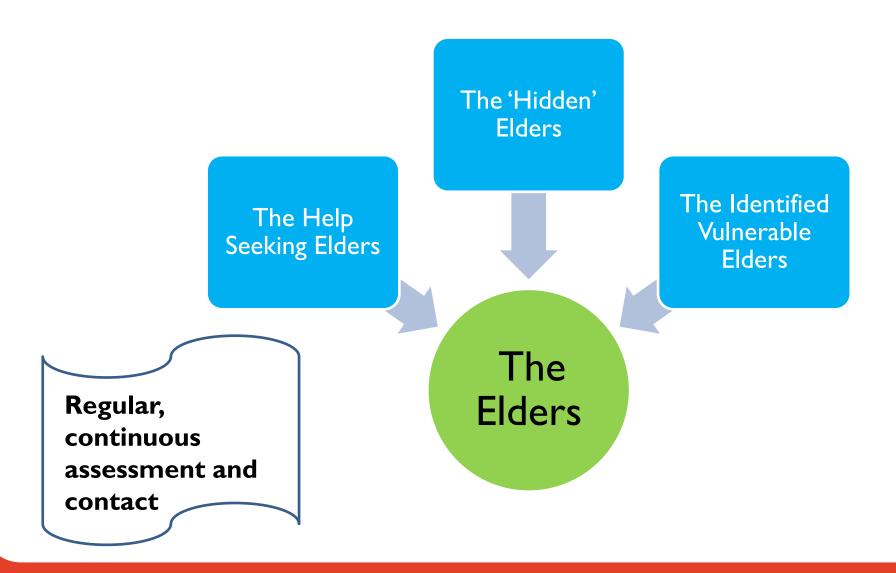
POPULATION-BASED HEALTH MANAGEMENT

Establishing Profiles and Needs **Population Based Health Management** Targeting the **Continuous Vulnerable Population Assessment**

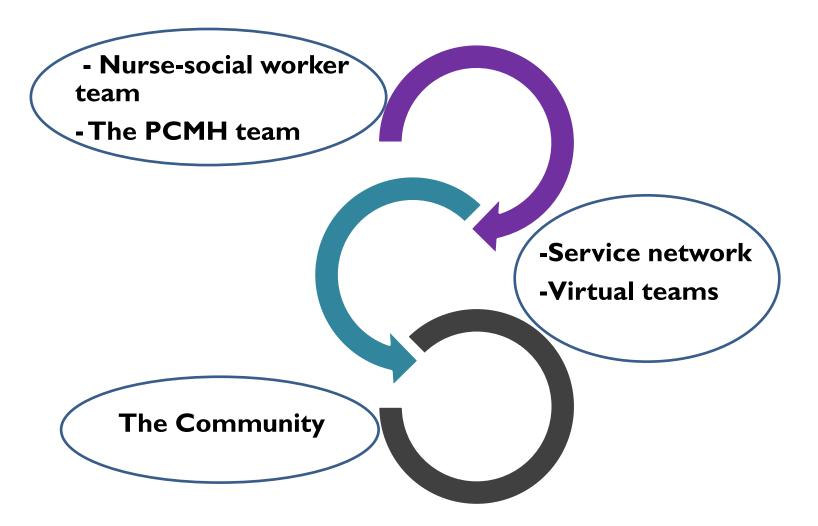
SYSTEMS INTERVENTIONS



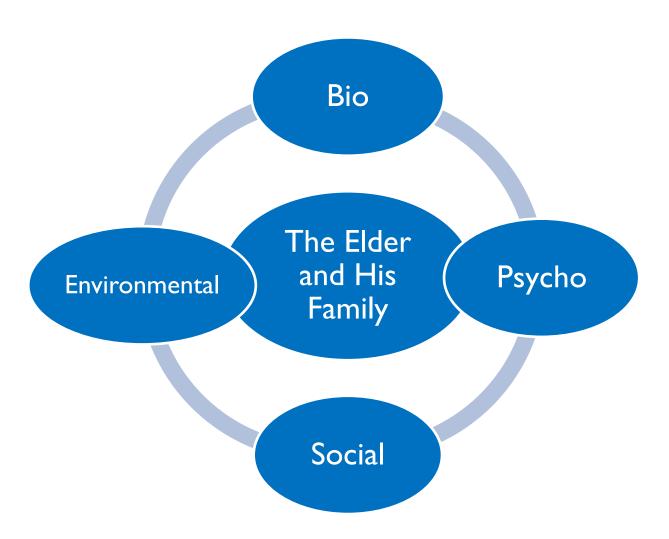
PREVENTIVE TO REMEDIAL



COLLABORATIVE AND TEAM-MANAGED



HOLISTIC AND COMPREHENSIVE



SUSTAINABILITY

Use of volunteers, virtual teams and community

'Main-streamable' programmes

Scalable through training

EVIDENCE-BASED

Process Evaluation Impact Evaluation

PROGRESS TO DATE

- Completion of community survey in collaboration with CFAA@Whampoa
- A nurse-social worker led care management service
- Establishing the 'Patient-Centred Medical Home' for the most complex clients
- A volunteer para-care management service to support stable but vulnerable individuals
- Establishing health self-care groups for lowrisk individuals
- A service partners' network
- On-going validation of the risk screener

A SOCIETY OF LONGER LIVES?

"It is a great gift that we live much longer than in previous generations. But to fully enjoy our longer lives, we need to adapt the structure of the life course as well as its institutions."

Ursula M. Staudinger

http://wisdom.unu.edu/en/active-aging/



THANK YOU